

INCLUSION CRITERIA (DRAFT revised 10/28/20)

Purpose: We intend to use these criteria as a framework for research and decisions on which categories to include in the draft lists for race, ethnicity, and primary language.

1. Language, racial, and ethnic categories shall only be added for the purpose of revealing inequities between and within groups.
 - a. Rely on research and the expertise of community leaders in generating categories.
 - b. Balance the boldness of naming specific co-racial and co-ethnic categories with the technical limitations of current data systems, so that data collection and reporting can be effective in revealing inequities.
2. Include all racial and ethnic categories used by the [U.S. Census](#) and [American Community Survey](#), and recommended by the [Office of Minority Health](#).
 - a. Preserve the ability to add more categories, but do not remove any categories.
 - b. Ethnicity, nationality, and region are overlapping concepts. Methodologies deemed most appropriate by staff and community leaders, such as research and federal and state examples, will be selected for each racial group.
3. We honor the sovereignty and treaty rights of tribes. We will uphold our responsibilities described in [Chapter 43.376 RCW](#) (Government-to-Government Relationships), and engage tribes and tribal health partners through established agency channels. We will not attempt to disaggregate the American Indian/Alaska Native category unless this is a directive after meaningful consultation with tribal nations.
4. At minimum, include the languages consistent with the [Governor's COVID-19 Language Access Plan](#), which includes the 36 languages spoken most by populations with limited English proficiency (at least 1% of the population or 5000 speakers, whichever is less).
 - a. In consultation with community partners, include languages for those groups experiencing health inequities, although these populations may not meet the numerical thresholds mentioned above.
 - b. Note: We will need to revisit this criterion; it may conflict with data capabilities. Example: we learned Khmer is not coded for in the HL7 standards. We will work with the Electronic Laboratory Reporting (ELR) Team to explore solutions.

PROJECT GLOSSARY (DRAFT revised 10/28/20)

Purpose: To help staff and community partners collaborate on this project with a common understanding, and to express these concepts in a consistent and intentional way to the Board and public.

- **Aggregate:** A compilation and summary of data on information such as gender, race, ethnicity, language spoken in the home, disability status, and income level.
- **American Community Survey (ACS):** A national data set with annual estimates of selected social, economic, and housing characteristics spanning various geographic areas and populations. Website: <https://www.census.gov/programs-surveys/acs>
- **Data:** Facts or information used to calculate, analyze, or plan something.¹ Data values can be neutral, but the decision of what types of data to collect and the questions we ask based on the data have ethical implications and tangible impacts. Data can be a powerful tool to improve community health and advance equity (see definition for ‘equity’ below).
- **Disaggregate:** A breakdown of information into smaller populations, such as by race, ethnicity, gender, zip code, income level, and education level. Disaggregated data can reveal underlying trends and issues, such as inequities in the public health system, that may be invisible or improperly measured in the aggregate state.
- **Electronic Laboratory Reporting:** The automated messaging of laboratory reports sent using one or more electronic communication protocols. ELR improves the reporting of notifiable conditions, which in turn benefits public health [surveillance](#) and preparedness efforts.² The Department of Health maintains an ELR system, the WA Electronic Lab Reporting System (WELRS), which provides data to public health disease investigators across the state.³
- **Ethnicity:** A social construct that divides people into smaller social groups based on characteristics such as shared sense of group membership, values, behavioral patterns, language, political and economic interests, history, and ancestral geographical base.⁴
- **Equity:** Developing, strengthening, and supporting policies and procedures that distribute and prioritize resources to those who have been historically and currently marginalized, including tribes. It requires the elimination of systemic barriers that have been deeply entrenched in systems of inequality and oppression. Equity achieves procedural and outcome fairness, promoting dignity, honor, and respect for all people.⁵

¹ Merriam-Webster Dictionary: <https://www.merriam-webster.com/dictionary/data>

² Centers for Disease Control and Prevention (CDC), About ELR: <https://www.cdc.gov/elr/about.html>

³ WA State Department of Health, Electronic Laboratory Reporting: <https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/HealthcareProfessionalsandFacilities/PublicHealthMeaningfulUse/LaboratoryReportingELR>

