



## SHIP SUBCOMMITTEE MEETING

Bias     Trauma     Economic Drivers     Access to Care     Behavioral Health

March 9, 2020 | 2:00 p.m. – 4:00 p.m. | Call: (669) 900-6833, Access: 869-908-343

**Members Present:** Leann Johnson (OHA Lead), Natasha Davy, Deborah Benavidez, Clarice Freitas, Keren Wilson

**Members Absent:** Brian Gibbs, Brian Park, Channa Lindsay, Coi Vu, Deborah Martin, Karun Virtue, Kim Sogge, Miguel Angel Herrada, Tim Holbert, Victoria Demchak

**OHA Staff:** Christy Hudson, Elizabeth Gharst

**Members of the Public:** None

### Welcome, Agenda Overview, and Subcommittee Business

Leann Johnson welcomed the subcommittee members to the meeting. She asked the members to introduce themselves. The attending subcommittee members introduced themselves. She explained that the goal for the meeting was to look at the strategies and finalize them.

Natasha Davy remarked that the subcommittee had 9 strategies on the list. The subcommittee would go through the strategies, one by one, and see if they fit the strategy criteria.

### Review of Chosen Strategies and Wording

Leann Johnson read the first strategy related to implementing standards for workforce development that addressed institutional bias. She asked the subcommittee members if they saw any issues with the strategy. The subcommittee didn't see any issues.

Leann Johnson read the second strategy related to human resources practices that promoted equity. Natasha Davy remarked that the strategy was broad and needed specificity in terms of the agency. It was not clear if the strategy should apply to all agencies, or county government. Christy Hudson stated that the hope would be for the strategy to apply to all government agencies. The subcommittee didn't see any issues with the second strategy.

Leann Johnson read the third strategy related to discipline disparities in schools. Keren Wilson asked if the discipline disparities for Native American or Latinx youth would be addressed as well. Leann Johnson answered that the strategy was specific to black boys and girls because the data indicated that the

prevalence for them was higher. Keren Wilson suggested to include all populations and not be specific to one children population. Given the first criteria for choosing strategies is to address a known disparity, and the disparity is for black students, the strategy remained as is. Clarice Freitas suggested changing *boys and girls to youth*.

Leann Johnson read the fourth strategy related to restorative justice models in schools. The subcommittee didn't see any issues with the fourth strategy.

Leann Johnson read the fifth strategy related to holding accountable government bodies to their pledges of racial equity. Keren Wilson asked if it was true that all government bodies had pledges of racial equity. Leann Johnson answered that she didn't think so and clarified that there was a difference between a tangible pledge and a commitment to racial equity. Keren Wilson asked which were the accountable bodies. Christy Hudson answered that it was the users of the SHIP as a tool, which included state agencies, local government bodies, and anyone working on community health improvement plan.

Christy Hudson noted that the fifth and the sixth strategies were parts of the same process. Agencies first had to make a pledge, then budget for adequate investment into communities of color, and finally incorporate equity into agency performance metrics. The subcommittee agreed.

Leann Johnson read the seventh strategy related to ensuring indicator data were reportable for each category. Clarice Freitas asked if age could be added to the list of categories. The subcommittee had no objections to adding age to the list.

Leann Johnson read the eighth strategy related to APD (Agency for Persons with Disabilities). Karen Wilson pointed out that one of the biggest issues in health is medically related transportation. Natasha Davy added that that was the reason for including SHIBA (Senior Health Insurance Benefits Assistance) to the strategy. The subcommittee removed APD and reworded the strategy.

Leann Johnson read the ninth strategy related to advancing the skills and abilities of the workforce to deliver equitable and culturally responsive services. Natasha Davy wondered what that process would look like and who would be doing it. The subcommittee reworded the strategy.

Christy Hudson reminded the subcommittee that the strategies should cover all priority populations and invited the subcommittee to include populations that were not addressed in the strategies.

### **Finalize Strategies and Apply Criteria**

The subcommittee went through the strategies and grouped them under the three goals. It reviewed the strategies proposed by the other four subcommittees and reframed overlapping strategies (e.g., compliance for affordable housing), so that they were worded from the institutional bias perspective. The subcommittee added a strategy related to identifying and mitigating barriers to affordable housing.

Elizabeth Gharst remarked that the LGBTQ population was underrepresented in the strategies of the SHIP subcommittees and asked if the subcommittee would consider including a strategy for that population.

The subcommittee agreed to include a compliance strategy related to providing sexual orientation and gender identity training for all providers receiving state funds.

All subcommittee members present voted thumbs up on the final strategies.

Goal 1: Expose and reduce the impact of institutional biases that influence health, by

- Expand human resources practices, for example in hiring, recruitment, and retention, that promote equity.
- Ensure indicators data are reportable by race and ethnicity, disability, gender, age, sexual orientation, socioeconomic status, nationality and geographic location.
- Train all teachers on implicit bias with programming that addresses race and gender to end discipline disparities for black youth. Track teachers and schools for discipline disparities and address those contributing to racial and gender bias in school pushout.

Goal 2: Identifying and championing work across systems, structures, polices, communities and generations, so that

- Implement standards for workforce development that include identifying and addressing institutional bias.
- Advance and retain the skills and abilities of the workforce to deliver equitable, trauma informed, and culturally and linguistically responsive services.
- Ensure state agencies are pledged to racial equity by accounting publicly for racial equity in budgeting to ensure adequate investment into BIPOC (Black, Indigenous, and People of Color) communities and incorporating equity into agency performance metrics.

Goal 3: All people in Oregon are empowered and have opportunity to participate fully in decisions to achieve optimal health.

- Use restorative justice models in schools to address conflict, bullying, and racial harassment, and ensure that young students remain integrated within their peer community. Institute training in mediation and restorative justice for students, parents, teachers, and community members to avoid the school to prison pipeline and the escalation of misdemeanor charges for youth.
- Expand and strengthen the Senior Health Insurance Benefits Assistance (SHIBA) volunteer program for Medicare and Medicare Advantage enrollment and transportation assistance.
- Identify and mitigate barriers to the development and maintenance of affordable housing.
- Require sexual orientation and gender identity training (including trans-informed training) for all health and social service providers receiving state funds.

### **Public Comment**

Leann Johnson invited members of the public to provide comments and ask questions. There was no public comment.

### **Next Steps**

- In April, the subcommittee will discuss process measures for each strategy.

## Adjourn

Leann Johnson adjourned the meeting at 3:41 p.m. The next meeting will be on April 15, 2020.