

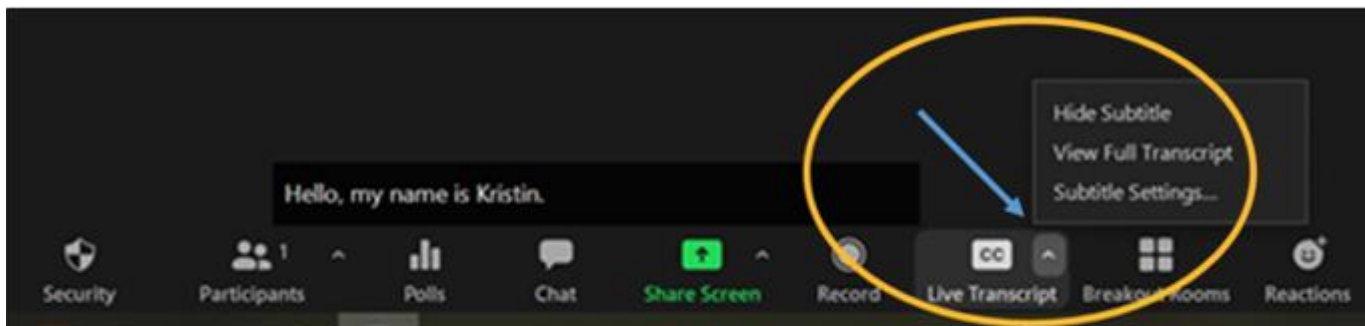
# Closed Captions

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

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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.



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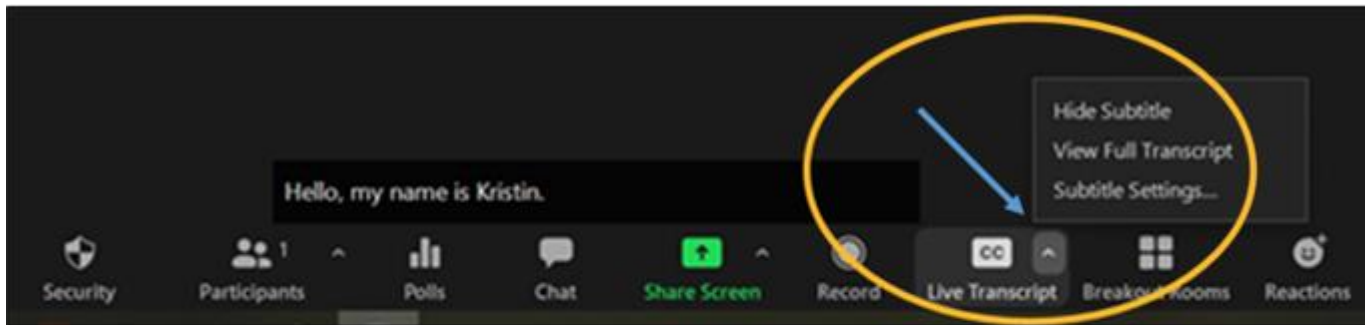
10/21/24

**State Health Assessment Steering  
Committee Meeting  
November 12, 2024**

# Closed Captions

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# Agenda

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- Welcome back!
- Relationship building
- Let's talk about Public Health in Oregon
- Break
- Proposed State Public Health Indicators
  - Visual example
  - List and how we got there

# OHA Staff

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- 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

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Kirsten Gunst, Senior Director



Debra Clark, Director



Kristin Gimbel, Executive Vice  
President

# Group Agreements

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- 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.*

# Connection Opportunity

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# Public Health In Oregon

# What does Oregon's public health system do?



## Communicable Disease Control

*(respiratory illnesses, sexually transmitted infections and HIV, viral hepatitis)*



