





Community Health Improvement Plan

Umatilla County, Oregon

"Working Together for a Healthier Future"

Community Health Improvement Plan

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Executive Summary

The Community Health Improvement Plan (CHIP) is a long-term, systematic approach to improving public health. The CHIP was inspired by <u>Umatilla County's 2021 Community Health Assessment</u> (CHA). The plan, which aims to foster positive change in the community over the next five years, guides Umatilla County's public health efforts.

The CHIP creation used a process adapted from the Association for Community Health Improvement (ACHI) Assessment toolkit. Umatilla County Public Health facilitated this process. The plan was created through a collaborative effort by various community partners and county residents.

The CHIP aims to improve the overall health of Umatilla County by targeting areas of most significant concern, as identified through the CHA. Ultimately, the CHIP seeks to bring community organizations together to introduce or expand programs and services to the residents who are most in need.

¹Centers for Disease Control and Prevention

The interventions, goals, and measures of success that the CHIP will utilize to address residents' identified health needs were developed through evidence-based practices successfully employed in similar community settings.

About Umatilla County Public Health

The **mission** of Umatilla County Public Health is dedicated to promoting, protecting, and preserving the health of our community. Our **vision** highlights and supports Healthy Practices, Healthy People, and Healthy Places. Our **values** include

- Scientific Excellence
- Passion & Pride
- Accountability
- Teamwork

- Inclusivity
- Respect
- Integrity

Umatilla County Public Health's goals are to understand specific health issues, investigate health problems and threats, prevent and or minimize communicable disease outbreaks caused by unsafe food, water, chronic diseases, environmental hazards, injuries, and risky health behaviors. The department works actively in developing response plans in the event of a public health emergency, and we work closely with local responders and the state. We have partnerships with public and private healthcare providers and community and government agencies that all work toward improving our community services.

About the Community

Umatilla County is a diverse community. Lying at the base of the Blue Mountains, the county is home to approximately 80,075 people.² The county's economy specializes in agriculture, forestry, fishing, hunting, and utilities; its most significant industries are retail trade, manufacturing, and health care. Umatilla County is rich in productive farmland, with over 1,700 farms throughout the 3,231 square miles (8,370 km2) that make up the county.

Just east of Pendleton lies the Umatilla Reservation, home to nearly half of the 3,100 members of the Confederated Tribes of the Umatilla Indian Reservation (CTUIR). CTUIR is a union of three tribes, Cayuse, Umatilla, and Walla Walla, created through a treaty with the U.S. government in 1855.

Tourism is essential to the local economy. The county is known for the Umatilla National Forest, the world-famous Pendleton Round-Up Rodeo & Happy Canyon, the Umatilla County Fair & Farm City Pro Rodeo, and the wineries of Echo and Milton-Freewater.

Roughly 15% of residents are below the poverty line, which is 25 percent higher than the rate in Oregon, and about 20 percent higher than the rate in the United States. Eighteen percent of

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²US Census

children (under 18) in the county live in poverty.³ In addition, like many rural communities, Umatilla County has a shortage of primary care providers. These factors contribute to the unique public health challenges faced by the community.

Significant Health Needs

UCo Health published the <u>2021 Umatilla County Community Health Assessment</u> (CHA) on its website in December 2021. Based on data from the CHA and meetings with the Community Health Improvement Committee and stakeholders, five significant community health needs were identified in the county:

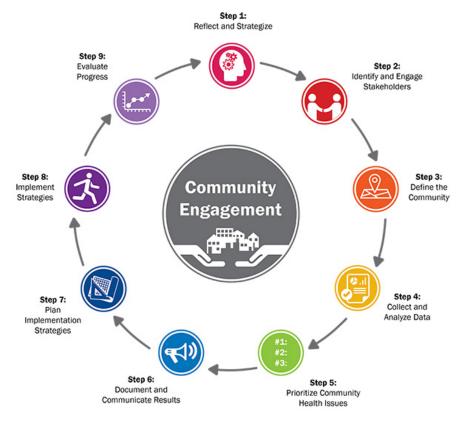
- 1. Chronic Diseases
- 2. Behavioral/Mental Health
- 3. Maternal and Child Health
- 4. Housing & Houselessness
- 5. Senior Care

CHIP Methodology

The 2022-2026 Umatilla County CHIP was developed utilizing a collaborative process based on the nationally-recognized Association for Community Health Improvement (ACHI) Assessment Toolkit.

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³U.S. Census



Community Engagement

- Step 1: Reflect and Strategize
- Step 2: Identify and Engage Stakeholders
- Step 3: Define the Community
- Step 4: Collect and Analyze Data
- Step 5: Prioritize Community Health Issues
- Step 6: Document and Communicate Results
- Step 7: Plan Implementation Strategies
- Step 8: Implement Strategies
- Step 9: Evaluate Progress

The draft plan was developed by a CHIP Committee composed of diverse community stakeholders. The committee's role was to help define priorities and strategies for implementing each goal. Built into the CHIP are the expected outcomes for each strategy and the year it will be accomplished.

The committee will help create connections between the plan and other vital initiatives in Umatilla County that have similar goals. On an ongoing basis, the committee will also identify new partnerships to carry out CHIP strategies. When needed and as the committee recommends, Task Forces focusing on particular goals will be established to complete more in-depth planning and ensure the successful implementation of strategies.

UCo Health staff will review and update the plan over the next five years and track and evaluate the strategies' progress. The committee will periodically review the plan and propose changes that can achieve a more significant impact by modifying approaches.

About the Data

UCo Health collected secondary data from multiple sites, using county-specific data whenever possible. UCo Health utilized resources such as the Behavioral Risk Factor Surveillance System (BRFSS), numerous CDC sites, U.S. Census data, Healthy People 2030, and Oregon Health Authority, among other national and local sources. The primary data collected in this report is mainly from the 2021 Umatilla County Public Health Assessment⁴ and the 2021 Umatilla/Morrow Counties Community Health Needs Assessment.⁵ All other data will be cited accordingly.

