

EVALUATION AND LEARNING UPDATE #4

(JULY – DECEMBER 2023)

This document was produced as part of a Centers for Disease Control and Prevention (CDC) National Initiative to Address COVID-19 Health Disparities, Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities (CDC-RFA-OT21-2103), which was completed in 2024.



EQUITY IN OC

INTRODUCTION

This report provides an overview of the Equity in OC (EiOC) Initiative for the period of July 1– December 31, 2023.

The document provides a snapshot of the initiative, as well as highlights that inform the learning and initiative's commitment to continuous improvement.

The report is divided into the following four sections:

01**What is Equity in OC?**

Initiative overview and theory of change

02**Who is Equity in OC?**

Overview of participants and funding

03**What does Equity in OC support?**

Overview of data related to 4 key goals that support Center for Disease Control and Prevention (CDC) activities and strategies

04**What are we learning from Equity in OC?**

Reflections and next steps of the Equity in OC Initiative

WHAT IS EQUITY IN OC?

The Orange County (OC) Health Care Agency (HCA) Office of Population Health and Equity (OPHE) received nearly \$23 million in grant funding from the Centers for Disease Control and Prevention (CDC) National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities (CDC-RFA-OT21-2103). The long-term strategies of this two-year Equity in OC Initiative will:

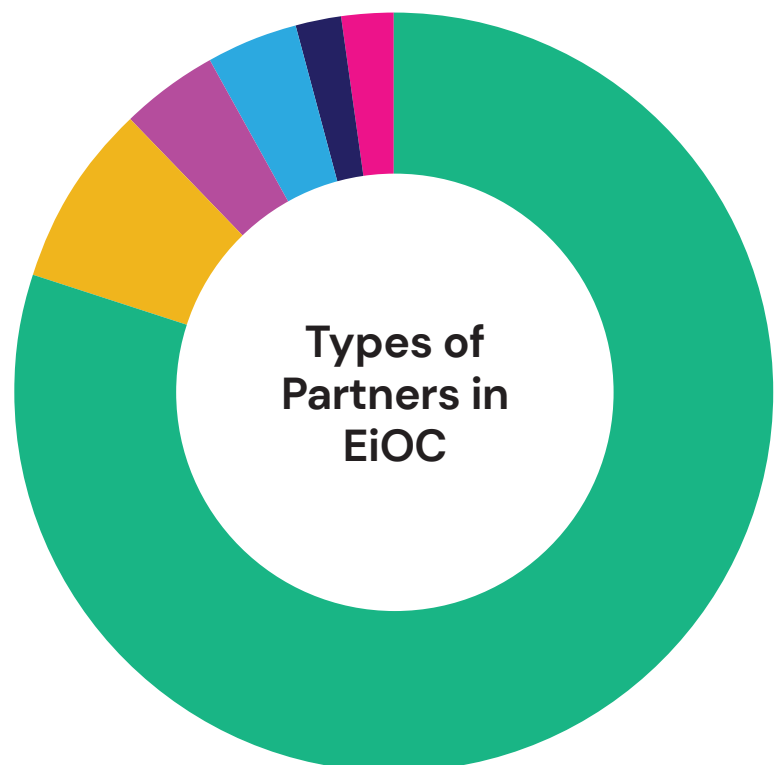
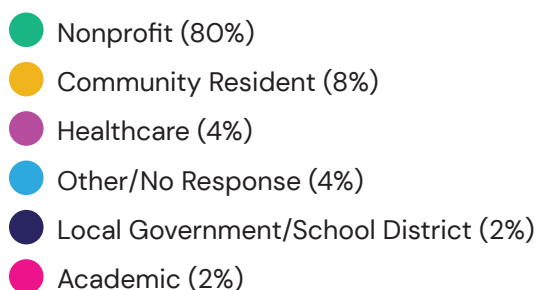
- Expand existing and/or develop new mitigation and prevention resources
- Increase or improve data collection, reporting, and infrastructure
- Build, leverage, and expand capacity and infrastructure of local health departments
- Mobilize partners and collaborators to advance health equity and address Social Determinants of Health (SDoH)

WHO IS EQUITY IN OC?

