

**Office of Health Equity Advisory Committee
Quarterly Meeting Planning Subcommittee Meeting**

**Teleconference Minutes (DRAFT Staff Notes)
Tuesday, September 28, 2021**

Meeting ID: 838-2969-0791

OHE-AC Members Participating:

Sarah de Guia, AC Chair
Shireen Malekafzali, AC Vice Chair
Califia Abwoon
Valentine Antony
Ana Gonzalez Seda
Hector Ramirez
Nancy Rodriguez
Michael Witte
Angelina Woodberry

Members Absent:

Kismet Baldwin
Angela Ball
Jessica Buendia
Robin Carter
Lisa Folberg
Aaron Gardner
Jo-Ann Julien, Subcommittee Chair
Simran Kaur
Nahla Kayali
Patricia Lee
Yvette McShan
Vong Mouanoutoua
Terra Russell-Slavin

State Officials/Staff:

Rohan Radhakrishna, OHE Deputy Director
Lazaro Cardenas, Project Lead, Racial and Health Equity Initiative, OHE
Amanda Hooker, Stakeholder Engagement Coordinator
Meredith Lee, HiAP Team Lead

Speakers from the Public:

No members of the public addressed the Subcommittee.

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11:00 a.m. Convene Meeting and Welcome | Roll Call | Agenda Review

Sarah de Guia, Advisory Committee Chair, called the teleconference meeting of the Office of Health Equity (OHE) Advisory Committee (AC) Quarterly Meeting Planning Subcommittee to order at 11:02 a.m. and welcomed everyone. She stated she will chair this meeting since Subcommittee Chair Jo-Ann Julien was unable to be in attendance. She reviewed the meeting agenda. Roll call was taken; a quorum was achieved.

Amanda Hooker, Stakeholder Engagement Coordinator, reviewed the meeting protocols

11:05 a.m. Debrief Third Quarter AC Meeting

Presenter:

- Sarah de Guia, Advisory Committee Chair

AC Chair de Guia recapped highlights from the September 2, 2021, AC meeting. She asked Subcommittee Members for their feedback on the structure and information provided in the meeting.

Discussion

Subcommittee Member Abwoon stated she brought up the disparities in housing in the American Descendants of Slaves (ADOS) community at the last meeting. She stated the need to clarify how racism in housing will be further discussed. She stated the meetings are good and informative, but suggested better outlining problems so the AC Members can discuss solutions or ways that the OHE can advocate to improve problems.

Subcommittee Member Abwoon stated there are contradictions about whether or not to vaccinate against COVID-19. It is about choice. She stated a good analogy has been made between women's rights basically being demolished in Texas in their right to choose and the human right for individuals to choose their medical interventions. She stated it feels like individuals are being forced to take something against their wishes. The ADOS community sees the COVID-19 vaccination issue as another tactic of discrimination. She stated individuals have a right to question and research. This is an issue requiring further discussion.

AC Chair de Guia agreed that the intersection between racism and the choice to get vaccinated is an important topic to discuss.

AC Vice Chair Malekafzali stated appreciation for OHE Deputy Director Radhakrishna's deeper level of engagement with the AC. She stated, although there are challenges with some of the techniques being used for the AC to provide timely feedback, she appreciated the fact that Deputy Director Radhakrishna is trying to get the AC's opinions and thoughts in a timely way that he can utilize as he moves pieces forward on programming work.

Public Comment

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11:15 a.m. Discussion with OHE Health in All Policies (HiAP) Team on Housing Work in CDPH

Presenter:

- Meredith Lee, HiAP Team Lead, OHE

AC Chair de Guia stated the AC will hear OHE HiAP staff discuss housing work being done in the Department and potential future work for CDPH on this issue. She asked staff to present this agenda item.

Meredith Lee, HiAP Team Lead, OHE, provided an overview, with a slide presentation, of the potential upstream and downstream CDPH-related approaches to address housing and prevent homelessness.

Discussion

AC Vice Chair Malekafzali thanked Ms. Lee for her engagement with the Subcommittee and for her detailed explanations. Ms. Lee's point was well-taken around the staffing structure and how it works. She asked about the role of the AC to bring some of that information to leadership around what is needed.

