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RUHS 101823

[Captioner standing by]

(Music Playing)

>> Hello. Hello. Okay. All right. Hello beautiful people.

How is everyone doing? In person and virtually. I hope everyone is doing well. Thumbs up? Nice. Good morning y'all. Thank you so, so, so much for coming in today. We want to say thank you on behalf of the health equity team, RUHS public health and the health coalition. We're happy to have you and also our virtual folks. Before we begin, turn to your neighbor and tell them hi, you look good today. We need to tell folks you look good today. Virtual folks, I know we can't see you, but tell yourself or someone in why you are house you look good today. Come on. Yes. For folks who may not know me, I'm Mary Obideyi, a program coordinator here at RUHS at the Health Equity Program. I'm one of the co-leads and facilitator for the Riverside County Health Coalition. I have a colleague who wants to introduce herself.

>> Hi good morning everyone. Just want to make a quick announcement in Spanish.

(Speaking Spanish)

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My name is Daisy Ramirez Bell, program coordinator with the health equity community outreach program and I'm happy to be here.

>> Thank you Daisy. As you see on the screen, our topic for today is revisiting racism and inequity as a public health crisis, where we are now and where we're headed. Clap for that. It took a long to get here. We're super glad we're able to come today, get updates to the community about this and really just have a place for Q&A and understanding where this goes next. Thank you so much everyone.

So, just to let you know why we're here, especially when it comes to the Riverside County Health Coalition meeting, our mission is to promote, improve and sustain social and physical environments for health and wellness in Riverside County. This is where everybody comes to the table to work together to improve the health and well-being of our residents. This is huge. I'm super glad we're here to discuss this and how we can do this together. Why are we here? What is the main thing the coalition does? Really, with this, it is more expansion of partnerships, sharing resources, that's a huge thing with our coalition. We share resources with one another and with the community.

And then another thing is highlighting innovative practices. We know there

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is many great things in the community they're doing to bridge the gap. We have community health workers, so many ways to make sure people are getting equitable and inclusive resources. And then another thing too, our community empowerment, right? That is the whole thing. Basically when it comes to the coalition, it is community driven, led. This is so important. Again, we can't do this all just by one person. Right? We can't do this by one organization. It really takes the whole village to make sure everybody is squared away and okay.

That is why each of you who is in person right now, and also virtual, is very, very monumental to this. You're a key player to making sure our residents today can be able to get the equitable inclusion type of resources they need to thrive and just do well, right.

Then another thing with our Riverside County Health Coalition, as you know, we meet quarterly. This is actually the last meeting of the year. Again, we will pick up in January 17<sup>th</sup>, 2024, but as you see here on the screen, this is just more of telling us when we meet. We definitely have some things we can't wait to show you next year and a lot of things we're waiting to show to the community and again really make this it is more community driven. Please be on the look out. If you do not have our e-mail, it is -- if you know anybody that

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needs to be on the e-mail list, put them there. Tell them you need to come to the table. We need to make sure it is community driven, not just one organization.

All right. So I just want to also as well too our Health Equity Program warmly welcomes everyone here in the meeting virtually and in person.

We want to thank -- hybrid meeting runs smoothly. We would like to thank the city of Moreno Valley and the recreation center coordinator Dave flowers allowing us to use this space for the meeting today. Last but not least, we would like to thank the native and indigenous people whose land we're meeting on. Before we continue with the meeting, I'll have my colleague Daisy acknowledge the land we're on.

>> Thank you Mary.

As many of our, of you already know, last Monday October 9, was indigenous people's day. The month of November is Indian heritage month. We the coalition celebrate our native indigenous peoples of Riverside County. As Mary mentioned, we would like to acknowledge the land we're on.

Commits to practicing culture, humility, reciprocity, respecting and supporting the tribal sovereignty, culture and beliefs of the indigenous peoples of

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Riverside County and beyond.

We acknowledge the traditional ancestral and contemporary homelands of the indigenous peoples of Riverside whose land we occupy.

(Land acknowledgment).

Caretakers of the land, water and air since time immemorial. We hope to build an ongoing relationship with indigenous peoples of Riverside County as we learn from their vast experiences. We recognize there have been past injustices and aim to move towards reconciliation, good intention and respect. We challenge you to join us in this work. If you are unaware of the land you're currently on, we encourage you to visit the following website. [Native-land.CA](http://Native-land.CA).

To learn about the indigenous people in your area and the history and their ongoing resilience. Those who are joining online, our chat moderators will be providing the links so you can currently go on and see the land that you are on.

Again, we want to welcome everyone to the meeting today. We have great speakers who are able to provide information on the work that is being done to address systemic racism and inequity in the County. And thank you for speakers who have agreed to share their knowledge with us today.

Before we get started, we want to make sure that we provide

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housekeeping for both in person and virtual. Those that are joining here in person, we had a record breaking sign up for this meeting. We had about 100 people in person, and about 200 online. We just want to make sure that all of our tech, everything is running smoothly.

If you are joining us in person, there was a sign in table at the front. We want to make sure we know who was here to follow up with any questions you may have.

We also have the restrooms located down the hall to the right.

A breast feeding room if you're in need of using that.

We have a Dorothy in the back who can guide you to that location. We have closed captioning services in English and Spanish as well as an AL interpreter. Slides and recording of the event will be shared after the meeting. Those joining virtually, write your name, pronouns and affiliation in your profile name. We want to make sure if you have any questions our chat monitors are able to answer those. Please submit through the Q&A box so they are not lost throughout the chat.

Now for our agenda. We have those available as a handout here. We also want to go over it here to the slide. We will begin with a presentation from the

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County Executive Office. We have Barry Knight who can provide a update on the declaration -- it will follow with a Q&A, so make sure that you gear up your questions for both in person and online.

We will have a 10-minute break, and then we're going to come back for a virtual presentation from the prevention institute. Katie Miller, associate program director will provide an update on the Riverside County health equity strategic plan responding to racism as a public health crisis. Again, we will have an opportunity for Q&A. Gear up your questions, and then we will provide an opportunity to provide partner updates so we know about the great work you're doing, different events happening so we can know about those and share them with the community.

And then we will close with our Health Equity Program updates.

All right we want to know who is in the room. We will do an introductory poll for folks online. If we can pull up the poll. Those in person and maybe you have attended a previous meeting, we did the wave, do you remember?

Yes? I hear, I see some nods. If you were not here for the wave, it goes like this. We want to make sure that we're getting up and moving so we can be alert as we start with the presentations.

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I start as I start naming the different sectors, I want to make sure that you are standing up as we, as you hear the different sector that you are part of. We will start from my left, your right, and then move across the room.

Okay? We're going to start with community members and students.

Anybody here?

Woo. Yay.

How about community based organizations and faith based organizations?

Yay.

How about education/academia?

Government? Yay.

Healthcare/public health.

Yay.

So, many of you might fall under different categories. Housing/planning.

I seen Miguel. If you know Miguel, he stands up for every one.

Law enforcement/first responders.

Yay.

Our native and tribal community.

There were several that signed up online. Thank you.



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Social services/mental health.

Thank you. How about other, any other?

We might not have mentioned, do you want to tell what sector it is? Yes?

Nonprofit, yes.

Thank you.

All right we're going to do a wave for the whole attendees. Start here.

Ready? Go.

All right. I'm going to hand it back to Mary.

All righted. Thank you everyone. As you see, when we do that part, I know we do this every meeting, however it really important. It helps us see who is not actually in the room, right? You saw we have other folks, especially law enforcement, community members. That means again it takes a village to raise more of the community. Let folks know about the Riverside County Health Coalition and how much we as a coalition need them, right, to really bring their expertise, their knowledge and importantly, bring those types of equitable and inclusive types of resources. Again, thank you so much everyone. We appreciate you for participating in that. Before we get into our first speaker, I want to go a bit over about the declaration on racism and inequity as a public

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health crisis.

