

Washington County's Equity Centered COVID-19 Response

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WASHINGTON COUNTY
OREGON

Department of Health and Human Services



Equity Framework for Rapid Response

The purpose of this presentation is to provide details and resources for how equity can be integrated into the planning and implementation phases of the crisis response, including communication, recovery and resilience.

Context

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- Washington County Emergency Operations Center (EOC)
 - Came from the military
 - Rigid structure
 - Not designed with equity in mind
- COVID-19 Pandemic
 - Disproportionately affecting Black, Indigenous, and People of Color (BIPOC communities)
 - Social and economic impacts, in addition to health

Washington County EOC

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Challenge

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- Equity not embedded in structure
- People most impacted not at the decision-making tables – AND no process to bring them in
- Lack of foundational level setting with regards to Equity



This image has been modified with permission from the "Better Health for All" infographic, © 2017, Saskatchewan Health Authority.

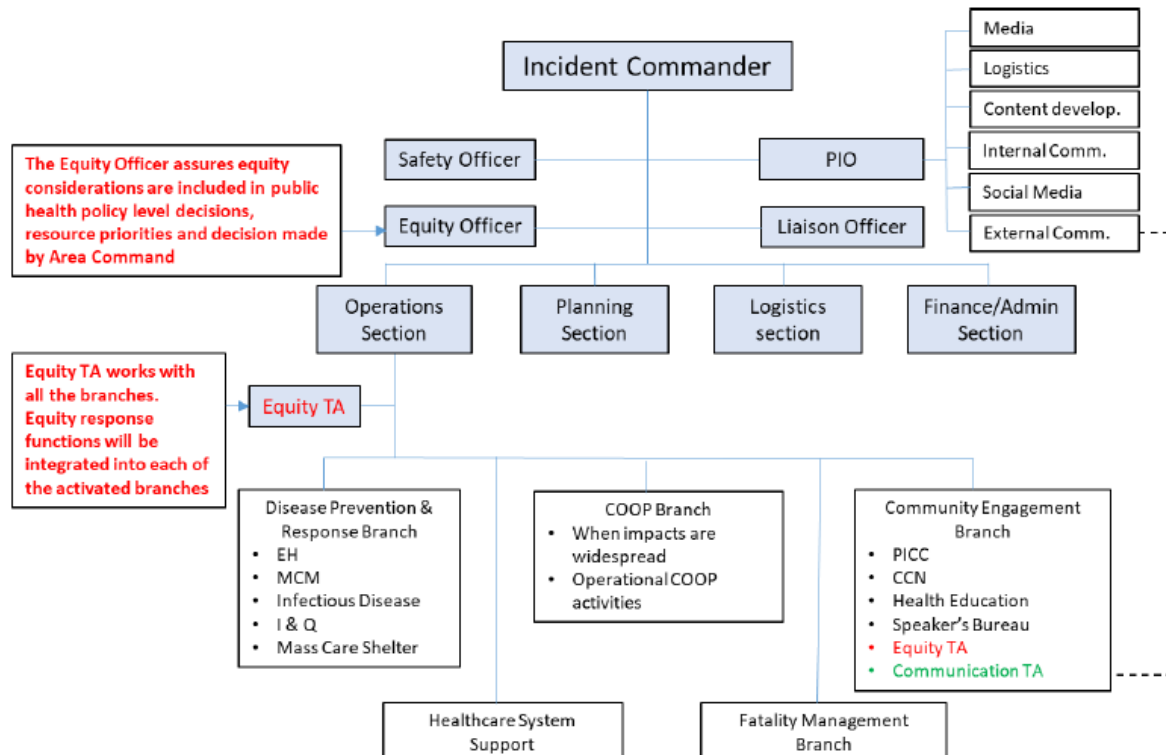
Approach

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- Found resources from King County
- Started discussions around Equity Officer and Equity Technical Advisor roles
- Developed goals and tools to embed equity into the EOC