During the research and writing of the 2021 Umatilla County Community Health Assessment, it was difficult to find county-specific and timely data on the top five issues identified as priorities by the CHIP committee. It is recommended that specific questions related to the top five issues be included in the primary data collection questionnaires for UCo Health's 2026 Umatilla County Community Health Assessment.

Public Health Modernization

Public health modernization is an approach that recognizes the changing landscape of public health and the increasing complexity of today's health threats. The 2022-2026 Umatilla County Health Improvement Plan is built on this principle, acknowledging the need for new strategies and approaches to improve health outcomes for all members of our community.

One of the challenges we face is the fact that not everyone benefits equally from improvements in health. Some groups, particularly those with limited financial resources and communities of color, are at higher risk of becoming ill or dying early. To address these disparities, we need to prioritize efforts that are equitable, inclusive, and culturally responsive.

Another challenge we face in Umatilla County is the unique obstacles that come with living in a rural area. These challenges can include limited access to healthcare providers, a shortage of nurses and other healthcare workers, and difficulty retaining skilled professionals.

Despite these challenges, the principles of public health modernization offer a roadmap for building a healthier, more resilient community. By working together, prioritizing equity and

⁴ <u>Umatilla County Public Health</u>

⁵ Good Shepherd Health Care System and CHI St. Anthony

inclusion, and leveraging innovative strategies and technologies, we can create a future where everyone has the opportunity to thrive.

All materials created for the proposed strategies/activities will be bilingual (English and Spanish) whenever possible.



Health Priority #1 – Reduce Chronic Diseases

Goal: Focus prevention efforts on obesity, diabetes, heart disease, and other chronic diseases while creating environments that promote healthy eating and physical activities that are realistic and accessible for all Umatilla County residents.

Heart disease is the leading cause of death for men, women, and people of most racial and ethnic groups in the United States. Source: CDC Heart Disease Facts

Obesity in Umatilla County

According to the 2021 Umatilla County Community Health Assessment, between 2014 and 2017, obesity among adults in Umatilla County was 36%, higher than the 29% rate in Oregon. Only seven counties in Oregon had more obesity than Umatilla — the county ranked in the bottom 25% of counties in the state. That number has been on the rise. According to the 2021 Umatilla/Morrow Counties Community Health Assessment, nearly half of all adults in those counties self-reported to be obese.

Your <u>Body Mass Index (BMI)</u> and/or <u>waist-to-height</u> ratio are just a few factors in your health – but your body weight may impact other chronic diseases.

Data from the State of Childhood Obesity, a Robert Wood Johnson Foundation project, showed that from 2019 to 2020, 13.7% of Oregon's youth ages 10 to 17 in Oregon are obese, ranking Oregon 36th amongst the 50 states and D.C. According to the 2020 Oregon Student Health Survey using BMI calculations, 57% of 8th and 58% of 11th graders in Umatilla County fell within the healthy body range (i.e., neither underweight nor underweight/obese), which is lower than the state average of 64% and 66% respectively. Twenty percent of 8th and 22% of 11th graders were considered obese according to BMI calculations, compared to 16% (8th) and 15% (11th) statewide.

Today's children are projected to have shorter life expectancies than their parents or grandparents due to being overweight and obese.

Source: Oregon Health Authority

There are many adverse health outcomes related to obesity. People who have obesity, compared to those with a standard or healthy weight, are at increased risk for many severe diseases and health conditions, including

- High blood pressure (hypertension)
- High LDL cholesterol, low HDL cholesterol, or high levels of triglycerides (dyslipidemia)
- Type 2 diabetes
- Coronary heart disease
- Stroke
- Gallbladder disease
- Inferior quality of life

- Osteoarthritis (a breakdown of cartilage and bone within a joint)
- Sleep apnea and breathing problems
- Mental illnesses such as clinical depression, anxiety, and other mental disorders
- Body pain and difficulty with physical functioning

Preventing obesity will lower the amount that county residents spend on obesity-related illnesses. And it will also reduce the risk of high blood pressure, stroke, and depression, all of which would improve quality of life.

Graph 1: Chronic Diseases in Umatilla County

UMATILLA COUNTY HEALTH CONDITIONS High cholesterol (2017)High blood pressure (2018) Arthritis (2018) Condition / (year of data) Ashthma (2018) Diabetes (2018) COPD (2018) Heart disease (2018)Cancer (excluding skin cancer) (2018) Stroke (2018) 0 30

Data sources: The model-based estimates were generated using BRFSS 2017/2018, or Census 2010 population counts or census county population estimates of 2016 or 2017, and ACS 2014-2018 or ACS 2013-2017.

Age-adjusted Percentage of Population

According to Graph 1 above, many other chronic diseases or preventable health conditions are prevalent in our county. And many chronic diseases may be prevented or managed with testing and certain vaccinations.

Also, with a higher incidence of rates of diabetes than in Oregon or the U.S. at 11.3%⁶ (2018), knowing their prediabetes status could help individuals develop healthier behaviors to prevent diabetes. According to the CDC, approximately 96 million American adults—more than 1 in 3—have prediabetes. Of those with prediabetes, more than 80% don't know they have it. Prediabetes puts a person at increased risk of developing type 2 diabetes, heart disease, and stroke.⁷

⁶Centers for Disease Control and Prevention ⁷Centers for Disease Control and Prevention

