



Final Minutes of the Governor's Interagency Council on Health Disparities
September 2, 2021
Virtual ZOOM Platform

Council members present:

Marietta Bobba	Katie Meehan (acting)
Benjamin Danielson	Lena Nachand (alternate)
Michelle Davis (alternate)	Julia O'Connor
Lydia Faitalia	Jan Ward Olmstead (alternate)
Sara Franklin-Phillips	Millie Piazza
Quyên Huynh	Victor Rodriguez
Nicole Johnson	Rian Sallee (alternate)
Diane Klontz	Leah Wainman
Stephen Kutz	Greg Williamson

Council members absent:

Jessica Hernandez	Haley Lowe
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Council staff present:

Lindsay Herendeen, Health Impact Review Analyst	Christy Curwick Hoff, Council Manager
Melanie Hisaw, Executive Assistant	Kelie Kahler, Communication Manager
Cait Lang-Perez, Health Impact Review Analyst	

Guests and other participants:

Karen Johnson, Washington State Office of Equity	Nathan Yemane, YBG Healthcare
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During the virtual meeting, approximately 20 members of the public joined and participated. The Council thanks all those that took time to join, listen in, and share their personal experiences and perspectives during the meeting.

Benjamin Danielson, Council Chair, called the public meeting to order at 10:04 a.m. and read from a prepared statement (on file). Staff reviewed the Zoom protocol for the meeting and members introduced themselves.

1. APPROVAL OF AGENDA

Motion: Approve September 2, 2021 agenda

Motion/Second: Member Bobba/Member Piazza. Approved unanimously.

2. ADOPTION OF DECEMBER 2020 MEETING MINUTES

Motion: Approve the December 2020 minutes

Motion/Second: Member Bobba/Member Williamson. Approved unanimously.

3. COUNCIL ANNOUNCEMENTS AND OTHER BUSINESS

Christy Curwick Hoff, Council Manager introduced supporting staff, thanked former council members and welcomed new members and alternates. She provided a little background on the work of the Social Equity in Cannabis Task Force and task force staff members, Anzhane Slaughter, Joy Hollingsworth and Crystal Ogle, introduced themselves. Ms. Hoff said they were recruiting for a third Health Impact Review team member. She said the Council provided a letter of support to Nathan Yemane, for his certificate of need application for the first black-owned hospice program. She closed by saying that House Bill 1152, which made changes to the infrastructure of the governmental public health system and local boards of health, passed in 2020. The legislation creates a Public Health Advisory Board and the Council Chair has a seat at the table. She said she would keep the Council informed as that work progressed.

4. DISCUSSION—HEALTH IMPACT REVIEWS

Benjamin Danielson, Council Chair introduced Cait Lang-Perez and Lindsay Herendeen, Health Impact Review Analysts with the Washington State Board of Health. He said he looked forward to a robust conversation about how Council priorities could better align with HIR findings in the future.

Ms. Lang-Perez and Ms. Herendeen gave their presentation (on file), which covered what a Health Impact Review is, an update on requests to date, and examples of learnings from recent HIRs. Chair Danielson said he appreciated the team's work on topics related to the criminal legal system, adding that it is an area he is passionate about. Nicole Johnson, Council Member, said she has a passion for youth and education and keeping kids out of the criminal legal system. Millie Piazza, Council Member said she is dismayed how few HIRs have been requested on environmental legislation and Sara Franklin-Phillips, Council Member, concurred. Marietta Bobba, Council Member, said she finds incredible value in HIRs and how they demonstrate the impacts of social determinants on health. Members discussed the need to share Health Impact Review findings with leaders, decision makers, and communities at the national, state, and local levels. Chair Danielson thanked the HIR team and said we would continue to the conversation to figure out how to amplify and not overload the HIR work.

5. DISCUSSION—AGENCY AND MEMBER PRIORITIES

Victor Rodriguez, Council Vice Chair, facilitated discussion among members regarding priorities of their respective agencies and communities.

Member Johnson – shared the Washington State Department of Agriculture's 2021 priorities related to health equity. During the pandemic, the agency purchased food to give to banks, pantries, meal programs, and food assistance pantries, including to Tribes. The dairy nutrient program conducted surface water testing to ensure fish and shellfish were not being contaminated. The pesticide management division has been providing training for Tribes, farmers, and warehouse workers in multiple languages. They have a federal grant to work with the Department of Health and Washington State University on stress and suicide prevention in the agricultural community. They are also working to implement the HEAL act.

Member Piazza shared the Department of Ecology's work related to its equity and environmental justice 2020 strategic plan. The agency is conducting service equity analyses and examining data to identify disproportionately impacted communities and which communities are receiving services and where there are service gaps. The agency is using a civil rights procedural checklist to ensure they are in compliance regarding disability access, language access, and public participation. They are also implementing the HEAL Act. Member Piazza said the Council has an opportunity to partner and align with the Environmental Justice Council, which will convene soon. She also suggested that the Council could help agencies in operationalizing the Environmental Health Disparities Mapping Tool.

