Update on Resolution 2021-01 Declaring Racism a Public Health Crisis

Siri Kushner
Director, Public Health Infrastructure

PHAB
Advancing public health performance
ACCREDITED HEALTH DEPARTMENT · PUBLIC HEALTH ACCREDITATION BOARD
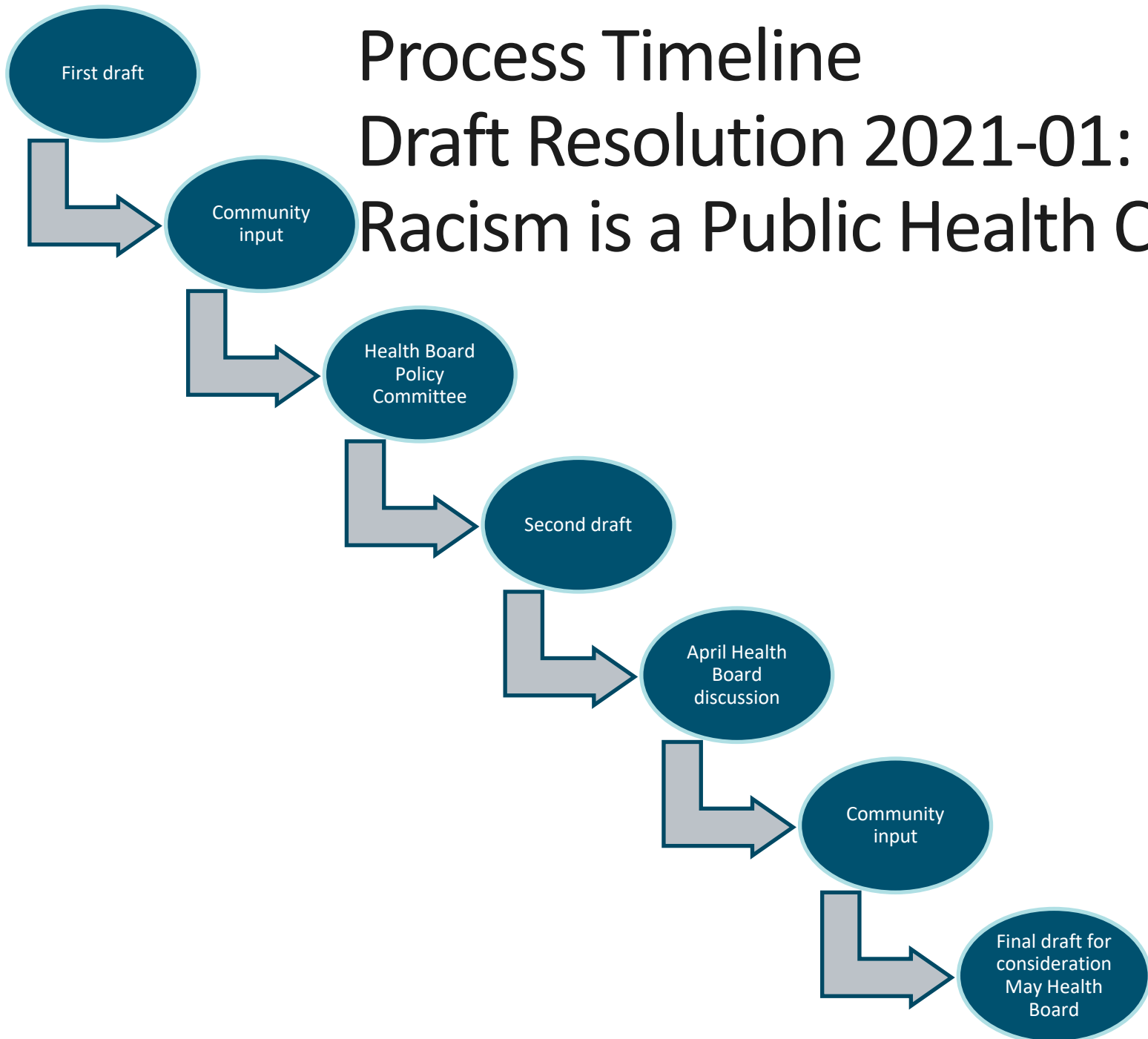
KITSAP PUBLIC HEALTH DISTRICT

Declaring Racism a Public Health Crisis

- COVID-19 revealed and widened longstanding health inequities.

