



## WHATCOM COUNTY COUNCIL

### SPECIAL COUNCIL MEETING AS THE HEALTH BOARD

10:45 a.m. Tuesday, October 6, 2020  
Virtual Meeting

## A G E N D A

<u>Meeting Topics</u>	<u>Pages</u>	<u>Time</u>
1. Public Session	no ppr	10:45-11:00
2. Ordinance: Creating a Child and Family Task Force	1 - 5	11:00-11:20
3. Resolution: Racism as a Public Health Crisis	6 - 20	11:20-11:50
4. Public Health Advisory Board (PHAB) Update	no ppr	11:50-11:55
5. Director/Health Officer Report	no ppr	11:55-Noon



## Health Board Discussion Form

October 6, 2020

**AGENDA ITEM #2:** Ordinance Creating Whatcom County Child and Family Well-being Task Force

**PRESENTER:** Sterling Chick, Vice Chair Public Health Advisory Board

**BOARD ACTION:**  Action Item      Discussion      FYI - Only

### SUMMARY

In April 2019, the County Health Board adopted a resolution “affirming commitment to Whatcom County’s young children and families”. In February 2020, the County Health Board officially adopted a child and family action plan. Part of the action plan called for an ordinance creating a “county task force to ensure diverse community partners are informed, coordinated with and included in the implementation of the of the action plan; make additional recommendations; and regularly report the progress”. The Public Health Advisory Board working with Health Department staff and community partners have drafted the attached ordinance for consideration.

The ordinance outlines the initial tasks of the Task Force as follows:

- A. Develop processes and procedures to ensure that all the work of the Task Force is embedded in the principles of equity, family engagement, and results-based approaches
- B. Develop recommendations for County infrastructure to promote child and family wellbeing
- C. Develop recommendations for adoption of “children and families first” approach for County policy and funding decisions across all departments
- D. Develop recommendations to promote shared government and community accountability for child and family results
- E. Develop recommendations for coordination and enhancement of existing county initiatives focused on issues impacting young children and their families
- F. Develop recommendations for new, or enhancement of existing funding streams to support child and family programs and services that align with desired results.

Tasks will be accomplished in three phases with reports due June 1, 2021; March 1, 2022; and October 1, 2022.

The Task Force will be comprised of 15 designated members from a variety of entities, including representatives from existing collaborative groups, school systems, local government, and tribes. The County Council will appoint 10-15 members, focused on the following areas: health care; non-profits; business, philanthropy, and community members, especially members from under-represented communities. The Task Force will report to the County Council and the County Executive.

### BOARD ROLE / ACTION REQUESTED

- Review ordinance and recommend modifications, if any
- Recommend advancement to County Council for adoption

### ATTACHMENT(S)

- Draft Ordinance



ORDINANCE ESTABLISHING WHATCOM COUNTY CODE \_\_\_\_\_,  
AND CREATING A WHATCOM COUNTY  
CHILD AND FAMILY WELL-BEING TASK FORCE

WHEREAS, in April 2019, the County Health Board adopted Resolution 2019-020 affirming commitment to Whatcom County's Young Children and Families; and

WHEREAS, in February 2020, the County Health Board officially adopted a child and family action plan entitled: "Whatcom Working Towards Well-being: An Action Plan for County Government" (Action Plan); and

WHEREAS, the Action Plan calls for the development of an ordinance to create a county task force, or other official county committee, with high level staffing and resources to ensure that diverse community partners are informed, coordinated and included in the implementation of the action plan, make additional recommendations, and regularly report progress to County Council and County Executive; and

WHEREAS, the Action Plan recommends using the County Incarceration Prevention and Reduction Task Force as a model, including representatives from government, community organizations, and families; and

WHEREAS, the Action Plan also specifies that the task force will focus on tracking and furthering progress of community efforts to achieve the desired results for children and families;

NOW, THEREFORE, BE IT ORDAINED by the Whatcom County Council that Whatcom County Code Chapter \_\_\_\_\_ is hereby established, creating a Whatcom County Child and Family Well-being Task Force as outlined in Exhibit A to this ordinance.

