

**Office of Health Equity Advisory Committee Meeting
Teleconference Meeting Minutes (Approved)
March 3, 2021**

Meeting ID 938-6283-5155

OHE-AC Members Participating:

| | |
|---------------------------------|-------------------|
| Sarah de Guia, Chair | Aaron Gardner |
| Shireen Malekafzali, Vice Chair | Ana Gonzalez Seda |
| Califia Abwoon | Jo-Ann Julien |
| Valentine Antony | Simran Kaur |
| Kismet Baldwin | Nahla Kayali |
| Jessica Buendia | Patricia Lee |
| Lisa Folberg | Michael Witte |

Members Absent:

Robin Carter
Yvette McShan
Vong Mouanoutoua

State Officials/Staff:

Tomas Aragon, MD, DrPH, Director and State Public Health Officer, California
Department of Public Health (CDPH)
Marina Castillo-Augusto, Chief, Community Development and Engagement Unit
(CDEU), Office of Health Equity (OHE)
Amanda Hooker, Stakeholder Engagement Coordinator, OHE
Meredith Lee, Acting Assistant Deputy Director, OHE
Mark Starr, Deputy Director for Environmental Health, CDPH, Acting Deputy Director for
OHE
Jason Tescher, Chief, Gender Health Equity Unit (GHEU), OHE
Jason Vargo, Lead Research Scientist, Climate Change and Health Equity Program,
HEPP Unit, OHE

Speakers from the Public:

Jessica Camacho Duran
Julia Liou
Steve McNally
Nina Moreno
Daniel Toleran

**9:30 a.m. Convene Meeting and Welcome | Roll Call | Agenda Review | Meeting
Minutes**

Welcome

**Office of Health Equity Advisory Committee Meeting
Teleconference Meeting Minutes (DRAFT Staff Notes)
March 3, 2021**

Sarah de Guia, Chair of the Office of Health Equity (OHE) Advisory Committee (AC), called the OHE-AC meeting to order at 9:31 a.m., welcomed everyone, provided a brief overview of the meeting agenda, and confirmed the presence of a quorum. She asked Mark Starr to introduce the new AC Member.

Mark Starr, Deputy Director for Environmental Health, Acting Deputy Director for Health Equity, CDPH, stated Valentine Antony was appointed to fill the seat vacated by Virginia Hedricks, who had to step down from the AC.

Chair de Guia welcomed Mr. Antony to the AC.

Approve December 1 & 2, 2020, Meeting Minutes and January 13, 2021, Subcommittee Meeting Minutes

MOTION: Ms. Buendia moved approval of the December 1 & 2, 2020, Meeting Minutes and January 13, 2021, Subcommittee Meeting Minutes as presented. Ms. Kayali seconded. Motion carried 14 yes, 0 no, and 0 abstain, per roll call vote as follows:

The following OHE-AC Members voted “Yes”: Abwoon, Antony, Baldwin, Buendia, Folberg, Gardner, Gonzalez Seda, Julien, Kaur, Kayali, Lee, and Witte, and Vice Chair Malekafzali and Chair de Guia.

Public Comment

Nina Moreno, Director of Research and Strategic Partnerships, Safe Passages, introduced herself and welcomed Dr. Aragon to the CDPH. The speaker thanked the AC for the opportunity to present on the California Reducing Disparities Project (CRDP) at the last AC meeting. The speaker provided an overview of the CRDP and asked the AC to write a letter to Dr. Aragon requesting the prioritization of CRDP Phase 2 sustainability.

Chair de Guia stated Dr. Aragon is scheduled to speak after public comment and the issue of writing a letter regarding the CRDP Phase 2 sustainability will be discussed later in the agenda.

Eba Laye, Project Director, CRDP, echoed Dr. Moreno’s comments. The speaker spoke on the importance of writing a letter to Dr. Aragon regarding the CRDP Phase 2 sustainability.

9:45 a.m. Presentation from CDPH Leadership

Presenters:

- Tomas Aragon, MD, DrPH, Director and State Public Health Officer, CDPH
- Mark Starr, DVM, MPVM, Deputy Director for Environmental Health, Acting Deputy Director for OHE, CDPH

Presentation

**Office of Health Equity Advisory Committee Meeting
Teleconference Meeting Minutes (DRAFT Staff Notes)
March 3, 2021**

Mark Starr, Deputy Director for Environmental Health, Acting Deputy Director for OHE, CDPH, deferred to Dr. Aragon to provide the updates.