- Kitsap community members called for concrete action on racism and equity.

- KPHD employees drafted a resolution, got community input, and shared with the KPHB.

- In May 2021, the Kitsap Public Health Board declared racism a public health crisis.
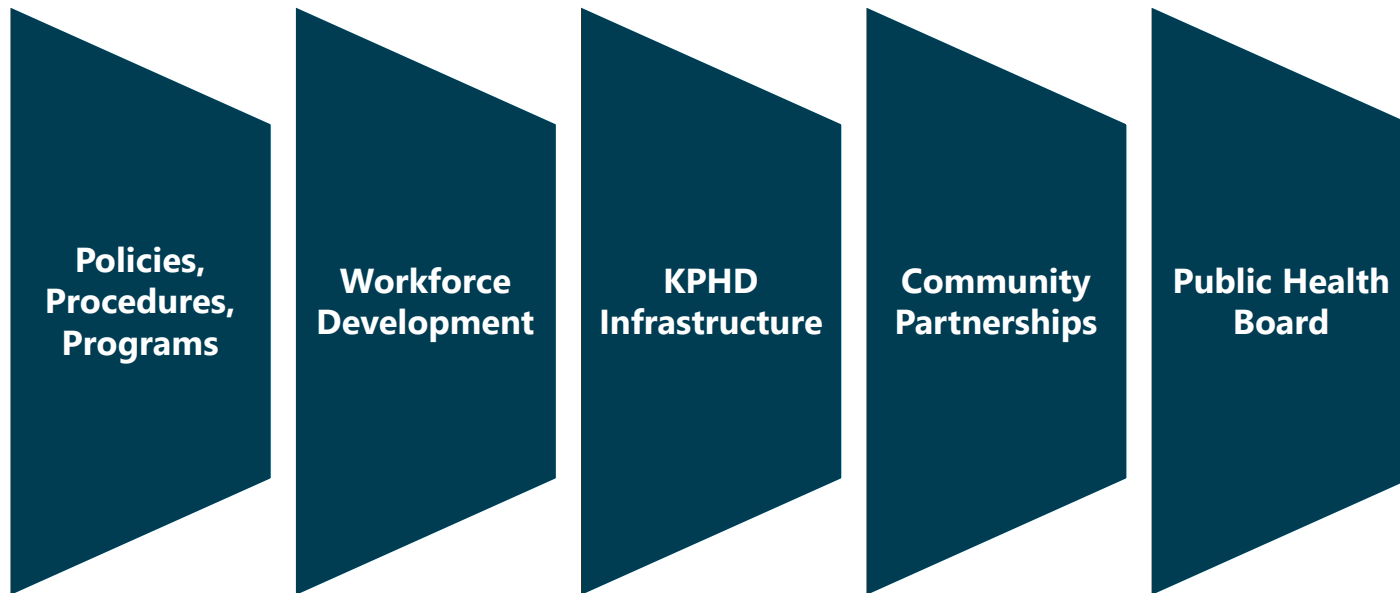
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Process Timeline
Draft Resolution 2021-01:
Racism is a Public Health Crisis

First draft

Community input

Health Board Policy Committee

Second draft

April Health Board discussion

Community input

Final draft for consideration May Health Board

KPHB Resolution 2021-01

- Resolution acknowledges inequities and includes data and commitments

- Commitments fit into 5 categories:

| Policies, Procedures, Programs | Workforce Development | KPHD Infrastructure | Community Partnerships | Public Health Board |

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Updates: Policies, Procedures, Programs

- Equity review of PHAB documents (for 21 requirements).