As of December 2023, there were **186 partner organizations** engaged in EiOC: this is an increase from 143 in June 2022. These organizations serve 17 distinct priority populations. Additionally, there were 45 community member partners (unaffiliated with an organization).¹ The diversity in organizations is a result of the the EiOC team's continuous focus on improvement and identifying gaps and working to outreach to new members who represent these priority populations.

Priority Population	# of EiOC members providing services		Priority Population	# of EiOC members providing services	
	(DEC '22)	(DEC '23)		(DEC '22)	(DEC '23)
Latino/a community	92	102	LGBTQ+ community	50	56
Individuals in persistent poverty	84	92	Black community	44	47
Non-English speakers	77	88	Unhoused	43	51
Multi-ethnic	75	80	Gender minority	43	47
Mixed-immigration status	72	79	Native Hawaiian/Pacific Islander	29	31
Youth	69	75	Middle Eastern	38	41
Asian community	69	74	Veterans	23	25
Under-employed	62	70	American Indian/Native American	23	26
Older Adults	57	57			

Today, there are 231 diverse partners across Orange County.



Who is funded by Equity in OC?

Through December 2023, **six (6) distinct funding opportunities have been created** for the Orange County community working to improve health equity. At the time of this report, **\$13.1M has been awarded countywide.**

1 Individual Community Member Honoraria (Personal Service Contract)	<ul style="list-style-type: none"> • 49 Orange County community members TOTAL DISTRIBUTED \$152,990
2 Organizational Participation Grants	<ul style="list-style-type: none"> • 141 OC-based organizations TOTAL DISTRIBUTED \$1.79 Million
3 Grants for Underserved/Underrepresented Communities	<ul style="list-style-type: none"> • 4 OC-based organizations representing the Native Hawaiian and Pacific Islander; American Indian and Alaska Native; and Transgender and Gender Nonconforming communities TOTAL DISTRIBUTED \$1.08 Million
4 Population Health Equity Collective Grants	<ul style="list-style-type: none"> • 8 Collectives (API, Black, Latino/a, LGBTQ+, Individuals w/Disabilities, Older Adults, SAMENA, Food Security, Nutrition & Access) TOTAL DISTRIBUTED \$2.68 Million
5 Power Building Grants (Rounds 1 and 2)	<ul style="list-style-type: none"> • 29 OC grassroots organizations with budgets under \$500K (\$50K awarded to each) TOTAL DISTRIBUTED \$1.45 Million
6 SDoH Implementation Grants	<ul style="list-style-type: none"> • 12 Implementation Partnership Teams • 2 Social Determinants of Health Action Areas TOTAL DISTRIBUTED \$5.96 Million

WHAT IS SUPPORTED BY EQUITY IN OC?

STRATEGY 1

Expand existing and/or develop new mitigation and prevention resources and services

Deliverables for this strategy were completed by a combination of work conducted by the Office of Population Health and Equity (OPHE) as well as elements conducted by the Underserved/Underrepresented Communities grantees. This work is related to direct resources and services provided to the Orange County community in partnership with community-based organizations serving communities impacted by COVID-19. The Orange County Health Care Agency (OCHCA) Public Health Services has conducted substantial work in the community by providing COVID-19 mitigation and prevention services. An overview of all County COVID-19 efforts can be found at occovid19.ocalthinfo.com/coronavirus-in-oc.

In addition to work conducted by the OCHCA, the **Underserved/Underrepresented Communities Grantees** (Native Hawaiians and Pacific Islanders; Native Americans, American Indians, and Alaska Natives; and Transgender and Gender Nonconforming Community) have conducted a combination of **supportive service, referral, linkage, outreach, and engagement** activities, related to COVID-19 for their respective communities. Below are highlights of these efforts.

The following data is a report of services provided in the Orange County community between July and December 2023.

Supportive Services Provided

- **54 Latinx individuals** were enrolled in case management and patient navigation services. Additionally, **6 Latinx clients** were provided with 23 mental health sessions, and **13 Latinx clients** were provided with name and gender marker change services.
- **258 NHPI individuals** from the Native Hawaiian, Samoan, Tongan, Marshallese and Chamoru communities received support services such as: COVID Testing, Vaccine Assistance, Quarantine/Isolation Education, Translation, Food Assistance, Financial Assistance, Housing Assistance, Mental Health Assistance, Other Assistance (including legal), Disease Prevention or Case Management.
- **33 American Indian/Alaska Native (AI/AN) individuals** have received a combination of services and supports. Additionally, **5 cultural workshops** were held (with 5-25 participants each) and addressed intergenerational trauma, Social Determinants of Health, and the impacts of COVID-19.

