

# Public Health Emergency Preparedness and Response Equity Impact Review Tool

Response v1. Response Staff and Leadership

*An Equity-Based Decision-Making Tool*

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## Glossary of Terms

<b>Term</b>	<b>Definition</b>
<i>Budget Constraints</i>	Financial considerations during a response include funding from federal partners, prioritizing certain response operations, and certain limitations on how response funding may be utilized.
<i>Cross-generational equity</i>	Effects of current actions on future generations of communities. Examples include how current response activities could impact future health outcomes, social programs, accentuate white privilege, cause resource depletion, impact climate change, and affect access to housing or social services
<i>Distributional equity</i>	Fair and just distribution of response resources, information, and support activities to all affected communities across the impacted geographic region
<i>Emergency Response Plan</i>	A written document establishing contacts, operating procedures, and actions taken by Public Health to minimize the impact or potential impacts of a Public Health Emergency.
<i>Equity</i>	In the context of public health emergency response, equity is being defined as access to response services, medical care, information, and other emergency response resources delivered through response plans and operations to support a communities' health during and after a response.
<i>Equity Value</i>	Supporting health equity in terms of community-wide access to response services, information, social supports, and recovery efforts.
<i>Functional/Operational Constraints</i>	The scope of response operations, including roles and responsibilities and the response structure provide certain constraints on operations
<i>Health and Medical Area Command (HMAC)</i>	This is Public Health – Seattle & King County's response structure during a Public Health Emergency. HMAC is activated when an incident is unable to be managed through existing infrastructure or routine operations, public information and partner coordination needs are high, and the situation is dynamic.
<i>Policy Constraints</i>	Existing policies (for care delivery, outreach, staff surge capacity, hiring, etc.) in the LHJ may need to be modified or re-examined during an emergency to support response operations.
<i>Positionality</i>	Positionality refers to the how differences in social position and power shape identities and access in society. One's SES, demographic identifiers, sexual orientation, and gender identity all play a role in shaping one's positionality.  Staff members involved in the equity impact review process should reflect and share their positionality. Names do not need to be noted below but take note of other information that participants consent to sharing/broadly describe the positionality of participants.
<i>Process equity</i>	Inclusive, open, and fair access by all partners to information, resources, and response support services. Process equity relies on all affected groups having access to and meaningful experiences with government agencies and response operations
<i>Public Health Emergency Preparedness (PHEP)</i>	A branch of emergency preparedness that utilizes the phases of emergency management to prepare for, respond to, and recover from a Public Health Emergency
<i>Public Health Emergency</i>	An outbreak of an existing reportable condition, emerging infectious disease, bioterrorism attack, natural disaster event, or pandemic that threatens the public's health.
<i>Response Activities</i>	Any systematic set of actions to mitigate or respond to a Public Health Emergency.

## Introduction

The Equity Impact Review (EIR) Tool for Public Health Emergency Preparedness (PHEP) and Response is a decision-making tool to support response staff and leadership during the response to a public health emergency in King County. This tool is an adaptation of the [King County Equity Impact Review Process](#) that examines the differential impacts of proposed strategic, operational, and tactical emergency response activities on communities in King County. The EIR Tool rigorously examines the equity impacts of response operations and holistically evaluates response processes to prevent institutional racism from influencing response activities, and to aid in remedying long-standing inequities that are amplified during disasters.

***This tool is completed by the Command Staff and other response leadership roles in the Health and Medical Area Command.***

When using this tool, consider how each phase applies an equity lens to:

- The decision-making processes during a response
- Specific response operation activities
- Response policies
- The processes for demobilizing and/or transitioning response operations

Consider which communities are most negatively impacted by the emergency scenario and response operations. Questions are oriented towards assessing whether and how communities are centered in decision-making processes for response activities, the development of emergency information and guidance, and outreach activities associated with response operations. Additional tools, resources, and guides are cited throughout each phase in this tool to support with evaluating operational decisions.

## Equity Frameworks for Public Health Emergency Preparedness and Response

The EIR is developed from a set of equity frameworks specific to Public Health Emergency Preparedness and Response. The tool is aligned with the [King County declaration of racism as a public health crisis](#) with a recognition that historically and currently King County has been complicit in perpetuating structural racism and white supremacy. The confluence of structural racism and disabilities, gender identity, sexual orientation, class, and other intersectional identities leads to inequities in health outcomes that are amplified in the context of an emergency.