- 7 internal policies reviewed with "equity lens."

- Provided technical assistance to programs in all divisions.

- Draft internal policy equity review form, will test and finalize by December 2023.

- Started researching policy review processes for outward facing policies.

Workforce Development

- Launched 1st employee training (focus: identity and power), > 90% of employees trained.

- Conducted 3 presentations on bias at all hands meetings.

- Currently revising equity training plan.

- Hired Equity Program Community Engagement Specialist.

- Provided input and supported recruitment of select positions.

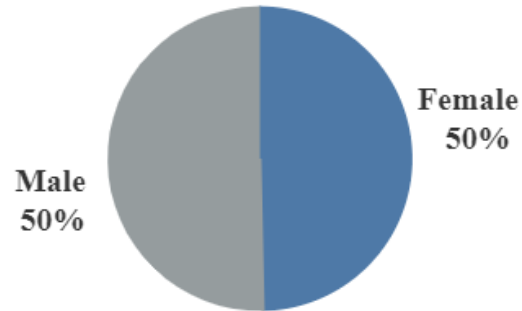- Employee demographics on website (updated twice year, last updated January 9, 2023).

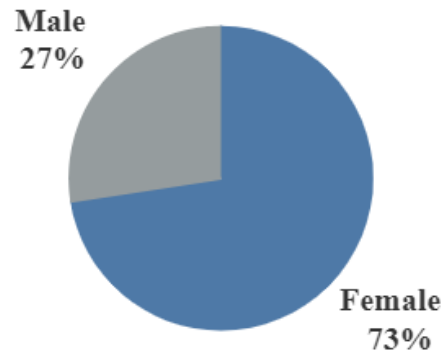# Kitsap Public Health District (KPHD) Demographics
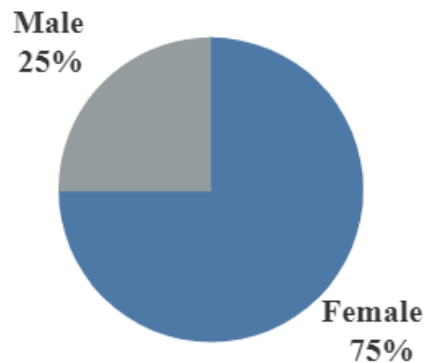Updated January 9, 2023

