

Summary of Proposed Statutory Changes

August 16, 2023 Draft

The table below outlines the Health Disparities Council's current authority and responsibilities by statute area (intent, purpose, etc.). The table also compares the Council's current statute with draft recommended updates. Notable changes are underlined.

Some highlights include:

- The Council would remain a class 1 group (advisory workgroup), expand its membership, and be renamed the "Governor's Health Equity and Justice Council."
- The Council would work with various partners to create a statewide vision, goals, and policy recommendations for health and wellbeing.
- The vision, goals, and recommendations would provide an actionable framework to support lawmakers, the Governor, state agencies, and community in advancing health equity.
- The Council would align efforts with partners such as the Office of Equity, Poverty Reduction Working Group, and Environmental Justice Council.
- The Council would be able to form positions on policy proposals and endorse partners' recommendations to promote coordination and alignment.
- The Council would be required to engage communities and may use participatory methods that promote community-led planning and design.

Area of Statute	Current Statute (RCW <u>43.20.270 – 43.20.280</u>)	Draft Statute Recommendations
<p>INTENT What the state hopes to achieve.</p>	<p>"It is the intent of the Washington state legislature to create the healthiest state in the nation by striving to eliminate health disparities in people of color and between men and women."</p>	<p><u>"...it is the intent of the Washington state legislature to promote health and wellbeing for all in Washington by advancing health equity and creating socially, economically, and environmentally just conditions where all individuals and communities are free from racism and other forms of oppression and have full access to the social determinants of health, so we can be the healthiest versions of ourselves and reach our full potential."</u></p> <p><u>Statute language is more gender inclusive and intentionally anti-racist.</u></p>
<p>PURPOSE Reason for being, including main role and need(s) we must address.</p>	<p>Purpose</p> <ul style="list-style-type: none"> • Create an action plan and statewide policy to include health impact reviews that measure and address other social determinants of health that lead to disparities as well as the contributing factors of health that can have broad impacts on improving status, health literacy, physical activity, and nutrition. • Promote and facilitate communication, coordination, and collaboration among relevant state agencies and communities of color, and the private sector and public sector <p>Focus topics</p> <ul style="list-style-type: none"> • Health disparities by race/ethnicity and gender • Social determinants of health • How government actions ameliorate or worsen health disparities • Culturally appropriate health literature and interpretative services in public and private health-related agencies • Priority diseases, conditions, and health indicators <ul style="list-style-type: none"> ○ In RCW: Diabetes, asthma, infant mortality, HIV/AIDS, heart disease, strokes, breast cancer, cervical cancer, prostate cancer, chronic kidney disease, sudden infant death syndrome (SIDS), mental health, women's health issues, smoking cessation, oral disease, immunization rates of children and senior citizens, etc. 	<p>Purpose</p> <ul style="list-style-type: none"> • Create a <u>statewide vision and goals for health and wellbeing</u>, which shall: <ul style="list-style-type: none"> ○ <u>Provide an actionable framework</u> ○ <u>Guide agencies as they implement requirements set by the Office of Equity and the HEAL Act</u> • Create policy recommendations that: <ul style="list-style-type: none"> ○ <u>Move WA toward the statewide vision and goals</u> ○ <u>Promote health equity and wellbeing</u> ○ <u>Resolve the negative the structural and social determinants of health of promote positive determinants</u> • Promote and facilitate communication, <u>information sharing</u>, coordination, and collaboration among relevant state agencies, <u>"for and by organizations,"</u> communities of color, and the private and public sectors • <u>Collaborate with partners to ensure that government efforts are coordinated, mutually reinforcing, and rooted in anti-racism, access, belonging, and justice and that these efforts benefit all Washingtonians</u> <p>Focus topics</p> <ul style="list-style-type: none"> • <u>Health inequities and health equity</u> • <u>Racism and intersecting systems of oppression</u> • <u>Multiple dimensions of health: mental, emotional, physical, economic, etc.</u> • <u>How health looks different for each individual and community</u> • Social determinants of health: social, economic, and environmental conditions for health equity • <u>Truth, reconciliation, and healing wounds caused by historical and intergenerational trauma</u> • How government actions ameliorate or worsen health inequities

