



May 7, 2013

Senator Monnes-Anderson, Chair  
Senator Kruse, Vice Chair  
Senate Health Care Committee  
Oregon Legislative Assembly

Re: HB 2134-2 Establishing Uniform Standards for Race, Ethnicity, and  
Language Data  
HB 2611 Cultural Competency

Dear Chair Monnes-Anderson, Vice-Chair Kruse, and Members of the Committee:

The Oregon Public Health Institute (OPHI) appreciates the opportunity to submit this letter in support of passage of HB 2134-2, Establishing Uniform Standards for Race, Ethnicity, and Language Data, and HB 2611, the Cultural Competency bill.

A member of the National Network of Public Health Institutes ([NNPHI](#)), OPHI is an independent, non-governmental, not-for-profit that leads Oregon's public health movement. OPHI is dedicated to improving tomorrow's health through education, policy and systems change today. We place cutting-edge research into the hands of policymakers and practitioners where it can do the most good.

OPHI believes that immediate action is needed to eliminate the shocking disparities in health outcomes between white residents of Oregon and residents who are African-American, Latino, Native American, and Asian American. All Oregonians must have equal opportunity for a healthy, long life. Currently, people of color in our state suffer from disproportionately high rates of such chronic diseases as Type 2 diabetes, heart disease, high blood pressure, stroke, and asthma. These diseases invariably diminish the quality of life of those who suffer from them, and lead to a shorter average life expectancy.

In order to eliminate these disparities, it is necessary to identify the mechanisms that created them. It is also necessary to examine the effectiveness of various interventions at reducing disparities prior to making large-scale investments. Public health uses surveillance to understand the mechanisms of the spread of disease, and to evaluate prevention strategies. At present, the public health inquiry has been hampered by the fact that little data is available that can be sorted by race, ethnicity, and language. Data analysis is further compromised by the fact that there are no consistent standards for racial, ethnic, or language categories. Because better quality data will inform decision-making and result in wiser investments, higher quality of care, and better health outcomes, OPHI supports HB 2134 with the -2 amendment, which calls for the development of

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uniform standards on race, ethnicity, and language, and the use of these standards by OHA and DHS when conducting community surveys as well as collecting data on health outcomes.

Public health has a long history of going out into the field to meet people where they are, in order to talk with them about their health concerns, and the things they can do to protect and improve their own health, and the health of their families. We know how important it is to surmount barriers to communication. The record shows that a shortage of health care providers who are culturally competent prevents many people who live in Oregon from receiving quality health care. Providers who are not familiar with the language or culture of their clients and are not aware of resources available to facilitate communication with them cannot be as effective in diagnosing, treating, or counseling these clients. HB 2611 is a good place to begin the effort to make sure every Oregon resident receives excellent health care.

Thank you again for the opportunity to address the Committee.

Respectfully submitted,

A handwritten signature in blue ink, appearing to read "Beth Kaye", is positioned above the printed name.

Beth Kaye  
HEAL Cities Campaign Manager  
Oregon Public Health Institute

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