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

1. Increase letter name recognition at kindergarten
2. Increase third grade reading proficiency
3. Increase proportion of pregnancies that are planned
4. Increase two-year-old immunization rates
5. 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
1. By December 2023, letter name recognition at kindergarten readiness will be the following by county:

<table>
<thead>
<tr>
<th></th>
<th>Total Population</th>
<th>Economically Disadvantaged</th>
<th>Underserved Races</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crook County</td>
<td>15.8</td>
<td>14.3</td>
<td>12.8</td>
</tr>
<tr>
<td>Deschutes County</td>
<td>17.5</td>
<td>14.6</td>
<td>16.6</td>
</tr>
<tr>
<td>Jefferson County</td>
<td>13.2</td>
<td>11.3</td>
<td>11.1</td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th></th>
<th>All Students</th>
<th>Economically Disadvantaged</th>
<th>Underserved Races</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crook County</td>
<td>54.5%</td>
<td>51%</td>
<td>33.5%</td>
</tr>
<tr>
<td>Deschutes County</td>
<td>67.5%</td>
<td>52%</td>
<td>47%</td>
</tr>
<tr>
<td>Jefferson County</td>
<td>47.5%</td>
<td>49.5%</td>
<td>40.5%</td>
</tr>
</tbody>
</table>

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.
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?

<table>
<thead>
<tr>
<th>Year</th>
<th>Event/Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>1973</td>
<td>Roe v. Wade</td>
</tr>
<tr>
<td>1990s</td>
<td>ACEs Study</td>
</tr>
<tr>
<td>2000s</td>
<td>Tech Advancement and Screen Time</td>
</tr>
<tr>
<td></td>
<td>No Child Left Behind</td>
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<tr>
<td></td>
<td>National Traumas (9/11, school shootings)</td>
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<tr>
<td></td>
<td>Anti-Vax (Vaccine) Movement</td>
</tr>
</tbody>
</table>

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?

- In Central Oregon, early literacy had a decreasing trend from 2016 to 2018
- Current State Metrics:
  1. Letter recognition at kindergarten for economically disadvantaged: Crook 11.9, Deschutes 12.1, Jefferson 9.4
  2. Third grade reading for underserved races: Crook 29%, Deschutes 41%, Jefferson 35.4%
  3. 44.8% of pregnancies were intended in Central Oregon
  4. Two-year-old up-to-date immunization rates: Crook 70%, Deschutes 69%, Jefferson 71%
  5. 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:

1. Increase letter name recognition at kindergarten for economically disadvantaged and/or underserved races
2. Increase third grade reading proficiency for economically disadvantaged and/or underserved races
3. Increase proportion of pregnancies that are intended
4. Increase two-year-old immunization rates
5. 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?

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

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

- Coordinate care across systems
- Deliver preventive dental services to children in non-traditional settings
- System is still fragmented; what do I do for care?
- Public Health, Health System, or PCP Urgent Care
- Picture very honestly about duplication and ensuring services are utilized better
- Other ways to ensure additional support to work toward with health after
- Picture to gain information about how effectively is going in if/where can use it even better for equity?
- Jointly increasing hours of services in rural communities of all services

- Screen for pregnancy intention
- Timely access to contraception and long-acting reversible contraceptives
- Audit schools to ensure comprehensive sex education
- Support early introduction of books to kids

- Support early education programs
- Expanded access to pre-literacy and pre-numeracy programs
- Support early education programs
- Increased awareness and promotion of strategies for early literacy

- Foster community cultural programs
- Create more access to academic, stem, arts programs
- Create free high quality parenting classes for all people
- Include parents in children’s programs (not just kids)

- Cover technology options for inequitable regions
- Systemic inequity (have people who have been in others states, to share their own stories and reduce it
- Support more opportunities/career pathways for undocumented residents/students
- Support students in schools

- Identify and implement strategies to assess diverse representation in local communities
- Support student representation at school boards and at meetings
- Stipend/Hiring from within communities (LCA, within local community)
- Advocate for legislation and local policy

- Make healthy foods more accessible
- Work with communities to create policies, programs and initiatives that advance health equity and promote health to ALL Patrons

- Lobby for universal sex education and birth control
- Legislative action to mandate vaccines

This is about coordinating systems for better outcomes
This is about growing a belonging environment
This is about building culturally inclusive organizational practices
This is about increasing and diversifying approaches to health literacy
This is about advocating for policy change