HEALTH EQUITY
Governor's Interagency Council on Health Disparities

Rooted in Community:
2025 Community Engagement Report

Health Disparities Council
Updated March 2026

Contents

Introduction 3
About the Council 4
2025 Outreach and Engagement Activities 5
Lessons and Opportunities for Improvement 7
Main Lessons 7
Opportunities for Improvement for the Council and Agencies 8
2025 Engagement Activities and Themes 11
Public Comment at Meetings 11
Panels: Elders and Youth 12
Community-Organized Events 14
Conclusion 22
Appendix A. Detailed Survey and Interview Results 23

Introduction

The Governor's Interagency Council on Health Disparities (Council) is responsible for identifying priorities and creating recommendations for the Governor and lawmakers to eliminate health inequities by race/ethnicity and gender in Washington (chapters **43.20.270**. **43.20.275**, and **43.20.280** RCW).

A key part of the Council's work is to "promote and facilitate communication, coordination, and collaboration among relevant state agencies and communities of color, and the private sector and public sector, to address health disparities. **The council...conduct[s] public hearings, inquiries, studies, or other forms of information gathering to understand how the actions of the state government [reduce] or contribute to health disparities"** (emphasis added) (chapter 43.20.275 RCW).

This report summarizes the Council's community outreach and engagement activities in 2025. It also highlights lessons and opportunities gained through insights shared by community members and partners. These community perspectives inform the Council's efforts to fulfill our responsibilities in state law and to develop a statewide vision for health and well-being.

Throughout 2025, multiple levels of government braced for significant impacts from federal policy changes [to Medicaid eligibility and coverage, the Supplemental Nutrition Assistance Program (SNAP), environmental regulations, etc.] and state budget cuts. **For many in community, living realities have already changed.** Some conditions and inequities affecting marginalized communities persist and are widening, causing greater challenges for people to meet their basic needs.

The Council's interactions with people in community highlight the importance of fostering spaces where people most impacted by systemic harms can express their truth. As one critical example, community members and partners have emphasized the **deep, lasting harms of widespread and violent enforcement actions against immigrants and people of color.** They shared powerful stories about how mass racial profiling and discrimination, detention, deportation, and family separation are drastically limiting people's daily lives, health, sense of safety, and futures. Some have expressed fear, not just of federal immigration enforcement authorities, but of not being seen or supported by any system at all.

The Council is also sharing these insights broadly with agencies, partners, and decision-makers so that, at an enterprise level, decisions can be coordinated, inclusive, and grounded in the needs of communities. This broad collaboration can inform policy to counter harms, can improve access to resources and services, and has the potential to lead to better community-centered outcomes that protect and improve health and well-being for all Washingtonians.

> *"Thank you for listening to us. Not only is it my voice—there are thousands of us. The same thing that I need, everyone needs... Please take our voices to the highest place."*
>
> —Community Member

About the Council

The Council's **core membership** includes 14 state agencies, boards, and commissions, two healthcare consumer representatives selected by the Governor, and a chair who is the Governor or the Governor's designee. The Council coordinates with additional agencies and partners to foster collaboration and be inclusive of additional diverse communities.

The Council operates with **six main principles**, one of which is **CENTER COMMUNITY**:

> We recognize that we can only achieve health equity if communities impacted by health inequities are at the center of our work. We acknowledge that communities know best their assets, needs, and solutions. We strive to recognize and share power and structure our meetings to foster meaningful engagement. We will find opportunities as a Council, individual members, and staff to attend community meetings to listen, learn, and seek input to guide our work. We will strive to incorporate stories of lived experience into our reports and recommendations.

The Council prioritizes the **social determinants of health** as we work together for health equity. Health is much more than access to healthcare services or the absence of illness or injury. The **University of Wisconsin's Population Health Institute Model of Health** "shows how the community conditions—where we live, work, and play—affect our collective health and well-being." Furthermore, societal rules including laws, policies, institutional practices, governance, culture, and norms" are used to determine which communities have access to the resources needed to thrive."

2025 Outreach and Engagement Activities

The Council carried out a variety of outreach and engagement activities to listen to community members, learn from lived experiences, and gather input to guide its work. These efforts centered on creating meaningful opportunities for dialogue with elders, youth, community leaders, and residents across Washington State.

Key activities included:

- Creating space at Council meetings for:
  - Public comment
  - Panel discussion with elders and youth
- Practicing health and well-being through cultural celebration
- Interviews, surveys, a listening session, and house meetings with community members
- Conversations with community-based organizations and leaders
- Participation in community-organized events

Image: *A panel of elders speaking with Council Members about community histories, current challenges, and strategies for well-being and resilience.*

Council meetings included opportunities for public comment as well as focused panels featuring elders and youth. Additionally, Council Members and staff engaged directly with community members through interviews, surveys, a listening session, and house meetings, allowing for deeper and more personal conversations about health, well-being, and community needs. The Council strengthened relationships by connecting with community-based organizations and leaders and by participating in community-organized events. Together, these activities supported relationship-building, mutual learning, and the integration of community voices in the Council's work.

To supplement information from these outreach and engagement activities, staff prepared the following research to inform the Council:

- **A baseline overview of inequities and the social drivers of health in Washing State**; and
- **A summary of research on connections between hope and health**, including how hope may be a protective factor for health.

Additionally, the Council's Vice Chair and staff summarized community concerns on immigration-related issues in a **letter to the Immigration Subcabinet** created by Executive Order 25-09 (Reaffirming Washington's Commitment to Protecting the Rights and Interests of Immigrant Communities).

Lessons and Opportunities for Improvement

This section provides some lessons from what Council staff and members heard across communities, as well as ways to improve Council and agency practices. A summary follows this section covering various engagement activities and some themes gathered from each activity, which reflect a broad range of social drivers of health and agency service areas.

Main Lessons

Engagement activities reinforced the importance of **understanding how social and structural drivers of health interact**, including labor conditions, housing stability, affordability of basic needs, environmental exposures, and access to linguistically and culturally relevant services. The stories we heard underscored both the **uniqueness of experiences** (e.g., how policies affect communities differently based on race/ethnicity, age, gender, or geographic location) and the **interconnectedness of issues, communities, and generations**. Participants consistently shared that understanding local, place-based experiences is essential to identifying community priorities and assessing the real-world impacts of policies. We heard about certain protective factors across communities such as family, cultural traditions, mentors, civic participation, and intergenerational support and learning.

Many community members described **worsening conditions** in recent years, noting that conditions do not always improve and sometimes reverse. **Rising costs of daily necessities**—such as housing, utilities, food, and healthcare—are forcing families to make difficult trade-offs between needs. There continues to be a **significant unmet need for culturally appropriate and accessible mental health services**, particularly for people of color and people who identify as LGBTQ+ who experience chronic stress, fear, and trauma.

