

# State Health Assessment (SHA Steering Committee)

July 15<sup>th</sup>, 2024, 1:00-3:00PM PST

**Attendees:** Elisabeth Maxwell, Emily Mosites, Julia Brown, Sokho Eath, “TJ” Taw Foltz, Alisha Overstreet, Annie Valtierra-Sanchez, Whitney Watson, Dean Sidelinger, Elijah Penner, Mica Contreras and Sadie Siders

**OHA and MetGroup Staff:** Jameela Norton, Debra Clark, Kirsten Gunst, Matt Baer, Sara Beaudrault, Nicholas Sievers and Kristin Gimbel

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## 1:00 pm - Introductions of OHA staff and MetGroup

**Agenda:** revisiting group agreements, a relationship-building activity, June meeting recap, previous SHIP, break, Mission Vision Values, Reflection questions and close + next steps.

- June recap- introducing in-person meetings and explaining the objective - Sep 16<sup>th</sup> and 17<sup>th</sup>
- Review of group agreements
- Relationship building – where is your favorite place to enjoy in Oregon?

## 1:15 pm - Renovating the State Health Improvement Plan- Cintia

**Agenda:** acronyms slide, a 3-question quiz to gauge the SC’s knowledge of Healthier Together Oregon (HTO), an overview of HTO, a recap and Q&A.

**Objective:** find points of alignment to further objectives listed in Healthier Together Oregon (HTO). “We can only achieve health equity if we work together.”

- Introduces Public Health Accreditation Board and explains the purpose of accreditation
- Each state health assessment paves the way for the next State Health Improvement Plan. An example of HTO’s legacy is the following:
  1. State Health Assessment 2018
  2. Healthier Together Oregon (SHIP) 2020-24
  3. Updated HTO/SHIP 2025-30
  4. New SHA 2028-30

## Mission, Vision and Values of HTO

- **Vision:** Oregon will be a place where health and wellbeing are achieved across the lifespan for people of all race, ethnicities, disabilities, genders, sexual orientations, socioeconomic status, nationalities and geographic locations.
- **Values:** equity and social justice, empowerment, strengths-based, authentic community input and accountability.
- Cintia explains priority populations and why we talk about the Social Determinants of Health as part of health equity.
  - Several people liked the term “populations of focus” instead of “priority populations” because the epidemiologic term sounds exclusionary.
- **What is the purpose of HTO?:** an alignment tool/roadmap that identifies our state’s health priorities, invites collaboration and champions collective action for the advancement of health equity.
  - 1 vision: to achieve health equity
  - 5 priorities: our most urgent health challenges
  - 8 implementation areas: to organize our collective work
  - 16 HTO indicators: how we will measure our progress
  - 62 strategies: actions we will take for improvement

**Cintia recaps this section:** The current SHIP’s name is HTO 2020-24 and was developed by a Steering Committee following the 2018 SHA. HTO is an alignment tool to de-silo, collaborate, and take collective action for the advancement of health equity. The 2024 SHA is currently in progress and leads to an updated SHIP in 2025.

## 1:40 pm - Phases of MAPP 2.0 – Jameela

**Jameela introduces the work ahead of us.** She highlights that OHA staff are required to deliver a written narrative of the state health assessment in 2025.

- July, August and September plans
  - HTO overview
  - Starting Point Assessment
  - Data orientation
  - Forming a data committee
- Phases 2 and 3 of the SHIP include: Developing the SHA 2024-25 and developing the next SHIP in 2025

## Breakout Rooms

- The hosts asked the Steering Committee to reflect on what they reflected on in breakout rooms. Conversation themes included:
  - Timeline concerns

- Suggestions for language changes: focus populations, populations of focus, priority communities, communities of focus and target populations.
- Interest in increasing participation of community members through responsibilities and engagement.
- More explicit inclusion of priority populations such as Older Adults.
- Data disaggregation and transparency—what is collected and not collected.

## **2:30 pm – Mission, Vision, Values discussion – hosted by Kristin Gimbel**

### **Kristin defined Mission Vision and Values as:**

- Values: what this group stands for
- Vision: where we hope to be in the future
- Mission: what the SHA does and for whom

### **Opportunity to modify Mission language**

- Original Mission options included:
  - OPTION 1: We draw on community voices, experiences, and ideas to shape state health priorities and solutions so that all Oregonians have the resources and opportunities to thrive.
  - OPTION 2: We gather community-driven priorities and ideas to develop a plan for health that ensures every Oregonian has what they need to thrive.
  - OPTION 3: To ground state health priorities and solutions in the needs of communities most impacted by health inequities.
- Proposed Mission Statement (Revision of Option 1): We draw on **community** voices, experiences, and ideas to shape state health priorities and solutions so that all people **living in Oregon** have the resources and opportunities to thrive.
  - **New suggestion** was to change priority/ies to “health focus areas.” Committee members shared the perspective that “priorities” can be interpreted as exclusionary.

## **Reflections/Close Out**

- Discussions and reflections shared about language in MVV
  - Feedback: replace health priorities with “health focus areas.”
- Suggestion to incorporate Tribes in the vision and get Tribal involvement for inclusion. Brief discussion of Tribal consult processes, and Native people who are either not from Oregon tribes or belong to Tribes without federal recognition.
- Jameela committed to following up with the group on conversations about M/V/V, use of the term “priority population” and the engagement of Tribes related to this work.

**Meeting Adjourned at 3:08PM**