



## SENATE MAJORITY OFFICE

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### NEWS RELEASE

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**Bill sets standards for improving health care for diverse populations**  
*SB 97 outlines next steps for greater awareness of health care disparities across minority groups*

SALEM – A bill that recognizes the disproportionate health problems faced by minority communities passed in the Senate this morning, with a 22-7. Senate Bill 97 establishes the protocol and next steps for creating cultural competency standards for Oregon’s health professional regulatory boards.

“This bill will help Oregon improve our health care delivery system to meet the needs of our ever-growing and changing population in Oregon,” said Senator Laurie Monnes Anderson (D-Gresham), chair of the Senate Health Care, Human Services, and Rural Health Policy Committee. “As our population becomes more diverse, Senate Bill 97 will help us make sure everyone in Oregon is getting quality health care.”

Oregon has seen a steady increase in the diversity of the state’s population, with 20 percent of Oregonians currently identifying as non-white. Research has shown that training in cultural competency improves the skills and knowledge of health care providers, enabling them to work effectively in cross-cultural situations. Generally, cultural competency in health care is defined as a set of provider skills, provider communication strategies, and institutional policies that come together with the goal of improving care and outcomes.

“There is very clear evidence of health care disparities in minority communities,” said Senator Chip Shields (D-Portland), a member of the Senate Health Care, Human Services, and Rural Health Policy Committee. “Cultural competency is a very important tool health care providers can use to improve the delivery of care and health outcomes for minority patients.”

Research has documented that racial and ethnic disparities in people’s health persist nationally and in Oregon. For example, the Urban League of Portland testified in committee that research shows that the incidence of high blood pressure is 42 percent among African Americans in Oregon, while the incidence among Whites is 25 percent. The Oregon Advocacy Commissions Office testified that Black and Latino Oregonians’ health is 30 to 50 percent more likely to be negatively affected by diabetes, arthritis, asthma, heart attack, stroke, and high blood pressure.

Specifically, SB 97 requires the Oregon Health Authority (OHA) and Oregon’s health care professional regulatory boards to collaborate to develop standards for continuing education in cultural competence, develop a list of opportunities for continuing education, and coordinate with other states and national entities

to develop and implement continuing education.

The bill also defines “cultural competence” as “the process by which individuals and systems respond respectfully and effectively to people of all cultures, languages, economic statuses, races, ethnic backgrounds, disabilities, religions, genders, sexual orientations and other characteristics in a manner that recognizes, affirms, values the worth of and preserves the dignity of individuals, families and communities.”

The bill now goes to the House for consideration.

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