



Testimony in support, HB 2949  
House Committee on Behavioral Health  
Wednesday, March 3, 2021, 8 am

Chair Rep. Sanchez, Vice-Chair Rep. Moore-Green, Vice Chair Rep. Nosse, and Representatives Lively, Morgan, Reynolds, Salinas, Sollman, and Wright:

For the record my name is Dr. Joseph Gallegos and I am a member of the Oregon Commission on Hispanic Affairs (OCHA). I am joined today by my colleagues Mariotta Gary-Smith, Vice Chair of the Oregon Commission on Black Affairs (OCBA), and Natasha Haunsperger, Commissioner on the Oregon Commission for Women (OCFW), who will introduce themselves as they share their oral testimony. Our written testimony is intersectional among all four of the Oregon Advocacy Commissions. Each of the Commissions has its own cultural constituency with specific MH needs and we will be focusing our individual remarks using the lens of our Commissions on the importance of this bill that grows the MH professions in culturally responsive ways. The Oregon Commission on Asian and Pacific Islander Affairs was not able to join us today but is deeply invested in seeing the MH workforce grow to include those from their communities in areas most needed, and is supportive of HB 2949 as legislation important to the API community statewide.

The Advocacy Commissions’ statutory work includes advocating for our communities across Oregon, which includes both in the professional and business realm: inclusive of our expertise and reflective of the communities we serve. There has never been more need for Mental Health, Behavioral Health, and trained Social Work professionals. The emotional wellbeing of our communities including BIPOC immigrant and refugee communities is seriously affected and not improving quickly enough in culturally centered ways. Additionally, the unmet need for professional mental health expertise for justice involved women of color, over-represented in Coffee Creek Correctional Facility and whose children are over-represented in foster care, is hampered by shortages of culturally reflective and trauma trained professionals. And, it often comes too late to avoid incarceration and all that unleashes on individuals and families, the effects of which affect generations beyond the person immediately involved.

HB 2949 is a good bill and should pass. More than a good bill, I consider it a milestone in Oregon’s legislation. This bill fully recognizes and puts long needed action behind the awareness of historical oppression of our state’s BIPOC communities. Speaking only from the Latinx perspective as reported in the [Crisis de Nuestro Bienestar](#) report on Mental Health and Oregon Latinos that you all have received, the need for culturally sensitive and competent mental

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health providers is well documented. We know from over a half-century of research that people of color, people who speak another language than English, receive less mental health care and when they do, it is often insufficient and ineffective due in large measure to the lack of service providers of similar cultural backgrounds. HB 2949 will move our state a long way in remedying that deficiency. A review of our whole mental health training system and implementation of a plan to address workforce inadequacies will result in stronger communities in both social and economic ways for our citizens.

We thank the committee for their extraordinary and committed pursuit of culturally responsive Mental Health legislation in the 2021 Session, and your positive consideration of HB 2949. With your permission, Chair Sanchez, my colleagues are ready to add their unique perspectives.

Sincerely,



Hussein Al-Baiaty/Mohamed Alyajouri, OCAPIA Co-Chairs



Mariotta Gary-Smith, OCBA Vice-Chair



Dr. Joseph Gallegos, OCHA



Natasha Haunsperger, OCFW