Participants described **Fear and trauma related to family separation and immigration enforcement** as affecting not only individuals, but entire communities, altering daily life and creating long-term and generational impacts. At the same time, the Council also witnessed **community strength, courage, and resilience**. While people are facing significant barriers and, in some cases, losing hope, they continue to organize, care for one another, and advocate for change.

> *"Deportations and the fear my community is feeling right now is a barrier that is keeping not only me, but my community really stressed. On top of that, everything is really expensive: food, rent, transportation. Thinking about all of this doesn't let me sleep at night."*
>
> —Female, 32, Hispanic

Community members stressed that government has a responsibility to support this resilience while also **addressing the root causes of adversity**, rather than adding to existing harms. Communities expressed a strong and recurring message about the importance of **prevention**. Participants expressed a desire for policies and systems that prevent health inequities, unsafe working conditions, and family separation before harm occurs, rather than relying mainly on services and resources after crises happen. Prevention was repeatedly identified as central to public health and community well-being.

Civic participation emerged as a protective factor for both individual and community health. However, many participants shared that engaging with government is often difficult. Barriers include limited access to clear and culturally relevant information, language barriers, technological challenges, and reductions in community-facing government roles. **Sustained and transparent follow-up** with communities was identified as essential for building trust and accountability.

Across engagement activities, communities offered deep knowledge and clarity about what health and well-being mean to them. **Participants described well-being as having the resources (mentally, emotionally, physically, economically) to care for family, time for rest and connection, and the ability to meet basic needs such as food, housing, transportation, and healthcare.**

Opportunities for Improvement for the Council and Agencies

The Council has identified several opportunities to improve its practices and strengthen how it works with communities to support health and well-being across Washington. These opportunities also apply to state agencies as they focus on improving how policies and services are developed, shared, and carried out.

Integrate multigenerational learning and support across all areas of policy and service.

- Learn from historical experiences and practices, both harmful and protective, to inform current strategies.
- Create meaningful space for youth and elders to share their perspectives and take on leadership roles.
- Strengthen decision-making by supporting the sharing of knowledge across generations.
- Support youth participation across agencies, regardless of the agency's main service area or group.

Invest the time, planning, and resources needed to build and maintain strong relationships with communities. Trust is built over time through consistent presence and follow-through, rather than one-time outreach. This requires thoughtful choices about how to balance reaching as many communities as possible with building deeper connections.

- Strengthen partnerships with organizations already serving elders, youth, and immigrant communities.
- Continue to participate in health fairs, cultural events, and other local gatherings.
- Work alongside partners to elevate community perspectives while reducing barriers for direct participation.

Improve how information is shared. The Council and agencies should continue learning how community members and partners prefer to receive information and adjust communication methods to be culturally, linguistically, and technologically appropriate.

- Engage face-to-face, particularly in local community settings.
- Prioritize outreach to people who are often left out of policy discussions.
- Review everyday practices, such as how data are collected and shared, to reduce harm and support dignity and safety, especially for communities experiencing fear or isolation due to the current immigration enforcement climate.

Integrate trauma-informed practices. Trauma-informed practices benefit everyone.

- In particular, having a clearer understanding and exercise of these practices can support community members who experience oppression as well as Council Members and staff who are from marginalized communities or working in health equity roles.
- Trauma-informed methods can help reduce harm, support well-being, and make engagement sustainable over time.

Strengthen community engagement structures.

- Ensure adequate staffing and institutional support for community engagement work.
- Ensure that staff have shared cultural and linguistic backgrounds as focus communities.
- Continue coordination with community-focused commissions, trusted community leaders, and community-led organizations to effectively reach a diversity of communities.
- Invite community participation and shared leadership in facilitation and decision-making such as exploring steering or advisory group models.

Maintain a strong and visible commitment to health equity and racial equity. This commitment must include resourcing actions that ensure all people in Washington have the same protections and opportunity for optimal health. As pressures increase due to budget cuts and federal policy changes, bold action includes continuing to uphold principled and participatory practices.

Create benefits that people can experience in their daily lives. Community members emphasized that persistent barriers are not the result of individual failure, but of systems that make daily life more difficult such as high costs, lack of language access, fear of discriminatory and violent policies, and limited services close to home. Community members have shared their insights consistently over time and are calling for meaningful action and real change from government.

2025 Engagement Activities and Themes

Image: *Council Members and other meeting participants gathering for a photo after learning about ways cultural heritage and practices can support health and well-being.*

Public Comment at Meetings

Across three Council meetings, community members shared comments about the following issues.

Lack of language access: Community members shared that language access remains a significant barrier to health and well-being across multiple systems. Input highlighted that essential information and services are often not consistently available in people's primary languages, making it difficult for individuals and families to fully access care. Examples included challenges navigating public benefits applications, understanding medical and pharmacy instructions, and receiving timely interpretation support. Community members emphasized that these gaps can lead to confusion, missed care, and increased stress. There is a need for stronger, more coordinated approaches to language access across agencies, including more interpreter capacity, clearer communication standards, and systems that better support multilingual communities.

Environmental racism: Community members raised concerns about environmental conditions that disproportionately affect communities of color. People described the health impacts of pollution and environmental exposures in their neighborhoods (e.g., air, noise, water pollution) and emphasized that these conditions are closely connected to broader inequities. There was an ask for action to address environmental harms and their long-term effect on community health.

Enforcement activities against immigrants and communities of color: Community members described how enforcement activities create fear, stress, and trauma that directly affect physical and mental health. They highlighted impacts on families and children, including anxiety, avoidance of public spaces or services, and disruptions to daily life. Community members emphasized that these experiences have lasting effects and contribute to ongoing health inequities.

Continued commitment to health equity and racial equity: Community input emphasized maintaining a strong and visible commitment to health equity and racial equity. Some said this commitment must include fully resourcing actions that ensure all people in Washington have the same protections and opportunity for optimal health. As pressures increase due to budget cuts and federal policy changes, bold action includes continuing to uphold principled and participatory practices.

Increased need for mental health services: Community members shared concerns about growing mental health needs and limited access to services. They described increased stress, anxiety, depression, and trauma linked to immigration enforcement activities and other pressures. Community members emphasized the need for expanded mental health services that are accessible, culturally responsive, and linguistically appropriate.

Need for local health program awareness: Participants highlighted that many community members are unaware of available local health programs or how to access them. People shared that even when services exist, information does not always reach people who need it most. Community members emphasized the importance of clear, consistent outreach to ensure programs are accessible and responsive to community needs.

