

Working together to create healthy opportunities for everyone

REGIONAL HEALTH EQUITY COALITION ANNUAL REPORT 2020-2021

EXECUTIVE SUMMARY

The Linn Benton Health Equity Alliance (LBHEA) is one of 4 Regional Health Equity Coalitions (RHEC) in Oregon and a program of DevNW. LBHEA has leadership representation of key local stakeholders from multiple sectors, including housing, healthcare, public health, education, non-profit organizations, and grassroots organizations. Our coalition works on behalf of people who may experience health inequities because of their race, ethnicity, national origin, language, social and economic status, social class, religion, age, disability, gender, gender identity, sexual orientation and other socially determined circumstances.

Between January 2021 and June 2021, our work was centered on the following strategies:

1) Meaningful Community Engagement

- Capacity Building Mini-Grant Program
- ❖ Authentic Community Engagement with People of Marginalized Experiences

2) Organizational Capacity Building

- Increasing Diversity in Leadership and Coalition Capacity
- Grantee Capacity

3) Social Norm and Environment Change

Creating Inclusive School Environments for all Children and Parents

4) Policy and Systems Change

Participation in local advisory boards and committees around important legislature.

Our key recommendations for moving health equity forward in the state of Oregon are the following:

- Include communities of color in all processes and efforts geared toward policy, system, and environmental changes aimed at improving health equity.
- It is key to reward community expertise and lived experience in the same ways that we have historically rewarded academic expertise and professional experience.

INTRODUCTION

Our History

As a coalition, the Linn Benton Health Equity Alliance (LBHEA) began its work before 2008, in a very organic and grassroots way. Our coalition's origins can be traced back to a group of community members who decided to organize showings of the "Unnatural Causes: Is Inequality Making Us



Sick?" series followed by community discussions on the role of social determinants on our community's health. Back then, the very idea of social determinants of health was a pretty innovative approach to public health, and health equity in itself was a relatively unknown concept at the community level. Those movie showings and community discussions led to the creation of a more organized group, which received its first grant from Northwest Health Foundation in 2008. At that point in time, the backbone organization for the LBHEA was Benton County Health Department. In 2011, when the Oregon Health Authority (OHA) established the Regional Health Equity Coalition (RHEC) initiative, LBHEA was funded as one of three original RHECs. RHECs work using community-driven and culturally-specific activities to reduce health inequities and address social determinants of health in their respective regions and in the state of Oregon.

In 2012, LBHEA transitioned from Benton County Health Department to a new backbone organization – DevNW (formerly known as Willamette Neighborhood Housing Services, or WNHS); this move made sense because DevNW is a non-governmental, non-profit organization, which is uniquely positioned to advocate for policy and system changes. DevNW is a community development organization committed to improving lives and strengthening communities through quality affordable housing, homeownership, economic opportunity, and community partnerships. DevNW was formed in 1991 and is a chartered member of the NeighborWorks Network. DevNW services include the development of multifamily rental housing and owner occupied housing; assistance to first-time homebuyers; financial education; home repair loans; health navigation and resident service programs. With the addition of the Linn Benton Health Equity Alliance to its programs, DevNW was able to more effectively address the social determinants of health, policy, and system changes in partnership with member individuals and organizations.

Our Vision and Mission

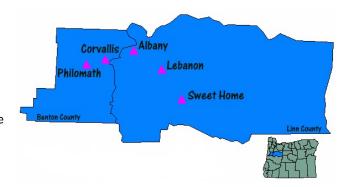
LBHEA's vision is that healthy communities begin where we live, learn, work, and play. Together, our coalition is working to ensure a future where healthy opportunities are possible for underrepresented and underserved people in Linn and Benton Counties, with a special focus on the needs of communities of color. We acknowledge the historical and structural underpinnings of inequities in health and the need for societal change. To that end, our mission is to gather people from a variety of backgrounds to build on community strengths and create policy, systems, and environmental change so that underrepresented people have the opportunity to be healthy.

