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

Join Zoom Meeting
https://us02web.zoom.us/j/81740168359?pwd=RzV5ZU1nVk9adFp6ZHg2RzV4OFU1Zz09

Join by phone:
+1 669 900 6833
Meeting ID: 817 4016 8359
Passcode: 446602

June 28, 2022
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. Establish a regional measure for belonging and measure yearly

AGENDA

3:30 - 3:45 PM Welcome, Land Acknowledgement & Guiding Principles, Introductions

3:45 - 4:00 PM Equity Review

4:00 - 4:55 PM Implementation Plan
  • Early Childhood Education Guest: Lucy Hart Paulson – The Center for Literacy and Learning, The Science of Reading

4:55 - 5:00 PM Wrap Up and Next Steps

Working Document:
https://docs.google.com/presentation/d/1SR6ThnxkLYDpcT2LHHw_beu4ldsDkAWdd1fhHSNAneo/edit?usp=sharing

Workgroup Budget: https://docs.google.com/spreadsheets/d/1Gw9dL6iIRe1o1GhJRMIoxg9pEUofJ-KzUSWncBbEX8/edit?usp=sharing
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:

<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.
Land Acknowledgement

We recognize and acknowledge the indigenous land of which we live, work, learn, play, and grow. This is the land of the Warm Springs, Wasco, Northern Paiute, Tenino, Klamath, Molalla, and Yahooskin. 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.”
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.
Upstream Prevention: Promotion of Individual Well-Being

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

- **1973** Roe v. Wade
- **1990s** ACEs Study
- **2000s** Evolving birth control options
  - 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?**

- 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**

- 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, measure yearly 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

**Strategic Direction: What are we going to try?**

- Transforming care coordination across health systems
- Cultivating equity and inclusion in our communities
- Operationalizing DEI practices
- Broadening education to improve health outcomes
- Advocating for policies that improve health outcomes

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

<table>
<thead>
<tr>
<th>Future State Measures</th>
<th>What</th>
<th>When</th>
<th>Where</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improving Kinder Readiness and 3rd Grade Reading</td>
<td>Community Grant Opportunity</td>
<td>Awarded 7.2021</td>
<td>Full region. Focus on priority populations</td>
</tr>
<tr>
<td>Increase proportion of pregnancies that are intended</td>
<td>Media Campaign Promoting Intended Pregnanies</td>
<td>Awarded 1.2022</td>
<td>Full region. Focus on 18-24yo, under resourced, specific identities and their partners</td>
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<tr>
<td>Increase two-year-old immunization rates</td>
<td>Central Oregon Immunization Quality Improvement Coordinator</td>
<td>Awarded 2.2022</td>
<td>Full region. Clinics and public health</td>
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<tr>
<td>Create a regional measure for Resilience and Belonging</td>
<td>Create a regional measure for Resilience and Belonging</td>
<td>Awarded 12.2021</td>
<td>Full region. Representative sampling</td>
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</table>

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

{insert}
## UPSTREAM PREVENTION
### 2022 Budget

<table>
<thead>
<tr>
<th>Overview</th>
<th>Budget</th>
<th>Spent</th>
<th>Available</th>
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</thead>
<tbody>
<tr>
<td>5-Year</td>
<td>$2,000,000</td>
<td>$1,371,626</td>
<td>$628,374</td>
</tr>
<tr>
<td>Cycle to Date</td>
<td>$1,000,000</td>
<td>$1,371,626</td>
<td>-$371,626</td>
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<tr>
<td>Yearly Mini-Grant</td>
<td>$50,000</td>
<td>$2,500</td>
<td>$47,500</td>
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</table>

*Review MG Budget in August

<table>
<thead>
<tr>
<th>By Future State Measure (5 year)</th>
<th>Budget*</th>
<th>Spent</th>
<th>Available</th>
<th>Currently Allocated</th>
<th>Projected Available</th>
<th>Notes</th>
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<tbody>
<tr>
<td>Childhood Immunization</td>
<td>$429,428.00</td>
<td>$429,428.00</td>
<td>$0.00</td>
<td>$0.00</td>
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<tr>
<td>Third-Grade Reading</td>
<td>$385,295.33</td>
<td>$109,018.50</td>
<td>$276,276.83</td>
<td>$276,276.83</td>
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<tr>
<td>Kindergarten Readiness</td>
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<td>$115,993.50</td>
<td>$269,301.83</td>
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<tr>
<td>Resilience Measure</td>
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<td>Intended Pregnancies</td>
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<td>$300,000.00</td>
<td>$85,295.33</td>
<td>$85,295.33</td>
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</tbody>
</table>

