



The Oregon Coalition of Local Health Officials (CLHO) Presents:

Public Health Town Hall Legislative Session 2023

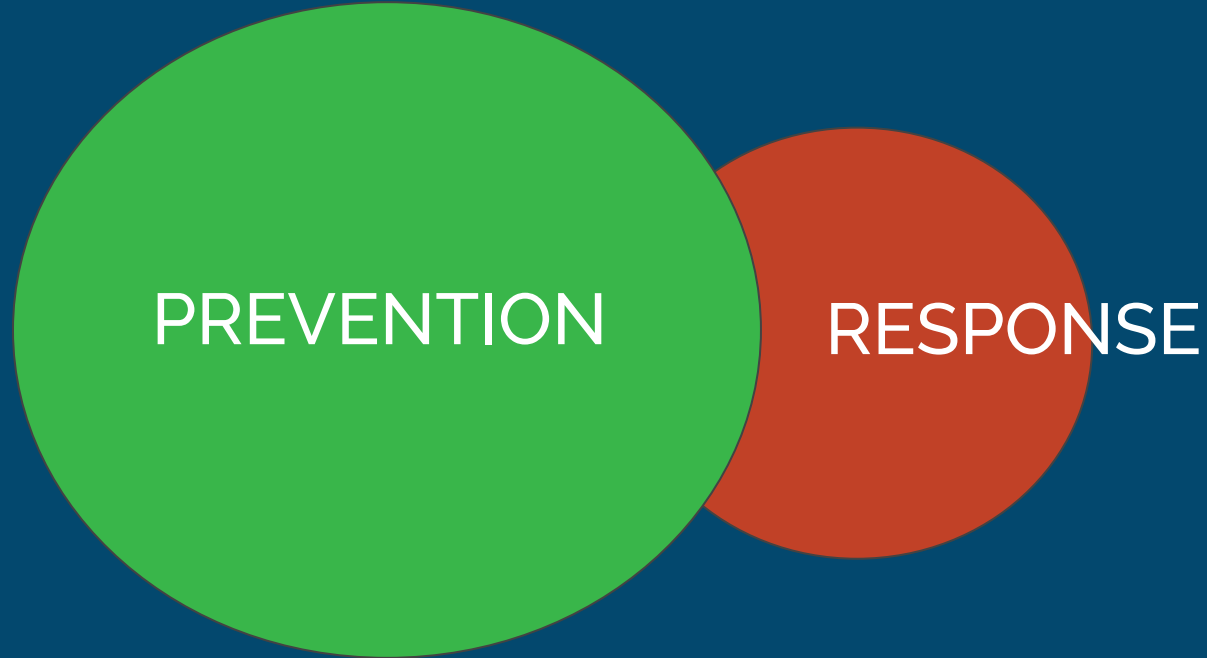
The Time is NOW.

Agenda

- Introductions
- What is public health?
- Stories from the Trenches
- What is modernization?
- Session asks
- Questions
- Close

*** Please put questions in the chat as we go ***

What is Public Health?



What is Public Health?

Communicable Disease

Zika
Ebola
Flu
COVID
Foodborne illness

Environmental Health

Safe Water
Clean Air
Wildfire Response
Lead-based paint
Built Environment
Hotel, Pool, Kitchen
Inspections

Access to Health Services

Cancer Screenings
Immunizations
Prenatal Care
Nurse Home Visits

Chronic Disease Prevention

Oral Health
Smokefree Places
Tobacco Retail
Licensure
Physical Activity
Nutritious Food

THE FOUNDATIONAL PROGRAMS OF PUBLIC HEALTH MODERNIZATION



Oregon Coalition of Local Health Officials

Public Health in Our Communities



Spotlight: Equity & Prevention

Washington County Child and Maternal Health Program

Program focus:

- Reproductive health
- Screening, triage & early intervention
- Parenting supports
- Social, emotional & physical wellness
- Healthy child development
- Family stability & self-sufficiency