The deaths of many in 2020 as well as the disproportionate effects of COVID-19 prompted a national dialogue about the negative impacts of racism in our country.

Across the country local and state leaders declared racism as a public health crisis or emergency.

Our Riverside County board of supervisors was among the leaders. On August 4, 2020, the Riverside County board of supervisors voted five-zero to declare racism a public health crisis. These declarations were an important first step to advancing racial equity and justice. Among the plan actions and the resolution, supervisors agreed to seek more and create a inclusive well informed governmental organization that is conscious of injustice and unfairness through robust trainings and continuing education. Also looking into eliminating those policies and practices that facilitate discrimination and violence against specific populations and implement community based alternatives to address harms and prevent trauma.

You can read more about the resolutions on the document. I know for in person folks, we made sure to give you that. Part of the resolution is in the

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packet. If you want to read it, I implore you to read more about that. For virtual folks, you're going to have a link in the chat right now, if you want to read more about that.

Again, it is really important for us to know the resolutions, and again, that is where we make sure that community driven place coming to bridge the gap.

Just before we get in, I think it is important to also talk about the defining terms, right. When we talk about what how this impacts health and why is there important for us to discuss today. When we talk about racism, as you probably already know, it's more of a system consisting of structures, policies, practice and norms, right. That assigns value and determines opportunity based on the way people look or the color of their skin. This results in conditions as you already know that are unfair to some and disadvantage others in society. As we look at systemic racism and infrastructure of rulings, ordinances and statutes created about I a government or -- entitle one ethnic group in a society certain rights and privilege while the nine other groups in that society the same rights and privileges. We also look into inequity. We know that refers to the lack of equity, which means justice or fairness.

Again, I want you guys to understand when it comes to these terms and

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how this impacts the health and well-being of people everywhere. I want us to watch a video which gives a visual how racism impacts our health. And this is created by CDC.

>> All right. Thank you for watching.

Now I'll introduce our first speaker to explain the declaration and the County's address to it in depth.

Barry E. Knight serves as DEI Officer for the County of Riverside. His work includes

working with department leaders and analysts to identify and implement solutions

to eliminate inequity and disparity in all internal and external services for any

individual/community and improve the quality of life for the people they serve.

Mr. Knight is also the founder and CEO of BEK Impact, a leadership consulting firm

dedicated to unleashing the executive leader's power to drive greater impact and

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change by aligning and optimizing their vision, teams, and strategy.

Everyone please give a warm welcome for Mr. Barry Knight.

(Applause)

>> Good morning everyone. Thank you to the three people that are here in the room that responded. Good morning everyone. Good to see you all again. My name is Barry E. Knight. The introduction has been made. Thank you Mary for the opportunity to be here. I'll be brief. I left my phone. Can you grab that? My timer. I want to do this, I promise I have an hour's worth of slides I have to give you in 20 minutes.

Please forgive me in advance if I skip over one or two.

But maybe we can address some things in the Q&A time.

So, I have been speaking for the past last week over seven times. My voice is a little bit tired. Let's go into the updates. I celebrated one year in this position on October 11<sup>th</sup>. I'm one-year-old and I tell people jokingly that I'm walking but I still pee on myself every now and then.

I'm still learning this whole thing of this world of number one the government world that I get to exist in along with many of you all.

This is what we're going to talk about, how we're defining and redefining

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DEI. We added the A for access and continuously evolving to make sense of what this looks like. I will talk fast, but I want to hone in on certain points. We want to talk about what we've achieved so far in just a year. Still a long way to go. We will talk about operationalizing. That is the challenge. I been traveling across the country in the past few years, people get in rooms and have presentations and leave saying what do we do with this information, how do we translate this into action? Anybody heard those conversations or asked those questions.? We talk about how it started. We talk about the resolution, I won't get into that. But we want to move past resolution, resolution is something on paper. Right? It is something we read and say, what does that have to do with me. That is something we ran into with many of the County leaders and community leaders, what do we do with this resolution. Here is the thing I came in thinking. Because I have been involved in this work for some total of probably 15 years before it was popularized as DEIA or DEIB. Whatever the acronym. I been doing equity work as a consultant. We travel around the country doing work around hospitals, Kaiser Permanente, we worked with San Bernardino County children and family services and still hold a contract with Riverside County children services division as well as Bakersfield and Corona Norco unified

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school district. I have done work in this space trying to help organizations operationalize it. A lot of things -- is that my time already? I thought they turned it off. That was a quick 20 minutes. The challenge with this work is again, where do we, what are we defining, how are we defining together and where do we start. The other challenge is how do we quantify what is in a person's heart and what a person believes.

It is easy to say I don't do that. I'm not a part of that.

That might be true for them, but how do we actually show them quantifiably. I wanted to be data driven in everything that we do for the County. I think that is fair for all. I asked myself, where is the puck going? I'll ask you to consider, I asked myself prior to George Floyd in May of 2020, but definitely after George Floyd, I worked with Riverside police department on some issues of engaging opportunities, rather, engaging communities of color. Specifically black communities. I began to ask myself, where is the puck going? Where are we trying to get to. When I'm in rooms across the nation, I was just in Atlanta last month with a group of other leaders in my position, counterparts from around the nation, about 80 of us. That was the question people are asking. Where are we going? We know there's a problem we want to solve, but what are we trying

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to solve, where do we solve. Hopefully I can address that. Many of you heard that quote before.

At speck means this, everyone here drove here in a car.

And no one, no car that was ever manufactured was released off the manufacturing plant 100 percent safe. Everybody understand that? It was not 100 percent safe. In other words the engine could stop on you. There could be a problem with the gas fuel tank. If the manufacture hears about a lot of complaints, what do they do? They have a recall. They call these cars back and say listen, we saw something that we need to fix.

But when they released it, they release at speck. It is safe enough. This was the challenge. The first thing I did is say what is safe enough when you have an acronym that is consistently changing over time? When you have a group of people who identify as one group but when you look in the group in the subsets, those groups don't even agree with each other on terminology and pronouns. How do we define at speck? That is the lesson I had to prepare myself for and to solve.

We're still defining that. We're still looking at what is at spec, what is good enough, safe enough, what's the best we can start and evolve.



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One thing I came upon is John Powell's -- excuse me, targeting universalism. I believe it had is equity 2.0. This is the at spec that I was looking for. Is there a microphone, handheld I can have? I like to walk around.

This is the at spec we were looking at, targeted universalism. One of the challenges with dealing with people, when you mention DEI or any other acronym, you have polarizing thoughts. Some people say no, get that away, we don't need that, we're beyond that. Others say you're finally seeing my people and who we represent. But if we're looking at equity 2.0, we have to define what we want all people that we're serving to look like.

What does success look like for all individuals?

This is something that a lot of County leaders I've worked with have a difficulty answering. I spoke three weeks ago for self-sufficiency for the County. As I was talking, I topped and said wait a minute. Let me ask a question. I want you to take five minutes and ask yourselves, what does self-sufficiency look like? I want you to think about. That.

What does self-sufficiency really look like?

And then I gave them five minutes and it was the most amazing thing. You can guess what happened. Everyone had different responses.

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We don't start there. We start with the conception, a mental model of what, by the way, for those who don't know me I'm a preacher if I kinda get excited just blame it on that. I don't apologize for it. What does self-sufficiency look like, is it different from one zip code to the next. I don't know about you but my father passed away when I was 13 and somehow my mom remained self-sufficient as a single working mother who did not have a degree and was a secretary. I didn't find out my mom was broke until I was grown. You think your mom or dad is rich, we got money, no, my mom was broke, but somehow she was self-sufficient.