In our work, we adhere to the following guiding principles:

- We honor respect and dignity for all humans;
- We create and promote opportunity and access for those that have historically lacked it;
- We practice inclusivity and reciprocal learning;

Who We Serve

Our coalition works to empower underrepresented and underserved individuals, their communities, and the organizations that serve them across Linn and Benton Counties. We work on behalf of people who may experience health inequities because of their race, ethnicity, national origin, language, social and economic

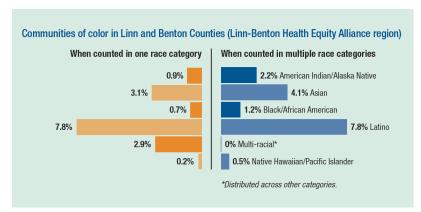


status, social class, religion, age, disability, gender, gender identity, sexual orientation and other socially determined circumstances. Most of our current work is centered in Corvallis, Albany, and surrounding rural areas including Monroe, Philomath, Lebanon, and Sweet Home. The closest tribe to our region is the Confederated Tribes of the Siletz, which are headquartered in Lincoln County. We are working to establish communications with the Siletz Tribes, considering that members of these tribes reside in several different Oregon counties.

Data from the most recent Regional Health Assessment of Linn, Benton, and Lincoln Counties (2015) indicates that Linn and Benton counties have approximately 216,000 residents, ¾ of whom live in urban centers. Linn and Benton counties are also home to a diverse population in terms of race and ethnicity, socioeconomic status, immigration status, and sexual orientation - as described in the two figures below.

LBHEA Target Population	Benton County (Population = 91,000)	Linn County (Population = 124,000)
Latino/Hispanic	6.9%	8.3%
Black/African American	0.9%	0.4%
American Indian or Alaska Native	0.7%	1.6%
Asian	6.2%	1.2%
Other Race/Multiple Races	4.5%	3.9%
Immigrants/Refugees	10.0%	4.0%
Living below federal poverty line	22.0%	19.0%
Rural residents	19.0%	32.0%
LGBTQ	Best estimate is 5%	Best estimate is 5%

Sources: Linn County Community Health Assessment and Benton County Community Health Assessment, 2017.



NOTE: Numeric estimates for communities of color in LBHEA's service area when counted as a single race are as follows: American Indian/Alaska Native (n=2,451), Asian (n=5,677), Black/African American (n=1,486), Multi-racial (n=6,142), Native Hawaiian/Pacific Islander (n=400) and when counted alone or in combination: American Indian/Alaska Native (n=5,546) Asian (n=7,797), Black/African American (n=2,501), Multi-racial (N/A), Native Hawaiian/Pacific Islander (n=1,052). [Data source: US Census Bureau Population Division. Annual Estimates of the Resident Population by Sex, Race, and Hispanic Origin, April 1, 2010-July 1, 2014. (Release June 2015), Tables PEPSR6H and PEPSR5H]

In terms of the socioeconomic status, both counties have lower median household and per capita incomes than the state of Oregon. In terms of income inequality, Linn County has a lower ratio than the state of Oregon, while Benton County has the highest income inequality in the state. About 1 in 5 residents in the region live below the poverty line; children less than five years of age represent the highest percentage living below the federal poverty level. A higher percentage of non-White residents live below the federal poverty line.

In term so of immigration status, we know that around 9% of the population in our two counties speak a language other than English at home (59% of speak Spanish at home, and 41% speak another language). Benton County also has a diverse immigrant population due to the student population at Oregon State University and their families.

Affiliated Organizations

There are three different ways through which organizations become affiliated with our coalition: leadership team, partners, and coalition members. Each type of affiliation carries its set of responsibilities and level of engagement.