The structure of this tool is grounded in health equity frameworks<sup>1,2</sup>, principles of public health emergency preparedness<sup>3</sup>, the [Comprehensive Preparedness Guide](#)<sup>4</sup>, lessons learned from previous responses, and the values of community engagement in PHEP (including the [Emergency Response Bill of Rights](#))<sup>5,6</sup>. The overarching framework for organizing [essential elements of equity in preparedness and response](#) encompass the following dimensions:

- ❖ **Distributional equity**—Fair and just distribution of response resources, information, and support activities to all affected communities across the impacted geographic region.
- ❖ **Process equity**—Inclusive, open, and fair access by all partners to information, resources, and response support services. Process equity relies on all affected groups having access to and meaningful experiences with government agencies and response operations.
- ❖ **Cross-generational equity**—Effects of current actions on future generations of communities. Examples include how current response activities could impact future health outcomes, social programs, accentuate white privilege, cause resource depletion, impact climate change, and affect access to housing or social services.

These dimensions ground the EIR tool in the abovementioned frameworks. The process of implementing an equity impact review facilitates the merging of real-time empirical data on community health impacts with pre-identified information on community characteristics to inform decision-making and implementation of response actions that closely meet the immediate needs of communities in King County during a disaster.

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<sup>1</sup> Peterson A, Charles V, Yeung D, Coyle K. The Health Equity Framework: A Science- and Justice-Based Model for Public Health Researchers and Practitioners. *Health Promotion Practice*. 2021;22(6):741-746. doi:10.1177/1524839920950730.

<https://journals.sagepub.com/doi/10.1177/1524839920950730>

<sup>2</sup> Centers for Medicare and Medicaid Services. CMS Framework for Health Equity 2022-2032.

<https://www.cms.gov/files/document/cms-framework-health-equity.pdf>

<sup>3</sup> Centers for Disease Control and Prevention. *CDC's Public Health Emergency Preparedness Program: Every Response is Local*.

<https://www.cdc.gov/cpr/whatwedo/phep.htm>

<sup>4</sup> FEMA. *Developing and Maintaining Emergency Operations Plans: Comprehensive Preparedness Guide (CPG) 101*. 2021.

[https://www.fema.gov/sites/default/files/documents/fema\\_cpg-101-v3-developing-maintaining-eops.pdf](https://www.fema.gov/sites/default/files/documents/fema_cpg-101-v3-developing-maintaining-eops.pdf)

<sup>5</sup> Bay Area Regional Health Inequities Initiative; Public Health Alliance of Southern California. *Embedding Equity into Emergency Operations: Strategies for Local Health Departments during COVID-19 and Beyond*. [https://phasocal.org/wp-content/uploads/2020/07/Embedding\\_Equity\\_Into\\_Emergency\\_Ops\\_Brief.pdf](https://phasocal.org/wp-content/uploads/2020/07/Embedding_Equity_Into_Emergency_Ops_Brief.pdf)

<sup>6</sup> Public Health – Seattle & King County. *COVID-19 After-Action Report, January 2020-January 2022*.

<https://kingcounty.gov/depts/health/covid-19/data/~/media/depts/health/communicable-diseases/documents/CI19report-PHSC-2022-09-22-2022.ashx>

## EIR Implementation

Equity-focused emergency preparedness is one component to dismantling the impacts of structural racism. Equity-focused preparedness involves centering community in planning and response and creating and implementing responsive, adaptive, and anti-racist preparedness tools as an active commitment to addressing racism as a public health crisis.

**When conducting this review, consider the needs of the individuals that will be most negatively impacted by the disaster and those that will need to know information quickly to make informed decisions for their communities.** The tool is a decision-making support for identifying, implementing, and evaluating equity-led decisions for response activities, i.e., through providing an equity review of incident objectives, identifying priority impacted communities, evaluating outreach and engagement activities, examining resource allocation, and planning for demobilization and/or transitioning operations.

It must be acknowledged that the individuals completing this tool and those responsible for making decisions regarding response operations, may not be representative of the communities that are most negatively impacted by the disaster. Therefore, for each phase of the review process, it will be essential to remain reflective of internalized biases and individual positionality<sup>7,8</sup>. Through a process of reflexivity and recognizing the shortcomings in perspectives of those completing this tool, aim to intentionally sharpen focus on the ways in which different forms of oppression (and simultaneously privilege), i.e., race, gender, class, language, sexual orientation, disability, place of birth, etc., may negatively impact people's ability to access and receive support services and information through response operations.

