



March 24, 2021

TO: House Committee on Rules
House Democratic Leader Barbara Smith Warner, Chair
House Republican Leader Christine Drazan, Vice Chair
Representative Paul Holvey, Vice Chair
Members of the House Committee on Rules

Statement by Oregon Physicians for Social Responsibility in Support for HB 2337: Declaring Racism a Public Health Emergency in Oregon

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Oregon Physicians for Social Responsibility (Oregon SPR) submits this testimony in support of HB 2337. We are honored to join the many social justice groups and individual activists who have signed on to endorse this legislation that is part of a long journey toward identifying and correcting some of the many negative impacts that long-standing and widespread systemic racism have had on Black, Indigenous, and People of Color (BIPOC) individuals and communities in our state. We wish to thank Representatives Salinas and Alonso Leon for their joint sponsorship and tireless work for HB 2337.

Oregon PSR's four decades of activism for nuclear disarmament, environmental justice, and directing our national budget away from military spending and towards building a society where health and well-being are prioritized, is firmly rooted in our organization's core values of justice and equality. As Dr. Martin Luther King, Jr. stated, the "evils of racism, poverty, and war" intersect to create huge inequities in our society. As an organization of health workers, our professional ethics requires us to carefully examine - and when needed, to remedy - the ways in which these structural evils contribute to harm both physical and mental health at individual and community levels.

As health professionals, we are aware that centuries of white supremacy and dominance beginning with the massacre, dispossession, and colonization of native peoples, economies built on enslavement, the disproportionate imprisonment of people of color and poor people, the violation of human and civil rights, and the concentration of extreme wealth into the hands of a small, mostly white, elite power structure are responsible for many of the inequities in health status experienced by BIPOC individuals and communities in this state, as well as nationwide.

In order to have healthy and thriving communities - a desire we hold for all Oregonians - the crisis of racism must be addressed. Disproportionate health impacts experienced by BIPOC Oregonians include: increased risk of living in neighborhoods at closer proximity to environmental toxins, less access to health care, increased risk of cardiovascular disease, asthma, adverse birth outcomes, poorer educational outcomes, higher risk of homelessness, higher poverty rates, less access to healthy nutrition, higher stress, increased exposure to trauma, increased risk of exposure to violence (including violence from the police), greater chances of incarceration, increased family separation due to deportation



or detention of a parent, increased risk from the violence of hate crimes, daily microaggressions that are known to cause stress to one's immune system and other chronic health consequences, and the list goes on and on. As clinicians, we deal with these health disparities in the examination room, and as advocates for health, we address them through advocacy for social justice.

If ever there was a moment when the health gaps have become acutely evident, it is now in the midst of the COVID-19 pandemic. This virus has shined a light on so many health inequities with a ferocity that none can honestly deny. The virus knows no racial boundaries, yet from the disproportionately high representation of BIPOC individuals as essential frontline workers to the burden of the COVID-19 disease to the disparity of vaccine access, our ability to respond to this pandemic is constrained by the binds of racism.

Oregon PSR, as an organization of health professionals, is committed to addressing health problems at the community level. In this light, we applaud HB 2337 as it takes several critical first steps in moving our state forward toward health equity. Only by first "seeing" the negative impacts of racism on health can we begin the healing journey. Collecting REAL-D Data is important as a way to get complete data in order to identify what and where health inequities exist and to guide targeted interventions as needed. Investing in improved accessibility to health care through language access and mobile health facilities are essential. The importance and wisdom of including BIPOC communities at a greater and more authentic leadership level in health policy, program priority and planning, and providing a culturally-specific health voice, are aspects of HB 2337 that deserve all of our support.

HB 2337 is an important beginning step toward correcting grave health inequities due to the corrosive effects of racism. We wholeheartedly endorse this legislation and urge its passage by the Oregon State Legislature.

Thank you.

