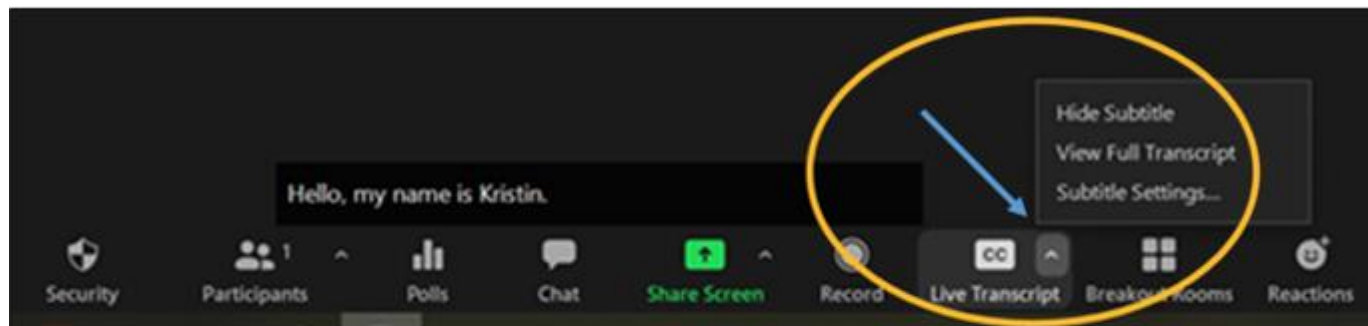


Closed Captions

- Pueden acceder a los subtítulos en español a través del enlace compartido en el chat.

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For English Closed Captions:



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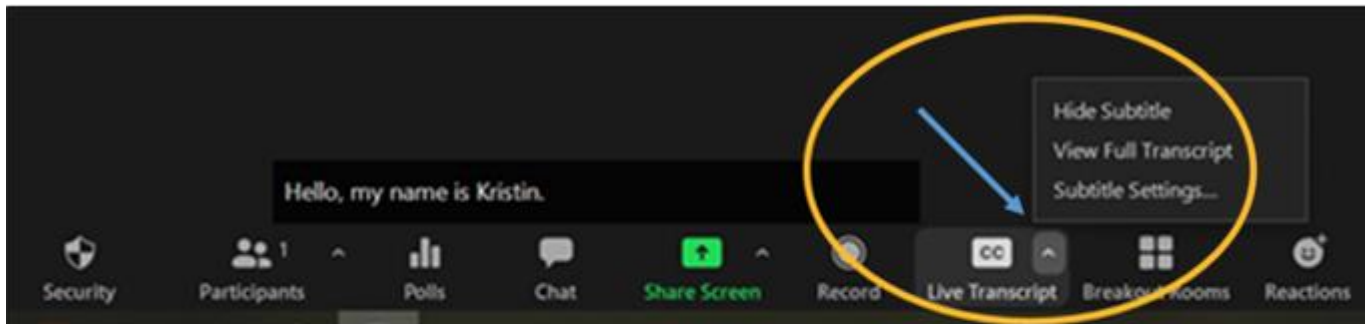
OREGON
HEALTH
AUTHORITY

10/21/24

**State Health Assessment Steering
Committee Meeting
December 9, 2024**

Closed Captions

- Pueden acceder a los subtítulos en español a través del enlace compartido en el chat.
- For English Closed Captions:



Click the small arrow next to “CC Live Transcript” to access caption controls. You can hide the subtitles or view the full transcript.