## Environmental Health

*(climate and health, restaurant inspections, drinking water services)*



## Prevention and Health Promotion

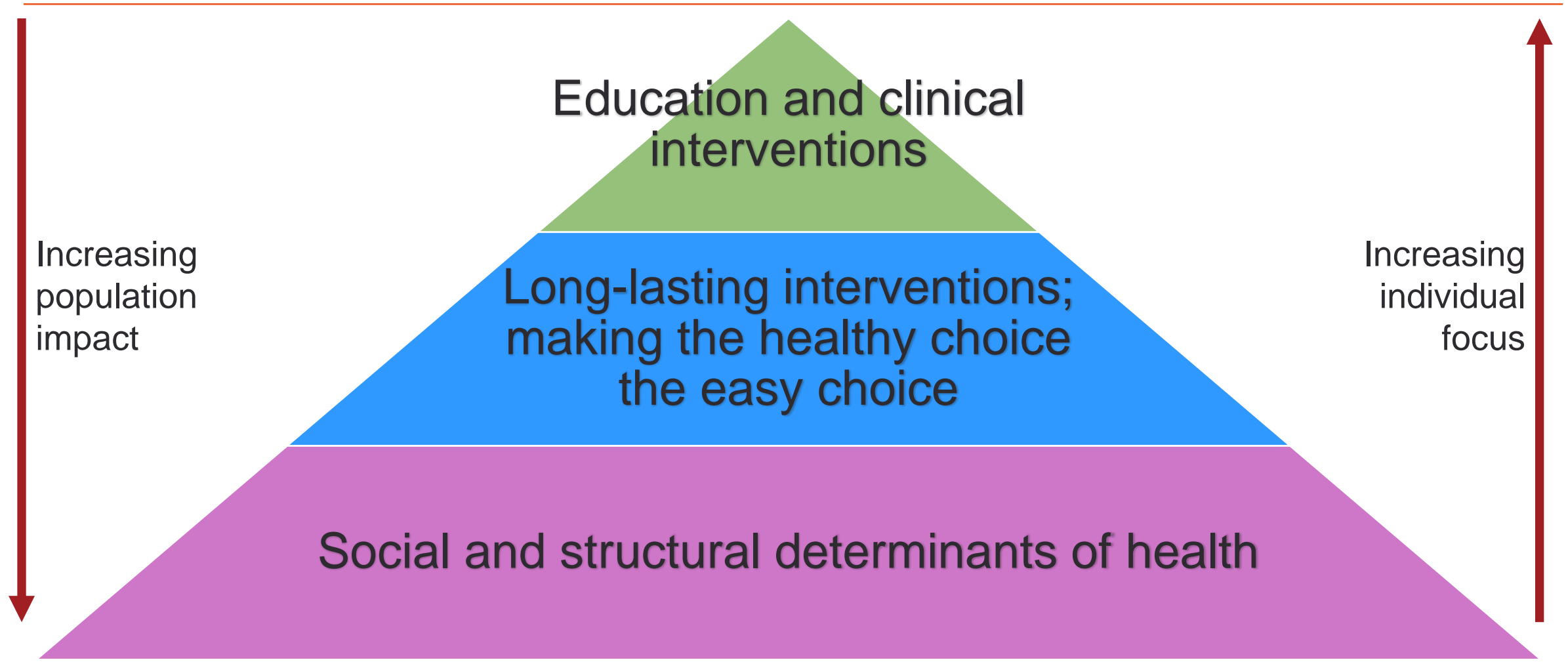
*(commercial tobacco prevention, substance use disorder prevention, injury and suicide prevention)*