Tomas Aragon, MD, DrPH, Director and State Public Health Officer, CDPH, introduced himself, provided an update of the COVID-19 pandemic, and shared his thoughts on equity:

1. Think of health equity from a family-centered perspective and then from a community perspective.
2. Focus on an intergenerational perspective.
3. Look through a lens of the social determinants of health – the things that impact individuals every day.
4. Health equity is both historical and structural. Structural challenges including racism and discrimination affect health outcomes.

Public Comment

Dr. Moreno stated mental health and culturally affirming community-defined, evidence-based practices are important. This connection to mental health starts at the youngest ages. Public health needs to spend more time embracing mental health and behavioral health, especially around the areas of prevention, wellness, and supporting communities in a holistic, culturally-affirming way.

Dr. Aragon stated the COVID-19 pandemic provides an opportunity to rebuild public health. He stated he wants to build it in a way that takes modern science into account. The Surgeon General is working hard to make the issue of early childhood development a high priority. When that is combined with a commitment to equity, it can have a big impact.

Dr. Aragon stated, along with addressing health equity, it is important to address the underlying root causes of inequity. This cannot be done without incorporating the latest scientific tools.

Dr. Aragon shared a quote by Dr. Monica Sharma: “Radical transformational leadership is leading change from the universal values of dignity, equity, compassion, and humility to transform self, people, systems, and cultures towards equity, antiracism, and sustainable results.”

Dr. Aragon announced that the Governor has appointed Dr. Rohan Radhakrishna as Deputy Director for the OHE.

10:15 a.m. Stakeholder Presentation on Community Impacts of Pandemic and State Health Equity Metric

Presenter:

- Julia Liou, Chief Deputy of Administration, Asian Health Services

Presentation

**Office of Health Equity Advisory Committee Meeting
Teleconference Meeting Minutes (DRAFT Staff Notes)
March 3, 2021**

Julia Liou, Chief Deputy of Administration, Asian Health Services, provided an overview, with a slide presentation, of the background, goals, objectives, and services provided by Asian Health Services and discussed the effectiveness and limitations of the California Health Places Index (HPI) and measures that are missing in the HPI. She stated, although the HPI is a valuable tool that can assess the cumulative impacts on community conditions, the utilization of the indicators alone without language, race, cultural competence, or a deeper look at income disadvantages in racial and ethnic groups of color ends up masking or understating the needs of these communities. She stated the need for the additional measures of race and language in particular in the HPI. Asian Health Services is working with Assembly Member Bonta to put this language and data disaggregation into legislation. She asked AC Members for their support.

Discussion

Chair de Guia asked CDPH staff to respond to Ms. Liou's presentation.

Dr. Starr stated part of the idea of using the HPI for the equity metric is to look at the things that put individuals at greater risk for COVID-19. The HPI captures much of the social determinants of health and circumstances that are associated with a higher risk of being exposed to COVID-19 or having worse outcomes. While the HPI does not have metrics for race built into it, the overlay generally works. The idea is to target resources where they will be the best value. No single index will capture everything.

Dr. Starr stated the COVID-19 Health Equity Playbook for Communities is a companion to the HPI and is posted online. Many issues discussed today are part of that playbook, including cultural and language considerations that counties should use.

Jason Vargo, Lead Research Scientist, Climate Change and Health Equity Program, HEPP Unit, OHE, stated other stakeholders have brought up these concerns. The HPI has captured disparities well in terms of COVID-19. It is important in promoting the use of health equity to report disease burden across the CDPH to work long-term with an index that captures the many intersectional factors that determine health outcomes. The idea is to promote the HPI across the board to generate momentum for the talking points and evidence behind the root causes that continuously put the same communities at risk for many health outcomes.

Dr. Vargo stated the CDPH often encourages local health departments to dive deeper to better understand the factors in their communities that may be of greater concern for some diseases and to tailor the response and interventions at the local level, which are often seen in Targeted Investment Plans and Community Equity Plans.

Ms. Julien asked for clarification on the San Diego presentation slide to better understand the problem with the data and asked about the policy recommendation on how to address this issue.

Ms. Liou stated the initial analysis showed that the applied health equity metric tends to miss factors without language and race, which resulted in high false negatives for Asians and Blacks. The slide emphasizes the importance of including language and race as a lens to the important social determinants of health that are included in the

**Office of Health Equity Advisory Committee Meeting
Teleconference Meeting Minutes (DRAFT Staff Notes)
March 3, 2021**

health equity metric. The problem is around the application of the metric in testing. The bill being worked on with Assembly Member Bonta would standardize the additional measures of race and language across the state.

