



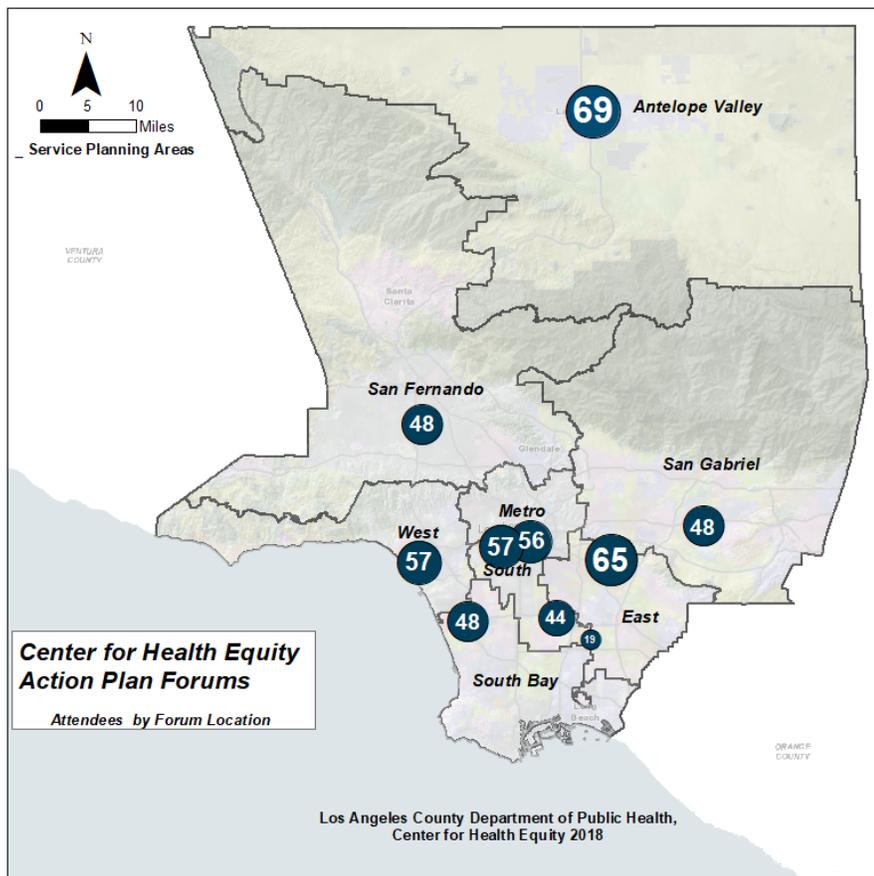
# Action Plan Community Forums: Summarizing and Applying Community Feedback

Between September and October of 2018, the Center for Health Equity (CHE) organized **10 Community Forums** to directly engage community partners, County staff, and other stakeholders around its draft Action Plan to advance health equity in Los Angeles County. The goals of these forums were to (1) receive feedback on the Action Plan, (2) identify existing work that aligns with the Action Plan, and (3) initiate and strengthen partnerships to collectively advance equity. These forums were in addition to the 90-day public comment period from August to October 2018 on the Action Plan, **6 Listening Sessions** and an official **CHE Launch Event** to obtain feedback from community stakeholders. In total, CHE held **17 community engagement events** involving approximately **1,000 people** who steered the direction of the Center and Action Plan activities.

This summary reflects the feedback gathered across the 10 countywide forums from September to October 2018. CHE applied the feedback to the revised Action Plan released in February 2019.

## Who Attended?

511 people attended the community forums. The forums covered all 8 Service Planning Areas, and we hosted additional events for two special populations, LGBTQ+ and South LA residents.



A total of **511** people attended Action Plan community forums

- 33%** were Community Members
- 28%** were Nonprofit Organizations
- 25%** were Government Entities
- 9%** were Healthcare Partners
- 2%** were Businesses or Funders
- 2%** were from Universities.

*Note: Percentages do not add to 100% due to rounding.*

# Reactions to the Action Plan

During a gallery walk, attendees rated each objective in the Action Plan based on the level of impact they thought each would have on health equity: **Green – High Impact**, **Yellow – Moderate Impact**, **Red – Low Impact**. The table below summarizes the objectives receiving the **highest** and **lowest** percentage of **green dots**, indicating the objectives that participants believed would have the highest and lowest impact on health equity. CHE used these ratings to prioritize objectives in the revised Action Plan.