BE IT FURTHER ORDAINED that the initial tasks to be accomplished by the Task Force are as follows:

- A. Develop processes and procedures to ensure that all work of the Task Force is embedded in principles of:**
  - a. Equity, with specific attention to racial equity
  - b. Family engagement
  - c. Results-based approaches
  
- B. Develop recommendations for County infrastructure to promote child and family wellbeing**
  - a. Clarify scope and purpose of infrastructure
  - b. Identify and evaluate infrastructure models such as a County Office of Child and Family Well-being
  - c. Recommend funding approaches to build and sustain infrastructure
  - d. Recommend policies and practices that increase accountability to parents, caregivers, and stakeholders from under-represented communities in county committees and workgroups.
  - e. Propose strategies to adopt trauma-informed practices across County government, including staff training and development
  
- C. Develop recommendations for adoption of a "children and families first" approach for County policy and funding decisions across all departments**
  - a. Recommend policy and program review process
  - b. Recommend ways to fully integrate parents, caregivers, and stakeholders from underrepresented communities in county committees and workgroups, including compensation for time

- c. Recommend processes to ensure consideration and prioritization of child and family needs in county funding decisions

**D. Develop recommendations to promote shared governmental and community accountability for child and family results**

- a. Review results approaches in other communities and recommend strategies for County adoption
- b. Identify mechanisms for government and community stakeholders to agree on and work together toward desired results, including identification of key strategies and actions
- c. Identify mechanisms to track and share progress on key indicators aligned with desired results

**E. Develop recommendations for coordination and enhancement of existing county initiatives focused on issues impacting young children and their families**

- a. Review existing County initiatives and groups focused on issues such as racial equity, housing, behavioral health, economic development, and incarceration prevention, and recommend ways to incorporate focus on young children and their families into these initiatives and groups.
- b. Review existing community initiatives addressing high priority concerns such as child/family homelessness, lack of access to affordable child care and early learning opportunities, and need for child/family behavioral health supports and identify opportunities for additional County support and coordination.

**F. Develop recommendations for new, or enhancement of existing, funding streams to support child and family programs and services that are aligned with desired results**

- a. Recommend scope and process of fiscal analysis
- b. Review and recommend options for new or enhanced funding streams

BE IT FURTHER ORDAINED that the initial work of the Task Force for the above tasks shall be accomplished and reported to the County Council and County Executive in the following phases:

PHASE I – Establish Task Force processes and procedures. Clarify goals and metrics. Establish processes for shared accountability for results. Evaluate and recommend infrastructure model for County adoption. Propose scope and approach for County fiscal analysis to identify existing and potential funding streams for child and family programs. Review and identify existing child and family serving collaborative resources and initiatives, and infrastructure. Recommend strategies to fill the gaps identified. Deliver the initial Phase I report by June 1, 2021

PHASE II -- Develop and establish methods to increase and stabilize funding streams for child and family programs, services, and infrastructure. Deliver the initial Phase II report as completed no later than March 2022

PHASE III – Develop specific operational plans and budgets leading to implementation of appropriate programs, services and infrastructure. Include details on assignment of responsibilities, and projected outcomes anticipated. Deliver the initial Phase III report with sufficient details to proceed with programs and infrastructure no later than October 1, 2022.

## EXHIBIT A

Chapter 2.\_\_\_\_

### CHILD AND FAMILY WELL-BEING TASK FORCE

#### Sections:

- 2.. Established
- 2.. Purpose
- 2.. Function
- 2.. Permanent Members
- 2.. Additional Appointed Members
- 2.. Term of Office
- 2.. Organization – Meetings
- 2.. Staff and Funding Support
- 2.. Reporting
- 2.. Established

There is hereby established a Whatcom County Child and Family Well-being Task Force.

