



# WELCOME

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## Centering Equity

**Key Strategies and Insights to Operationalize Equity  
within Local Health Jurisdictions**

# Health Equity Unit



**Ashley Lewis**  
she/her  
Health Equity Manager



**Lizzie McCoy**  
she/her  
Training Coordinator

[PH.HealthEquity@schsa.org](mailto:PH.HealthEquity@schsa.org)



# Learning Objectives

- Understand how to soften the ground to normalize, organize, and operationalize health equity in local health departments.
- Recognize the important of health and racial equity curricula for enhancing public health programming and service deliver.
- Develop actionable strategies to integrate health equity into public health policies.
- Outline the steps to develop a customized health and racial equity curricula.
- Share lessons learned and how to adapt learning opportunities to the unique needs of different LHJs and communities

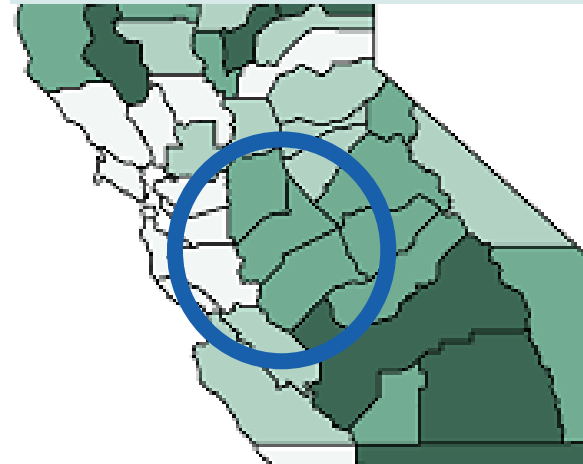


An aerial photograph of a residential neighborhood. In the center, a white church with a steeple and arched windows sits on a green lawn. The surrounding area is filled with single-story houses, some with brown roofs and others with blue or pink exteriors. There are trees, a parking lot, and a street intersection visible. The image is overlaid on a blue background with a white diagonal line.

# Who We Are

# Stanislaus County

- Located in California's San Joaquin Valley
- Population over 550,000
- 9 cities
- +13 unincorporated communities
- Ranked 36 of 58 in overall health outcomes in California



# Setting the Stage



# Mission, Vision, and Values

## Mission

To work in partnership with the community to promote and protect the health and well-being of all Stanislaus County residents by focusing on equity, prevention, and policy development.

## Vision

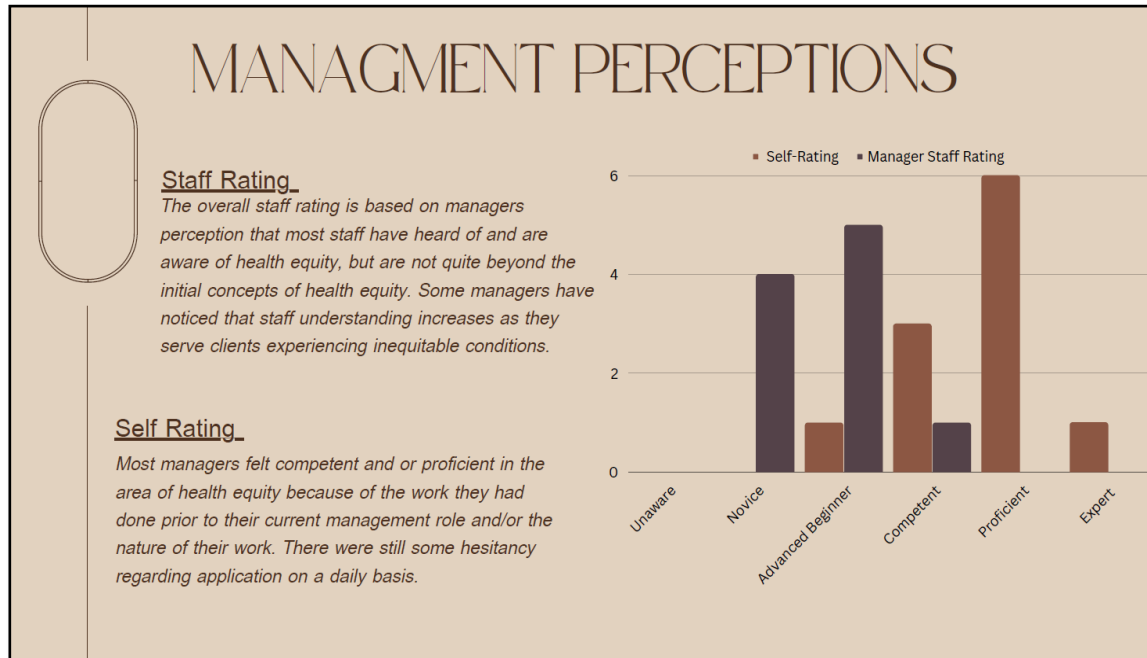
A thriving, healthy Stanislaus County

## Values

Compassion, Equity, Innovation, Integrity



# Understanding Leadership Expectations



## RECOMMENDATIONS




- BEING DATA FORWARD  
Being proactive about reviewing data so that we can actualize our work for our team and community partners.
- GETTING IT DOWN ON PAPER  
Create a process of formalizing our work, so that it is consistent and reliable.
- ENGAGING OUR COMMUNITY  
Create a system of communication for our community, so that our decisions are community informed.
- CREATING A CULTURE OF CONSISTENCY  
Making sure that we continue the conversation and have a feedback loop for accountability.



# Understanding Staff Perceptions

## Staff Perceptions and Health Equity Skills Assessment

Introduction: Thank you for taking time to complete the Health Equity Staff Perceptions and Skills Assessment. The results of this assessment will guide the Health Equity Team in the planning and development of activities and trainings for staff. There are two parts to this assessment.

Part I of the assessment will ask your opinion regarding the practices and culture within Health Services Agency Public Health (HSA Public Health). This will evaluate the current integration of racial and health equity practices into the workplace and culture. It will also inform activities and policies implemented to integrate racial and health equity into Public Health culture and practices.

Part II of the assessment will ask you to self-assess your understanding and application of health and racial equity concepts. This skills assessment is not an individual evaluation of performance but will inform trainings and workforce development activities that will be offered to all public health staff.

This assessment will take approximately 20 minutes to complete. Responses from this survey will be combined with those of many others and summarized to protect anonymity. Complete surveys with honest feedback from staff will be the most helpful to guide our work to create an equity centered organization.