Chair de Guia stated the AC needs to further discuss the HPI to address stakeholder concerns.

Public Comment

No members of the public addressed the OHE-AC.

10:30 a.m. OHE Program Updates and Discussion

Presenter:

- Jason Tescher, Chief, Gender Health Equity Unit (GHEU)

Chair de Guia stated the written program unit updates were emailed to AC Members. She asked Jason Tescher to provide an update on the work of his unit.

Presentations

Jason Tescher, Chief, GHEU, provided an overview, with a slide presentation, of the vision of the unit and the strategic planning process for the LBTQ Women's Health Equity Initiative. He asked AC Members to participate in a survey to help guide the unit's vision, mission, values, and overall direction.

Marina Castillo-Augusto, Chief, Community Development and Engagement Unit (CDEU), highlighted a recommendation from her unit update to bring tribal engagement and tribal education and training not only to the CDPH but to the AC.

Meredith Lee, Acting Assistant Deputy Director, OHE, stated the Health in All Policies (HiAP) Five-Year Priority Survey was sent to all AC Members. She encouraged everyone to return it to staff by this Friday.

Public Comment

Ms. Hussain (phonetic), Elm Adult Day Health Care Center, asked for help in reaching out to the Director of the Department of Health Care Services (DHCS) to ask them to extend their certification during the appeal process.

11:00 a.m. Action Plan Discussion | Adjourn

Chair de Guia thanked Dr. Starr on behalf of the AC for his work as Acting Deputy Director of the OHE. She stated appreciation for his leadership, guidance, and support of the AC in helping to weather the storm over the past years without a Director and Deputy Director.

Chair de Guia asked everyone to think back on Dr. Aragon's vision and priorities that he shared this morning and to consider how the AC can help him and the CDPH achieve mutual goals.

**Office of Health Equity Advisory Committee Meeting
Teleconference Meeting Minutes (DRAFT Staff Notes)
March 3, 2021**

Chair de Guia stated this agenda item is meant to discuss how to leverage the three remaining AC meetings or potentially four this year. The Agenda Setting Subcommittee sent out the AC Action Plan Survey to learn about AC Member priorities, the ways to make the AC meetings more helpful, how to improve meetings, and trainings. She shared the results of the survey:

AC Member Priorities

The topic of structural racism as a cross-cutting item had overwhelming support.

Priority areas included the following:

- Health care, both physical and mental
- Housing
- Education
- Economics

Chair de Guia stated, although the CDPH does not work on all these issues, they likely have programs or projects that intersect with them. She suggested discussing how to leverage the AC's connection to the CDPH and the HiAP Task Force, which may address these issues.

Ways to Make the AC Meetings More Helpful

- Invite speakers to present.
- Write position papers or write statements on different topics.
- Ask OHE, CDPH, and other departments to present on their themes and topics so the AC can learn how to offer advice to them.
- Give AC advice and recommendations not only to the OHE but to the CDPH more broadly.
- Have a designated liaison from the AC to the Director to talk about issues and recommendations.
- OHE Units not only provide updates but share desired outcomes and results of projects.

How to Improve Meetings

- Have actionable items over the next year.
- Include more time to discuss how OHE Members could be of service.
- Have additional opportunities to gather in person.
- Have standing agenda items.
- Have time for community members to share their work and how it aligns with the CDPH.

Trainings

**Office of Health Equity Advisory Committee Meeting
Teleconference Meeting Minutes (DRAFT Staff Notes)
March 3, 2021**

- Trainings on how government functions such as about the relationship between state and local government.
- OHE Units can share how this flows down to the local level.
- Trainings on racism, particularly the difference between micro- and macro-racism.
- Have clear directives from the OHE and the CDPH on how AC Members can be helpful.

Chair de Guia stated there was a suggestion to include in AC Member recruitment the category of American Descendants of Slaves.

Mr. Antony stated some tribal communities also have a history of enslavement. He asked if that additional layer of distinction might be needed.

Chair de Guia asked staff to work with the individual who made the recommendation to present options for the AC to review.

Chair de Guia suggested the following Action Plan for 2021:

- Have CDPH, OHE Units, COVID-19 updates, and structural racism as standing agenda items, and to continue to connect with the HiAP Task Force and the Racial Equity Initiative on an ongoing basis.
- Dedicate one priority area – health care, housing, education, and economics – to each of the next four meetings.
- Work through the subcommittee process to develop the agendas, which could include a combination of inviting state-level decision makers or agencies to discuss their work, inviting community members to share on a particular topic, and giving the AC Members the opportunity to discuss and share recommendations and thoughts on each priority area.