Demands for government accountability: There were strong calls for accountability across levels of government. People urged leaders, including agency leaders and elected leaders such as the Governor, to interact directly with community members and respond with meaningful action. Input emphasized the importance of transparency, responsibility, and incorporating community voices into decision-making processes.

Panels: Elders and Youth

At the Council's May and September public meetings, participants learned from two panels of leaders: one consisting of elders and another consisting of youth. Some objectives included: uplifting multigenerational knowledge and wisdom; hearing from diverse perspectives; receiving insights on health- and equity-related issues and strategies for resilience; and honoring the many ways through which elders and youth have always led and served their communities.

"We're the future and we're also the present. We're also being affected by all the policies in our communities."

—Youth Panelist

At the May meeting, a panel of respected elders and community leaders shared their lived experiences and insights on community strength, identity, and resilience. Panelists discussed challenges their communities are facing, including barriers to healthcare, mental health stigma, violence against Native women, transphobia and challenges to civil rights, youth disconnection, and food and housing insecurity. Despite these hardships, speakers highlighted the following **sources for strength and hope**:

- Community partnerships
- Cultural traditions
- Spirituality
- A strong sense of self-identity
- Intergenerational support

Panelists spoke about how important it is to get together, to hear from each other, and to always support each other, especially in difficult times. They shared strategies including **storytelling, ceremony, and organizing** to help communities not only to endure, but to thrive. The panel reiterated the critical role of **intergenerational mentorship, cultural grounding, and continued advocacy** to face increasingly harsh social and political challenges ahead.

In September, four youth from central Washington shared their perspectives on health, community, and systemic challenges. Panelists highlighted key issues impacting their well-being, including limited access to clean water, unsafe neighborhoods, food insecurity, lack of mental health support, and economic and cultural barriers around therapy. Panelists shared the emotional toll of family separation, school shootings, gang violence, bullying, and the stress of navigating education and college readiness while dealing with generational and cultural expectations. Panelists highlighted the following **sources for strength and healing**:

- Family
- Advisors and mentors
- Spiritual faith
- Sports
- Peer support

Youth panelists called for **more youth-led spaces, accessible in-person resources, and leaders who genuinely listen and act on youth input**. Meeting participants pledged to amplify youth voices further, including voices of Tribal youth and youth who are incarcerated. Panelists expressed a **deep need for trust, safety, and authentic connection** within their schools, communities, and leadership structures.

Community-Organized Events

Interactions with Community-Based Organizations

Council staff attended an Elders Fair organized by the Pacific Islander Community Association of Washington (PICA-WA). It was a free, inclusive event honoring Pacific Islander elders, featuring cultural celebration, resource sharing, and food. This was a meaningful opportunity to connect directly with community members and multiple community organizations and businesses serving Asian, Native Hawaiian, and Pacific Islander communities.

Surveys and Interviews with Community Members

Council staff conducted **surveys and interviews with 209 community members who were 14 to 65 years of age and lived across 11 counties**. Staff engaged people in community settings including health fairs, food banks, sporting events, and community gatherings. Our access to community spaces and interactions with community members were only possible with partnership and guidance from local trusted leaders. In-person conversations allowed us to extend participation and input beyond online or formal responses. The purpose of these interviews was to listen directly to community members' views, experiences, and priorities and to ensure that a range of voices were heard.

See **Appendix A** for a more detailed description of the community members we interacted with (by county and age) as well as the issues people shared with us (breakdown of resources and barriers).

Resources and Barriers

During summer 2025, we asked 111 community members about community priorities through 3 main questions:

1. What does health and well-being mean to you?
2. What types of barriers are affecting you every day?
3. a) What resources do you wish were more accessible?
   b) Are there any resources you had no issues of accessing?

Themes from the 111 surveys and interviews are outlined below.

- Descriptions of health and well-being:
  - Strength and energy to care for self and family
  - Mental and emotional well-being; being “in tune” with one’s body
  - Balance: physical, spiritual, social health
- Barriers:
  - Time constraints, especially for people caring for family (parents, caregivers)
  - Economic hardship: costs for food, rent, transportation, etc.
  - Lack of access to healthy food, healthy diet options, affordable groceries
  - Fear and anxiety related to immigration status and threat of deportation
  - Lack of language access for non-English speakers
  - Physical health barriers: health knowledge, diet
  - Lack of mental health support, mental well-being
- Systemic issues:
  - Fear of deportation affecting access to healthcare and social services
  - Lack of trust in being safe in public or with institutions
  - Immigration status making some resources inaccessible
  - Financial rights
  - Language rights
- Resources people want:
  - Job resources, especially for non-English speakers
  - More affordable healthy food
  - Affordable healthcare
  - Free or more affordable daycare
  - Health fairs, screening events, preventive care
  - Mental health services

Below are some direct quotes, edited only for clarity and spelling. Demographic information includes self-identified gender, age, and race/ethnicity.

"Being a mom, active church member, working 12-hour shifts 4 days a week, and baking cakes as a side hustle, when can I exercise?"

—Female, 27, Pacific Islander

“For me, health and well-being is being well mentally and emotionally, being in tune with your body, making sure all your body works together. Mental health is really important.”

—Female, 49, African/Black

"I am so afraid of getting deported. My family depends on me. I have to go to work with the fear of never coming back and hug my grandkids. I am afraid to go to the doctor and that they will ask for my status."

—Male, 52, Mexicano

"Barriers? Being an immigrant in this country."

—Female, 45, Hispanic

"There is not work anymore. I work doing whatever I can find. The weather is getting hotter each year, climate change is a big problem."

—Male, 47, Mexicano

"Barriers that are affecting me daily are financial hardships and the lack of regulation on drinking water here at Sunnyside."

—Female, 26, Hispanic

"I wish daycare was free for all and healthcare affordable; you have to decide between staying at home and taking care of your kids but then you cannot afford rent."

—Male, 42, Hispanic

"I wish there were more food banks, and health fairs like this one. Thanks to this health fair, I find out I am pre-diabetic. Now I know I have to make some changes on my diet and exercise."

—Male, 52, Hispanic

Meetings with Community Leaders

Staff met with leaders across several counties to better understand community concerns.

- **Mason County**: Staff met with two leaders, one from the Q'njob'al community, one from the Mam community. Some key discussion topics included **Indigenous health, cultural practices for health, and health access issues in rural areas.**
- **Lewis County**: Staff met with an immigrant community leader. Some key discussion topics included the **need for language access, impacts of immigration policies, and lack of trust in systems.**

- **Thurston County**: Staff met with a non-profit sector leader. Some key discussion topics included attacks on immigrant communities, the need for shared resources, and family separation due to immigration enforcement activities.

