



Upstream Prevention: Promotion of Individual Well-Being

Regional Health Improvement Plan Workgroup

Join Zoom Meeting

<https://zoom.us/j/602446710>

Join by phone:

+1 669 900 6833

Meeting ID: 602 446 710

September 22, 2020

3:30-5:00pm

Aim/Goal
All communities in Central Oregon have equitable access and opportunities to health, education, healthy relationships, community support, and experiences necessary to thrive at every stage of life from prenatal to adulthood.
Future State Metrics
<ol style="list-style-type: none">1. Increase letter name recognition at kindergarten2. Increase third grade reading proficiency3. Increase proportion of pregnancies that are planned4. Increase two-year-old immunization rates5. Increase the number of people who feel they belong in their community

AGENDA

3:30-3:40	Welcome & Land Acknowledgement
3:40-4:55	Strategic Direction
4:55-5:00	Next Steps



Upstream Prevention: Promotion of Individual Well-Being
Regional Health Improvement Plan Workgroup

Future State Metrics – Full Detail			
1. By December 2023, letter name recognition at kindergarten readiness will be the following by county:			
Average Number of Upper Case Letters Recognized (scale 0-26)			
	Total Population	Economically Disadvantaged	Underserved Races
Crook County	15.8	14.3	12.8
Deschutes County	17.5	14.6	16.6
Jefferson County	13.2	11.3	11.1
Overall increase of at least 10% for all students, a 20% increase for students from economically disadvantaged (ED) and underserved races (UR).			
2. By December 2023, increase third-grade reading proficiency to the following by county:			
3rd Grade English Language Arts Proficiency by County (weighted)			
	All Students	Economically Disadvantaged	Underserved Races
Crook County	54.5%	51%	33.5%
Deschutes County	67.5%	52%	47%
Jefferson County	47.5%	49.5%	40.5%
Increase of 10% overall, and 15% for economically disadvantaged students (ED) and students from underserved races (UR).			
3. By December 2023, increase the proportion of pregnancies that are planned in Central Oregon to 56%.			
4. By December 2023, increase the Central Oregon two-year-old up-to-date immunization rates to 80%.			
5. By December 2023, a Resilience Measure, such as the Child/Youth/Adult (CYARM) will be established, and the number of people who feel like they belong in their community (by gender, race, and ability) will increase by 10% from the baseline.			



**Central Oregon
Health
Council**

Regional Health Improvement Plan (RHIP) Workgroup

Guiding Principles

Shared Focus

We come together to improve the health and well-being of individuals living in various and diverse communities throughout Central Oregon region. We use the Regional Health Improvement Plan (RHIP) as our guide. It is our region's shared vision of current problems and our aims. As workgroup partners we develop agreed-upon actions to solve the issues and keep the needs of our communities as the main focus.

Shared Metrics

We measure progress, process and outcomes through a shared lens. We use the Regional Health Assessment (RHA), Regional Health Improvement Plan and community dashboard.

Involve Targeted Population

The individuals living in our diverse Central Oregon communities are the center of our work. We make every effort to include people from every part of the region in our workgroups, discussions, processes and decisions.

Collaborate to Solve Complex Issues

Inviting diverse perspectives from throughout the Central Oregon region deepens our shared understanding of complex issues and propels us toward better progress and outcomes. We practice frequent, structured, open communication to build trust, assure shared objectives, and create common motivation. We respect the privacy and sensitivity of information partners share.

Coordinate Collective Efforts

We are made up of diverse partner organizations and individuals with unique strengths, skills, and resources. We coordinate our efforts and use our unique strengths and skills to meet the goals of the RHIP.

Learn and Adapt Together

We embrace shared learning and a growth mindset. We create a space that allows for mistakes, failures, second changes, and a celebration of brave attempts. We adjust and apply our learnings to the complex and changing landscape of health and well-being in Central Oregon.