Gender

Kitsap County, Washington

Female 50%
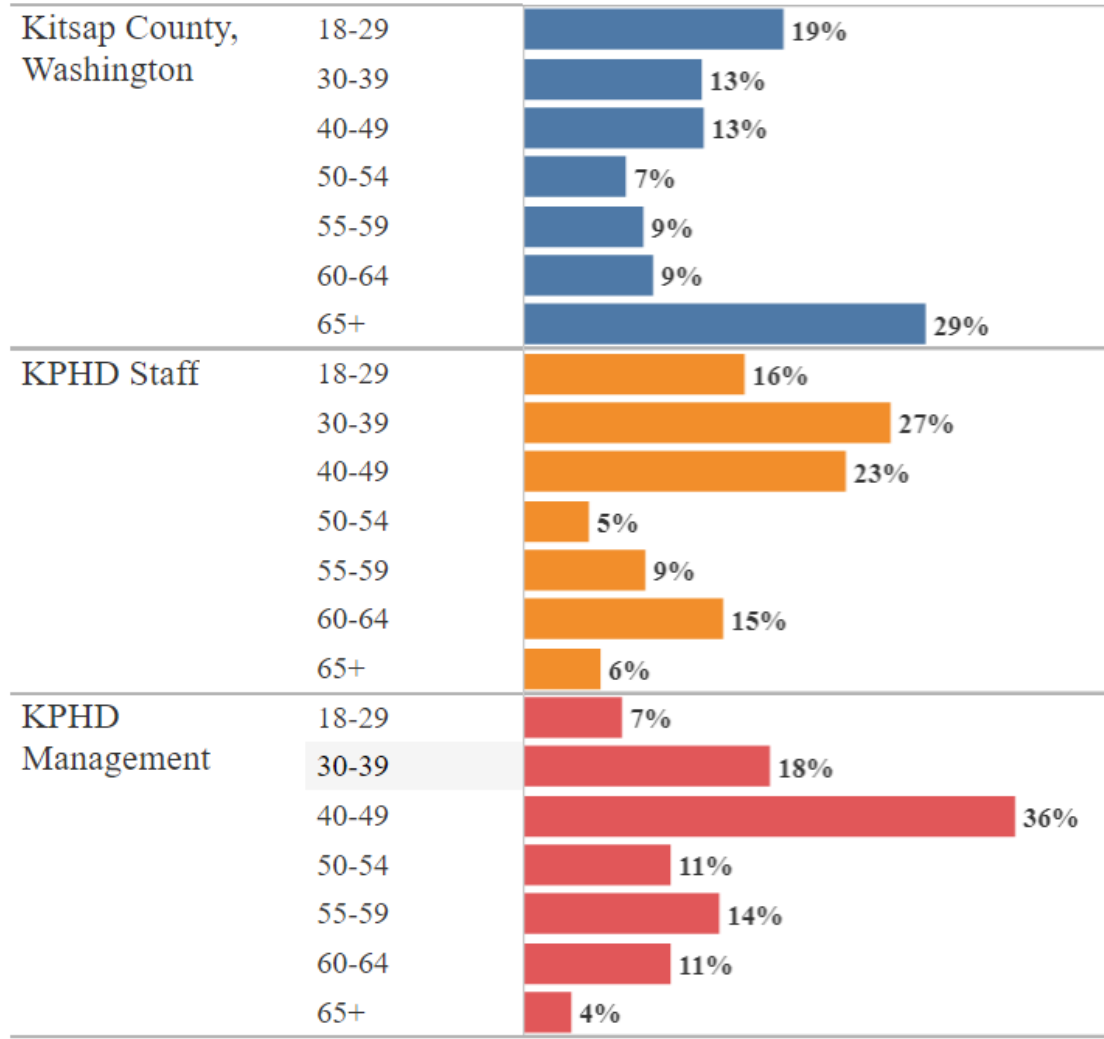Male 50%

KPHD Staff

Male 27%
Female 73%

KPHD Management

Male 25%
Female 75%

Kitsap Public Health District (KPHD) Demographics
Updated January 9, 2023

Age

Kitsap Public Health District (KPHD) Demographics
Updated January 9, 2023

Race/Ethnicity

Group	Category	Percent
Kitsap County, Washington	NH American Indian/Alaska Native	1%
	NH Asian	6%
	NH Black	3%
	NH Pacific Islander	1%
	NH White	79%
	NH Multiracial	4%
	Hispanic (Any Race)	6%
KPHD Staff	NH American Indian/Alaska Native	2%
	NH Asian	6%
	NH Black	4%
	NH Pacific Islander	0%
	NH White	77%
	NH Multiracial	7%
	Hispanic (Any Race)	5%
KPHD Management	NH American Indian/Alaska Native	4%
	NH Asian	11%
	NH Black	4%
	NH Pacific Islander	0%
	NH White	68%
	NH Multiracial	11%
	Hispanic (Any Race)	4%

KPHD Infrastructure

- Equity Program has 2.0 FTE (Program Manager and Community Engagement Specialist).

- Currently working on proposal for Internal Equity Committee; launch in next year.

- Conducted multi-phase equity organizational assessment in 2022. Process deemed best practice by Johns Hopkins research team.

- Incorporated equity into strategic planning process.