Community Gathering in Sunnyside

In September 2025, some Council Members, staff, and partners gathered with local residents in Sunnyside. Everyone sat in a large circle, creating a space where community members could speak directly with Council Members and partners. Community shared their daily experiences in the Valley, the barriers they face related to health and well-being, and their hopes for the future. The conversation was mainly in Spanish, with interpretation services provided for English speakers.

> *"I'm glad you're taking into consideration the participation of the community. The information is not just [from] a couple of people, but for everyone. I hope this meeting is beneficial and productive for our lives."*
>
> —Community Member

The discussion focused on:

- Civic participation
- Accountability
- Cost of living
- Labor conditions and farmworker rights
- Food and nutrition
- Enforcement activities against immigrants
- Children's experiences

Civic Participation

Many community members shared that it is difficult to communicate with government agencies. Some residents do not have access to a computer or do not know how to use one, which makes it hard to email government staff. Others reported calling phone numbers provided by agencies multiple times without receiving a response. Participants also shared concerns that government jobs that focus on direct community engagement are being cut, which makes it harder to access information and resources.

Community members expressed a need for clearer and more frequent information about what the government is doing. They explained that when people understand what is happening, they are better able to vote, work together, and defend their rights as a community.

Accountability

Participants emphasized that state agencies must be accountable to the people they serve. Many shared that government often listens more to people and organizations with money and access to lobbyists, rather than to people with fewer resources. Community members described how politicians often visit communities when they are running for office but stop listening once they are elected. Farmworkers shared that they have spoken about unsafe and unfair conditions for many years without seeing real change.

"Can the Governor talk with us? Maybe the Council can talk with the Governor to create better laws that can protect us."

—Community Member

Cost of Living

The rising cost of living was a major concern. Some parents reported working two or three jobs just to cover basic needs and care for their children. Others shared that rent and utilities have increased so much that they have taken out loans to stay housed. Participants noted that while the government has provided gas exemptions to ranchers to support their businesses, similar support is not available to families with fewer resources.

"The water, electricity, housing, every type of rent—everything is so expensive—the cost of life is very high. What we're earning is not enough. We have to make the choice to pay for the lights or the water, otherwise we're going to stay on the streets."

—Community Member

Labor Conditions and Farmworker Rights

Community members described unsafe and unfair labor conditions, especially for farmworkers. Many workers reported not taking breaks because of pressure to meet quotas. Some protections that existed in the past are no longer being enforced. Workers shared that extreme heat causes illness, and that injuries at work often lead to job loss rather than support.

Several participants connected these conditions to racism and dehumanization.

"It is modern slavery. They're doing it on purpose. They're doing it because of racism. They see us as less. They say there's no money to pay. They say Hispanic people make society positive, but don't want to give us documentation and give us power because they know we'll make positive change for our communities."

—Community Member

Community members stressed that sometimes the issue is not about creating new laws but enforcing the laws that already exist.

"It's not always about making more laws—it's making sure the laws already in place are followed."

—Community Member

Participants shared concerns about employers avoiding responsibility when workers are hurt, even though they are supposed to provide protections for workplace health and safety. One injured farmworker shared the difficulties of trying to continue working and find other employment.

"L&I [Department of Labor and Industries] said I could work so they couldn't put me on disability… The foreman was strict. Even if you were sick, you had to be working fast… I want to keep working. I checked other jobs. They said they couldn't hire me because I didn't speak English. It shouldn't be a problem because everyone here speaks Spanish, but they say you have to learn English. I get kind of discouraged."

—Community Member

Food and Nutrition

Participants expressed concern about children's access to healthy food. Many shared that school meals are often processed or reheated from previous days, but for some children, these meals are the only food they receive. Some children attend school while sick because school meals are their only reliable access to food. Community members also reported that public assistance programs and food banks are sometimes not enough to meet family needs.

"How can we have health with all the bad influences, bad education, and bad nutrition?"

—Community Member

Enforcement Activities Against Immigrants

Fear related to immigration enforcement affects daily life for many families. Community members shared that people are afraid to leave their homes, go to work, or participate in daily activities because of the risk of family separation. When people do not work or leave home, they lose access to food, services, and necessities. Fear of exposure due to documentation status prevents many from reporting abuse or unsafe conditions, especially when combined with the stress of rising living costs.

"A lot of us know what our rights are but we don't say anything. How am I going to pay my rent? I don't have a Social Security Number. I can't apply for unemployment. That promotes the abuse of rights and silencing."

—Community Member

"We have flesh and skin; we have feelings. Just because we don't have the papers doesn't mean we have less value."

—Community Member

Children's Experiences

Community members shared deep concerns about the impact of immigration enforcement on children. Some children are afraid their parents will be taken.

"What if I come home and you're not here?"

—Community Member

Participants described serious mental health impacts, including anxiety and depression. Some shared that children as young as nine years old are talking about suicide.

"A lot of children as young as 9 years old are talking about suicide, it's very alarming."

—Community Member

Children are also afraid for their futures. They fear not being able to finish school or being deported to a country where they do not know the language. Families shared that immigration fear has led to lower school attendance, with one participant reporting a classroom dropping from 28 students to only 8 or 9.

"With all of these budget cuts, I'd like to know what the state will do to guarantee the safety, education, and health of our children."

—Community Member

Healthy Environment

Community members raised concerns about environmental hazards and lack of enforcement of environmental protections. Participants shared worries about water quality, air pollution, pesticides, and smoke, and how these conditions limit children's ability to play outside safely.

"How can our children grow up healthy and go out and run if we ourselves can't be outside at this time because of the pesticides and smoke?"

—Community Member

Interconnectedness of Issues

Community members emphasized that these issues are deeply connected and cannot be addressed separately. High living costs, unsafe environmental exposures, lack of protections, fear of discrimination and immigration enforcement, and limited access to education all affect families at the same time. Farm workers face unsafe labor conditions while also struggling to afford housing and food. Children experience trauma from family stress, immigration enforcement, and lack of stability, while suffering exposure to unhealthy environments and limited nutrition. Fear of punishment makes it harder for people to speak up, which allows unsafe conditions to continue. These overlapping issues create long-term harm and make it harder for families to be safe, healthy, and hopeful.

"I think everything goes together, hand in hand. It's bad salary, bad health, pesticides, extreme climate, extreme heat and cold."

—Community Member

Hopes for the Future

Despite these challenges, community members expressed hope and strong desire for real change. Participants shared that they do not want to continue repeating the same concerns without action. There is a clear call for better conditions for both current residents and future generations. Community members identified the ability to work without fear of immigration enforcement as essential for safety and stability. Participants described justice and fair treatment for farm workers as basic needs, not privileges. People highlighted the lack of affordable housing as an urgent issue, along with the need to recognize community strengths and individual talents as part of building meaningful change.

