To Chair Smith Warner, Vice-Chairs Drazan and Holvey, and Members of the House Committee on Rules:

Racism is a public health crisis.

When racism is often spoken of, it is spoken of as this ephemeral phenomenon, vague and undefined. But for Black, Indigenous, and People of Color, the impacts of racism are anything but ephemeral and vague. They are clear, defined, and acutely felt in mind, body, and soul.

For our communities, racism is a constant, consistent presence. It is never a question of if we will be subject to racism and white supremacy. It is always a question of just how much. It is being harassed by authority figures who hold disproportionate social power. It is being denied equitable access to housing, finance, and food. It is being the target of those who see our lives as being worth less and therefore, expendable.

The mental health impacts of racism are profound, intricate, and everlasting. They begin with our consciousness and stay with us our entire lives. The anxiety, depression, post-traumatic stress disorders, self-harm, and other numerous mental health effects are taxing, potentially disastrous, and even fatal.¹

Black, Indigenous, and People of Color don’t just face racism on an individual basis. We are also subject to racial discrimination based on how the dominant white society perceives us. I, as a South Asian individual born in the north of the subcontinent, have been subject to racism from individuals who simply perceive me to be from somewhere else and lack the simple desire to correct their bigoted assumption.

We also carry with us the centuries of discrimination our parents, grandparents, and ancestors have been and are being subjected to. That history informs us, our places in society, and having a personal understanding of our places within it imbues a deep sense of how much has progressed yet so little has changed.

This burden upon our minds, souls, and proverbial shoulders weighs heavy. Racism affects our emotional and mental health, that is absolutely true. But it also affects our ability to breathe when environmental racism and racist housing practices force our communities to live in more polluted neighborhoods. It affects our health when we have less access to inclusive health care where doctors believe us when we tell them that we are in pain. It affects our health when LGBTQIA+ Black, Indigenous, and People of Color have less access to HIV preventative and treatment medication. It affects the health of our children when they breathe in disproportionately polluted air, receive less nutritious food at school, and have less access to critical social programs. It affects the livability of our lives when transgender women of color are being murdered at astronomical rates.

As a Board Member of Oregon Physicians for Social Responsibility, I am proud to write this testimony on behalf of an organization whose history is of standing proudly at the juncture of equity and public health.

I am just as proud to support a historic piece of legislation that understands in certain and unequivocal terms that the work of undoing these harms begins with recognizing their history, understanding their impact, and addressing them through progressive leadership and action. This work is difficult, intricate, and will require consistent and thoughtful action.

Oregonians deserve a future where the ills and harms of racism and white supremacy are actively addressed and mitigated by leadership. HB 2337 is such a step of mitigation and it deserves the full support of this committee.

Thank you for your time.