⁴ RESD Task Force, Guidance to Public Education System: <https://www.k12.wa.us/sites/default/files/public/workgroups/ret/pubdocs/resdtaskforce2017guidancewapubliceducationsystem.pdf>

⁵ Equity Office Task Force, Proposal to the Governor and Legislature (Draft): <https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/July%2029%20Equity/Report%20Final%20Draft.pdf>

Notifiable Conditions Rule – Chapter 246-101 WAC
Community Partner Engagement on Race, Ethnicity, and Language Categories

- **Language:** A system of conventional spoken, manual (signed), or written symbols by means of which human beings, as members of a social group and participants in its culture, express themselves.⁶
 - **Language Assistance Services:** “Oral and written language services needed to assist LEP individuals to communicate effectively with staff, and to provide LEP individuals with meaningful access to, and an equal opportunity to participate fully in, the services, activities, or other programs.” Limited English Proficient (LEP) Individuals are those “...who do not speak English as their primary language and who have a limited ability to read, write, speak, or understand English. LEP individuals may be competent in English for certain types of communication (e.g., speaking or understanding), but still be LEP for other purposes (e.g., reading or writing).”⁷ Even when a person is proficient in English, they or their family members may have a different preferred language or language spoken at home. This understanding can help public health workers communicate with families in a culturally and linguistically appropriate manner.
 - **Language Access:** [Title VI of the 1964 Civil Rights Act](#) and the Washington State Law Against Discrimination ([Chapter 49.60 RCW](#)) protect all individuals from discrimination based on national origin, which includes birthplace, ancestry, culture, and language. Title VI requires all organizations receiving federal support to ensure meaningful access to information and provide language assistance services.
- **Nationality:** A specific legal relationship between a person and a state, whether by birth or naturalization in the case of an immigrant.⁸ Nationality also encompasses a person’s subjective sense of belonging, and self-identification, to one state or to one nation. In this instance, nationality may be separate from one’s birth country and/or citizenship status.⁹
 - **Immigration Status:** The way in which a person is present in the United States. Everyone has an immigration status. Some examples include: Person with Temporary Protected Status, Legal Permanent Resident, and U.S. citizen.¹⁰ It is important for public workers to communicate the following with communities: whether immigration status information will be collected; and how information about immigration status or information that can be used to infer immigration status will be protected.
 - **Public Charge:** Based on the [federal rule for Inadmissibility on Public Charge Grounds](#), “public charge” is a reason that a person could be denied a green card, visa, or admission into the United States. In deciding whether to grant some applicants a green card or a visa, an immigration officer must decide whether that person is likely to become dependent on certain government benefits in the future, which would make them a “public charge.”¹¹ The U.S. Customs and Immigration Services has clarified that, “The Public Charge rule does not restrict

⁶ <https://www.britannica.com/topic/language>

⁷ Department of Justice Language Access Plan (2012): <https://www.justice.gov/sites/default/files/open/legacy/2012/05/07/language-access-plan.pdf>

⁸ [https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/\(3c\)%20DEI%20workgroups_Foundational%20Definitions.pdf](https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/(3c)%20DEI%20workgroups_Foundational%20Definitions.pdf)

⁹ <https://www.k12.wa.us/sites/default/files/public/workgroups/ret/pubdocs/resdtaskforce2017guidancewapubliceducationssystem.pdf>

¹⁰ <https://www.nationallatinonetwork.org/immigrant-advocacy-basics/what-is-immigration-status>

¹¹ <https://www.iirc.org/public-charge>

Notifiable Conditions Rule – Chapter 246-101 WAC
Community Partner Engagement on Race, Ethnicity, and Language Categories

access to testing, screening, or treatment of communicable diseases, including COVID-19.”¹² Still, increased immigration enforcement and misinformation has contributed to distrust and fear among immigrant communities around accessing basic resources like healthcare.¹³