CHRONIC DISEASES			
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS
Dedicate a section on chronic disease issues in the primary data collection process for the 2026 Community Health Assessment (CHA).	-Work with the CHIP chronic disease subgroup and community-based organizations to develop survey questions. (UCo Health)	Long Term: Include at least ten chronic disease-specific survey questions in the 2026 CHA. (Copy of the 2026 CHA questionnaire)	-UCo Health -CHIP Chronic Disease Subgroup
Improve the health of individuals at risk due to being overweight or obese.	-Promote physical activity by advertising classes and events on the UCo Health and partners' websites, through social media, and at community outreach events. (UCo Health) -Partner with local gyms and fitness providers to sponsor booths at local health events that engage participants with games with prizes related to trivia about food, exercise, and wellness. (UCo Health) -Subgroup will produce a report on the feasibility of Community Gardens. (Subgroup – the name of the leader) -Increase awareness about the importance of fruits and vegetables for overall health. (UCo Health) -Promote nutritional education, i.e., how to read food labels, prepare meals, etc. (OSU Extension) -Increase healthy eating and exercise information provided in School-Based Health Centers. (UCo Health) -Outreach to SNAP recipients to educate their SNAP benefits are eligible for grocery deliveries through Instacart. (OSU Extension)	Short term: Increase of 10% in the percentage of Umatilla County residents who accomplish the recommended moderate exercise by 2024. (pre and post-Facebook survey) Increase the number of healthy eating and exercise materials available in School-Based Health Centers by 5% (2024). (Self-reporting) By 2024, the CHIP Chronic Disease subgroup will produce a feasibility study for adding new community gardens in the county. (Self-reporting) Long term: By 2026, reduce the percentage of adults who are obese from 49% to 45%. (2026 CHA) By 2026, reduce the rate of children (8th grade/11th grade) who are obese to an average of 17%. (2026 CHA & and/or Oregon Student Health Survey	-UCo Health -Good Shepherd -CHI St. Anthony -OWhN -OSU Extension (SNAP Ed) -Lovin' Spadeful Community Garden (Hermiston) -Umatilla County Master Gardeners -EOCCO -Doulas Latinas International (DLI) -DLI Hermiston Community Garden.
Bring awareness to the harm of sugary drinks and highlight healthy alternatives.	-Promote alternatives through outreach, i.e., distribute easy-to-make recipes for healthy smoothies, teas, carbonated water with flavors, maple water, fruit, herb	Short Term: By 2024, bring awareness of the harm caused by consuming sugary drinks	-UCo Health -Parks and Recreation -OSU Extension (SNAP-Ed) -Farmer's Markets

CHRONIC DISEASES			
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS
	infusions, freshly-squeezed lemonade, and kombucha. (UCo Health) -Promote bottled water at outreach events and with certain partners like hospitals, gyms, Parks and Recs, etc. (UCo Health) -Use the American Heart association's Voices for Health Kids' Build a Campaign module to create a county-wide campaign to ensure all kids and families have access to healthy, affordable drink options. (TBD) (UCo Health)	by posting at least ten posts on social media each year. (Self-reporting) Increase awareness by 5% about healthier soda alternatives by 2024. (Pre and post-Facebook survey)	-Good Shepherd -CHI St. Anthony Hospital -Local gyms & fitness centers -Doulas Latinas International Health Literacy program (Spanish) -Pendleton School District (requested to be added to list)
Increase adults' awareness of diabetes status.	-Raise awareness of and expand access to diabetes prevention programs through social media, print/radio/television placements, UCo Health and partners' websites, and community events. (UCo Health) -Media (radio/TV and social) marketing for free A1C testing. (Hospitals) -Promote wellness days at local employers. (TBD) -Marketing CDC pre-diabetes screening at outreach events and providing vouchers to those at risk. (Good Shepherd)	Long term: By 2025, increase adults' awareness of diabetes status by 5%. (pre and post-Facebook survey)	-UCo Health -Euvalcree -Good Shepherd -CHI St. Anthony -Doulas Latinas International DPP Program (Spanish)
Support community- wide efforts to improve rates of cholesterol testing, colon cancer, and mammogram screenings, as well as pap smears.	-Advertise the availability of free screenings through social media, print/radio/television placements, UCo Health and partners' websites, and community events. (UCo Health)	Short term: By 2024, increase the rates of cholesterol testing, colon cancer, mammogram screenings, and pap smears by 5%. (Oregon Public Health Assessment Tool & ALERT Immunization Information System)	-UCo Health -Local providers -Good Shepherd -CHI St. Anthony -Women's Center -Doulas Latinas International Health Literacy

Health Priority #2 – Improve Behavioral & Mental Health

Goal: Reduce tobacco/nicotine use through prevention and cessation efforts, and increase access to information and prevention resources for alcohol/drug abuse, problem gambling, and suicide.

Tobacco/Nicotine

In Umatilla County, tobacco-related death rates per 100,000 population and age-adjusted (2015–2018) was 186.8 out of 100,000 deaths. Only ten counties had higher rates of tobacco-related deaths.⁸

According to the County Health Rankings and Roadmaps, the rate of adult smokers was 18% in 2019.9

The tobacco/nicotine product use amongst 11th and 8th graders was high. Among 11th graders in Umatilla County, e-cigarettes were far more popular than cigarettes in 2020 (11.9% to 2.9%, respectively). For 8th graders, e-cigarette usage was 5.1%, and cigarettes at 1.25%.¹⁰

Alcohol/Drug Abuse

According to America's Health Rankings, alcohol is the third-leading preventable cause of death in the United States, behind tobacco and poor diet/physical inactivity. 11

In 2020, Umatilla County reported 18.4 overdose deaths per 100k population (or 15 reported overdose deaths), compared to Oregon at 21.1 per 100k (or 900 reported overdose deaths). ¹² Alcohol was a factor in 27 Umatilla County deaths in 2018. ¹³

Problem Gambling

People who gamble compulsively often have substance abuse problems, personality disorders, depression or anxiety. Compulsive gambling may also be associated with bipolar disorder, obsessive-compulsive disorder (OCD) or attention-deficit/hyperactivity disorder (ADHD).

Source: Mayo Clinic

⁸ Oregon Health Authority

⁹ County Health Rankings

¹⁰ 2020 Oregon Student Health Survey

¹¹ America's Health Rankings

¹² Oregon Health Authority

¹³ Oregon Death Certificate Data and Oregon Behavioral Risk Factor Surveillance System

Suicide

In 2019, suicide was the tenth leading cause of death in Umatilla County, with ten deaths reported. In 2020, there were 19 suicides, a 90% increase. ¹⁴

Suicide is the leading cause of death among Oregonians aged 10 to 24.