Questions	Purpose
<b>Survey Participant Demographics</b>	
1. Which best describes your position in Stanislaus County Health Services Agency (HSA)? <input type="checkbox"/> Administrative Staff (i.e., admin clerk, confidential assistant, staff services analyst/coordinator, etc.) <input type="checkbox"/> Front Line Staff (i.e., community health worker, nurse, social worker, health educator, etc.) <input type="checkbox"/> Supervisor /Manager <input type="checkbox"/> Other (please describe)	Gathering the demographics of the survey participants.
2. How long have you been an employee at HSA Public Health? <input type="checkbox"/> Less than 1 Year <input type="checkbox"/> 1-5 years <input type="checkbox"/> >5-10 years <input type="checkbox"/> >10 years	
<b>PART I: Health and Racial Equity Integration and Workplace Culture</b>	
<b>Communication within the Organization</b>	
3. When a <b>section level</b> (i.e., FHS, CAPE, CD, etc.) decision is made that affects you and your job tasks, do you know why it was made? <input type="checkbox"/> Always <input type="checkbox"/> Usually <input type="checkbox"/> Sometimes	Change management: Determining if staff feel as though change is communicated to them from a section/division level.

<input type="checkbox"/> Rarely <input type="checkbox"/> Never	
4. When a <b>Public Health Division level</b> decision is made that affects you and your job tasks, do you know why it was made? <input type="checkbox"/> Always <input type="checkbox"/> Usually <input type="checkbox"/> Sometimes <input type="checkbox"/> Rarely <input type="checkbox"/> Never	
5. Do you have opportunities to provide feedback about the impact of your work on the environmental, social, and economic conditions that impact health? <input type="checkbox"/> Frequently <input type="checkbox"/> Sometimes <input type="checkbox"/> Rarely <input type="checkbox"/> Never	Determining if staff feel as though their voices are heard when they have a concern or want to make suggestions.
6. Within your section (i.e., FHS, CAPE, CD, etc.), are there opportunities to engage in group discussions about how your work could address factors that impact health? <input type="checkbox"/> Frequently <input type="checkbox"/> Sometimes <input type="checkbox"/> Rarely <input type="checkbox"/> Never	Determining if staff feel as though opportunities to engage in conversations about the determinants that impact health are available.
7. Within HSA Public Health, are there opportunities created for discussing issues of race and racism in ways that are relevant to your work? <input type="checkbox"/> Frequently <input type="checkbox"/> Sometimes <input type="checkbox"/> Rarely <input type="checkbox"/> Never	Assessing if the staff feel as if we are creating spaces to discuss race and racism and how it impacts their work.
8. What would you suggest HSA Public Health implement to improve communication between staff and organizational leadership regarding health and racial equity?	An open-ended question for staff to provide feedback on how to improve communication within the organization.
<b>Community Engagement</b>	
9. In the populations we serve at HSA Public Health, what are the top five (5) disproportionately and unjustly distributed health issues?	An open-ended question to understand what staff believe are health inequities within the populations we serve in comparison to what the data shows.
10. HSA Public Health sets standards and expectations for how we work with the community. <input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Rarely <input type="checkbox"/> Never	Assessing if staff have clear guidelines on how we engage with the community.



# Developing the Plan



# Curriculum Goals

- Develop a shared understanding of language, concepts, and application related to health and racial equity.
- Standardize training for all employees of diversity, equity (health/racial), inclusion, and belonging principles.
- Equip staff with tools that will enhance their ability to apply health and racial equity concepts to their work.

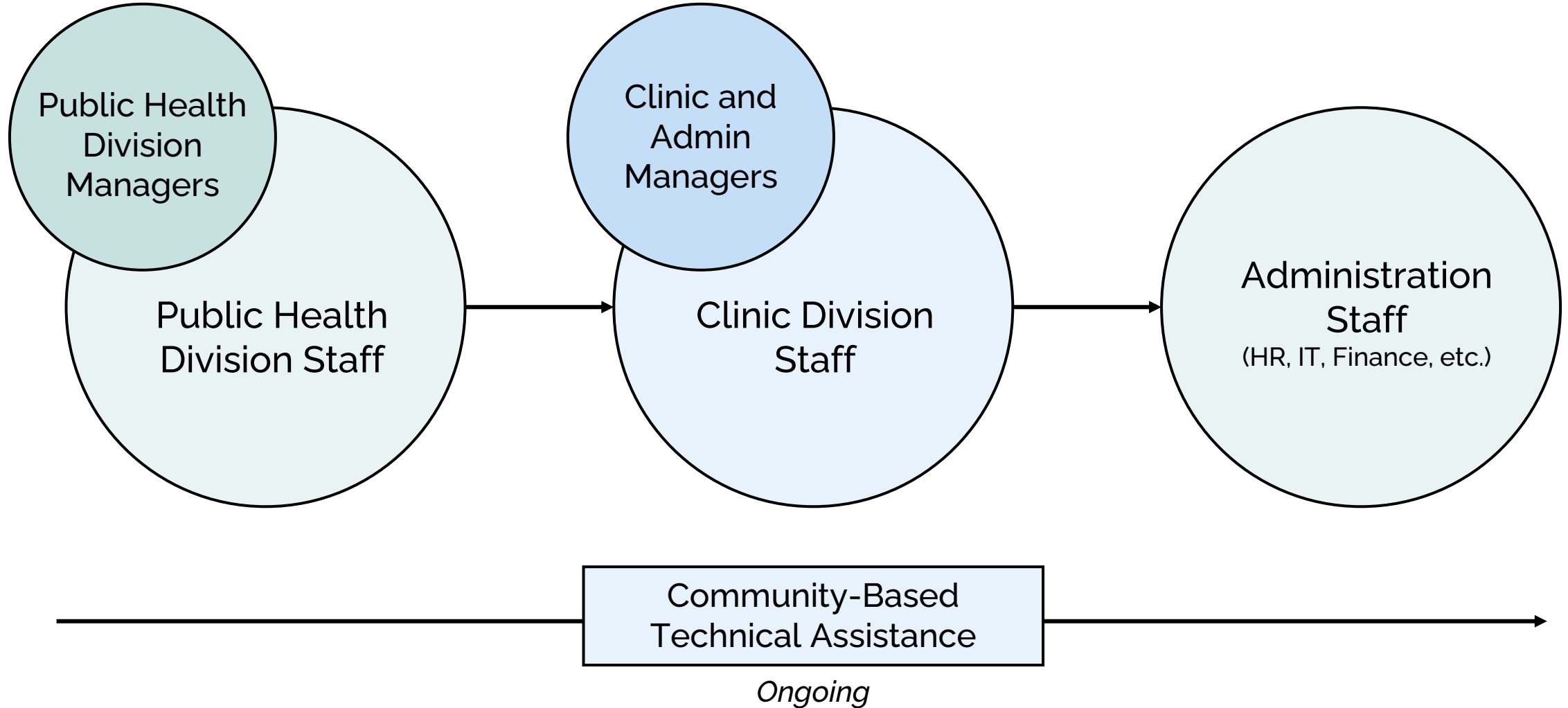


# Curriculum Goals cont'd

- Build staff engagement through the creation of brave spaces that facilitate collaborative learning and sharing.
- Provide managers with tools and resources to support staff to center health equity at the programmatic and organizational level.