Public Meeting

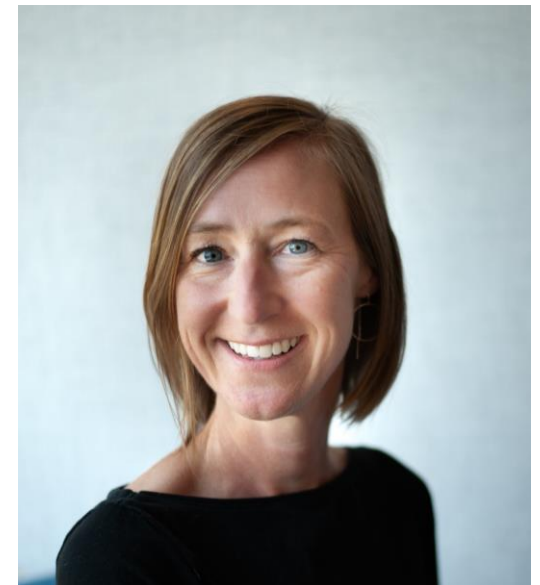
- Members of the public welcome!
- Conversation space is held for committee members
- We will hold space for public comments in the final 10 minutes of the meeting.
 - If there are multiple members of the public who would like to speak we will limit speaking time to 2 minutes per person

Agenda

- Welcome back!
- Mission update
- Reflections and Celebrations from 2024 SHA Steering Committee
- Up next! Sneak peak early 2025 conversations

OHA Staff

- Jameela- Steering Committee Lead, Community Engagement
- Rose- Data/Assessment Lead
- Victoria- SHA Lead, Internal Engagement and Communications
- Sara- Manager; Fiscal and Leadership Support



MetGroup Facilitation Team



Kirsten Gunst, Senior Director



Debra Clark, Director



Kristin Gimbel, Executive Vice
President

Group Agreements

- 1. Lean forward, lean back.** *Share space. Allow room for different opinions. Don't be afraid to share your perspective! This is a judgment-free zone.*
- 2. Curiosity is queen.** *Be open to continuous learning along the way.*
- 3. Explain and unpack jargon and acronyms.**

4. Be present, be authentic. *Show up as fully as you can in the way that is most comfortable for you. ("Be present, be authentic", as a way to invite others to feel comfortable being present at the table as themselves, and meet others in the same way?)*

5. Honor all experiences and expertise. *Appreciate others as human beings with abundant and interconnected experiences.*

6. Extend grace to each other and to ourselves. *Assume best intentions.*

Mission

We draw on community voices, experiences, and ideas to shape state health focus areas and solutions so that all people living in Oregon have the resources and opportunities to thrive. It is important to recognize the government-to-government relationship between the state of Oregon and the Nine Federally Recognized Tribes in honoring tribal sovereignty and the role Tribes play in improving health in tribal communities.

- Defined by place, every region and corner of the State.
- Opted to use the terminology “living in Oregon” vs. “Oregonians” as everyone may not identify as that.



