Children and Youth Behavioral Health Initiative
Equity Working Group

October 19, 2022
2:30 pm – 5:30 pm
Agenda

A. Gather, Welcome, Agenda Overview 10 minutes

B. Introductions by EWG Members 40 minutes

C. Developing Working Agreements 50 minutes

D. Definition of Equity for the CYBHI 30 minutes

E. Equity Framework 40 minutes

F. Next Steps 10 minutes
Members of the Equity Working Group
Developing Working Agreements (1/2)

- Communicate with Intention
- Interact with Respect
- Engage Fully
- Make Conflict Constructive
- Make Meaningful Connections
- Establish and Maintain Cultural and Psychological Safety
Developing Working Agreements (2/2)

- Move to breakouts session using link
- Begin breakout rooms (25 minutes)
  - Use draft of meeting agreements to discuss and arrive at consensus
  - Use Zoom annotation feature
- Close breakout rooms and move back to plenary to report out (20 minutes)
  - Report key points and ideas to EWG and public
  - Next Steps
Breakout Rooms in Session
Working Agreements Report Out
Equity Definition Committee

- Ellie Lian
- Imelda Padilla-Frausto
- Ivan DeJesus Alvarez
- Juan Acosta
- Marielle A. Reataza (chair)
- Sara Bachez
- Venus Esparza-Whitted
- Vincent Pompei
Definition of Equity – Our Process (1/2)

• Inspired by the WHO and SAMHSA definitions of equity, mental health, and behavioral health equity
• Avoid overly-clinical definitions of behavioral health
• Discussion over the various ways in which sociopolitical determinants of health impact behavioral health
• Acknowledgement of harmful policies and practices
• Young people-centered
Definition of Equity – Our Process (2/2)

Figure A. Final form of the CSDH conceptual framework

Definition of Equity – A Comprehensive Definition

• Broad principles of equity and health equity
• Equity in behavioral health
• Sociopolitical determinants of health and how they impact
**Definition of Equity (1/3)**

| Equity is the absence of unfair, avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically, or geographically or by other dimensions of inequality (e.g., sex, gender, gender identity, gender expression, cultural identity, ethnicity, disability, national origin, language, or sexual orientation). Health is a fundamental human right. Health equity is achieved when everyone can attain their full potential for health and well-being.  

Health and health equity are determined by the conditions in which people are born, grow, live, work, play, and age, as well as biological determinants. Structural determinants (i.e., political, legal, geographic, and economic) along with social norms and institutional processes shape the distribution of power and resources. In turn, the way in which power and resources are distributed directly impact equitable delivery of healthcare, and thereby, health equity. Consequently, inequitable distribution of power and resources results in a lack of health equity.  

People's living conditions are often made worse by discrimination, stereotyping, and prejudice based on sex, gender, gender identity, gender expression, age, race, ethnicity, disability, sexual orientation, religion, national origin, and political views, among other factors. Discriminatory practices are often embedded in institutional and systems processes, leading to groups being under-represented in decision-making at all levels, thereby limiting access to services.  

Progressively realizing the right to health means systematically identifying and eliminating inequities resulting from differences in health and in overall living conditions. |
Definition of Equity (2/3)

Definitions of behavioral health are culturally bound, but the term generally refers to a state of individual and interpersonal well-being, in which people, their families, and their communities are able to cope with the stresses of life, realize their abilities, learn and work well, engage harmoniously with family and friends, and contribute to their society. Behavioral health is a basic human right and it exists on a complex continuum. It is more than the absence of disorders or disabilities and can include other emotional, mental, and behavioral health conditions associated with significant psychological distress, impairment in daily functioning at home and/or school, and risk of self-harming behaviors.

Behavioral health is influenced by individual, family, community, and socioeconomic and political factors, including genetics, early life experiences, opportunities to connect to community and culture, and social policies and practices. Everyone has unique needs that support their behavioral health, which can range widely and may include family or community support, remediation of insufficiencies in the social determinants of health, or highly specialized and individualized care. Childhood, adolescence, and early adulthood are critical periods for building a foundation of behavioral health for a lifetime.