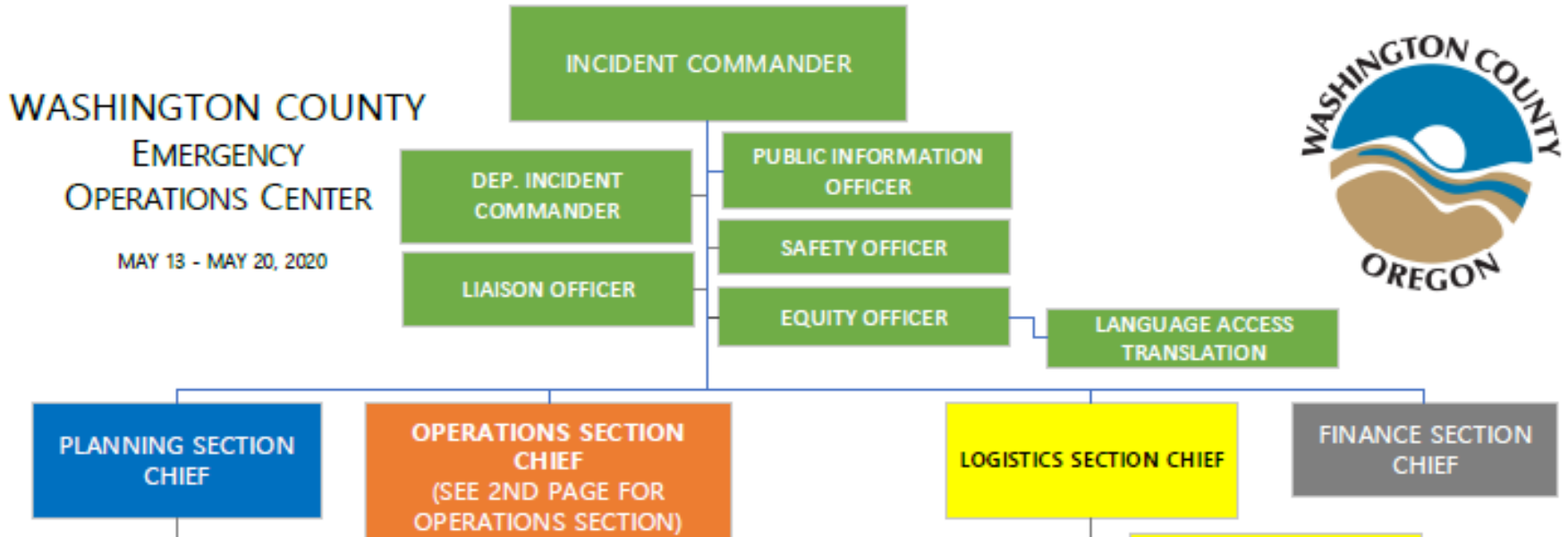
King County Model

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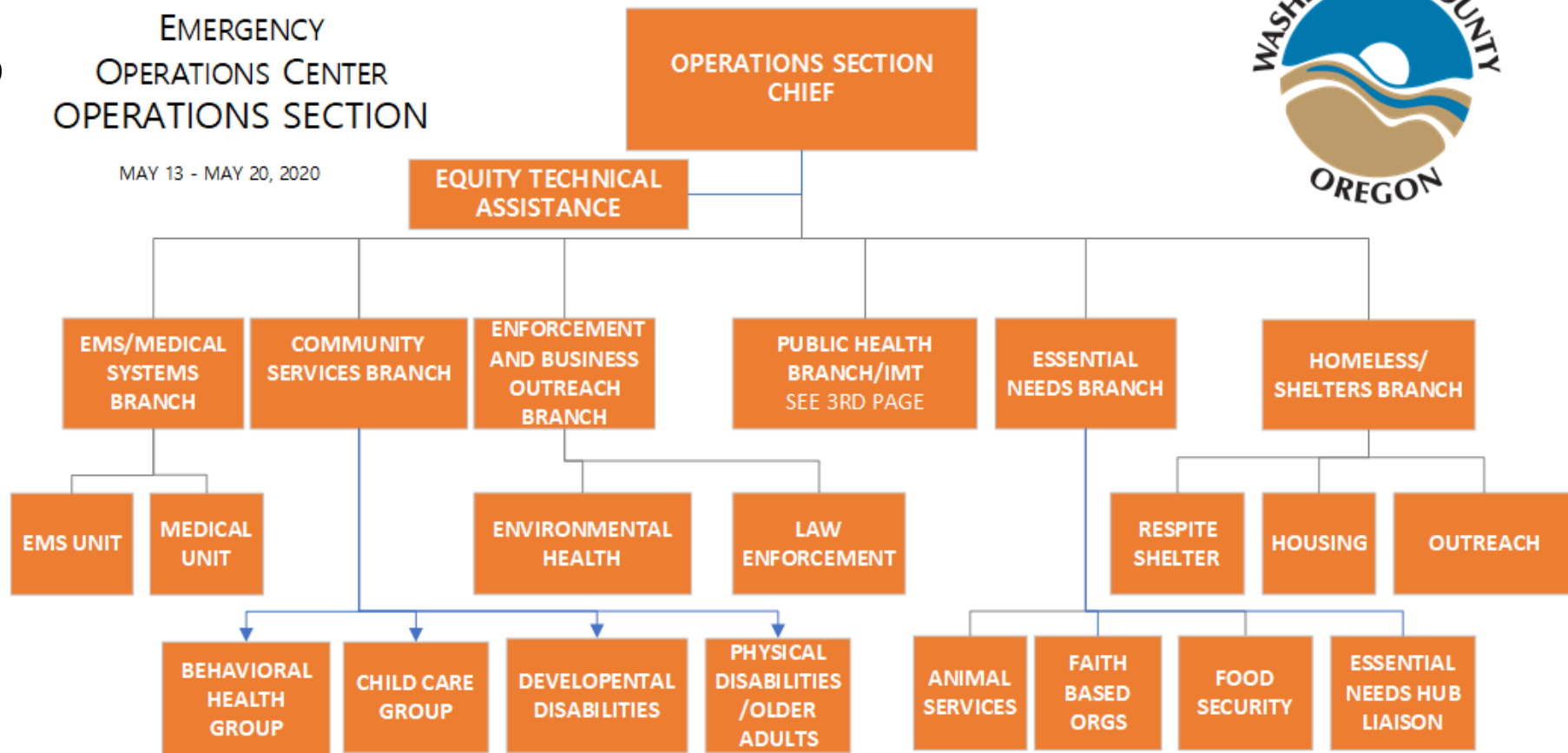
Washington County Org. Chart

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WASHINGTON COUNTY
EMERGENCY
OPERATIONS CENTER
OPERATIONS SECTION

MAY 13 - MAY 20, 2020



Goals

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- Prioritize community needs throughout decision making
- Identify strategies to reach disproportionately impacted groups
- Ensure we are inclusively leading with race
- Implement equity related EOC initiatives, while promoting and modeling safety, trust and belonging

Highlight – Equity Lens Tool

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Our charge: make swift decisions to protect the health of communities who are vulnerable to public health threats and prevent prolonged economic hardship.

For the proposed decision you are evaluating, consider the following:

1. Who are the key groups who would directly benefit from the [decision or action]?
Will the proposal have impacts in specific geographic areas (neighborhoods, areas, or regions)? What are the racial demographics of those living in the area?
2. Who is burdened or excluded from [decision/action] benefits?
What are potential unintended consequences? What are the ways in which your proposal could be modified to enhance positive impacts or reduce negative impacts?
3. Are people directly impacted by [decision/action] engaged in the decision and in keeping us accountable to the outcomes?
Consider populations that are experiencing health inequities in your community (e.g., people of color, people with disabilities, LGBT populations) and potential barriers they may face with engagement efforts. Balance our charge to make swift decisions with engaging our community; consider what community relationships you already have that you can lean on? Make sure to incorporate compensation for their time where possible.
4. What revisions are needed in the decision for [decision/action] to avoid or mitigate inequitable impacts?
How will you continue to partner and deepen relationships with communities to make sure your work to advance racial equity is working and sustainable for the long haul? Make sure to track how you're addressing health equity

