

Submitter: Juliet Rutter

On Behalf Of:

Committee: Joint Committee On Ways and Means

Measure: SB5506

Written testimony: SB 564, 2023

Good evening members of the Ways and Means Joint Committee,

My name is Juliet Rutter and I am here representing the Lane and Douglas County Regional Health Equity Coalition, namely, RISE of the Umpqua and Willamette Valleys. I am grateful for the opportunity to testify today in support of Senate Bill 564, which seeks in part, to appropriate monies for additional regional health equity coalitions.

Regional Health Equity Coalitions (also known as RHECs) are autonomous, community-driven, cross-sector partnerships. The RHEC model works by building on the inherent strengths of local communities to meaningfully involve them in identifying sustainable, long-term, policy, system and environmental solutions to increase health equity for communities most affected by health disparities, and those living at the intersection of race/ethnicity and other marginalized identities.

I was born and raised in Roseburg and I, and plenty of the people I know here, have experienced some of the obstacles rural communities face in accessing health care. Some of these unique challenges include lack of access to specialist services, long commutes to hospital visits and lack of public transit to access services. The ratio of community members to health care providers is expansive, and the intersectional representation in gender, racial, cultural, linguistic, and religious representation amongst providers is even more expansive.

I have witnessed first hand how the systems responsible for distributing the COVID-19 vaccines struggled to reach the Native and Latinx communities during the height of the pandemic due to isolation and language barriers. To help close this gap, systems turned to and relied on community based organizations to assist with their outreach efforts. While that provided a temporary solution, we need to find sustainable means to serve and integrate the care of these communities into the fabric of our health care systems. The RHECs are designed to build infrastructure and standards of practice so that we can work towards equitable care for members of our most vulnerable communities.

Health disparities affect us all. They stress the healthcare system as end-stage complications are more costly than preventative measures. When a child, a parent, our elders, and the public in general do not enjoy good health, we all endure human suffering. Our priority as Regional Health Equity Coalitions, is to work with agencies

across various sectors including Coordinated Care Organizations, hospitals, community clinics, community based organizations, and with individuals to find community-driven solutions to health disparities. We then take these solutions to the State Legislature to create policy to address those disparities.

I believe we have a great opportunity ahead of us to address long-standing, harmful practices that keep marginalized communities from reaching their full potential. It is time that we invest in and prioritize the well-being of our most vulnerable communities. To that end, I ask for your vote in supporting Senate Bill 564 so we can uplift the voices of those who have been disproportionately affected by health disparities.

Thank you for your time.