#### 2.. Purpose

The purpose of the Whatcom County Child and Family Well-being Task Force is to continually review Whatcom governmental impact on children and families and make specific recommendations for improvements for all departments

#### 2.. Function

The Task Force will consider input from diverse families throughout Whatcom County and evidence-based and promising practices and report on and make recommendations to County Council, Executive, and other appropriate officials regarding implementation of recommendations in the Whatcom Working Toward Well-being: An Action Plan for County Government (Action Plan) as adopted on February 4, 2020.

#### 2.. Permanent

Members of the Child and Family Well-being Task Force shall include the following 15 designated officials or their representative:

- A. Three representatives from families selected by Generations Forward Family Council
- B. One representative from Whatcom Early Learning Alliance
- C. One representative from Whatcom Taking Action for Children/Youth with Special Health Needs
- D. One representative from School Superintendents (selected by Superintendents)
- E. One representative from DCYF (Child Welfare)-local office
- F. One representative from the Whatcom County Health Department (selected by Health Director)
- G. One representative from Public Health Advisory Board (selected by PHAB)
- H. One member of the Whatcom County Council/Health Board
- I. Whatcom County Executive or alternate
- J. One representative from City of Bellingham
- K. One representative from small cities (selected by small cities)
- L. One representative from Lummi Nation (selected by Lummi Nation)

M. One representative from Nooksack Tribe (selected by Nooksack Tribe)

## **2.. Additional Appointed Members**

In addition to officials designated above, the Child and Family Well-being Task Force shall include the following 10-15 members appointed by the Whatcom County Council:

- Community Members from Under-Represented Communities: Hispanic/Latino, American Indian/Alaska Native, Black/African American, Immigrant, Rural (up to 5 members)
- Community Action
- Non-Profit Housing and Social Services
- Child Care/Early Learning
- Higher Education
- Health Care Agency (serving young children and families)
- Behavioral Health Agency (serving young children and families)
- Philanthropy
- Private business or corporation

## **2.. Terms of office for appointed members.**

The term of office for appointed members shall be two years; members may apply for membership renewal only once. Appointment of members shall comply with Chapter 2.03 WCC.

## **2.. Organization — Meetings.**

- A. Meetings of the task force shall be open and accessible to the public and shall be subject to the Open Public Meetings Act.
- B. At every meeting, the task force will schedule an open session to take public comment.
- C. Written records of meetings, resolutions, research, findings and recommendations shall be kept and such records shall be submitted to county staff and shall be made public, including posting on the county website.
- D. The task force shall adopt its own rules and procedures for the conduct of business.
- E. The task force shall elect co-chairs (including at least one representing family perspective) from among its members who shall preside at its meetings.
- F. The task force shall determine its meeting schedule and agenda, but shall meet at least quarterly.
- G. The task force may form and appoint ad hoc committees to work on specific issues, so long as at least two committee members are also members of each ad hoc committee.

## **2.. Staff and Funding Support**

The Task Force will have full support from the Council, the County Executive's Office, Health Department staff, and locally delivered paid consultant assistance to conduct and complete its tasks in an efficient and effective manner.

## **2.. Reporting**

As outlined in the Phases of the Ordinance and at least biannually thereafter, no later than March 30 and September 30 of each year, the Task Force will provide a report and recommendations to the County Council and County Executive on progress.



## Health Board Discussion Form

October 6, 2020

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**AGENDA ITEM #3:** Racism as a Public Health Crisis  
**PRESENTERS:** Steve Bennett, PhD, Public Health Advisory Board member  
**BOARD ACTION:**  Action Item  Discussion  FYI - Only

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### **SIGNIFICANT POINTS OR EXECUTIVE SUMMARY**

Recognizing the historical and ongoing impacts of racism on health and well-being, cities and counties across the nation and in Washington State are declaring racism as a public health crisis, and are committing to take steps toward racial equity.

