The Undeclared Crisis

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at the San Francisco Department of Public Health
A brief overview of the health department's role in your County's declaration of racism as a public health crisis. How, if at all, did the broader jurisdictional commitment build on/support your ongoing racial equity efforts? What are some critical additional goals that were elevated as priorities as a result of the declarations?

A joint resolution with a matching declaration from the Human Rights Commission. Written by the COVID Response Equity Officer from HRC and DPH staff deployed to the COVID response.

**Specific Commitments**

- Funding for Office of Health Equity
- All staff equity training,
- Establish measurable equity goals
- Review all existing policies
- Establish new anti-racist policies
- Use an equity lens to develop RFPs
- Equity criteria for all contractors
- Disaggregate all data by race, SOGI
- Improve the experience of Black staff
- Review progress of this plan 2x/year
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Operationalize

Organize

Normalize

Leadership training
Equity leadership staff
Data and staff assessments
All-staff training

2014

2021
SFDPH Approach

Office of Health Equity
- Communications
- Workplace Inclusion
- Staff Training
- Equity Leadership
- Quality Improvement
- Community Partnerships
- Strategic Planning
- Data and Reporting
Assessment

• Organizational Development
  o GARE and BARHII

• Team Dynamics
  o Everyday Racism Scale
  o Limits vs. Opportunities

• Staff Engagement Survey
  o 6 Questions based on GARE

Native American and Pacific Islander scores too few to report
• Weekly Discussion Series
• On-line Racism and SOGI 101
• Orientation “Culture Day”
• 28 day Self-Study Challenge

Capacity: Training for Skills

• Relationship Centered Communication
• 5-mo Health Equity Fellowship
• Equity Champions

Culture: Awareness Training

- Click on the dates to compare years to 2020

<table>
<thead>
<tr>
<th>1790 U.S. Census Categories</th>
<th>2020 U.S. Census Categories</th>
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<tbody>
<tr>
<td>Free white males</td>
<td>White</td>
</tr>
<tr>
<td>Free white females</td>
<td>Black or African American</td>
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<tr>
<td>All other free persons</td>
<td>American Indian or Alaska</td>
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<td>Slaves</td>
<td>Native</td>
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<td>Chinese</td>
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<td>Other Asian</td>
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<td>Another Hispanic, Latino,</td>
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<tr>
<td></td>
<td>Spanish origin</td>
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Source: Pew Research and U.S. Census Bureau
A Distributed Team

1. Chief Health Equity Officer
2. OHE Managers
3. OHE Support Staff
4. Equity Leads + teams
5. on Exec. Equity Council
6. on Divisional Councils
7. Health Equity Fellows
8. Equity Champions

Office of Health Equity

Admin
Hospitals
Behavioral Health
Public Health Services
Community Clinics
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- Communicate equal access and equal quality as a goal
- Data disaggregation
- Gap closure as a standard for success
- Identify bias through data
- Standardization to reduce bias risk points

Disparities Reduction as Quality Improvement

![COVID-19 vax appointments @ SFHN hubs](image-url)
Community “Engagement”

2022 SFDPH Equity Focus

• Black Health Disparities Planning Group

• HIV funding directed based on disparity level

• Heart Health Ethnographic Study

• End Hep C – Community-led outreach planning

• Black Family Mental Health RFP – Community-led priority setting and model development

• Regional Pacific Islander Task Force
COVID-Response Community Approaches

2022 SFDPH Equity Focus

- Formalized community liaisons
- Non-transactional CBO relationships
- Feedback loop with community
- Co-decision making with organizers
- Neighborhood-based service models
Annual Area-Level Planning and Formal Reporting

Annual area-level equity plans ensure:

- **Focus on area of agency** – countering the *fundamental attribution error*
- A developmental approach

**Formal reporting promotes:**

- Recognition of “wins” – countering the racist “*myth of immutability*”
- Leadership engagement and accountability
Lessons ...So Far

1. Community and staff have reason for doubts – success means more than words
2. The early adopters are a resource – internal wins are motivating
3. This is internal Collective Impact – backbone support and continuous communication are key
4. Designated leadership makes it MORE likely that others will participate not less