"I have the hope that one day we can live in a healthy environment, cultivate food, have a community where we support each other, and make our own businesses so we're not dependent on big industries."

—Community Member

"What can we do to make this change, because the change is within each one of us."

—Community Member

Conclusion

There is need for sustained investment in direct community engagement across the state so that communities can meaningfully participate in policy discussions and decisions. When people are included early and consistently, polices and systems are more responsive, effective, and grounded in real experiences.

While current conditions are creating extraordinary challenges and many people are experiencing uncertainty and loss of hope, the Council continues to witness strong community courage and resilience. Communities are finding ways to support one another despite adversity. At the same time, government has a responsibility not only to support that resilience, but also to prevent policies and systems from causing harm or adding to the challenges people already face.

By choosing to engage with us, communities offered deep wisdom about what health and well-being mean in their daily lives. People described well-being as having the resources to care for their families; time for themselves; mental, spiritual, and emotional balance; and the ability to meet basic needs such as having food, housing, transportation, and healthcare. Many community members have emphasized that the barriers they face are not due to a lack of effort, but rather to systems that make daily life more difficult such as high costs, limited language access, fear of deportation and family separation, and the lack of accessible resources close to home.

Community input reinforces the importance of identifying challenges and inequities across systems, while also being clear about what we want to build into those systems to strengthen and sustain health and well-being for all in Washington. The Council looks forward to continued work with partners developing a shared vision and goals that reflect community priorities and support long-term well-being.

Appendix A. Detailed Survey and Interview Results

This section includes a detailed description of the community members we interacted with (by county and age) as well as the issues people shared with us (breakdown of resources and barriers).

A lower or higher participation rate in certain geographic areas or among certain age groups is more reflective of the Council's limited resources and evolving practices, rather than a reflection of communities' strengths, interests, or civic engagement.

Figure 1. Participants' county of residence

The map below shows the 11 counties where survey and interview participants lived: Benton, Clark, King, Lewis, Mason, Pierce, Snohomish, Spokane, Thurston, Whatcom, and Yakima counties.

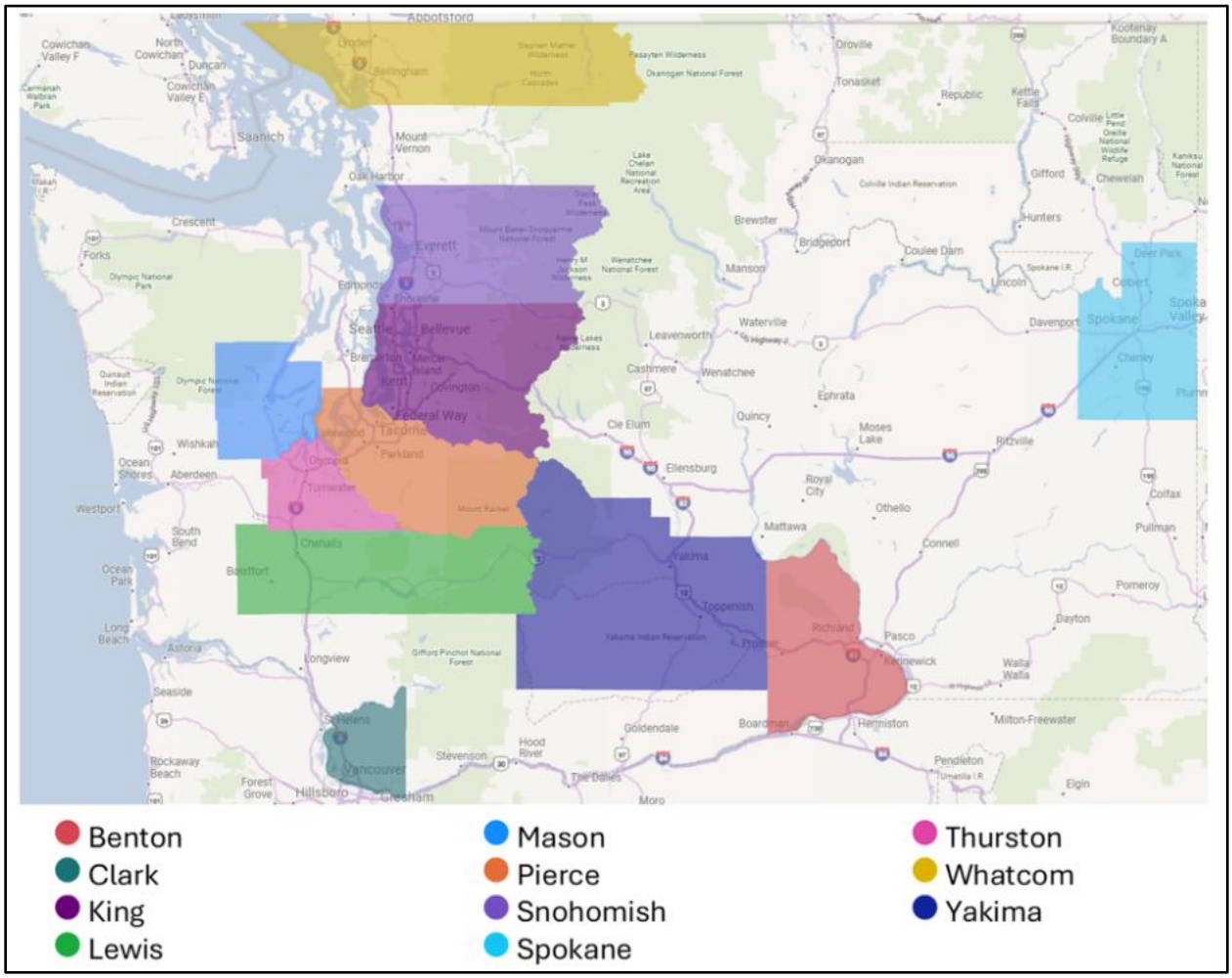


Figure 2. Number of participants per county

The chart below shows the number of participants from each county. The highest number of participants were from Mason County (87 people), followed by Yakima (53) and Pierce (24) counties. A moderate number participated from King (19) and Thurston (12) counties. A smaller number participated from counties such as Snohomish (5), Benton (2), Clark (1), and Spokane (1). Very few participants (3) did not share their county of residence.