Julia O'Connor, Council Member, said the Workforce Training and Education Coordinating Board is focused of supporting the health workforce in the pandemic and eventual recovery. She said there were workforce shortages in the healthcare sector before the pandemic and they have worsened. She said the agency has been focused on recommendations to support the behavioral health workforce and on long term care proposals. She stressed the dramatic burnout that frontline workers are experiencing.

Member Bobba said the Department of Social and Health Services represents multiple administrations and services, including food, cash, medical, housing assistance, child support, vocational rehabilitation, long term services, disability, mental health, and addiction services. She said the agency's goal is to foster relationships with community and agencies to ensure they are all working together. Some priorities include working with the Department of Commerce on housing funding to support elders and caregivers. She shared that homecare agencies have been hurt by the pandemic, adding that the workforce is predominantly female, immigrant, and refugee. The agency has also been trying to correct the misinformation that is circulating about Washington Cares, the long-term services trust fund. During the pandemic, the agency has moved to different methods of service delivery and they are sorting through which they will maintain. They are also preparing for future emergencies.

Diane Klontz, Council Member, said a priority of the Department of Commerce is the Poverty Reduction Workgroup and its 8 strategies. She said the eviction moratorium ends at end of month and they are working to get rental assistance out to landlords. Other priorities are increased broadband across the state and the water assistance program, which serves low income populations by directly funding utilities. She said the agency is also partnering with local law enforcement on public safety, noting an increase in violence across the state due to the pandemic. She said many homeowners have gone into forbearance and so the housing assistance fund is an upcoming priority.

Before breaking for lunch, Council members reflected on how much work is taking place to help the people in this state. They discussed the incoming Afghan refugee population and the support they will need. They shared their gratitude and the importance of partnership building and connecting that can occur in groups like the Council. Vice Chair Rodriguez asked members to think about the power and social capital that is present in this space and how it can be guided intentionally toward improved outcomes.

The Council took a lunch break at 12:30 p.m. and reconvened at 1:00 p.m.

6. DISCUSSION—AGENCY AND MEMBER PRIORITIES (Continued)

Member Williamson said that the Department of Children, Youth, and Family was working on several priorities that the agency would not be doing if it wasn't for the Council. He said the agency has a program focused on adolescents and a racial justice and social equity team. He said the agency is working on community placement in juvenile rehabilitation so that youth can stay in the community. He said they are also reimagining institutional education. He said youth today are transitioning into adulthood and there are no jobs or housing or other opportunities. Other priorities include: figuring out how to pay stipends to community members who participate in government processes, racial justice training for agency staff, decision packages, improved compliance with Indian child welfare laws, kinship care, and legislative changes (expanding definition of family for certain benefits and repealing requirements for parents to pay for their children's incarceration). He shared that the agency had to close the office of youth engagement and they are working with the Office of the Education Ombuds around a proposal to stand up an interagency office of youth engagement to support agencies across the enterprise.

Katie Meehan, Acting Council Member, said the Department of Health's main priority is COVID-19, including a focus of the equity implications of the response. The agency has an emphasis on vaccine rollout and ensuring it is as equitable as possible. She said the agency is also trying to refocus on the equity priorities in the agency that were put on pause during the pandemic, including contracting equity, community engagement, and investing in community partners. She said access to systems and information has been a focus and she highlighted the success of implementing the statewide, COVID-19 language access plan. She said the agency has received a public health workforce grant focusing on creating a pipeline into the public health system for underrepresented communities (paid positions for community health workers, folks interested in public health, immigrant and refugee community members with health backgrounds who can't practice here). She added that paid positions like fellowships could be a model that other agencies can adopt as well. Members discussed the importance of community health workers and how they promote community resilience.

Stephen Kutz, Council Member shared how COVID-19 has interfered with how Tribes interact with their communities and elders, adding that they have lost a lot of people. The pandemic has disrupted tribal culture and activities.

Member Olmstead – Shared language the following language in the chat box and asked members to consider how they may want to use it: “We honor Tribal Sovereignty and Treaty Rights; recognizing Tribes are distinct Sovereign Nations that hold responsibility for the health, safety, and welfare of their citizens and their communities. We acknowledge, as Sovereign Nations, Tribal governments have a unique relationship with the state and the federal government that is not based upon race”. She said the American Indian Health commission is focused on the following priorities: (1) ensuring state agencies follow the Centennial Accord, (2) data sovereignty and defining how racial groups are categorized, (3) working with tribes that are not federally recognized, (4) behavioral health needs, which have only intensified during the pandemic, and (5)

the pulling together for wellness framework and how state agencies can integrate into their systems.