*Budget for each FSM reflects the agreed upon 5 year 'soft budget' minus the portion contributed to shared minigrant budget and adjustments for historical investments.
<table>
<thead>
<tr>
<th>Organization</th>
<th>Process</th>
<th>Project</th>
<th>Award</th>
<th>Decision Date</th>
<th>Future State Measure</th>
<th>Latest Report</th>
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</thead>
<tbody>
<tr>
<td>Deschute County Health Services</td>
<td>Standard Grant Application (2020-2024 RHIP)</td>
<td>Central Oregon Regional Immunization Consultant</td>
<td>$419,428.00</td>
<td>2.4.22</td>
<td>Increase two-year-old immunization rate</td>
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<tr>
<td>Brink Communications</td>
<td>Standard Grant Application (2020-2024 RHIP)</td>
<td>Central Oregon Regional Health Council</td>
<td>$300,000.00</td>
<td>2.4.22</td>
<td>Increase the proportion of pregnancies that are intended</td>
<td>Establish a resilience measure and increase the number of people who feel they belong by community</td>
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<tr>
<td>Catalyst Counseling &amp; Consulting, LLC</td>
<td>Mini-Grant Application (2020-2023 RHIP)</td>
<td>Mental Health Groups For Teens</td>
<td>$2,500.00</td>
<td>5.16.2022</td>
<td>Pullled from across all measures with available funds</td>
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</tbody>
</table>
# Five-Year Investment Overview
## All Workgroups
### January 2020–December 2024

<table>
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<tr>
<th>Budget</th>
<th>Spent</th>
<th>Available</th>
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</thead>
<tbody>
<tr>
<td>$12,000,000</td>
<td>$5,988,563</td>
<td>$6,011,437</td>
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<tr>
<td>$2,000,000</td>
<td>budget per workgroup</td>
<td>$500,000 per year</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Workgroup</th>
<th>Spent</th>
<th>Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address Poverty</td>
<td>$941,994</td>
<td>$1,058,006</td>
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<tr>
<td>Behavioral Health</td>
<td>$868,577</td>
<td>$1,131,423</td>
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<tr>
<td>Physical Health</td>
<td>$1,116,132</td>
<td>$883,868</td>
</tr>
<tr>
<td>Stable Housing</td>
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<td>$890,346</td>
</tr>
<tr>
<td>Substance and Alcohol Misuse</td>
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<td>$1,419,420</td>
</tr>
<tr>
<td>Upstream Prevention</td>
<td>$1,371,626</td>
<td>$628,374</td>
</tr>
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Form Name:
RHIP Progress Report

Central Oregon Pediatric Associates
COPA Reach Out and Read

RHIP Workgroup:
Upstream Prevention: Promotion of Individual Well-Being

FollowUp Snapshot

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount Requested</td>
<td>$30,000.00</td>
</tr>
<tr>
<td>Organization Contact</td>
<td>Leslie Rust</td>
</tr>
<tr>
<td>Organization Phone</td>
<td>541-389-6313</td>
</tr>
<tr>
<td>Contact Email</td>
<td><a href="mailto:lrust@copakids.com">lrust@copakids.com</a></td>
</tr>
<tr>
<td>Organization Address</td>
<td>2200 NE Professional Courtn Bend, OR 97701</td>
</tr>
<tr>
<td>Website</td>
<td><a href="http://cohealthcouncil.org/">http://cohealthcouncil.org/</a></td>
</tr>
<tr>
<td>Project Lead</td>
<td>Leslie Rust</td>
</tr>
<tr>
<td>Project Lead email</td>
<td><a href="mailto:lrust@copakids.com">lrust@copakids.com</a></td>
</tr>
</tbody>
</table>

Future State Measure:
Upstream Prevention: Promotion of Individual Well-Being > Increase letter name recognition at kindergarten readiness assessment
Upstream Prevention: Promotion of Individual Well-Being > Increase third-grade reading proficiency
Note: * indicates required questions

Contact Information

Organization Name*

Central Oregon Pediatric Associates

Project Name

COPA Reach Out and Read

Date you are submitting this progress report*

06/08/2022

Name and Title of Submitter*

Leslie Rust, MD

Email Address*

lrust@copakids.com

Phone Number*

5412801328

Project Details

Progress Report: Primary Activities*

Please describe the project and primary activities as it’s actually unfolding.