So what is self-sufficiency? Do we have a defined picture of what success looks like? And then what we're doing with the County governments because we want to be County departments we want to be data driven. We're saying in comparison to what success looks like, we map out the various demographics and representations in our County or department our amongst the people that we serve and map them out and comparison to this defined success goal.

What does success look like? A lot of times, here it is, the challenge when we look at data, it is not always going to be by race. Sometimes it is by zip code. We have to look at that. If we only go by what's happening in the media,

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it is easy to say it's a race thing. When I was working with Corona Norco, when we break down the data and get subsets and get deep in the data, we talk about equity in school districts and education, many of you are in education, when you think, when you look at the dashboard of the California Department of Education, we think equity is black or white. We go straight to black or white in education. When we broke the data down, we sat and wait a minute. When we look at a black child from a two parent household, two parents are working adults, have a certain level of education versus a white child in a single parent home, that gap closes, I mean, like drastically if not switches where that black child out performs the white child. There were now targeted approaches that we brought. Instead of saying all of this group of people, we broke it down in subsets so we could get equity 2.0 at spec. We can really get a better defined approach and a better defined insight to what issue we're really trying to solve. Number one, we have targeted universalism. We know what we want people to look like.

What do we want that community to look like? It will differ, but basically what is the scale of success that not only that we handed out this product to them or this service, but did that service work for them?

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Did it improve the quality of life for that particular person, individual or community that we're serving.

We have a universal approach, but then there are sometimes that we need targeted approaches.

And we cannot know that if we don't start with data.

We must start with data.

Then you have to over analyze the data. Here is another thing. You have to get diverse people in the room top look at the data.

What do you mean Barry? Long time ago, there was a person who invented the toilet.

You are supposed to laugh there. This is a hard group. That's okay. Somebody invented a toilet and they didn't put a lid on it.

Because it was, they didn't think about other people.

Then finally somebody says we should probably put a lid on the toilet, diverse perspective. So let's go further.

I'm skipping this. Here is one thing I understood. Diversity is not an outcome. Say that.

Diversity is not an outcome. I gotta get you talking. We don't walk into a

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room and there's a bunch of white men and say we need black people, that is not diversity. If you do that, history has found out statistically and data shows that is unfair and it does not improve outcomes for either side. Diversity, however is a strategy that leads, this is what we're working on now for Riverside County. Diversity is a strategy that leads to better decisions, discussions and outcomes.

A while ago in 2000, there was a woman named Sarah Blakely. How many are familiar with her.

You heard of this product called spanks. Spanks was made for female women, women at birth, women, women. She made it on the website talking about this. I won't get into the details of what Spanx do. Go to the website if you don't know.

Imagine come her my friend.

Just run up on stage. Stand here. Good.

What's your name? Nick? Imagine nick and I, how many of you know nick? You need to be known. Nobody knows you. We're smart guys. Imagine nick and I said Sarah Blakely didn't come up with spanks. Let's come up with a product for women and call it Spanx. Get your imagination. Draw it out and we

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get to the factory, we are sewing, stitching, trying it on. Don't imagine that. We're trying on the Spanx. What's your name? Dakota? Good to see you. Come up here. Now, are there anyone in here who identify as female. Raise your hand.

Come here. Come here.

Now, we're we've created a great product. Right?

For women called Spanx. If we invite Tony and Dakota on our team, how much better would our product be?

So much. So much. Right?

Why? Diverse perspectives leads to better product. But the challenge what we have to do as organizational leaders and those involved in different aspects of government, nonprofit and education, we have to find out who is our target.

Who are we serving? Do we have data on who they have? Are we only focused on how much widgets we handed out, which is what organizations track. We served this many people. We had this many people come through therapy, but no, who is your audience? Then we make sure that we've hired diverse perspectives to understand who our community is and what their true needs are.

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Let's give these folks a hand. Thank you guys, appreciate it.

(Applause)

What their true needs are. This is the next level of diversity.

When thinking diversity, think about this, this what the County doing. I have department heads working on this now. We have 18 of them on a project of looking at their communities. Diversity is not an outcome. If it's an outcome, Coachella Valley needs more black people and I'm not moving there. I'm trying to move to the beach. I'm trying to get more west. Orange County. Right?

It can't be just an outcome. Else we have to change 94 percent Hispanic to 60 percent so more black people and white people and other ethnicities can move in. It can't be an outcome, but it can be a strategy if we think of Spanx, who are we serving, do we understand how zip codes compare to other zip codes. These are the projects we're working on. Equity is escalators and elevators. We build a building, two stories, we invite people to come and we say let's go to the second level to see what you have done up there and we look downstairs and we notice there is 100 people who are in wheelchairs.

And then we say oh, my gosh, we didn't build elevators.

When thinking about equity, as you're understanding your community, as

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you understand the unique needs of your community, as you understand here is what we want success to look like for all populations, all individuals, and communities that we're serving, then as you get data, we have to find out why this group is not excelling our moving toward that target universalism success at the rate of others. You begin to find through conversation, consulting, advising different departments, these are ongoing conversations we're having to find out where we need to build elevators and as in our communities.

That can be resources, that can be funding. I know a lot of Counties and those of you who work with budgets, sometimes we just distribute the budget evenly.

Doesn't work that way. Sometimes we don't need to put the money in that, we need to build an elevator here. Here is something I understand about elevators and escalators. They benefit everyone.

How many go to three store building -- I don't even know where the stairs are. I take the elevator.

When equity is done right it benefits everyone.

These are just steps. Targeting universalism. I'm almost done. What does success look like, what is at spec for everyone in our organization, our



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department, the community. The individuals we're serving.

And then we begin to map out and look, this is one of the things we have done. We created dashboards and I have data analysts look and say I need this information where are people in comparison to this.

And then once we look at, hey, this people group is here and this people group is here and this group is here, we do more investigation. What are the resources, what is happening there, and this particular organization, or department or community that is causing a greater lift than these? We look at, okay, do we even have an understanding of what the true needs are of those communities?

A lot of times what I found out over 15 years I worked, we do planning at the table about the people without the people.

The most important data you can ever collect is the voices of those who you are serving.

And if they're not part of the conversation, I'll tell you this, it probably won't work.

That is like me, it's your birthday and I go out and get a gift for you. I don't know you, I give it to you and you're looking at it like, um, thank you? I'm

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thinking you should be happy. Why aren't you happy? That is not the way it works.

How often, I want you to ask yourself, how often do you have the voices of the people you're serving at the table?

This is one revolutionary change that I'm bringing to Riverside County.

So help me God. I promise you, we're going to get more of the voices of the people we're serving at the table.

(Applause)

Lastly, when talking about inclusion and access.

Inclusion and access, bottom line I'm going to end here.

We're talking about breaking down barriers.

What is in the way? One of the things we looked at for waste resources, I'm just telling a lot of our business. Hopefully nobody is offended by this.

Waste resources, we were talking about looking at data and saying, hey, there is not a lot of black people that promote or have jobs in waste resources.

Looking at it, waste resources is, you have to have engineering degrees.

Looking at the data, we find out that on a national scale, right, there is not a lot of graduates African Americans graduating with engineering degrees.

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When we look nationally, then we look state, and then regional. Now it could easily end the conversation we could say oh, okay well that's the answer.

But no. We asked, are there any barriers to that?

That we have the power to knock down to get different ethnicities, different people group at least understanding that this is a viable opportunity career path of being an engineer? What are the barriers that stand in the way?