According to SAMHSA, behavioral health equity is the “right to access high-quality and affordable health care services and supports for all populations,” including but not limited to Black and African American, Latine/x, and Native and Indigenous people, Asian Americans and Pacific Islanders, and other people of color; members of marginalized linguistic, cultural, or religious groups; people with marginalized sexual orientations and gender identities or expressions; people with disabilities; people who live in urban and rural areas; people of all ages and citizenship statuses; and people otherwise adversely affected by persistent poverty or inequality. SAMHSA further asserts that advancing behavioral health equity involves ensuring all people have a fair and just opportunity to be as healthy as possible.

Furthermore, advancing equity in behavioral health involves acknowledging and correcting policies that have caused harm due to various forms of systemic oppression and marginalization, including those that have encouraged other dimensions of inequality; those that have resulted in the loss of power and resources essential to supporting behavioral health; misinformation that has resulted in negative biases, thereby fueling systemic inequities; those that have aggravated the school-to-prison pipeline; and those that have increased the risk of children being removed from their homes.
Behavioral health equity moves forward when there is a concerted effort to improve the systems and policies that impact sociopolitical determinants of health and thereby, the distribution of power and resources. Broadly, these determinants include financial barriers; historical and systemic trauma; introduction to the criminal justice system; the child welfare system; immigration status; housing insecurity or housing-cost burden; food insecurity and/or residence in a food desert; school resources and school failure; access to affordable higher education; family dynamics, including rejection of an LGBTQ+ child; the presence of one or more disabilities; a history of suicidal ideation and attempts; and safety. Lastly, access to affordable, quality, and culturally-responsive behavioral health and health services must also be improved. While the interaction of these determinants and how they impact behavioral health will differ for every young person and can fluctuate over various stages of life, policies and practices that invite critical inquiry of these determinants for their betterment will further advance behavioral health equity for young people altogether.
Fist-to-Five

• POLL: *Are you ready to take a Fist-to-Five vote on the definition?*
  • Respond with YES or NO

• POLL: Please provide your level of agreement toward the draft definition of equity.
  • Respond with Fist-to-Five choices
Equity Framework Committee

- Brooklyn Williams
- Constance Mitchell
- Donielle Prince
- Ebony Chambers
- Ellie Lian
- Erin Cabezas
- Janice Rooths
- Judith L. Perrigo
- Liz Harvey
- Nina Moreno
- Sara Bachez
- Stephanie Houston
- Zofia Trexler
### Equity Framework Purpose, Outcome, and Process

| **Purpose** | To develop a recommended equity framework for the CYBHI and approach/toolkit for the CYBHI team at CalHHS and its departments to apply the framework in the development, design, planning and implementation of the CYBHI. Future work of the committee could consider how partners and stakeholders in the behavioral health ecosystem for children and youth could also utilize this framework. |
| **Outcome** | Provide a recommended framework to the full Equity Working Group by early December. Develop a proposed approach/toolkit for CYBHI to use in applying the framework; some aspects of the toolkit may be ready for discussion with the full EWG in December and others may take into early 2023. |
| **Process** | At the October 19, 2022, full CYBHI Equity Working Group, the Equity Framework Committee will provide an initial report on its work and will seek feedback. This committee will decide the process, number of meetings, and objective of each meeting to ensure it will be able to present a final recommendation to provide to the EWG in early December. The Equity Framework Committee is a working committee and members are expected to bring ideas to the meetings and conduct offline interactions to co-design the framework and approach/toolkit in terms of research, document development, and concepts. |
Draft Equity Framework Pillars

- Targeted Universalism
- Cultural Responsiveness
- Building Anti-Racist Multicultural Institutions/Systems
- Data Driven Accountability
- Training and Capacity Building
- Healing Centered Approach
Equity Framework Discussion Plan

• Move to breakouts session using link
• Begin breakout rooms (15-20 minutes)
  • Review pillars with your group
  • Capture NOTICINGS and WONDERINGS using Zoom annotation feature
• Close breakout rooms and move back to plenary
Breakout Rooms in Session.
Next Steps

• Summary of Meeting Agreements
• Committee Next Steps
  • Equity Definition Committee
  • Equity Framework Committee
  • Data Committee
  • Workstream Thought Partnership Committee
• Next Equity Working Group Meeting: December 14, 2022, 3 – 5:30 pm
• Post-Meeting Survey Week of October 24, 2022
• CYBHI Quarterly Public Webinar: October 20, 2022, 2 – 4 pm
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