Area of Statute	Current Statute (RCW 43.20.270 – 43.20.280)	Draft Statute Recommendations
		<ul style="list-style-type: none"> Culturally appropriate health literature and interpretative services in public and private health-related agencies <u>Removed: List of specific diseases and health conditions</u>
<p>POWER & RESPONSIBILITIES How we operate; channels we use; interaction with key partners; accountability measures.</p>	<p>How we operate & channels we use</p> <ul style="list-style-type: none"> Interagency and cross-sector coordination Develop policy recommendations for agencies, legislature, and Governor Gather information to understand how state government actions impact health disparities Form advisory groups on specific topics Research and information gathering (public hearings, inquiries, studies, literature reviews, review of existing data, etc.) <p>Key partners</p> <ul style="list-style-type: none"> All state agencies must cooperate with the Council Communication, coordination, and collaboration among state agencies, communities of color, and the private and public sectors <p>Accountability</p> <ul style="list-style-type: none"> Interagency membership and coordination Measure social determinants of health and disparities Submit action plan and updates to the Governor and legislature 	<p>How we operate & channels we use</p> <ul style="list-style-type: none"> Interagency and cross-sector coordination Develop policy recommendations for agencies, legislature, and Governor Gather information to understand how state government actions impact health inequities Form advisory groups <u>or implement participatory models, such as collaboratives or community assemblies</u> Research and information gathering (public hearings, inquiries, studies, literature reviews, review of existing data, etc.) <u>Use topics and findings from Health Impact Reviews to inform recommendations</u> <u>Develop positions on policy</u> <u>Independently endorse or comment on other groups' policy recommendations</u> <p>Key partners</p> <ul style="list-style-type: none"> All state agencies must cooperate with the Council Coordinate with relevant state agencies, <u>“for and by organizations,”</u> communities of color, and the private and public sectors Collaborate with <u>Office of Equity, Poverty Reduction Working Group, Environmental Justice Council,</u> and others <p>Accountability</p> <ul style="list-style-type: none"> Interagency membership and coordination <u>Engage communities and implement participatory methods</u> <u>Collaborate with Office of Equity, Environmental Justice Council, and other state groups to align efforts</u> <u>Statewide vision and goals for health and wellbeing shall guide agencies as they implement the Pro-Equity Anti-Racism (PEAR) framework and Healthy Environment for All (HEAL) Act</u> <u>Removed: measure social determinants of health and disparities</u>
<p>DELIVERABLES Products we must deliver; to whom; and the frequency.</p>	<p>Deliverables</p> <ul style="list-style-type: none"> State action plan (update every 2 years) <ul style="list-style-type: none"> Measure social determinants of health and disparities Policy recommendations Address priorities on an incremental basis by adding no more than five diseases, conditions, and health indicators to each update or revised version of the action plan Recognize the need for flexibility Progress updates to the Governor and legislature (every four years in odd-number years) Collaborate with the State Board of Health on Health Impact Reviews (HIR) 	<p>Deliverables</p> <ul style="list-style-type: none"> <u>First report due in 2028 with statewide vision and goals</u> <u>Submit an update every 2 years, beginning in 2030, with policy recommendations, the status of policy adoption and implementation among state agencies, the Governor, and legislature, and any revisions to the vision and goals</u> <ul style="list-style-type: none"> <u>Removed: measure social determinants of health and disparities; address priorities on an incremental basis</u> <u>Removed: progress updates submitted every four years in odd-numbered years</u> Collaborate with the State Board of Health on Health Impact Reviews (HIR)

Area of Statute	Current Statute (RCW 43.20.270 – 43.20.280)	Draft Statute Recommendations
<p>STRUCTURE Group classification; membership; subcommittees; etc.</p>	<p>Name: Governor’s Interagency Coordinating Council on Health Disparities</p> <p>Membership</p> <ul style="list-style-type: none"> • Diversity in race, ethnicity, and gender • Class 1 group (advisory) • 17 members <ul style="list-style-type: none"> ○ 14 state agencies, including 3 ethnic commissions and the Gov’s Office of Indian Affairs (GOIA) ○ 2 members of the public representing interests of health care consumers ○ 1 chair appointed by the Governor <p>Structure</p> <ul style="list-style-type: none"> • Must form advisory committees to assist in plan development. Must include members of other state agencies and local communities, and reflect diversity in race, ethnicity, and gender. 	<p>Name: <u>Governor’s Health Equity and Justice Council</u></p> <p>Membership:</p> <ul style="list-style-type: none"> • Representation of ethnicity, <u>age, disability status, sexual orientation</u>, gender, <u>urban and rural areas, and regions of the state</u> • <u>Member agencies may appoint someone with authority or significant influence on agency operations</u> • <u>Committed to and well-informed regarding principles of health equity</u> • Class 1 group (advisory) • <u>22 core members</u> <ul style="list-style-type: none"> ○ <u>15 state agencies</u>, including <u>4 commissions</u> and the Gov’s Office of Indian Affairs (GOIA) ○ <u>7 members of the public, including 2 youth representatives, who have direct lived experience with health inequities and will bring the voice of communities</u> ○ <u>Members of the council elect</u> two members, from among the council members representing the statutory commissions or the community, to serve as <u>co-chairs</u> • <u>Council may recommend changes to core membership to the Governor. Governor may appoint pro tempore members.</u> • <u>Decision making and voting processes would be established in bylaws</u> • <u>When representing the Council, Council members may communicate policy recommendations and positions on behalf of the Council instead of their respective agency or organization</u> <p>Structure</p> <ul style="list-style-type: none"> • <u>May</u> (vs. must) establish advisory committees • <u>Must engage community and may use methods promoting community-led planning and design</u> • <u>Provide disproportionately impacted communities opportunity and power to shape narratives, priorities, and policy recommendations</u>
<p>STAFFING & FUNDING Staffing and funding to achieve our purpose and sustain efforts.</p>	<p>Staffing</p> <ul style="list-style-type: none"> • Staffing and support from the State Board of Health • 1.0 FTE Council Manager (WMS 2) • Administrative and communications support from the State Board of Health <p>Funding</p> <ul style="list-style-type: none"> • May obtain federal or private funding to implement duties (RCW 43.20.290). 	<p>Staffing</p> <ul style="list-style-type: none"> • Staffing and support from the State Board of Health • Additional details to be determined... <p>Funding</p> <ul style="list-style-type: none"> • To be determined...