Referrals & Linkages Provided

- **24 Latinx individuals** were referred to medical services.
- **105 NHPI individuals** received referrals and linkages to the following services: testing follow-up, test results/notification, test results assistance, quarantine/isolation education, housing assistance, primary care linkages and other supports (including legal services).

Outreach & Engagement Conducted

- **3,065 Latinx community members** were reached through **13 distinct events**. In addition to providing information on programs and services during outreach events, **14,940 condoms** and **10,519 lubricants** were distributed. Additionally, social media posts reached **8,892**.
- **1,020 NHPI individuals** from the Native Hawaiian, Samoan, Tongan, Marshallese and Chamoru communities were contacted via festivals, health fairs and workshops. In addition, **793 individuals** in the community were reached through fliers and social media posts reached **33,275**.
- **555 AI/AN individuals** were reached through **7 health/resource fairs** and other community events. In addition, **89 AI/AN households** were sent information around COVID-19 and vaccine/testing resources, and approximately **2,000 individuals** were reached through email newsletters and online.

STRATEGY 2

Increase/improve data collection and reporting

STRATEGY 3

Build, leverage, and expand infrastructure support

There have been substantial increases in both data and infrastructure supports during 2023. The contracted service providers, Advance OC and IHI have been working to provide data and infrastructure trainings and guidance to the EiOC grantees.

Advance OC Data Support

As a part of the overall EiOC data strategy, Advance OC has been contracted to support the EIOC grantees. They have **hosted 61 meetings for EIOC members and other community partners** from July–December 2023. Advance OC provided presentations on data principles, data training and 1:1 data support to EiOC grantees and partner organizations. These meetings **averaged approximately 16 attendees** from July to December 2023. The smallest meetings had audiences of two people, and the largest meetings had audiences of 92 people.

Audience types for EIOC-related included the EIOC Task Force (9 meetings), OCHCA (2 meetings), Other EIOC Grantees (6 meetings), Other Funders (2 meetings), the Population Collective (14 meetings), the SDOH Implementation Teams (12 meetings), and Other EIOC Partners (16 meetings).

EIOC-related meetings included meetings on Data Collection, Data Quality, and Data Use, and spanned a handful of distinct categories within those types. Data type breakdowns are detailed in the table below. The most common type of data quality meeting was around the topic of health equity data education comprising 27.9% of total EIOC-related meetings.

Data Type	Category	Count (n = 61)	Percentage (%)
Data collection	Data principles	10	16.4
Data collection	Data systems	1	1.6
Data collection	Established plans	10	16.4
Data collection	Workforce support	8	13.1
Data quality	Data coordination	6	9.8
Data quality	Health equity data education	17	27.9
Data quality	Other	2	3.3
Data quality	Plans for data QA and improvement	6	9.8
Data use	Data use	1	1.6

EiOC Grantee Impacts

Underserved/Underrepresented Communities and Social Determinants of Health (SDOH) Grantees have all strengthened their data and infrastructure capacities as a result of their engagement in EiOC. During this reporting period, grantee organizations reported progress in several metrics related to data and infrastructure improvements. **Together, these 15 grantees have made substantial gains during this reporting period across all the data and infrastructure indicators.**

Data Collection & Quality Improvements	# grantees	% grantees
Explored other data sources for our target community	15	100%
Created plans for collecting, analyzing and reporting data	15	100%
Explored the OC Equity Map and OC Social Progress Index for data relevant to our community	14	93%
Shared data to tell a story to our partners	14	93%
Established, enhanced, or maintained data systems	14	93%
Developed Monitoring and/or Evaluation Plan	13	87%
Shared data to inform our internal staff or board	12	80%
Data coordination within or across departments and systems	12	80%
Developed plans for data quality assurance and improvement	12	80%
Developed written key data principles and resources	11	73%
Added workforce support (staff or volunteer) for data collection, analysis, or reporting	11	73%
Implemented health equity data education efforts (trainings/ workshops)	10	67%

Infrastructure Improvements	# grantees	% grantees
Expanded or enhanced workforce because of this funding	15	100%
Improved cross-sector coordination and systems	12	80%
Convened multisector coalitions or advisory groups	12	80%
External training or education has been provided to group	12	80%
Provided training or education within broader community	11	73%
Increased our agency resources/ budget for data infrastructure	9	60%

STRATEGY 4

Mobilize partners and collaborators

Population Health Equity Collectives

As of **December 2023**, there are over **174 unique partners engaged in Collective work**, across **eight (8) different Collectives**. The (6) initial PHCs each finalized a **Health Equity Plan (HEP)**, identifying strategies for how to best serve their communities in the upcoming years. In the **Fall of 2023**, they began to implement strategies that they identified. These Collectives have not only completed their plans but have done so in a way that meaningfully engages their community.

