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 Activities
  • Youth Engagement in Vaping Prevention
  • Overdose Prevention & Increasing Detox Beds & Services Discussion
4:50-5:00 PM  Wrap-up and next steps
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>
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<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>
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<table>
<thead>
<tr>
<th></th>
<th>Warm Springs</th>
<th>Prineville</th>
<th>Madras</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<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.

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 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.
Background: Why are we talking about this?

- **1980s**: Social norming of alcohol increases / legalizaton of brew pubs on Oregon
- **1990s**: Opioids are introduced for pain treatment
- **2007**: E-cigarettes are introduced in the US
- **2016**: Marijuana is legalization in Oregon
- **2019**: Surgeon General Report on Marijuana

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

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>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.21</td>
<td>Binge Drinking Regional Assessment Consultant</td>
<td>Funded</td>
</tr>
<tr>
<td>03.22</td>
<td>Treatment referral card distribution</td>
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</tr>
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<td>03.22</td>
<td>Peer Support Specialist Org Funding</td>
<td>Funded</td>
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<tr>
<td>04.22</td>
<td>Peer Support Specialist Sustainability Consultant</td>
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<td>01.23</td>
<td>Healthy Retail Assessment</td>
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<td>07.23</td>
<td>Youth Vaping RFP</td>
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<tr>
<td>07.23</td>
<td>Naloxone Access &amp; Overdose Prevention</td>
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<tr>
<td>08.23</td>
<td>Binge Drinking Prevention Campaign RFP</td>
<td>Released</td>
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</table>

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

{insert}
UPSTREAM PUBLIC HEALTH

HEALTHY RETAIL

COMMUNITY LISTENING SESSION
WE WILL TALK ABOUT ACCESS TO FOOD, YOUR COMMUNITY, AND COMMERCIAL TOBACCO USE

DATES AND TIMES:
WEDNESDAY, AUGUST 30TH, 7:00PM
THURSDAY, AUGUST 31ST, 6:30PM
FRIDAY, SEPTEMBER 1ST, 7PM
OPTION FOR IN PERSON

VIRTUAL OVER ZOOM
FOR CENTRAL OREGON RESIDENTS OF DESCHUTES, JEFFERSON, CROOK AND NORTH KLAMATH COUNTIES

FOR MORE INFO: HEALTHYRETAIL@UPSTREAMPUBLICHEALTH.ORG

*Commercial tobacco is made by corporations, contains chemical additives, and is sold for recreational use. Traditional tobacco on the other hand, is used for ceremonial, traditional, and medicinal use.
PARA LOS RESIDENTES DE CONDADO DE CENTRAL OREGON, DESCHUTES, JEFFERSON, CROOK Y NORTH KLAMATH

UPSTREAM PUBLIC HEALTH

COMERCIO SALUDABLE

sesión de escucha comunitaria

HABLAREMOS DEL ACCESO A LOS ALIMENTOS, SU COMUNIDAD Y EL CONSUMO DE TABACO COMERCIAL

VIA ZOOM

PARA LOS RESIDENTES DE CONDADO DE CENTRAL OREGON, DESCHUTES, JEFFERSON, CROOK Y NORTH KLAMATH

El tabaco comercial es fabricado por empresas, contiene aditivos químicos y se vende para uso recreativo. El tabaco tradicional, en cambio, se utiliza para ceremonias, tradiciones y medicina.

Para más información: healthyretail@upstreampublichealth.org
**Distribution**
Multiple stakeholders mentioned in rural areas, there's a serious lack of local produce. Noting that it's a struggle to distribute these products and keep them in good condition, especially without proper refrigeration. Moreover, one stakeholder specifically added that an initiative to bring refrigerated food trucks to food pantries to distribute food in the more rural areas would be astronomically beneficial. Additional stakeholder from a food pantry expanded upon this idea noting that by the time produce gets to the more rural areas and then has to sit on a shelf, it spoils.

Additionally, the idea of having farmers’ markets in more communities across central Oregon was mentioned several times.

**Transportation**
An astounding number of stakeholders mentioned a lack of public transportation noting that the geographic expanse of Central Oregon creates significant distances between areas. As a result, transportation options for individuals are limited and not very convenient, particularly when it comes to bringing home a substantial amount of food. Public transportation is generally insufficient for this purpose, and one can only manage to acquire a bag or two of groceries at a time. However, this limited supply does not last for an extended period. Consequently, individuals face the dilemma of either constantly traveling to access grocery stores or settling for what is available nearby in order to ensure they and their children have enough food to eat.

**Socioeconomics**
The topic of the socioeconomic status of the community and inflation was raised on several occasions. This discussion encompassed the challenges faced by individuals who may not have the means to attend events, particularly if they involve any form of cost. Mentioning again the lack of transportation in the region. Additionally, it has been recognized by a few stakeholders that it becomes difficult to actively address community issues when one’s primary focus is merely to secure their livelihood.

**Alcohol & Tobacco**
A stakeholder mentioned that while they don't see a lot of tobacco use in daily encounters, or individuals actively smoking, there are noticeable indications or effects associated with tobacco consumption, specifically lung cancer among the individuals they serve. A stakeholder working in the school system mentioned how bad vaping is implying that it was getting out of hand.

Multiple stakeholders mentioned alcohol being an issue. Continuously it was mentioned that the presence of alcohol consumption is quite prominent in this small community-like setting, "especially among high school age kids" They expressed that given the limited
entertainment options, it’s unsurprising that socializing often takes place with alcohol. Additionally, the prevailing Western cowboy culture, including rodeo activities, tends to foster a drinking environment. Therefore, alcohol usage is prevalent as well and becoming a “pretty normal and accepted thing.”

**Community Capacity**

Multiple stakeholders have expressed concerns about the limited capacity within their organization, which is hindering progress in the areas they wish to focus on. Additionally, some stakeholders have pointed out a lack of capacity within the community. One significant challenge in this regard is attracting attendees for events in Central Oregon, as it proves difficult to effectively reach individuals in the region. Moreover, meeting both the interests and availability of the community poses a demanding task. It appears that there is a disconnect among individuals, whether they belong to the broader community or organizations aiming to address important matters. This disconnect may be attributed to the limited number of community members available to volunteer their time and effort for these issues.

**Education**

Many stakeholders mentioned a lack of education around food, one stakeholder noting that providing additional education on the art of preparing food to enhance its flavors or on the skill of pairing ingredients with existing dishes one knows how to cook, would be beneficial. This is particularly important considering the limited variety of produce available in some parts of the region. Moreover, they added that it would be valuable to teach individuals how to cook less popular and more readily available vegetables like radishes and turnips, for example.

**Additional**

It is important to engage with individuals on their terms, both in terms of their physical presence and their state of mind. Merely entering a situation to identify aspects that require improvement is not sufficient. Instead, we must be prepared to proactively inquire about how we can assist individuals in achieving the changes they desire.

Warm Springs was mentioned on three occasions as the community with the most food insecurity.

“*I feel like La Pine seems to be forgotten often with resources that are available in other areas of Central Oregon.*”

“*Land and water for growing food is a real issue in some of the areas here.*”

There is a great need for an individual who can serve as a champion and establish connections within the Latinx community to gain a deeper understanding of their needs. A
person like that would play a key role in bridging cultural gaps and enhancing our engagement within this community.

“Prineville is hard to reach, you really cannot force anything onto them.”