Aim/Goal

Create and enhance cross-sector collaborations and programming so that all Central Oregonians have equitable access to skilled, evidence-based substance and alcohol misuse prevention, intervention, treatment, and recovery services that are culturally responsive and trauma-informed.

Future State Measures

1. Decrease binge drinking among adults.
2. Decrease vaping or e-cigarette use among youth.
3. Increase services for alcohol or drug dependence for individuals newly diagnosed.
4. Reduce mental health/substance abuse ED visits in Madras, Prineville and Warm Springs.

*See full measures on next page.

AGENDA

3:30-3:45 PM  Welcome, Introductions, Announcements, Packet Review
3:45-4:50 PM  Implementation Plan Development
  • Binge drinking prevention strategy: Rethink the Drink Campaign Exploration
  • Healthy Retail Assessment Project Launch Conversation
  • Naloxone Grant RFP development
4:50-5:00 PM  Wrap-Up and Next Steps

Working Document: https://docs.google.com/presentation/d/1O8HdpfQPrrK-9T8K0tKUycX3kd_abi3FtoS4Utva0cM/edit?usp=sharing
**Substance and Alcohol Misuse: Prevention and Treatment**

<table>
<thead>
<tr>
<th>Future State Measures – Full Detail</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. By December 2023, only 25% of adults aged 18 to 34 in Central Oregon reported binge drinking on at least one occasion over the past 30 days.</td>
</tr>
<tr>
<td>2. By December 2023, reduce the percentage of Central Oregon 11th grade students who report vaping or using e-cigarettes by 10% percent in each county, resulting in only 20.2% in Crook County, 26.5% in Deschutes County, and 14.9% in Jefferson County (OR Student Health Survey).</td>
</tr>
<tr>
<td>3. By December 2023, 30% of Medicaid members (ages 13 and older) who are newly diagnosed with alcohol or other drug dependence and who began treatment within 14 days of the initial diagnosis will have two or more additional services for alcohol or other drug dependence within 30 days of their initial treatment. (Quality Incentive Measure (QIM))</td>
</tr>
<tr>
<td>4. By December 2023, Mental Health/Substance Abuse Emergency Department visits per 1,000 will be reduced by 25% in highest rate locations:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Warm Springs</th>
<th>Prineville</th>
<th>Madras</th>
</tr>
</thead>
<tbody>
<tr>
<td>35.3</td>
<td>15</td>
<td>13.8</td>
</tr>
</tbody>
</table>
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.

Involves 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 chances, 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.
Substance and Alcohol Misuse: Prevention & Treatment

Background: Why are we talking about this?
1. 1980s social norming of alcohol increases / legalization of brew pubs on Oregon
2. 1990s opioids are introduced for pain treatment
3. 2007 E-cigarettes are introduced in the US
4. 2016 marijuana is legalization in Oregon

1 in 10 Oregonians struggle with drugs or alcohol costing the state $6 billion/year. These illnesses are common, recurrent and treatable. Research indicates that preventing substance misuse can have far reaching implications for individuals, families and our community, including impact on education, community safety, health care, employment and quality of life.

Current Condition: What’s happening right now?
- As of 2019, 19 cases of vaping related illnesses have been reported in OR, leading to 2 deaths
- Oregon has one of the highest rates of misuse of prescription opioids in the nation
- Deaths from methamphetamine overdoses in Oregon are up 400% between 2012 and 2017

Current State Metrics:
1. 37.4% of adults age 18-34 in Central Oregon reported binge drinking at least once in the past 30 days
2. 11th graders vaping or using e-cigarettes: Crook 22.6%, Deschutes 29.4%, Jefferson 16.6%
3. 7.8% of Medicaid members diagnosed with alcohol or drug dependence and who began treatment within 14 days of diagnosis, had 2 or more additional services within 30 days of initial treatment
4. Mental health / substance abuse ED visits per 1,000: Warm Springs 47, Prineville 20.1, Madras 17.2

Goal Statement: Where do we want to be in 4 years?
Aim/Goal
Create and enhance cross-sector collaborations and programming so that all Central Oregonians have equitable access to skilled, evidence-based substance and alcohol misuse prevention, intervention, treatment, and recovery services that are culturally responsive and trauma-informed.