### In summary...

**EIR Purpose:** Ensure that equity impacts are rigorously and holistically considered and advanced in the implementation of the response operations (i.e., Incident Objectives, response strategies and activities, information and guidance, policies, funding allocations, and field activities)

**How and When to Use the EIR Process:** It is expected that the equity impact review is embedded within the processes of developing Incident Action Plans, Incident Objectives, and decision making for response activities during each operational period in a response. The tool may be used during Command Staff meetings as well as by individual Operations Section Branches and Groups when deliberating on response operations.

**When conducting this review process:** A) Consider organizational and cultural diversity, B) Include members who regularly engage with communities or connect with impacted communities, C) Involve team managers and response leadership, and D) Engage subject-matter experts on community knowledge and response operations

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<sup>7</sup> National Equity Project. Frameworks for Equity:

<https://www.nationalequityproject.org/resources/frameworks#:~:text=Leading%20for%20Equity%20Framework&text=In%20its%20simplest%20form%2C%20the,can%20use%20in%20their%20work>

<sup>8</sup> Identity, positionality, and reflexivity: Relevance and application to research paramedics.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9662153/>. 2022.

## Equity Impact Review Instructions

- ✓ Provide detailed, complete responses to all questions as best as possible.
- ✓ For questions where there may not be complete information: share available information and barriers to getting information.
- ✓ Use graphics, maps, and other visual elements to communicate wherever necessary.
- ✓ If completing this review as a team, identify group norms for addressing questions, note-taking, discussing in a reflective manner, and remaining community-centered. Example group norms may include the following:
  - *Be open to hearing new information and honest conversation.*
  - *Be comfortable with the uncomfortable.*
  - *Participate fully – verbal, written (chat box), and/or active listening.*
  - *Our conversations remain confidential.*
  - *Seek to understand and be curious. Respond respectfully.*
  - *Remember that through this work we are building and sustaining spaces that are community centered.*
  - *No blaming, shaming, judging, or discounting.*
  - *Community trust is built over time and with consistency.*
  - *Be accountable to ourselves and the group.*
- ✓ Identify objectives of the review as a group, i.e., if the equity review is being completed by Area Command and Command Staff to review the outlined Incident Objectives for an operational period, objectives for EIR might look like:
  - *Identify equity gaps in incident objectives use tool to support rectifying gaps*
  - *Identify response activities that may support priority populations*
  - *Evaluate whether incident objectives are addressing disproportionate impacts of public health emergency*

## Introduction Questions

The following questions provide a grounding for this equity impact review process by identifying who comprises the review team. Recognizing certain shortcomings in representation and perspective is essential to counteracting bias in this review process.

**I-1. How many staff participated in this review?**

Click or tap here to enter text.

**I-2. Positionality Reflection**

*List response staff roles and decision-making authority of those involved in completing this review.*

Click or tap here to enter text.

**I-3. Were community perspectives included in this review? If so, list which groups/representative of group were engaged.**

Click or tap here to enter text.



## Phase I: Scope

**Identify who is affected and how to reach them.**

This phase asks for an identification and contextual analysis of the impacts of the disaster on communities in King County. Conduct a comprehensive analysis of the contextual factors that may impact equity during the emergency response. Consider demographic data, socioeconomic disparities, historical inequities, cultural factors, and social determinants of health. This analysis will help identify specific equity considerations for the affected communities.

When answering the questions in this Phase, consider use existing resources like the [King County Social Vulnerability Index Map](#), [Communities Count](#), the [Community Engagement for Public Health Emergency Preparedness Guide](#), community risk, impact and/or preparedness findings from previous response activations and/or exercises, and [data on community characteristics](#) gathered through steady-state services provided by Sections and Programs at Public Health – Seattle and King County.