Ms. Lee stated HiAP is being creative about how this is staffed. One dedicated position and possibly two have been funded with the three-year COVID-19 funding to focus on response and recovery for individuals experiencing homelessness and housing issues. The three-year funding will provide time to make the case within CDPH and the state for why public health needs not only to have a seat at the table but to be funded for that seat at the table. She stated having CDPH Director Aragon on the Homeless Coordinating and Financing Council (HCFC) is an important first step but the necessary staffing and funding is important to help support the programming.

AC Chair de Guia stated there are many different issues within the topic of housing. She stated the way her organization thinks about it is from the perspective of having more affordable housing, which many times means building, renovating, or improving the quality of housing, which is for renters or low-income homeowners, and housing instability, which is ensuring that individuals can pay their rent, stay in their homes, and have access to counsel to help them with legal issues.

AC Chair de Guia stated the other issue is the unhoused population and how to work with individuals to get them into homes, which addresses health, mental health, recovery, and a variety of different issues. She asked Subcommittee Members to consider these topic areas, along with the HiAP presentation slide showing the areas where the CDPH is working, and to suggest where the AC should focus its energy next quarter, such as focusing on quality, learning more about affordable housing, or learning more about homelessness or the unhoused, and how to get people housed.

Subcommittee Member Witte stated the Federally Qualified Health Center (FQHC) world that deals with vulnerable populations in health centers does a bad job because the models are all wrong. Patients go to service providers as opposed to community

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members going to the patients and meeting them where they live. He stated street medicine needs to be paid for.

Subcommittee Member Witte stated the other piece to that is that there are no good behavioral health models to address a lot of these individuals. He asked how individuals in unhoused encampments have a recognized behavioral health diagnosis. He stated many of those individuals were institutionalized in the past, but nothing was created to take its place. He stated the need to consider how some of these individuals can be incorporated into communities, such as paying them to clean up the streets or do agricultural work. He stated the need for good models and to pay for those models in order to do better.

Ms. Lee agreed with the need for street medicine and going to where the people are. The Los Angeles Times had an article recently about how they are using some of their COVID-19 funding to support street medicine. She stated this is not only true for the homeless population but it is important to reach people where they are, and in the way and manner in which they need to be reached to provide the baseline of what they need to be a whole person. She gave the example that maybe someone needs socks more than the vaccine today. It is important that the street teams are allowed to use the funding in a flexible manner to pay for the immediate need.

Ms. Lee stated the findings of the work of organizations such as ChangeLab in this area are the need to build more housing and the need for affordable housing. There are also currently approximately one million units of housing that are vacant in California, according to the recent census. She stated the need to look at policies to take these underutilized assets and move them to being part of the solution. It is important to get beyond building new housing to considering how to use what is currently available.

Ms. Lee stated the fastest growing population of individuals experiencing homelessness are those who are 55 and older. Many of these individuals do not show up into the systems the same way as individuals who are chronically homeless or who are experiencing mental health issues. Youth and LGBTQ are other populations experiencing increased homelessness. She agreed that the historic model needs to change and even the standard survey questions need to change since an individual living in their car may not identify as someone experiencing homelessness.

Chair de Guia stated Lazaro Cardenas, Project Lead, Racial and Health Equity Initiative, OHE, posted great resources in the chat section: *belonging.berkeley.edu/housing* and *cahealthyhousing.org/*. She emphasized that housing is intersectional and touches many populations and issues and there are many ways to address issues. She suggested additional resource possibilities:

- The Bay Area Regional Health Inequities Initiative (BARHII) has been looking at housing from a public health perspective at the county level. See *www.barhii.org/housing-affordability-and-health*.
- Charlotte Dickerson is the executive director of an organization that focuses on communities for older adults.

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- AC Member Russell-Slavin works with LGBTQ communities.

Chair de Guia suggested inviting a panel to discuss intersectional issues in ways that different organizations have addressed them and whether the CDPH and other state agencies can benefit from that kind of a conversation as well.