Source: Oregon Health Authority

Suicide is a complex, persistent, preventable public health problem that negatively impacts communities throughout Oregon. Effective suicide prevention requires a community approach and adequate support resources. UCo Health aims to reduce the burden of youth suicide in Northeast Oregon by preparing rural populations and promoting suicide prevention and intervention.

Myth: Suicide only affects individuals with mental health conditions.

Fact: Many individuals with mental illness are not affected by suicidal thoughts, and not all people who attempt or die by suicide have a mental illness. Relationship problems and other life stressors such as criminal/legal matters, persecution, eviction/loss of home, death of a loved one, a devastating or debilitating illness, trauma, sexual abuse, rejection, and recent or impending crises are also associated with suicidal thoughts and attempts.

Source: National Alliance on Mental Illness

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¹⁴Oregon Health Authority

BEHAVIORAL AND MENTAL HEALTH			
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS
Dedicate a section on behavioral and mental health issues in the primary data collection process for the 2026 Community Health Assessment (CHA).	-Work with the CHIP behavioral and mental health subgroup and community-based organizations to develop survey questions. (UCo Health) -Incorporate Doulas Latinas International Latino-women focus groups/groups meeting into primary data collection process. (Doulas Latinas International)	Long Term: Include at least ten behavioral and mental health-specific survey questions in the 2026 CHA. (Copy of the 2026 CHA questionnaire)	-UCo Health -CHIP Behavioral and Mental Health Subgroup -Doulas Latinas International
Increase the awareness of available addiction prevention interventions utilized by UCo Health and partners.	-Identify addiction prevention programs/groups by UCo Health and partners and create a shareable matrix to distribute through social media, radio/television/print placements, websites, and community events. (UCo Health) -Identify additional evidence-based interventions that could be implemented into UCo Health and partners' prevention work. (UCo Health) -Promote the 988 emergency line and Community Counseling Solutions services. (UCo Health & CCS)	Short term: By 2023, distribute the addiction prevention interventions matrix to at least ten partners and publish the matrix at least ten times on social media. (Self-reporting, copy of matrix)	-UCo Health -Greater Oregon Behavioral Health, Inc. (GOBHI)I -Community Counseling Solutions (CCS) -OWhN/COPES -Eastern Oregon Center for Independent Living (EOCIL) -School-Based Health Centers
Decrease the number of Umatilla County residents, including adolescents, who use tobacco, nicotine, or vape products.	-Support state and national strategies to reduce the availability of tobacco products while assessing local community readiness for interventions to reduce the availability of tobacco products. (UCo Health) -Track tobacco/nicotine-related policies at local, state, and federal levels. (UCo Health) -Promote Oregon Tobacco Quit Line and local resources to community members. (UCo Health)	Long term: By 2026, reduce the number of individuals who use nicotine products by 3%. (2026 Community Health Assessment [CHA] and Oregon Student Health Survey)	-UCo Health -OHA-funded CBOs -CHI St. Anthony -Good Shepherd -Head Start of Umatilla & Morrow Counties -Healthy Families of Oregon -Pioneer Relief Nursery -Yellowhawk Tribal Health Center (Yellowhawk) -Doulas Latinas International -Schools -Crow's Shadow art center

BEHAVIORAL AND MENTAL HEALTH			
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS
	-Perform educational outreach activities to raise awareness of the need for tobacco-free public spaces. (UCo Health) -Continue to utilize social media print/radio/television ads and outreach at community events to increase awareness of the consequences of smoking/vaping. (UCo Health) -Perform outreach and education through School-Based Health Centers. (UCo Health) -Continue Doulas Latinas International Commercial Tobacco Prevention supported by OHA and EOCCO. (Doulas Latinas International, OHA, EOCCO)d -Create a poster art contest for students regarding smoking and vaping. (UCo Health)		
Raise awareness about problem gambling.	-Perform a Community Readiness Assessment Model (CRAM) on problem gambling. (UCo Health) -Continue advertising/marketing efforts for problem gambling & treatment. (UCo Health) -Seek funds for collaborative work within Hispanic communities. (Doulas Latinas International and New Horizons Programs)	Short term: Release results of the CRAM assessment in 2023 and make them available on UCo Health and partners' websites and social media. (Self-reporting) Raise awareness of problem gambling by 25% by 2024. (pre and post-Facebook survey)	-UCo Health -New Horizons -CCS -Yellowhawk -Wildhorse Resort and Casino -GOBHI -Doulas Latinas International & New Horizons program)
Reduce the rate of fatal drug overdose deaths.	-Develop a list of free and low-cost drug and alcohol detoxification and treatment programs and post them on websites, social media, and in clinics. (UCo Health) -Provide more Narcan training. (UCo Health, EOCIL & OWhN)	Short Term: Each year beginning 2023, post at least 10 social media/website articles and/or other media spots highlighting available drug and alcohol detoxification	-UCo Health -GOBHI -CCS -OWhN/COPEs -EOCIL -New Horizons -School Districts -CARE Program