Member Franklin-Phillips said the Commission on African American Affairs is focused on police reform and engaging community around this topic. She said the Commission also supported the passing of Juneteenth as a state holiday. She said they are also supporting small minority-owned businesses and working with the American Heart association on tobacco cessation and flavored vapor products.

Michelle Davis, Council Alternate, said a priority of the State Board of Health is supporting Foundational Public Health Services, adding that the pandemic has highlighted deficits in state funding for public health. She said with the passage of HB 1152, which makes some changes to local health board composition, the Board has rulemaking requirements to develop processes for appointment of members. The Board is also modernizing rules around communicable diseases to end HIV AIDS exceptionalism. The Board also adopted rules to include requiring reporting of race/ethnicity and language and notification requirements for COVID-19.

Lydia Faitalia, Council Member, said the Commission on Asian Pacific American Affairs is working to support Syrian refugees. It is also focused on data sovereignty and accountability and ensuring disaggregated data are being collected. Other priorities include COVID-19 vaccination and mental wellness. She said they have held listening sessions around vaccine hesitancy. They are also working with the Health Care Authority to recruit healthcare workers for COFA communities and the Educational Opportunity Gap Oversight and Accountability Committee on plans for getting students back in the classroom.

Leah Wainman, Council Member said she covers one county in her work and another in her personal life and the priorities of those communities are different. She said commonalities are COVID response and emphasis on children and families. She said there is an urgency to respond to and address youth and child mental health, adding there are inequities in access to care. She said they are creating a workgroup in the county to address racism as a public health crisis.

Vice Chair Rodriguez said a huge priority is vaccination. He said people are really scared about getting vaccinated. Another priority is childcare, adding that the system has been disrupted. He said elders are unable to care for children and it has caused people to lose their jobs. Women have been disproportionately impacted. Other priorities are housing, job opportunities, access to food, and mental wellbeing. He said cultural disruptions are taking their toll—ceremonies are important to maintain community health and disruption is harming connection between youth and elders.

Chair Danielson shared common themes that he heard during member updates. He said there is a lot of cumulative stress that we have carried as individuals and in our work roles as well as being aware of the stress that our communities are facing. He noted a focus on basic needs, including health, wealth, nutrition, and education. He said behavioral health was mentioned many times and we need to get past naming the issue and figuring out how to address it. He said he appreciated the shared wisdom in the

group. He asked what it would look like for the Council to be an intentional conduit connecting communities and the state in both directions. Claim that ground. What would that look like as a goal? Vice Chair Rodriguez added that another cross-cutting theme is the COVID-19 pandemic. He said that health inequities anywhere are a threat to health everywhere. He said can expect more public health crises and emergencies and we need to learn from this experience.

7. BRIEFING—OFFICE OF EQUITY PRIORITIES

Chair Danielson introduced Dr. Karen Johnson, Director of the Washington State Office of Equity, saying the Council is seeking ways to make sure our work moves toward a common goal. Dr. Johnson said they are putting in their first budget request to get the resources to properly do their work. They are also engaged in strategic planning. Agencies have completed a baseline equity assessment and submitted that to the office. They held 93 listening sessions. She said she is hoping the office and the Council can align their work.

Vice Chair Rodriguez asked how our entities could work together to create a new narrative about the importance of relationships and our responsibilities to the Earth and to each other. Member Fitalia said she hoped we could work together to creates standards for data disaggregation. Member Meehan said a large portion of the work agencies are doing is limited by what exists at the enterprise level. She said the Council adopted recommendations for equity in state government and these greatly informed the backbone of the equity and social justice work at the Department of Health. She said they are making progress in some areas but there are others that they can't address because of limitations at the enterprise. She said real change requires changes to enterprise level systems. Chair Danielson said he hoped this would be the first of many opportunities to de-silo our efforts and coordinate.

8. PUBLIC COMMENT

Vice Chair Rodriguez announced that the Council was transitioning to the public comment period and read from a prepared statement.

Nathan Yemane, YBG Healthcare, said he appreciated hearing about the priorities and activities in the state agencies. He said he appreciated hearing the emphasis on healthcare workforce development. He said when women of color are empowered in any field, it betters their opportunity and improves equity broadly. He reflected on Council member comments about COVID-19 vaccination, barriers, and mistrust. He said BIPOC churches are doing vaccination clinics and stressed the importance of trusted locations. He talked about the history of crimes against people of color perpetrated by the health and medical systems. He recommended Council members support efforts to eliminate the lack of trust between health systems and people of color.

The Council took a break at 3:10 p.m. and reconvened at 3:20 p.m.