The Leadership Team makes executive decisions for the coalition; members are expected to regularly attend meetings, which happen every other month in person, and over the phone as needed. Our Leadership is currently composed of 10 members, 6 of whom identify as people of color, including Black, Latino/Hispanic, and immigrant members. Most of the leadership team members are women (9), and all members prefer to communicate in English. The organizations listed to the right are represented on our leadership team.

- Benton County Health Department
- Linn County Public Health
- Samaritan Health Services
- Casa Latinos Unidos
- Disability Equity Center
- Corvallis/Albany NAACP Chapter
- o IHN Coordinated Care Organization
- o Oregon State University Extension
- Strengthening Rural Families
- DevNW

A second way to be affiliated with our coalition is by becoming a **Partner**. In September 2020, we granted 4 Capacity Building Mini-Grants and 5 Policy and System Change Grants to a total of 9 partner organizations. These grantees were rewarded the same grants in the previous grant cycle to reduce overall burden amidst the COVID-19 Pandemic. These partners help further the mission of the coalition through their actions in our communities and are expected to participate in an ongoing and active manner at our monthly meetings, trainings, and other events. Our current partners are listed below:

- Albany Partnership for Housing and Community Development
- Casa Latinos Unidos
- Community Doula Program
- Corvallis Multicultural Literacy Center
- NAACP of Corvallis/Albany
- Olalla Center for Families and Children
- OSU Extension of Linn County
- Strengthening Rural Families
- Garfield Elementary Parent Teacher Association

Finally, there are local organizations that are **coalition members**. These organizations receive communications from LBHEA on a regular basis, and may choose to engage in specific events and trainings that are of interest to them. They reach out to our coalition when opportunities for collaboration arise, and are quick to offer assistance when called upon by us – but they do are not required and often do not interact with our coalition on a regular basis. These coalition members include other **public health entities** (such as Lincoln County Public Health and the Siletz Tribal Health Services), **health care agencies** (Mid-Valley Children's Clinic), **local schools** (Corvallis School District and School Board, Greater Albany Public Schools, Lebanon School District), **higher education institutions** (Linn Benton Community College and Western Oregon University), **non-profit organizations** (Boys and Girls Clubs across the region, United Way of Lincoln, Benton, and Linn Counties, Community Services Consortium, Community Outreach Inc., Old Mill Center, Kidco Headstart, CARDV, Family Tree Relief Nursery, CHANCE, OCWCOG), **public institutions** (Department of Human Services, local city governments, local boards of commissioners), and other **coalitions** (Corvallis Sustainability Coalition, SURJ).

SUMMARY OF ACTIVITIES

Meaningful Community Engagement

Capacity Building Mini-Grant Program

During the 2020-2021 grant period, we granted 4 Capacity Building Mini-Grants to local partners totaling to \$10,000; we hope to extend funding to interested organizations until our next RFP is released in the Fall of 2021. Considering the COVID-19 Pandemic severely impacted our partners in various ways, we renewed our 2020 mini-grant winners for the following grant year in 2021. These mini-grants were awarded based on the strength of their application (from the previous cycle), demonstrated need for funds to participate in coalition meetings and activities, and the potential for funds to increase diversity of the coalition and contribute to building the capacity of individuals and organizations to address health equity issues in our community. Partner organizations were expected to participate in the coalition as members who help us to think and act strategically and in a unified and coordinated manner.

Authentic Community Engagement with People of Marginalized Experiences

Connecting with communities of persons who historically have experienced marginalization due to systemic oppression has been a consistent priority in LBHEA's overall engagement. More particularly, our coalition has been working on promoting meaningful engagement that is culturally- and linguistically-appropriate for our communities, such as the Latinx and Black/African American community. We have done that by granting funds to two organizations who are pillars in their respective communities – Casa Latinos Unidos and the Corvallis/Albany chapter of the NAACP.