BEHAVIORAL AND MENTAL HEALTH			
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS
	-Improve coordination of community partners' emergency response in the event of overdose spikes. (UCo Health) -Provide support to Doulas Latinas International and New Horizons as they seek funding for prevention of drug overdose deaths activities. (Doulas Latinas International & UCo Health)	programs in the county. (Self-reporting) By 2024, Increase the number of Narcan trainings by 10%. (Program Coordinator report) Increase the number of Narcan kits distributed by 10% in 2024. (Program Coordinator report) By 2026, reduce the rate of fatal drug overdoses by 10%. (OHA Prescribing and Drug Overdose Data Dashboard)	-Doulas Latinas International
Increase reporting for the number of drug overdoses, identifying hotspots.	-Promote the Overdose Detection and Mapping Application Program (ODMAP) to all local police, sheriff, fire departments, and other relevant agencies in the county. (UCo Health) -Outreach and education to raise awareness for the general public to recognize and report accidental overdoses. (UCo Health)	Long Term: By 2026, increase to 50% the number of local police, sheriff, fire departments, and relevant government agencies that participate in the ODMAP tracking system (ODMAP Usage Statistics)	-UCo Health -Law enforcement -GOBHI -COPES -EOCIL -Good Shepherd -CHI St. Anthony -Urgent Cares -EMS, Fire Departments -Doulas Latinas International
Raise awareness about drug disposal and needle exchange programs in the county.	-Utilize social media, radio/television/print placements, websites, and community events. social media to provide information about local drug disposal and needle exchange programs. (UCo Health and EOCIL)	Long Term: By 2026, increase the volume of exchanged needles by 25%. (EOCIL status updates)	-UCo Health -Libraries -EOCIL -Warming Stations -Promise Inn -COPES -CCS -Salvation Army -St. Mary's Outreach -New Horizons -Pendleton Treatment Center
Decrease the number of suicides in Umatilla County, with special emphasis on outreach to youth,	-Increase outreach, advertising, prevention, and education through community events, social media, local media (radio/print/television), and websites. (UCo Health)	Short Term: Increase the number of ASIST trainings by 5% in 2024. (Yellowhawk Coordinator report.)	-UCo Health -CCS -Area Agency on Aging -PEARLS -Libraries -School Districts -CARE Program

	BEHAVIORAL AND MENTAL HEALTH			
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS	
veterans, and older adults.	-Target hard-to-reach populations such as senior citizens and veterans with suicide prevention messaging. (UCo Health, Veterans Affairs, CAPECO) -Provide ongoing Applied Suicide Intervention Skills Training (ASIST) throughout the county. (Yellowhawk) -Create or partner with an existing suicide prevention/awareness event activity annually. (UCo Health) -Continue to write grant proposals to increase the size and scope of UCo Health's Suicide Prevention program and create a sucidie prevention coalition for Umatilla County (UCo Health) -Increase and target outreach, training, and services appropriate for youth and organizations that work with youth identified as at high risk. (UCo Health) -Consider upstream interventions such as Sources of Strength targeting emotional regulation from a young age. (TBD) -Promote QRP Gatekeeper suicide prevention training to community members. (GOHBI, UCo Health, Oregon Older Adults Behavioral Health Initiative)	By 2024, increase the number of suicide prevention-related social media posts, flyer distribution, and media exposure. (Self-reporting and copy of materials distributed.) Long Term: Reduce the number of suicides in Umatilla County by 15% in 2026. Secure at least two new sucide-related funding sources by 2026.	-Skilled Nursing/Assisted Living Facilities -GOBHI -Juvenile Department -Veterans Affairs -Churches/Places of worship -Community/Traditional Health Workers -Doulas Latinas International -Yellowhawk	
Increase awareness of GOHBI's Older Adult Behavioral Health training and services.	-Promote Older Adult Behavioral Health training and services through outreach, advertising, prevention, and education through community events, social media, local media (radio/print/television), and websites. (GOHBI, UCo Health, TBD)			

BEHAVIORAL AND MENTAL HEALTH			
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS
Increase awareness of national and local suicide hotlines and warmlines.	-Promote national and local suicide hotlines and warmlines (English and Spanish) through social media, radio/television/print placements, websites, and community events. (UCo Health) -Promote 211 as a resource and ensure local programs are updated in the system. (CCS) -Promote resources at community events. (UCo Health)	Short Term: By 2024, improve awareness of all suicide hotlines available to different audiences by 25% (pre and post-Facebook survey)	-UCo Health -Churches/Places of worship -COPES -GOBHI -CCS
Help destigmatize behavioral health conditions and encourage help-seeking behaviors.	-Promote existing videos on the topic of behavioral health conditions. (UCo Health) -Utilize/promote peer resources in the community. (UCo Health) -Reduce barriers to seeking behavioral healthcare services	Short Term: By 2024, increase the number of suicide prevention-related social/print/radio/television posts and/or placements by 25%.	-UCo Health -COPES -GOBHI -CCS -Doulas Latinas International



Health Priority #3 - Maternal & Child Health

Goal: Provide free ongoing home visits by registered nurses to low-income, first-time mothers; promote reproductive health and vaccinations; and encourage the physical and psychosocial development of children.

Thirty percent of the women in the U.S. who become pregnant and give birth to one or more children suffer pregnancy complications. These range from depression to needing a cesarean delivery. One significant risk for complications and poor outcomes is that more than half of women are overweight or underweight when pregnant.¹⁵

The well-being of mothers, infants, and children determines the health of the next generation and can help predict future public health challenges for families, communities, and the medical care system.

Source: <u>HealthyPeople.gov</u>

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¹⁵ Healthypeople.gov

MATERNAL AND CHILD HEALTH			
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS
Dedicate a section on maternal and child health issues in the primary data collection process for the 2026 Community Health Assessment (CHA).	-Work with the CHIP maternal and child health subgroup and community-based organizations to develop survey questions. (UCo Health)	Long Term: Include at least ten maternal and child health-specific survey questions in the 2026 CHA. (Copy of the 2026 CHA questionnaire)	-UCo Health -CHIP Maternal and Child Health Subgroup
Increase awareness and reporting of child abuse and neglect.	-Referral to parenting support/education classes (trauma-informed, socio-emotional). (UMHS) -Promote parental self-care through social media, radio/television/print placements, websites, and community events. (UCo Health) -Seek additional county, state, and federal grants. (TBD) -Training, certification and work with the Hispanic-Indigenous communities to increase access to Latin Doulas to secure culturally and linguistically specific services of a Doula, providing services proven to reduce birth medicalization, unneeded or repeated c-sections. (Doulas Latinas International, EOCCO and OHA/OE&I.) -Promote awareness of Adverse Childhood Experiences (ACEs) to primary care physicians. (TDB)	Short Term: Submit at least one new maternal/child health grant by 2024. (Synopsis of grant)	-UCo Health -CARE Program -Blue Mountain Early Learning Hub -Head Start of Umatilla & Morrow Counties -Oregon Parenting Education Collaborative -OWhN (Project Nurture) -Pioneer Relief Nursery -School Districts -UMHS, OCDC, Cay-uma-wa -Child care providers -Ob-gyn providers -CHI St. Anthony -Women's Center -Triple P (GOBHI) -Doulas Latinas International -Oregon Parenting Education Collaborative (OPEC)
Increase the proportion of eligible Umatilla County residents who receive their first dose of HPV vaccine.	-Conduct cervical cancer screening assessment. (UCo Health) -Provide gift cards for those through age 18 who complete their HPV vaccination series at public health clinics, School-Based Health Centers,	Long Term: By 2025, increase by 5% the rate of eligible Umatilla County residents who receive their first HPV shot (Oregon Public Health Assessment Tool & ALERT Immunization Information System)	-UCo Health -Primary Care Offices -School-Based Health Centers -Local pediatricians -Doulas Latinas International & Doulas Latinas Women's Collective