Number one, it is really not taught in schools anymore.

As it used to be.

Barrier, so one of the things we're planning is even though they don't do career fairs anymore as a -- we're going to push ourselves into the schools and into the junior colleges and set up shop there to say, hey, would you like to be an engineer? What is that? Let's talk about it.

That is starting something. Is that operationalizing, getting things done. We don't get to know sometimes until four, eight, 12 years later of the success, but we're starting. It is also creating pathways. That is my time.

[ALARM]

It is creating pathways to success. Maybe there is no barrier. Maybe you just don't know how. Maybe the community doesn't understand what that

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means for them.

We begin to create pathways. We begin to say here is the education, here is the mentoring and shadowing, and then maybe here is some funding opportunities.

This is what we're bringing to Riverside County. My time is up. I do want to ask if keep on going?

(Laughter)

I can do that. If you don't know anything about a preacher, a preacher can always go on. This is what we're looking at in terms of DEI. What I found is what we're really doing is creating equity, creating access, and then creating opportunity.

These three words should be at your discussion table, decision making table. Everything you do is this equitable? One of the other things we're doing, that is what we call equity 2.0, by the way. We developed, we copied and pasted, I'm into R and D. You heard of R and D. Rip off and duplicate. I do this well. I found an amazing policy review tool that we're distributing to all of the departments to go through their policies. Find out how relevant number one their policies are.

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And many of them are looking and saying wow that was, we thought it was a long time ago. It was 2009, but 2009 seems to far away in terms of the changes made over time. Leaders are looking at policy through an equity lens, through an access lens, through opportunity lens. These are projects we have going on right now.

So, the whole thing is that we want to give people lens that helps pay attention to what we're looking at. That is what this work is about. We want to have a different lens. Some wear glasses and contacts and you read something, but you can't see it, when you put on the lens, you pay attention to what you're looking at. Here are a few things we have accomplished. I won't go through all of them. We have a committee of 18 different department heads that meet bi monthly. We have built an internal team. I'm a person of one, but in terms of my position, I don't have staff, but I do have an internal team I meet with weekly. Dashboards, again that was the number one thing I want to get into all that. We want to find out what is the data saying and explaining to the different department leaders and heads how to interpret, how to read the data and how to make decisions based off of the data. If we see a dip, we're helping them instructor them well why was there a dip? If we see a spike, a rise, we ask the

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question why was there a rise. I worked with a lot of organizations and the answer is more likely than not, I don't know. You should know.

Write this down. Data are not -- actually I put it on the screen. Data are not numbers.

Data are people. Please don't forget that.

Data are not numbers. Data are people.

A lot of times we look and it is a number. It's a graph, no. Data are living experiences. Data is a voice. Our voices. They're experiences that we have to pay attention to folks.

So that we can better understand how to serve our communities and the individuals.

All right?

I have three minutes.

We work with public health. You will hear from Katie Miller in a moment. I work with them to -- released in a month or so. We have a questionnaire that went out. I'm data focused. First thing I did is put together a questionnaire. It was qualitative. Meaning five questions, and people were like nobody is going to answer these. We had 33 percent response which is high for any response rate.

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I'm happy for that 694,589 excuse me of our 22,500 staff responded to that and we have great feedback we're analyzing and I lied I said we don't have a team. We hired a research specialist to help us analyze and disaggregate the information for us and synthesize. We're teaching the department heads how to gather the data.

What data they should be looking at. Not just looking at who showed up, but what is the make up of the people. Where do they come from? What is their educational level? We're working with (indiscernible) as well on understanding our community needs and getting maps, heat maps to understand again how does they're overlaying with education, salary, and income level and zip code whether they own a home or rent an apartment or rent a home, all of these things matter to the day-to-day decisions people have to make. The more we understand the communities, the better we're able to make decisions with them. Not just for them. Okay. I'll put these up. Strategic equity plan is how we will execute it.

Quite a few things we've done as you can see. My most favorite for those who are taking pictures, take a picture of that if you would like. These are a few things, but my favorite thing and if you give me a moment, this is our guide, our

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DEI play book we utilize for strategic purposes. But one of the things I'm most proud of is how we're training each other. Give a minute to share this. Instead of pulling people into the room to talk about diversity. How many of you have been to diversity training. Okay. How many have been to an equity training? All right. We leave the room asking the same questions.

What's next?

I think those trainings are great and we need them. I decided earlier, I asked the CEO, Jeff, can we learn from each other? Putting people into a class, let's find out who has in our County has had to overcome discrimination and bias and from all different walks of life, so we have here on the website the QR code is there, it will take you to the website and if you scan that, you will be able to see the entire website. These are what we call DEIA stories. We have people from different backgrounds telling their stories of how they had to overcome and what they dealt with. We played it last week at Indian wells. The first video (indiscernible) got a standing ovation. It is very emotional. We want you to check them out. Do we have time for Q&A? No? Q&A, any questions, comments, concerns?

>> We're going to, yes. We're going to open the floor for Q&A. Let's



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give a round of applause for Mr. Knight. Folks with questions in person, you have a mic in the back. If you want to ask a question, head over there. I see you Miguel out there, your ready. Please ask your question there. Virtual folks, if you have questions, our chat moderators will bring that up to us to make sure to answer those. Thank you so much.

>> Thank you so much.

Great presentation.

It's giving me a lot to ponder. I want to bring to your attention an idea perhaps that you could use for me from the type of work that I do. Being part of the County for many years working in planning and now in public health one thing that it would be the ultimate thing for me to see is that the staff reports that go to the board of supervisors they don't only address implications on financing or economics, but the stat reports actually also address implications on equity and perhaps your tool could be the one that could be used to put on the staff report this is what this decision will have on equity. I just wanted to share that idea with you.

>> I'm meeting with the CEO today at 3:00 o'clock about that. Like literally.

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>> I love it.

>> How we communicate this to the board and even help the board make better decisions for the communities.

>> That would be great. Thank you.

>> Awesome. Spot on.

Yes?

>> Thank you. Good morning. I'm from VA Loma Linda.

One of the troubles we have within the federal agency is obviously we're federal. And recognizing how racism impacts not, we're part of the community in short. Things that occur in our local community occur for our veterans, occur for people while in service. Getting our mental health providers to understand the impact of racism on our veteran communities and one of the things, the challenges I keep coming across, well first we're just now starting to talk about diversity, equity, and inclusion within the federal government. Second piece is when I'm radio approached, I ask a straightforward question to the mental health department. What are we doing to address diversity, equity, and inclusion for our veterans?

And they referenced, they quantified everything.

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So, looking for a way to approach that, I'm messaging my team as you were talking as fast as I could all your quotes. That is the approach. They're saying well our surveys don't show that. We can't quantify that. How do we address that issue when people are saying that is not an issue?

>> Tell me your name.

>> Kaneko.

>> My questioning is not going to solve, but for my information. What is the number one thing that you're say seeing that needs to be addressed specifically.

>> Specifically I would say that there is a high rate of African American males Vietnam through desert storm who have gone through combat and when they come to the VA, the unfortunate response is to address their combat experience without recognizing that they've experienced combat as a civilian being a black man in America.

>> Okay. And that last part is difficult to quantify for many. Do you have any dataset on that in comparison to other ethnicities.

>> We have zero data. That is not something that is being explored.

>> That is an opportunity and sometimes that is challenging. I have ran

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into organizations that don't want to get the data, when they get the data they have to know. That is I don't want to say a fight, but it's an opportunity that will call for a bit of strategy.