Subcommittee Member Gonzalez Seda stated, although inviting experts to discuss what has worked for their community does not necessarily mean those practices will work statewide, it is important to open the conversation by discussing what has worked for communities and what has not, not only in California but nationwide. A panel discussion is a good start.

AC Vice Chair Malekafzali stated she has been working on the intersection of affordable housing and health for many years. It is a deep area. She asked if there are other advisory committees that might be better positioned to speak about topics related to housing to help the AC hone in on areas that do not have the level of equity-related community voice. This might be one of the criteria identified for where and how to engage deeper.

Subcommittee Member Abwoon recommended humanizing the homeless community and sending street teams out to them to meet their need. She stated she has been dealing with homeless individuals in the 55-and-older age range in her community over the past five years. She stated concern that there is not a team that is fully dedicated to the homeless but that they are spread about, which creates confusion, replicated work, and infighting. She suggested an agency that can center everyone and the direction to go. It is important to advocate for that.

Subcommittee Member Abwoon asked for more information on the one million vacant houses in California and what is being proposed about that. Vacant houses could be a big help in solving some of these homeless issues.

Subcommittee Member Abwoon suggested that the COVID-19 vaccine be given as a choice and not only allowing individuals to be served or housed by getting the vaccine.

Ms. Lee ensured that the COVID-19 vaccine is not a prerequisite for services. She acknowledged Mr. Cardenas for pulling together the information sent to Subcommittee Members about Medical-Legal partnerships. She stated, as the AC thinks about where to focus in for the CDPH, one area HiAP is trying to carve out is how to encourage and expand the prevention model, given its resources and power influence.

Public Comment

No members of the public addressed the Subcommittee.

11:45 a.m. Planning the Fourth Quarter December Advisory Committee Meeting **Presenter:**

- Sarah de Guia, Advisory Committee Chair

Define Theme and Goals for Fourth Quarter Meeting

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AC Chair de Guia stated the next meeting is December 1, 2021. She stated the December meeting historically has been a two-day meeting to wrap up accomplishments and learnings for the past year as well as planning for the next year. This year, the December meeting will be held virtually. She suggested a three and a half hour one-day meeting, due to the virtual format. She asked about issues to include on the December agenda.

Discussion

Subcommittee Member Witte suggested including a discussion on the topic of refugee crises and issues at the December meeting, particularly Afghani issues.

AC Vice Chair Malekafzali suggested including the topic of structure, particularly on how to include regular stakeholder and community engagement into all processes, since the OHE is doing work in this area. It is important to get that right and is a place that AC Members can contribute information from the community perspective.

Subcommittee Member Gonzalez Seda agreed and stated the hope that Deputy Director Radhakrishna will provide additional information and structural organizational direction to help lay the foundation for the AC to move forward and for priorities for next year. She also agreed with the topic of refugee crises and health.

Chair de Guia suggested the topic of funding opportunities with the CDPH and if there are models or work that the AC can be doing on how the CDPH gives out funding, hopefully as a model for the rest of the state. This topic can go hand-in-hand with the community engagement discussion.

Subcommittee Member Witte stated there are 58 Local Health Jurisdictions (LHJs) in California. The CDPH has to grapple with each of those jurisdictions to get initiatives to move forward. He suggested looking at how everyone can most effectively work with those many LHJs to get common themes and work together without bumping into each other.

Chair de Guia stated the AC had also identified education and economics and holistic health care broadly from a perspective of mental health, behavioral health, and health care as other big themed areas to dig into as a committee but has as yet been unable to while focusing on the housing theme. She asked how to best support OHE and their initiatives and issues as well as bringing other issues to the fore.

Plan Agenda for Fourth Quarter Meeting

Chair de Guia summarized today's discussion into five themes for the fourth quarter meeting:

- Subcommittee Members have suggested carving out time next year to discuss and address the refugee and immigrant crises that are taking place and if there are ways from the public health department perspective that the AC can weigh in or provide recommendations or get engaged.
- Subcommittee Members were thinking about Deputy Director Radhakrishna's presentation at the last meeting, particularly the interest in community and

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stakeholder engagement, how the AC can support the OHE's efforts going forward, and how the AC can play a stronger role in helping the OHE define or roll out some of that community engagement.

