

# Oregon Resource Allocation Advisory Committee

## Full Committee Meeting Summary

September 30, 2022

### Overview

#### *Meeting Purpose*

Explore the significance of health justice in crisis care through three different perspectives: public health, healthcare, and community systems.

### Agenda

1. Welcome
2. Health Justice vs. Health Equity
3. Community Systems and Health Justice
4. Healthcare Systems and Health Justice

### Meeting Notes

#### *Welcome*

- [Dana, OHA]: OHA stopped relying on previous crisis care guidelines due to the concern that they would exacerbate health inequities
  - Today's meeting agenda is an important discussion on structural discrimination, and an opportunity to center communities who have been most impacted by oppression, especially during times of scarce resources.
  - Next month we will pivot our conversation to get into the specifics of crisis care.
- [Trey, Respondent Life]: Trey is available as a resource during committee meetings and throughout a person's membership on the committee. Try to think about what is happening within yourself during a difficult conversation:
  - Instead of feeling shame, try to develop a sense of curiosity
  - Question why you are feeling a reaction. For example, sometimes a sense of guilt is a signpost to point us in a direction of growth.
  - Have grace with yourself and each other to step into courageous conversations
  - Keep in mind that your intent is not always the experience of the impact

- Be open to feedback to serve the people we are committed to serving
- [Alyshia, facilitator]: There will be a noticeable shift in facilitation to hold members accountable to ORAAC's Working Agreements and challenge the committee to do your work in a community centered way.

### ***Health Justice vs Health Equity***

Ruqaijah Yearby continued her presentation on the disadvantage indices and provided definitions and examples of why health justice is important. The notes below highlight the questions/comments provided by committee members.

- [Comment]: Much of the conversation thus far regarding health equity has involved vaccine allocation. There are distinct considerations in the treatment of disease (either in the hospital in terms of critical care, or in the distribution of oral antiviral medications in the community), compared to the allocation of vaccines which are intended to prevent disease.
  - [Response]: Disadvantage indices are often used during disaster management. We will talk about using these indices in crisis standards of care, but these are not the only approaches the group should be considering. Community members should be involved with the adoption and implementation of crisis standards of care.
- [Comment]: The topic of equity and health equity in totality came to be known after the COVID-19 crisis. The system, meaning healthcare and other larger systems, will take time to develop meaningful change.
  - What about prevention from an equity and social justice lens to avoid the need or an urgent response?
  - How can the state become more preventative until we get to bigger systems change?
- [Comment]: I would consider changing the wording of “acknowledge the harm of past practices...” to “current practices.” There are current practices that are traumatizing and negatively impacting marginalized communities. If you are not in a marginalized community, people do not appreciate the ongoing harm that is occurring.

### ***Community Systems and Health Justice***

Committee members broke out into small groups to discuss the questions listed below. The notes in this section reflect what committee members shared when they came back together as a full committee.

1. What has the impact of COVID-19 and scarce resources been on the community?

2. How do we center the community in crisis care?
  - a. Where are the opportunities?
  - b. Where are the challenges?
3. What is the potential impact if we fail to center the community in crisis care?
  - The first question was difficult to answer because of a lack of adequate information
  - There are a lot of different challenges that the committee still needs to better understand
  - Southern Oregon has challenges related to health because of the fires
  - A lot of people in the developmental disability system were put in the high-risk category with older people
  - The developmental disability system saw a reduction in funding for community activities and support, and the impact has resulted in the lack of community structures to address the isolation people experience
  - The approach taken on safety protocols (i.e., masks, vaccination) divided the community during COVID-19; we need to improve communications on disease to not marginalize people with different beliefs
  - It is important to think about visitation policies and who is the best source of information about ill individuals. In different cultures, family is an important part of nursing an individual back to health. In a crisis, it is important for families to bear witness to decisions related to their loved ones.
  - We tend to forget the lessons learned from past experiences - this is not the first crisis we have had (i.e., HIV/AIDS, H1N1). We came really ill prepared to address the pandemic even though we had time to prepare and look at our lessons learned and we paid a high price for that. Our approach created more chaos and more crisis, until we listened to the community and went into the community.
  - Important to clarify that we are talking about marginalized communities in this conversation.
  - I fear the trap in thinking that a representative can speak for all, and I think bringing these decision-making processes physically closer to important communities will help.

### ***Medicine and Health Justice***

Committee member Derick Du Vivier presented sharing examples of structural racism, racial biases, and disparate outcomes in medicine, and important reflections on why addressing structural

oppression is important. There was no time for discussion. Instead, members were directed to take 10-15 minutes to reflect on what they heard in the presentation.