We have to look at the data. If I can show you because if I just, can I be your little brother, your nephew. I just want to be family. Can we be at the dinner table. If we say black people, it pisses people off. If we say this group, it pisses people off. If I say where do we want our veterans to be. End the of service, targeted universalism. I notice this group is being serviced in this group. Talk about why this group is being serviced this way. I have to go back to our mission. What the mission is. Your mission should be to serve all populations.

>> Uh-huh.

>> Equitably or equally. If a the data is showing that it's not, why?

I would start there, it's not easy. It will not be because people will find, but even find listened stories.

>> Yes.

>> From all sides. Get people who are succeeding to talk about how they go from point A to a successful point B. Compare at that data with others that are not experiencing the same how they go from point A and the barriers they

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face getting to point B.

Is that good?

>> Yes. Thank you.

>> Good morning. My name is mayor pro tem Colleen Wallace from the city of banning. The problem I'm having is, okay, banning was the first to do, because I was with the black elected officials and we were the first city to pass the systemic racism but I'm having problems where I don't know how, well, I go to the community and like I said, I work with everybody. So I don't just focus on one race because we need to all come together. It is hard, I get people complaining to me and it's hard to bring them in to let other citizens and city council members hear their complaints. I don't know what I can do to bring people in more than what I'm trying to do. I just, I can't figure it out. It's not black, white, it's all of the community that needs help. We're a disadvantaged community.

So I just kinda need some help on that.

(Laughter)

>> You are going to have to hire me. I'm teasing. Couple things. Let me just say this, what came to me is sometimes in this work, we tend to feel

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defeated because it is so difficult. It is so big. Like we have it. I would stop and ponder what have we done? What is working and build on that.

But I'm going to give you my information afterward and reach out to me. My e-mail is B Knight A risk co.org. Any questions,.

>> We have a question online.

It says will you be able to provide the data you have by cities to the cities as an organization we would like to see the data you have for riverside. Can you provide it to the organization.

>> We have some other the website too as well.

For those who didn't get the QR code. If you go to the website. RIVCO.org. There's a drop down box, then go to Executive Office and you see a tab that says diversity and equity. Click that. Hover over about us, scroll to the right, and on the bottom, it will be diversity and equity, which I can that and also e-mail me.

I can get you more.

>> Hello Barry. I'm Carol from Corona Norco. Are you considering incorporating youth voices at the table. I have a lot of talented young people who are really passionate about diversity and inclusion.

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>> Great question. More specifically by department such as probation, looking at more, I hate calling them at risk youth, but youth that can utilize better support in terms of improvement opportunities and getting to the next level.

I'm actually meeting with the chief of probation to talk about certain targeted, again, opportunities for our youth.

Also, excuse me, children services division, there's a lot of talk and a lot of action happening around communicating to our youth, many of you have heard of harmony haven or the welcome center that is open in Beaumont. That is where the conversations are starting. They're ongoing, and they're beginning. We're at least having the conversation.

Great question. Thank you.

>> Good morning everyone. It's an honor to be here real quick. My question is about reentry. I'm a participatory defense organizer criminal housing injustice advocate and my issue is how can I be trained to (indiscernible) also collect data when it comes to probation, parole, criminal justice system and the whole to address reentry. Housing, and all of those things I know I'm short on time.

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>> Riverside County you're in? Connect with HWS. Rodriguez, Heidi marshal is there. And probation. Just as you said. Connect with them and find out baseline data. What we need is baseline data of where are we and what does it look like. That is the first step. If I can give anybody advice or insight, get baseline data. Where are we now and just go straight to the department. They should have that information.

>> And then crossover the barriers when you don't get that information.

>> That is when you e-mail me.

>> Okay. Absolutely. Thank you.

>> Anyone else?

>> That would be, yeah, that was our last question. Again, round of applause for Mr. Knight. Thank you so much.

>> One thing. I just released my new book, the gift called leadership. How the leader presence empowers others to succeed. If you order today, you get a signed copy. You go to the gift called leadership.com. The gift called leadership.com.

>> Send that to us to make sure to send it over. Thank you so much.

>> Appreciate it.



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(Applause)

>> Thank you.

All right. So we're going to take a quick break. Ten minutes. Please in person get snacks, virtual folks, stretch, call a loved one and we will come back around I believe 11:10. Yeah. Thank you so much.

(Break)

(Music Playing)

>> If we can please start making our way back. This is your one minute warning.

All right. Thank you everyone for making your way back to your seats. I hope you a good 10-minute break. Wasn't that a great presentation?

(Applause)

Thank you Mr. Knight for that wonderful presentation. If you have any questions that were not answered, please add them to the Q&A box. We will make sure to hand them over to Mr. Knight.

So now we're going to make our way over to our online platform. We have our next presenter. Katie Miller is joining to provide an overview on an update on the Riverside County health equity strategic plan. Responding to racism as a

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public health crisis.

Katie Miller provides leadership for project management, strategic thinking, sustainability planning, evaluation, and communication in support of local health

-- sustainability plan, in support of local health jurisdictions, community based organizations and health systems and other community based collaboratives that are advancing health equity and racial justice. Maybe some of you have collaborated with her. We're happy to have her join us.

She can provide us with that update.

All right. We're going to make sure that Katie, let's see. Katie? Do we have her?

>> I'm here, can you hear me.

>> We can hear you. Let me know when I can advance the slides.

>> All right. Thank you Daisy. Hi everybody. Sounds like you have a great crowd in the room. I wish I could be with you. It is funny to present to a group of folks you can't see and get responses from. About you that is okay. Like Barry, I normally like to walk while I'm talking, but I won't since I'm seated at my desk and nobody wants to see my extremely disorganized home office.

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Thank you for having me from prevention institute on behalf of my teamworking closely with Riverside County public health and coming together -- I'm an associate program director at prevention institute. I been here almost nine years and worked on a number of subject matter expert teams, transformation, health equity racial justice, mental health and well-being, communications, impact and metrics. You name it, even done it all.

And I'm happy, you know, to share more about our organization's work and how we work with Riverside County with you today. I mentioned I led the core team for developing the strategic plan, but there were a number of folks who prevention institute who have been part of the process and are not here today. Shout tout to our Los Angeles based team having their first in person meeting in the office since COVID. That is exciting. We been working with public health since March and Barry since he came a year ago. I will share a little bit about our process, what will be if the final strategic plan draft and the preliminary recommendations to the County will look like. If I can get the next slide please.

All right. So, whoops, back one. The building. This is a picture of our headquarters. Prevention institute is based in Oakland California. We're a

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national nonprofit, but we have offices in Los Angeles, Houston and Washington D.C. Our mission is to build prevention and health equity and keep policies and practices at the federal state local and organizational level to ensure the places we live, learn, work and place toes her well-being. Our organization was founded in 1997 and very with worked with communities, local government entities, foundations, public health agencies and many other sectors sort of in pursuit of these goals. Based out of Oakland office, which is part of the reason I'm not with you today, and the project team is in LA. The staff across offices have worked in Southern California for many years, including Riverside County prior to beginning this project. Next slide.

