

Oregon Consumer Advisory Council (OCAC) Membership Application

Please submit by 5 p.m. Friday, June 16, 2023

Please read this information before beginning the application.

The OCAC Development and Membership Committee is working to make applying for the Oregon Consumer Advisory Council as simple and equitable as possible.

[Please read the orientation document before beginning.](#) You'll find complete information about the application process, OCAC membership and advocacy, and information about how the council works.

We understand that we each express ourselves in different ways. If you prefer, you can submit your application by video instead of in writing. To discuss submitting a video application, please contact Walter Bailey at walter.l.bailey@oha.oregon.gov or 503-510-5069.

We hope you find this process enjoyable.

If you need accommodations or support with this application, please contact Walter Bailey at walter.l.bailey@oha.oregon.gov or 503-510-5069.

Other important information

- Please submit your application, including recommendation letter(s), by email to Walter Bailey at walter.l.bailey@oha.oregon.gov. Please be sure to send your application by June 16, 2023, at 5 p.m. Unfortunately, we cannot accept late applications.
- Some sections will give you a choice of which question to answer. In total, you will write **six (6)** responses in this application.
- How much you say or write is not important. What is important is that you say what you need tell us about yourself.
- Above all, we are looking for candidates who know who they are, what they stand for, and are willing to say so. We are looking for candidates who know the

We want to help you with your application. Please reach out to us with any access needs, questions, or if you want advice and information, at walter.l.bailey@oha.oregon.gov.

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- communities they come from; are willing to learn; and can collaborate with people during and outside of council meetings. [The rubric at the end of this application](#) helps us do the first stage of the selection process.
- Before we review applications, support staff will remove names and other identifying information. This will help us avoid any biases that may exist.
- Please attach a letter of recommendation. This letter will be anonymized as well.
- [The orientation page](#) has more information about alternative ways to apply to the council if written responses are not your preferred way to communicate. If you have an idea of your own, or need language or disability accommodations, please contact Walter Bailey at walter.l.bailey@oha.oregon.gov or 503-510-5069.

You are not obligated to disclose any aspect of your identity that you are uncomfortable disclosing, like gender identity, immigration status, legal record, etc.

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Section 1: What are you bringing to the council?

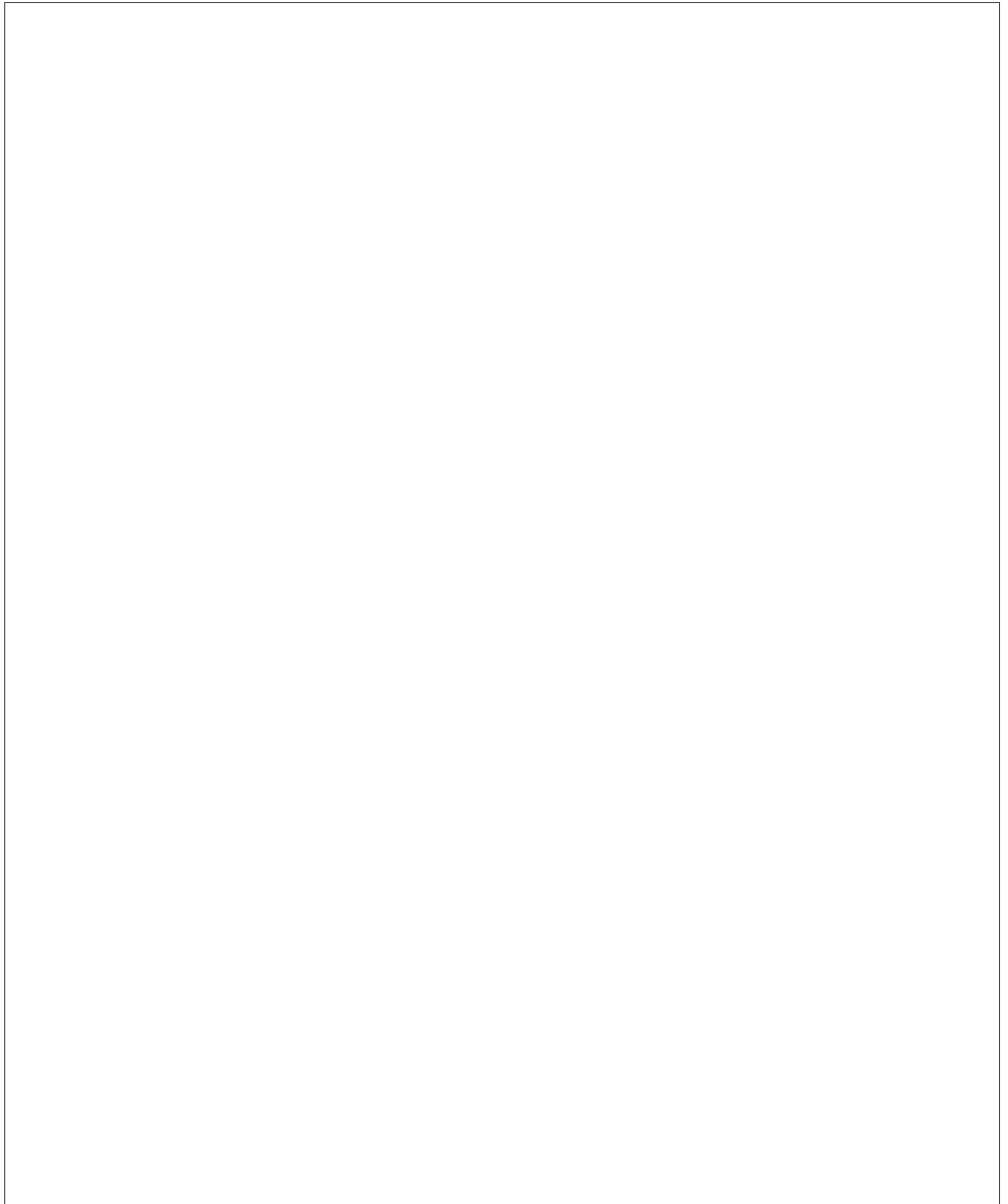
Part I: What do you want to get out of this?

