

March 27, 2025

The Honorable Susan R. Donovan

Chair, House Health and Human Services Committee

Rhode Island State House, 82 Smith Street, Providence, Rhode Island 02903

RE: HB 5849 – An Act Relating to State Affairs and Government – Office of Health and Human Services

Dear Chair Donovan and Members of the Committee,

I write to you as the Project Director for the East Providence Health Equity Zone, and as a representative of East Bay Community Action Program, the proud backbone agency of the East Providence, Bristol and Warren Health Equity Zones (HEZ). The RIEZ network assists our state in improving the social determinants of health: environmental and social factors that shape health and well-being. These conditions shape our access to economic opportunity, high quality education, medical care, and safe environments. Unfortunately, inequitable access to resources in various neighborhoods contributes to persistent health disparities that disproportionately affect communities of color and those who earn the lowest incomes. Rigorous research has shown that addressing these conditions and inequities improves health, reduces costs, and builds community resilience.

Over the last decade, Rhode Island has been a national leader in recognizing that the communities where we live and work, play just as important a role in determining our health outcomes as traditional clinical care. The HEZ Initiative works within our communities to address these social determinants of health, creating partnerships with residents and local organizations to address community-specific barriers to health equity, and then together as statewide partners to create scalable models for change.

HEZs are built to be agile and dynamic, able to quickly respond to community needs as they arise. There is perhaps no better example of this than the work done during the COVID-19 pandemic. Rhode Island does not have local health departments the way so many other states do; rather, the Health Equity Zones served this role. The State relied on the HEZ Initiative to serve as the mechanism to quickly pass funds to health centers, allowing for testing and vaccination sites to be built overnight, and convening community leaders and clinicians alike to not only address the immediate crisis, but to create active networks prepared to respond to future crises.

A snapshot of what has been accomplished in East Providence: we have embedded family navigators within the school department, assisting families with resource navigation, providing application assistance, and serving as the connection between school communities and evidence-based programs. Since beginning this initiative, our engagement has more than quadrupled, and we have supported grant applications that have brought nearly \$150,000 into the district. We are addressing health and nutrition literacy by providing evidence-based monthly workshops within the East Providence Housing Authority; we consistently evaluate and refine our work, ensuring effectiveness; over 160 housing authority residents attended our workshops in 2024, with over 80% reporting that they would both use this information in their daily life, and would recommend the program to a friend. Our efforts to address food insecurity within East Providence have grown from a small pilot program providing fresh produce monthly to nearly 30 residents to partnering with our food pantry to provide an entire week each month dedicated to healthy eating; in the two years that this "Produce Week" has been active, we have served over 3,500 residents and secured over \$40,000 in dedicated funding.

One of my colleagues frequently uses the phrase “you get in where you fit in” to describe the work of the HEZ. Rhode Island’s healthcare and social service support system is siloed, with rigid programmatic goals and geographic catchment areas serving as barriers between each other and the communities we are meant to support. Our ability to work through and across those barriers is what allows us to create scalable, sustainable change within our communities and across the state, our ability to fit into and support both transactional and transformational change is what allows us to get in with our communities, to support them as they need, and to break down those barriers.

We could spend hours discussing the strengths of the HEZ initiative, the accomplishments of our communities, and the dedication of my colleagues, and I invite any of you to attend one of our workgroups, our Steering Committee meetings, to read our end-of-year reports, or to reach out to any of the HEZ staff or Collaborative members in your communities to have those conversations. My colleagues at EBCAP and across the HEZ Initiative, and our residents and stakeholders, have submitted written testimony about the outcomes we have achieved, the change we have already created, the public health infrastructure that we are creating, and the gaps that will exist if funding is not prioritized. In support of their work, I leave you with this: at its core, the HEZ Initiative is a community-driven, community-supported initiative. We answer to our residents, and we are driven by their priorities. We not only support our most vulnerable residents, we work to ensure that the systems creating these vulnerabilities are changed, and to create communities that are healthy and equitable. The HEZ Initiative is the Rhode Island-based equivalent of the saying “An ounce of prevention is worth a pound of cure.” It is vital that the HEZ initiative is adequately funded to ensure sustainable continuation of this critical work.

Rhode Islanders are better off because of the ten years that the HEZ network has existed here. We know that investing in communities works. By addressing root causes of health, we can continue to advance opportunities for economic and social mobility for all Rhode Islanders.

Thank you for your consideration,

Alyssa Gleason

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