In addition, during this time period, as a result of the needs expressed by the community, additional infrastructure was increased in Orange County through the **creation of two new Collectives**:

- the **South Asian, Middle Eastern and North African (SAMENA) Collective**, which is an additional Population-based Health Collective supporting that community and;
- the **Food Security, Nutrition & Access Collective**, focusing on ensuring systems that support access to healthy, nutritious food.

During this grant period, the Collectives have been convening across-populations to amplify their impact by sharing a common voice for systems and policy change in the three areas of impact they had identified:

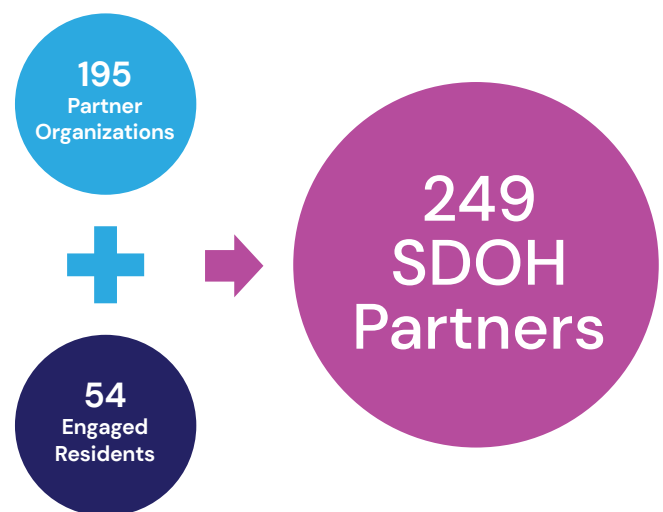
- **Mental Health**
- **Housing**
- **Data Equity**

All Population Health Equity Plans are available online (as well as a 2-page summary of each) and can be found at the website: equityinoc.com. These provide the overviews of the types of systems and policy changes our grantees are pursuing.

SDOH Implementation Teams

SDOH Grantees began their work during Q4 of 2022. At that time, the twelve (12) grantees reported a combined 86 partner organizations and a total of 54 community residents with lived experience engaged in their various Implementation Teams. At the time of their first 6-month reporting in 2023, grantees reported adding an additional 45 grantee partners. During the second half of 2023, an additional 64 grantee partners were added.

These grantees are working on projects that impact the systems and policies surrounding housing, mental health, supportive health services and access, as well as healthcare systems improvements. Some highlights include:

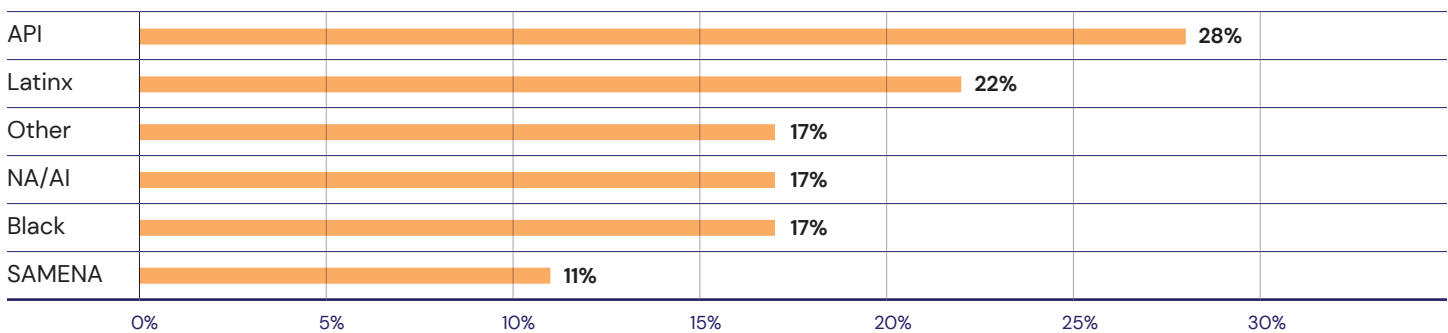


- Implementation of an “Alternative to Suspension” approach for high school students, focusing on counseling rather than suspension.
- Reducing institutional friction within hospital systems to permit increased birthing doula access to their clients.
- Capacity building activities to allow residents to gain knowledge of housing resources and processes to help their communities to better navigate housing issues.
- Research to help craft a standardized tool to screen for social determinants of health needs in healthcare settings.
- Empowering parents and youth to be more involved in making their school sites a more engaging place for them to foster relationships between school staff and community.

Power Building Grantees

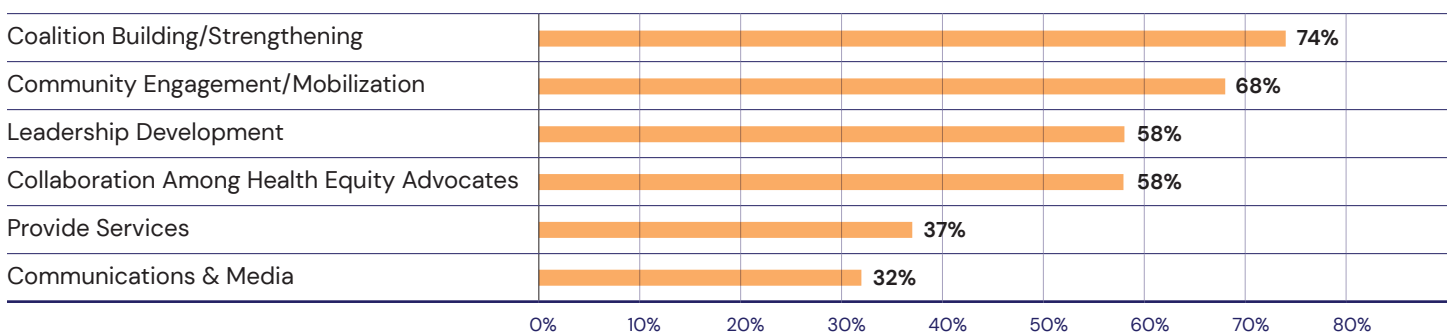
In Year 2 of the Power Building Fund, there are **19 grantees² actively working to build their organizational structures and leadership** to be able to sustain power within the ecosystem of health-equity organizations in Orange County. The table below shows which populations the Y2 Power Building Grantees are currently serving; it is a diverse mix of racial and ethnic populations as well as individuals impacted by persistent poverty and various other vulnerable sub-populations.

Racial/Ethnic Populations Served by Power Building Y2 Grantees



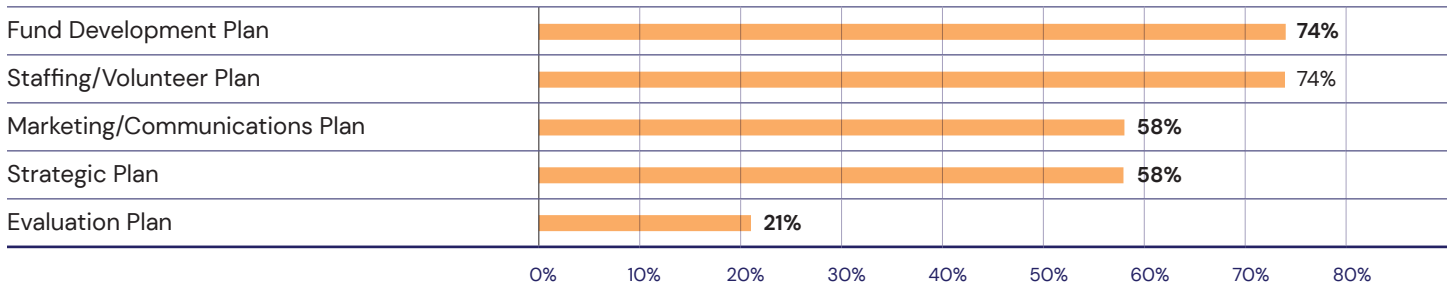
These Power Building Grantees worked diligently in the first six months of their grant to engage in the following types of activities to support health equity.

