

Dear Chair Bynum and the Honorable Members of the House Committee on Economic Development and Small Business,

My name is Dr. Rachel Knox, and I am a Black Oregonian, born in Portland and raised in Multnomah and Clackamas counties. I am also a family medicine physician, endocannabinologist, and health equity specialist, serving our state as the Chair of the Oregon Cannabis Commission from 2019 - 2021, and currently as the Equity Chair of the Psilocybin Advisory Board.

I am writing to ask you to support the Oregon Economic Equity Investment Act (HB 3431), and here is why:

Alongside many providing testimony in support of this bill, I've spent my professional career advocating for cannabis justice as a means to health equity. This effort is so important to me that I created the Cannabis Health Equity Movement in 2019 and co-founded the Association for Cannabis Health Equity and Medicine in 2020 to enrich and prepare students and healthcare professionals from historically underserved and excluded communities, the same communities most negatively impacted by the war on drugs, to educate, advocate for, and demonstrate how cannabis - through regulation, taxation, research, and innovation - can be used to assure access to full health and wellbeing for the very communities its prohibition targeted and systematically divested of the same.

We all know that the major mechanism of disenfranchisement of the past 50 years has been the criminally unjust War on Drugs, which not only inflicted intergenerational racial trauma against Black, brown, and Indigenous people, but stripped a critical mass within our communities of their means to attaining and maintaining economic stability, a basic and foundational determinant of good health and health equity. As the wealth gap widened and poverty deepened during the pandemic, Black adults had the highest average percent increase over time for both anxiety and depression, and Native Americans for suicidal ideation.

It is extremely important that our communities receive necessary mental health and substance abuse services, but when are we going to recognize these problems for the symptoms of poverty that they are? Clinically speaking, treating symptoms does not cure disease. Healing can only begin when we uproot the cause, so if we want to get serious about eliminating mental distress and substance abuse in Oregon, then it is time we get serious about eliminating poverty in our State. HB 3431 is asking legislature to make ongoing investments with cannabis taxes to reduce poverty and improve economic security, a root solution to our mounting behavioral health challenges that will result in exponentially more lives saved. Cannabis tax dollars are a reasonable, if not expressly appropriate or even necessary, source of funding for the reparative justice efforts needed to rehabilitate the social circumstances cannabis prohibition directly contributed to.

Not only this, achieving Health Equity requires that we address inequities holistically, taking advantage of intersectionality wherever possible to reach a positive outcome more efficiently.

Asking for your support of HB 3431 is not asking that legislature divest Measure 110 Recovery services. It is asking that cannabis tax dollars rightfully be distributed even more thoughtfully and strategically, ingeniously, even, to treat both symptoms and cause as we combat our State's behavioral health challenges at both ends. Please support HB 3431.

Thank you for your time and consideration of this holistic approach to community care.

Sincerely,

Dr. Rachel Knox, MD, MBA

Creator and Co-founder, Cannabis Health Equity Movement (CHEM)[™]

Creator of the CHEM Pillars of Health Equity framework

Co0-founder and Board Chair, Association for Health Equity and Medicine (ACHEM)