Families need:

- Timely access to health care and mental health services
- Safe & healthy homes
- Support in meeting basic needs
- Culturally responsive peer supports
- In-home services

Washington County Public Health Department

Spotlight: Equity & Prevention

Solutions

- Coordinated systems, welcoming programs, & nurturing environments
- Focus on early relational health
- Increased support for traditional health workers and nurse home visiting services
- Developing accessible career pathways for a thriving and diverse workforce
- Investment in small businesses-child care, doula services, & community-based services

Washington County Public Health Department

Spotlight: Equity & Prevention

Children, Youth & Families Thrive

It takes a state, a region, and a community investing in maternal (caregiver), child, and family health & wellness strategies to achieve equitable health outcomes for all children, youth and families.

Washington County Public Health Department

Spotlight: Health Equity and Community Partnerships

Lane County Community Partnerships

Mobile Public Health & Community Partnerships – ensuring Public Health services in all areas of Lane County, responding to community needs & taking services to where people live.



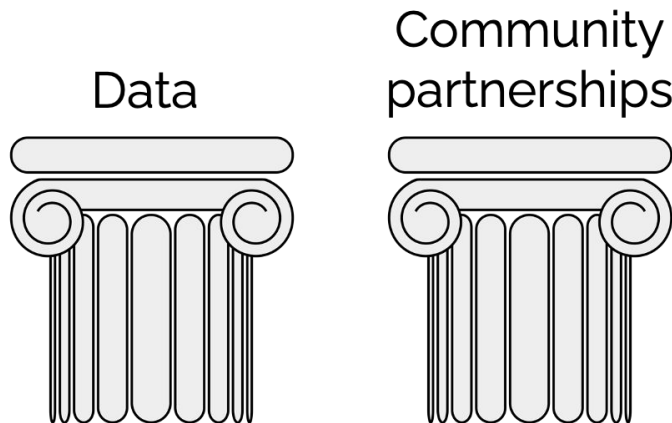
Lane County Public Health Department

Spotlight:

Community Led & Data-Driven Public Health Approaches

Multnomah County Public Health

Pillars That Guide Our Work

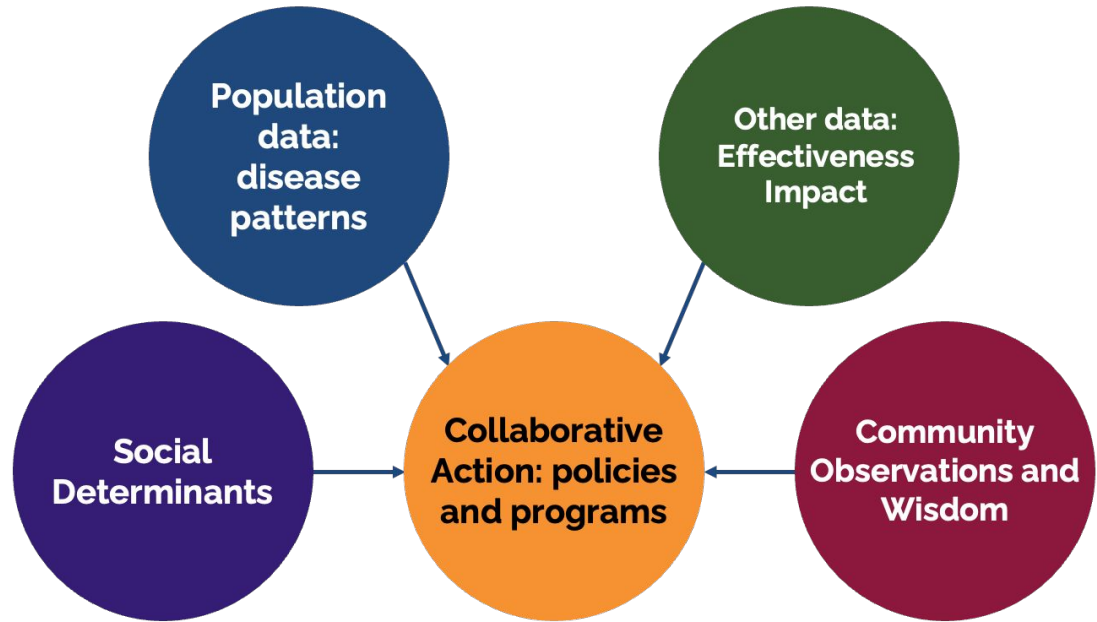


What does data mean in the context of community collaborations?

Multnomah County Public Health Department

Spotlight: Community Led & Data-Driven Public Health Approaches

Improving Data Sovereignty, Equity, Justice



Community voice and engagement in data collection, analysis, interpretation, and dissemination

Multnomah County Public Health Department

Spotlight: Community Led & Data-Driven Public Health Approaches

Regional Reportable Disease Datamart

- Datamart mirrors the state reportable disease database
 - Supported by local and regional PHM funds
- Allows local health departments to:
 - perform complex analyses of regional and single county data
 - create real time internal and public-facing data visualization
- December 1-14, 2022: 7,650 files imported representing leading to outbreak identification and disease pattern tracking



Multnomah County Public Health Department

**Spotlight:
Community Led &
Data-Driven Public
Health Approaches**

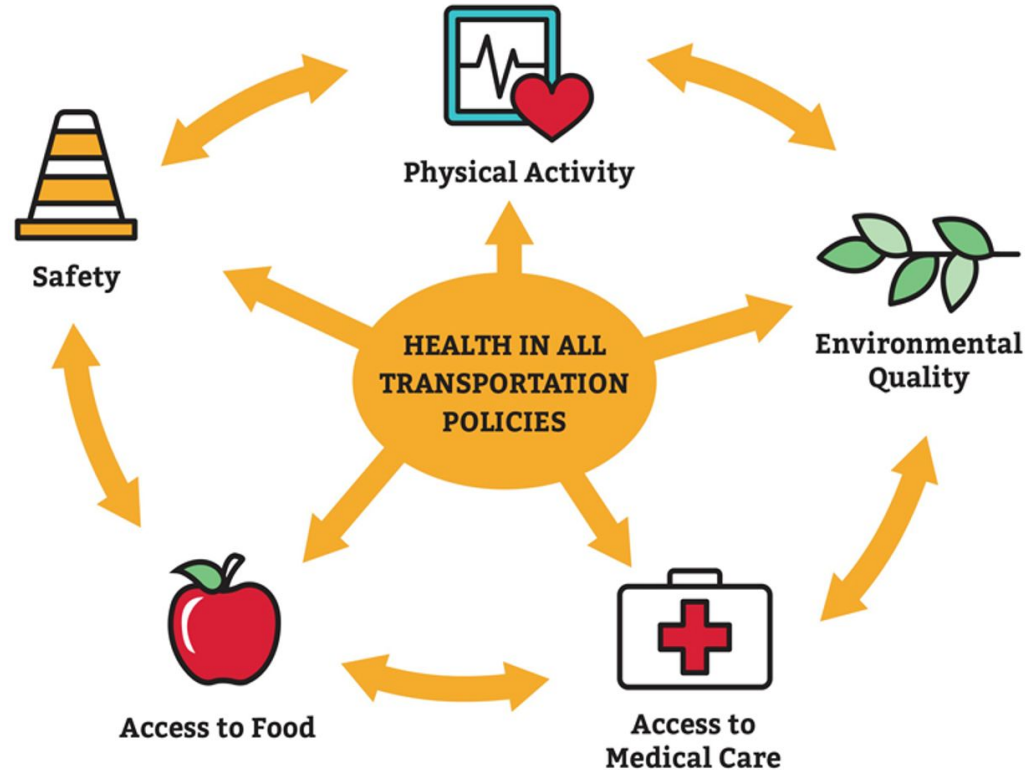
How We Work With Community

Two examples: REACH Traffic Safety and
the Native Community and COVID-19

Multnomah County Public Health Department



Spotlight: Community Led & Data-Driven Public Health Approaches



Multnomah County Public Health Department

Spotlight: Community Led & Data-Driven Public Health Approaches

WILLAMETTE WEEK

NEWS RESTAURANTS BARS MUSIC ART

Black Portlanders Are Killed Crossing the Street at Three Times the Rate of White Pedestrians