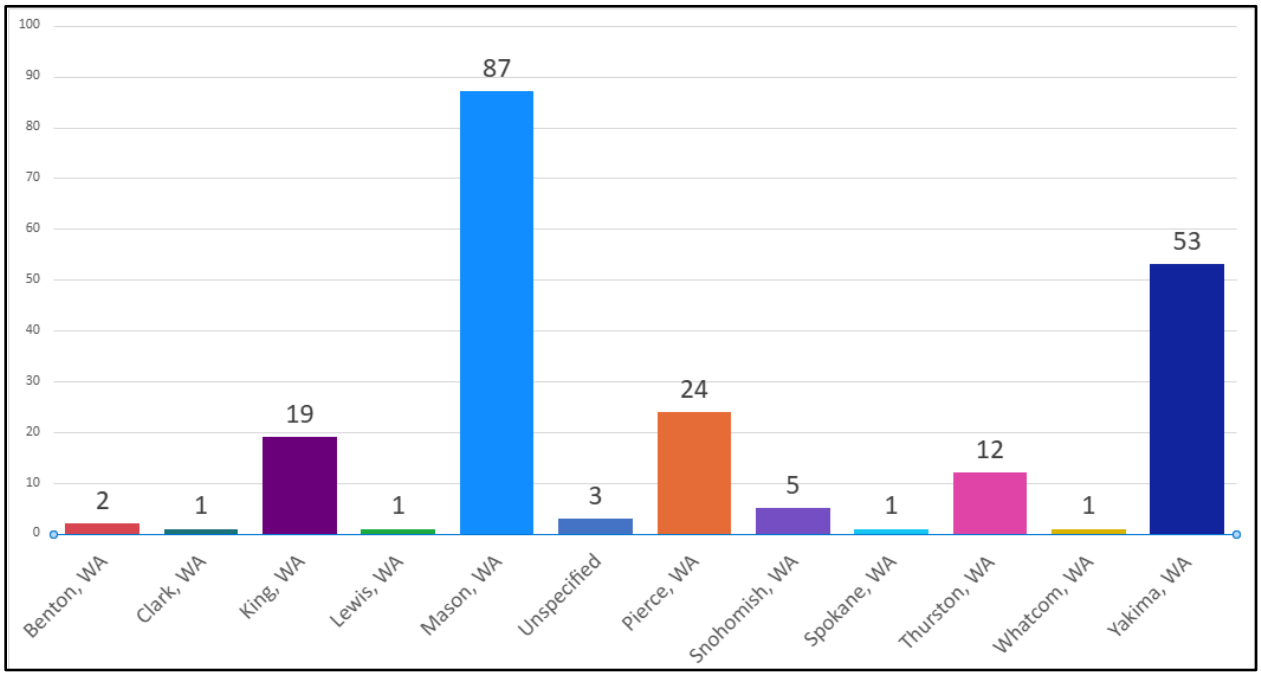


Figure 3. Percentage of participants by age group

The chart below shows the range and distribution of ages for the 209 survey and interview participants. The largest age group included people 25 to 34 years (about 33% of participants), followed by people between 35 to 44 years (about 22%) and 24 years or younger (about 20%). A smaller portion participated between 45 and 54 years old (about 19%) and 55 to 64 years old (about 4%), and very few people 65 years and older (less than 2%) participated. Two participants did not share their age. This distribution shows that the people we engaged mostly younger and middle-aged adults through survey and interviews in 2025.

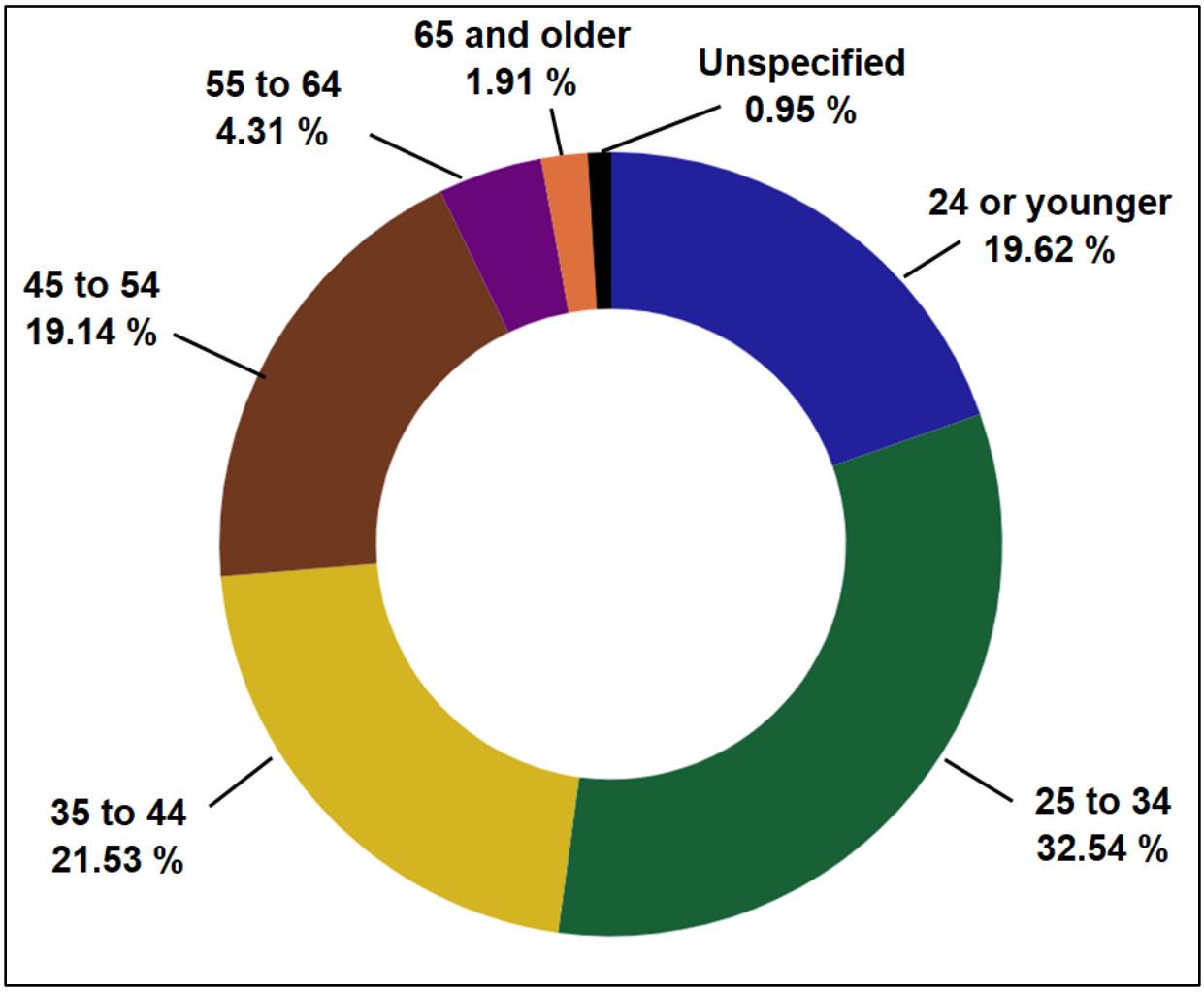


Figure 4. Question: What does health and well-being mean to you?

