| Date Machanism for | | | | | | | |
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| State | Name of Task Force | Date Established | Mechanism for Establishment | Structure | Goals | Actions Taken | Membership |
| СО | <u>COVID-19 Health</u> <u>Equity Response</u> <u>Team</u> | 4/17/2020 | Administrative | Office of Health Equity is lead agency; weekly meetings; consensus-based decision-making | Ensure racial and ethnicity COVID-19 data are accessible, transparent and used in decision-making. | Developed equity testing guidance which has been adopted by a number of local public health agencies (LPHAs) | Roster |
| | | | | | Determine proactive measures to prevent the spread of COVID-19 in specific communities. | Provided support to LPHAs creating equity framework for contact tracing | |
| | | | | | Work with state teams coordinating resources and logistics to help curb health disparities related to COVID-19. | Created communication toolkit | |
| | | | | | Increase access to testing and care services. | Developed ERT liaison within the state's Joint Information Center | |
| | | | | | Share time-sensitive information about how Colorado communities are experiencing particular challenges related to the COVID-19 response. | Developed and disseminated public survey on what areas should be the ERT focus | |
| | | | | | Develop policy recommendations to better assist and prepare communities of color during the current COVID-19 pandemic as well as future state emergencies. | released) | |
| LA | <u>COVID-19 Health</u> Equity Task Force | 4/10/2020 | Administrative | Housed within Governor's Office; funded through the Irene W & C.B. Pennington Family Foundation, the Baton Rouge Area | Ensure testing availability and ease of access for all communities. | Created Dashboard on Health Equity | <u>Membershi</u> |
| | | | | Foundation and the Huey and Angelina Wilson Foundation and \$500,000 from Governor's COVID-19 Response Fund | Provide the medical community with best practices and protocols for treating communities with underlying medical conditions and health disparities. | | |
| | | | | | Create Dashboard on Health Equity. | | |
| | | | | | Analyze the determinants of health equity that influences racial health disparities. | | |
| | | | | | Analyze evidenced-based interventions that positively impact health equity and address disparities. | | |
| | | | | | Examine the population dynamics (political, economic, social, technological, and legal) that are indicative of health equity and disparities to formulate a statewide dashboard. | | |
| | | | | | Assess the status of the state's response as it affects vulnerable populations and the impact of COVID-19. Provide health awareness educational | | |
| | | | | | media campaigns. | | |
| | | | | | Conduct assessments of the status of the state's response as it affects vulnerable populations. | | |
| MA | Emergency Task Force on Coronavirus and Equity | 3/20/2020 | Non-governmental | Convened by Massachusetts Public Health Association | Eviction and foreclosure moratorium | Developed an eviction moratorium signed into law | Members |
| | | | | | Encourage emergency paid sick time | Conducted outreach to immigrant communities | |
| | | | | | Provide quarantine for people experiencing homelessness | Submitted testimony and advocacy around other issues to state legislature | |
| | | | | | Create access to treatment and testing for immigrants | ſ | |
| | | | | | Collect and report equity data | | |
| | | | | | Develop a public health plan for prisons and jails | | |
| | | | | | Amend state's crisis standards of care to include equity | | |
| MI | <u>Coronavirus Task</u> <u>Force on Racial</u> <u>Disparities</u> | 4/20/2020 | 20/2020 <u>Executive Order</u> | Chaired by Lieutenant Governor Garlin Gilchrist and includes Department of Health and Human Services Director, Chief Medical Executive and other members appointed by Governor | Increase transparency in reporting data regarding the racial and ethnic impact of COVID-19. | Sent letters to state's major medical institutions asking them to consider if bias existed in their testing and treatment decisions | Members |
| | | | | | Remove barriers to accessing physical and mental health care. | Called for public input from community stakeholders across state. | |
| | | | | | Reduce the impact of medical bias in testing and treatment. | Ensured testing equity by developing combination of drive-thru and walk-up testing sites. | |
| | | | | | Mitigate environmental and infrastructure factors contributing to increased exposure during pandemics resulting in mortality. | Concentrated mobile testing sites in high- | |
