

Date: March 23rd, 2021  
Chair Smith Warner and Members of the Committee,

For the record, my name is Ellie Smith. I am a public health professional and doctoral student of public health at Oregon State University in Corvallis, Oregon. 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.

Racism is pervasive and is integrated into every institution and system that is connected to the social determinants of health, and ultimately impacts Oregonian's ability to be healthy and well to the fullest potential. Incidents of racism consistently experienced by Black, Indigenous, and people of color (BIPOC) communities and Tribes create racial disparities in social, health, economic, legal, and academic outcomes. White supremacy was institutionalized through the development of policies and systems that ensure power, privilege and resources remain in the hands of white men. I understand and acknowledge these outcomes as a public health researcher examining how systems of oppression, particularly, racism, impact and reduce reproductive justice. We know this from the literature and from current research efforts at OSU and across the nation to expose and address racial injustice and racism in all reproductive health outcomes, specifically and most detrimental, the crisis of Black maternal death in the United States. I also know from countless interviews, interactions and personal friendships and relationships with my colleagues and friends of color who have experienced injustice in their own lives. As a white woman, I will not be able to fully understand these injustices, but I have made a commitment to being an ally and show my allyship via deliberate action, including my research and this letter.

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. I implore you to pass this bill in order to increase specific, deliberate actions toward racial justice in Oregon. Some of these actions include, but are not limited to, developing and implementing a Health Equity Policy Analyst in all quantitative analyses related to policies to disrupt policy from maintaining racist outcomes; increase health equity through language access; increase community voice in the legislative process by deliberately and intentionally requesting and inviting such input; remove barriers (including but not limited to financial, transportation, insurance coverage, childcare needs) 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,  
Ellie Smith  
Oregon State University