Future State Metrics - By December 2023:
1. Decrease binge drinking among adults.
2. Decrease vaping or e-cigarette use among youth.
3. Increase additional services for alcohol or drug dependence for individuals newly diagnosed.
4. Reduce mental health/substance abuse emergency department visits in Madras, Prineville and Warm Springs.

Analysis: What’s keeping us from getting there?
- Targeted seductive marketing encourages use
- Minimization of risk & harm impact prevention & care
- Data is not easily accessible or known
- Historical investment patterns impact SUD services
- Alcohol culture dominates the local lifestyle
- Inadequate screening & guidance at all contact points
- Trauma significantly impacts well-being
- Inaccessible & inequitable housing options
- Inconsistent & ineffective health messaging
- Pervasive stigma impedes prevention & access to care

Date updated: 1.2023

Strategic Direction: What are we going to try?
- Expanding Prevention and Community Education
- Broadening Partnerships to Align Efforts
- Diversifying and Expanding Intervention and Treatment
- Accelerating Systems, Policy and Environmental Change
- Formalizing Diverse, Welcoming Approaches

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

<table>
<thead>
<tr>
<th>When</th>
<th>What</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.21</td>
<td>Binge Drinking Regional Assessment Consultant Hired</td>
</tr>
<tr>
<td>03.22</td>
<td>Treatment referral card distribution Funded</td>
</tr>
<tr>
<td>03.22</td>
<td>Peer Support Specialist Org Funding Funded</td>
</tr>
<tr>
<td>04.22</td>
<td>Peer Support Specialist Sustainability Consultant Hired</td>
</tr>
<tr>
<td>01.23</td>
<td>Healthy Retail Assessment Funded</td>
</tr>
<tr>
<td>01.23</td>
<td>Youth Vaping RFP In Development</td>
</tr>
</tbody>
</table>

Follow-Up: What’s working? What have we learned?
{insert}
# Five-Year Investment Overview

**All Workgroups**  
*January 2020–December 2024*

<table>
<thead>
<tr>
<th>Workgroup</th>
<th>Spent</th>
<th>Available</th>
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<tbody>
<tr>
<td><strong>Budget</strong></td>
<td>$12,000,000</td>
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<tr>
<td><strong>Spent</strong></td>
<td>$7,139,584.04</td>
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<tr>
<td><strong>Available</strong></td>
<td>$4,860,416</td>
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</table>

<table>
<thead>
<tr>
<th>Workgroup</th>
<th>Spent</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Address Poverty</td>
<td>$941,993.79</td>
<td>$1,058,006.21</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>$1,914,157.00</td>
<td>$85,843.00</td>
</tr>
<tr>
<td>Physical Health</td>
<td>$1,117,158.56</td>
<td>$882,841.44</td>
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<tr>
<td>Stable Housing</td>
<td>$1,124,654.00</td>
<td>$875,346.00</td>
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<tr>
<td>Substance and Alcohol Misuse</td>
<td>$617,494.69</td>
<td>$1,382,505.31</td>
</tr>
<tr>
<td>Upstream Prevention</td>
<td>$1,424,126.00</td>
<td>$575,874.00</td>
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</tbody>
</table>
### Overview

<table>
<thead>
<tr>
<th></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>$617,494.69</td>
<td>$1,382,505.31</td>
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<tr>
<td>Yearly</td>
<td></td>
<td>$17,877</td>
<td>$0.00</td>
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</table>

### By Future State Measure (5 year)

<table>
<thead>
<tr>
<th></th>
<th>Budget*</th>
<th>Spent</th>
<th>Available</th>
<th>Currently Allocated</th>
<th>Projected Available</th>
<th>Notes [5]</th>
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</thead>
<tbody>
<tr>
<td>Binge Drinking</td>
<td>$488,750.00</td>
<td>$150,553.69</td>
<td>$338,196.31</td>
<td></td>
<td>$338,196.31</td>
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<tr>
<td>Vaping E-Cigarettes</td>
<td>$488,750.00</td>
<td>$36,281.00</td>
<td>$452,469.00</td>
<td>$350,000.00</td>
<td>$102,469.00</td>
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<tr>
<td>SUD Services</td>
<td>$488,750.00</td>
<td>$202,830.00</td>
<td>$285,920.00</td>
<td>$200,000.00</td>
<td>$85,920.00</td>
<td></td>
</tr>
<tr>
<td>ED visits</td>
<td>$488,750.00</td>
<td>$239,111.00</td>
<td>$249,639.00</td>
<td></td>
<td>$249,639.00</td>
<td></td>
</tr>
</tbody>
</table>

*Budget for each FSM reflects the agreed upon 5 year 'soft budget' of $500,000 minus the portion contributed to shared minigrant budget.