# Phased Training Approach



# Training Rollout

- All staff were required to attend all trainings
  - Staff sign up based on availability
- In-person trainings
  - 5 sessions

## The Health Equity Training Series is Here!

### Health Equity 101

Peoplesoft Course Number: HE101  
Available - 10/17, 10/19, 10/23, 10/25

### Shifting Perspectives: Navigating Racism with Cultural Humility

Peoplesoft Course Number: HE102  
Available - 11/7, 11/9, 11/13, 11/15

### Identity Matters: Intersectionality, Bias and Microaggressions

Peoplesoft Course Number: HE103  
Available - 1/16, 1/19, 1/22, 1/24

### Bridging Health Inequities with Data

Peoplesoft Course Number: HE104  
Available - 2/12, 2/14, 2/20, 2/22

### The Road to Equity: Unpacking Power and Privilege

Peoplesoft Course Number: HE105  
Available - 3/12, 3/14, 3/19, 3/21



An aerial photograph of a residential neighborhood. In the center, there is a prominent white church building with a steeple. The church is surrounded by a green lawn and a paved parking area. The surrounding area consists of various houses, some with brown roofs and others with lighter colors. There are trees and a street intersection visible. The image is overlaid on a blue background with a white diagonal line.

# Normalizing Equity Dialogue



# **Collaborative Learning in Authentically Brave Spaces**

# Introducing Co-LABS

July 2022


## Building our Team with Equity & Inclusion

We each have our own unique identity. Our name and how we came to get it is one very important aspect of that. In our busy, fast-paced world it can be easy to overlook how important it is to take the time to get our peers' names right and to advocate for our own. Whether that's pronunciation, a nickname, or the way it's spelled, using the preferred name makes a huge impact with very little effort.

[Click to watch Huda Essa's TEDTalk titled Your Name is the Key!](#)

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### MY FULLEST NAME




For this month's team building activity we will have the opportunity to share our fullest name with each other. You can share your first name, middle name, last name, nickname, and/or any name that makes you who you truly are. We encourage everyone to take the time to consider the prompts below, how you connect to your name, and share with those you work and live with.

**My Fullest Name prompts:**

- Who are you named after and why?
- Where does your name originate from?
- Who named you?
- Who chose the spelling of your name?
- What special meaning does your name hold for you?
- Do you have any memories or stories associated with your name?
- Do you like your name? Why or why not?
- If you chose this name for yourself, why did you choose this name in particular?

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Monthly equity, inclusion, and wellness activities are brought to you by the New ERA Committee. If you have any questions or team building activity suggestions, please reach out to your department's committee member.



January 17th, 2023 marks the 7th annual 

## National Day of Racial Healing

The W.K. Kellogg Foundation says "racial healing is the process that restores individuals and communities to wholeness, repairs the damage caused by racism and transforms societal structures into ones that affirm the inherent value of all people."

The National Day of Racial Healing is held the Tuesday after Martin Luther King Jr Day. It gives us ALL a chance to build relationships based on trust and mutual respect to take collective action to create and sustain racial equity.

[Click to watch Dr. Gail Christopher's TEDx Talk titled "RX Racial Healing"](#)

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### Starting the Conversation

To participate in this year's National Day of Racial Healing, we want to create the time and space to start a conversation about the impact of racism and the need for racial justice and racial healing.

The W.K. Kellogg Foundation offers a [Conversation Guide](#) to help us create meaningful and brave spaces to learn and heal together.

**The Health Equity team within Stanislaus County Health Services Agency's Public Health Division will be hosting learning collaboratives throughout the week of January 16th.**

Here we can come together to connect, build relationships, and bridge divides.

**Jan 17th - 9am & 2pm - Cafeteria - 4701 Stoddard Rd, Modesto**  
**Jan 19th - 9am - County Center III, Learning Institute - 917 Oakdale Rd, Modesto**

If you're unable to attend one of the sessions, we encourage you to download the conversation guide and start sharing with friends, family, neighbors, and colleagues.

Tune into **MSNBC at 10pm EST** or **Noticias Telemundo at 7pm EST on Tuesday, January 17th** to watch the live townhall from New Orleans.




HEALTH EQUITY CO-LABS

# JUNETEENTH

A Freedom Celebration

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**TUESDAY, JUNE 20**  
**COUNTY CENTER III**  
**FROM 12:00PM - 1:00PM**

Join us as we spend the day in reflection and celebration for Juneteenth

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LUNCH WILL BE ORDERED FROM **MODESTO'S THE BUSSDOWN**. A LOCAL BLACK OWNED BUSINESS.



# Brave Space Guidelines

1. Confidentiality
2. Our primary commitment is to learn from each other
3. We will not demean, devalue, or “put down” people
4. We will trust that we are always doing the best we can
5. Challenge the idea, not the person
6. Speak your discomfort
7. Give space, take space
8. Expect and accept non-closure

# Co-LABS Topics

## Culture and Identity

- International Day of Racial Healing x2
- CA4Health 21 Day Challenge

## Community Connections

- Juneteenth
- Pride Month
- Hunger and Homelessness Awareness Month

## Training Integration

- Women's History Month
- AANHPI Month
- Disability Awareness Month

# Newsletter and Resource Library



## Elevating Equity

### National Day of Racial Healing

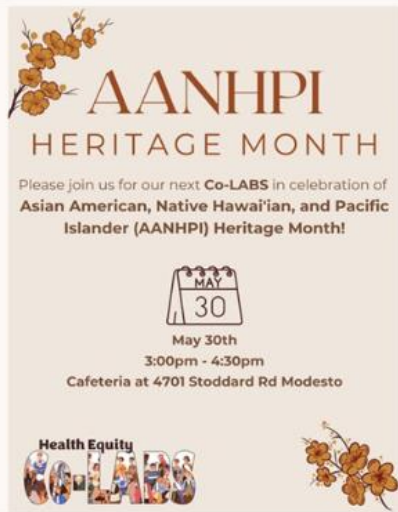
#### Starting 2024 with a Commitment to Health and Racial Equity, Inclusivity and Belonging

As we embark on a new year, it is essential to reaffirm our commitment to health, racial equity, inclusivity, and belonging. Health equity is not merely an aspiration but a core principle and core value that should be their healthiest selves.

Community members action workgroup.

Advancing health equity through the constant operation of upstream approaches to social determinants of health, including education, employment, and access to healthcare, while also addressing their interconnectedness and disparities. Our commitment is to advance health equity linked to the broader goal of racial healing.

National Day of Racial Healing serves as a powerful tool that impact the health of our community. Racial Healing encourages structures perpetuating health disparities, and promoting equity in commemorating the



**AANHPI HERITAGE MONTH**

Please join us for our next Co-LABS in celebration of Asian American, Native Hawai'ian, and Pacific Islander (AANHPI) Heritage Month!


