CHIP Inequity, Discrimination and Bias Group

Week One

8.26.22

What would it look like if Monroe County (did__, had _____, provided _____ etc.)

Easy access to all people for healthcare

blgtn businesses had to required DEI training

homes for those unhoused

Reduction in health disparities as related to race

more person centered

way to identify veterans across multiple types of resources

policy is informed by what is working and is an ongoing iterative process

how we reach the different demographic populations and engage different populations (culturally relevant, socioeconomically relevant)

Thorough DEI education

Policies to support sustainable housing in development plans

equitable policy (down to school districting and things that play into education)

tiny home village

ease process for people to get help by making it more safe

better ways to integrate veteran organizations to sit at the table with blgtn leadership

maternal and child outcomes, mental health (specific categories)

hypertension rates more reflective of population

follow up that isn't an automated phone survey but personal connection – did they get the care they needed?

home share program to match older adults w/space in their home and younger adults

remove bias in healthcare by identifying educating and holding accountable

more effectively telling the story of people with lived experience in any category to better impact change

feeling of belonging

policies are not a barrier and are designed around people most vulnerable

resources are available, and also widely known/accessible

If people filing a discrimination complaint with the Human Rights Commission felt that they would be protected from retaliation.

If Implicit Bias training was mandatory for property management companies that receive HUD/LIHTC funding.

flexible for understanding transportation problems happen and it's not the individual's/patient's fault

More intentional attempts to connect folks traditionally not heard in public meetings to decision makers

affordability in general to increase access (livable wage)

Looking at percentage of any given minority, considering crime rate, death rate, disease rate, home ownership, business ownership, would imagine the percentages are reflected –

no health disparities

Why are we not there now?

too many initiatives to focus on one area

microlending model

efforts take a lot of time! people start projects but may not have the time/energy/financial resources

lack of vision, hope or ideas for how things could be different

biases within organizations and public agencies and nonprofits that keep us from being there

the approach - businesses try to be agile and focused on deliverables making small changes to show momentum and maintain focus. policies appear to be made in ways that are not iterative - moving mountains rather than planting seeds

Marginalized communities do not have a voice and are often placated and cast aside - unless it's a publicity moment.

gatekeeping (people in charge of access not willing to hear the person)

the issues are large and labor intensive to overcome

Lack of knowledge of what he needs of the community are

making a stance labels you (both sides)

policies don't accomplish the goals or help society in the way they are intended/advertised

resource scarcity for service providers as well as individuals

people providing services are vulnerable to the same issues as people they are trying to serve

policies try to move mountains instead of planting seeds

policies being chosen for fiscal reasons vs. longevity of the community

who owns the story, and how to intentionally give greater agency to the person whose story it is; platforming appropriately

funding is going to where there is already power in play (decision makers etc.)

balancing business needs to make money with needs to provide equitable inclusive services

cliff effect - need to maintain benefits but also have sufficient wage/maintain housing etc.

differences between communities need to be addressed. not a one size fits all approach

insufficient folks who are 'like me' doing the things that need to be done

mentorship opportunities to help a person navigate the resources

not sufficient support for folks already doing the work (too many hoops)

communities are not a priority

Grant funding for initiatives that could tackle this issues on a grassroots level (and are already there providing services) require audits, 501c3 status and staff that may have other financial means so they can "afford" to do this work.

high level restrictions like living wage pre-emption rules

need for more empowerment - teaching how

lack of funding for service provision

desegregation of power dynamics to improve the system

media coverage always goes to same perspectives, insufficient coverage from the people working with and living in the communities

policies rooted in fear or scarcity based model rather than a rich interactive equity focused community

over-focus on policing versus underlying causes of crime (reactive vs pro-active)

people think that they do not deserve to receive services

building the system intentionally to flip perspective to support those most vulnerable vs. those with most supports

people aren't willing to do the work for the new positions that would be created. the people who would be good at the job will lose the current benefits/wages/etc. that they have in a more stable position

requirements for assistance programs change/updated - almost a part time job to know how to apply and move through paperwork

need an updated version of poverty to include more individuals who need services

What are the opportunities/ideas on how to get there?

prioritize and avoid overwhelm

find a program (programs) that are working to tweak/publicize

identify policies that are working/need to be tweaked

identify assets in the group, who are the doers, creative folks, movement person, (identify roles)

identify policy makers to hear the voices of the people as we have seen them in the CHA/CHIP/Community voices conversations

building & strengthening partnerships

need a map of services and someone to navigate through the process

(1/2) CAPS commission will be reaching out to different agencies to connect/network/implement programs to partner together ...

(2/2) looking for funding etc. to improve service provision/coordination in the community - creating umbrella program

CAPS will be doing surveys for different programs to improve services - will be working with IU students to help in coordination

CAPS acting as navigators for findhelp.org/helpingbloomingtonmonroe.org to improve coordination