- **National Origin:** System of classification based on the nation from which a person originates regardless of the nation they currently live in. National origin is not something an individual can change, though origin can change through the generations of family.¹⁴
- **Notifiable Conditions:** A selected list of diseases or conditions that health care providers, health care facilities, laboratories, veterinarians, food service establishments, child day care facilities, and schools are legally required to report to public health authorities. Reporting of notifiable conditions provides the information necessary for public health officials to protect the public's health by tracking communicable diseases and other conditions. [The Department of Health](#) provides a list of notifiable conditions, resources such as reporting forms and investigation guidelines, and links to disease pages for most conditions. Rules for notifiable conditions reporting are specified in [Chapter 246-101 WAC](#).
- **Office of Minority Health (OMH):** An Office within the U.S. Department of Health and Human Services. The OMH seeks to improve the health of racial and ethnic minority populations through the development of health policies and programs that will help eliminate health disparities.¹⁵ It has published [data collection standards](#) for race, ethnicity, sex, primary language, and disability status.
- **Race:** A social construct that divides people into smaller social groups based on characteristics, most typically skin color. Racial categories were socially constructed, and artificially created whiteness as one of the elements of the dominant culture. Race was created to concentrate power and advantage people who are defined as white and justify dominance over non-white people. The idea of race has become embedded in our identities, institutions, and culture, and influences life opportunities, outcomes, and experiences. Racial categories change based on the political convenience of the dominant society at a given period of time.¹⁶ Although the concept of race invokes biologically based human characteristics (so-called “phenotypes”), selection of these particular human features for purposes of racial signification is always and necessarily a social and historical process.¹⁷
- **Racial Equity:** The vision or existence of a community, society, or world in which race or color does not predict the amount and quality of opportunities, services, and benefits. The condition where one's race identity has no influence on how one fares in society.¹⁸

¹² <https://www.uscis.gov/green-card/green-card-processes-and-procedures/public-charge>

¹³ <https://www.healthaffairs.org/doi/10.1377/hblog20200416.887086/full/>

¹⁴

[https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/\(3c\)%20DEI%20workgroups_Foundational%20Definitions.pdf](https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/(3c)%20DEI%20workgroups_Foundational%20Definitions.pdf)

¹⁵ Office of Minority Health: <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=1&lvlid=1>

¹⁶

[https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/\(3c\)%20DEI%20workgroups_Foundational%20Definitions.pdf](https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/(3c)%20DEI%20workgroups_Foundational%20Definitions.pdf)

¹⁷ RESD Task Force, Guidance to Public Education System:

<https://www.k12.wa.us/sites/default/files/public/workgroups/ret/pubdocs/resdtaskforce2017guidancewapubliceducationsystem.pdf>

¹⁸

[https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/\(3c\)%20DEI%20workgroups_Foundational%20Definitions.pdf](https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/(3c)%20DEI%20workgroups_Foundational%20Definitions.pdf)

Notifiable Conditions Rule – Chapter 246-101 WAC
Community Partner Engagement on Race, Ethnicity, and Language Categories

- **Racism:** A way of representing or describing race that creates or reproduces structures of domination based on racial categories. In other words, racism is racial prejudice plus power. In the United States, it is grounded in the creation of a white dominant culture that reinforces the use of power to create privilege for white people while marginalizing people of color, whether intentional or not. Forms of racism include individual, interpersonal, internalized, institutional, systemic, and structural.¹⁹ This project to create disaggregated data categories for race, ethnicity, and language in the reporting of notifiable conditions mainly serves to address the following forms of racism:
 - **Institutional racism:** Intentional or unintentional, laws, organizational practices, policies, and programs that work to the benefit of white people and to the detriment of people of color.²⁰
 - **Systemic racism:** The way an entire system collectively contributes to racial inequities. This includes the health, environmental, education, justice, government, economic, financial, transportation, and political systems.²¹
 - **Structural racism:** The interplay of laws, practices, policies, programs, and institutions of multiple systems, which leads to adverse outcomes and conditions for communities of color compared to white communities.²²
- **Rules:** A set of standards that govern the conduct of regulated entities. In general, the Legislature sets broad policy mandates through statute, then agencies create more detailed rules by adding detailed scientific, economic, industry, and community expertise to a policy.
- **Rulemaking:** The process that agencies use to adopt, amend, or repeal a rule/regulation, which can be unique to each agency. The State Board of Health adopts rules according to its [powers and duties granted by the Legislature](#). The Board has authority to develop many public health rules ranging from drinking water and onsite sewage systems to newborn screening and immunizations, just to name a few.²³ Rules impact health care providers and facilities, schools, day care centers, recreation sites, and businesses like restaurants and hotels. The Department of Health and local health jurisdictions implement and enforce the Board's rules.²⁴
- **Social Determinants of Health:** Social determinants of health are economic and social conditions – based on where people are born, live, learn, work, and play – that affect a person's health status. These external and interdependent factors help explain why some people experience worse health outcomes than others. Examples include: housing

