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

Join Zoom Meeting
https://us02web.zoom.us/j/85737344809?pwd=R1VtamUwbktCVDg2MjBOWGlybWJWQT09

Join by phone:
+1 253 215 8782
Meeting ID: 857 3734 4809
Passcode: 813612

September 19, 2023
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

11:00-11:15 AM Welcome, Land Acknowledgement, Introductions, Announcements

11:15-12:20 PM Implementation Small Group Work
• ALICE Investment & Child Care
• Senior Food Insecurity RFP Development

12:20-12:30 AM Wrap Up & Next Steps

Working Document: https://docs.google.com/presentation/d/1jYwyGwMttUj2QtW2INBR9cijl_4HaS1Ygqw_28uLg/edit?usp=sharing

Workgroup Budget: https://docs.google.com/spreadsheets/d/1Gw9dL6ilRe1olGhJRMIoxg9pEUofJ-KzUSWncBbEX8/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>2023 Central Oregon Graduations Rate for Economically Disadvantaged</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crook</td>
<td>76.60%</td>
</tr>
<tr>
<td>Deschutes</td>
<td>77.30%</td>
</tr>
<tr>
<td>Jefferson</td>
<td>83.40%</td>
</tr>
</tbody>
</table>

2a. By December 2023, decrease the % of total population reported as food insecure by 2 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>

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%
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.”
RHIP Workgroup Guiding Principles

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 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?

1990s Mill Closures / Timber Industry Decline
- The Great Recession
  - Decreasing safety net – “War on Poor”
  - Local workforce displacement
  - Widening Opportunity Gap

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.

2000s Population Growth in Central Oregon

The Great Recession
- Decreasing safety net – “War on Poor”
- Local workforce displacement
- Widening Opportunity Gap

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.

2010s
- Population Growth in Central Oregon
- The Great Recession
  - Decreasing safety net – “War on Poor”
  - Local workforce displacement
  - Widening Opportunity Gap

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?)

<table>
<thead>
<tr>
<th>When</th>
<th>What</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/21</td>
<td>Invest in programs to increase HS graduation rates</td>
<td>Funded</td>
</tr>
<tr>
<td>02/22</td>
<td>Invest in regional ALICE listening sessions</td>
<td>Funded</td>
</tr>
<tr>
<td>02/22</td>
<td>Invest in programs to decrease food insecurity</td>
<td>Funded</td>
</tr>
<tr>
<td>01/23</td>
<td>Sr. Food Insecurity Measure Development</td>
<td>RFP Released</td>
</tr>
<tr>
<td>05/23</td>
<td>ALICE Investment Strategy</td>
<td>In Development</td>
</tr>
<tr>
<td>06/23</td>
<td>Sr. Food Insecurity RFP</td>
<td>In Development</td>
</tr>
</tbody>
</table>

Follow-Up: What’s working? What have we learned? {insert}
### 2023 Budget

#### Overview

<table>
<thead>
<tr>
<th></th>
<th>Budget</th>
<th>Spent</th>
<th>Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>5-Year</td>
<td>$2,000,000</td>
<td>$941,993.79</td>
<td>$1,058,006.21</td>
</tr>
<tr>
<td>Cycle to Date [9]</td>
<td>$1,500,000</td>
<td>$941,993.79</td>
<td>$558,006.21</td>
</tr>
<tr>
<td>Yearly</td>
<td>$500,000</td>
<td>$0.00</td>
<td>$558,006.21</td>
</tr>
<tr>
<td>Yearly Mini-Grant</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Yearly Standard Grant</td>
<td>$500,000</td>
<td>$0.00</td>
<td>$500,000</td>
</tr>
</tbody>
</table>

#### By Future State Measure (5 year)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>ALICE</td>
<td>$485,499.40</td>
<td>$45,700.00 [6]</td>
<td>$439,799.40</td>
<td></td>
<td>$439,799.40</td>
<td></td>
</tr>
<tr>
<td>Food Insecurity</td>
<td>$485,499.40</td>
<td>$307,092.00 [7]</td>
<td>$178,407.40</td>
<td>$150,000.00</td>
<td>$28,407.40</td>
<td></td>
</tr>
<tr>
<td>Housing/Transportation</td>
<td>$485,499.40</td>
<td>$43,200.00 [8]</td>
<td>$442,299.40</td>
<td></td>
<td>$442,299.40</td>
<td></td>
</tr>
<tr>
<td>High School Graduation</td>
<td>$518,501.79</td>
<td>$521,001.79</td>
<td>$-2,500.00</td>
<td></td>
<td>$-2,500.00</td>
<td>Measure budget adjusted due to HS Grad overspending</td>
</tr>
</tbody>
</table>

*Budget for each FSM reflects the agreed upon 5 year 'soft budget' of $493,750 minus the portion contributed to shared minigrant budget.
## Five-Year Investment Overview
### All Workgroups
**January 2020–December 2024**

<table>
<thead>
<tr>
<th>Workgroup</th>
<th>Available</th>
<th>Spent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address Poverty</td>
<td>$4,390,998</td>
<td>$7,609,001.74</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>$1,058,006.21</td>
<td>$1,954,157.00</td>
</tr>
<tr>
<td>Physical Health</td>
<td>$45,843.00</td>
<td>$1,117,138.56</td>
</tr>
<tr>
<td>Stable Housing</td>
<td>$882,841.44</td>
<td>$1,129,654.00</td>
</tr>
<tr>
<td>Substance and Alcohol Misuse</td>
<td>$870,346.00</td>
<td>$1,041,912.39</td>
</tr>
<tr>
<td>Upstream Prevention</td>
<td>$958,087.61</td>
<td>$1,424,126.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$7,241,449.39</strong></td>
<td><strong>$13,325,001.74</strong></td>
</tr>
</tbody>
</table>