Address Poverty and Enhance Self-Sufficiency
Regional Health Improvement Plan Workgroup

Join Zoom Meeting
https://us02web.zoom.us/j/728200141?pwd=dFM0UEhVUTZ6K1pHUkpFWXVBQkJYdz09

Join by phone:
+1 669 900 6833
Meeting ID: 728 200 141
Passcode: 105890

August 17, 2021
11:00am – 12:30pm

Aim/Goal
Individuals and families in Central Oregon experiencing poverty are provided equitable access and connected to appropriate resources that help them overcome obstacles to self-sufficiency and address health-related challenges.

Future State Metrics - Condensed
1. Increase high school graduation rates among economically disadvantaged students
2. Decrease food insecurity
3. Decrease percent of income constrained households
4. Decrease housing and transportation costs as a percent of income

AGENDA
11:00-11:10 AM Welcome, Land Acknowledgement, Guiding Principles
11:10-11:15 PM Announcements
11:15-12:20 PM Implementation Plan Development
   • Small group work
12:20-12:30 PM Wrap Up & Next Steps

Working Document: https://docs.google.com/presentation/d/1jYwyGwMt-Uj2QtW2INBRF9cijl_4HaSIYgw_28uLg/edit?usp=sharing
Address Poverty and Enhance Self-Sufficiency
Regional Health Improvement Plan Workgroup

Future State Metrics – Full Detail

1. By December 2023, Central Oregon graduations rate among economically disadvantaged students will improve by 3 percentage points to:

<table>
<thead>
<tr>
<th>County</th>
<th>% of (total) Population Food Insecure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crook</td>
<td>13%</td>
</tr>
<tr>
<td>Deschutes</td>
<td>11%</td>
</tr>
<tr>
<td>Jefferson</td>
<td>11.3%</td>
</tr>
</tbody>
</table>

2a. By December 2023, decrease the % of total population reported as food insecure by 2 percentage points to:

Crook: 27%
Deschutes: 24%
Jefferson: 32%

2b. By December 2023, develop a regional metric to evaluate food insecurity among seniors in our community (ages 65+).

3. By December 2023, decrease the population of households living at the poverty level and income constrained by 2 percentage points to:

Crook: 27%
Deschutes: 24%
Jefferson: 32%

4. By December 2023, reduce combined housing and transportation cost for residents as a percent of income in their respective counties to no more than:

Crook County: 64%
Deschutes: 55%
Jefferson: 55%
Address Poverty and Enhance Self-Sufficiency

### Background: Why are we talking about this?

<table>
<thead>
<tr>
<th><strong>1990s</strong></th>
<th><strong>2000s</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Mill Closures / Timber Industry Decline</td>
<td>Population Growth in Central Oregon</td>
</tr>
<tr>
<td>The Great Recession</td>
<td>Widening Opportunity Gap</td>
</tr>
<tr>
<td>Decreasing safety net — “War on Poor”</td>
<td></td>
</tr>
</tbody>
</table>

Central Oregon has grown rapidly over the past two decades. Individual communities face different economic and social challenges associated with this development, including increased unemployment, lack of affordable housing, and income inequality. There is significant evidence linking poverty to health disparities and poor outcomes.

### Current Condition: What's happening right now?
- 9-17% of residents in Central Oregon lived in poverty between 2013 and 2017
- Almost 50% of the region’s renters are considered to be cost burdened
- Almost 25% of the civilian labor force in Warm Springs is experiencing unemployment

**Current State Metrics:**
1. 2018 Central Oregon graduation rates were significantly lower among economically disadvantaged students
2. Food insecurity by County: Crook 15%, Deschutes 13%, Jefferson 13.3%
3. Income constrained households: Crook 29%, Deschutes 26%, Jefferson 34%
4. Housing and transportation costs combined as a percent of income: Crook 67%, Deschutes 58%, Jefferson 58%

### Goal Statement: Where do we want to be in 4 years?

**Aim/Goal**
Individuals and families in Central Oregon experiencing poverty are provided equitable access and connected to appropriate resources that help them overcome obstacles to self-sufficiency and address health-related challenges.

**Future State Metrics - By December 2023:**
1. Increase high school graduation rates among economically disadvantaged students
2. Decrease food insecurity
3. Decrease percent of income constrained households
4. Decrease housing and transportation costs as a percent of income

### Analysis: What’s keeping us from getting there?
- Demand exceeds supply for range of housing needs required
- Disjointed Systems
- Funding/Educational system is designed not to meet the needs of historically marginalized students
- Inactive response to Awareness, Barriers and Cultural Sensitivity
- Transportation can be inaccessible due to distance/economic
- Inequity of resources for income constrained families
- Scarcity culture promotes exclusionary programming
- Historical classism and racist structures undervalue and constrain people
- Complex & excessive restrictions to access safety nets

### Strategic Direction: What are we going to try?
- Strengthening Foundation of Individual and Community Health
- Empowering All People and Communities Through Inclusive and Collaborative Partnership
- Connecting People and Establishing Pathways to Enhance Community Resources
- Boosting Advocacy to Address Systemic Factors Contributing to Poverty

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

- Fund youth programs that support improved graduation rates for economically disadvantaged students in Central Oregon.
- Hire a consultant to conduct an assessment to identify barriers for those that are Asset Limited Income Constrained and Employed.

