



Building Community in New Hampshire

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TO: House Committee on Health, Human Services, and Elderly Affairs
FROM: Richard A. Minard, Jr., Executive Director
DATE: February 5, 2025
SUBJECT: HB 392

My name is Richard Minard. I live in Bow and for the last six years I have been the executive director of Building Community in New Hampshire, a nonprofit organization based in Manchester that works statewide to help refugees and other documented immigrants navigate their way to safe, healthy, productive, prosperous, and connected lives in New Hampshire.

I am here today to argue against HB 392's provision to eliminate the Office of Health Equity.

We all say these words: "...with liberty and justice for all."

We have pledged to uphold them countless times since we were children. The Office of Health Equity is one of the places that puts that pledge into action.

I don't know when or how "equity" became a dirty word. To me, the promise of liberty and justice for all Americans is synonymous with the promise of equity and inclusion. "Justice for all" guarantees fairness. I think that's the same thing as equitable treatment. When we pledge allegiance to the flag, we pledge to uphold equitable access for all to the rights, services, responsibilities, and freedoms provided by the United States.

The Office of Health Equity makes good on that pledge by ensuring that everyone in New Hampshire can access the wide range of programs provided by DHHS, even if they can't see, or speak, or drive, or speak English.

Within the Office of Health Equity, the State Refugee Coordinator manages the federal funds that allow organizations like mine -- Building Community in New Hampshire -- to help businesses recruit and hire refugees. (I should add that we cannot spend a dime of those dollars on people who enter the United States illegally.)

In the same office, the state Refugee Health Officer ensures that New Americans have access to medical care and that they have received all the vaccinations the federal government requires to protect the health of the general population.

Housing various health access programs and the state's refugee program in one office makes good sense and ensures that these related operations work together efficiently. The staff and managers there today do their work well. I personally don't care what the office is called as long as it continues to perform as effectively as it does today.