<b>I-1. Community Identification – Geography: What locations/geography are impacted by this disaster?</b> Click or tap here to enter text.	
<b>I-2. Identify which population groups are most disproportionately impacted by the disaster.</b> Click or tap here to enter text.	<b>Identify the specific disproportionate impacts to the population groups due to the disaster.</b> Click or tap here to enter text.
<b>I-3. Community Outreach: Has there been outreach to the groups identified in I-2?</b> <b>A) What types of information were included in the outreach?</b> <b>B) Did outreach include information on existing response services and how to access them, current or future health risks, non-pharmaceutical interventions, accessibility to ongoing medical needs, and accessibility to other social services?</b> <b>C) Was outreach conducted in language and in accessible formats/through accessible modalities?</b> Click or tap here to enter text.	
<b>I-4. Community Impact: What are the current reported effects, impacts and/or outcomes of response operations based on feedback from outreach and/or other direct service operations?</b> Click or tap here to enter text.	
<b>I-5. Community Engagement: What efforts have been made to include community in decision-making regarding response operations?</b> Click or tap here to enter text.	
<b>I-6. Community Impact: What effects, in terms of <u>reach</u> (which people and places), <u>intensity</u> (what effects, impacts and/or outcomes of response activities), and <u>duration</u> (duration of response activities), do the current Response Activities/Incident Objectives have on the population groups identified in I-2.</b> <ul style="list-style-type: none"><li>○ Reach:</li><li>○ Intensity:</li><li>○ Duration:</li></ul>	

## Phase I: Reflections

<b>Did this phase achieve the goal of identifying which communities are most disproportionately impacted by the disaster and how to reach them?</b> Click or tap here to enter text.
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## Phase I: Checklist

This checklist should serve as a point of reflection on whether this Phase provided accurate and sufficient information regarding the most disproportionately impacted populations during a response. If information is insufficient or there were bottlenecks in the review process for this Phase, consider going through the questions again.

- Identify how the current response operations will affect/serve people, places, and SDOH.
- How were the impacts to low-income populations, communities of color, and limited-English speaking residents evaluated?
  - Reach: which people and places will be affected by objectives/strategies outlined in the current operational period of the response?
  - Intensity: what effects, impacts and/or outcomes will the response activities have on people and places?
  - Duration: how long will response activities have an effect– short-, medium-, and/or long-term on community?
- Identify the group of stakeholders and affected parties – including those who have historically not been included or engaged – and their roles in decision-making.

## Phase 2: Assess Equity and Community Context

### Prioritize response operations based on community impacts.

Reference King County's [Determinants of Equity report](#) for more insight into how large systems (i.e., government, the economy, healthcare, education, human services, housing) interact to affect our communities. Remember that these systems are linked; actions can have far-reaching and unintended consequences.

When answering the questions in this phase, consider what is already known about communities in regions that are most negatively impacted by disaster. Use existing resources like the hazard-specific annex for the disaster in question, the Equity Response Annex, and Public Health – Seattle & King County data dashboards for frequent updates on the geographic and demographic impacts of the disaster. In addition, resources such as the [Social Vulnerability Index \(SVI\)](#)<sup>9</sup> should be considered to identify the geographic regions where communities may be most impacted by the disaster and layered inequities.

<b>2-1. Which <a href="#">determinants of equity</a> will be affected by [<i>Response activities and/or Policy Decisions</i>] – try to identify both direct and indirect effects?</b> Click or tap here to enter text.	
<b>2-2. Based on what is known about risks due to the disaster on specific communities, which response activities should be prioritized at this time?</b> Click or tap here to enter text.	
<b>2-3. Are there processes in place to <u>continually</u> engage with the communities most disproportionately impacted by the disaster to learn about impacts?</b> Click or tap here to enter text.	
<b>2-4. What types of data (qualitative and quantitative) are needed regarding community impacts to support changes to response operations?</b> Click or tap here to enter text.	
<b>2-5. What do we know about the root causes of inequities experienced by the communities that are most disproportionately impacted by the disaster?</b> Click or tap here to enter text.	<b>How might these root causes impact the immediate needs of the communities as well as prioritization and delivery of response services?</b> Communities' immediate needs:  Prioritization and delivery of response services:
<b>2-6. What are the potential unintended impacts of response operations along the dimensions of <a href="#">distributional, process, and cross-generational equity</a>?</b> Click or tap here to enter text.	

### Phase 2: Reflections

<b>Did this phase achieve the goal of understanding affected communities' priorities and concerns?</b> Click or tap here to enter text.
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<sup>9</sup> King County Social Vulnerability Index Map (2022) [https://kingcounty.gov/depts/health/emergency-preparedness/Community-Resilience-Equity/~/\\_media/depts/health/emergency-preparedness/documents/king-county-social-vulnerability-map.ashx](https://kingcounty.gov/depts/health/emergency-preparedness/Community-Resilience-Equity/~/_media/depts/health/emergency-preparedness/documents/king-county-social-vulnerability-map.ashx)  
PHEP+R Equity Impact Review Tool

## Phase 2: Checklist

This checklist should serve as a point for reflection whether this Phase provided accurate and sufficient information regarding the most disproportionately impacted populations during a response. If information is insufficient or there were bottlenecks in the review process for this Phase, consider redoing the questions.