May 30th  
3:00pm - 4:30pm  
Cafeteria at 4701 Stoddard Rd Modesto

Health Equity

Our goal is to showcase the rich diversity within these communities and highlight the unique stories and experiences of individuals like you. **If you are interested in sharing your story and helping us showcase the diversity that falls within the various Asian cultures, please take a moment to fill out this interest form below.** Your participation can help us create a more inclusive and representative celebration and make this celebration a true reflection of our community's diversity!

We will also now be using PeopleSoft for registrations for our Co-LABS. This will allow these learning opportunities to be reflected in your Professional Training Summary. You can self-register for the Co-LABS on PeopleSoft using the path: Self Service -> Learning and Development -> Request Training Enrollment -> Search by Course Number. To sign up, visit the Course Search page.

### Additional Training Resources



**Building Health Equity Webinar Series: Time to Combat Disparities in Maternal Health**

This is a live webinar that will be held Wednesday, March 13th. It will be 11am-12pm PST.

\*Join the Institute for Public Health Practice, Research and Policy at the University of Iowa, College of Public Health, in partnership with the Midwestern Public Health Training Center, for the seventeenth installment of the Building Health Equity webinar series, *Time to Combat Disparities in Maternal Health* on **Wednesday, March 13th, 2024, from 1-2 PM CT**. We will feature Nafsa Poff-Dainty, Executive Officer of Maternal Health & Family Planning at the [Iowa Department of Health and Human Services](#), and Bea Sanchez-Vazquez, Project Planner and Pregnancy Risk Assessment Monitoring System (PRAMS) Data Manager at the [Iowa Department of Health and Human Services](#).

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Time to

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In honor of Pride Month, we're pleased to share a variety of Calm content to support the mental well-being of LGBTQ+ employees and family members. These resources are part of Calm's [Belonging and Acceptance collection](#) that focuses on helping people celebrate individuality, cultivate self-esteem, and lean into vulnerability to create connection and belonging.

#### Conversations:


- [Calm Conversations: Pride & Resilience](#)
  - o LGBTQ+ advocate and media personality Raymond Braun and licensed clinical psychologist [Dr. Sarah H. Moon, PsyD](#) explore diverse experiences of LGBTQ+ individuals and shed light on their unique mental health challenges in various contexts, including the workplace.
  - o Dr. Moon also created a [guide](#) with daily practices to help LGBTQ+ individuals build a strong and authentic self.

#### Sleep Stories:

- [To My Body and to Teenage Me](#), Edgar Gomez
  - o In this lighthearted essay, author and narrator Edgar Gomez finds an inner-confidence in a space that created a lot of former insecurity. His debut memoir, *High-Risk Homosexual*, was named a Best Book of 2022



# Health Equity 101



## Health Determinants

- Who we are:
  - Age, sex, genes
- What we do:
  - Physical activity, avoiding risky health behaviors, diet

in which we are work, play, and age


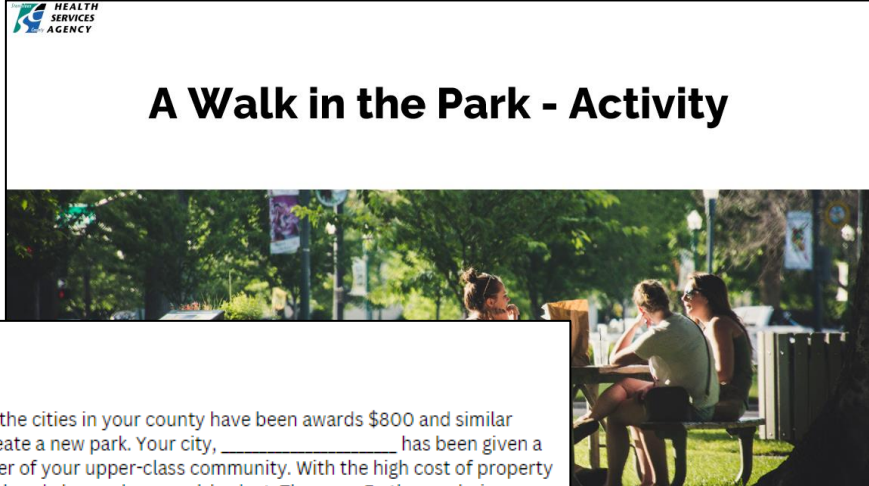
### Activity - Root Causes of SDOH

This activity is used to show how that happens in the "roots" (social determinant of health factors), plays a substantial role in how healthy the "tree" (those of us in the community) are going to be.

**Activity Steps:**

- Participants will be broken up into groups, ideally with other from different departments.
- Each group will get a poster board that has a picture of a tree on it. One half will be a tree full of leaves and the other will be a tree with empty branches. Both will have visible roots underground. (see next page)
  - The leafy tree will represent the social determinants of health that lead to positive outcomes.
  - The bare tree will represent the social determinants of health that lead to negative health outcomes.
- Participants will brainstorm ideas for factors that could lead to either positive or negative health outcomes. It tends to be easier to think of negative outcomes, so teams should be told to come up with three factors that can lead to positive outcomes and three that can lead to negative outcomes.
- Stick the factors onto the roots and the outcomes onto the branches of the corresponding side of the tree.
- Regroup after the trees are filled and discuss what was found.

For this activity, print the image on the following page at desired size.

## A Walk in the Park - Activity

### City Four

Congratulations! All of the cities in your county have been awarded \$800 and similar sized plot of land to create a new park. Your city, \_\_\_\_\_ has been given a plot of land in the center of your upper-class community. With the high cost of property taxes in your city, you already have a large park budget. There are 7 other parks in your community that have all had recent updates. With your remaining budget, you were already planning on building a large park. Those funds can be added to your awarded amount to build an even better park.

Your original budget for your park was \$900. Added to that, you can now spend \$1,700 on your park.

The land you were given is level but without grass. The surrounding community offered to donate the grass, 6 trees, and some equipment. The funds can be used on equipment and other park amenities.

#### Park Equipment and Amenities

### City One

Congratulations! All of the cities in your county have been awarded \$800 and a plot of land to create a new park. Your city, \_\_\_\_\_, has been given a plot of land on the outskirts of your rural community. This will be the first full sized park to be built in your town. The residents in your town are lower income, so there's excitement building at the chance for a new green space in their community.