Successes

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- Equity Officer and TA roles embedded in EOC
- Formed Equity TA Group to advise work
- Develop and implement an equity assessment tool
- Provided equity-focused resources to EOC staff
- Bi-weekly communication with over 500 community partners in English and Spanish
- Contracts with community partners to advise response

Lessons Learned

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- Start earlier
- Invest in organizational equity training and diversification of staff
- Thinking about what comes next...

Thank you!

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Reference Slides

Roots of Inequity: Social Determinants of Health

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- People's health depends on much more than just their biology. The conditions in which people are born, grow, live, work and age have a profound effect on how healthy they can be.
- Historically marginalized communities are often left behind in crisis responses and as the result of decision making that isn't rooted in equity.

Groups Impacted by Inequity

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- Public Health defines Groups Impacted by Inequity (GII) as an individual, group, or community who experiences institutional, structural, and systemic discrimination, bias, and racism in access to opportunity and to resources on a daily basis. This daily lived experience of inequity puts these individuals, groups, or communities at greater risk of experiencing additional inequities during incidents. For example, as resources become even scarcer and services stretched even further over the course of an incident, the effects of existing inequities may exacerbate. Those that need the most support often receive the least information, resources, and services during an incident.

(Definition adapted from King County's Emergency Response)

Equity Implementation Plan

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- Equity Officer: The role of the Equity Officer is to ensure the needs of disproportionately impacted individuals are identified and prioritized in the EOC's COVID-19 incident response and across the entire organization.
- Equity Technical Advisor: The Equity Technical Advisor (TA) is assigned to the Operations Section and reports directly to the Operations Section Chief. The Equity TA's primary responsibility is to ensure equity considerations are incorporated in operational period objectives and response strategies and tactics. The TA may play a lead or support role in addressing equity-focused objectives.
- Equity Workgroup: assigned within the Operations Section. Supporting and tracking equity related issues in our EOC efforts. Problem solving and troubleshooting issues that arise

Goals

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- Convene staff and stakeholders across the EOC and in the community to advise, assist and troubleshoot the equitable implementation, monitoring, and evaluation of resources, flow of information (qualitative and quantitative); and prioritization of community needs in terms of policy, resources and distribution.
- Identify, anticipate and recommend strategies and policies to reach disproportionately impacted population groups, including maximizing existing networks.
- Ensure we are inclusively leading with race -- that the needs of our community, especially those who have been historically marginalized, are reflected in recommendations, messaging and solutions.
- Collaboratively support the implementation and review of equity related EOC initiatives, requests and goals, while promoting and modeling safety, trust and belonging in how we do the work with each other and the community.

Deliverables

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- Participate in daily Operational Period Briefings and daily Command and General Staff meetings to provide updates on equity-related issues and report out on equity considerations (EO).
- Advise the development of operational period objectives (EO) and response strategies and tactics (TA).
- Complete an equity assessment with EOC staff at the start of the incident and provide recommendations for operationalizing equity within the EOC (EO & TA).
- Develop and implement an equity-based Communications Agreement for EOC staff (EO).
- Embed equity in EOC decision-making processes by providing training and support on the use of the Equity Lens tool (EO & TA).
- Provide weekly communication of equity-related educational resources to EOC staff, as well as bi-weekly equity-related community resources to community partners (EO & TA).
- In collaboration with the EOC's Behavioral Health Monitor, coordinate culturally sensitive healing and trauma-informed care (TIC) spaces and resources both in person and virtually for EOC staff (EO).
- Draft statement on Equity and Inclusion related to crisis response for Washington County leadership and continue to advocate and provide guidance on equity focused messaging for our community, including community-based organizations and leaders (EO & TA).