The pedestrian death rate per 100,000 was three times higher east of 82nd Avenue than it was west of 82nd.

BLOGTOWN

Man Sentenced to Life in Prison for Racially-Motivated Murder of Larnell Bruce

by Alex Zieliński • Apr 16, 2019 at 11:05 am



Shutterstock

CITIES

"Biking while black" is a thing, too

By Heather Smith on Jan 13, 2015



WILLAMETTE WEEK

NEWS RESTAURANTS BARS MUSIC ARTS

Black Portlanders Are Still Disproportionately Stopped While Driving and Walking

Traffic stops are the most common way police interact with the public.



(Trevor Gagnier)

OPB FEB 26, 2021

In Portland, Black drivers make up 18% of traffic stops, 5.8% of population



By Jonathan Levinson (OPB)

Nov. 27, 2020 6 a.m. Updated: Nov. 27, 2020 9:16 a.m.

Black people in Portland were dramatically more likely to be stopped by police in 2019 than their non-Black counterparts, according to data recently released by the Portland Police Bureau.

Of the 33,035 vehicle stops Portland police made in 2019, 18% were for Black drivers and 65% were for white drivers. Meanwhile, white people make up 75.1% of the population, while Black people make up only 5.8%.

The discrepancy is even greater for nonmoving violation stops, a category for which the report says officers have more room for discretionary judgement. Black people accounted for 22.6% of those stops compared to 62% for white people.

Multnomah County Public Health Department

Spotlight: Community Led & Data-Driven Public Health Approaches

Recommendations: CPSEs

Communications

Center behavior
change & equity

Environmental changes

Alter physical spaces

Policy Changes

Correct historic
injustices

Infrastructure
Investment

System changes

Reinforce
accountability
Generate Revenue
Traffic Victim Fund

Multnomah County Public Health Department

Spotlight: Community Led & Data-Driven Public Health Approaches



Future Generations Collaborative

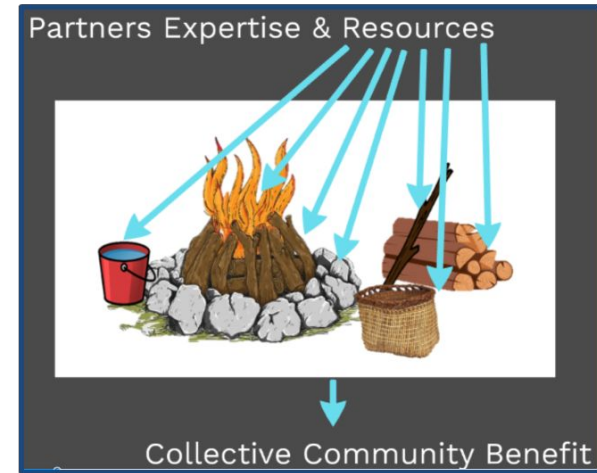
Formed in 2011

Collective Impact Partnership:
FASD

Multi-Modal System

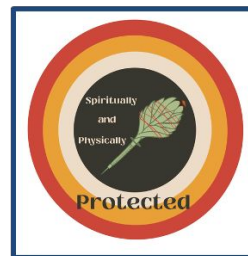
Inside/Outside Approach

Long-Term, Sustainable
Investment



Multnomah County Public Health Department

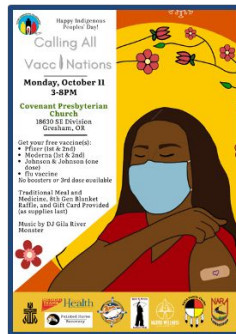
COVID-19 Pivot: Data Driven Healing & Trauma-Informed Community Response