### 2023 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>
</tr>
</thead>
<tbody>
<tr>
<td>Upstream Public Health</td>
<td>Standard Grant Sustaining Peer Services Application (2020-2024 RHIP)</td>
<td>Upstream Healthy Retail Community Assessment for Central Oregon</td>
<td>$34,792.00</td>
<td>1.23</td>
<td>Reduce the percent of 11th graders who report vaping or using e-cigarettes</td>
<td></td>
</tr>
</tbody>
</table>
Responding to the state of alcohol in Oregon

Rethink the Drink is a health communications initiative of the Oregon Health Authority’s Public Health Division. The brand's goal is to decrease excessive drinking and the harm it causes in order to build healthier, safer communities across Oregon.

<table>
<thead>
<tr>
<th>A widespread issue</th>
<th>Heavy costs</th>
<th>The human toll</th>
</tr>
</thead>
<tbody>
<tr>
<td>Many Oregonians – more than 1 in 5 – drink excessively. Most of these people do not have an alcohol use disorder and many don’t even realize they’re drinking excessively.</td>
<td>Excessive drinking imposes heavy costs on all of us whether we drink or not – from children and families to businesses and communities. Economically, excessive drinking costs Oregon $4.8 billion per year.</td>
<td>Excessive alcohol consumption is the third leading cause of preventable death among Oregonians, responsible for more than 2,000 deaths each year. Across the U.S., excessive alcohol consumption accounted for 20.3% of deaths among adults aged 20 to 49 years.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Collaborative effort</th>
<th>A statewide first</th>
<th>Moving forward together</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rethink the Drink was developed in collaboration with many partners across the state including county health departments, community-based organizations and other state agencies. Many voices have been involved in the development of the brand and its first campaign.</td>
<td>Rethink the Drink is the first statewide communications brand to specifically address excessive alcohol use and all of the associated harms, with adults 21 and over.</td>
<td>Together, we can address this issue that is an underlying cause of a variety of harms to improve health, increase productivity, and build safer environments for all.</td>
</tr>
</tbody>
</table>

It’s time to work collaboratively with partners across Oregon to broaden the conversation about alcohol in our state.

Excessive alcohol use is a public health problem

Health harms include:

- Liver disease
- Heart disease & stroke
- Certain cancers
- Depression & anxiety
- Crime & domestic violence
- Motor vehicle crashes
- Injuries
- Death, from any cause
- Alcohol use disorders
The launch of Rethink the Drink's first campaign ran June 27 – September 4, 2022.

OHA enlisted Portland-based cause-marketing communications firm Coates Kokes to help build this brand and its first campaign.

Creative elements were developed in English, Spanish and Spanglish.

In this first campaign, Rethink the Drink ran ads across both traditional and non-traditional media including:

- TV in all 4 of the state’s major media markets – Portland, Eugene, Medford, Bend – and cable for areas outside of those markets - Including Univision, Azteca, ESPN Deportes and Telemundo
- Over-the-top TV (streaming services such as Peacock, and/or devices such as Roku)
- Radio on all 14 of Oregon’s Spanish speaking stations and many rural stations too
- Streaming audio including services such as Spotify, Audacy, iHeart and Westwood One
- On websites via pre-roll videos and display ads
- Social media including YouTube, Facebook and Instagram
- Newspapers with multiple 4-color ads in 31 small town papers across the state

Value added interviews with key OHA spokespeople were negotiated into news segments that ran 20 times on KVAL in Eugene and KPTV in Portland

Where possible, we used behaviorally segmented targeting to reach people by drinking levels (abstainers, casual drinkers and excessive drinkers) so that we could engage people, whatever their relationship to alcohol – and so that we could see how their reactions varied by that relationship

OHA invested $847,000 in the inaugural Rethink the Drink paid media campaign buy. With this level of funding, we were able to effectively reach our target audience. It also allowed us to use multiple types of media and experiment with different tactics, such as geofencing and retargeting, to see what worked best

