



Dear County Leadership,

I requested an opportunity to share concerns with our Board of County Commissioners during the February 5th BOCC meeting in relation to Agenda Item #12 requesting the Board's guidance for the County's Diversity, Equity, Inclusion and Access Committee. Given that I may not be invited to speak on this topic and that a public meeting may not be the best forum for staff to respectfully express concerns, I'm taking this opportunity to share thoughts, concerns and questions in advance of that decision, as the potential impact on staff and programs is significant.

1. **Diversity, Equity, and Inclusion work is misunderstood.** Diversity, Equity, and Inclusion work has become a flashpoint for disagreement and conflict. A concern of mine is that the current phenomenon distorts the landscape and value of this work. Many of the changes we take for granted every day are the direct result of people who mobilized Equity work to advocate for access. As a result, today we have:
 - ramps and sidewalk curb cuts for people in wheelchairs
 - subtitles & captions (TV & phone) for the visually impaired
 - family restrooms and changing tables in men's restrooms for fathers
 - breast feeding/pumping stations & accommodations for working moms
 - pay equity & transparency for all employees
 - parental leave (time & pay) and job protections for pregnant women

Large scale critical changes have included enshrining the vote for formerly enslaved countrymen, making sure that people can marry the person they love regardless of sex, and empowering women to be able to hold office.

As a woman, I'm so grateful for the advocacy of those engaged in Equity work before me. This work allowed women to vote in 1922, open a bank account in 1960, take out a loan in 1974, or take out a business loan without a male relative co-signer in 1988! The last action increased women owned business by **3,000%** in the US. And yet, to this day, women still earn 20% less than their male colleagues for the same work and violence against women remains at levels that, were it a disease, it would be considered a global epidemic.

Just to be clear, *none of these gains would have been possible without focused activity*. Simply saying we must improve access for everyone was *not* enough. Without focused, targeted work to advocate, many of us would still be living in conditions that robbed us of our freedom and self-sufficiency.

I think it's important to also say what Diversity, Equity, and Inclusion work **is not**.

- Hiring an under-qualified person for a job just because they're a person of color – this is illegal.
- Hiring based on race just to meet diversity goals – this is also illegal.

- Anti white male – there is no evidence that white men have suffered socio-economic consequences as a result of Equity efforts to level the playing field. In fact, in the US:
 - White men hold 62% of all elected office despite being 30% of the US population.
 - With the exception of Asian men, white men outearn all other groups by between 15% and 25%.
 - As of 2024 CEO positions were held overwhelmingly by white males, with only 9.7% female held and 13.5% held by racially or ethnically diverse individuals – these small numbers represent a doubling over the past decade but are still far from equitable, indicating there is still work to do.

Question: How can we partner with our leadership to elevate plans to best serve our community, ensure access and address disparities where they are factually demonstrated without getting caught up in tropes and myths about Equity work?

2. Removing active County commitment to Diversity, Equity, Inclusion and Access work is premature.

Whether one supports the Federal orders or not, there will likely be considerable legal challenges brought prior to a final roll out at the state and local government level. Should the executive order be modified or mitigated, a decision to walk away from this work now would potentially have to be rolled back. That seems like a reactive and unnecessary step, not to mention impractical in the long run. In addition, it leaves those departments still legally tasked with and committed to this work without the full support of the County. This matters.

Question: Given that the current cost of the County's Equity work is low and the cost of stepping away from it is high, why is it necessary to make this decision now versus taking a measured approach and waiting for the dust to settle?

3. Stepping away from current County Equity efforts undermines staff and community confidence that we take their concerns seriously and are committed to ensuring that all have access to services and opportunities. The County's own internal auditor just completed deep dives on wage equity and language access. Both are public documents that reveal that while we are doing many things right, we:

- Continue to have disparities in pay between male and female employees
- Lose women of color from the workforce at disproportionate rates
- Have significant gaps in our ability to ensure that people who speak English as a second language can access critical information in their language – as the child and now the partner of persons whose first language is not English, I know how long it takes to reach the proficiency needed to navigate healthcare or taxes or legal processes. This need is real.

Question: What will County leadership do to ensure these issues are addressed appropriately in the absence of a County Committee that would have been tasked to assist in this work?

4. Departments and staff will remain committed to Equity work because they are confronted daily with the direct consequences of health disparities in our community. For example:

- Non-white children in our county are almost twice as likely to live in poverty.
- Lower income, rural members of our community have significantly higher rates of depression and chronic health conditions and lower rates of access to health care and transportation.

- In part due to the current polarization, young people of color or from the queer community are targeted for harassment and bullying at higher rates than their white peers and have disproportionately high rates of expulsion from schools and death by suicide.
- Many staff across departments are themselves members of communities encountering some of these difficulties.
- Finally, many departments will retain requirements to address inequities.

Question: In a time of decreasing revenues and increasing need, how does the County propose to make concrete, meaningful progress on some of these items without a committed workgroup to carry out the activities involved in accomplishing concrete goals?

5. Committees are work groups. They are a critical, cost-effective way to get work done. In Health Services, we've achieved significant concrete gains through committee work. Our commitment is that committees are active, chartered work groups that *do real things* that matter to staff and our clients. They have goals, objectives and deliverables to which they are accountable. As such, they have served the department well and I believe this was also the intent for the County Equity group.

Our Diversity, Equity and Inclusion Committee is directly responsible for:

- Improvements in language access for non-English speakers – 100% of client facing documents translated into people's native language; key health information communicated to Spanish speaking community simultaneously
- Developing expertise in creating plain language materials and ways for hearing, mobility and visually impaired individuals to improve access to services
- Helping to address internal concerns of staff identified in anonymous engagement surveys in order to improve staff retention.
- Meeting our contract requirements.

Question: If a DEIA Committee is not the way the County will tackle some of the very real issues identified, what is the actual plan to achieve the goals the Committee has laid out and who will be tasked with doing the work required?

I respectfully submit these thoughts and ask that these concerns be seriously considered and taken into account in the discussion/decision. I also ask that the questions posed here are answered in some clear way for staff. If the Board decision is to step away from supporting a Committee to do this work, it will be helpful for Departments to understand what is the plan for assigning that work which has already been identified elsewhere. Last, I hope that the staff who spent time putting together a Committee charter and work plan receive acknowledgement and recognition of their good work regardless of what is decided.

Best,



Janice Garceau, Director
Deschutes County Health Services