Participants offered diverse meanings for health and well-being, some sharing multiple aspects of health and well-being within one response. Nearly half (48.65%) of the 111 participants described mental health as a main aspect of health and well-being. The chart below illustrates how often certain aspects of health and well-being came up across all aspects mentioned (n=205), with the most frequent being mental health (around 26% of all aspects mentioned), physical health (around 21%), nutrition (around 15%), exercise (around 10%), and family (7%). Some other themes included financial stability, self-determination, healthcare access, and public safety.

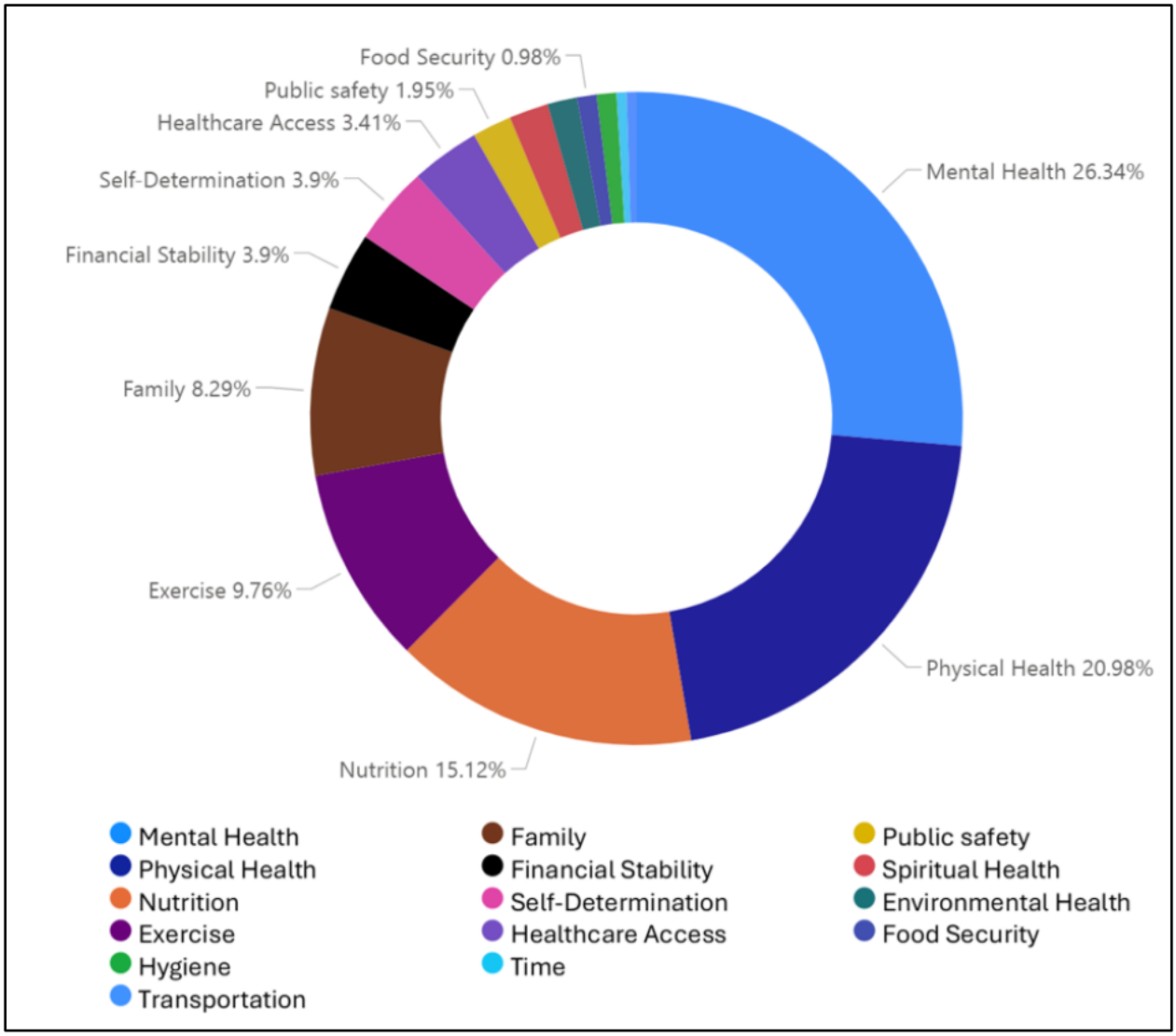


Figure 5. Question: What types of barriers are affecting you every day?

About one-third of the 111 participants (36%) said financial challenges are the main barrier. Additionally, the chart below shows the diversity of barriers that participants reported, with some respondents expressing more than one type of barrier (n=217). The barriers that came up most frequently included financial barriers (around 18% of all barriers mentioned), job insecurity (around 14%), and immigration enforcement activities (around 10%). Some other barriers included lack of language access, transportation, healthcare access, mental health services, food security, and housing.