Both Casa Latinos Unidos and the Corvallis/Albany chapter of the NAACP have been members of the coalition for several years now, as well as part of our leadership. They reported that our grants and support have allowed them to grow as an organization and to connect with other important local stakeholders. It also allowed them to be liaisons to their community, sharing important information with their social networks. Participating in the leadership has also built their capacity to voice their concerns on important matters. We hope to be building local leaders through this work. The NAACP have partially credited the coalition for the inauguration of their Health and Wellness co- vice presidents, and expanding related events, such as vaccination efforts centering BIPOC folks in the community. In the recent months, LBHEA partnered with community organizations such as the Corvallis/Albany chapter of the NAACP in hosting "Black Maternal Health: It Takes a Village", a panel discussion on the mortality rates of Black birthing persons. Casa Latinos Unidos has increased their presence in the community through COVID and immigration related events. Currently, the coalition and Casa Latinos Unidos, along with other community partners, are beginning the process of drafting a letter of community support to the office of Senator Jeff Merkley to voice our needs in having funds redirected away from ICE and back into community-based programs and organizations.

Organizational Capacity Building

Increasing Diversity in Leadership and Coalition Capacity

As part of our onboarding of coalition grantees, we hosted a "race conversations" session to set the priorities and the tone for our meetings, and to build the capacity of new and old members of our coalition to engage in challenging conversations about race and its role in our society. We used techniques learned from the Race Conversations program developed a few years ago by the Racial Equity Coalition of Southern Oregon, as well as Courageous Conversations about Race.

In addition, we have increased overall diversity (by race/ethnicity, age and area of interest) by recruiting a BIPOC coordinator and a new leadership member. The coordinator demonstrated extensive experience in utilizing Critical Race Theory (CRT) in community engagement and activities, more particularly in LBHEA's month long "Minority Health Month" initiative. The coalition was made aware of the ways in which not including disability justice into our overall equity justice work was counterproductive. To this effect, we inaugurated a new member April 2021. Our newest leadership member holds a deep background in disability, equity and justice.

Grantee Capacity:

Our coalition builds the capacity of our grantees in several ways, including offering partnership opportunities, collaborative support, and technical assistance. We also build their capacity through granting funds that can be used to support overall work in meaningful and useful ways.

These funds enabled Strengthening Rural Families (SRF) to hire a qualified bilingual and multicultural intern to assist with application processes of other organizations such as Casa Latinos Unidos. SRF was also able to hire a new coordinator, who focuses on community outreach and engagement activities. The Corvallis Multicultural Literacy Center (CMLC) have also benefited from these grants. CMLC reports that these funds were extremely beneficial to overall outreach and engagement with the community. As a result, CMLC was able to support folks through technology and software assistance as the center's, and other activities, were being held virtually remote due to the COVID-19 pandemic.

Olalla Center has also supported the Bravery Center project in Lincoln City Cultural Center (LCCC). This year, the Bravery Center was able to successfully secure a space within the LCCC. Due to the COVID-19 pandemic, the grand opening of the space has been postponed and all outreach events/support services continue to be offered virtually. The newly-opened Center holds culturally-specific outreach and services led by members of the LGBTQIA2S+ community. These include a virtual hangout space for youth where they can socialize, access information about events and resources, and discuss LGBTQIA2S+ topics, support groups for parents/caregivers of LGBTQIA2S+ youth, mental health services provided by a LGBTQIA2S+ therapist, and resource navigation to affirming healthcare providers and other social services agencies. The Bravery Center's Youth Leadership Team recently requested to the Lincoln County Board of Commissioners for the designation of the month of June as "Pride Month". As a result, this

request was adopted and Lincoln County now acknowledges June as Pride Month!

Finally, we are encouraging our members to pursue additional funding sources, and supporting them through referrals, letters of support, and technical assistance.