## What Will Improve Health Equity?

### Highest Impact Objectives

### Lowest Impact Objectives

#### Reduce and Eliminate Gaps in Health Outcomes

*“The focus on STIs is absolutely necessary in LA County.”* – Metro LA Forum Participant

- Improve treatment outcomes for all women, especially women representing high-risk populations, including those at high risk for congenital syphilis **(91% Green)**
- Increase funding streams for STI prevention and control to support the work needed to reduce STI infection rates in the county **(89% Green)**
- Improve screening rates for STIs among all women, particularly among high risk women, women of childbearing age and all pregnant women **(85% Green)**

- Improve treatment outcomes for individuals in incarcerated settings **(33% Green)**
- Enhance County agency coordination and training to achieve effective environmental response and recovery efforts **(42% Green)**
- Increase tobacco prevention in schools, and screening and referrals to cessation programs in all county-run clinics for women to reduce the risk of adverse health outcomes caused by smoking **(45% Green)**

#### Provide Useful and Inclusive Data

*“Address the root causes of infant mortality.”* – San Gabriel Valley Forum Participant

- Ensure that reports describing population health collect and include information on the factors influencing health outcomes **(85% Green)**
- Ensure that Health Agency programs have capacity to share information with decision-makers, advocates and community organizations to promote health equity efforts **(82% Green)**
- Increase accessibility of data by race and ethnicity, age, gender identity, sexual orientation, geography and socioeconomic factors by building the Health Agency’s capacity to disaggregate and report data **(80% Green)**

- Collaborate with community organizations to evaluate their capacity to collect data that support policy, systems and practice changes **(32% Green)**
- Collaborate with the Data Advisory Board to identify topics for 3 additional health impact assessments **(39% Green)**
- Conduct a health impact assessment on the health and equity impacts of proposed cannabis regulations to ensure more equitable policy implementation **(41% Green)**

#### Support Policy and Systems Change

*“Collaborate with organizations in communities you are looking to support.”* – LGBTQ+ Forum Participant

- Support local and state policies that will increase resources for the communities and groups experiencing the highest burden of inequities **(94% Green)**
- Identify strategies to support community led policy change efforts that improve health **(89% Green)**
- Develop a health equity analysis toolkit that can be used by agency staff and community partners to evaluate proposed policy **(63% Green)**

- Ensure a health equity analysis is applied to all legislative items of interest to the Health Agency **(40% Green)**
- Assess local and state social justice campaigns and movements that align with a health equity agenda **(48% Green)**
- Assess Health Agency’s engagement with grassroots organizations and social justice movements and connect to organizations effecting policy change **(56% Green)**

## Build Public, Private and Community Partnerships

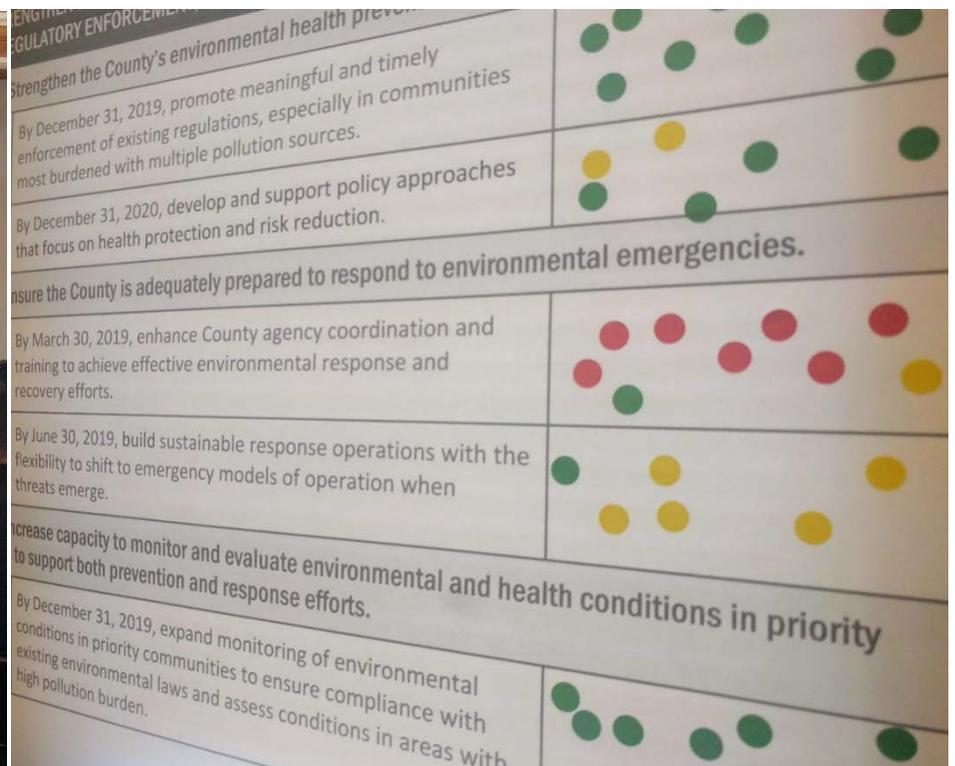
*"It's important to bring new ideas to the table and involve tomorrows' leaders."  
– Antelope Valley Forum Participant*