MATERNAL AND CHILD HEALTH			
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS
Increase the number	and local pediatricians' offices. (UCo Health) -Reduce the stigma about HPV vaccination by messaging through social media, radio/television/print placements, websites, and community events. (UCo Health) -Utilize social media,	Short Term:	-UCo Health
of adults and children who are up-to-date on vaccination shots.	radio/television/print placements, websites, and community events to increase awareness of the importance of receiving annual vaccinations. (UCo Health) -Support scheduling subsequent immunization visits. (UCo Health) -Conduct training for schools and certified daycare centers on immunization record assessment and family notification in concert with school partners. (UCo Health & OHA) -Increase regular annual immunization clinics throughout the county. (UCo Health) -Text reminders to UCo Health clients who need to update vaccinations. (UCo Health) -Outreach through social media, radio/television/print placements, websites, and community events. (UCo Health) -Continue with the OHA-UCo Health partnership with CBOs for the community vaccine events - as a chain of education, service, and resources. (OHA, UCo Health, CBOs incl. Doulas Latinas International)	By 2024, increase the rate of individuals who are update-to-date on their vaccinations by 5%. (Oregon Public Health Assessment Tool & ALERT Immunization Information System) Long Term: By 2025, increase vaccination rates of school children to 98%. (School immunization primary report and vaccination exclusions rate) By 2025, increase the number of kindergarten children receiving all vaccines required for school entry by 5%. (Oregon Public Health Assessment Tool and ALERT Immunization information system and UCo Health data)	-Hospitals -Daycare centers -School-Based Health Centers -Pediatricians -School Districts -EOCCO -Doulas Latinas International (DLI) -New Horizons Programs

MATERNAL AND CHILD HEALTH			
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS
Reduce the teen pregnancy and birth rates in the county.	-Promote birth control and reproductive health information through social media, radio/television/print placements, websites, and community events. (UCo Health) -Work with school districts to ensure age-appropriate sexuality education is provided at schools. (UCo Health & TBD) -Doulas Latinas International (DLI) to offer health literacy, Youth Doulas training and doulas services (DLI)	Long Term: By 2025, increase by 10% the number of school districts in the county that provide age-appropriate sexuality education to students. (School district surveys) By 2026, lower the rate of teen pregnancies (ages 13 to 19) by 15%. (2026 CHA, OHA statistics, and information from County Health Rankings)	-UCo Health -School Districts -Doulas Latinas International (DLI)
Ensure families have access to safe, affordable, and appropriate child care.	-Work with local childcare providers to promote awareness of the lack of affordable childcare. (TBD) -Workshops/sessions on becoming a certified childcare provider. (UMHS)	Short Term: Create and maintain a list of certified childcare providers on the UCo Health and partners' websites and provide it to at least 15 partners in the county by 2024. (Self-reporting) Increase by 15% the number of childcare-related issues promoted through websites and media: (social/radio/print/TV) by 2024.	-UCo Health -Blue Mountain Early Learning Hub -CARE Program -DHS (Self Sufficiency, child welfare) -Head Start of Umatilla & Morrow Counties -Private daycares -OSU Extension Office -Churches -UMHS (promotes becoming child care provider) -Employment Related Day Care (ERDC)



Health Priority #4 – Housing and Houselessness

Goal: To reduce chronic houselessness in Umatilla County among Veterans, youth, adults, single parents, or families with children, and increase awareness of available primary and mental/behavioral health and social services.

Root Causes of Houselessness

Many people assume mental illness or addiction is the cause of most houselessness. However, according to a study by ECONorthwest commissioned by the Oregon Community Foundation, "It is impossible to know which of those households will experience domestic violence, the loss of a job, a death, a health event, or other adverse circumstances that can trigger homelessness."

The report theorizes that high housing costs put tens of thousands of Oregonian households at risk of houselessness at any given time. 16

Solutions to inadequate housing supply, rising rents, a lack of public services and shelter space must be approached collaboratively by public, private, non-profit and philanthropic sectors.

Source: Oregon Community Foundation HOMELESSNESS IN OREGON A Review of Trends, Causes, and Policy Options (March 2019)