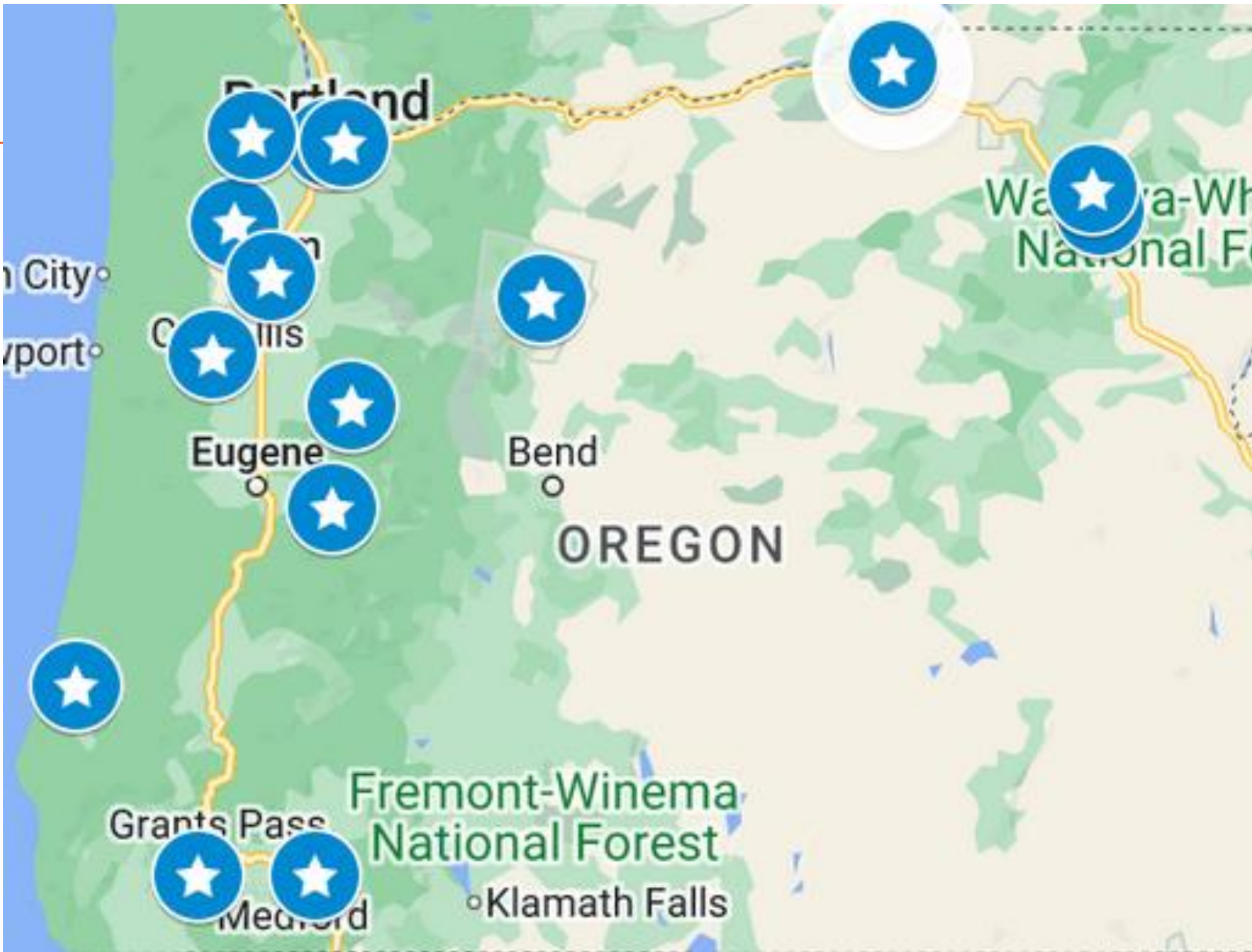
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Reflections and Celebrations

Committee Established


- 21 Committee Members as of 12/2024
- Over 30 members recruited and onboarded
- Life circumstance or capacity most common reason for leaving