- Subcommittee Members asked about funding opportunities and how to partner with the OHE in the next year to look at how to improve, refine, or pilot new funding opportunities with community-based organizations or others.
- The CDPH works with over 58 LHJs. Subcommittee Members asked how to better support the LHJs at the state perspective and how to work with the OHE to think about common themes or the common ways to work together from the state perspective down to the local perspective in order to not reinvent the wheel in every county.
- Subcommittee Members suggested considering ways to be helpful and mindful going forward, as the OHE is doing structural work within the organization.

Deputy Director's Feedback

Chair de Guia asked Deputy Director Radhakrishna for his ideas for the December meeting.

Deputy Director Radhakrishna addressed the five theme areas identified in today's meeting:

Refugee and Immigration

Deputy Director Radhakrishna asked a clarifying question about scope and if it would be within OHE's portfolio around wellness and resiliency, mental and behavioral health, the CRDP, and technical assistance or if it is more of an explorative conversation versus advising ongoing workstreams within the CDPH but outside of the OHE.

Subcommittee Member Ramirez suggested that the AC make recommendations about representation not only including the population in the OHE's portfolio of priorities, given the fact that not only is there a large refugee population but a large number of undocumented Californians and the Governor's work in that sphere. There currently is only minimal representation from those communities in boards and counties.

Subcommittee Member Ramirez stated, as far as work proposals, it is a necessity to continue to ensure that these populations have both procedural distribution and structural equity in all services during the COVID-19 pandemic and other emergencies to ensure that those communities are supported as much as possible. Counties, because of attitudinal barriers for their populations, sometimes create systemic barriers that spill into other counties. This became apparent during the Governor recall election. He suggested seeing how the Department can restrengthen the message that they are here to support and help communities, and maintaining a trauma-informed approach.

Deputy Director Radhakrishna stated the Early Childhood Council began their quarterly meeting with community voices and leadership just listening. He suggested opening AC meetings with AC Members or others from community-based organizations sharing their perspectives with the Director, people involved in the response, and program leads who

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touch on various things within the portfolio. He suggested focusing on the response of the COVID-19 pandemic and services or other areas of work within the CDPH outside of the OHE. He stated, if the AC will specify the topic, he can think about who to invite from leadership, but certainly he, the Director, and the program leads would love to hear in more detail some of the feedback brought up by Subcommittee Member Ramirez.

Subcommittee Member Ramirez suggested the specific topics for the future Community Voices agenda item of the COVID-19 pandemic and housing, focusing on the three major necessities: safety, satisfaction, and community.

AC Chair de Guia suggested connecting with the Immigrant Access Task Force in Los Angeles.

Community Engagement

Deputy Director Radhakrishna stated he shared about future public health work, the workstream he supports, and five potential initiatives. He noted that the initiatives address some of the things the Subcommittee Members discussed – a broader strategic plan around community engagement work, getting specific tools and practices, creating a CRN, an electronic portal – that may be different than CalFinance and will allow for certain capabilities to allow community-based organizations to have better access, transparency, and timeliness and less redundancy, and others. It would be great to dive deeper, define, and talk about implementation.

Deputy Director Radhakrishna stated the initiatives have been put into a memo, which is sitting at Agency with the Secretary, that has not been fully vetted, edited, and publicly released. The memo has gone through several rounds of editing from drafts he shared with the AC at the last meeting. He stated he needs more time to bring specificity to the initiatives after the memo has been approved; then the AC can dive deeper into one piece of it at a time. He offered to send out pre-read materials prior to the next meeting.

Funding and Opportunities

Deputy Director Radhakrishna stated funding and opportunities can be a piece of the initiatives to dive deeper on, as described above.

Not Reinventing the Wheel with LHDs and Support at the Local Level

Deputy Director Radhakrishna stated this is all part of the same conversation.