COPA is actively participating in the national Reach Out and Read program. We have provided books to approximately 4,300 children under the age of 5 with anticipatory guidance provided to families on the importance of reading and how to use books to help early literacy skills.

Initial Successes*

Please provide some observations of things that are going as well or positively surprised you to date around your project.
There is so much excitement around the book at visits from families and children really look forward to their book. Kids who are coming back remember the book they got at the previous visit as well.

Project Completion at Time of Progress Report*
Please indicate whether your project is complete or in progress. If it is in progress, please estimate the percent complete at the time of this report.

My project is in progress and is approximately 0-25% complete

Timeline*
If your project is in progress, please indicate whether you are on track with the timelines indicated in your application.

My project is in progress, and we are on track with the timelines indicated in our application

Are you encountering any problems or challenges in fulfilling the terms of the project agreement?*

No

Mid-Course Problems or Challenges (Continued)*
If you stated that you are encountering problems or challenges in fulfilling the terms of the grant agreement, provide detail below. Please explain what mid-course corrections you plan to implement to help mitigate those challenges/barriers.

If you are not encountering challenges, please type N/A.

n/a

Mid-Course Community Connections*
Are there any connections within the community that the COHC or a RHIP workgroup can help facilitate that might be helpful with respect to the implementation or success of your project?

No

Mid-Course Community Connections (Continued)
Please provide detail on the community connections that you feel the COHC or a RHIP workgroup might be able to help with.
Please note, we strive to make connections and break-down siloes whenever possible. We will do our best to facilitate a relationship with the party or parties you mention.

Additional Reports
If you have any additional dashboards or reports, you may attach the first one here.

This is optional.

Please note, you must attach files one at a time separately, for a maximum of three files.

Please provide a brief description of each document you are attaching.

File Upload/Report 2
If you have an additional report, you may attach it here. Please briefly describe the file you are uploading.

Other Comments for Progress Report
Is there anything else you would like us to know?
FollowUp Files

Applicant File Uploads

*No files were uploaded*
Form Name:
RHIP Progress Report

High Desert ESD
Creciendo Girasoles (Growing Sunflowers): Version 2.0

RHIP Workgroup:
Promote Enhanced Physical Health Across Communities
Upstream Prevention: Promotion of Individual Well-Being

<table>
<thead>
<tr>
<th>FollowUp Snapshot</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Amount Requested</strong></td>
</tr>
<tr>
<td><strong>Organization Contact</strong></td>
</tr>
<tr>
<td><strong>Organization Phone</strong></td>
</tr>
<tr>
<td><strong>Contact Email</strong></td>
</tr>
</tbody>
</table>
| **Organization Address** | 2804 SW 6th St
Redmond, OR 97756 |
| **Website** | http://cohealthcouncil.org/ |
| **Project Lead** | Karina Smith |
| **Project Lead email** | karina.smith@hdesd.org |

Future State Measure:
Promote Enhanced Physical Health Across Communities > Increase fruit/vegetable consumption and physical activity among youth
Upstream Prevention: Promotion of Individual Well-Being > Establish a resilience measure and increase the number of people who feel they belong by community
**Progress Report: Primary Activities**

*Please describe the project and primary activities as it’s actually unfolding.*

The program hosted an afterschool program at Obsidian Middle School (Redmond) this Spring. About 23 families, including 46 parents and 45 students, participated in the project. The project included a nutrition class for parents to learn how to read labels and use fresh produce. The project also included physical activities as part of a STEAM class.

Parents were given gift cards to purchase fresh fruit and vegetables and running shoes for their children.
Please provide some observations of things that are going as well or positively surprised you to date around your project.