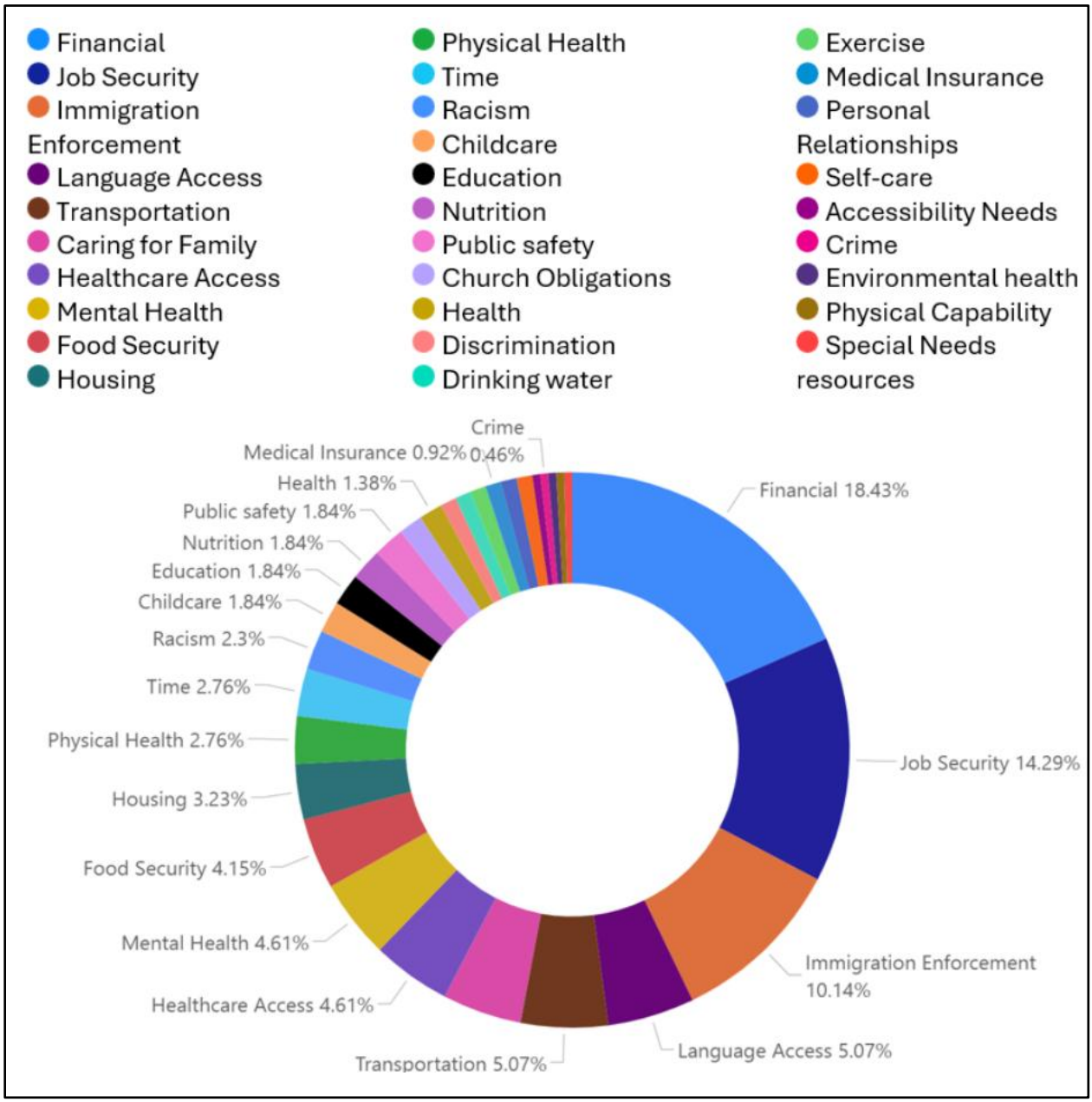
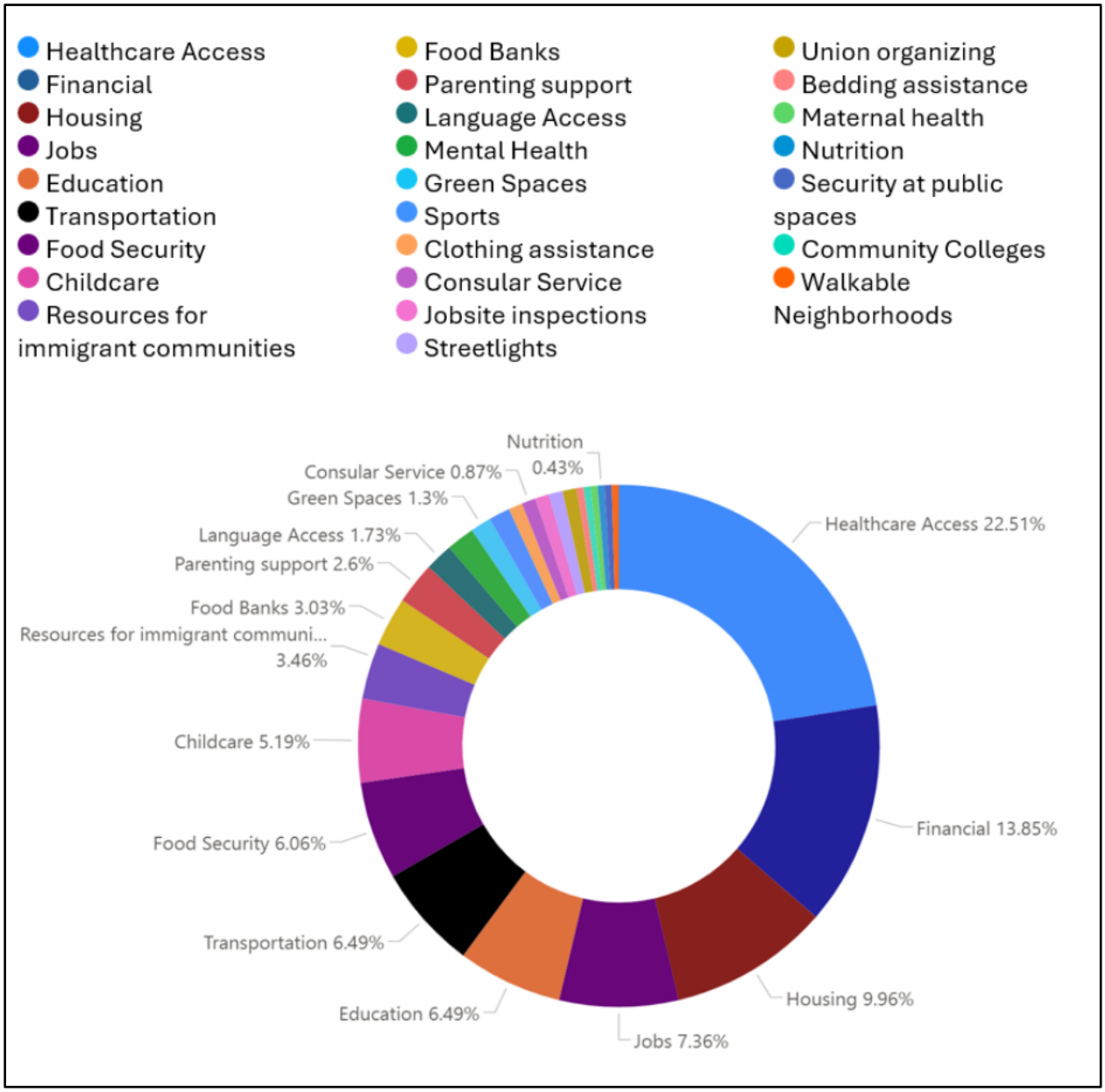


Figure 6. Question: What resources do you wish were more accessible?

Almost half of the 111 participants (around 47%) said they wanted better access to healthcare. Additionally, the chart below shows the diversity of resources participants mentioned, with some respondents expressing more than one type of resource they wish were more accessible (n=231). The types of resources mentioned most frequently included healthcare access (around 23% of all resource types mentioned), financial resources (around 14%), housing (around 10%), jobs (around 7%), education (around 6%), and transportation (around 6%). Other resources included food security, childcare, resources for immigrant communities, food banks, language access, green spaces, consular services, nutrition, etc.