- Learn about affected communities', employees', and/or stakeholders' priorities and concerns. (Use the [Community Engagement Guide](#) to help with this.)
- Know which determinants of equity will be affected by *[Response Activity and/or Policy Decision]*– both directly and indirectly. (Reference the [Determinants of Equity](#) report.)
- Know how your proposed actions and services will affect known disparities within relevant [determinants of equity](#). (Use quantitative data and/or gather new information.)
- Identify potential unintended equity-related outcomes of *[Response Activity and/or Policy Decision]*.

## Phase 3: Analysis and Decision Process

**Analyze changes to response operations that emphasize equity.**

This phase asks for an identification and analysis of response operation changes based on the findings of the previous phases of this review. **What changes could the Command Staff pursue to implement equity-based practices through [Response Activity and/or Policy Decisions]?** If the current response operations present the best choices for equity and other community-centered goals, then what alternatives might exist in terms of *how* response operations are organized and conducted?

When answering the questions in this phase, focus on alternative ways of presenting and/or implementing response objectives and/or strategies, especially considering the potential for disproportionate burdens and/or benefits for certain communities through those response operations.

<b>3-1. Based on the prior two phases, what can you change about [Response Activity and/or Policy Decisions] to increase benefits for and reduce burdens on communities? Consider response operations, community outreach activities, standard operating procedures, staffing, funding, and resource allocation.</b> Click or tap here to enter text.	
<b>3-2. What changes have you identified to improve operations to support the most disproportionately impacted communities (as identified in 1-2)?</b> Include a list of each community and discuss changes underneath each grouping	
<b>3-3. What functional, budget and policy constraints affect the implementation of these proposed changes?</b> Click or tap here to enter text.	<b>Identify potential approaches to address functional, budget, and policy constraints given response operations and existing resources.</b> Click or tap here to enter text.

## Phase 3: Reflections

<b>3-4. On a scale of 1-10, with 10 being “Excellent” and 1 being “Poor”, rate how the priorities and concerns of affected communities were incorporated and/or centered in the discussion about changes to [Response Activity and/or Incident Objectives].</b> Click or tap here to enter text.
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## Phase 3 Checklist

This checklist should serve as a point for reflection whether this Phase provided accurate and sufficient information regarding the most disproportionately impacted populations during a response. If information is insufficient or there were bottlenecks in the review process for this Phase, consider redoing the questions.

- Illustrate or map out how key alternatives will affect community and response staff priorities and concerns.
- Evaluate each alternative for who will be disproportionately burdened or benefit - now and in the future. How will alternative actions differ in improving or worsening current equity conditions?
- Include alternatives that target root causes to eliminate disproportionate impact.
- Prioritize alternatives by equitable outcomes and analyze along with **functional and fiscal policy drivers**.

## Phase 4: Ongoing Learning

### Listen, co-learn, and adjust.

This phase focuses on how to implement continued co-learning practices and adjustments response operations to remain consistently responsive to communities' needs throughout a response.

<b>5-1. How will response operations and strategies be evaluated to ensure that response operations remain receptive to community impacts and immediate needs?</b> Click or tap here to enter text.
<b>5-2. What mechanisms are in place to ensure continual feedback from community partners on shifting priorities, needs, and concerns?</b> Click or tap here to enter text.
<b>5-3. What is the process to adjust [<i>Response Activity and/or Incident Objective(s)</i>], in collaboration with affected communities but without causing additional burden to impacted communities?</b> Click or tap here to enter text.
<b>5-4. Describe the plan to communicate the progress of response operations, challenges, and anticipated changes to response operations to:</b> <b>A) All impacted communities</b> <b>B) Response partners</b> <b>C) General public</b> Click or tap here to enter text.

### Phase 4: Reflections

<b>5-5. Did this phase provide sufficient information on lessons learned and information to inform planning for future operational periods?</b> Click or tap here to enter text.
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### Phase 4: Checklist

This checklist should serve as a point for reflection whether this Phase provided accurate and sufficient information regarding the most disproportionately impacted populations during a response. If information is insufficient or there were bottlenecks in the review process for this Phase, consider redoing the questions.

- Evaluate whether the planning approach taken appropriately responds to community priorities and concerns.
- Learn with the community to adjust planning activities and response priorities as the response shifts.
- Communicate progress to all community partners. Plan to incorporate community feedback into future planning.