Y2 Power Building Grantee Primary Activities



They are also creating a variety of actionable plans to support their work long-term; namely, Fund Development and Staffing Plans. In addition, they have been provided with capacity-building 1:1 support and trainings based on their identified needs. In this six-month period they attended trainings on power-mapping as well as fund development strategies.

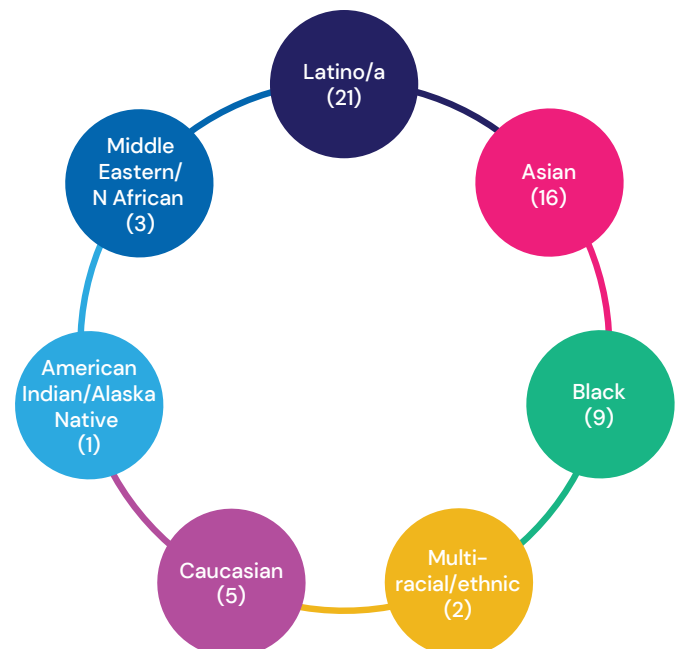
Types of Sustainability Plans Power Building Y2 Grantees are Creating



Community Member Overview

49 diverse community residents are actively engaged in EiOC at large, representing ethnically and socially diverse communities. These residents have lived experiences of poverty, are impacted by various social determinants of health and are members of several sub-populations that face health disparities. These residents identify as members of the following groups: non-English speakers (19), individuals affected by poverty (18), individuals experiencing under-employment (12), older adults (12), individuals from mixed-immigration status households (10), mental health and recovery (9), individuals with disabilities (8), unhoused (6), religious minorities (6), youth (4), LGBTQ+ (4), gender minorities (3), and veterans (3).

These resilient, engaged residents have participated in EiOC meetings, convenings and trainings supported the work of EiOC funded grantee projects and teams. **The engagement by residents more than doubled from what was reported in 2022;** evidence that community power is being built in Orange County as a result of this work.



WHAT ARE WE LEARNING FROM EQUITY IN OC?

Data needs are continually refined and evolving.

Although the initiative has prioritized both data access and utility, it has become clear that there is still a need for moving beyond accountability and reporting, moving toward a learning framework whereby data is used regularly for improvement. Several Population Health Collectives, such as the newly formed SAMENA Collective, house data working groups and are moving toward systemic integration of their data across partners to support service delivery. Both Implementation Teams and Underrepresented Grantees are identifying different ways that data will inform their work and creating tools and systems to track critical information.

Sustainability planning is underway.

The EiOC initiative has had success in the four outcome areas and grantees are beginning to plan for health equity work post-CDC funding. Power Building grantees have created plans and forged new relationships, while the Population Health Collectives have been able to leverage their relationships and capacity to engage in cross-Collective work around housing, data and mental health systems change. The Underrepresented Communities grantees are also continually working to leverage new dollars to support their work moving forward and with the new data and infrastructure capabilities they have built through this funding, they are well-positioned.

1. These numbers are from the Equity in OC website, www.equityinoc.org, based on the organizations and individuals who have filled in a Member Profile document expressing their interest in engaging in EiOC. Individuals can be engaged in EiOC and not be funded partners, and therefore these numbers may differ from those on the pages in the report referencing grantees.

2. Year 2 of the Power Building grantmaking was funded by the ARPA monies received through the Orange County Board of Supervisors.

