# Health Equity Collaborative Meeting Notes
## 1/21/2025

## Organizations Present:
- Kitsap Accessible Communities Advisory Council
- Liv Counsel (self)
- Alliance for Equitable Healthcare
- Bremerton Housing Authority
- Kitsap Mental Health Services
- Better Together Equity Foundation
- Kitsap Regional Library
- Up from Slavery Initiative
- Kitsap County Parent Coalition
- Surviving Change
- Olympic College
- Kitsap Black Student Union
- Born Rooted
- Kitsap Strong
- Pacific Asian Group of Kitsap County
- NAACP Bremerton Unit 1134

## Welcome and Acknowledgements:
- Erica Whares, Equity Coordinator at the Kitsap Public Health District, welcomed attendees and reviewed the agenda.
- HEC Vision and Mission Statements and Collaborative Agreements were reviewed.

## Update:
- Erica will be going on parental leave in the summer through the early fall. The HEC and workgroups will continue as scheduled, with the help of the KPHD Equity Team. Please email equity@kitsappublichealth.org instead of Erica's individual email address while they are on leave.

## HEC Membership Guide Update:

- Erica reviewed the updates to the HEC Membership Guide (formerly the HEC Handbook).
    - Those updates include plain language throughout, many section title changes, less stringent language around asks of HEC members, and the added expectation that we are taking what we learn at HEC meetings and sharing it with our communities.
    - KPHD is only able to offer compensation for those 18 years or older who are HEC members, starting May 2025.
    - The Membership Guide goes into effect at our May HEC meeting. If there is any additional feedback, please send notes to the equity@kitsappublichealth.org email and we will make any necessary changes.

## Workgroup Share-out:

- Each of the three Workgroups (Affordable Housing, Accessible Mental Health Services, and Accessible Medical Care) shared about their first meetings.
- The workgroups will meet again in April. Information about workgroups will be coming shortly.

**Presenting local public health data by race and ethnicity:**
- Kari Hunter and Kat Alexander, Epidemiologists with the Kitsap Public Health District, led a discussion about presenting public health data by race and ethnicity. The goal for the conversation was to gather community input on presenting data grouped by race and ethnicity.
- They defined epidemiology as "The study of how and why specific populations experience health risk factors and outcomes, and the use of this information to improve health."
- They shared that KPHD uses race/ethnicity data to:
  - Identify disparities and strengths between subgroups
  - Allocation of resources
  - Proxy for metrics that are harder to measure
- They posed the question to the group, "Is it important to you or your work to have access to health metrics by race and ethnicity?"
  - Responses were mixed. Some HEC members shared that it was important to capture all groups in data so we know who's missing, who needs more resources, and to track progress over time. However, there was discussion over whether the data we see are skewed since Bainbridge Island is included in Kitsap data. In this particular political climate, it can be difficult to know the reason(s) behind gathering data based on race or ethnicity and whether that will help or harm communities most impacted by health inequities.
- Kat shared information about how population-level data, like data collected in the US Census and the Healthy Youth Survey, can represent the majority experience of a large group or community but does not capture individual lived experiences. Population-level data tells us about general trends and experiences within that group and informs programs, services, policies to address specific needs. Population-level data can be improved by increasing participation, engaging with the community to listen to community needs, and by also incorporating qualitative data.
- Kari presented how race and ethnicity categories are currently grouped in the Census and in the Healthy Youth Survey, as well as on birth certificates. She shared the current visualization that KPHD uses to show data broken up by race and ethnicity, as well as an example of a newer option.
- Question posed to the group: When looking at race/ethnicity data, how important is it to see: a single point in time OR more than one year of data (trend over time)? Which option looks/works best for you?
  - Discussion around benchmarks and comparisons. Are we comparing the "best" performing group (usually white folks) to everyone else, or is there a

threshold we want to see everyone achieve? Can we compare all groups to the same threshold instead of comparing groups against each other?
- o Feedback that vertical, rather than horizontal, presentation works better for some
- o Interest in doing "deeper dives" for some metrics
- o Discussion around why more data is needed, when communities know what their needs are and what the gaps are.
    - For public health, data can be used to help advocate for programs that would increase health equity and address any inequities we see in the data. We can also use data to further prove what communities already know are the barriers, to advocate for programming and funding.
- Kari and Kat shared how KPHD handles small numbers in the data and how we work to avoid suppressing (or not showing) data if the numbers are too small to ensure reliability and confidentiality. Kat also shared the meaning of statistical significance and what that tells us about the data we see.
- Kari shared about ways to get involved in data. Please reach out to epi@kitsappublichealth.org with any ideas or questions.

**Group Share-out:**
- Karisha (Bremerton Housing) shared about an upcoming Wheaton Landing Enterprise share-out happening on 3/26. More information is included in the newsletter.