Social Norm and Environment Change

Creating Inclusive School Environments for all Children and Parents

Throughout this pandemic school year, the Garfield PTA worked closely with school administration and staff to facilitate equitable learning opportunities focused on student wellness, physical activity, and cultural enrichment. Opportunities include but are not limited to: purchasing virtual school equipment (such as headsets, ocarinas, art supplies, jump ropes and yoga mats) for students to help facilitate effective home learning, hiring interpretation services for virtual for PTA leadership, meetings between the PTA and Garfield administration, and for parent PTA meetings. Garfield PTA reported that the mini-grant help provide additional funding to teachers all Garfield teachers to purchase materials to best reach students most impacted by remote learning in each classroom. The PTA was also able to support OSU Extension project aimed to explore school centered support for Latino/a/x families during the COVID-19 pandemic.

OSU Extension and the Corvallis/Albany NAACP continue to work with Greater Albany Public Schools (GAPS) leadership, which is interested in continuing conversations on how to move Equity, Diversity, and Inclusion forward in the district. Virtual meetings with key equity advocates occur weekly during the COVID-19 pandemic and GAPS is in process of adopting an Equity policy this summer. The Corvallis/Albany NAACP is also engaged in regional meetings that include leadership from school districts in Corvallis, Albany, Lebanon, and Philomath to discuss and implement equity policies.

Policy and System Change

Participation in local Advisory Boards and Committees

Organization	Committees and Boards	
Albany Partnership for	Intercommunity Health Network Delivery Systems Transformation Team	
Housing and	Universal Care Coordination Workgroup	
Community	Social Determinants of Health Workgroup	
Development	Homeless Engagement and Resource Team (HEART)	
	Linn County Adult Service Team	
	Linn Benton GED Prep Network	
	Sharing Hands Pack Snack Committee	
	Habitat for Humanity Screening Committee	
Casa Latinos Unidos	Corvallis Thriving Communities 2040 Council	
	District Equity Leadership Team Advisory (DELTA) - Corvallis	

Corvallis Multicultural	Oregon State University	
Literacy Center	Linn Benton Community College	
	Here to tray	
	Dreaming Beyond Borders	
	Adult English Language Consortium	
	 Interfaith Immigrant Support Group Altrusa International 	
	Casa Latinos Unidos	
	Linn Benton Hispanic Advisory Board Committee Compalie Doubling Dynamic Control Compalie Doubling Dynamic Control	
	Corvallis Daytime Drop in Center Disability Faulty Contains	
	Disability Equity Center OSUL Callege of Dublic Health and Human Science	
Cardiald Flancists	OSU College of Public Health and Human Science	
Garfield Elementary	509J Corvallis School District-Wide Wellness Committee	
Parent Teacher	Garfield School Wellness and Equity Committees	
Association (PTA)	Corvallis Schools Foundation Parent Network/Leadership Committee	
NAACP	District Equity Leadership Team Advisory (DELTA) - Corvallis	
Corvallis/Albany	Linn and Benton Health Departments	
	League of Women Voter	
	Mid Valley Health Care for All	
	Regional Racial Equity Group	
Olalla Center for	PFLAG Leadership Board	
Families and Children	IHNCCO Delivery System Transformation Committee Chair	
	IHNCCO Health Equity Workgroup	
OSU Extension –	Linn-Benton-Lincoln Partners for Health	
Linn County	Linn-Benton Hispanic Advisory Committee.	
Strengthening Rural	Parenting Success Network	
Families	Thriving Community Initiative Council Steering Committee	
	Benton County and Regional Oral Health Coalitions	
	Linn Benton Lincoln Early Learning Governing Board	
	Community Mental Health Coalition	
	Philomath Housing Stability	
LDUEA C	- -	
LBHEA Coordinator	IHNCCO Delivery System Transformation Committee	
	IHNCCO Health Equity Workgroup Health Facility Constitution (ACM) and Public Health Board. Health Facility Constitution (ACM) and Public Health Board.	
	Health Equity Committee (of the Oregon Public Health Board)	
	Oregon Health Equity Task Force Oregon Health Equity Task Force	
	RHEC/OHA Medicaid Waiver Group	
	BM 108 Allocation Advisory Group	

