

Attachment 6:

To: California Strategic Growth Council and Members of the Public

From: California Health and Human Services Secretary Mark Ghaly

Reporting Period: August 2020 – April 2021

Staff Lead: Update on Racial Equity Resolution Implementation

History/Background

The California Health and Human Services oversees departments and state entities that provide health and social services to California’s most vulnerable and at-risk residents. In July 2020, the Inclusive-By-Design (IBD) team was formed by representatives from the CHHSA Office of the Agency Information Officer (OAIO) and the Office of Innovation with the goal to streamline and expand racial and health equity-focused efforts. The IBD team began their discovery process after receiving sponsorship by California’s Surgeon General, Dr. Nadine Burke Harris, and Agency Secretary, Dr. Mark Ghaly. The following events ignited their and the agency’s efforts to adequately identify health and racial equity initiatives:

- The lack of adequate education, testing, and treatment of COVID-19 among communities of color which contributed to the disproportionate rates of death and illness among historically oppressed groups throughout the pandemic
- The killing of George Floyd in June of 2020 amplified the need for allyship across government agencies among concerns of police brutality and racism.

From the results of the expedited review of existing efforts, key discussions, and qualitative analysis of information, the group identified five key recommendations. These five recommendations, as part of a more detailed memo, were reviewed and signed off by the Racial Equity Leadership Team convened by the Office of the California Surgeon General. The Racial Equity Leadership Team consists of Dr. Nadine Burke Harris and the following Department Directors: Dr. Tomás Aragón of California Department of Public Health, Kim Johnson of California Department of Social Services, Kim Wade of California Department of Aging, Chaeny Emanavin of Office of Innovation, and Will Lightbourne of the Department of Health Care Services.

Recommendations

1. Create a public-facing dashboard with outcome metrics measuring progress towards racial and health equity.
2. Integrate existing data on race/ethnicity to better inform policy.
3. Expand CHHS department participation in programs, such as CCORE, which further cultural competency and drive towards the creation of department level racial and health equity action plans.
4. Dedicated agency-wide racial and health equity office or other methods to enable agency leadership, accountability, and information sharing across CHHS departments.
5. Dedicated racial and health equity resources and staffing per department.



Highlights

Three out of the five recommendations are addressed by the 2021-22 Governor's Budget which requests \$9.7 million to support funding and positions to implement equity initiatives.

- California Health and Human Services (CHHS) requested \$4.2 million in 2021-22 and 8 positions to develop an equity dashboard across the health and human services programs to identify data gaps by race, ethnicity, sexual orientation and gender identity. The collection and integration of data will help identify how we can collect better data, inform policy, close disparities, and expand program participation. The equity dashboard will be released as part of the CHHS Open Data portal.
- CHHS and Department of Health Care Services (DHCS) requested a total of \$5 million over two years to expand training opportunities to staff of CHHS departments and offices to identify and eliminate the barriers to an inclusive, just, and sustainable society and to create transformative change toward a more equitable state. CHHS will increase the number of individuals trained on racial equity to ensure that the programs and services developed and delivered are respectful, effective and mindful of the communities we serve. Specifically, this will incorporate and require the use of data to ensure that we are reducing/eliminating inequities as well as building a clear strategy, effective training, coordination mechanisms and effective operational processes to reduce inequities.

Building Capacity for Racial Equity

California Department of Public Health (CDPH), beginning in 2016, and California Department of Social Services (CDSS) continue to contribute both participants and leaders in the Capitol Collaborative on Race and Equity (CCORE), formerly known as the Government Alliance for Race and Equity Capitol Cohort. Additionally, the Department of Aging joined the 2020-2021 CCORE Learning Cohort.

The CDPH Racial and Health Equity Initiative, an interdepartmental initiative coordinated through the CDPH Office of Health Equity, has recently developed tools and resources for staff. This includes a racial and health equity glossary of terms, *Can We Chat: Conversations on Race and Racism Series*, a diversity, equity, and inclusion (DEI) SharePoint, and DEI training for supervisors. The Initiative reaffirms the Department's longstanding commitment to existing health equity programs such as Black Infant Health, Refugee Health, Tuberculosis Control, Violence Prevention, and many others that focus on disproportionately impacted communities. Furthermore, the Office of Health Equity partnered with CHHS to deliver an introduction to racial and health equity training to CHHS staff in October 2020.

CDSS's participation in GARE cohorts in 2018-19 and 2019-20 precipitated structural changes, projects, and initiatives including:

- The establishment of the Office of Equity
- A department level equity plan
- The Racial Equity, Diversity, and Inclusion (REDI) Fair which generated department-wide interest and focus on racial equity
- Support for an Agency level language access policy
- Ongoing department level trainings and awareness building efforts including implicit bias training
- Data literacy training centering equity



Next Steps

Moving forward it is critical to take the following steps to create an environment for sharing collective resources and ideas as we work towards short term and long term goals. Some initial steps include:

- Continue partnering with departments within CHHSA to identify roles, levers and racial equity efforts in progress.
- Collaborating with the Executive Sponsor and Stakeholders on the implementation of the recommendations that are included in the 2021-22 Governor's budget.
- Continue sharing practices and lessons learned from CCORE with other CHHS Departments.