| | | | | | Develop and improve systems for supporting long-term economic recovery and physical and mental health care following a pandemic. | Provided testing in nursing homes, homeless shelters and neighborhoods otherwise identified as vulnerable. | |
| | | | | | | Commited to testing every person incarcerated in Michigan. | |
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|-------|---|---------------------|--------------------------------|--|---|---------------|------------|
| NC | Andrea Harris Social, Economic, Environmental, and Health Equity Task Force | 6/4/2020 | Executive Order | Task Force is led by the Department of Administration | Identify best practices to create economic stability, eliminate health disparities, and achieve environmental justice in North Carolina. | | Members |
| | | | | | Ensure equitable distribution of pandemic relief funds. | | |
| | | | | | Invest in historically underutilized businesses. | | |
| | | | | | Integrate of environmental justice considerations into policies. | | |
| | | | | | Protect feeding operations at food banks and school systems. | | |
| | | | | | Provide mass testing of food processing plant workers. | | |
| NH | <u>Governor's COVID-19</u> <u>Equity Response</u> <u>Team</u> | 5/28/2020 | Administrative | Task Force is led by the Director of the Office of Health Equity within the Department of Health and Human | Collect and release of demographic data on an ongoing basis. | | Members |
| | | | | Services | Conduct a thorough analysis of all available data using a cross-cultural research method to examine the social, cultural, and systemic factors contributing to differences and disparities in COVID-19 related outcomes. | | |
| | | | | | Identify and recommend specific resources that could be allocated to address these disparities. | | |
| | | | | | Within 30 days, identify and recommend achievable steps for the State and other stakeholders to consider undertaking to remedy the disparate impact of COVID-19. | | |
| | | | | | Recommend exploratory actions include: | | |

Embedding community leaders who can bring an equity lens / lived experience perspective on the GOFERR and other COVID-related advisory groups and taskforces; Ensuring appropriate representation from equity experts within the operations of the COVID-19 response teams; Leveraging and partnering with existing COVID-related public health efforts that have an intentional focus on equity such as the State Health Assessment/State Health Improvement Plan (SHA/SHIP), and the New Hampshire COVID Equity Task Force, comprised of over 50 individuals and organizations across NH representing multiple sectors and communities who came together to address issues of equity, for historically marginalized groups, arising from the COVID-19 pandemic and response.

| ОН | <u>Minority Health Strike</u> Force | 4/20/2020 | Administrative | The lead for the Department of Aging leads the Strike Team; it is housed within the Department of Health | Establish culturally appropriate and accessible COVID-19 exposure notification services for communities of color. | Released preliminary recommendations on May 21. | <u>Members</u> |
|----|--|-----------|----------------|--|--|--|----------------|
| | | | | | Expand testing capacity and access for minorities and high-risk populations. | Created a new position within the Department of Health dedicated to social determinants of health; responsible for collecting data to inform best practices and for helping to ensure the implementation of the Minority Strike Force's short-term and long-term recommendations. | |
| | | | | | Use data to prioritize resources in the communities that have the highest need. | Developed plans for the Ohio Department of Health and Minority Health Strike Force to work with Us for Us to unveil a new communications campaign aimed at Ohio's minority populations called, "Stay in the Fight." | |
| | | | | | Develop and launch a statewide, culturally- Developed a plan for the Ohio Department sensitive outreach campaign that educates African Americans and communities of color on COVID-19, health disparities, and social determinants of health. Community Health Centers, to increase testing rates for communities of color and high-risk populations. | | |

| State | Name of Task Force | Date Established | Mechanism for Establishment | Structure | Goals | Actions Taken | Membership |
|-------|---|---------------------|--------------------------------|--|--|---|----------------|