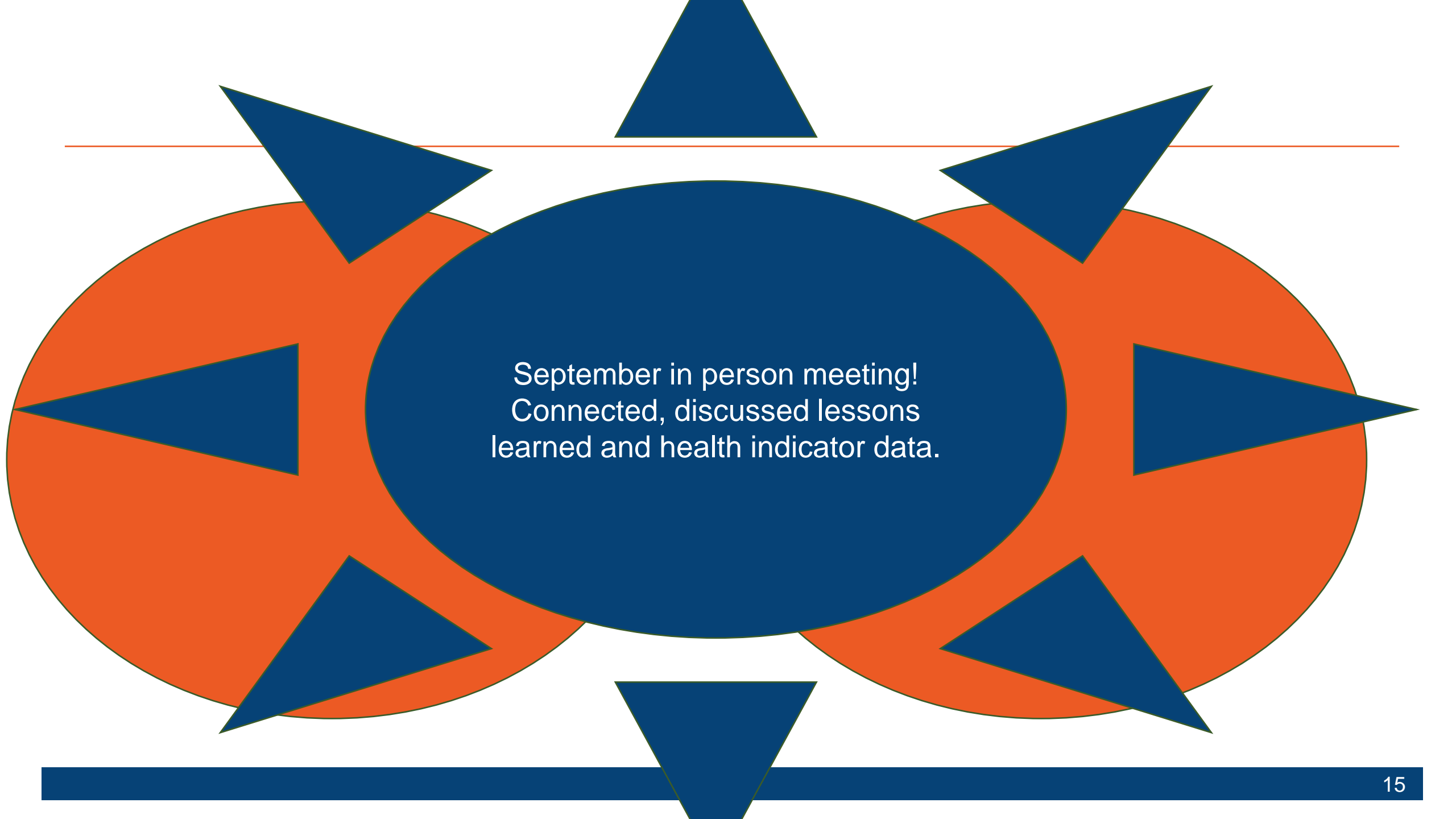




Relationships; across the committee and with our team. We recognize and acknowledge the importance of building trust.



Full Committee Meetings:
15 meetings in 9 months
28 hours regular meeting time
10 hours in person meeting



September in person meeting!
Connected, discussed lessons
learned and health indicator data.

3 Data Ad Hoc Spaces
270 Minutes

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Community Engagement
Subcommittee