Public health engaged us to help the County define and develop a strategic pathway for taking action following the resolution of racism declaring racism a public health crisis. I'm saying strategic pathway though we're calling it a strategic plan because really the idea is that we are already somewhere along the journey and we're defining where we are now, but aspirational where we love to go forward. There is a lot of context that comes into that. Much of what we talk about what is included in the plan speaks to equity and justice across a multitude of groups. Given the origin of the project in that resolution and what

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we know about what drives inequities, racial justice is the lens we brought into developing this plan. Before talking about the process and content, I want to share about prevention institute's approach to health equity and racial justice. I was going to share definitions of health equity and racial injustice but I saw that public health shared theirs in the beginning and ours are similar. In addition to health equity being -- we also define health equity as shifting power and systems and requiring the removal of systemic obstacles to health. Our definition of racial justice is the same, and we also say that achieving racial justice means closing gaps between racially defined groups and engaging in processes that lead towards truth and reconciliation, justice and fairness as well as redistribution and sharing of power, and resources to rectify the compounding effects of race based policies and practices rooted in discrimination, exclusion and dominance. There's an action oriented second half to the definitions for the two terms. The slide you see here and I'm seeing it's a little fuzzy on my screen. I don't know if should t shows fuzzy for you. I know the slides are available afterwards. That easy are prevention institutes five principles of racial justice in action I'll just read them. We believe efforts must understand racism and racial justice, repair past and present harms while working to prevent future harms, use procedural

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distributional equity to organize strategies, embed, measure and incentivize strategies to ensure urgency and accountability. And most importantly in the center, emphasize building community leadership and power at the center of all strategies.

Next slide please.

All right. So what did we do with part of our process. The bubbles represent the key activities we engaged to develop the strategic plan draft. Starting March of last year, we begun reviewing a number of materials and datasets and interviewing key leaders within Riverside County. When I say Riverside County, I'm talking about the Riverside County government, government agencies, not necessarily the County broadly. We talked to leadership various agencies. Many agencies were exploring how to address racism as a public health crisis. The County has accessed to several data sources that can be leveraged. There were trainings on health equity but not standardized. Strategic planning efforts could build on current partnerships, especially familiar with the partnerships that the public health department has sorta created and strengthened through longstanding coalition work and particularly through COVID-19 response. Momentum generated by dedication of

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County leader is essential to implementing this plan. We can hand a document, it's not a document that sits on the shelf. It is about engaging leadership and staff from top to bottom. And making this a reality.

In did I goes to interviewing key leaders and reviewing materials, we also researched best and promising practices from across the country. Hundreds of jurisdictions declared racism a public health crisis in 2020. Cities, Counties, and states and not nearly as many have gone on to do something with that. You know, in many ways Riverside County is front of the pack there. We love to look to best practices from other, many of the jurisdictions haven't done anything. And somehow we've been part of did -- interviewing leaders in cities and Counties taking action. We review their strategic plan documents and much of that information has been brought into our process. Next we engaged two work groups to help us understand more about what is happening in Riverside County, what is important to folks, what health equity and racial justice mean to them.

And ultimately, what would make sense to be part of this strategic plan.

The first group as a community advisory group. I think some of our advisors and the organizations they work for are probably part of the meeting. I see a couple folks on the online attendees list. I imagine there are a few more in

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the group sitting in room together. We convened three times. Additionally we convened what we call a County work group. These are leaders across agencies within Riverside County who are going to be responsible for leading dissemination and implementation of this plan.

Both groups played key roles in advancing the narrative and strategies within the group. Both groups reviewed the document. The community advisory group reviewed the document in different formations and their feedback is integrated. I will share what the feedback was as well. In April, we shared a draft of the plan with groups, we spent May and June integrating feedback and within the last month, back in September, we shared the updated draft with public health and DEI we're integrating final tweaks and looking forward to presenting the final plan in more detail to everyone hopefully by the end of the year. Can I have the next slide please.

So, this is an outline of all of the different sections of the strategic plan. Some of the sections I'm going to dive into in more detail but I think it is nice to see up front what (indiscernible) you know what to expect. I will talk a little bit about the sections. The first section on the strategic imperative for health equity and racial justice provides an opportunity to really say, this is why Riverside



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County wants to have this plan. This is what this means to us, this what implementation looks like. This is why we're doing it and what we hope to accomplish. It provides definitions for health equity and racial justice among other key terms throughout the document. It talks about the history of health equity in Riverside County and also across the state and country because these are not structural and systemic phenomenon that hand just across County lines, right. Certainly they happen within cities and communities and Counties for sure, about you there is regional effects, statewide effects.

And there is, you know, national and federal policies that have outcomes. We talk about what that looks like, and I will tell you this is a sneak peek, the majority of feedback received from groups was on the language in this section. That's an interesting finding. The second section dives into talking about the importance of community engagement and partnerships with some specific strategies I will share about in a moment. Section three is on organizational change. These are really setting the groundwork for changes that could happen at Riverside County decisions that could be made at the County wide level that effect all departments across a number of these different focus areas you see here.

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The fourth section is of the plan talks about priority setting across social determinants of health. We picked five clusters based on definitions provided by healthy people 2030. There are a lot of ways you can slice and dice this.

These are the five sections that we chose and the strategies that we'll talk about here are strategies that different departments could look at addressing in partnership with community organizations.

There is a section on evaluation, account bail and sustainability.

We also got feedback about that section and last but very much not least, there's a section on next steps. Once you get the plan, once it in people's hands, what does it look like to go from there? This is just one step along the way. Next slide.

These are the four sections of the plan that have specific strategies in them. I'm not going to share all of the strategies. There's a lot. But I'll share some of them if I can get the next slide please.

So within the community engagement and partnerships section, there are four major domains we focused on. This is again remember these are strategies for the County, related to the community.

So there is a section on capacity building, partnerships, resources and

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approach.

I will add a place we got a lot of feedback from community advisory group was about contracting and how the County contracts with community groups and how we can advance equity through that. You will see that throughout the plan.

I want to give a couple examples of specific strategies.

One around communication, getting capacity building, building staff capacity around active listening, cultural humility. Acknowledging past wrongs and failures and techniques to build relationships and communicate effectively with community partners. An example of resources is building financial support to community based organizations to leverage their expertise towards improve equity and racial justice outcomes in Riverside County. Providing (indiscernible) and subtracts. Another strategy is conducting ongoing evaluation and impact assessments to ensure engagement activities between the County and community groups are meeting local community partners needs and resulting in what they see as sustained change.

Next slide please.

Organizational change.

What Barry talked about actually touches quite a bit on this section of the

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plan. This is all about what is happening inside, internally at Riverside County. We have domains around workforce, training, infrastructure, finance, data, and communications. I'll give a few specific strategy examples just to give an idea what you can find here.

Thinking about workforce, investigating the barriers that exist outside of the organization and within it that make it difficult for underrepresented groups to either meet the qualifications for employment, advance to final hiring rounds, and/or be promoted once hired. This involves looking not just within the County structure but looking at education and workforce development opportunities throughout the County.

Looking at training, I can tell you there are strategies around implicit bias training. Staff undergo training to create an awareness of systemic and -- there's a strategy that suggested assessing the social markets of budget requests to ensure projects reduce disparities and promote equity. And don't do the opposite. When it comes to contracting, we recommend the County diverse identify contract applicants by creating -- various sizes, capacities and expertise, continuing work with the nonprofit roundtable to identify specific recommendations and set benchmarks. Finally an example around data. Yes we

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need to collect data. There's a lot of data out there. I have a five minute warning. Oh, boy. Okay. I think additionally as came up earlier, the importance of qualitative data. Finding ways to incorporate qualitative data as well as data for key priority populations by subgroup when possible. I would take more about data but I don't have time. Let's go to the next slide. The social determinants of health section, like I mention, this is based on healthy people 2030. We have examples under each section, particularly under neighborhood and built environment.

As many folks know, the data tells us that race and place are predictors -- some of the other sections as well.

Quick examples for economic stability creating a County wide living wage implementation plan in partnership with large and small businesses and other sectors. Neighborhood and built environment promote mixed income housing through zoning policy, identifying funding for programs that identify -- investing in programs that focus on violence prevention. And last section on evaluation. Publishing annual reports that document department work and progress towards goals and revisions to the goal. Present reports to the board of supervisor and County CEO and maintain a copy on the website.