On September 3, 2020, the Public Health Advisory Board voted to advance a resolution declaring racism as a public health crisis to the County Health Board for adoption. On September 22, 2020, the PHAB met again to review some requested edits and consider community feedback. After discussion and some additional edits, PHAB voted to advance the revised version to the Health Board.

### **BOARD ROLE / ACTION REQUESTED**

- Review and adopt resolution declaring Racism as a Public Health Crisis
- Support County membership in the *Government Alliance on Race and Equity (GARE)*, a national network of governments working to achieve racial equity
- Approve allocation of resources within County budget process to address race equity issues, including staff training and outreach and engagement with communities of color

### **ATTACHMENTS**

- Slide Presentation: Addressing Racism as a Public Health Crisis
- Draft Resolution of the Whatcom County Health Board Affirming That Racism is a Public Health Crisis



Whatcom County  
**HEALTH**  
Department

# Addressing Racism as a Public Health Crisis

Steve Bennett, PhD, WWU  
Public Health Advisory Board (PHAB)

October 6, 2020



Whatcom County  
**HEALTH**  
Department



## Definitions



**Racism:** The marginalization and/or oppression of people of color based on a socially constructed racial hierarchy that privileges white people.

**Systemic racism:** A combination of systems, institutions and factors that advantage white people and for people of color, cause widespread harm and disadvantages in access and opportunity.

**Public Health:** The science of protecting and improving health of people and their communities.

**Crisis:** A situation that has reached a critical phase.





*Image: Community Conversation on Resilience and Equity, Whatcom Family and Community Network, March 2016*

Across the state and nation, communities are coming together to address the urgent and ongoing impacts of racism on the public's health...

## In Whatcom County...



The County Health Board has laid the foundation for taking action to address the sources and impacts of racism locally

- 2013 • Call for Compassionate Community Approach to Public Health Services
- 2015 • Committing Whatcom County to Adopt a "Healthy Planning" Approach
- 2018 • Health Protection for Immigrant Families
- 2019 • Affirming Commitment to Whatcom County's Young Children and Their Families
- 2019 • Reducing Incarceration of Young Adults
- 2020 • Child and Family Action Plan

## 2013-038- Compassionate Community Approach



- “Compelling research... points out the **negative impacts of adverse childhood experiences (“ACEs”)** and **early trauma** on population health”
- “The impact that **early trauma** has on children, families and the general population is on par with, or greater than, biological or infectious disease”
- “The Health Board will seek opportunities to **increase awareness** and promote the concept of a **“compassionate”** or **“trauma sensitive”** approach”

## 2015-038- Healthy Planning



- “Health is influenced by the **interaction of many factors**, and not simply genetics, individual behavior or access to medical care”
- “Health is also determined by **social and economic factors** and opportunities”
- “Data show that people...**who experience racial or ethnic discrimination** or other social stresses are more likely to report poor health status and have lower life expectancy”

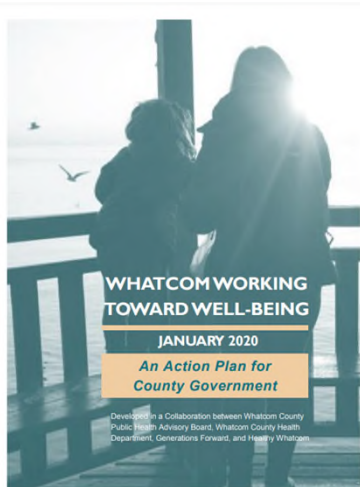
# 2019-020-Young Children & Their Families



Photo from Generations Forward Future Search Conference: *Envisioning a Future where All Whatcom County Children Thrive*, Oct 2017

- “Indigenous children *and* children of color...are more likely to experience adversity due to **historical and persistent patterns** of discrimination, oppression and lack of equitable opportunities”
- “Disproportionate levels of **adversity** contribute to **health and social disparities and inequities**”