The program was a success and many families enjoyed the possibility of having access to fresh produce. The surprising factor thus far has been having dads participating in the program and sharing how much they enjoyed learning about the benefits of fresh produce and how to use them to prepare more healthy meals. Students also enjoyed participating in physical activities.

Project Completion at Time of Progress Report*
Please indicate whether your project is complete or in progress. If it is in progress, please estimate the percent complete at the time of this report.

My project is in progress and is approximately 26-50% complete.

Timeline*
If your project is in progress, please indicate whether you are on track with the timelines indicated in your application.

My project is in progress, and we are on track with the timelines indicated in our application.

Are you encountering any problems or challenges in fulfilling the terms of the project agreement?*

No.

Mid-Course Problems or Challenges (Continued)*
If you stated that you are encountering problems or challenges in fulfilling the terms of the grant agreement, provide detail below. Please explain what mid-course corrections you plan to implement to help mitigate those challenges/barriers.

If you are not encountering challenges, please type N/A.

n/a

Mid-Course Community Connections*
Are there any connections within the community that the COHC or a RHIP workgroup can help facilitate that might be helpful with respect to the implementation or success of your project?

No.
Mid-Course Community Connections (Continued)

Please provide detail on the community connections that you feel the COHC or a RHIP workgroup might be able to help with.

Please note, we strive to make connections and break-down siloes whenever possible. We will do our best to facilitate a relationship with the party or parties you mention.

We are a very strong connection with different community partners in the area to serve our students and families.

Additional Reports

If you have any additional dashboards or reports, you may attach the first one here.

This is optional.

Please note, you must attach files one at a time separately, for a maximum of three files.

Please provide a brief description of each document you are attaching.

File Upload/Report 2

If you have an additional report, you may attach it here. Please briefly describe the file you are uploading.

Other Comments for Progress Report

Is there anything else you would like us to know?
FollowUp Files

Applicant File Uploads

No files were uploaded
Form Name:
RHIP Consultant Progress Report

Oregon Health and Science University
Resilience and Belonging Measure

<table>
<thead>
<tr>
<th>FollowUp Snapshot</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount Requested</td>
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<tr>
<td>Organization Contact</td>
</tr>
<tr>
<td>Contact Phone</td>
</tr>
<tr>
<td>Contact Email</td>
</tr>
</tbody>
</table>
| Organization Address    | 3181 SW Sam Jackson Park Road
                          | Portland, OR 97239-3098 |
| Website                 | http://cohealthcouncil.org/ |
| Project Lead email      | shannoja@ohsu.edu       |

RHIP Workgroup:
Upstream Prevention: Promotion of Individual Well-Being

Future State Measure:
Upstream Prevention: Promotion of Individual Well-Being > Establish a resilience measure and increase the number of people who feel they belong by community
Note: * indicates required questions

**Contact Information**

**Organization Name***

Oregon Health and Science University

**Project Name**

Resilience and Belonging Measure

**Date you are submitting this progress report***

06/10/2022

**Name and Title of Submitter***

Camilla Dohlman, Project Manager

**Email Address***

dohlman@ohsu.edu

**Phone Number***

9193702742

**Project Details**

**Progress Report: Primary Activities***

*Please describe the project and primary activities as it's actually unfolding.*

We aim to develop a measure for assessing ‘Belonging’ across Central Oregon’s communities. At this point, we have made progress in four distinct areas: literature review/construct identification, hiring of a project manager, and identifying funding mechanisms to support year 2 and 3 of this project, and recruiting students to aid in the project moving forward.

We conducted a literature review to understand the most current literature on Resilience and Belonging. Through the review, we identified validated measures and aim to solidify a primary measure (for the full representative
sample) and community-specific measures (for specific subpopulations in the region). The deep dive into the literature was conducted using a two-prong approach: exploring recent publications of the Belonging and Resilience generally with a specific eye towards Adults Resilience Measure (ARM)/Child and Youth Resilience Measure (CYRM), and exploring literature specific to the subpopulations identified in our proposal.

Our data informed approach will help guide community-based conversations about group specific understanding of ‘belonging’. Our next steps are therefore to engage communities and champions across the region as we develop the final measure.