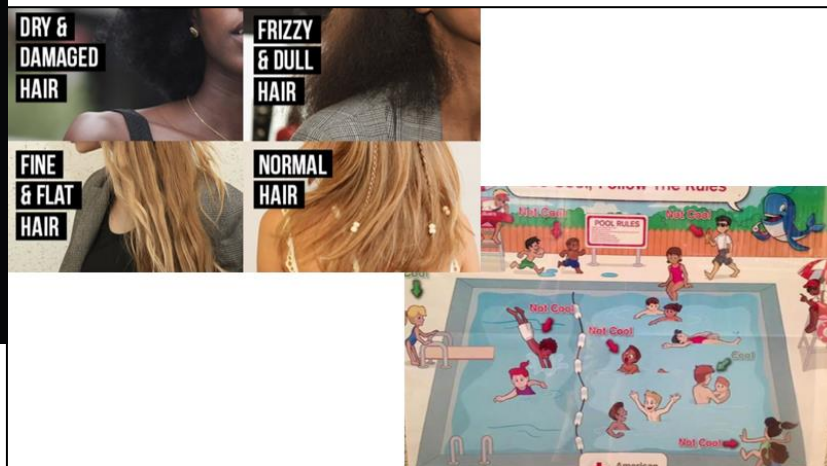
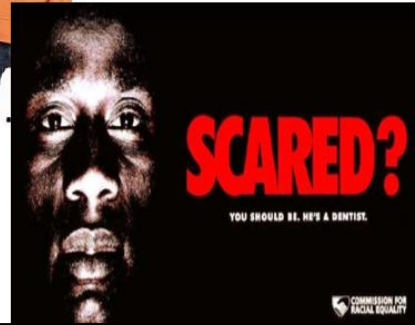
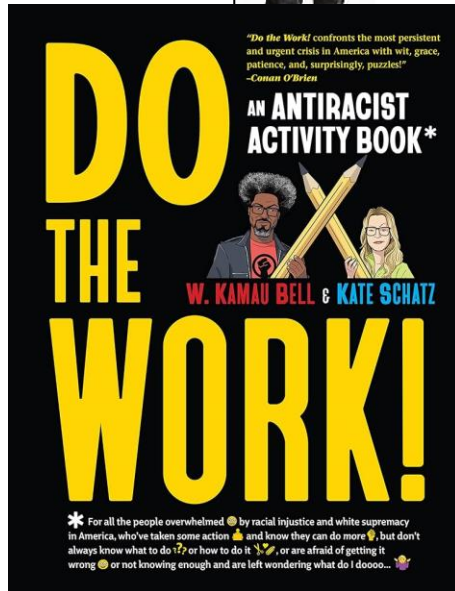
The new land is rocky, unlevel, and the grass is dead, but it has a lot of space for new additions to be added to it. A recent report has come out explaining that pollutants from the local water treatment plant has been contaminating the land for years. You're required to decontaminate the land before you can start building the park, so \$200 was taken out of your budget, leaving you with \$600 left to spend.

#### Park Equipment and Amenities

- Level Ground ..... \$200 for the whole park
- Grass ..... \$300 for the whole park
- Bench ..... \$80
- Trees ..... \$20
- Plants ..... \$20
- Streetlamps ..... \$10

# Shifting Perspectives

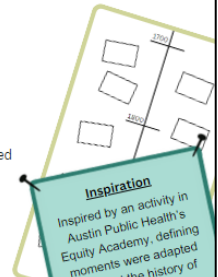
## Navigating Racism with Cultural Humility



### Activity - Timeline of Race in the Central Valley

This activity will be used to show that comments like CA is "not a racist state" or "we didn't have slavery here" doesn't take into account the racial wrongs of the not-so-distant past that still need to be addressed before we can bring racial equity.

- Participants will breakout into groups at tables around the room
- Each group will have between 4-6 people.
- Give each group a poster-sized paper with a timeline from 1700s to current time and a stack of cards with defining moments in history that have led to current racial inequities in our community. **Use the following templates to make cards with moments relevant to your area.** The events used for Stanislaus County were:
  - Spanish missionaries settle in CA
  - The Gold Rush brings settlers to the West
  - Act for the Government and Protection of Indian's is passed
  - State legislators pass laws limiting the rights of people of color
    - Similar state laws before the Chinese Exclusion Act
    - Foreign Miners Tax
    - Intentional rationing of resources
  - Legislation cont. to segregate people of color from white residents
    - California Alien Land Law
    - Racial restricted covenants
  - WWII and Japanese Assembly Center/Internment Camps are created
  - Tensions during WWII lead to racial attacks throughout the state
    - Zoot Suit Riots
  - Civil Rights Movement highlights the inequities of CA residents
  - Legislation is passed to end racialized laws
    - Mendez v. Westminster
    - Perez v. Sharp
    - California's Fair Employment and Housing Act
  - Civil Rig
  - Farmwo
  - Govern
  - forces f
- Participants
- The goal correct



Spanish Missionaries settle in California	The Gold Rush brings American settlers west
The Act for the Government and Protection of Indians is passed	State legislators pass laws and policies limiting the rights of people of color

# Identity Matters

## Intersectionality, Implicit Bias, and Microaggressions

What is Intersectionality?

HEALTH SERVICES AGENCY

HEALTH SERVICES AGENCY

Angelica and the Terrible, Horrible, No Good, Very Bad Day  
ACTIVITY

HEALTH SERVICES AGENCY

### Scenario 1

**ANGELICA**, a Mexican American woman, is a program coordinator for her section at the local public health department. She's been in her current position for the last 3 years.

This morning, as she's rushing to get out of the door on time, she talks with her husband, **CRAIG**, as she's getting ready.

**ANGELICA**: Hey, have you seen my badge? I can't find it and I can't get into the building without it?

**CRAIG**: Huh? What were you saying?

**ANGELICA**: My badge! I left it on the counter last night and now I can't find it.

**CRAIG**: Ohh I moved it. Let me think where I put it...

**ANGELICA**: Why?! I have a really important meeting today and I can't be late!

**CRAIG**: Ohh calm down. Man, it must be that time of the month, huh? I think it's in the office.

### Scenario 2

**ANGELICA** gets to the office only a couple minutes late. She enters the conference room where **CARL** and **SAM** are waiting. They're discussing the Health Promotions activities that they're holding in the local neighborhood.

**CARL**: I mean, I really see my role in that community as a role model; you know what I'm saying? A lot of kids out there, they don't have ANY role models in their lives. The adults around them are in and out of jail, on drugs, not even trying to get off welfare. The kids just need someone to look up to. Someone to show them the way out of that life, that neighborhood.

**ANGELICA**: You know I'm from that neighborhood, right?

**CARL**: So, you know how it is! I mean, when I first started visiting a few months ago, I was shocked, but you would know.