¹⁶²⁰²¹ Umatilla County Health Assessment

HOUSING AND HOUSELESSNESS			
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS
Dedicate a section on housing/ houselessness issues in the primary data collection process for the 2026 Community Health Assessment (CHA).	-Work with CHIP housing/houselessness subgroup and community-based organizations to develop survey questions. (UCo Health)	Long Term: Include at least ten housing/houselessness-speci fic survey questions in the 2026 CHA. (Copy of the 2026 CHA questionnaire)	-UCo Health -CHIP housing/houselessness subgroup -CAPECO -Fair Housing Council of Oregon -Home 4 Hope
Help reduce houselessness in Umatilla County.	-Participate with community-based organizations to create a coordinated and collaborative houselessness service-delivery system. (UCo Health & Home 4 Hope) -Support and market programs and efforts that address houselessness. (UCo Health) -Provide education to reduce disability barriers for housing. (Fair Housing Council)	Long Term: Decrease by 5% the rate of houselessness per 100,000 people by 2026. (Annual PIT count) Decrease the number of houseless students in the County by 5% by 2026. (Oregon's Student Health Survey)	-UCo Health -School-Based Health Centers -Home 4 Hope -Stepping Stones -Fair Housing Council of Oregon -CAPECO -Promise Inn -Altrusa (KARE) -CARE -EOCCO -GOBHI -Martha's House -EOCIL -Umatilla Housing Authority -Yellowhawk -Tribal Housing Authority -CTUIR -OHA - CPOP team -Doulas Latinas International (DLI) -Stepping Stones Alliance
Help eligible, houseless individuals and families connect with general and mental health and social services.	-Strengthen outreach and engagement activities through media (social/radio/TV/print) and community events. (UCo Health) -Identify houseless and highly mobile students and connect them and their families with services. (TBD) -Continue collaborating with community-based organizations to help identify those in need and	Short Term: Increase housing and houselessness-related posts on social media and print media by 15% (2024). (Self-reporting and copies of posts/articles) Increase by 10% (2024) the number of houseless service referrals made by UCo Health clinics, School-Based Health Centers, and community events. (Self-reporting)	-UCo Health -CARE Program -School-based health clinics -Altrusa -Agape House -Yellowhawk -Tribal Housing Authority -CTUIR -CAPECO -Promises Inn -Employment department -DHS -GOBHI -EOCCO

HOUSING AND HOUSELESSNESS				
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS	
	provide referrals to appropriate agencies. (TBD) -Participate in the annual Project Community Connect and PIT count. (UCo Health)		-Community Counseling Services -Veteran's Services/Programs -Conrad Skinner (veterans) -Child Welfare -APD -Migrant Seasonal Farmworker Housing -EOCIL -Traditional health workers and community health workers (Connexions) -Fair Housing Council of Oregon -OHA - CPOP team -Non-emergent medical transportation -GOBHI -Clearview -School Districts -Law enforcement -Doulas Latinas International (DLI) and New Horizons Programs -Stepping Stones Alliance	
Provide extensive testing and vaccinations (when available) to houseless adults for STDs, Hepatitis A, B, C, Meningococcal, and others.	-Participate in the annual Project Community Connect for tabling and outreach. (UCo Health) -Partner with organizations that offer services to houseless individuals and provide vouchers for testing/vaccinations (UCo Health & Hospitals)	Short Term: Increase the number of testings 10% for STDs, Hepatitis A, B, C, and Meningococcal by 2014. Long Term: Decrease the number of reported STDs, Hepatitis A, B, C, and Meningococcal by 10% (2026). (Oregon Public Health Assessment Tool and ALERT Immunization information system.)	-UCo Health -CHI St. Anthony Hospital -OHA - CPOP team -Good Shepherd -CAPECO -Home4Hope -Neighbor2Neighbor -Salvation Army -Doulas Latinas International -Stepping Stones Alliance -Veteran Services	



Health Priority #5 – Senior Care

GOAL: To improve the overall quality of life of those over 65 by reducing falls, food insecurity, chronic diseases, and the adverse psychological effects of solitude.

Senior Falls

Every second of every day, an older adult (age 65+) suffers a fall in the U.S.—making falls the leading cause of injury and death in this age group. One in four older adults will fall each year in the United States, making falls a public health concern, particularly among the United States' aging population.

About 36 million falls are reported among older adults each year—resulting in more than 32,000 deaths. Each year, about 3 million older adults are treated in emergency departments for a fall injury. One out of every five falls causes an injury, such as broken bones or a head injury. Source: Centers for Disease Control and Prevention

Elder Abuse

Elder abuse is common. Abuse, including neglect and exploitation, is experienced by about 1 in 10 people aged 60 and older who live at home. From 2002 to 2016, more than 643,000 older adults were treated in the emergency department for nonfatal assaults, and over 19,000 homicides occurred.¹⁸

Senior Food Insecurity

According to data from the Current Population Survey, 5.2 million seniors (6.8%, or 1 in 15) were food insecure in 2020.¹⁹

Rising costs have been felt acutely by seniors on fixed incomes, who increasingly are turning to food banks and other programs.

Michaela Ramm, <u>The Gazette</u>

¹⁷ CDC

¹⁸ CDC

¹⁹ Feeding America

SENIOR CARE					
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS		
Dedicate a section on senior care issues in the primary data collection process for the 2026 Community Health Assessment (CHA).	-Work with CHIP senior care subgroup and community-based organizations that serve 65+ to develop survey questions. (UCo Health)	Long Term: Include at least ten senior-specific survey questions in the 2026 CHA. (Copy of the 2026 CHA questionnaire)	-UCo Health -Aging and People with Disabilities -CAPECO		
Increase the number of older adults who engage in low-impact exercise and activities.	-Explore viability and funding for introducing yoga at all senior centers in Umatilla County. (UCo Health) -Promote 60+ and senior exercise opportunities available in the county through UCo Health and partners' websites, social media, local newspaper articles, and through outreach materials. (UCo Health) -Work with Parks and Recs to offer various free programs for older adults (with transportation). (UCo Health) -Promote and expand CCS' Senior Companion Program. (CCS)	Short Term: By 2024, Increase in exercise/activity posts related to seniors on social media and generated media spots in print/radio/television by 15%. (Self-reporting, copies of posts/articles, etc.) Increase by 10% the number of hours per week seniors report performing light to moderate exercise by 2024. (Pre and post-Facebook surveys)	-UCo Health -Pendleton Parks & RecreationCCS -Good Shepherd -CAPECO		
Increase awareness of GOHBI's Older Adult Behavioral Health training and services.	-Promote Older Adult Behavioral Health training and services through outreach, advertising, prevention, and education through community events, social media, local media (radio/print/television), and websites. (GOBHI, UCo Health, TBD)		-GOBHI -Good Shepherd -St Anthony -Community Health Workers		
Decrease the number of seniors who report using inappropriate and non-prescribed medicine.	-Research the scope of work by community health workers to determine if prescription drug management is part of	Short Term: Increase senior-related posts/articles on UCo Health and partners' social	-CHI St. Anthony -UCo Health -Senior Centers -Assisted living & retirement communities		