APPENDIX

Equity in OC Funded Partners

Underserved/ Underrepresented Communities

American Indian and Alaska Native

United American Indian Involvement

Native Hawaiian and Pacific Islander

Pacific Islander Health Partnership

Transgender and Gender Nonconforming

Alianza Translatinx

Population Health Equity Collective Grant

African American/Black

Second Baptist Church

Asian American, Native Hawaiian and Pacific Islander

The Cambodian Family

Individuals with Disabilities

Illumination Institute

Latinx

The Coalition of OC Health Centers

LGBTQ+

Shanti Orange County

Older Adults

Orange County Aging Services
Collaborative

Alzheimer's Orange County

Power Building Fund

Ahri Center

Cancer Kinship

Chispa Education Fund

Hope Community Services

Kid Healthy

Nat'l Action Network OC

Oak Health Foundation

People for Housing

Santa Ana Early Learning Initiative

Viet Rainbow OC

Community Organizations

2-1-1 Orange County

AASCSC Asian American Senior Citizens
Service Center

Abrazar

ACCESS CALIFORNIA SERVICES

Afghan American Muslim Outreach
(AAMO)

AHRI Center, fiscally sponsored by Tides
Center

AIDS Services Foundation OC

Alianza Translatinx

Alzheimer's Association

America On Track

American Lung Association

Arab American Civic Council

Big Brothers Big Sisters Of Orange
County and The Inland Empire Inc

Boys & Girls Club of Laguna Beach

BPSOS Center for Community
Advancement

California Family Institute

Cancer Kinship

Center for Asian Americans in Action

Children's Cause Orange County/One OC

Christ Our Redeemer AME Church (COR)

Community Foundation of Orange/
KidsPLAY

Community Health Initiative
of Orange County

COR Community Development
Corporation

Council on Aging Southern California

CRECE

CREER Comunidad y Familia

Delhi Center

Families Forward

Families Together of Orange County

Family Assistance Ministries

Friendly Center, Inc

Friendship Baptist Church

Friendship Shelter

Girls Inc.

Global Hope 365

Good Hands Foundation

Heritage Museum of Orange County

HERStory, Inc

Higher Ground Youth & Family Services

Hope Community Services

Hope through Housing Foundation

ICNA RELIEF USA PROGRAMS INC

Illumination Institute

Johnson Chapel AME Church

KHERUT

Kidworks Community Development Corp

Korean Community Service, Inc.

La Habra Collaborative

Latino Health Access

LGBTQ Center OC

Lutheran Social Services
of Southern California

Marshallese Youth of Orange County
(MYOC)

Meals on Wheels Orange County

MOMS Orange County

MPNA Green

Multi-Ethnic Collaborative of Community
Agencies (MECCA)

New Hope Presbyterian Church

Oak Health Foundation
 OC United Together, Inc.
 Omid Multicultural Institute for Development
 OC Association for Mental Health
 OC Children Therapeutic Arts Center
 OC Chinese Community Service
 OC Communities Organized for Responsible Development (OCCORD)
 Orange County Congregation Community Organization
 Orange County Family Justice Center Foundation
 Orange County Food Bank – CAPOC
 Orange County Herald Center
 Orange County Human Relations Council
 Orange County Women’s Health Project
 Pacific Islander Health Partnership (PIHP)
 Parenting for Liberation
 Peace and Justice Law Center
 People for Housing OC YIMBY (Yes In My Backyard)
 Saahas for Cause
 SAELI – Fiscally Sponsored by Charitable Ventures
 Second Baptist Church of Santa Ana
 Shanti Orange County
 SoulRapha
 South Asian Network
 South Coast Chinese Cultural Center
 South County Outreach
 Southern California Council of Chinese Schools
 Southland Integrated Services, Inc.
 Special Service for Groups, Inc (SSG)
 Start Well
 Straight Talk Clinic Inc.
 The Cambodian Family
 The Coalition of Orange County Community Health Centers

The Eli Home, Inc
 The Kennedy Commission
 The Malama Collective – Fiscally Sponsored by Charitable Ventures
 The Salvation Army
 Tiyya Foundation
 Viet Rainbow of Orange County (VROC)

Vietnamese Language Access (VietLA)
 Vietnamese–American Cancer Foundation
 Walking Shield, Inc.
 Wellness & Prevention Foundation
 YMCA of Orange County



Report prepared by Ersoylu Consulting on behalf of
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