# 2020 Child & Family Action Plan



### Recommended Action

“Commit resources to facilitate the adoption of equity and trauma-informed policies and practices across county government”

- *Support countywide training...*
- *Conduct policy reviews...and explore changes to existing policies to support equity broadly and race equity specifically*
- *Become a member of Government Alliance on Race and Equity (GARE)*

<http://whatcomcounty.us/DocumentCenter/View/49297/Child-and-Family-Action-Plan---January-2020> (Page 19)



## Why address race and racism as a public health issue?

Whatcom County  
**HEALTH**  
Department

### Racism impacts individual health & leads to health disparities



#### Exposure

Ethnicity-based maltreatment & racism

#### Stress Response

Acute & enduring changes in cognition, affect, behavior, and physiology

#### Health Impacts

Stress-associated behaviors & health conditions

## Racism impacts the Social Determinants of Health



### Healthy People 2030

Racial disparities in all FIVE areas of SDOH



## Racism impacts children and families

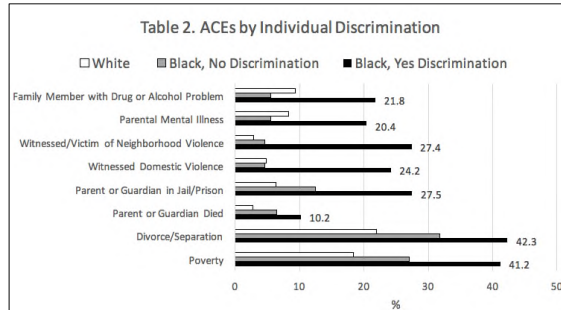


- **Black women 3 X as likely to die in childbirth**
- **Black newborns more than 2X as likely to die as White babies**

# Racism associated with childhood adversity

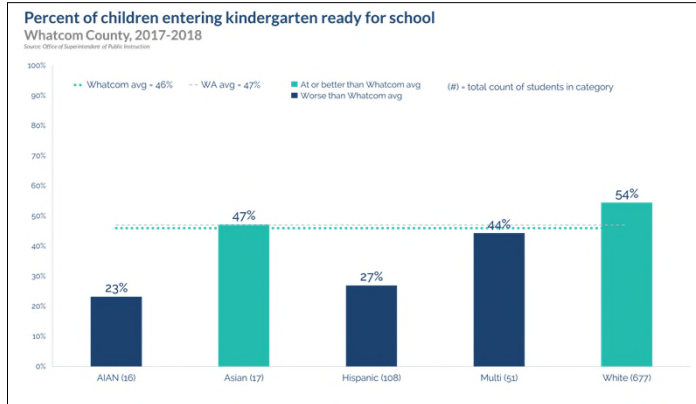


Children in families experiencing racial discrimination are more likely to have other Adverse Childhood Experiences” (ACEs)



<https://jordaninstituteoffamilies.org/2020/racism-is-an-adverse-childhood-experience-ace/>

# Racism impacts child development



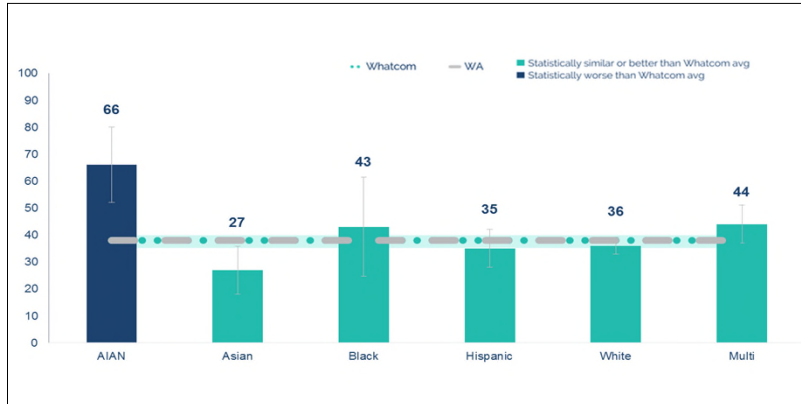
**Data Notes**  
Data includes Bellingham School District SD, Blaine SD, Ferndale SD, Lummi Tribal Agency, Lynden SD, Meridian SD, Mount Baker SD, and Nooksack Valley SD.