- Develop resources and trainings for organizations serving historically underserved communities on how to successfully obtain grants and County contracts **(83% Green)**
- Establish a Youth Advisory Committee to integrate youth voices into Department of Public Health policies, practices and initiatives **(83% Green)**
- Identify opportunities for participatory budgeting in the Health Agency **(82% Green)**
- Standardize practices that facilitate and document stakeholder input and recommendations to inform new and existing Health Agency initiatives **(50% Green)**
- Develop a video that explains the concept of health equity and its relationship to health outcomes **(37% Green)**
- Increase participation in Center for Health Equity listserv by 20% **(28% Green)**

## Strengthen Organizational Readiness and Capacity

*"...need to put training programs inside schools and implement programs that set up children for success."  
– Willowbrook Forum Participant*

- Develop partnerships with schools and communities to support a pipeline to public service careers for under-represented groups **(94% Green)**
- Implement guidelines to strengthen outreach efforts and workforce recruitment strategies designed to reach historically under-represented communities **(90% Green)**
- Implement policies and procedures that enhance recruitment, retention and promotion of staff that reflect the demographics of LA County **(87% Green)**
- Increase the number of employees "Agree" or "Strongly Agree" on the Employee Workforce Survey question, "I have a basic understanding of concepts related to racial equity" **(14% Green)**
- Establish a race equity team of at least 20 champions from across the Health Agency dedicated to racial equity learning, planning and practice **(52% Green)**
- Develop a virtual repository of resources and build effective processes for information sharing related to cultural competency, linguistic appropriateness and health equity across the Health Agency **(58% Green)**



# Incorporating Community Feedback

During the gallery walk and small group discussions, attendees provided input on what was missing from the Action Plan, what objectives were most and least important, what support they need to advance their equity work, and what specific activities we should include in each strategic priority. We analyzed all the feedback and identified major themes within and across each strategic priority. The table below summarizes the top themes we heard across the county and how we changed the Action Plan to apply stakeholders' input.

## What We Heard and What We Changed

### Cross-Cutting Feedback

#### Be Clear About Actions & Impact

**What We Heard:**

Use clear, accessible language. Actions should have specific timelines, outcome and impact.

**What We Changed:**

We have changed our language to be clearer and more specific. We have removed actions with a low-rated impact and changed all actions to lead to an intended outcome.



#### Include More Funding for Partners

**What We Heard:**

Community partners need additional funding and resources. Support partners doing this work and invest in underserved communities.

**What We Changed:**

We aim to increase investments in communities by simplifying contracting and providing trainings on County processes. We have specified throughout how we can better support partners in this work.



#### Need Greater Accountability

**What We Heard:**

The plan needs more accountability to ensure CHE applies the tools and lessons learned, incorporates community feedback, and monitors progress.

**What We Changed:**

We have tied a specific application to any actions related to information-gathering. By June 2019, we commit to releasing a set of performance measures for each action.



### Reduce and Eliminate Gaps in Health Outcomes

#### Acknowledge the Role of Racism

**What We Heard:**

Acknowledge the impact of other factors like the social determinants of health, racism and service access and utilization on health outcomes.

**What We Changed:**

We will build awareness about the role of racism and the impact of social determinants on inequitable health outcomes.



#### Diversify and Train the Workforce

**What We Heard:**

There is a need for a diversified and trained workforce that is more representative of the communities in LA County.

**What We Changed:**

We will review and implement policies and procedures that support recruitment, retention and promotion of historically under-represented individuals.



#### Increase Collaboration & Partnerships

**What We Heard:**

Increase collaboration and engage in more targeted outreach. More partnerships with cities and communities will be necessary for the Health Agency's Environmental Justice efforts.

**What We Changed:**

We commit to engaging and partnering with cities and community members most burdened by environmental hazards to address the issue.