Community Partnerships

- Working with other KPHD programs to have information tables at community events (6 events in 2022, 7 events so far in 2023).
- Building relationships with community leaders, organizations.
- Participating in community initiatives, coalitions, and meetings.
- Convening Kitsap Health Equity Collaborative.

Kitsap Public Health Board

- Supported recruitment of non-elected board members.
- Provided 3 updates to board since Equity Program started.

Priorities for Next 12 Months

- Complete internal and external policy equity assessment form and processes.

- Conduct 2 employee trainings.

- Launch KPHD Equity Committee.

- Work with Collaborative on addressing systemic inequities.

- Continue to build relationships and listen to community.

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Declarations Across the U.S.

- As of May 11, 262 city, county, and state declarations listed.
- 11 declarations listed in WA State: Clark, Jefferson, King, Kitsap, Kent City Council, Snohomish, Spokane, Tacoma-Pierce, Thurston, Whatcom, WA Public Health Association.

https://www.apha.org/topics-and-issues/health-equity/racism-and-health/racism-declarations

Questions:

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Equity Program Manager

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Community Health Assessment Updates

Siri Kushner, Kari Hunter, and Ally Power, Kitsap Public Health District
Tony Ives, Executive Director, Kitsap Community Resources

June 6, 2023

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Topics we'll cover:

- KPHD Community Health Assessment and Improvement Process – Siri
- Methods for Assessment - Kari
- Results from KCR Assessment – Ally
- KCR Next Steps - Tony

KPHD Community Health Assessment updates

- Collaborative process to create a community health assessment (CHA) and improvement plan (CHIP) is best practice
  - every 5-year requirement for public health accreditation

- Last KPHD CHA/CHIP process was late 2019/early 2020

- In Kitsap, this has been called Kitsap Community Health Priorities (KCHP)

KPHD Community Health Assessment process

- Current timeline:

| Publish CHA chapters with quantitative and qualitative data

 Aug-Sept 2023 | → | Review data and identify key topics with partners at Data Summit

 Sept 26, 2023 | → | Review data and identify key topics with community at local Data Walks

 Oct/Nov 2023 | → | Convene partners + community to prioritize key topics and develop CHIP

 Early 2024 | → | KPHD will designate two priorities to work on

 2024-2027ish |

Community Assessment Methods

Inputs:
- Quantitative data
  - www.kitsappublichealth.org/data

- Qualitative data:
  - Focus Groups
  - Interviews
  - Community survey

Kitsap CHA Chapters:
- Demographics and Social Determinants of Health
- Environmental Health
- Access to health care
- Pregnancy and Births
- Health Related Behaviors and Violence
- Communicable Disease
- Chronic Disease
- Emotional Well-being
- Injuries, Hospitalizations and Deaths

Where possible, break down data to look at our community by sub-groups

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Thank You!

We thank the many community members and organizations that supported and participated in the focus group discussions and community survey.

Kitsap Community Resources

Anthony Ives

Chelsea Amable-Zibolsky

Arber Metuku

Otto Matias

Monica Atkins

Patience Kropp

Irmgard Davis

Partnerships

- Amazon
- Bremerton Chamber of Commerce
- Coffee Oasis
- Islamic Center of Kitsap County
- Kitsap County Government
- Kitsap Economic Development Alliance
- Kitsap Immigration Assistance Center
- Kitsap Mental Health Services
- Kitsap Regional Library
- Kitsap Rescue Mission
- Marvin Williams Recreation Center
- NAACP Bremerton Unit 1134
- Olympic College
- Peninsula Community Health Services
- St. Vincent de Paul Bremerton

And the many businesses and individuals who helped with outreach and engagement!