SENIOR CARE				
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS	
	the services provided. (UCo Health) -Social media awareness campaign awareness targeting adult children of seniors. (UCo Health)	media and/or print media by 15% in 2024. (Self-reporting and copy of posts/articles) Long Term: By 2026, decrease the number of seniors who report using inappropriate and non-prescribed medicine by 15%. (pre and post-surveys)	-Eastern Oregon IPA Program -Mental Health Providers -CCS -Umatilla County Human Services -Community Health Workers	
Increase awareness of CAPECO Senior Commodities & Home Delivered Meals programs.	-Work with Good Shephard to reintroduce Cooking Matters classes to Harkenrider Senior Center (Hermiston) and other senior centers. (UCo Health & Good Shepherd) -Utilize social media, print/radio/television placements and community event outreach to educate adult children of those 65+ about existing nutritional programs available for seniors.(UCo Health)	Long Term: Increased promotion of food services available to seniors on social media and print/radio/television by 15% (2026). (Self-reporting and copy of posts/articles/clips) Increase the number of seniors receiving home-bound meals in the county by 15% (2026). (CAPECO statistics)	-UCo Health -CAPECO -OSU SNAP-Ed -Senior Centers -Good Shepherd	
Reduce the rate of emergency department visits due to falls among older adults.	-Host an annual health fair at a senior center once a year and promote fall prevention outreach materials. (UCo Health) -Outreach media campaign (social/radio/print/television) regarding fair housing mobility issues for seniors. (UCo Health)	Long Term: Decrease the number of ER visits due to falls by 15% by 2025. (Hospital data)	-UCo Health -CHI St. Anthony -Good Shepherd -Fair Housing Council of Oregon -Community Health Workers	
Improve intergenerational connections and promote healthy aging by developing new senior/student mentoring programs.	-Develop a community garden program that brings together seniors and students to share skills and knowledge. Seniors will provide gardening expertise and mentor students in cultivating and maintaining the garden, while students	Long-term: By 2026, establish at least two self-sustaining senior-youth mentorship programs in Umatilla County that promote intergenerational connections, enhance	-UCo Health -OSU Extension, -Pendleton Public Library -Master Gardeners -BMCC	

SENIOR CARE				
OBJECTIVES	STRATEGIES (Proposed lead agency in bold)	OUTCOMES (and evidence of effectiveness)	POTENTIAL PARTNERS	
	will share technology knowledge with seniors. (UCo Health, OSU Extension, and Master Gardeners)	gardening skills and technology knowledge, and improve health and well-being among seniors and youth.		
Advocate for a new senior center in Pendleton.	-Identify barriers to the opening of a senior center in Pendleton. (UCo Health & CAPECO) -Gather community feedback on (Pendleton) the center's reopening. (TBD) -Identify ongoing funding sources for Pendleton Senior Center sustainability. (UCo Health & CAPECO)	Short Term: Feasibility study of reopening senior center by 2024. (Copy of study results) Long Term: Reopen the Pendleton Senior Center by 2026. (Self-reporting)	-UCo Health -Pendleton Neighborhood Advisory Committee -Pendleton City Council -CAPECO -Aging and People with Disabilities (APD)	
Increase the number of seniors who receive necessary vaccinations: flu, COVID-19, Shingles vaccine, Pneumococcal polysaccharide vaccine, and Pneumococcal conjugate vaccine.	-Education and outreach at local events to promote vaccinations on websites, social media, and local media. (UCo Health)	Long Term: By 2025, increase senior vaccination rates by 15% (Oregon Public Health Assessment Tool and ALERT Immunization information system.)	-UCo Health -CHI St. Anthony -CAPECO -Senior Centers, assisted living & retirement communities	
Increase community awareness of elder abuse.	-Through media (social/print/radio/TV) and websites, educate adult children of seniors, physicians, mental health care professionals, and others who interact with seniors for a better understanding of abuse and neglect of older persons. (UCo Health) -Create an activity or event celebrating World Elder Abuse Awareness Day annually on June 15th. (TBD)	Long Term: By 2025, a 15% increase in community education through social media, websites, print/radio, and television reporting elder abuse. (Self-reporting and copy of posts/articles/clips.)	-UCo Health -Adult Health Subcommittee -High schools -CAPECO -APS 2 -GOBHI	

Partners Acknowledgements

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Agape House

Aging and Disability Resource Connection (ADRC)

Altrusa International of Pendleton, Oregon Inc.

CAPECO

Clearview Medication Commission on Children and Family

Community Counseling Solutions

Confederated Tribes of the Umatilla Indian Reservation (CTUIR)

Connexions

Department of Human Services

Domestic Violence Services, Inc.

Doulas Latinas International (DLI)

Eastern Oregon Alcoholism Foundation

Eastern Oregon Center for Independent Living (EOCIL)

Eastern Oregon Coordinated Care Organization (EOCCO)

Euvalcree

Good Shepherd Health Care System

Greater Oregon Behavioral Health, Inc. (GOBHI)

Head Start of Umatilla & Morrow Counties

Healthy Communities Coalition

Home 4 Hope

InterMountain Education Service District

Martha's House

Milton Freewater School District

Mirasol Family Health Center

Oregon Child Development Coalition

Oregon Department of Human Services

Oregon Health Authority

Oregon State University

Oregon Washington Health Network

Salvation Army

CHI St. Anthony / CommonSpirit Health

St. Mary's Outreach

Stanfield School District

The Fair Housing Council of Oregon

Tribal Housing Authority

Umatilla County Board of Commissioners

Umatilla County CARE Program

Umatilla County Housing Authority

Yellowhawk Tribal Health Center

This document is publicly available online at www.ucohealth.net. If you have questions, comments, or suggested edits for this report, please email them to health@umatillacounty.gov.

LINK TO SPREADSHEET OF STRATEGIES AND PROGRESS