## Provide Useful and Inclusive Data

### Ensure Cross-Sector Data Sharing & Access

**What We Heard:**

There should be more concrete cross-sector and inter-agency data sharing and reporting protocols. Provide a centralized access point for health and equity related data.

**What We Changed:**

We will develop a community-informed data-sharing platform to provide community partners with health, social, environmental, and economic data.



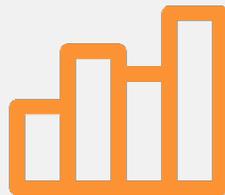
### Provide Health Equity Measures & Data on Underrepresented Populations

**What We Heard:**

Provide data on other health equity measures and populations such as undocumented immigrants, the homeless, LGBTQ+ community and the disaggregated Asian population in LA County.

**What We Changed:**

We commit to identifying and sharing best practices within the Health Agency for disaggregating data to help ensure programs better report data on underserved communities.



### Target Data Collection for Hard to Reach Communities

**What We Heard:**

Data should be representative of all residents in the county. More targeted engagement and data collection techniques must be implemented to involve hard to reach communities, such as NHOPI and Native American residents.

**What We Changed:**

We will convene a Data Advisory Board comprised of stakeholders from communities disproportionately impacted by poor health outcomes to provide guidance on Health Agency data collection, measures and reports.



## Support Policy and Systems Change

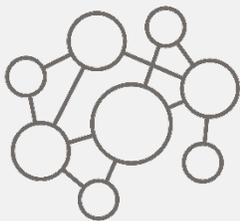
### Pursue Cross Sector Policies

**What We Heard:**

Policy issues outside of the traditional health sector are vital to health equity. Housing, immigration and education are a few issues to address in the next five years.

**What We Changed:**

We will support cross-sector policies that increase resources for underserved communities and share training on how to use the "Health in All Policies" lens with partners and other sectors.



### Build Community Capacity

**What We Heard:**

Community members and groups need support to advance policy change. Support community capacity by providing education, data and research, and additional resources.

**What We Changed:**

We will support grassroots organizations and other community efforts working on policy change by serving as a connector, sharing resources and providing research and technical support.



### Coordinate & Work with Partners

**What We Heard:**

Partnering with community groups and other sectors is essential to policy change. Creating spaces to coordinate and foster partnerships can help advance policy change and lead to greater impact.

**What We Changed:**

We will co-sponsor countywide policy forums to highlight community-driven priorities and promote collaboration across sectors, as a starting point.



## Build Public, Private, and Community Partnerships

### Leverage & Expand Cross Sector Partnerships

#### *What We Heard:*

Create and sustain meaningful partnerships across sectors that value community expertise and share leadership. Community leadership is key to addressing health inequities.

#### *What We Changed:*

We will provide training and tools to Health Agency staff and community partners to support effective collaborations and shared leadership.



### Prioritize & Engage Youth in Decision Making

#### *What We Heard:*

A diverse representation of youth should be included in planning and decision making across all priorities. Developing youth leaders who understand and can apply a health equity lens will ensure sustainability.

#### *What We Changed:*

We commit to ensuring that new and existing policies, practices and initiatives include youth. We will continue to identify new opportunities to engage youth leaders.



### Multiplatform & Culturally Appropriate Communication

#### *What We Heard:*

Effective communication includes diverse and culturally appropriate communication strategies. Work with community partners to share equity messages to communities in a meaningful way.

#### *What We Changed:*

We will create a multi-media toolkit and work with community partners to ensure messages are accessible and culturally appropriate.



## Strengthen Organizational Readiness and Capacity

### Train County Staff & Partners

#### *What We Heard:*

Collaborate with colleges/universities and other community partners to strengthen staff capacity at both the County and community level.

#### *What We Changed:*

We will develop and implement a workforce training curriculum to increase understanding and practice of health equity concepts that we will share with community partners.



### Be Accountable for Progress

#### *What We Heard:*

There must be a way to measure and ensure racial/health equity is integrated in everyone's work.

#### *What We Changed:*

We commit to reviewing and implementing policies using an equity frame to ensure our policies and practices are just, and we will monitor progress through customer/patient and community feedback.



### Improve Hiring Practices

#### *What We Heard:*

Improve identification, recruitment and retention of a diverse workforce. More outreach is needed in diverse communities and hiring and promotional opportunities need to be equitable.

#### *What We Changed:*

We will review and implement policies and procedures that support recruitment, retention and promotion of individuals of historically under-represented communities.