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Leverage community expertise work in CBOs and -- next slide please.

I'm going to talk about the feedback we've received if you're in a work group, we will have I presentation about how we integrate the feedback. Here is a high level overview. People had feelings about the narrative. How we were talking about health equity and racial justice, were we being too strong, do we emphasize power building. We provided definitions for historically excluded populations, naming more, emphasizing the importance of community power building as a process and outcome. We added examples of County agencies -- parks department and the probation department. And we strengthen action language and ties to account bail. The community advisory group in particular wanted us to take out words like consider doing XYZ and make it stronger. So we did that and last slide please. Our recommendations include continuing to build relationships with community groups of various sizes and constituencies, pursuing streamline contracting process to community groups with work with the County. Using this strategic plan and its strategies to develop goals for action. This part is important. There are many strategies in this plan. The County departments should sit down and look at the strategies and say which are we already doing, which are we not doing, are there some we're part

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way down the path, what information do we need who are the champions we need, and what are the goals, it good to identify low hanging fruit goals, things you can succeed at in a few years and audacious goals about making broader change in the longer term. It is important for the County to continue to provide regular updates to the community on progress internally and externally. You know, and finally just a reminder, I feel this has gone fast, equity in action is a continuous improvement process, not just about implementation, not just about us handing, you know, saying these are the answers, this is what someone else has done and you can apply it. It is about continuing to process and analyze the information and conversation.

Some of those conversations are going to be very difficult. It is continuing to have and make space for those courageous conversations. Similarly, justice in action can be about seeding or shifting power. That is what community transformation is about. I know everyone in the physical room and the virtual room there is a commitment to a brighter more equitable and justice future for riverside and I look forward to watching how the journey unfolds.

Okay.

That is all from me and the presentation. I think Daisy I have a chance to

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take questions if folks have them. If you want to put it on the next slide that has my contact information, if folks have questions after this or want to find out more information about PI or our approach to health equity and racial justice, we can take questions by e-mail also.

Thank you.

(Applause)

>> Thank you Katie. It is great to hear that Riverside is in the forefront creating changes and updating.

Making sure that the resolution is moving forward into action. Right?

That is due to like you mentioned, the different leaders and those that are in the room and those that we're inviting to the table, so we're just very happy to have this overview on what is currently happening, where it is leading, and how you all can take part of that.

So now we have an opportunity to move into our Q&A.

For both virtual and in person. We do have the mic available in the back.

Are there any questions?

Awesome.

>> I'm planted.



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Just kidding.

>> Thank you.

>> I have two questions, and one comment.

The first one is to what extent are you considering integrating targeting universalism as was explained earlier by Mr. Knight. The second question is to what extent are you addressing I would say historical trauma with or Native American communities and the comment is that I think at some point down the road when you're plan is completed, it would be good to then see other departments strategic plans in determining consistency.

I think your plan would be a good way to sort of compare, you know, apples and apples, et cetera,, et cetera. That is all I have. Thank you. Great presentation.

>> Thank you for those questions. It's a cop out answer but some of the questions are for Riverside County and the agency departments and department leads and how they see implementation. Just being honest, I would not say we've had a extensive conversation about targeted universalism. I'm just being honest. Our approach to health equity and racial justice is really about identifying the most vulnerable groups and the policies and practices that either

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are causes harm or can prevent harm and focusing on either repealing or implementing those. For each department, that could look different depending who you serve through that department. I also think, you know, for some of the County departments that are really services focused versus maybe broader the public health department, I think that can look different. It is really important for each department to determine that, I think, for themselves. You want to see a certain level of consistency. That is why transparency is important. Not just that you're accountable to Barry or your department heads or just the County CEO but also to the community. We said this is our vision of health equity and racial justice, and in a year, here are the goals and strategies we identified. The community may say that is not right. That is okay. That is part of the courageous conversations. But it might look different for each department. I know that is not directly answering your question, about you that is how we see it unfolding.

>> Next question.

>> Hello. Thank you for your presentation.

I was wondering, have you had any political challenges and if so, how have you overcome them?

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>> Yeah. You know, like as an intermediary organization, you know, I would not say that we personally encounter political challenges, but the folks we support do, right. I think, you know, that may be a question for Barry and public health.

I will say we're also doing a similar project in Houston Texas. It's an interesting jurisdiction. It's a blue city in a red state. They have been doing a lot of conversations around critical race theory, and what it actually means, and what that brings up for folks. What the barriers are. There are plenty of people within the organization who have different feelings about it.

Those are certainly conversations we have helped facilitate. I would not say that's come up in this particular process for us, but I'm sure for colleagues within Riverside County, I imagine that's come up to an extent.

>> Thank you. Any online questions?

All right.

We want to thank Katie for joining virtually. Isn't it great to have this technology?

Thank you again. Thank you Katie.

>> Thank you.

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(Applause)

>> If you have -- thank you.

If you have any questions, please add them to the Q&A.

We will definitely send them to Katie so she can provide additional input.

If you have questions that maybe within public health that we can or Barry should be the one to answer, please let us know.

All right.

So now we are going to be moving on. Let's put up our PowerPoint presentation again.

This is where you all come in. This is our QR code for our survey.

We are asking for female back in regards how we can continue to grow our coalition.

Next year we have great ideas on how we can continue to move it into more of an action oriented community driven coalition.

Based on feedback that we have received during our previous coalitions. One of the questions that you will see is how or if you are interested in joining some of our subgroups that we are planning. We want to make sure that we are engaging you all in this conversation.

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So, we want to give you about maybe a few minutes, maybe three minutes so you all can provide feedback.

As we're waiting. I want to provide a few quotes I heard from Barry and Katie's presentation.

That just resonated. One is diversity is a strategy that leads to better products.

The other one where Barry provided an overview of equity 2.0, the three keywords, do you remember? Access, equity and opportunity.

And the last one was that data are not just numbers, data are people.

Okay. We're going to move over to our partner updates. I know you all might be finishing up your survey. I'll give you one more minute.

Then for online folks, you will be receiving that link as well.

Okay. For anyone that might have any partner updates, any events coming up, please raise your hand or you can go to the back and provide an overview of your exciting events.

If you're online, drop a link or if you have flyers, share them to the e-mail.

>> Hello? How close, cool. Good morning everybody. Good afternoon.

My name is Orlando. We're going to have our annual day of the dead this

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upcoming Saturday from 12:00 to 8:00. What we're trying to do is bring attention to our ancestral roots as well as uplifting indigenous voices. Doing so, just bringing back traditions and spirituality. We will have other events.

(Non-English Language Spoken)

In other words although it is titled day of the dead, there is going to be an emphasis on other traditional Latin, Mexican forms. There will be entertainment, groups will come out and participate and given resources. We will have (indiscernible) it's at Jurupa ranch park.

Thank you so much and that's it. Thank you.

>> We'll be sharing the flyers on the link tree. Please send this to us.

>> Hello good morning everyone. Marina with community heal systems.

I want to share a couple upcoming events for our health centers. We have one November 20<sup>th</sup> at the university community health center. We have a day of giving event providing boxes of food to our community and a gift card to buy Tamales, posole and turkey.

We don't want to give a turkey to somebody that doesn't know how to cook a turkey. Holiday smiles event is at the morning valley family health center December 13<sup>th</sup> and we're looking for partners that want to provide resources to

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our community in this area. We also have another one at the university community health center December 19<sup>th</sup>. If you guys want to be part of this events, please let me know. I will send the e-mail too so you can help us spread the word so we have resources for our community in Riverside and more know valley. Thank you.

>> Thank you.

>> Hi everyone. My name is Jennifer coming from a high school here that is located in Riverside city college called gateway.