We also created a position and hired a full-time project manager. We began this process in January 2022 by creating the position, publishing the job posting, and adapting a matrix for equitable hiring. We received broad interest for the position from across the country. OHSU and OSU-Cascades’ representatives were involved throughout the process. We did an initial phone screening of candidates, then selected five candidates for interviews based on the job posting, skillset and experience objectives, and candidates’ ability to relocate to Central Oregon when applicable. The hiring committee consisted of four members of the research team. Each committee members provided feedback based on the hiring matrix. We made an offer in April and hired our new project manager in May (start date: June 1, 2022).

Additionally, we identified funding mechanisms to support year 2 and 3 of this project. The most promising awards to pursue are from the Robert Wood Johnson Foundation, National Institute of Health, Meyer Memorial Trust and United Way of Central Oregon. Each funder has large awards for community-engaged work and health promotion. At the same time, the focus on health equity among rural populations will allow us to apply for funding specific for rural health promotion. Next steps include preparing project descriptions and tailoring them to each funding opportunity. We will begin to submit Letters of Intent where necessary, and prepare full applications over the summer.

Finally, we have recruited two undergraduate students and one PhD student from OSU to aid in this project moving forward.

**Initial Successes**

*Please provide some observations of things that are going as well or positively surprised you to date around your project.*

As mentioned above, the literature review was conducted with a two-prong approach: exploring recent publications of the Belonging and Resilience generally with a specific eye towards ARM/CYRM, and exploring literature specific to the subpopulations identified in our proposal.

The first prong was centered around our knowledge from TRACES that resilience is nurtured through individual-, relational-, and community-level factors, called “resilience factors” which used the ARM and CYRM measures. We searched the literature for review articles focused on Belonging and Community Resilience (e.g., Allen et al., 2021; King et al., 2022, Mahar et al, 2012) and other literature that used the ARM or CYRM with community-level considerations. Two primary sources for literature searches were explored including the Resilience Research
Center website, and Oregon State University’s online library databases (e.g., PsycInfo) and search terms (e.g., “Belonging, Community ResilienceCRE).

The second prong was centered around literature which measured Belonging at the community-level across the different subpopulations in the Central Oregon region. For example, LGBTQIA+, Indigenous, Latinx, Adults and Older adults, Children, and Rural or Urban contexts. Search terms were centered on the subpopulation. For example, “Resilience” OR “Belonging” AND “LGBTQIA+” was used for literature within the LGBTQIA+ population; “Resilience” OR “Belonging” AND “Indigenous populations” for literature within the Native American community. If these search terms were not providing articles of interest, we would adjust keywords to “Community Belonging” and “LGBTQIA+ community” or “Community Belonging” and “Native American.”

As we explored the literature, several key findings were evident. First, Belonging as a construct is measured in a myriad of ways; moreover, it is conceptualized and operationalized sometimes differently across various subgroups. The literature also provides insights into Belonging-adjacent constructs which are sometimes measured alongside or in place of Belonging. One such Belonging-adjacent construct which was repeatedly used in the literature was Social Capital. The lack of consistency in measuring Belonging prompted us to create a visual (attached) based on constructs and terms we were seeing across the literature within the specific subpopulations. This visual was created to aid in our understanding of how Belonging may be best operationalized and conceptualized within these different subgroups across Central Oregon. From this visual we were also able to better understand which terms are more or less universally used. For example, Emotional Support is commonly considered within Belonging literature across multiple subpopulations. The knowledge gained so far will support community engagement and conversations to develop our final measure.

**Project Completion at Time of Progress Report**

*Please indicate whether your project is complete or in progress. If it is in progress, please estimate the percent complete at the time of this report.*

My project is in progress and is approximately 0-25% complete

**Timeline**

*If your project is in progress, please indicate whether you are on track with the timelines indicated in your application.*

My project is in progress, but we are behind the timelines indicated in our application

**Are you encountering any problems or challenges in fulfilling the terms of the project agreement?**

Yes

**Mid-Course Problems or Challenges (Continued)**
If you stated that you are encountering problems or challenges in fulfilling the terms of the grant agreement, provide detail below. Please explain what mid-course corrections you plan to implement to help mitigate those challenges/barriers.