9. DISCUSSION—FUTURE COUNCIL PRIORITIES

Chair Danielson said the discussions about HIRs, agency priorities, and Office of Equity partnership opportunities set the stage for this conversation. He asked Ms. Hoff to share

the Council's statutory requirements. Ms. Hoff reviewed the requirements set out in RCW 43.20.270-285.

Rian Sallee, Alternate Member, said the language should be updated to include non-binary and gender diverse individuals and health outcomes that impact these populations. She suggested membership should be updated to include a youth representative. She said the purpose should be updated to support other state level entities (e.g. Office of Equity, Environmental Justice Council). Lastly, she said the statute should include data equity. Member Bobba said the Council has many conversations about changing its statute and suggested that this is a topic that may need a workgroup to address. She said she heard the importance of youth in this meeting, but that she cannot emphasize enough the wisdom of elders. She stated that there is no representation of older adult groups or organizations on this Council, nor is there representation from an LGBTQ community. She also suggested that reporting requirements should include current circumstances (e.g. COVID) and should include learnings from HIRs. Member Williamson echoed the suggestion to create a workgroup. He asked the group to reflect on what the Council would want to do in a post-COVID world to answer the question: What do we mean by health? LinhPhung Huynh, meeting participant, suggested that the Council should have the same flexibility to work on the breadth of HIR topics and how this could create alignment.

Member Olmstead commented on how closely wealth and health are connected. She said it would be wonderful to have real engagement around this issue and do something that hasn't been done before in any other state. Member Meehan commented on the very traditional Council format that is established in statute. She said that most of these formal formats are exclusionary in nature, keep us in our silos, and require one person to represent a huge community or agency. She said that we do a disservice for people who have passion and energy to be involved in this work. She said there are new, more collaborative models, like those being created by the Tacoma Pierce County Health Department. She challenged the Council to think about how to encourage more collaborative participation. She suggested that perhaps the Council become a core membership structure with the addition of a larger membership that is open to people that are actually contributing to the body of knowledge and work. Member Fitalia said we have to also be mindful of staff capacity.

Vice Chair Rodriguez shared some potential priorities that he heard:

- Promote health and equity in decision-making: HIRs, agency-specific tools, recommendations to inform policy direction, strategies to identify and advance equity-focused legislation.
- Connect community voice with state decision-makers: Council forums, informing legislative session, documenting and lifting up community solutions and visions, producing qualitative reports and recommendations.
- Strengthening relationships between state agencies and community leaders.
- Promoting state agency collaboration and alignment: Sharing resources and tools, facilitating conversations, aligning resources on specific topics, strengthening relationships between equity leaders at different agencies.

Vice Chair Rodriguez also said he supported updating statutory language. He said the Council shouldn't be focusing on health outcomes, but rather on the things that lead to those health outcomes. Chair Danielson said we need to move toward a state of describing what we want instead of what we don't want (e.g. moving away from deficit focused language about disease and describing a state of health). Member Williamson said there is a need to move from representative democracy to participatory democracy. Member Kutz appreciated hearing from some of the newer members and how their comments align with some past conversations of the Council. Member Klontz said we need to think about the way we tell our story and how we talk to legislators. She said many do not know enough about our work. Members discussed past Council reports and how we can do more to share the Council's work. Member Meehan said that the Council reports give her something to point to when she needs leadership support and buy-in to advance equity changes at Department of Health. Member Olmstead added that the Council's work on adverse birth outcomes resulted in a task force being created and influenced Results WA measures.

Chair Danielson said that we are still designed to have "justice by accident" instead of "justice by purpose." Member Olmstead stressed that we are at a unique time and a lot of things are coming together. She said it is important for us to recall the stories that have informed this Council and said we can take those stories and boldly keep moving forward and bring everyone with us. Chair Danielson suggested it was time for the Council to create a workgroup around redesigning and reimagining our statute.

Motion: The Council should form an advisory committee to make recommendations to update its statutory authority.

Motion/Second: Member Williamson/Member Rodriguez. Approved unanimously.

Chair Danielson said that he, Vice Chair Rodriguez, and staff would discuss how to implement and move this action forward. Member Johnson said that the Council, the Office of Equity, and the EJ Council all connect together, and she hopes we can all partner so that our work can be meaningful and impactful. Vice Chair Rodriguez said it is unrealistic for the Office of Equity to take on all the work of transforming state government. Member Kutz said that equity is not an absolute and we can't ever say that we've reached equity. Instead, he said, it is a journey that we must move forward on constantly. Chair Danielson thanked members for doing the hard work to make the world a better place every single day. He expressed gratitude for the conversation.

ADJOURNMENT

Benjamin Danielson, Council Chair, adjourned the meeting at 5:01 p.m.

GOVERNOR'S INTERAGENCY COUNCIL ON HEALTH DISPARITIES

Benjamin Danielson, Chair

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