**ANGELICA**: No, that's not what I meant -


**SAM**: Yeah, you know better than anyone, I would think.

**ANGELICA**: What I meant was... never mind. What else is in the agenda?

### How Microaggressions are Like Mosquito Bites



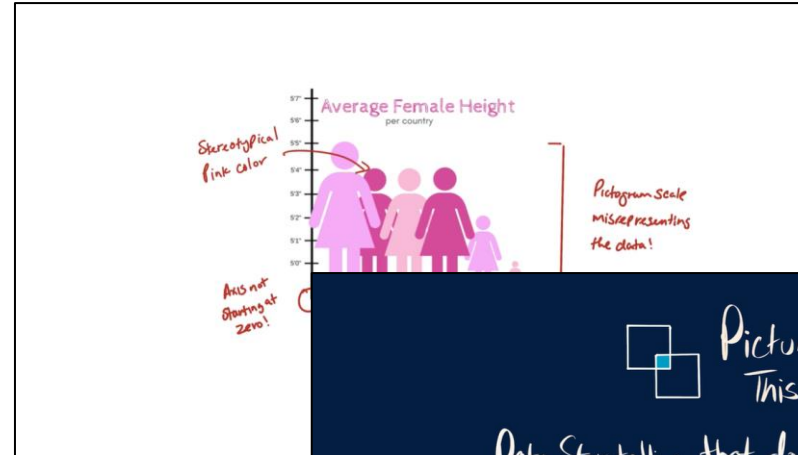
# Advancing Equity with Data and Storytelling



## Types of Data

- Quantitative
  - Data that CAN be expressed as a number, counted or compared
- Qualitative

Quantitative Data	Qualitative Data
<ul style="list-style-type: none"> <li>How many people received the COVID vaccine?</li> <li>How many people are eligible for WIC services in Stanislaus County?</li> <li>How much has the rates of diabetes increased or decreased in the last two years?</li> <li>How often are residents using green spaces?</li> </ul>	<ul style="list-style-type: none"> <li>Why did you get the COVID vaccine?</li> <li>How are you accessing WIC services for your family?</li> <li>Why are rates of diabetes increasing/decreasing in our community?</li> <li>How can we change green spaces to be more accessible in our area?</li> </ul>



Picture This

Data Storytelling that does no harm

## Do no harm guide

## Data Disaggregation

Data that has been broken down into more specific groups

Necessary to view the whole picture when it comes to seeing health inequities.

Images credit to Minnesota Compass

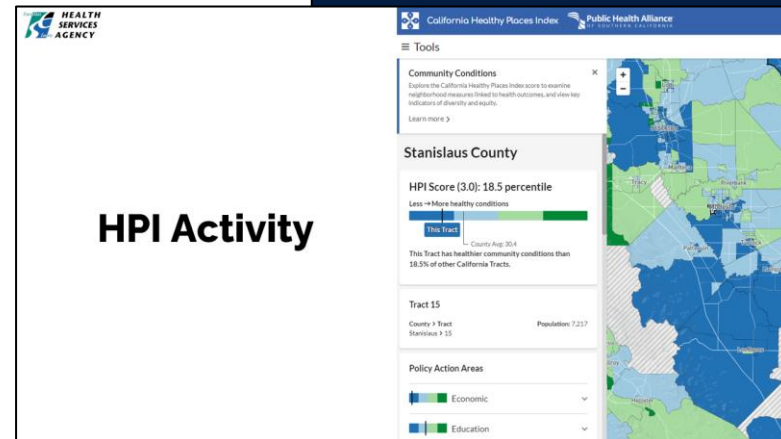


Tableau the Urban Institute

# The Road to Equity

## Unpacking Power and Privilege

**JENNY**  
ASIAN  
NON-BINARY  
QUEER  
LOW SOCIO-ECONOMIC STATUS

Jenny's parents are in and out of jail on drug charges. Their grandmother takes care of them whenever she can, but at 13, they enter the foster care system.

\$100 \$500 \$1,000

**The Game of**

**GAME OF Life**

RETIREMENT

**REALITY CHECK**

If your company are... roll the dice, if your boss supports... are given an extra \$500... and all women must move back two spaces.

**Your Invisible Knapsack**

**Be an Ally**

Someone who is not a member of an underrepresented group, is useful in and to a

**How to Be an Ally**

- Recognize structural inequities and the impacts they have
- Recognize our own power and privilege and use it to support the rights of others
- Consciously work to advance the culture of inclusion and belonging
- Listen and accept criticism with grace, even if it's uncomfortable

**Accomplice**

**Co-Conspirator**

# Graphic Recordings


### SHIFTING PERSPECTIVES

#### NAVIGATING RACISM WITH CULTURAL HUMILITY

**BIAS**  
When unacknowledged it can lead to

**DISCRIMINATION**  
Which can lead to

**RACISM**  
Which is discrimination + power



**TYPES OF RACISM**

- 1. INTERNALIZED**  
Occurs within the individual
- 2. INTERPERSONAL**  
Occurs between individuals
- 3. INSTITUTIONAL**  
Occurs within institutions and systems of power

**RACIAL EQUITY**  
"The process of eliminating disparities, improving outcomes for everyone, and ensuring race is no longer a predictor of one's health and well-being."

**-GARE**

**HISTORY OF RACE IN CENTRAL CALIFORNIA**

- 1700s: Spanish missionaries settle in CA
- 1800s: The Gold Rush brings American settlers west  
Not for the Government and protection of Indians is passed
- 1900s: WWI  
Japanese Internment Camps (Assembly Centers) created throughout CA and Zoot Suit Riots
- 1950s: CA creates policies and laws limiting rights of people of color  
"Interracial marriage"  
"Limiting immigration"  
"racial restrictive covenants"
- 1960s: Cesar Chavez + Delano Grape Workers Association
- 2000s: Governor Gavin Newsom issues apologies and reparations task force for Black + Native populations

### WHAT IS RACE?

It's made up idea that groups people based on skin color, facial features + hair type

**IT IS NOT A BIOLOGICAL FACTS**

### IDENTITY MATTERS

#### INTERSECTIONALITY, IMPLICIT BIAS, AND MICROAGGRESSIONS

**I AM \_\_\_**  
It's nearly impossible to explain who we are in just one word.  
Our identities are made up of many different parts

**INTERSECTIONALITY**  
Coined by Kimberlé Crenshaw  
Intersectionality describes how race, class, genders, and other individual factors "intersect" with one another and overlap.

**IMPLICIT BIAS**  
Attitudes and beliefs we have about a person or group **ON A CONSCIOUS LEVEL**

**EXPLICIT BIAS**  
Attitudes towards people or associating stereotypes about people **WITHOUT** our conscious knowledge

**BIAS**  
A preference in favor or against a person, group of people, or thing.

**TYPES OF BIAS**

- AFFINITY BIAS**: Being more receptive to people who resemble your life in some way
- PERCEPTION BIAS**: Stereotyping people based on a group they belong to or we perceive them to belong to
- CONFIRMATION BIAS**: Looking for info that supports your beliefs and ignore those that don't
- BANDWAGON EFFECT**: Believing something that others we trust believe
- HALO EFFECT**: Positive impressions of people effect our feelings in other areas

**MICROAGGRESSIONS**  
Everyday slights, indignities, put-downs, and insults that people of color, women, LGBTQ+, or those who experience marginalization in their day-to-day experiences. They happen casually, frequently, and often without any harm intended.