ACHIEVEMENTS & CHALLENGES

Achievements

Linn Benton Health Equity Alliance Grants

The achievements described in the previous section are the result of our strong collaborative partnerships with local organizations and key stakeholders. Some of these relationships have existed since the coalition started over a decade ago and some are emerging relationships that started in the recent past. All of them, however, are characterized by mutual respect, shared vision and goals, and joint learning. None of our work would be possible without contributions from all of the organizations that comprise the Linn Benton Health Equity Alliance.

One of the most important ways in which we develop and maintain these important relationships is by spreading coalition resources across the organizations that comprise our coalition. We do so by awarding grants in a process that uses an equity lens. Historically, we have granted two types of grants: Policy and System Change Grants and Capacity Building Mini-Grants.

Policy and System Change Grants in 2020-2021 ranged from \$10,000 - \$12,500 and are granted based on the strength of the application and on the degree to which the application addresses identified coalition priorities, policy/systems opportunities, and engagement of communities of color. The purpose of these projects is to address health equity in a meaningful way at the policy and systems level. In 2020, grants were awarded to Casa Latinos Unidos, the Garfield Elementary Parent Teacher Association, OSU Extension of Linn County, Strengthening Rural Families, and Olalla Center for Families and Children. Policy and System Change Grants help drive the changes we want to see in our communities, and are a key way through which we achieve our collective goals as a coalition.

Capacity Building Mini-Grants are granted based on the strength of the application, demonstrated need for funds to participate in coalition meetings and activities, and the potential for funds to increase diversity of the coalition and contribute to building the capacity of individuals and organizations to address health equity issues in our community. In 2020, 4 mini-grants were given in the amount of up to \$2,500 each. The purpose of these mini-grants is to help LBHEA to further our mission, but also to ensure that grassroots organizations (which are often operating with very limited resources) are able to be at the table, to contribute their insights about health equity needs, and to take advantage of opportunities to build their capacity. These grants are important because historically, people of color have been asked to participate, to offer their insight, to share their knowledge, and to educate white communities and institutions – but were hardly ever compensated for that effort. We believe that no grassroots or volunteer organization serving underrepresented communities should be made to be at our table at their own expense and depleting their already limited resources.

Though these grants are awarded through a competitive Request for Proposals (RFP), we try to make the process as open and inviting as possible. To many small organizations, this is their first experience in grant writing. We offer technical assistance and support in both applying for funds, meeting the deliverables, and reporting requirements, and we also assist partner organizations in seeking external funds as their capacity outgrows our funding mechanism. Given the COVID-19 Pandemic, we decided to re-grant these funds to our previous grant awardees to alleviate undue stress of submitting an RFP and a full application.

A few of LBHEA overall success is exemplified by working closely with Greater Albany Public Schools since March, along with other local advocates, to ensure that changes to the school system that will take place due to the pandemic will take into account equity needs for students and staff. We also recently hosted a webinar on pregnancy-related mortality and morbidity among Black birthing persons with various medical professionals, community health works, and community doulas. This is the first event that has been hosted by LBHEA to target the experiences of Black birthing persons in our local area (Linn, Benton and Lincoln counties) within the context of community health. We welcomed over 80 participants all over the state to learn and join in the fight for healthy communities.

Recognition as a Voice for Equity in our Region

While the Linn Benton Health Equity Alliance has been in existence for over a decade, it was only recently that we became known as a voice for **equity** in our region, and not just **health equity**. For a long time, the local perception is that our work was focused on health and housing. Through the hard work of our partners in multiple boards, committees, and public arenas, we have been able to shift that perspective. It is now not unusual for us to get invited to participate in decision making regarding policy that affects K-12 education, colleges, policing, housing, city and county funding decisions, public health, and many other fields. In fact, our leadership team is comprised of many members who served on the Oregon Health Equity Task Force, which is leading the fight to declaring racism as a public health crisis in the state of Oregon. Furthermore, we have become known as a coalition that is closely connected with communities of color and that can offer insight not only into the needs and priorities of communities of color, but also offer technical assistance and training on how to engage with communities of color in a meaningful, respectful, trust-building manner.