# Supporting a Movement: Building Partnerships

The Action Plan is meant to be a call to action that seeks to support an existing movement to advance health equity in LA County. Supporting a movement for health equity requires meaningful engagement and collaboration with community and cross-sector partners. During small group discussions, we asked attendees to describe how we can sustain collaborative partnerships to move health equity forward. The table below summarizes the major theme that came out of each strategic priority area.

## How Can We Sustain Partnerships

Provide Useful and Inclusive Data	Support Policy and Systems Change	Build Public, Private and Community Partnerships	Strengthen Organizational Readiness and Capacity
<p><b>More Meaningful Cross-Sector Collaboration</b></p> <p>Define clear research partnerships and incorporate grassroots organizations, community liaisons and academic institutions.</p> <p><i>“Grassroot engagement increases trust between County Agencies and Communities.”</i>                      –San Gabriel Valley Forum Participant</p>	<p><b>Keep Engaging &amp; Communicating</b></p> <p>Sustain engagement and communication with the community. There should be consistent, clear feedback loops.</p> <p><i>“Stay connected to the community.”</i>                      - Metro Forum Participant</p>	<p><b>Build Health Equity Lens Across Sectors</b></p> <p>Increase awareness of health inequities and support community partners ability to apply a health equity lens to their work.</p> <p><i>“Cultivating an equity lens is most important. We all need to speak equity.”</i>                      -South LA Forum Participant</p>	<p><b>More Meaningful Partnerships</b></p> <p>Partnerships need to last beyond the Action Plan. The County needs to develop better engagement strategies that lead to meaningful partnerships with diverse organizations.</p> <p><i>“Who are the new agencies doing the partnership work, where are they, and how can we invite them to the table?”</i>                      -LGBTQ+ Forum Participant</p>

## Where Do People Want to Partner

On Action Cards and evaluation forms, attendees were able to commit to opportunities to partner in advancing health equity in LA County. Attendees wanted to collaborate on CHE’s focus areas (health outcomes), strategic priority areas, and other specific opportunities related to the Action Plan’s objectives.



## Conclusion and What's Next

In February 2019, CHE released a revised Action Plan to advance health equity in LA County based on the valuable input from our community stakeholders and government partners. We are extremely appreciative and would like to thank all attendees for their engagement and support. Our Action Plan will continue to be a living document and we look forward to your continued feedback as we implement and refine the work. Moving forward, CHE will create a set of performance measures by June 2019 to track progress on our strategies, identify ways to regularly communicate and share this information with stakeholders, and implement our strategies based on input from you.

We look forward to three additional events planned in early 2019, including community forums focuses on communities with disabilities, Native American/Indigenous populations, and faith-based communities. Join our listserv to keep updated! To sign up, email us at [lachealthequity@ph.lacounty.gov](mailto:lachealthequity@ph.lacounty.gov).

### Thank you to all our community event co-sponsors and planners!

- Antelope Valley Health Neighborhood
- Antelope Valley Partners for Health
- API Forward Movement
- C2P LA Coalition
- California Community Foundation
- Children's Hospital Los Angeles
- Citrus Valley Health Partners
- City of Long Beach Department of Health and Human Services
- City of Long Beach Office of Equity
- Community Action for Peace, Willowbrook
- Community Coalition
- Community Health Councils, Inc.
- LA County Department of Public Health, Injury & Violence Prevention Program
- First 5 LA
- Healthy San Gabriel Valley Initiative
- In the Meantime Men
- LA County Chief Executive Office
- LA County Department of Health Services, Whole Person Care Regional Collaboration
- LA County Department of Public Health, Regional Health Offices 1, 2, 3, 4, 5, 6, 7 & 8
- LA County Department of Public Health, Trauma Prevention Initiative
- LA County Library
- LA Neighborhood Land Trust
- People for Mobility Justice
- Prevention Institute
- South Gate City Council
- Southern California Grantmakers
- Supervisor Hilda Solis, First District
- Supervisor Mark Ridley-Thomas, Second District
- The LA LGBT Center
- The LA84 Foundation
- The People Concern
- The Wall Las Memorias
- Transgender Service Provider Network
- United Way of Greater Los Angeles
- Valley Care Community Consortium
- WeCanStopSTDsLA
- Westside Coalition
- YWCA San Gabriel Valley

**Los Angeles County Health Agency**

**Center for Health Equity**

[www.publichealth.lacounty.gov/CenterForHealthEquity/](http://www.publichealth.lacounty.gov/CenterForHealthEquity/)