Can appear as:  

- Enslavement
- Same behavior, different description
- Benevolent sexism
- Underestimating
- Attribution bias

**INTENT VS. IMPACT**  
The intent of our behaviors can be very different from the impact they have on those around us.

**REFERENCES AND RESOURCES**

**LEAVE US FEEDBACK!**

### HEALTH EQUITY 101

**ROOT CAUSES OF HEALTH**  
It's legal, it's messy, it's positive

**HEALTH DETERMINANTS**  

- Who we are
- What we do
- Conditions in which we are born, work, live, play, and age.

**SOCIAL DETERMINANTS OF HEALTH**  

- Education access and quality
- Healthcare access and quality
- Neighborhood and built environment
- Social and community context
- Economic stability

**EQUITY:** Everyone gets what they need - understanding of circumstances and barriers

**UPSTREAM APPROACH**  
Aims to prevent inequities with structural change  
Policies that limit # of tobacco sales in a community  
• Offering sexual health education in all schools  
• Free green spaces for exercise and farmers markets

**DOWNSTREAM APPROACH**  
Provides access to care  
• Programs to help residents quit smoking  
• Free cooking classes on how to make healthy meals  
• Free ST testing and low-cost birth control

**LEAVE US FEEDBACK!**

# Health Equity Curriculum

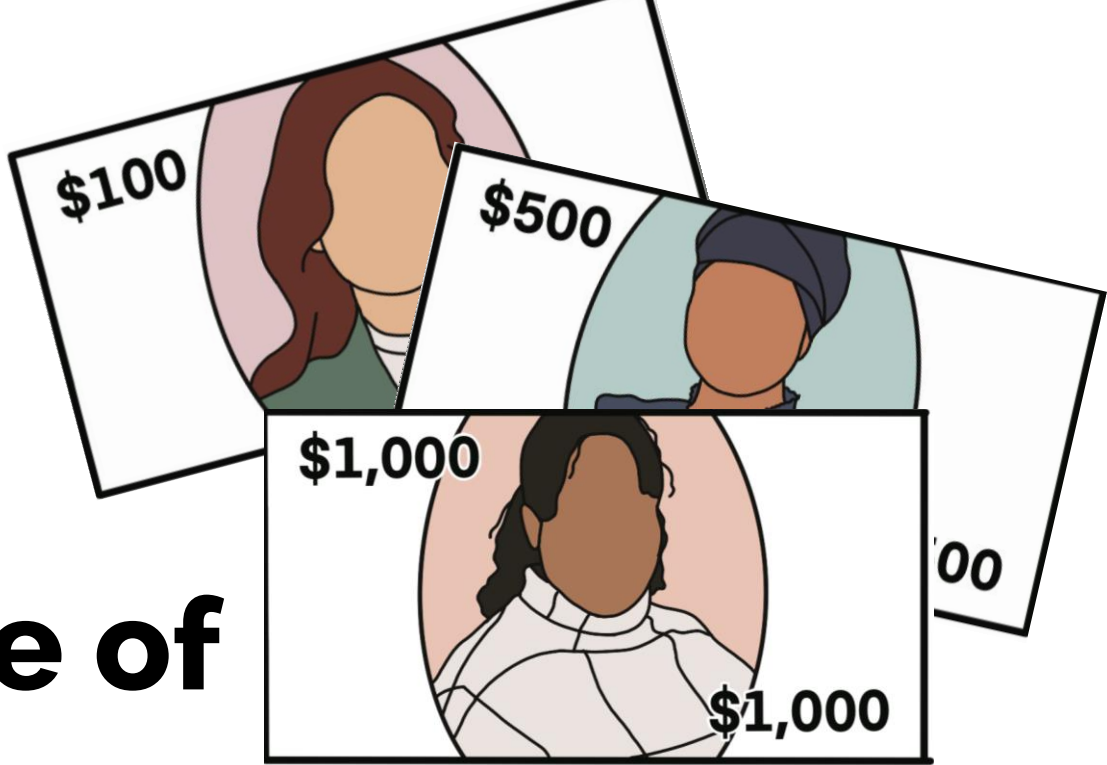
- Each training includes:
  - Lesson plans
  - PowerPoint presentations
  - 2-3 interactive activities
  - Pre and posttests
  - Graphic Recordings

All were created with the intention of being updated and customized as needed.

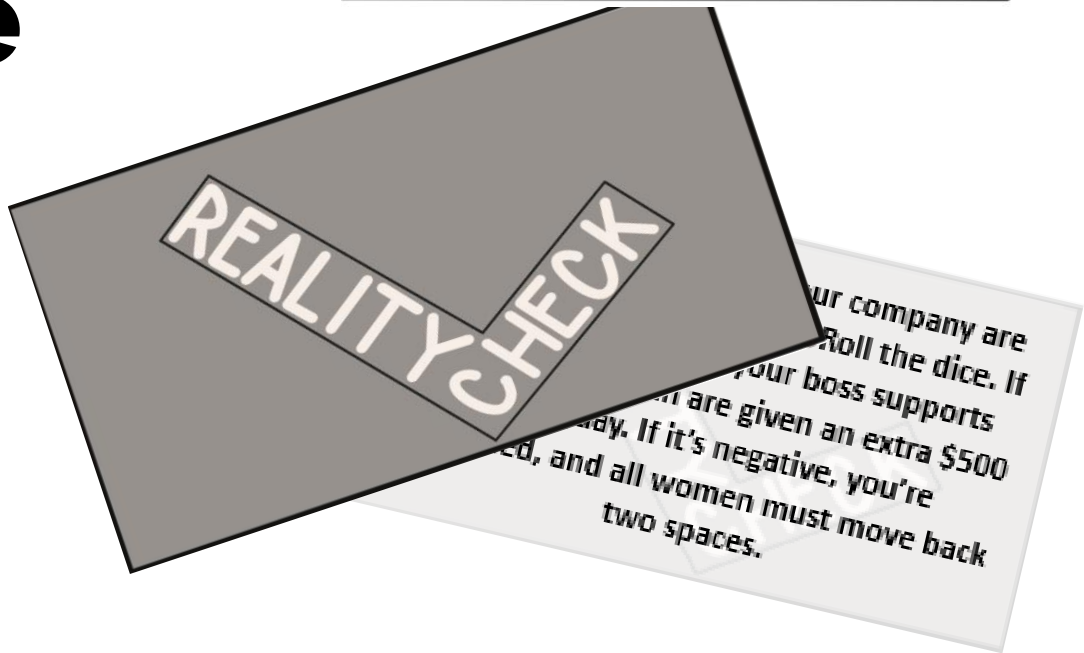


**JENNY**  
 ASIAN  
 NON-BINARY  
 QUEER  
 LOW SOCIO-ECONOMIC  
 STATUS

Jenny's parents are in and out of jail on drug charges. Their grandmother takes care of them when she can, but at 13, they enter the foster care system.