Challenges

❖ COVID-19 Pandemic

Our greatest challenge still remains the pandemic and organizational transitions. Since we are unable to have any meetings in person, it poses as a barrier for both leadership and members of LBHEA to engage with our programs and events. Our coalition leadership has met online multiple times since the start of the pandemic and we hosted our second ever open coalition meeting in May. We used a webinar format, and we invited our grant awardees to share how the impactful done during the COVID-19 pandemic. The webinar was hosted on Zoom (where it reached its maximum capacity of 100 participants). On Facebook, LBHEA is regularly sharing different resource opportunities for the community. Since the pandemic, we have seen an overall increase of online engagement by 150%! This was an amazing level

of engagement, and it is making us rethink how our coalition can use online spaces (now and in the future) to spread our message far and wide and to make it accessible for large audiences. Another challenge is related to the recent transition of our new coordinator of LBHEA. This transition process requires a lot of training, and patience that may delay some of the impactful work of LBHEA, however we have continued to make impactful progress in the ways we engage with our communities.

One of our greatest challenges are having sustainable funding and support to continue our work. Currently, all of our funding comes from the state, in the form of different grants and contracts. We have been exploring alternative funding sources and we plan to continue those efforts, but sustainable funding that we can count on is more conducive to long-term policy change work. Ideally, our coalition would like to have more FTE to help accomplish our work more effectively, and especially more funds to support our partners in their policy and system change efforts. The workload that we are being asked to accomplish is far too large for our current FTE and grant awards.

POLICY & SYSTEM CHANGE RECOMMENDATIONS

Our coalition's work over the past year has yielded the following suggestions for health equity across our region and the state of Oregon:

1) It is beyond time to center voices of color in all decision making spaces

- Centering voices of color in decision-making is well overdue, and the COVID-19 pandemic has made it evident that we cannot afford for that to be the case anymore. It is evident that communities of color are bearing the burden of the current pandemic, and if are to right that wrong and avoid its reoccurrence in the future, then these communities must be not only included in the discussion, but rather leading the process of change. It is imperative that we speak on the ways in which racism and other systems of oppression impact overall community health.
- We must provide communities of color with financial resources, practical support, and space
 to engage in decision making regarding current decisions and how to move forward, if we
 are to use this moment to create a more equitable Oregon. This will cost money and will look
 different across our communities, and yet it is an investment of resources and time that must
 be made.

2) We must consider equity when engaging in online platforms

One of the biggest struggles that our coalition and our member organizations have faced in
the last quarter has been engaging with our Latinx, non-English speaking members. There is
an economic divide (lack of access to equipment or broadband interned), a language divide
(simultaneous interpretation is challenging), and a cultural divide (familiarity, level of comfort,
interest in engaging in online spaces). We cannot let this situation keep our Latinx, nonEnglish speaking communities outside of the decision-making process as we move forward

as a society. We do not have an answer as to how to proceed, but we know work must be done so these voices are still included and listened to.

3) We must take this opportunity to envision a better world, and not a return to what it was

- If there is something the pandemic gave us, it was the opportunity to re-envision our world. It has exposed its faults and its vulnerabilities, and it is giving us a chance to tear down and rebuild. We can rebuild schools, and health systems, and social services, and policy-making in ways that address diversity, equity, and inclusion as core non-negotiable values.
- We urge decision-makers at all levels (state, regional, and community) to take this opportunity to re-envision how we can change institutions and policies so that communities of color are included, have their voices heard, and their needs met as we move forward.