

2023-2024 CHS Division Racism is a Public Health Crisis & Equity, Racial and Social Justice Plan

Introduction & CHS Commitment

Racism is a Public Health Crisis. CHS recognizes that **Indigenous and Black people** experience the most persistent and greatest health disparities due to the legacies of genocide, slavery and racism. And we recognize that **all people of color** are harmed by racism. The CHS RPHC and ERSJ Plan is a call to action to address racial disparities in health outcomes and to undo systemic racism, while also committing to undoing and preventing harms to other oppressed identities.

CHS programs and services will be equitable and responsive if we listen to and are led by community. This requires new approaches that build relationships and trust – and result in bringing resources to the people and places that ask for them. Reducing inequities in the community requires that we **also reduce inequities in our workplaces** and that we have a workforce committed to being responsive to the community. We commit to providing time/resources, measuring our progress, and creating accountability.

RPHC Anti-Racist Organizing Principles

Anti-racist
Focus where negative impacts have been most harmful
Center on Black, Native, and Brown experiences and voices
Responsive, adaptive, transparent, and accountable
Focus on addressing root causes

Note: This document is organized around **three focus areas**, created by the PH Office of Equity & Community Partnerships (OECPP). These focus areas include workforce/workplace equity, community partnerships, and policy & budget. Within each focus area we include a brief definition, followed by CHS Division priorities.

FOCUS AREA: Workforce/Workplace Equity

Create spaces and opportunities for employees who are Black, Indigenous, POC and other oppressed identities to engage in healing, restoration, and transformation, and create spaces and opportunities for White employees to take greater ownership of racism.

Create opportunities and pathways for promotion and career advancement, and increase transferrable skills and knowledge-building, for employees who are Black, Indigenous, POC and other oppressed identities.

CHS Key Priorities	CHS Lead(s)
<p>1. CHS Employee Equity Committee Elevate the voices of our staff by establishing and sustaining an employee-led, workplace-based CHS equity committee (internal). The committee’s purpose is to help CHS build and foster awareness, increase understanding and develop anti-racist strategies to further equity and racial justice, both internally and externally.</p>	Reeni Nair Keith Seinfeld
<p>2. PH Affinity Groups/Spaces Partner with OECP and Headwater People to support the implementation of PH affinity groups, fostering community connections, allyship, restorative healing and wellbeing for Black, Indigenous and Brown staff. These groups/spaces will be created in alignment with King County policies and procedures.</p>	Reeni Nair OECP
<p>3. Equity in Hiring, Retention and Promotional Practices Promote equitable processes and opportunities that provide visibility about PH job opportunities (internal/external) to increase community representation in our workforce; and implement strategies for recruitment, onboarding, retention and promotion of Black, Indigenous and Brown staff and other oppressed identities.</p>	Reeni Nair Sheryl Davis
<p>4. Anti-Racist Learning, Development and Culture Transformation Lead efforts to normalize and operationalize our understanding of internalized, interpersonal, institutional, and structural racism through ongoing division-wide learning and development opportunities for staff at all levels.</p>	Reeni Nair Keith Seinfeld
<p>5. Eliminate microaggressions at work In partnership with Prevention Division, Human Resources and Headwater People, address workplace microaggressions, anti-Blackness and anti-Black racism, and promote inclusivity, transformative justice and restorative healing practices and culture that are responsive to the needs of marginalized staff.</p>	Reeni Nair
<p>6. Advancement of equity, racial and social justice through technology and digital equity Promote and develop strategies to advance digital equity by providing inclusive engagement and technology related skill-building opportunities for employees. Examine existing digital inequities and explores ways to use new and existing technology resources to empower staff to thrive.</p>	Amira West Travis Erickson Reeni Nair

<p>7. Employee Communications with ERSJ emphasis Develop consistent, accessible communications that build trust and promote a culture of equity, inclusion and belonging across the division. Use new and existing tools and channels to support and elevate the work of employees who are Black, Indigenous, POC and other oppressed identities—including, but not limited to the work described in this plan.</p>	<p>Melissa Warner Reeni Nair</p>
--	--------------------------------------

FOCUS AREA: Community Partnerships

Build and sustain relationships with local communities most impacted by structural racism and other forms of oppression, and engage in community co-creation processes by inviting their input on our work.