Structuring and Reorganization

Deputy Director Radhakrishna stated this is currently happening. He stated Ana Bolanos, Assistant Deputy Director, OHE and the Unit Chiefs are very engaged with that. Assistant Deputy Director Bolanos is working on draft organizational charts, moving the pieces and players around, and looking at different funding workstreams. He noted that two new branches of the CDPH are currently being set up: the Advancing Community Equity Branch and the Wellness and Resiliency Branch, which is theorized to house the California Reducing Disparities Project (CRDP) in its extension and expansion and the incoming portfolio work around the Child and Youth Behavioral

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Health Initiative, which is being framed more upstream in terms of wellness and resiliency.

Deputy Director Radhakrishna suggested that staff provide an update, show organizational structures, and take comments at the December meeting. He noted that the challenge is that sometimes things move faster than the quarterly pace. It is important to continue to get the AC Members' feedback and support.

Deputy Director Radhakrishna stated, setting up for 2022, the OHE plans to begin strategic planning. The CDPH is still discussing COVID redirection and vaccines to prevent a fifth surge during the winter holidays and staff continues to be deployed partially to the COVID-19 response. The December meeting would be a great time to share initial thoughts around strategic planning for next year and to get the AC's feedback, support, and ideas for engagement. This is the most important topic for the OHE in terms of how it would benefit from the AC's feedback.

Deputy Director Radhakrishna stated there are many competing interests, tensions, time, and dollars both internally and externally. He suggested having a conversation around some of those tensions to get the AC's feedback and guidance and to set OHE up in terms of contractors and what to prioritize in putting out a Request for Proposals (RFP) for a contractor for strategic planning for the next phase. He stated he would love to get the AC's wisdom and perspective on all that.

Discussion

Subcommittee Member Ramirez stated the Department must stop paying and hiring organizations and contractors who do not provide disability accommodations. This creates barriers. He emphasized that accessibility is a main issue for all communities.

Deputy Director Radhakrishna agreed with disability accommodation access and added that language access is also important for the process from the beginning.

AC Vice Chair Malekafzali suggested allowing time for AC Members to get to know each other. She stated Deputy Director Radhakrishna's point around quarterly meetings is important because quarterly meetings feel rushed to get in as much as possible. It would be great to spend a little time to get to know each other.

AC Vice Chair Malekafzali stated the three items that Deputy Director Radhakrishna raised are foundational: tools, community engagement, and support for ensuring equitable opportunities for the contracting process. It is important to think about those opportunities as part of the AC's focus area.

Subcommittee Member Abwoon stated the importance of streamlining the process to make it simpler such as for insurance requirements to make it more suitable for small businesses that are currently doing the work without being paid.

Deputy Director Radhakrishna suggested a round-robin with all AC Members with a clear prompt to share one issue in the communities they serve that they want to highlight for a story for one minute, and then, with the engagement with the AC, one thing that worked well in 2021 and one thing that could work better for 2022. To hear

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from every AC Member for three minutes each would be a rich hour and everyone would get to know each other better, reflect on this year, and get informed for next year.

Chair de Guia encouraged everyone to come on-camera at the December meeting to help set the room and connect.

Chair de Guia suggested including a quick COVID-19 update at the December meeting.

Subcommittee Member Witte stated the need to ensure that the CDPH, OHE, Department of Health Care Services, and the California Department of Social Services are in collaboration. He suggested inviting representatives from those organizations to the December meeting to see how collaboration can happen and how better models can be developed to get better results.

Subcommittee Member Ramirez stated listening sessions are important and should be developed to move forward. He agreed with having a round-robin. It would help build trust, teamwork, and efficiency in the AC.

Chair de Guia stated the December 1st meeting will focus on team-building and bonding within the AC along with giving input to Deputy Director Radhakrishna. The agenda will also include a discussion about the strategic planning process and answering Deputy Director Radhakrishna's questions. She suggested not delving into issue-specific issues for this meeting, although it is important to hear an update on the COVID-19 pandemic. She noted that there may be new AC Members at the December meeting.

Public Comment

No members of the public addressed the Subcommittee.

12:25 p.m. Closing Comments and Adjournment

AC Chair de Guia thanked everyone for participating and ended the proceeding at 12:33 p.m.