

Chair Smith Warner and Members of the Committee,

For the record, my name is Gia Matzinger. I am farmer/ non-profit employee at Rogue Farm Corps in Sisters, OR. I am writing to request your support for **HB2337**.

HB 2337 declares racism a public health crisis in Oregon. Racism causes harm, trauma, illness, and death to Black, Indigenous, and people of color (BIPOC) Oregonians. HB 2337 acknowledges that Oregon's very founding as a state was rooted in racist ideals, and the damaging impact of these and other racist policies continue to exist within our present-day policies and systems. Further, this bill signals the need for accelerated, intentional actions to heal these injustices and articulates six initial strategies and investments to address health inequities.

- Oregon has deep roots of racism to include the Land Donation Act of 1850 that made it legal to steal land from Native American Tribes, the 1887 murder of Chinese miners, Black exclusionary laws with lashing as punishment, Japanese internment camps during WWII, segregation in education, and real estate red-lining that drove down values and reduced home ownership in the Black community. In my line of work, I am tasked with hearing from BIPOC farmers and have failed to encounter more than 2 in the Central Oregon area. Lack of access to equity in land, and the fresh foods that come from that land weighs on the health of those who are pushed out of land ownership.
- In Oregon African Americans and American Indians and Alaska Natives experienced more years of potential life lost (YPLL) than any other race and ethnicity in the state (Oregon Death Certificate Data, 2016).
- Chronic illness is greater for many communities of color. For example, African Americans (38.9%), Pacific Islanders (36.1%), American Indians and Alaska Natives (33.4%), and Latinos (29.1%) are more likely to experience high blood pressure in this state. (Oregon Behavioral Risk Factor Surveillance System, Preliminary race reporting data file, 2015 – 2016).
- Black and brown people are stopped, searched, arrested, prosecuted, and experience more force and are killed by police at higher rates nationally. (APHA, 2018, Addressing law enforcement violence as a public health issue).
- Health inequities are preventable issues that when addressed provide significant cost savings not only to health systems, but also other systems related to the social determinants of health. More importantly, addressing these issues of racism improves the health and quality of life for all Oregonians.
- This effort will look like many similar ones out there. Racism didn't happen overnight and with one action and dismantling systematic racism will take many years, multiple legislative concepts, policies, and community pushes.

HB 2337 was developed by the Oregon Health Equity Task Force which is composed of leaders and community-based organizations representing BIPOC, Tribal, and Immigrant and Refugee communities and includes six initial strategies that are responsive to the specific needs of their communities to reduce racial and ethnic health disparities.

Therefore I would like to see these strategies utilized in the assessment and implementation of improving the health of underrepresented groups:

1. Expand and support the collection of REAL-D data
2. Meaningfully invest in community engagement to identify future strategies
3. Health Equity Policy Analyst to disrupt policy from maintaining racist outcomes
4. Increase health equity through language access
5. Increase community voice in the legislative process
6. Remove barriers to increase access and quality of care in BIPOC communities

Thank you for the consideration and for your service. I urge you to support HB 2337.

Sincerely,  
Gia Matzinger  
Sisters, OR