Again my name is Jennifer. My colleague is on the online Zoom platform. The reason we're here today is we're in the process of transforming into a community school. We're very interested in any resources or any organizations that want to share their resources with us or flyers, we would love to have those so we can start sharing with students and families to see what they're interested in.

So I'll be sitting in the front if you have questions or would like to contribute flyers or information, please do so. Thank you.

>> Thank you.

>> Can you hear me? I'm with aqua motion ability foundation. We focus

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our attention on seniors. We want to get seniors in Riverside County and the world but especially Riverside County healthy and in the pool and working out. Just enjoying life. We will have our event on November 11<sup>th</sup>, that's a Saturday morning from 9:00 to 12:00. Get up in the morning, get your seniors there and get everyone healthy. Thank you.

(Applause)

>> You can clap.

(Applause)

>> Good morning everyone. My name is Shana from the riverside community health foundation serving as the vice president of health strategies. We're getting red to embark upon our community health needs assessment in 2024. So, if there are community members, leaders, members, and/or agency leaders who would like to help us format and develop the process for the community needs assessment, we are having two meetings. One on November 15<sup>th</sup> at 3:30 p.m. to 5:30 p.m. Another on November 17<sup>th</sup> from 9:00 a.m. to 11 a.m.

To get feedback in terms of how to develop this community health needs assessment. If you're interested, please reach out to me. I can leave my



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information with the coordinators of the meeting as well. Thank you.

(Applause)

>> Good afternoon. Loma Linda will be holding a BIPOC awareness symposium for mental health.

It will be July of next year. So a ways off, however it is an event I'm looking forward to bringing community partners in to best strategize ways to support minority veterans. We focus on the traditional veteran experiences but we have to reach out to the community. If you're a program, department or, otherwise, is something that could be beneficial to help educate or mental health providers as well as speak to veterans a resources, feel free to drop off a card and be part of this opportunity.

Thank you.

>> Thank you.

(Applause)

>> Good morning. My name is Anne Susan I'm with the Riverside San Bernardino County Indian health clinics incorporated. We have clinics in Pechanga, Soboba, San Manuel and we cover Barstow and smaller health sites. Grand Terrace and Santa Rosa. I was at Morongo as a health educator and

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transferred to the clinic in grand terrace. I have a peer support individuals, Taylor, and we're looking to venture out as vendors to reach out to Riverside, San Bernardino County residents on our services, we're at the behavioral health department so I'm looking for events that we could vendor or anything that we could set up for classes. We do arts and craft classes from beading to ribbon, skirts, and ribbon dresses to show how they're made. On our beading, we do medallions and small earrings we could bring as an event and other arts and crafts.

And do during that time, we cover on subject matters specific to mental health.

So thank you.

>> Thank you. Beautiful.

>> I'll leave my information with you.

>> Yes, we will be connecting.

(Applause)

And lastly, chief with our online updates.

>> Hello. Just giving online shout-outs. First and foremost, we have SBX with their youth and family services, they're having a turkey give away and ACP

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enrollment day, November 18<sup>th</sup>, 2023, of course, 9:00 to 5:00. The address is on the chat online. We can share with anyone interested in person. And then our second online shout-out is for I believe it's, yes, RYPA, youth mental health survey as part of a youth suicide prevention media project and the link is online and we can share that with anyone in person who is interested.

>> Thank you. One last one.

>> I get to go last. Okay. Debra Williams, building resilient communities. I want to tell you about a counsel many things. This Saturday, we have our first fall health and safety fair all in palm springs at the James O Jesse center. We're encouraging everybody to come out.

We're going to do the next one December 16<sup>th</sup> so if your agency or department would like to be a vendor, then please let me know.

That one is going to be in the city of banning. Mayor Wallace.

This is the second time we're doing that one, and it called winter wonder land. It will be a blast. We have Santa Claus show up singing Santa Claus, by the way. It is going to be a lot of fun. Please join you us. Mary has the flyers, I know, November 16<sup>th</sup> put that on your calendar. If today's meeting was of interest to you alt all, at all, you need to be at the arc of safety summit.

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It is all about community resilience, we have started a movement across the inland region to address all the barriers that are keeping people from being resilient.

And we need all of your voices in the room.

This is the fourth time that we're meeting.

This is a whole community effort. A lot of what Barry talked about is the similar kind of things we're talking about.

It's across both Counties.

So we're working with Barry as well as public health and lots of other groups. Please, please join us, bring your voice to the table.

Thank you.

(Applause)

>> Thank you.

We'll be sharing all this information. If you can e-mail us. I do want to recognize that we sent out a reminder. I think several reminders. We apologize for the many e-mails. But with that, we were asking those that were either joining in person or online to wear your cultural attire.

We want to recognize those that were, that are wearing beautiful skirts.

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Your shawls, so thank you. We will have more opportunities to share our culture in future meetings.

>> All right y'all. Let's give it up for the whole time just speakers, everyone. Honestly, this was super amazing. Thank you to each of you for coming. We will definitely be wrapping up going into our updates. With our public health department. As you know, we have social media y'all. Please make sure to follow our team. We have a health communications team. They're amazing and putting up lots of content. It's a way to publicize the organizations in the community. We have a podcast. If you need to tell people about your organization, I can you need to link up with us. Okay. Please, please, please make sure to follow us. We have Instagram, TikTok and here is our QR code and virtual folks, links will be in the chat box as well.

And then here as you know, this is our equity podcast. I'll have Greg come up to give a bit more about the podcast. He's awesome in that.

So let's give a round of applause for Greg. Come on Greg.

(Applause)

>> Thank you for the amazing introduction.

Yeah. No definitely please be on the look out for the podcast. We have as

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you can see the QR code, we're available on multiple platforms. We have our equity in Riv Co. You can find us on apple podcast, Google podcast, Spotify, clips on TikTok and Instagram. I'm glad there's a clip here so I can catch my breath. This is a clip we had the privilege of working with cystic connection.

We're able to talk about the disparities that doing awareness of black infant health week. I'll press play.

That is one of our favorite clips from the last episode. We have an episode airing soon with executive director Louisa Gallegos. They help immigrant families be able to, that show will show exactly the medical expansion to undocumented agricultural workers. Definitely be on the look out for that. That is coming out soon. Yeah, definitely I'll go back to the previous slide. You want to scan that, follow us, definitely looking forward to showing more episodes like this. Thank you.

(Applause)

>> Thank you. Yes, please scan. Follow us and listen to the episodes.

All right.

So we're wrapping up. Again, we have a link tree. Scan this QR code to get access.

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This is where we put a lot of resources. Send us an e-mail. We will put it on the screen. If you have resources, flyers, any of that, this is where we try to create a resource hub. Share it with us, we put it there and we're trying to do a bi weekly newsletter. Let us know you're getting them so you know your event and resource is highlighted.

And then again, we have our survey y'all. Please make sure to fill that out if you haven't done so. We have it in the chat box, here is the QR code. Let me give a second I think we have folks doing the code. Perfect.

And then last but not least, again this is our e-mail.

If you have any resources, events, anything like that, make sure to share with us. We have it in the chat box. Again, thank you. Y'all are amazing.

Okay. Anyways, next meeting is Wednesday, January 17<sup>th</sup>, 2024. We're going to go into the new year with the coalition. We're super excited. It will be as always take place virtually and in person. We have an amazing, exciting stuff wrapped up. We're trying to see how to get more community led. Fill out the survey and let us know what else how this can be improved and how we can make more communities come into the meeting and the coalition. We're the coalition. Thank you so much. Have an amazing blessed day. And, yeah. Go

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and drive safely as you go back to work and home. Thank you.