Multnomah County Public Health Department

COVID-19 Pivot: Data Driven Healing & Trauma-Informed Community Response

Spotlight: Community Led & Data-Driven Public Health Approaches



Native Art and Messaging
Virtual Wellness Walks
FGC Coloring Book
Virtual Pow-Wows
Onboarding CHW Team
CHW Newsletter
Indigenous Food Sovereignty
Delivery Networks/Mutual Aid
BIPOC Data Council
CHW Training

Multnomah County Public Health Department

Spotlight: Community Led & Data-Driven Public Health Approaches

The Possibilities: Community Generated Responses

Data Driven
Culturally Congruent
Trauma and Healing Informed
Community Led
Community Embedded
County Funded
Relationship Investment
Mutual Benefit

Good for Prevention

Good for Crisis

Good for Community



Multnomah County Public Health Department

The Possibilities: CPCB Expansion & Coalition Building Investment



Spotlight: Tribal Partnerships



Klamath County Public Health & Klamath Tribes

- Social Exclusion Simulation
 - Klamath Regional Health Equity Coalition
 - Chiloquin First Coalition
- CHA and CHIP
- Sustainable Relationships for Community Health (SRCH) Grant



Klamath Tribal Health & Family Services

Klamath County Public Health Department

What is Public Health Modernization?

**Communicable
Disease**

**Environmental
Health**

**Access to Health
Services**

**Chronic Disease
Prevention**

Health Equity and Cultural Responsiveness // Community Partnership Development

Policy and Planning // Leadership and Organizational Competencies

Communications // Data: Assessment and Epidemiology

Emergency Preparedness & Response

THE FOUNDATIONAL CAPABILITIES OF PUBLIC HEALTH MODERNIZATION



Oregon Coalition of Local Health Officials

A very brief history...

Rep. Greenlick // 2013 Planning Process

HB 3100 (2015): PHM Framework, estimated \$210m per biennium needed

State
Investments
in PHM

Biennium	2017-19	2019-21	2021-23
LPHAs	\$3.9 M	\$10.3	\$33.4
Tribes		\$1.1	\$4.4
CBOs			\$10
OHA	\$1.1 M	\$4.2	\$12.8
Totals	\$5 M	\$15.6 M	\$60 M

2025 Statutory Deadline - **The Time is NOW**

2023 Session Asks:

WORKFORCE

1. Public Health Modernization: \$286 million
2. Public Health Workforce Incentives Fund: \$47 million

PREVENTION POLICY

3. Tobacco Flavor Ban

Public Health Modernization: \$286 Million

\$100m to Local Public Health
\$10m to Reproductive Health Services
\$100m to Community Based Organizations
\$30m to Tribal Governments
\$46m to Oregon Health Authority

- Minimum staffing levels in all counties
- Cross-sector & community collaboration
- Data Infrastructure & Data Sharing
- Health adaptation for extreme weather

Local jobs with good benefits

\$88:1 Return on investment

Healthy public = healthy workforce

Public Health Workforce: The Challenges



Spotlight: WF Impact in the Metro-region

The Tri-County Region

Clackamas, Washington, and Multnomah Counties are the three most populous counties in Oregon (~1.8 million residents total).

- 43% of the state's population lives in the Tri-County Region
- 70% of Oregon BIPOC communities live in the Tri-County Region



Clackamas County Public Health Department

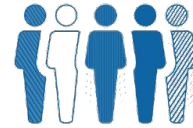
Spotlight: WF Impact in the Metro-region

2021-2023 Accomplishments

Clackamas, Washington and Multnomah Counties are increasing capacity to prevent communicable disease, address COVID plan for climate resilience, and engage communities to better prepare for emerging health threat.