# The Game of Life



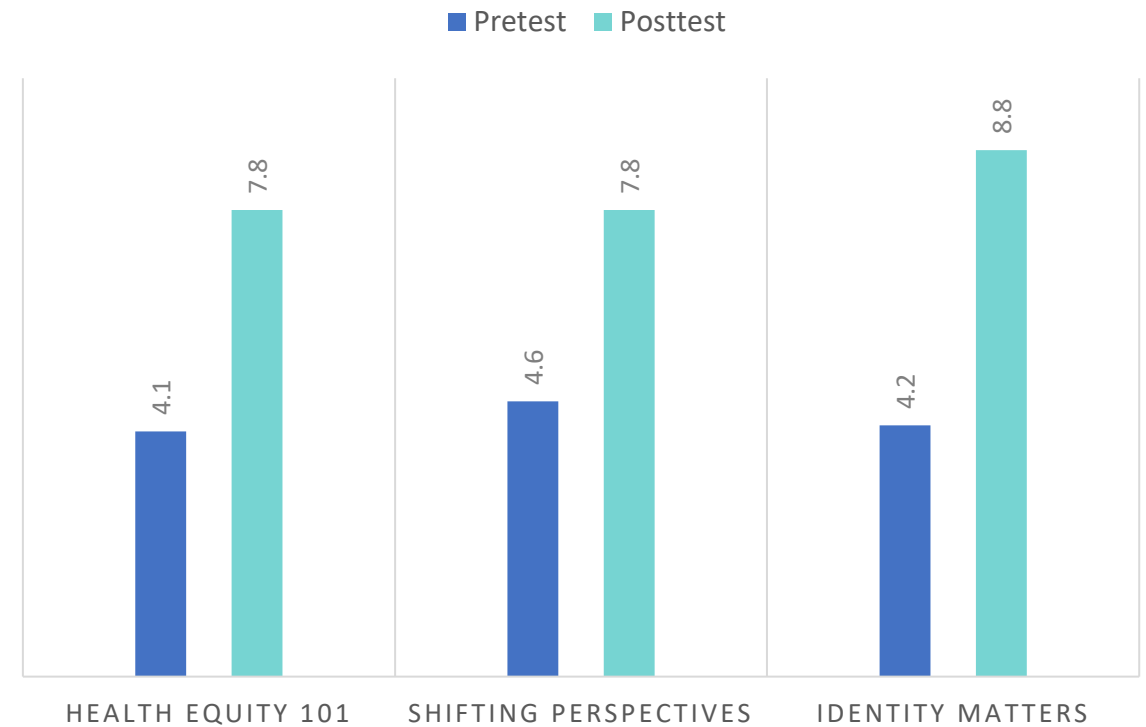
# Lessons Learned



# Results

- Health Equity vs Inequities vs Disparities
  - 67% said functional or above
- Identifying the effects if cultural factors of PH services
  - 69% said functional or above
- How implicit and explicit bias influences decision making
  - 59% said functional or above

## PRE/POST TEST RESULTS



# Considerations/ Lessons Learned

- Leadership Support
- Facilitation Skills
- Softening the Ground
- Follow the lesson plan, but adapt as needed



# Curriculum & Co-LABS Toolkits



### Women's History Month

With the introduction of our 5 Series Health and Racial Curriculum, topics that were brought up then, were History Month Co-LABS by tying the concepts of (who it has historically worked for), and equity (women, men, and non-binary). 4 women who joined us for a panel discussion (Leaders for Office, Behavioral Health and Recovery)

### Brave Space Guidelines

While there's excitement in bringing something different into the workplace, Co-LABS can't be held without all participants being on the same page when it comes to listening and respecting each other.

Facilitators who can create a brave space for staff they're not used to sharing at work are crucial. It encourages staff to be open and vulnerable, and sometimes be different.

### Activity - A Walk in the Park

Congratulations! All of the cities in your county have a sized plot of land to create a new park. Your city is a play of land on the outskirts of your small, rural community, which is located on the other side of town. The new land is rocky, unlevel, and there are lower income, so there's excitement to see what additions to be added to it.

**Park Equipment and Amenities**

- Level Ground
- Grass
- Bench
- Trees
- Play equipment
- Walking Trails

### Lesson Plan

**Description of the Course:**  
Participants will learn that health equity is achieved when every person has the opportunity to attain their full health potential and is not prevented from doing so because of social position or other socially determined factors.

**Learning Objectives:**

- Describe the concept of health equity
- Understand the importance of community health equity
- Describe the role of health equity in public health practice

**Class Length:** 2 hours

**Prerequisite Learning:** None

**Training Format:**

- Lecture/Presentation
- Group Discussion
- Individual and Small Group Activities
- Root Cause Analysis
- A Walk in the Park

**Materials and Resources:**

- Sign-in sheet
- Computer and Projector
- Slide deck access
- Creating a Brave Space
- Handouts and note pads

## From Safe Spaces to Brave Dialogues

A Toolkit for Designing a Health & Racial Equity Curriculum

Stanislaus County Health Services Agency - Public Health Division  
Version 1.1 May 24

## Centering Equity

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Stanislaus County Health Services Agency - Public Health Division  
Version 1.1 May 24

# Moving Forward



# Health Equity Champions

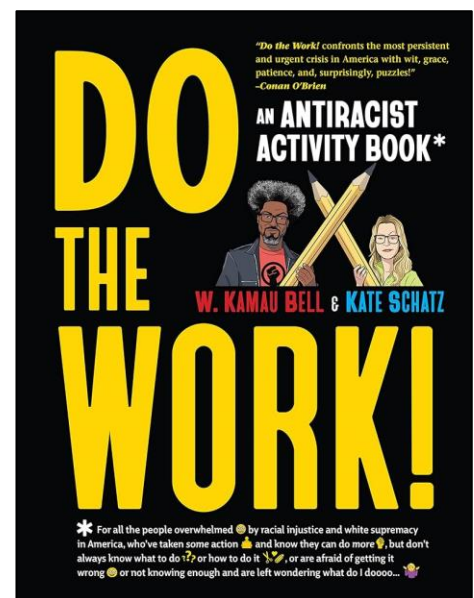
- Co-LABS Facilitators
- Increase Staff Involvement



# Clinic Division Training & Increased Community Engagement



# Acknowledgements



**THANK  
YOU**

Ashley Lewis

Health Equity Manager

Elizabeth McCoy

Training Coordinator

**[PH.HealthEquity@schsa.org](mailto:PH.HealthEquity@schsa.org)**