Upstream Prevention: Promotion of Individual Well-Being



Background: Why are we talking about this?	
1973 Roe v. Wade 1990s ACEs Study Evolving birth control options 2000s Tech Advancement and Screen Time No Child Left Behind National Traumas (9/11, school shootings) Anti-Vax (Vaccine) Movement	Upstream strategies improve fundamental social and economic structures that allow people to achieve their full health potential. Discrimination and racism impact all aspects of a person's well-being and intersect with all major systems of society. Educational status provides a significant predictor of health outcomes. Third-grade disparities exist for marginalized populations by race and economic status.

Current Condition: What's happening right now?
<ul style="list-style-type: none"> In Central Oregon, early literacy had a decreasing trend from 2016 to 2018 Current State Metrics: <ol style="list-style-type: none"> Letter recognition at kindergarten for economically disadvantaged: Crook 11.9, Deschutes 12.1, Jefferson 9.4 Third grade reading for underserved races: Crook 29%, Deschutes 41%, Jefferson 35.4% 44.8% of pregnancies were intended in Central Oregon Two-year-old up-to-date immunization rates: Crook 70%, Deschutes 69%, Jefferson 71% No established baseline for a metric such as the Child/Youth/Adult Resilience Measure

Goal Statement: Where do we want to be in 4 years?
Aim/Goal All communities in Central Oregon have equitable access and opportunities to health, education, healthy relationships, community support, and experiences necessary to thrive at every stage of life.
Future State Metrics - By December 2023: <ol style="list-style-type: none"> Increase letter name recognition at kindergarten for economically disadvantaged and/or underserved races Increase third grade reading proficiency for economically disadvantaged and/or underserved races Increase proportion of pregnancies that are intended Increase two-year-old immunization rates Establish a resiliency measure and increase the number of people who feel they belong in their community

Analysis: What's keeping us from getting there?
<ul style="list-style-type: none"> Unbalanced distribution of resources across the region Decision-making based on misinformation and personal belief Systemic inequity prevents access to usable information Unbalanced bias creating isolation (connection vs alienation) Generational impact of foundational instability

Date updated:	Workgroup:	Version:
---------------	------------	----------

Strategic Direction: What are we going to try?
{insert}

Focused Implementation: What are our specific actions? (who, what, when, where?)
--

{insert}

Follow-Up: What's working? What have we learned?
--

{insert}

Upstream Prevention: Promotion of Individual Well-Being

Root Cause Barriers: What is blocking us from moving toward our future state measures?

Unbalanced distribution of resources across the region	Systemic inequity prevents access to useable information	Decision making based on misinformation and personal belief	Unbalanced bias creating isolation (connection vs alienation)	Generational impact of foundational instability
Geographic distribution across the region	Intended pregnancy - onsite education and access to age appropriate contraception	Policy level – school boards blocking access to contraceptives	Exclusiveness of opportunities (language, literacy, economic)	Family access to education surrounding parenting
Duplication of efforts	Intended pregnancy - onsite education and access to age appropriate contraception	Pervasive misinformation around immunizations	Connections to schools (attendance, "community")	Inconsistency of adults in child's life
Unbalanced resource allocation	Decreased access to in person medical visits - pandemic	Philosophical differences on reproductive health	Intensive focus on academic success	Trusting relationships with resources
	Technology access and know how	Social media amplifies rhetoric to spread (echo chamber)	Racism and unconscious bias	Overarching barrier: Poverty
	Health literacy	Attitude that individual rights trump group rights	Language barriers	Lower parental literacy
	Access to/stigma contraceptive counseling			Kids are raising kids
	Beliefs of gov. Overstepping boundaries			Access to childcare
	Trusted institutions are highly politicized			
	Pervasive misinformation around immunizations			
	Philosophical differences on reproductive health			

Upstream Prevention: Promotion of Individual Well-Being

Strategic Direction:

How do these groups relate to each other? Which ones have similar intent?