Survey Sponsors

- Bainbridge Island Community Foundation
- Bremerton Housing Authority
- Fishline Food Bank & Comprehensive Services
- Kitsap Community Foundation
- Kitsap Community Resources
- Kitsap Public Health District
- Kitsap Strong
- Molina Healthcare
- OESD #114
- Port Gamble S'Klallam Tribe
- Puget Sound Energy
- The Suquamish Tribe
- United Way of Kitsap County
- Washington State Department of Commerce

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Community Conversations

1. (10) community workshops with community members

2. (16) key informant interviews

3. Community survey
   - June-October 2022
   - More than 4,200 respondents
   - Good response rates by area of the county

Who participated in the survey?

The survey was open from June through October 2022, **4,205** responses were included in the analysis.

Race and Ethnicity* (n = 4,205)	# of respondents	% of respondents
African American or Black	124	3%
Asian or Asian American	210	5%
Hispanic, Latino or Latinx	233	6%
Native American or American Indian	201	5%
Native Hawaiian or Pacific Islander	76	2%
White or Caucasian	3,405	81%
Middle Eastern or North African	35	1%
Prefer not to answer	371	9%
Multiracial	357	9%
Single Race or Ethnicity	3,477	91%

Age Group (n = 4,205)	# of respondents	% of respondents	Kitsap % of total
Younger than 18	9	0%	20%
18-24	153	4%	9%
25-34	565	13%	13%
35-44	711	17%	12%
45-54	561	13%	11%
55-64	760	18%	14%
65 or older	1,337	32%	21%
Prefer not to answer/Did not respond	109	3%	

Who participated in the focus groups?

In all, **ten focus group discussions** were held from October through December 2022 with the general community and specific community groups.

General Community	African American/Black Community Members	Community Social Service Agency Providers	Mam-speaking Community Members
	People Experiencing Homelessness	Spanish-speaking Community Members	Tribal Community Members

What did we hear?

1. **Challenges meeting basic needs.**
2. **Disconnect between services and the people they serve.**
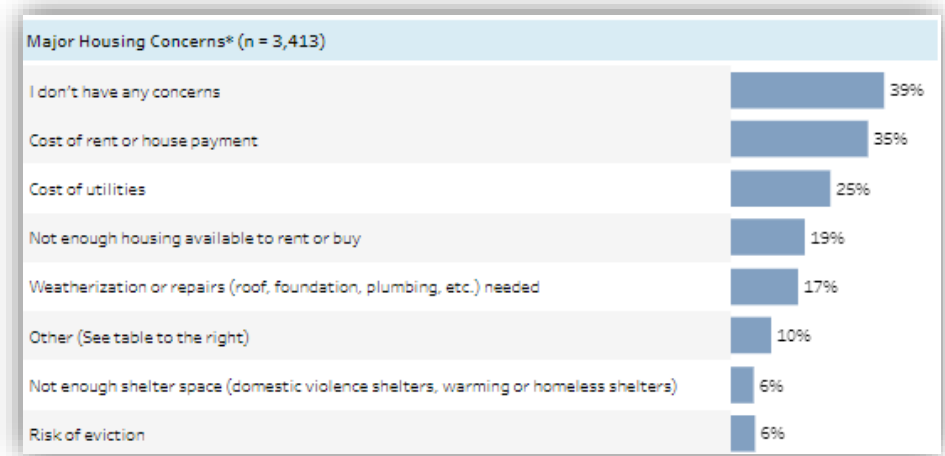3. **Barriers to accessing healthcare.**

Source: Image by upklyak on Freepik

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1. Challenges meeting basic needs

Cost was the primary barrier preventing survey respondents from meeting basic needs for housing, food, reliable transportation, and childcare. Of these basic needs, housing impacted the most participants with 35% (n=1,197) reporting cost of rent or house payment as a major housing concern (see figure on the right).

