



2/4/2020

We are writing this letter in support of HB 4161, a bill that will offer support for Regional Health Equity Coalitions to grow and develop their capacity to support statewide health equity efforts.

Regional Health Equity Coalitions (RHECs) are autonomous, community-driven, cross-sector groups. The RHEC model works by building on the **inherent strengths of local communities** to meaningfully involve them in identifying sustainable, long-term, policy, system and environmental solutions to increase health equity for communities of color, and those living at the intersection of race/ethnicity and other marginalized identities.

As an organization connected with the EOCCO Community Advisory Councils, we believe in the power of community, and we work to lift up and empower community members to get involved to improve local and regional health in Eastern Oregon.

The importance of codifying the definition of RHECs is central to this bill. The model of RHECs was designed intentionally to ensure that communities most impacted by health inequities were at the forefront of policy, systems and environment change work that impact their communities. These communities include; Oregon's nine federally recognized Indian tribes, immigrants, refugees, migrant and seasonal farmworkers, low-income populations, persons with disabilities and lesbian, gay, bisexual, transgender and questioning communities in rural and urban areas, with communities of color as the leading priority.

With 3 of the 4 highest Latinx populated counties per capita in the state, equity is a regional priority for our organization and for the Eastern Oregon Health Equity Alliance.

Regional Health Equity Coalitions are completely independent of coordinated care organizations and government agencies and backbone organizations may be a federally recognized Indian Tribe in Oregon or a community based non-profit organization.

We support the model of RHECs that includes uplifting and centering the impact of structural, institutional, and interpersonal racism on the health and well-being of communities of color. The model also prioritizes meaningful engagement of communities most impacted to lead efforts; and honors community wisdom by ensuring policy and system change solutions build upon community strengths.

We support this bill because equity is a priority within our organization and we support equity related efforts in Eastern Oregon, including the Eastern Oregon Health Equity Alliance. These recommendations strengthen the efforts that are happening in Eastern Oregon and statewide through the RHECs.

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Sincerely,

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