If you are not encountering challenges, please type N/A.

The timeline for hiring the project manager took longer than anticipated. The project manager is hired through Oregon Health & Science University. The process of creating a new job, having the salary and benefits approved, and having a description posted for a national search was significantly more involved and took more time than expected. The added time was in part due to the COVID-19 pandemic affecting work flows and processes within OHSU administrative structures, but also in part due to regulatory cumbersomeness. Once posted, we were able to move the hiring process forward in a timely manner. We made an offer in April and hired our new project manager in May (start date: June 1, 2022).

Mid-Course Community Connections*
Are there any connections within the community that the COHC or a RHIP workgroup can help facilitate that might be helpful with respect to the implementation or success of your project?

Yes

Mid-Course Community Connections (Continued)
Please provide detail on the community connections that you feel the COHC or a RHIP workgroup might be able to help with.

Please note, we strive to make connections and break-down siloes whenever possible. We will do our best to facilitate a relationship with the party or parties you mention.

We are getting ready to engage communities across Central Oregon and look forward to receiving feedback from COHC and the RHIP work group on our specific plans. We will communicate our outreach plans and count on COHC to suggest specific groups and at times help us to engage with them as we begin this work.

Additional Reports
If you have any additional dashboards or reports, you may attach the first one here.

This is optional.

Please note, you must attach files one at a time separately, for a maximum of three files.
Please provide a brief description of each document you are attaching.

OHSU_working visual_definitions_6.6.22.pdf
Working visual: We created a visual based on terms related to Belonging across the literature within the specific subpopulations. This visual will aid our understanding of how Belonging may be best operationalized and conceptualized within these different groups across Central Oregon.

File Upload/Report 2
If you have an additional report, you may attach it here. Please briefly describe the file you are uploading.

Other Comments for Progress Report
Is there anything else you would like us to know?

N/A
FollowUp Files

Applicant File Uploads

- OHSU_working visual_definitions_6.6.22.pdf
Note. The bubbles are grouped in alignment with the Elements of Belonging in which they map onto
Purpose:

This visual is to aid in our understanding of the literature and the myriad of ways Belonging is conceptualized across different subpopulations. Subgroups in the visual are represented in the region, but it is also important to note that these subgroups are not mutually exclusive. Our literature review has informed the ongoing development of this visual and the unique perspectives of conceptualizing (and operationalizing) belonging within these subpopulations. Using our knowledge from TRACES, resilience is nurtured through individual-, relational-, and community-level factors, which we call “resilience factors” (Masten, 2018). Within the community-level resilience factor, Belonging was found to be the lowest scoring item in Central Oregon. To improve and enhance individuals’ sense of belonging at the community-level, we are using a data-informed approach to understand and explore how Belonging is measured and conceptualized across various subpopulations. This effort will also hopefully aid in the selection and/or co-creation of community specific Belonging/Resilience measures.

Definitions:

Resilience is a process of positive adaptation in the face of adversity. It is nurtured through individual-, relational-, and community-level factors, which we call “resilience factors” (Masten, 2018). The current project is focusing, in part, on Belonging as a community-level factor. According to Mahar and colleagues, Belonging is defined as a subjective feeling of value and respect derived from a reciprocal relationship to an external referent that is built on a foundation of shared experiences, beliefs, or personal characteristics (Mahar et al., 2012). The elements of Belonging with their definitions are described below.

Subjectivity: is a perception of belonging that is unique to the individual and centered on value, respect, and fit, and feeling of how membership makes the individual feel.

Groundedness: refers to the referent group which is the focus of an individual’s feeling of belongingness. This referent can be a person or persons, place, organization, or cultural worldview.

Reciprocity: feelings of belonging are shared (mutual, bidirectional) by the social partner or referent group.

Dynamism: suggests that belonging is dynamic (not static) and malleable and can change over time. Belonging can be specific to context and shaped through an individual’s transactions with socio-cultural environments/conditions. These environmental conditions can enable and/or hinder feelings of belonging.

Self-Determination: the right of an individual to choose to interact with a referent group. Self-determination reflects the sense of choice, autonomy, and/or power an individual perceives when (actively) choosing to belong to a referent group (e.g., people, places, organizations, and/or cultures one chooses).