### Follow-Up: What’s working? What have we learned?

(insert)
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.

Partner with Priority Populations
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.
Land Acknowledgement

We recognize and acknowledge the indigenous land of which we live, work, learn, play, and grow. This land of the Mololla, Paiute, Klamath, Modok, Yahooskin Band of Snake Indians, Confederated Tribes of Middle Oregon, and Confederated Tribes of Warm Springs. We acknowledge them as the past, present, and future caretakers of this land. It is on their traditional land where we partner to improve the health and well-being of Central Oregonians. We aspire to be good guests honoring the concept in the Warm Springs culture: “This land is for you to know and live upon and pass on to the children.”
Funds Available: $10,680,350
Initial Funds (spread over 5 years): $12,000,000
Funds Spent: $1,319,650

Amount Invested by Workgroup:
- Address Poverty*: $544,219.79
- Behavioral Health: $54,275.00
- Physical Health: $104,494.06
- Stable Housing: $505,000.00
- Substance & Alcohol Misuse: $35,000.00
- Upstream Prevention: $76,661.00

*Poverty workgroup is still in the process of awarding these funds for their Graduation Rates RFP
For the 2021-2024 funding years, each workgroup’s annual investment goal is a minimum of $500,000. The Central Oregon Health Council is required by law to invest a total of at least $2.5M each year through the workgroups. Each workgroup is expected to do their part in helping to reach this $2.5M annual commitment.
Address Poverty & Enhance Self-Sufficiency
2020-2024 RHIP Workgroup Budget

Updated August 2, 2021

Funds Available $1,455,780
Initial Funds (spread over 5 years) $2,000,000
Funds Spent $544,220

Amount Invested by Future State Measure

<table>
<thead>
<tr>
<th>Measure</th>
<th>Amount Invested</th>
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</thead>
<tbody>
<tr>
<td>Decrease the number of households living at poverty level and income</td>
<td>$7,500.00</td>
</tr>
<tr>
<td>constrained</td>
<td></td>
</tr>
<tr>
<td>Decrease the percentage of the total population reported as food</td>
<td>$50,000.00</td>
</tr>
<tr>
<td>insecure</td>
<td></td>
</tr>
<tr>
<td>Reduce the total percentage of income being spent combined housing</td>
<td>$5,000.00</td>
</tr>
<tr>
<td>and transportation costs</td>
<td></td>
</tr>
<tr>
<td>Develop a regional metric to evaluate food insecurity among seniors</td>
<td>$5,000.00</td>
</tr>
<tr>
<td>Increase high school graduation rates among economically</td>
<td>$456,719.79</td>
</tr>
<tr>
<td>disadvantaged students</td>
<td></td>
</tr>
</tbody>
</table>

Allocation of Funds by Measure

- Decrease the number of households living at poverty level and income constrained
- Decrease the percentage of the total population reported as food insecure
- Reduce the total percentage of income being spent combined housing and transportation costs
- Develop a regional metric to evaluate food insecurity among seniors
- Increase high school graduation rates among economically disadvantaged students

Allocation of All Funds ($2M)

- Decrease the number of households living at poverty level and income constrained
- Decrease the percentage of the total population reported as food insecure
- Reduce the total percentage of income being spent
- Develop a regional metric to evaluate food insecurity
- Increase high school graduation rates among economically disadvantaged students
- Unallocated
- COVID-19 ($25k pooled funds)
Address Poverty & Enhance Self-Sufficiency
2021 RHIP Workgroup Budget

<table>
<thead>
<tr>
<th>2021 investment goal</th>
<th>$500,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount remaining to invest toward 2021 goal</td>
<td>$10,780</td>
</tr>
<tr>
<td>Invested in 2021</td>
<td>$489,220</td>
</tr>
<tr>
<td>Invested in 2020</td>
<td>$55,000</td>
</tr>
</tbody>
</table>

Breakdown of Investments by Year ($2M)

Annual Goal Progress ($500k)

For the 2021-2024 funding years, each workgroup's annual investment goal is a minimum of $500,000. The Central Oregon Health Council is required by law to invest a total of at least $2.5M each year through the workgroups. Each workgroup is expected to do their part in helping to reach this $2.5M annual commitment.