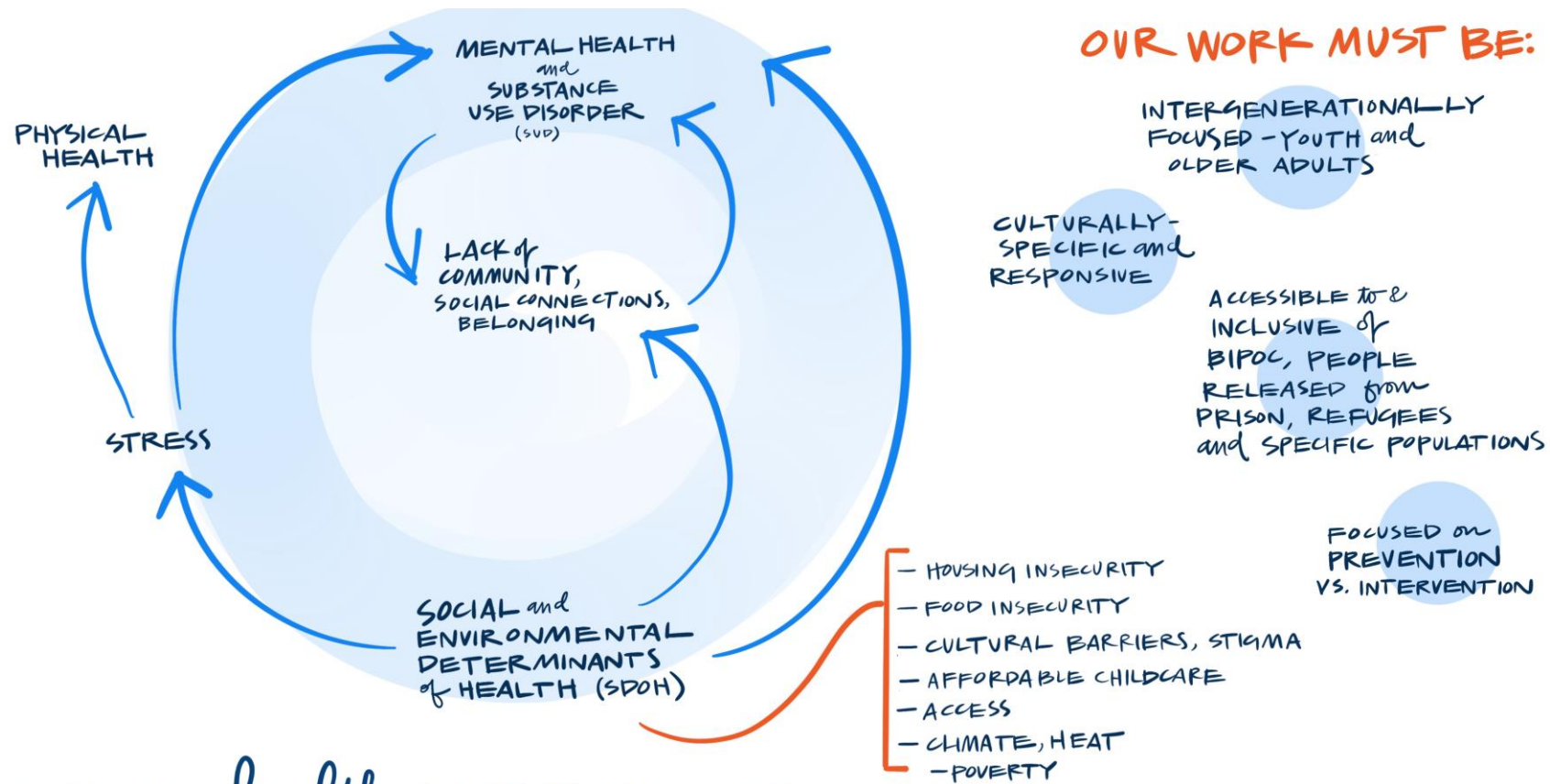
270 Minutes

Mission Vision and Values
established



Health Topic Priorities Identified

We've heard you!



STATE health ASSESSMENT

STEERING COMMITTEE MEETING | OCTOBER 21, 2024

REILLY DOW
for METROPOLITAN
GROUP



2024 State Public Health Indicators
established!

GAP TOPIC AREAS

- ### INFECTIOUS DISEASE
- PREVENTABLE ILLNESSES
 - COVID

- ### INJURY VIOLENCE PREVENTION
- YOUTH VIOLENCE
 - SHOOTINGS
 - DOMESTIC VIOLENCE
 - VIOLENT CRIMES & HOMICIDES
 - HOMELESS WOMEN
 - INCARCERATED POPULATION
 - MOTOR VEHICLE ACCIDENTS
 - FALLS FROM OLDER ADULTS
 - SUICIDE