The council knows that its members can come from many different backgrounds. Some are natural community organizers or mentors; others are activists who follow politics; some are even people who have had positive experiences with the behavioral health system and want to make their voices heard. We want to hear about your background. We also want to hear about what you might want to do on the council.

Please answer **two (2)** of the following questions:

1. What role best describes you: community organizer, advocate for yourself or your community, activist - or something else? Please explain. What role do you want to play on the council? Do you want to develop your experience in the same role, or do you want to grow into a new role?
2. In the past, what work have you done to build community and to support others in your community? How would you apply this experience as a member of the council?
3. How do you currently work outside of official advocacy roles, such as community organizer, activist or advocate? How will you adapt to working within the council, which is a body created by Oregon's state government and has an official role to advise state government?
4. In your advocacy work, what larger themes or concerns have you found? If you see yourself working on these themes as a member of the council, how will you do so? What other themes do you want to pursue on the council?
5. What is one of your wildest dreams as an advocate? How will you use the council's resources to make it happen, especially with the support you will get from the Oregon Health Authority?

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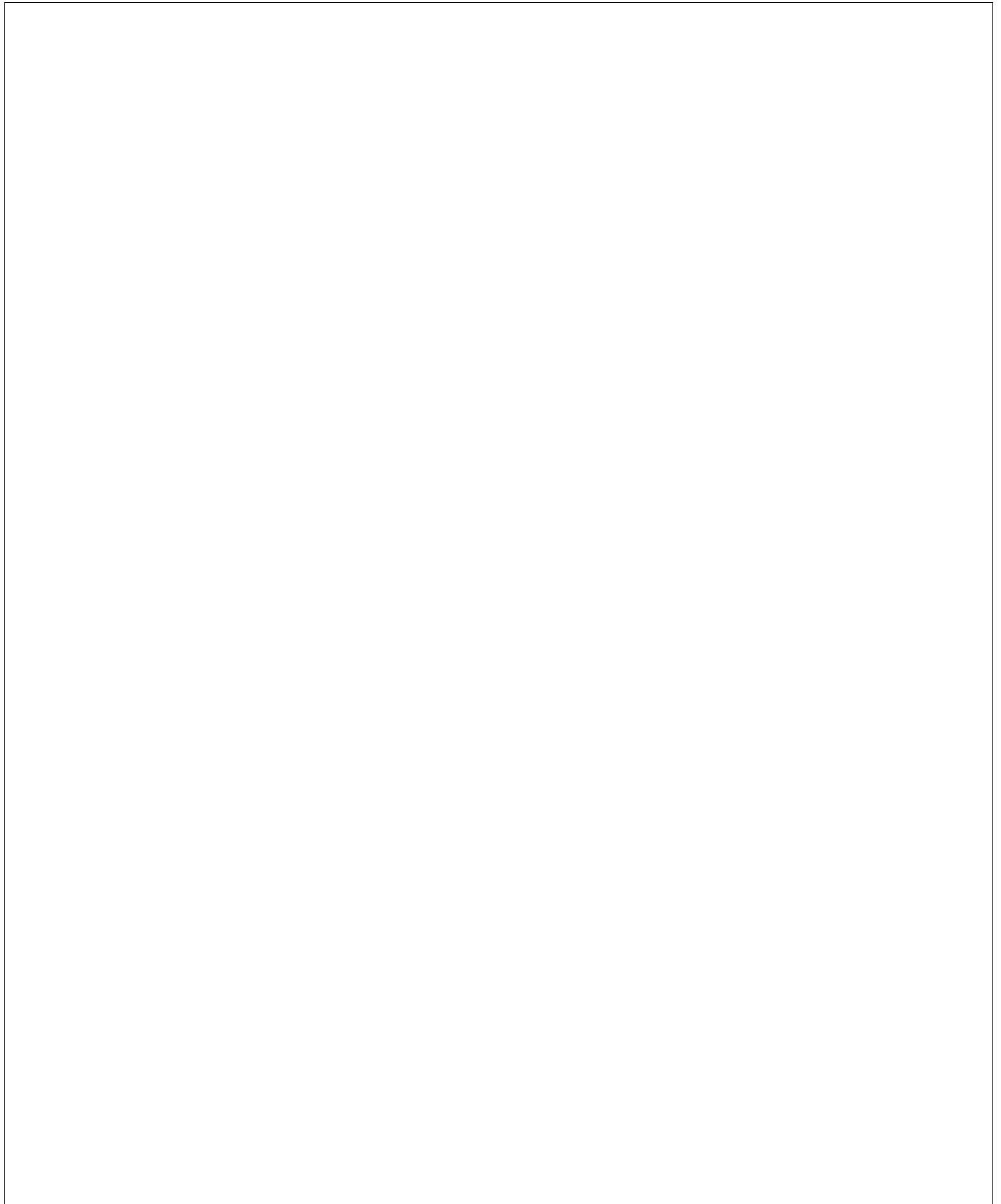
Section 1: What are you bringing, and what do you want to get out of this?