| PA | COVID-19 Response Task Force for Health Disparity | 4/15/2020 | Administrative | Led by Lieutenant Governor; includes the executive directors of each of the governor's five commissions representing minority populations, members of the Department of Health's Health Equity | Prepare recommendations to the governor that will address the short- and long-term consequences of the COVID-19 pandemic in the state's minority and vulnerable communities. | sessions with community. | <u>Members</u> |
| | | | | Response team | | Modified data collection on COVID-19 cases by state health department to include sexual orientation and gender identity. | |
| | | | | | | Reinforced Department of Health mandate for health care providers to include race and ethnicity data for patients tested for COVID; compliance has risen from 30% to 70%. | |
| | | | | | | Highlighted need for accessible testing. | |
| | | | | | | Increased the number of bilingual public service announcements. | |
| | | | | | | Worked to provide community health care providers with state resources to improve outreach. | |
| TN | <u>COVID-19 Health</u> Disparity Task Force | 4/16/2020 | Administrative | Housed in Department of Health and led by Assistant Commissioner, Office of Health Disparities; weekly briefings and monthly meetings. | Improve bi-directional communication | Partnered with Meharry Medical College, historically black school in Nashville, to run testing in the city and helping with outreach. | <u>Members</u> |
| | | | | montally mootaligo. | Increase data sharing | Developed culturally responsive COVID- 19 messaging. | |
| | | | | | Capture voice of communities served | | |
| | | | | | Generate responsive solutions and policies | | |
| | | | | | Develop of COVID-19 marketing campaign for minority communities | | |
| | | | | | Expand testing | | |

| | <u>COVID-19 Equity</u> Leadership Task Force | 3/13/2020 | Administrative | the work of the Health Equity Work Group; the Health Equity Work Group was intentionally built into the initial formation of the COVID-19 Unified Command structure; the Health Equity Work Group reports directly to the COVID-19 Unified Command Leadership Group, while its work is guided by the Equity Leadership Task Force; the Health Equity Work Group contains nearly 50 members and is embedded at the senior level of Virginia's unified COVID-19 command structure; the Equity Leadership Task Force includes an equity expert in each major partnering agency of the unified response (Department of Health, Department of Emergency Management, Governor's Office). | How have we ensured that our operational processes are inclusive, and that the elements of our processes have not created barriers to meaningful participation? Which stakeholder groups would we like to have included but were unable to facilitate? On the basis of social, physical and cultural variables, how does a process or | bottles of hand sanitizer to the doorsteps of hard-hit, mostly African-American communities in Richmond, Chesapeake and Harrisonburg. Prepared to extend these deliveries to Roanoke, Petersburg and parts of Northern Virginia. Developed plans to delivery two masks to each person incarcerated in Virginia. Worked with the Richmond Fire Department to train firefighters on implicit bias and cultural competency, while equipping them with resources to distribute to underserved neighborhoods. Held a health equity townhall event with a local media outlet in May. | Members |
|----|--|-----------|-----------------|---|--|---|----------------|
| VT | <u>Racial Equity Task</u> <u>Force</u> | 6/2/2020 | Executive Order | Led by state's Executive Director of Racial Equity and housed in Governor's Office; monthly meetings. | Evaluate structures of support for racially diverse populations, including a focus on the racial disparities in health outcomes highlighted by COVID-19 including: Structures that currently exist in Vermont; Models that have succeeded in other jurisdictions; Policy changes Vermont should consider; Tools the state can provide; Language access; Economics, housing, healthcare and access to credit | | <u>Members</u> |
| WA | <u>Safe Start Working</u> <u>Group: Social Supports</u> <u>Community Leaders</u> <u>Group</u> | 5/6/2020 | Administrative | One of three advisory groups guiding Washington's reopening; constitutes forum for community to consult with Governor's office; groups inform Governor's decision- making. | Offer perspectives on the increasing need for social services because of the COVID- 19 pandemic, including food security and safe shelter and housing. It will look at recovery through an equity lens. | | <u>Members</u> |