The campaign was monitored continuously with windows every two weeks to make adjustments, as analytics suggested

First campaign results

**Digital**
- Impressions: 13,358,636
- CTR: 9.36%
- Conversions: 2,176
- Completed video views:
  - Pre-roll: 64.21%
  - OTT: 94.7%
  - YouTube: 59.76%

**Analogs**
- TV/Cable impressions: 24,960,060
- TV/Cable reach: 94.5%
- TV/Cable frequency: 7.1+
- Print in rural Oregon:
  - 380,999
- Radio: across 13 rural and 13 Spanish stations

**Website**
- Visits: 38,661
- Direct traffic: 16%
- Organic traffic: 16%

**PR**
- News stories: 87
- Impressions: 12,195,270
- PR value: $178,792

**Social**
- Facebook reach: 641,469
- Facebook impressions: 2,913,628
- Instagram reach: 396,285
- Instagram impressions: 1,667,983

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**First campaign results metrics**

- Impressions: How many times our ads were seen
- CTR: How many times our ads were clicked on divided by the number of impressions; the industry average for “health and medical” ads is 0.31%
- Conversions: Did the audience take any additional steps once they visited the website? e.g., signing up for email alerts
- Reach: The percentage of the audience who saw our ads
- Frequency: The average number of times a person in the audience saw our ads
We'd like to hear from you

OHA invites additional collaboration with this effort because changing the conversation around alcohol in Oregon requires a diverse set of voices. **Together, we can make a meaningful difference to our communities.**

Please reach out to Rebecca Garza at rebecca.garza@dhsoha.state.or.us.

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**Infrastructure and assets to leverage**

- Not covered in the above budget is all of the other infrastructure OHA has created including audience research (formative and creative), brand development (brand name, logo, colors, fonts, etc.), website development in English and Spanish, social media development and management on Facebook and Instagram, earned media, and technical assistance to partners.

- These are vital components that leave Rethink the Drink poised to continue to change the dialogue about alcohol in our lives – across the state and in specific communities.

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**We need a new way to think about alcohol.**

**A new conversation around alcohol**

Alcohol is a complex issue with collective consequences that affect all communities. It’s time to work together across sectors in order to have more balanced, nuanced conversations about decreasing excessive alcohol use harms.
Did you know that April is Alcohol Awareness month?

In honor of this important time, Rethink the Drink is hosting several training opportunities to learn together with partners across Oregon.

While we will focus on alcohol as an example in some trainings, we invite any partner to join to build skills we all need in our work supporting communities.

Alcohol as a community problem – show us the numbers

**When** 3/15, 10-11:30am

**What** In this session we’ll have time with Oregon’s Alcohol Epidemiologist and Research Analysts to discuss how excessive alcohol affects communities, alcohol data from Oregon, and community-level solutions.

**How** [Register here](#)

Rethink the Drink 101

**When** 3/23, 11am-12:30pm

**What** In this session we will introduce the Rethink the Drink brand including the history and purpose. We will share our updated toolkit for partners with new content for Alcohol Awareness month, technical assistance opportunities, and talk about how partners can utilize Rethink the Drink materials in their communities.

**How** [Register here](#)

News Media training

**When** 4/28, 10:30am-12pm

**What** In this session Sue and Lance from Coates Kokes, the media contractor for Rethink the Drink, will help train partners on pitching your story to news media and preparing for news interviews.

**How** [Register here](#)

RTD Evaluation Release and Celebration

**When** 4/27, 10-11:30am

**What** Rethink the Drink is a first of its kind brand. OHA worked with RMC Research to evaluate how Rethink the Drink’s first campaign in Summer 2022 affected people in Oregon.

Join this session to be among the first people to hear the results from this evaluation. We will review the qualitative and quantitative findings and celebrate the monumental achievement of investing in communications research to address excessive alcohol use in Oregon.

**How** [Register here](#)

Storytelling for Change (2-Part workshop)

**When** 4/4, 11am-12:30pm
4/7, 11:30am-1pm

**What** Day 1 we will discuss storytelling skills, and give tips for combining data and stories for change. Day 2 will have small group time to practice and support each other’s storytelling goals.

**How** [Register here for 4/4](#)  [Register here for 4/7](#)