Part II: Representation, equity, and inclusion

We want to bring a wide range of perspectives and experiences to the council. It's equally important to achieve health equity to make sure we leave no community behind. Choose **two (2)** of the following questions to answer:

1. What are some of the ways you self-identify, and/or what are some of the communities you identify with? Choose something you identify with and tell us about the ways you will use it in your advocacy and/or how it will contribute to your work as a member of the council.
2. How will your life's recovery journey contribute to your work on the council (even though at times, it may have been a non-linear journey)?
3. How will your experiences with systems contribute to your work on the council? These systems might include mental health, addiction, child welfare, foster care, legal system, immigration enforcement, homelessness, disability benefits or other systems.
4. We believe that we all bring complex identities, communities, and forms of diversity that lend a unique perspective to the council. Often, it is the *combination* or *intersection* of our identities that make the council's perspectives unique. What are some of your intersections of identities, and how will those contribute to your advocacy on the council?
5. What types of perspectives do you think are absent in mental health and addiction policy and consumer advocacy? As a councilmember, how will you work to change that?

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Section 2: What skills do you bring and what skills will you hope to develop?

We are interested in hearing you talk about how you work best: either your teamwork skills, your areas of strength and weakness, how you work through conflict and solve problems with others, how you prepare and ask questions, etc. Choose **one (1)** of the following questions to answer.

1. The council does its work both individually and in groups. In which way of working, as a member of the council, do you believe you will be strongest, and why?
2. We want the council to represent Oregon's diversity. This means making the council a safe place to be a member - for all types of people - especially survivors who have faced discrimination and trauma. Knowing that we are always learning and growing, what steps will you take to make sure that others feel safe to participate? What else do you want to learn about making the council a safe space for everyone to participate?
3. The council is meant to represent Oregon's entire community of people with lived experience. The council is **not** an exclusive club - but a body that will bring the experiences and perspectives of Oregon's peer and lived experience communities to the state. Thinking about **your communities**, how will you work to bring the experiences and perspectives of your community to state government? How will you keep your community informed about the council's work, and how will you give them a chance to participate in that work?

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Section 3: Your journey here

The Oregon Consumer Advisory Council is run by and for *consumers*: people who have used and survived through Oregon’s psychiatric, health, and social services systems: for example, the OHP or Medicare, the child welfare system, the Oregon State Hospital, the legal system, etc. We are required to have experience with these systems, in order to provide assessment and oversight of Oregon’s behavioral health system.

To wrap up this application, briefly tell us about your recovery journey, and how it has related to the systems that you have been involved with.

This is the end of the written response – thank you!

We would like to thank you, again, for the time and care you have put into this application. We appreciate what you have revealed to us in the application. We promise to spend time seriously considering your application, and we will email you with a response – even if it takes some time, since we work part-time.

Please sign your application with your full name. This section will be removed by Oregon Health Authority support staff before we review your application.

