



**Healthier
Together
Oregon**

2020-2024 State Health Improvement Plan

Health
Oregon
Authority

Equity & Justice

1. Ensure **State Health Indicators** are reported by race and ethnicity, disability, gender, age, sexual orientation, socioeconomic status, nationality and geographic location.
2. Ensure state agencies engage priority populations to **co-create investments, policies, projects and agency initiatives**
3. Require state agencies to **commit to racial equity in planning, policy, agency performance metrics and investment** to BIPOC
4. **Ensure accountability** for implementation of anti-racist and anti-oppression policies and cross-system initiatives.
5. Build upon and create **BIPOC led, community solutions for education, criminal justice**, housing, social services, public health and health care to address systematic bias and inequities.
6. Require all public facing state agencies and state contractors to **implement trauma informed policy and procedure**.
7. Declare institutional **racism as a public health emergency**.
8. Reduce **legal and system barriers for immigrant and refugee communities**, including people without documentation.

PUBLIC HEALTH DIVISION

Office of the State Public Health Director

Technology & Innovation

1. **Expand use of telehealth**, especially in rural areas and for behavioral health.
2. **Use electronic health records** to promote delivery of preventive services.
3. **Improve electronic health record coordination and data sharing** among providers.
4. **Create a statewide community information exchange** to facilitate referrals between health care and social services.

Housing & Food

1. **Increase affordable housing** that is co-located with active and public transportation options.
2. **Increase homeownership among BIPOC** through existing and innovative programs.
3. **Require Housing First principles** be adopted in all housing programs.
4. **Increase access to affordable, healthy and culturally appropriate foods** for BIPOC and low-income communities
5. **Maximize investments and collaboration** for food related interventions.
6. **Build a resilient food system** that provides access to healthy, affordable and culturally appropriate food for all communities.

Healthy Families

1. Improve access to **sexual and reproductive health services**.
2. Ensure access to culturally responsive **pre and postnatal care** for low-income and undocumented women.
3. Expand evidence based and culturally responsive **early childhood, home visiting programs**.
4. Ensure access to and resources for affordable, high quality, culturally responsive **childcare and caregiving**.
5. **Build family resiliency** through trainings and other interventions.
6. Expand reach of **preventive health services** through evidence based and promising practices.
7. Support Medicare enrollment for older adults through **expansion of the Senior Health Insurance Benefits Assistance (SHIBA) program**.
8. Use **healthcare payment reforms** to support the social needs of patients.
9. Increase **patient health literacy**

Workforce Development

1. **Ensure cultural responsiveness among health care providers** through increased use of traditional health workers and trainings.
2. **Implement standards for workforce development** that address bias and improve delivery of equitable, trauma informed, and culturally and linguistically responsive services.
3. Require all public facing state agencies and state contractors receive **training about trauma and toxic stress**
4. **Require sexual orientation and gender identity training** for all health and social service providers.
5. **Create a behavioral health workforce** that is culturally reflective of the communities they serve.
6. Support **alternative healthcare delivery models** in rural areas.
7. **Expand human resource practices** that promote equity.

Behavioral Health

1. **Conduct behavioral health system assessments** at state, tribal and local levels.
2. **Enable community based organizations** to destigmatize behavioral health by providing culturally responsive information to people they serve.
3. **Implement public awareness campaigns** to reduce the stigma of seeking behavioral health services.
4. **Create state agency partnerships** in education, criminal justice, housing, social services, public health and health care **to improve behavioral health outcomes among BIPOC.**
5. **Improve integration** between behavioral health and other types of care.
6. **Incentivize culturally responsive behavioral health treatments** that are rooted in evidence-based and promising practices.
7. **Reduce systemic barriers** to receiving behavioral health services, such as transportation, language and assessment.
8. **Use healthcare payment reform** to ensure comprehensive behavioral health services are reimbursed.
9. Continue to **strengthen enforcement of the Mental Health Parity and Addictions Law.**
10. Increase **resources for culturally responsive suicide prevention** programs for communities most at risk.

PUBLIC HEALTH DIVISION

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Healthy Communities

1. **Center BIPOC communities in decision making about land use planning and zoning** in an effort to create safer, more accessible, affordable, and healthy neighborhoods.
2. **Provide safe, accessible and high-quality community gathering places**, such as parks and community buildings.
3. Enhance community resilience through **promotion of art and cultural events** for priority populations.
4. **Co-locate support services** for low income people and families at or near health clinics.
5. Increase affordable access to **high speed internet** in rural Oregon.
6. **Build climate resilience** among priority populations.
7. **Expand culturally responsive community based mentoring**, especially intergenerational programs, and peer delivered services.
8. Expand programs that **address loneliness and increase social connection in older adults**.
9. **Develop community awareness of toxic stress**, its impact on health, and the importance of protective factors.
10. **Strengthen economic development**, employment, and small business growth in underserved communities.
11. **Enhance financial literacy and access to financial supports** among priority populations.
12. **Invest in workforce development and higher education opportunities** for priority populations.

PUBLIC HEALTH DIVISION

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Healthy Youth

1. Expand recommended **preventive health related screenings in schools**.
2. Ensure schools offer **access to oral health care** such as dental sealants and fluoride varnish.
3. Increase use of **mediation and restorative justice in schools** to address conflict, bullying and racial harassment.
4. **End school related disparities for BIPOC children and youth** through teacher training, monitoring of data and follow-up with teachers, administrators and schools.
5. Ensure and support all school districts to implement **K-12 comprehensive health education according to state standards**.
6. Provide culturally and linguistically responsive, trauma informed, **multi-tiered behavioral health services and supports to all children and families**.

Key Indicators

Priority area	Indicators
Institutional bias	Disciplinary Action (Department of Education) Premature death/Years of Potential Life Lost (Vital Statistics) Housing cost burden among renters (ACS)*
Adversity, trauma and toxic stress	ACEs among children (National Survey of Children’s Health) Chronic Absentism (Department of Education) Concentrated Disadvantage (ACS)
Behavioral health	Unmet mental health care need among youth (Student Health Survey) Suicide rate (Vital statistics) Adults with poor mental health in past month (BRFSS)
Economic drivers of health	3 rd grade reading proficiency (Department of Education) Opportunity Index – Economy Dimension (Opportunity Index) Childcare cost burden (TBD) Food insecurity (Map the meal) Housing cost burden among renters (ACS)*
Access to equitable preventive health care	Childhood immunizations (ALERT IIS) Colorectal cancer screening (BRFSS) Adults with a dental visit in past year (BRFSS)