# Racism impacts mental health



## Percent of 10<sup>th</sup> graders reporting feeling depression Whatcom County, 2018

Source: Healthy Youth Survey, Washington State Department of Health



### Data Notes

Healthy Youth Survey Question: During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?

# Racism impacts education



## On-time graduation rates

### Whatcom County, 2017-2018

Percent of Whatcom County high school seniors who graduate high school within four years

Source: Office of Superintendent of Public Instruction, State of Washington



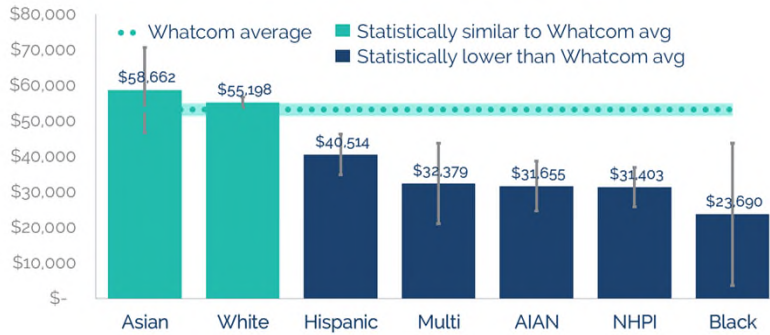
# Racism impacts economic stability



## Median Household Income

2010-2015, 5-year estimates

Source: American Community Survey, US Census Bureau



# Racism associated with COVID-19



## Percentage of Confirmed Cases by Race & Ethnicity

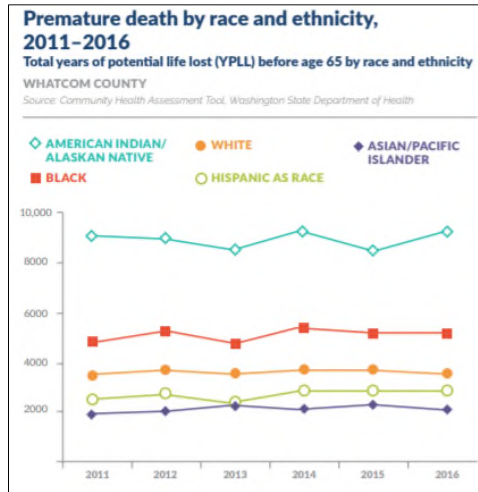
Data updated through 09/28/2020

Race/Ethnicity Known	% of Cases	% of Total Whatcom Population
White NH	56.6 %	78.7 %
Hispanic as Race	30.3 %	9.5 %
AIAN NH	5.0 %	2.5 %
Asian NH	2.4 %	4.3 %
Multiracial NH	2.3 %	3.6 %
Other Race NH	2.1 %	0.0 %
Black NH	0.9 %	1.0 %
NHOPI NH	Suppressed	0.3 %

Approximately 17% of cases have unknown race/ethnicity.  
 If counts are between 1-9, data are suppressed to comply with Washington State Department of Health small numbers guidelines.  
 NH: Non-Hispanic AIAN: American Indian or Alaska Native NHOPI: Native Hawaiian or Other Pacific Islander Other: Respondent selected "Other Race"