## Access to Clinical Preventive Services

*(immunizations, reproductive health, school-based health centers)*

# How does public health work to improve health?



Adapted from Health Impact Pyramid, Tom Frieden

# Questions? Thoughts?

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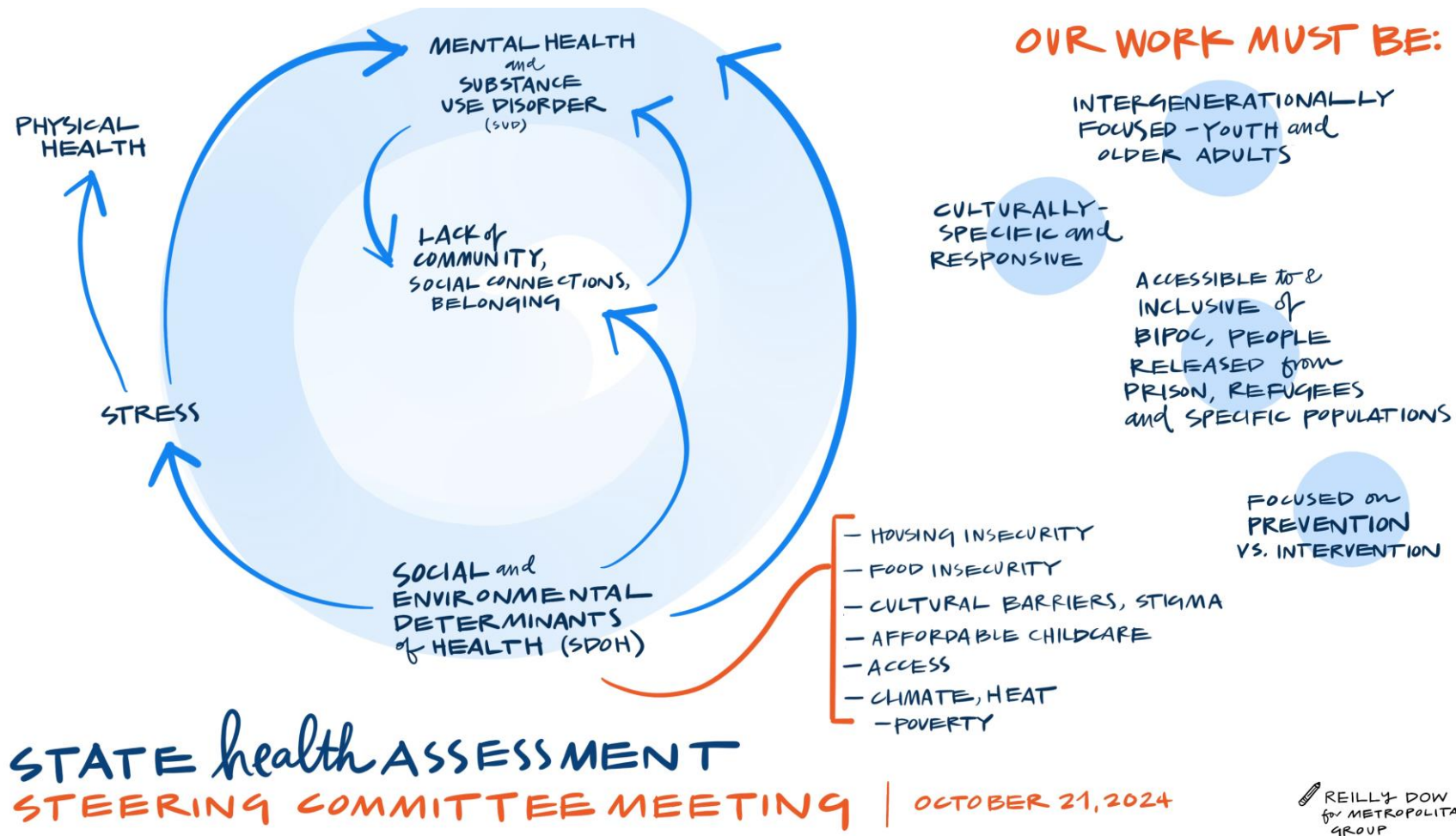
# State Population Health Indicators

# State Population Health Indicators

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- Help us tell the story of health in Oregon
- We update the data on every year
- Our current list is quite long
- We're hoping to revamp

# We've heard you!



# GAP TOPIC AREAS

## INFECTIOUS DISEASE

- PREVENTABLE ILLNESSES
- COVID

## CHRONIC DISEASE

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

## INJURY VIOLENCE PREVENTION

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

## BEHAVIORAL HEALTH (GAP TOPIC AREAS)

- TRAUMATIC RESPONSE FOR NEURODIVERSE COMMUNITIES
- SUBSTANCE ABUSE

## MENTAL HEALTH

- OVERDOSE
- DRUG USE
- SUICIDE
- LONELINESS

## PREGNANCY/BIRTH/REPRODUCTIVE HEALTH

- RACIAL INEQUITY IN BIRTH OUTCOMES
- ✓ LANGUAGE & CULTURAL BARRIERS

## 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)

✓ COMMUNITY & CONNECTION AS PREVENTION

✓ UNDERSTANDING OF CULTURE BEYOND RACE & ETHNICITY

✓ BRING IN TRADITIONAL HEALTH CARE

✓ GENERATE INCLUSIVE & TRUST WORTHY ACCESS FOR ALL!

✓ PROVIDE OPPORTUNITIES FOR LONG TERM ⊕ HOLISTIC HEALTH OUTCOMES



STATE health ASSESSMENT

STEERING COMMITTEE MEETING | OCTOBER 28, 2024

✍ ANDRE MEDINA  
for METROPOLITAN  
GROUP



# SPHI Considerations

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- **Indicators presented in the context of influences of social determinants of health**
- **Strength-based framing**
  - Avoid deficit-based framing when possible
- **Prevention or upstream alignment**
- **Populations impacted**
  - Culturally specific, regional, disability, age and more.
- **Impact on the lives of Oregonians**
- **Data quality**
  - Reliability, representative, meaning making
- **Future outlook**
  - Data updates, methods stability
- **Alignment with OHA/PHD priorities**
  - Healthier Together Oregon, OHA strategic plan, PHAB accountability metrics
- **Example of other public issues**
  - How well do these highlight broader public health issues?

# New/Proposed visual

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- Clear connections to Social Determinants of Health/ upstream issues
- Gives us the ability to look at prevention and intervention opportunities across the spectrum

# Screen share of new visual/walk through

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# Proposed SPHIs

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# Next steps

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- Finalize SPHIs
- Finalize visualization
- Meeting on 11/18



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## **Extra/Reference Slides**

# Acronym Check

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- 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

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- 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

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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.*

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We look forward to connecting with you again on November 12, 2024 from 2-4pm.

Jameela Norton, MPH  
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Public Health Division  
Office of the State Public Health Director