Improvements to data
infrastructure for
communicable disease



Expanded culturally-
specific partnerships
and communication
strategies



Developing
partnerships with CCOs
and health systems on
climate resilience

Clackamas County Public Health Department

Spotlight: WF Impact in the Metro-region

Local Public Health Workforce



Pre-COVID staffing
56 staff

Peak during COVID
195 staff

Current staffing
107 staff



Pre-COVID staffing
125 staff

Peak during COVID
243 staff

Current staffing
185 staff



Pre-COVID staffing
270 staff

Peak during COVID
470 staff

Current staffing
391 staff

For this biennium, Public Health Modernization investments provided \$14.3 million for the Tri-County through regional and local funding.

Metro-area Public Health Departments

Spotlight: PH Nurses & Workforce Impacts

Public Health Nurse: On the ground experience

Joanne Buck, Multnomah County, Oregon Nurses Association

- Cost of Nursing School is a barrier to public health service
- Serving vulnerable populations
- Experiencing burnout at high rate

Umatilla County Public Health: Nurse Hiring Challenges

Joseph Fiumara, Umatilla County Public Health Department

- Had 5 nurses and 1 nurse vacancy at pandemic start
- Lost 4 nurses in the pandemic; gained 1 to replace
- Tried: Sign-on bonuses, extensive outreach, adjusted salary scales to increase faster.
- Succeeded with: increased starting salary & flexibility
- 2 filled / 3 vacancies

LPH Workforce Incentive Fund - LC 1067

\$47 million

- Scholarships + Barrier Removal
- Loan Repayment
- Retention Bonus at 5 years
- Supervision Stipends - Nurses, Interns, Fellows

One time funding put into a new
“Local Public Health Incentive Fund”

Spend over six years.

Administered by OHA

Tobacco Flavor Restriction - LC 1731

FLAVORS **HOOK** OREGON KIDS



Smoking remains the leading cause of preventable death in Oregon. Tobacco companies knowingly market harmful products to young users, spending \$115 million a year in Oregon on advertising and promotions. The result is that nearly all tobacco use begins before the age of 18 and 4 of 5 report starting with a flavored product.

LC 1731 closes the main pathway used to entice kids on tobacco products and hook them for life by restricting the sale of flavored tobacco products.

Tobacco Flavor Restriction - LC 1731

FLAVORS OREGON KIDS

- Nine of 10 adults who smoke report that they started smoking before turning 18
- 7 out of 10 youth e-cigarette users cite flavors as a reason they use e-cigarettes
- Over half (54%) of current youth smokers ages 12-17 smoke flavored cigarettes (menthol)
- 81% of kids who have used tobacco started with a flavored product
- 85% of youth e-cigarette users report using flavored products
- 85% of current African American users (12 and older) report using menthol flavored tobacco

Tobacco Flavor Restriction - LC 1731

FLAVORS  OREGON KIDS

Tobacco Products Come in TENS OF THOUSANDS of Flavors. Here are just a few:

Skittles, Berry, Mango, Cherry, Mint, Melon, Double Apple with mint, Orange, Grape, Orange Mint, Grape Mint, Peach, Gum Mint, Pineapple, Sour Patch Kid, Lemon Strawberry, Lemon Mint, Vanilla, Watermelon, Peach Mist, Hurricane Refugee, Geisha, Blueberry, Grapefruit Pink, Pirate's Cave, Bubblegum, Honey berry, Pomegranate, Chocolate, Safari Melon Dew, Coconut, Mighty Freeze, Passion Kiss,

2023 Session Asks:

1. Public Health Modernization: \$286 million
 - Pays for the day-to-day work
2. Public Health Workforce Incentives Fund: \$47 million
 - Pays for the extra incentives to recruit & retain
3. Tobacco Flavor Ban

QUESTIONS?



The Time is NOW.

Thank you.

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