# Racism associated with premature death



# Racism is a public health crisis



**Time to act is now.**

**Therefore, be it resolved...**

- This Health Board...**
- Declares that racism is a public health crisis
  - Commits to making Whatcom County a welcoming, safe community for everyone
  - Endorses policies and practices for employee conduct and equitable treatment of all people
  - Commits to actively participate in dismantling of systemic racism and impacts
  - Will evaluate and support policies consistent with principles of equity
  - Will facilitate keeping data and monitoring progress



## Health Board supports these actions...

- Implement annual training for elected officials and staff
- Assess and revise department policies and procedures
- Ensure hiring practices provide greater opportunities for people of color to be employed
- Ensure diversity of race within County commissions
- Support community efforts to amplify issues of racism and engage with communities of color
- Build alliances with other organizations including other local governments through entities such as Government Alliance on Race and Equity (GARE)



**Thank you for your  
commitment to the health  
and well-being of all people in  
Whatcom County**

PROPOSED BY: PUBLIC HEALTH ADVISORY BOARD

INTRODUCED: \_\_\_\_\_

RESOLUTION NO. \_\_\_\_\_

AFFIRMING THAT RACISM IS A PUBLIC HEALTH CRISIS

WHEREAS, racism is rooted in the foundation of America as Indigenous peoples were forcefully removed from ancestral homelands, familial kinship systems, natural resources, cultural ways of life, and language resulting in generational hardships including social, economic, and political disadvantages, as well as physical, psychological, and spiritual trauma;

WHEREAS, although the public health community is aware that Native Americans and Alaska Natives have a higher burden of illness, injury, and premature mortality than non-Hispanic Whites, the health care needs of this population are often excluded from policy discussions and these populations are routinely excluded from data sets expressed by race causing a form of ethnic erasure;

WHEREAS, beginning with slavery in 1619, most of the Black experience in America has been endured under slavery and Jim Crow which allowed preferential opportunities for White Americans while subjecting people of color to hardships, disadvantages, and violence in every area of life and creating a legacy of inherited trauma across generations; and

WHEREAS, throughout the history of the United States systemic racism has manifested by acts of discrimination and oppression directed towards Black, Indigenous and people of color (BIPOC) and their communities resulting in fear, anxiety, trauma, terror, and long-term physical and mental health impairments, as well as causing economic oppression for the targets of racism, their communities, and subsequent generations; and

WHEREAS, in response to the killing of George Floyd and the death of countless others, previously and subsequently, under similar or other such circumstances, people across the country have risen to protest against historic acts of systemic racism and the resulting historic economic, environmental, and social injustices occurring towards people of various races and ethnicities, which continues to disproportionately affect the Black community; and

WHEREAS, systemic racism has resulted in race as a social determinant of health, with persistent racial disparities in all aspects of health including housing, education, healthcare, employment, worker protections, criminal justice, climate impacts, food access, and technology, and Center for Health Progress has reported that data shows race, income, and ZIP Code have a bigger impact on health than behavior or medical care; and

WHEREAS, BIPOC individuals and communities are disproportionately suffering in part due to long standing, unaddressed health disparities as well as systemic racism and other socioeconomic inequities, and these persistent disparities in health outcomes are not due to genetic or biological differences between the races, but to the entrenched racism in American society; and

WHEREAS, the current COVID-19 pandemic has exacerbated the racial disparities within our nation's BIPOC communities ranging from health care access to risk exposure, and there is a clear correlation

between maps showing rates of COVID-19 hospitalizations and neighborhoods with high social vulnerability; and

WHEREAS, lack of culturally and linguistically competent healthcare has resulted in less utilization of services and poorer health outcomes among BIPOC individuals; and National Academy of Medicine (NAM) found “racial and ethnic minorities receive lower-quality health care than white people—even when insurance status, income, age, and severity of conditions are comparable” and evidence from social psychological and health disparities research suggests that clinician–patient racial/ethnic concordance may improve minority patient health outcomes.

