



HEALTH EQUITY ZONES INITIATIVE

Community Advisory Council Monday, April 25, 2022

Land and Labor Acknowledgment

Additional Resources

- Resource map: <u>https://native-land.ca/</u>
 - Borders based on seasonal uses and historical understandings.
- Treaties: <u>https://goia.wa.gov/resources</u>
 - Legal canons of construction led courts to interpret these treaties in favor of tribes.
- History: https://www.historylink.org/

Welcome, Health Equity Zones Community Advisory Council!

We are honored to have Sen. Keiser joining us for this inaugural meeting.

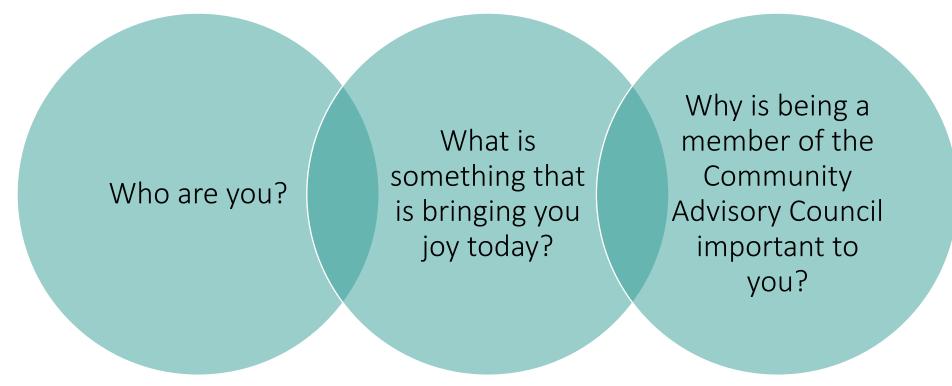
Please introduce yourself to the CAC and Sen. Keiser:

- Name
- Location
- Role/title, place of work or affiliation



Relationship Building

In your small group, spend the next 15 minutes connecting and getting to know each other.



Community Agreements

- Assume positive intent.
- Engage in dialogue not debate.
- Hold yourself and others accountable for demonstrating cultural humility.
- Be open, transparent, and willing to make mistakes.
- Embrace the power of humble listening.
- Create trusting and safe spaces where a little bit of discomfort is okay.
- Commit to having conversations that matter by speaking up to bridge divides.

What agreements would you like to add?

HEZ Community Advisory Council Purpose

- Convene a group of people to establish the foundation of the Washington State Health Equity Zones Initiative - a new initiative to support communities in addressing the health disparities they want to prioritize.
- Ensure efforts are community-centered and health equity-driven, with focused attention given to communities experiencing the greatest health inequities.

HEZ Community Advisory Council Outcomes

- Identify 2-3 geographic Health Equity Zones within Washington state using a council-approved selection criteria and decision-making process.
- Finalize a workplan for Health Equity Zone selection, including major milestones and connections to other Department of Health-supported workgroups.
- Establish shared member commitments, group norms, and how decisions will be made.
- Support the gathering of broad community input and guidance to inform key decisions.

Roles and Commitments

As a HEZ CAC member, your role is to:

- Provide bidirectional communication with community members and stakeholders
- Attend monthly meetings and additional meetings as needed
- Review materials between meetings and come to meetings prepared to provide feedback and contribute to decision-making

Members can anticipate engaging with the HEZ Initiative about 6.5 hours per month.

Purpose

• Provide guidance and insights to the CAC to center lived experience and community expertise.

Membership

• Open membership, community members encouraged to engage as their schedules allow and invite others to join.

HEZ Community Workgroup

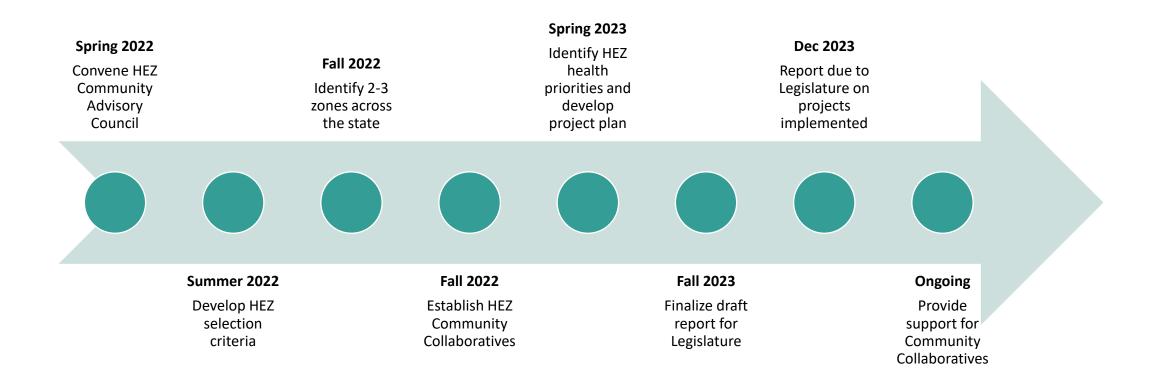
Commitment

• Monthly meetings but no formal commitment required.

Incentives

• Participants will receive a per hour financial incentive.

HEZ Initiative Estimated Timeline



Tentative Milestones

April	May	June	July	August	September	October	November	December
 Establish CAC structure Discuss resources and information needed to move forward 	 Develop workplan Finalize guiding principles and decision-making process 	• Establish how data and storytelling will be used to guide decisions	• Identify selection criteria	• Establish selection process	 Launch selection process Outreach and engagement 	 Select 2-3 zones Outreach to existing coalitions and networks within zones 	• Establish Community Collaboratives within each zone	• Community Collaboratives begin identifying health priorities

Example Process Flow

Below is an example process to develop the workplan:





10 Minute Break

Why are guiding principles important?

On your phone or laptop, please go to the link to the right.



How will the CAC make decisions?

Health Equity Zone As Defined in Senate Bill 5052

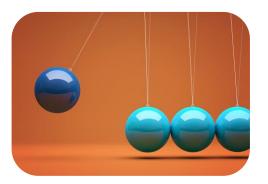
"...." "health equity zone" or "zone" means a contiguous geographic area that demonstrates measurable and documented health disparities and poor health outcomes, which may include but are not limited to high rates of maternal complications, newborn health complications, and chronic and infectious disease, is **populated by communities** of color, Indian communities, communities experiencing poverty, or immigrant communities, and is small enough for targeted interventions to have a significant impact on health outcomes and health disparities."

Criteria Considerations



Geography





Metrics

Strengths

Community trust **Partnerships** Experience Growth potential/capacity Commitment to equity

Regions Counties Zipcodes

Examples

Cities/Towns Census Tracts/Blocks **Population**

Size Density Rural-Urban Demographics **Redlined communities**

Socioeconomic Environmental Health outcomes Life expectancy Health behaviors

Small Group Discussion

In your small groups, please discuss the following questions:

- How will we identify communities experiencing the greatest health disparities or inequities?
- What resources or information are needed to move forward with discussions on criteria and zone selection?

DOH staff will take notes in each group.

Closing & Next Steps

- Bri will send out a Doodle poll to determine meeting schedule
- Request for volunteers to develop decision-making process
- What support do you need from DOH staff to be successful?
- Financial incentives Bri will reach out for addresses
- Next meeting:
 - Approve decision-making process and guiding principles
 - Develop draft workplan



DOH 141-057

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