This area includes: Creating processes to hear from Black, Native and Brown community partners and clients about our programs and services, to be responsive to their needs; engaging with community partnerships to identify areas of improvement and increase collaboration (including compensation for their time); creating pro-equity contracting processes that are visible and accessible; improving Language Access.

CHS Key Priorities	CHS Lead(s)
<p>1. Listening and bringing resources to Black, Indigenous and Brown communities. Increase access to services and strengthen relationships with communities frequently made “invisible” through oppression and omission.</p> <ul style="list-style-type: none"> • CHS Black Community Equity Team will continue to lead in Skyway to support pop-up resource fair events, development of the Skyway Resource Center, and other ways of bringing resources to the community. This team will expand similar work in other parts of King County and will convene a new Black Providers Network. • Through the Access & Outreach program, Equity Teams will respond to requests from the Latinx/Hispanic community, and to African immigrant communities. 	<p>Devon Love Giselle Garcia-Zapata Bishaw Gezie Daphne Pie</p>
<p>2. Resources for community-based organizations Provide materials and technical support for community-based organizations so they can increase education, literacy and awareness of health benefits, access to quality medical and dental care, and wellbeing among Black, Indigenous, POC and other oppressed communities. Build and maintain strong community alliances by supporting and co-sponsoring health fair events created by the community.</p>	<p>Devon Love Daphne Pie</p>
<p>3. Engage with local Public Health partners on a monthly basis to create a “community of practice” that collectively learns about racial and health inequities and collectively works to implement anti-racist, equitable health care practices that better serve King County’s historically under-resourced communities. Partners include, but are not limited to, safety net providers who form the continuum of care supported by the Community Health Partnerships program as well as other King County health care and social service agencies.</p>	<p>shonita savage Sheryl Davis, Keith Seinfeld</p>
<p>4. Decolonizing the data – Data Equity Recognizing that the populations and communities who need CHS services are always changing, CHS will create data systems to identify and understand groups that might be “invisible” to our existing programs, so that we better address their needs. Data leads will examine and update how we collect and look at data to inform our policies, programs, practices, and community capacity. Adapt data systems to see and understand the invisible homeless (doubled-up, refugees, incarcerated).</p>	<p>Lee Thornhill Michelle Pennylegion</p>

FOCUS AREA: Policy & Budget

(Public Health policies are the rules, regulations, mandates, laws, guidelines, and other big decisions that are created to influence the health of the population.)

Prioritize investments and budget support for programs, partnerships and other support models that advance racial equity and address health inequities caused by systemic racism.

Support, develop and advocate for policies that:

1. Address upstream causes of Health Inequities
2. Seek to dismantle racist systems, structures, and institutions
3. Explicitly improve health for Black, Native/Indigenous, and People of Color

CHS Key Priorities	CHS Lead(s)
<p>1. Increase Sexual & Reproductive Health access Sustain and where possible increase Sexual & Reproductive Health access by implementing the King County and Seattle investments in abortion access, informing County/State/Federal policy-makers to address access barriers, and supporting State Legislative Session action to remove barriers.</p>	<p>Heather Maisen Michelle Pennylegion</p>
<p>2. Budget equity impact review process CHS will strengthen the Equity Impact Review process, so that each CHS budget decision, includes discussion and analysis of impacts on historically under-served communities (for example, by always including the question, <i>what communities are we missing?</i>).</p>	<p>Maureen Peterson</p>
<p>3. CHS voice in State programs Influence state-level policies and decision-making on behalf of CHS clients and communities, by supporting CHS employees to participate on various boards and committees at the state level, or in coalitions with other health and service providers/organizations. Participation gives voice to CHS programs and clients with those who set policies and make decisions at the State that directly influence our programs, services, and the communities we serve.</p>	<p>Semone Andu Vazaskia Crockrell Travis Erickson Lynn Kidder Heather Maisen Marcy Miller MaiKia Moua Daphne Pie Mia Shim</p>