Chair de Guia asked for a motion to approve these suggestions.

MOTION: Ms. Gonzalez Seda moved approval of Chair de Guia’s 2021 Action Plan. Mr. Gardner seconded. Motion carried 14 yes, 0 no, and 0 abstain, per roll call vote as follows:

The following OHE-AC Members voted “Yes”: Abwoon, Antony, Baldwin, Buendia, Folberg, Gardner, Gonzalez Seda, Julien, Kaur, Kayali, Lee, and Witte, and Vice Chair Malekafzali and Chair de Guia.

Community Member Requests

Chair de Guia stated members of the CRDP Collaborative requested that the AC write a letter to Dr. Aragon in support of sustainability funding for the CRDP. She asked for a motion to approve this request.

MOTION: Vice Chair Malekafzali moved to write a letter on behalf of the AC to Dr. Aragon in support of sustainability funding for the CRDP.

**Office of Health Equity Advisory Committee Meeting
Teleconference Meeting Minutes (DRAFT Staff Notes)
March 3, 2021**

Ms. Folberg seconded. Motion carried 14 yes, 0 no, and 0 abstain, per roll call vote as follows:

The following OHE-AC Members voted “Yes”: Abwoon, Antony, Baldwin, Buendia, Folberg, Gardner, Gonzalez Seda, Julien, Kaur, Kayali, Lee, and Witte, and Vice Chair Malekafzali and Chair de Guia.

Chair de Guia asked for two volunteers to draft the letter of support to Dr. Aragon. Ms. Gonzalez Seda and Ms. Folberg volunteered.

Chair de Guia stated the AC was requested to write a letter of support on the Bonta bill.

Ms. Folberg stated legal counsel advised in the past that the AC is unable to take a position on legislation or candidates.

Dr. Starr stated the AC can put out general position statements on issues.

Agenda Setting Subcommittee

Chair de Guia asked AC Members for input on which of the four priority areas should be discussed first so the Subcommittee will know what to work on for the next meeting.

Ms. Julien asked for clarification on the health care priority area. She noted that the survey listed this area as health care, mental/behavioral health services.

Chair de Guia stated health care is broadly defined in statute as being health and mental health. The health care priority area includes mental health as well.

Ms. Abwoon suggested focusing first on the housing priority area.

AC Members agreed.

Dr. Witte stated isolation and transportation are related to the housing priority.

Vice Chair Malekafzali agreed with focusing first on the housing priority area and also suggested the economic opportunity priority area since it is the other side of the housing crisis.

Chair de Guia suggested that the AC discuss the housing priority area at the next AC meeting and suggested inviting members of the HiAP Task Force to be a part of that meeting since they are also addressing some of the AC Member priority areas.

AC Member Recruitment

Chair de Guia asked for two volunteers to review upcoming applications for AC membership. Ms. Gonzalez Seda and Ms. Kaur volunteered.

Public Comment

Steve McNally, citizen and family member, stated every county is required to submit a cultural competency plan as part of their Mental Health Services Act (MHSA) funding to the CDPH. He asked staff to help them put them in contact with the right person. The speaker stated sometimes it is difficult for everyone to engage and contribute on boards

**Office of Health Equity Advisory Committee Meeting
Teleconference Meeting Minutes (DRAFT Staff Notes)
March 3, 2021**

and commissions. The speaker suggested the state law that set up the OHE might help guide the AC.

Steve McNally stated there are funds available that accelerate the AC's core mission. The speaker provided the examples of funding for housing and for assisted residential facilities. The speaker stated the need for a continuum. It is difficult to find information presented in a concise way. The speaker suggested trying to keep the funding in core services and not pick up for other areas that are falling down and to ask other areas to pick up. The speaker provided the example that law enforcement is picking up areas that should be picked up by behavioral health.

Daniel Toleran, LGBTQ Training and Technical Assistance (TA) Center stated appreciation for the AC's support in writing a letter to Dr. Aragon regarding the sustainability of the CRDP.

Dr. Moreno echoed the comment of the previous speaker.

Jessica Camacho Duran, Council on Criminal Justice and Behavioral Health (CCJBH), stated the CCJBH is interested in participating in the discussions on these important issues. The speaker stated the CSG recently released a report on how housing affects individuals with behavioral health conditions. The speaker offered to send it to staff.

Adjourn

There being no further business, the meeting was adjourned at 12:00 p.m.