- ### PREGNANCY/BIRTH/REPRODUCTIVE HEALTH
- RACIAL INEQUITY IN BIRTH OUTCOMES
 - ✓ LANGUAGE & CULTURAL BARRIERS

- ### CHRONIC DISEASE
- AUTOIMMUNE INFLAMMATION DISEASES
 - SCIATICA
 - ARTHRITIS
 - DIABETES
 - LUNG DISEASES
 - HEART DISEASE
 - RESIDUALS OF STROKE

- ### BEHAVIORAL HEALTH (GAP TOPIC AREAS)
- TRAUMATIC RESPONSE FOR NEURODIVERSE COMMUNITIES
 - SUBSTANCE ABUSE
- ### MENTAL HEALTH
- OVERDOSE
 - DRUG USE
 - SUICIDE
 - LONELINESS

- ### SOCIAL & ENVIRONMENTAL HEALTH
- CHILDHOOD LEAD EXPOSURE
 - BLOOD LEAD LEVELS
 - AIR QUALITY
 - ✓✓ WILDFIRES & DRINKING WATER SCARCITY
 - CLIMATE CHANGE
 - DEATH FROM HEAT & COLD
 - ✓✓ FOOD SECURITY
 - ✓ ACCESS TO HEALTH CARE
 - ✓ EMERGENCY PREPAREDNESS
 - ✓ LANGUAGE & CULTURAL BARRIERS
 - HISTORICAL TRAUMA
 - HOUSING & SHELTER
 - ✓✓ HOMELESSNESS (INFLUENCES ALL OF THE ABOVE)



STATE health ASSESSMENT
STEERING COMMITTEE MEETING

OCTOBER 28, 2024

ANDRE MEDINA
for METROPOLITAN
GROUP

Next up

- January 2025; SHA review and planning for SHIP redevelopment
- February 2025: SHIP proposed Priorities (we will take these and get community input)
- Late Spring: Select Priorities and identify possible strategies (we will take these and get community input)

Public Meeting

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Thank you!

- See you next year!



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Extra/Reference Slides

Acronym Check

- CBO- Community Based Organization
 - CHA- Community Health Assessment
 - CHIP - Community Health Improvement Plan
 - LPHA- Local Public Health Authority
 - OHA- Oregon Health Authority
 - PHD- Public Health Division
 - SHA- State Health Assessment
 - SHIP- State Health Improvement Plan
- 

Acronym Check Continued

- SPA – Starting Point Assessment
- REALD- Race Ethnicity, Language and Disability
- SOGI- Sexual orientation or gender identity
- Census- United States Census
- BRFSS- Behavioral Risk Factor Surveillance Survey
- SPHI- State Population Health Indicator

Anticipated: Phases 2 and 3, the SHA and SHIP (Steering committee can change timeline)

Developing the State Health Assessment 2024-25

September/Oct

Health indicator data review, assessment planning, community engagement

November/ Dec/Jan

Review process so far, develop data themes

Feb/March

Review draft SHA, work toward final

Developing the State Health Improvement Plan 2025

March

Define/ revise SHIP priorities

April

Define draft strategies, metrics

May

Final decisions on SHIP made, OHA works to produce it

OHA's Definition of Health Equity

Oregon will have established a health system that creates health equity when all people can reach their full health potential and well-being and are not disadvantaged by their race, ethnicity, language, disability, age, gender, gender identity, sexual orientation, social class, intersections among these communities or identities, or other socially determined circumstances.

Achieving health equity requires the ongoing collaboration of all regions and sectors of the state, including tribal governments to address:

- **The equitable distribution or redistribution of resources and power; and**
- **Recognizing, reconciling and rectifying historical and contemporary injustices.**

HTO operationalizes the collaboration required to advance OHA's goal of eliminating health inequities by 2030.

We look forward to connecting with you again in 2025

Jameela Norton, MPH

Health Improvement Strategy

Jameela.norton@oha.Oregon.gov

Public Health Division

Office of the State Public Health Director

