

Clackamas County Public Health Advisory Council
Monday, June 12, 2023, 4:00 – 6:00 p.m.
Minutes

PHAC Members Present: Elizabeth Barth, Christina Bodamer, Pam Bonner, Gianou Knox, Michael Foley, Darcee Kilsdonk, Ruth Adkins, Mitchell Doig, Rebecca Stavenjord, Yvonne Smith, Kelly Streit

Others Present: Edith Duku, Jenny Masculine, Marc Czornij, Apryl Herron, Bill Conway, Anna Summer, Armando Jimenez, Susan Berns-Norman, Ruth Mercado, Jamie Zentner, Philip Mason-Joyner, Mary Rumbaugh, Kim LaCroix, Julie Hamilton, Chijioke Oranye, Erika Zoller, Shelley Glaze

Topic	Minutes
I. Mix & Mingle: Early Dinner	Completed
II. Welcome & Introductions - All <ul style="list-style-type: none"> • Name • Where do you work and what is your background related to public health? • What public health or health equity issue is important to you? 	Statements from each PHAC member were captured and are listed below.
III. Review of Agenda A. New items to be added to the agenda?	No new agenda items were added.
IV. Minutes of April 17, 2023	Yvonne Smith moved, and Ruth Adkins seconded. Motion passed.
V. Public Input 3 minutes per person	N/A
VI. Director’s Report	A. Due to the building of the county courthouse, there will be \$580k less of county general funds due to reductions. There has been a reduction of staffing (COVID19 staff mainly) B. CCPHD is receiving a mobile health van that legislature approved in 2021, hoping to get it Fall 2023. C. 33% of public health budget is state funding, but they passed the continuing resolution, where there's essentially bridge funding to hold us over in the summer, and if they don't end up meeting and passing budgets, there'll need to be a special session in the fall

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<p>VII. Committee Updates</p> <ul style="list-style-type: none"> A. Blueprint Steering Cmte B. Policy, Health Equity Cmte. C. Ethics Cmte. 	<ul style="list-style-type: none"> A. Preparing and gathering information to assist with the selection of final priorities from the Blueprint plan. Jenny's working on the data updates. A previous priority ranking score sheets were provided at last meeting. Mary Rumbaugh will be giving an update on addiction and behavioral health treatment services. Galli Murray will be giving an update on Suicide Prevention and Apryl Herron will be giving an update on the Opioid Settlement, as well as getting an update from Clackamas fire. B. Figuring out how to develop a policy agenda for committee. Currently establishing/developing a health equity assessment and a plan to take action after. C. The Ethics Committee helps organize ethics deliberations. Currently revising the bylaws. Once revising is complete, will bring to council for review.
<p>VIII. Getting to know each other.</p> <ul style="list-style-type: none"> A. Activity #1 – Gallery walk <p>Questions: What SDOH affect people in our community?</p> <p>How do these SDOH affect the health of people in our community?</p> <p>How might addressing SDOH improve health locally?</p>	<p>Responses are below.</p>
<p>IX. Activity #2: PHAC members vote on the priorities expressed during the introduction.</p>	<p>Responses are below.</p>
<p>X. Adjournment</p> <p>Next Meeting: August 28, 2023 3:00 – 5:00 p.m.</p>	

Introduction Response and Activity #2:

Variables	Count
Addressing trauma and healing	8
Reduce health disparities	7
Access to affordable. Healthy, an culturally relevant foods	6
Housing and homelessness	5
Tobacco control	4
Public health emergency messaging - equity focus	4

Access to treatment and housing for those that want it	3
Climate and health; mental health, addiction and houselessness	3
Built environment	3
Food security in 1st 1,000 days of life = breast and chest feeding	2
Represent voices of school, students, staff, and families	2
Community health	2
Public health modernization	2
Serving children in poverty and their families	2
Public health workforce	2
Health access for transitional youth	2
Environmental justice	2
Infectious disease	1
Culturally healthy foods	1
Tobacco prevention and education	1
Suicide prevention	1
Serving rural families	1
Reducing inequities and health disparities	1

Question #1: What SDOH affect people in our community?

- Housing stability
- Access to affordable and health food
- Transportation
- Housing
- Housing
- Transportation
- Access to healthcare
- Mental health
- Culturally relevant, affordable healthy foods
- Behavioral health
- Climate
- Gender
- Age
- Race/ethnicity
- Socioeconomic status
- Connection to support system/family/community
- Access to healthy food
- Work/stress
- History of substance misuse
- History of abuse
- Access to stable, affordable housing
- Access to healthcare
- Transportation
- Education
- Structural racism and generational trauma impacts health for BIPOC communities and everyone
- Their zip code.

- Their gender identity
- Their income
- Their ethnicity
- Continuity of services for migrant families
- Food deserts
- Childcare
- All of them, depending on their own experience
- Access to health care in rural areas
- Food access and insecurity
- Culturally appropriate services in general
- Access to health care
- Health/housing
- Community health
- Economic stability
- Neighborhood and built environment
- Employment opportunities
- Education
- Transportation

Question 2: How do these social determinants of health affect the health of people in our community?

- Safety and connection -> health
- Access to health care
- Lack communication
- Education
- Housing unaffordability
- Access to health – promoting environment (car-dependency)
- Affordable food that promotes good health
- Safety from threats to racial + gender + identity
- Lack of awareness of services
- Unwilling to access services due to cultural differences
- Lack of transportation to services
- Availability of culturally relevant/healthy food
- Hard for immigrants to adjust
- Underserved populations
- Lack of access to resources create environment of crisis and acute health issues
- No longer feel safe in community
- Increased stress and trauma
- Feelings of isolation and depression
- Their ability to feel safe in the community
- Their ability to find affordable housing and in a safe place
- Their access to high quality education
- Their ability to access public transportation
- Their ability to secure healthy food
- Ability to be one's best self -> individuals, families and communities

- Lack of access to healthcare and healthy food exacerbates stressors on families
 - Equals abuse (physical/psychosocial)
 - Equals substance abuse
 - Equals mental illness
 - Equals suicide
- When people feel connected, their stress is lowered
- Socioeconomic structure can impact access to housing, education, transportation

Question 3: How might addressing the social determinants of health improve health locally?

- Ability to be one's best self -> individual, families, and communities
- Improving built environment (sidewalks) increases physical activity and community connectedness because people walk and talk with neighbors
- Improvements would be evident in health, engaged, ready to learn kids
- Trajectories would shift creating generational improvements for families
- Reduce demand of clinical services
- Improve quality of life within the community increasing the likelihood of inbound transplants
- Improve equity of health amongst the community
- Decrease inequities
- Improve quality of life for county residents
- Wider understanding and acknowledgement of social determinants of health
- Improvement in health equity, decreased health disparities
- Greater improvements in child health metrics
- Thriving health at all ages
- Housing stability = health
 - You can't be healthy without a place to call home
- Increased opportunity and ability to be healthy
 - Food, housing, clean air, economic and educational opportunities
- Addressing mental health/stress/trauma – reduce addiction. Violence, poor health outcomes
- Racism
- Awareness
- Trained personnel
- Access to transformation
- Create healthier environments to live in
- Connection to resources to reduce trauma and crisis
- Support for families throughout life changes