



March 1, 2023

To: Chair Nosse, Vice Chairs Goodwin and Nelson, and Members of the House Committee on Behavioral Health

From: Emerson Hamlin, Political Organizer, Oregon Nurses Association

Re: Support for HB 2925 and HB 2918

Chair Nosse, Vice-Chairs Goodwin and Nelson, and members of the committee,

Thank you for the opportunity to submit testimony on behalf of the Oregon Nurses Association (ONA). ONA is a nurses union and professional association representing over 15,000 health care workers and providers, including registered nurses, advanced practice nurses, and allied health workers. Our members work in urban and rural hospitals, clinics, school-based health centers, home health, and county health departments across Oregon.

Our nurses see the impacts of racism and health inequities constantly. Community members of color consistently report lower access to health care and worse overall health. Here in Oregon, OHSU's Center for Health Systems Effectiveness found that 35 percent of women of color had no regular health care provider, compared with 18 percent of White women.<sup>1</sup> Other people of color report that they avoid seeking out medical care when needed, partly due to the lack of culturally and linguistically appropriate care. All of this results in worse health: Kaiser Family Foundation found that more Hispanic, Black, and American Indian/Alaskan Native adults described their health as poor in comparison to their White peers.<sup>2</sup>

ONA is deeply committed to supporting health equity work in Oregon. We were proud to support HR 6 (2021), which declared racism as a public health crisis. ONA continued our involvement by supporting HB 4052 (2022), which this body passed to take meaningful steps towards equity: the bill provided grants to operate two culturally and linguistically specific mobile health units, and convened a group of community members to make recommendations on culturally and linguistically specific intervention programs. The passage of these bills is a significant demonstration of Oregon's values, and show a commitment to ensuring that every Oregonian, regardless of race, ethnicity, or language spoken, can access health care.

Now, HB 2918 and HB 2925, two technical fix bills, must be passed to complete the work that the legislature began with the declaration of racism as a public health crisis. HB 2918 fully funds the two mobile health units, which only received partial funding last session; HB 2925 extends the staff support and extends the timeline for affinity groups. Without these bills, the state will

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<sup>1</sup> OHSU Center for Health Systems Effectiveness (2018). *Oregon's Effort to Reduce Health Disparities Shows Signs of Early Success* [Fact Sheet] [www.ohsu.edu/sites/default/files/2019-10/Brief\\_Disparities\\_FINAL.pdf](http://www.ohsu.edu/sites/default/files/2019-10/Brief_Disparities_FINAL.pdf)

<sup>2</sup> Kaiser Family Foundation (2022). *Key Facts on Health and Health Care by Race and Ethnicity*. <https://www.kff.org/report-section/key-facts-on-health-and-health-care-by-race-and-ethnicity-health-coverage-and-access-to-and-use-of-care/>



have lost meaningful progress towards better health outcomes, not only for community members of color, but for our whole state. ONA urges a yes vote on HB 2925 and HB 2918. Thank you.

Sincerely,

Emerson Hamlin

Political Organizer, Oregon Nurses Association