Name

Letters of recommendation

As part of your OCAC application, **please attach a letter of recommendation to your application.** This can be from anyone who knows you, who knows how you work, or how you show up to community spaces: a professional co-worker, someone who helps you on your advocacy efforts, someone in the community that you organize with, a community mentor, etc.

This letter should give us another perspective on what you would bring to the group and why you want to join the council.

This letter will be anonymized as well.

1. Person _____
2. Relationship with you _____
3. Address _____
4. Email _____
5. *Send your recommendation letter along with this application.*

Demographic questions

As part of our anonymous application process, we will remove your county (listed below) from your application. We have often found that it is easy to identify our colleagues by the county they have come from, which we want to avoid.

We will keep your information kept private and confidential. Only if we select you as a councilmember will your information be openly received.

These questions help us determine whether we are making progress on legal requirements to represent the diversity of Oregon's consumers. If OHA believes we are not meeting these requirements, they will hold us accountable.

1. Your pronouns you feel safe using in public. *Select any and all that apply.*

- they/them
 she/her
 he/him
 Not listed – please tell us

-
- Don't know
 Don't know what this question is asking
 Don't want to answer

2. Age

3. County (*removed during application process*)

4. Density of where you live

- Urban – more than 1000 people per square mile
 Rural – less than 1000 people per square mile
 Remote – 6 or fewer people per square mile

5. Your gender identity that you want to disclose in public. *Select any and all that apply. It's okay if you don't know all of these words.*

- Cisgender (a person who identifies with the sex they were assigned at

birth

- Transgender (a person who identifies with a gender other than their sex assigned at birth
 Nonbinary or gender-diverse
 Genderfluid
 Female/woman
 Male/man
 Agender
 Questioning, or don't know
 Don't know what this question is asking
 Don't want to answer

6. Communication needs

a. Languages that you use at home

b. Languages that you want us to use when *speaking* to you

c. Languages that you want us to use when *writing* to you

d. Tell us if you need tools or people to help with communication like a language interpreter, sign language interpretation, live captioning, etc. We will try to provide them to you.

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7. Disability.

***Continue to the next page for one
last question on race and ethnicity.***

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8. Race and ethnicity. Select any and all that apply, regardless or not of how important they are to your identity. .

Hispanic and Latino/a/x

- Central American
 - Mexican
 - South American
 - Cuban
 - Puerto Rican
 - Other Hispanic and Latino/a/x
-

Native Hawaiian and Pacific Islander

- CHamoru (Chamorro)
 - Marshallese
 - Communities of the Micronesia Region
 - Native Hawaiian
 - Samoan
 - Other Pacific Islander
-

White

- Eastern European
 - Slavic
 - Western European
 - Other White
-

American Indian and Alaska Native

- American Indian
 - Alaska Native
 - Canadian-Inuit, Métis, or First Nations
 - Indigenous Mexican, Central American, or South America
-

Black and African American

- African American
- Afro-Caribbean
- Ethiopian
- Somali

- Other African (Black)
-

- Other Black
-

Middle Eastern and North African

- Middle Eastern
 - North African
-

Asian

- Asian Indian
 - Cambodian
 - Chinese
 - Communities of Myanmar
 - Filipino/a
 - Hmong
 - Japanese
 - Korean
 - Laotian
 - South Asian
 - Thai
 - Vietnamese
 - Other Asian
-

Other choices

- Other(s)
 - Don't know
 - Don't want to answer
-

9. If you checked more than one category above, is there one race or ethnic category you think of as your primary racial or ethnic identity?

- Yes.
- No – I identify as biracial or multiracial.
- Don't know
- I don't know what this question is asking
- Don't want to answer

You are done with the demographics. Thank you for helping us know who we represent.

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Application rubric 2023

Instructions. Evaluate the applicant's responses to each section, regardless of the number of questions answered per section, on a 1-3 scale against **the following criteria in grey.**

Application section	On a scale of 1-3, how authentic or powerful are the applicant's responses?	On a scale of 1-3, how much will the applicant add to the diversity of the council in terms of background, skills, perspectives?	On a scale of 1-3, how much will the applicant add to the diversity of the council in terms of what they want to do or learn through the council?
Section 1, Part I: What do you want to get out of this?			
Section 1, Part II: Representation, equity, and inclusion			
Section 2: What skills do you bring, and what skills will you hope to develop?			
Section 3: Your journey here			

Instructions. If you have any further considerations about the applicant, these scores below will reflect them.

Applicant #	Evaluator	Do you recommend this applicant for admission?
		<input type="checkbox"/> No <input type="checkbox"/> Yes <i>without</i> priority <input type="checkbox"/> Yes with priority