WHEREAS Black women are [at least three times](#) as likely to die in childbirth as White mothers, and Black newborns are [more than twice](#) as likely to die as White newborns, a disparity that is wider today than it was in 1850 when the majority of Black Americans were enslaved, and one that is not related to the economic or educational status of the mother; and

WHEREAS, Black Americans also have higher levels of low birth weights, and Black children are more likely to endure asthma and have more severe symptoms than White children; and

WHEREAS, disparities in health outcomes and determinants of health by race are clearly evident in Whatcom County where life expectancy for American Indian/Alaska Native populations is 69 years compared with 81 years for White population; where 2 out of 3 American Indian/Alaska Native youth experience depression compared with 1 out of 3 White youth; where median income is significantly lower for American Indian/Alaska Native, Hispanic, Black, and Multi-Racial populations than for White and Asian populations; where children who are American Indian/Alaska Native or Hispanic are half as likely to enter kindergarten with skills needed to succeed in school and are also significantly less likely to graduate from high school on time; and

WHEREAS, more than 100 studies have linked racism to negative health outcomes, including research supporting that the cumulative experience of racism throughout one's life can induce chronic stress making BIPOC communities particularly susceptible to chronic health conditions like kidney, cardiovascular, and lung disease that lead to otherwise preventable deaths.

WHEREAS, the [American Public Health Association](#), National Association of County and City Health Officials, and the American Academy of Pediatrics have declared racism as a public health crisis. The disparities caused by racism that we have outlined in this resolution represent a public health crisis which affects us all.

NOW, THEREFORE BE IT RESOLVED this Health Board will advocate that Whatcom County government implement, with intent and fidelity, policies and practices that reflect a conscious effort to ensure racial equity, equity of access and service and further to ensure the equitable treatment of all people, regardless of race or ethnicity.

Section 1. This Health Board declares that racism is a public health crisis.

Section 2. This Health Board is committed to making Whatcom County a welcoming, inclusive, and safe community for everyone. While we promote free thought and speech, we condemn racism and brutality, hate speech, bigotry, violence and prejudice in any form.

Section 3. This Health Board endorses the continued implementation and use of policies and practices for employee conduct and equitable treatment of all people and honors, by approval of this Resolution, the common humanity of all people, regardless of race or ethnicity.

Section 4. This Health Board commits to actively participating in the dismantling of systemic racism and the impacts of racism in Whatcom County by:

- A. Implementing annual training on the following topics for all elected officials, County staff and members of boards, commissions and committees: implicit bias, trauma informed practices, and review of health disparities.
- B. Assessing and revising County department policies, procedures, and ordinances to ensure racial equity and transparency are core elements.
- C. Ensuring that hiring practices provide greater opportunities for people of color to be employed to further diversify our workforce.
- D. Ensuring diversity of race within the county commissions.
- E. Supporting community efforts to amplify issues of racism and engaging actively and authentically with communities of color wherever they live.
- F. Building and strengthening alliances with other organizations that are confronting racism, and encouraging other agencies to recognize racism as a crisis, including considering County membership in the Government Alliance on Race and Equity (GARE), which is a national network of local government agencies working to achieve racial equity and advance opportunities for all. Additionally, involve community representation and input in matters of historic and continued racial injustice.

Section 5. This Health Board will continue to, through its goodwill, dialogue, and decision-making efforts and powers, evaluate and support policies that are consistent with the principles of equity of access, services, and treatment of all people regardless of race, color, or ethnicity and ensure that such policies do not perpetuate or exacerbate racial disparities within the county.

Section 6. This Health Board shall facilitate keeping data and monitoring progress on the goals set up on the resolution.

APPROVED this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

ATTEST:

OF THE WHATCOM COUNTY HEALTH BOARD  
WHATCOM COUNTY, WASHINGTON

\_\_\_\_\_  
Dana Brown-Davis, Clerk of the Council

\_\_\_\_\_  
Barry Buchanan, Council Chair

APPROVED AS TO FORM:

/s/ Royce Buckingham  
Civil Deputy Prosecutor