Participants in eight of ten focus groups discussed ongoing challenges to meeting basic needs for themselves and their families. Housing in particular was a major concern with participants discussing the **lack of affordable housing and shelters in Kitsap and the need for home repairs, including weatherization support and ramps for the elderly.**

Major Housing Concerns* (n = 3,413)

I don't have any concerns	39%
Cost of rent or house payment	35%
Cost of utilities	25%
Not enough housing available to rent or buy	19%
Weatherization or repairs (roof, foundation, plumbing, etc.) needed	17%
Other (See table to the right)	10%
Not enough shelter space (domestic violence shelters, warming or homeless shelters)	6%
Risk of eviction	6%

"[We need] affordable housing, transportation, and better shelters, because I was in one and they banned me permanently, because I'm incontinent. So they banned me permanently. So I was sleeping outside."

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2. Disconnect between services and the people they serve

ELIGIBILITY CONCERNS

- **Being ineligible or not qualifying for help** was the primary barrier to getting needed help with basic needs among survey respondents (19%, n=658).
- When they needed services but had not used them, about one in six (16%, n=473) participants reported they had **exceeded the income guidelines to receive services they needed**.

COMMUNICATION CONCERNS

- Participants in all ten focus groups discussed a disconnect between services and the people they serve, referencing **difficulty navigating application processes, a lack of accountability, and fragmented service delivery.**
- Several participants discussed the **need for better integration and communication within and between community organizations.**

"I really think poor interagency communication and collaboration is just adding to such a significant burden to those that need, deserve, qualify, want, whatever, services in general."

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3. Barriers to accessing healthcare

Appointment wait times were reported as the primary barrier to accessing needed mental health counseling and needed medical care by survey respondents with more than two in five respondents (44%, n=476) reporting too long to wait for an appointment for medical care (see figure on the right).

Participants in nine of ten focus groups referenced several barriers to seeking and receiving healthcare, including **months-long wait times for primary and mental health care visits, fear of medical bills, and previous experiences with inadequate interpreter services.**

Why Not Able to Get Medical Care* (n = 1,085)

Too long to wait for appointment	44%
I couldn't afford to pay my co-pay or deductible	29%
Other (See table to the right)	19%
Fear	16%
My doctor moved, retired or I have no doctor	14%
I didn't have health insurance	14%
I didn't have any way to get to the doctor	11%
The doctor or clinic refused to take my insurance or Medicaid	8%
I didn't know how to find a doctor	5%
I can't find a provider who offers interpretation and/or culturally competent services	4%

"…I can't find service here for my kids, I can't find doctors that will bring them in…my kids are on state, they're on Apple Care, and nobody takes it."

What can we do?

These next steps were generated from focus group discussions, where community members shared potential solutions to address the health needs of our community:

"[We need to make] sure that people understand what the available resources are and how to access them."

1. Develop a ***directory of resources*** for the community.
2. Improve ***access to services*** that provide basic needs.
3. Build and maintain ***strong partnerships*** with community, healthcare, and tribal organizations.

"We have to think about people that have the language barrier, that don't speak English...I understand there's deadlines and documents that need to be sent in and sent back, but are those hard deadlines and are they being accommodated for individuals that maybe have a disability or have a language barrier?"

"I really think it boils down to absolute lack of interagency connecting and networking and failure to address that...you're responsible to know that your clients rely on a multitude of agencies outside of the services you are giving them."

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The Story

- Connect with the underserved population
- Information we can share within our community for all to benefit
- Not reinventing the wheel
- Access To Services
  - Healthcare
  - Housing

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Community Needs Assessment

- Specific Needs to be addressed
- Franciscan Medical
- PSE
  - Energy Sustainability
  - Alternative energy solutions
- Kitsap Transit

Kitsap County Affordable Housing Task Force

KitsapHousingTaskForce@gmail.com

- Government Advocacy & Funding
  - Funding Pipeline
  - KCR
- Housing Data
  - CNA
  - St. Vincent De Paul
- Housing Opportunities
  - Project development along high transit corridors
  - BHA
- Leverage Funding

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What's Next?
Strategic Plan

- Improve access to services that provide basic human needs

- Build and maintain strong partnerships with community, healthcare, and tribal organizations.

- Develop a comprehensive directory of resources

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Questions?