¹⁹

[https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/\(3c\)%20DEI%20workgroups_Foundational%20Definitions.pdf](https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/(3c)%20DEI%20workgroups_Foundational%20Definitions.pdf)

²⁰

[https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/\(3c\)%20DEI%20workgroups_Foundational%20Definitions.pdf](https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/(3c)%20DEI%20workgroups_Foundational%20Definitions.pdf)

²¹

[https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/\(3c\)%20DEI%20workgroups_Foundational%20Definitions.pdf](https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/(3c)%20DEI%20workgroups_Foundational%20Definitions.pdf)

²²

[https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/\(3c\)%20DEI%20workgroups_Foundational%20Definitions.pdf](https://healthequity.wa.gov/Portals/9/Doc/Task%20Force%20Meetings/2020/April%2030%20Equity/(3c)%20DEI%20workgroups_Foundational%20Definitions.pdf)

²³ List of current open rules: <https://sboh.wa.gov/Rulemaking/CurrentRulesandActivity>

²⁴ WA State Board of Health, Overview of What We Do: <https://sboh.wa.gov/Rulemaking/AgencyOverview>

Notifiable Conditions Rule – Chapter 246-101 WAC
Community Partner Engagement on Race, Ethnicity, and Language Categories

(in)stability, transportation options, language, literacy, employment status, and health insurance status. Other societal factors such as racism (including structural and institutional) and other forms of oppression also impact the health and wellbeing of individuals and communities as a whole, particularly those of color and other marginalized groups (such as differently abled, LGBTQ, Tribal communities, etc.).²⁵

- **Treaty Rights of Tribes:** The rights of tribes as contained in these nine treaties: Treaty with the Yakamas, Treaty with the Walla Wallas, Treaty of Olympia, Treaty of Point No Point, Treaty of Point Elliott, Treaty with the Nez Perces, Treaty of Neah Bay, and Treaty of Medicine Creek. More generally, “hundreds of treaties, along with the Supreme Court, the President, and Congress, have repeatedly affirmed that tribal nations retain their inherent powers of self-government. These treaties, executive orders, and laws have created a fundamental contract between tribes and the United States.”²⁶
- **Tribal Sovereignty:** The right of American Indians and Alaska Natives to govern themselves. The U.S. Constitution recognizes Indian tribes as distinct governments and they have, with a few exceptions, the same powers as federal and state governments to regulate their internal affairs. Sovereignty for tribes includes the right to establish their own form of government, determine membership requirements, enact legislation and establish law enforcement and court systems.²⁷ The governmental status of tribal nations is at the heart of many issues. Self-government is essential if tribal communities are to continue to protect their unique cultures and identities.²⁸
- **U.S. Census:** A national data set that produces specific socioeconomic and demographic estimates, for the United States and individual states, using selected characteristics and populations. It provides estimates of income and health insurance, as well as official poverty estimates. Website: <https://www.census.gov/>

²⁵ WA State Department of Health, [Social Determinants of Health Dashboards](#)

²⁶ <http://www.ncai.org/policy-issues/tribal-governance>

²⁷ National Congress of State Legislatures: <https://www.ncsl.org/research/state-tribal-institute/an-issue-of-sovereignty.aspx#:~:text=Tribal%20sovereignty%20refers%20to%20the,to%20regulate%20their%20internal%20affairs.>

²⁸ <http://www.ncai.org/policy-issues/tribal-governance>