

Executive Summary

This CHNA covers Clackamas, Multnomah, and Washington counties in Oregon and Clark County in Washington. It was funded by the Healthy Columbia Willamette Collaborative (HCWC), a partnership of health systems, public health departments, and coordinated care organizations.

- The assessment used a community-informed process led by a Community Action Team (CAT) comprised of local community leaders. The goal was to center community wisdom and tell a story reflecting lived experiences.
- Through community input and data analysis, four key priority areas were identified:
 1. A Neighborhood For All - Access to safe, affordable housing and neighborhoods
 2. Essential Community Services and Resources - Access to education, employment, food, transportation, etc.
 3. Access to Culturally & Linguistically Responsive Health Care
 4. Support for Family & Community Ways - Access to cultural foods, practices, gatherings, etc.
- Key health issues identified include mental health, chronic diseases, and accidental injuries.
- The report provides recommendations for addressing the priority areas, such as:
 - Investing in affordable housing and neighborhood safety
 - Creating workforce development and economic opportunities
 - Increasing culturally responsive health care and providers
 - Supporting community spaces and cultural events
- The assessment aimed to elevate community voices and use an equity-centered approach, while acknowledging limitations in data and methodology. It provides a foundation for future community health improvement efforts in the region.

Does this help summarize the key points from the executive summary? Let me know if you need any clarification or have additional questions!

Biggest Gaps in Service

1. Culturally and linguistically responsive care: The report highlights a significant need for health care providers who reflect and represent the diversity of the communities they serve, including providers who speak the languages of the communities.
2. Mental health and substance use services: Mental health was identified as one of the top health issues in the region, with a lack of sufficient access to mental health and substance use disorder treatment.
3. Access to care for certain populations: The report notes that BIPOC (Black, Indigenous, and People of Color), LGBTQ2IA, and people with disabilities often face greater challenges in accessing care. For instance, these groups reported higher rates of delaying or avoiding health care due to fear or discomfort.
4. Trauma-informed care: Community members expressed a need for health care that is attentive to healing marginalized communities' experiences, past traumas, and historical inequities.

5. Affordable health care: Despite improvements in insurance coverage, affordability remains a barrier for many, particularly for dental care and specialty services.
6. Transportation to health services: Lack of transportation was noted as a significant barrier, especially for non-emergency medical transportation and for people with disabilities.
7. Evening and weekend hours: The need for extended service hours was frequently mentioned as a challenge in accessing care.
8. Health literacy and system navigation: Many community members reported not knowing what services and resources were available or how to access them.
9. Trust in the healthcare system: The report indicates a lack of trust in the healthcare system among certain communities, particularly those who have historically been marginalized.

Greatest Barriers to Care

1. Lack of culturally and linguistically responsive care: Many community members reported difficulties finding providers who understand their culture, speak their language, or have shared experiences.
2. Affordability: Even for those with insurance, high out-of-pocket costs were cited as a significant barrier.
3. Transportation issues: Lack of transportation or difficulty traveling to health care services was frequently mentioned, especially for non-emergency medical care.
4. Limited availability of services: Long wait times for appointments, particularly for specialty care and mental health services, were reported.
5. Lack of trust in the healthcare system: This was especially pronounced among historically marginalized communities.
6. Insufficient evening and weekend hours: Many respondents cited the need for care outside of typical business hours.
7. Lack of awareness about available services: Many community members reported not knowing what services and resources were available to them.
8. Discrimination and bias: Some respondents reported avoiding or delaying care due to fears of discrimination based on factors such as race, ethnicity, gender identity, or disability status.
9. Complexity of the healthcare system: Difficulty navigating the system and understanding eligibility for services was mentioned.
10. Lack of insurance or underinsurance: While insurance coverage has improved, some still lack adequate coverage.
11. Mental health stigma: This was cited as a barrier to seeking mental health care.

12. Language barriers: This includes both spoken language interpretation and translation of written materials.

13. Lack of disability accessibility: Both physical accessibility of facilities and accommodations for various disabilities were mentioned as barriers.

The Unique Needs of the Community

1. Cultural and linguistic responsiveness: There's a strong need for healthcare providers and services that reflect the diverse cultures and languages of the communities.

2. Mental health support: Mental health was identified as a top health concern, with a need for culturally appropriate mental health services.

3. Safe and affordable housing: Access to quality, affordable housing was highlighted as a critical need, especially for marginalized communities.

4. Economic opportunities: The need for workforce development programs and living wage jobs was emphasized.

5. Food security and access to culturally relevant foods: This includes addressing food deserts and ensuring access to foods that are culturally appropriate.

6. Community spaces and events: There's a need for spaces and opportunities for cultural gatherings, ceremonies, and community connections.

7. Transportation access: Improved public transportation and non-emergency medical transportation were identified as needs.

8. Trauma-informed care: Healthcare that recognizes and addresses historical traumas and inequities.

9. Support for immigrant and refugee communities: Including assistance with navigating systems and civic engagement education.

10. Youth support: Programs for non-academic youth development and peer mentorship.

11. Addressing racism and discrimination: The need to confront and dismantle systemic racism in healthcare and other institutions.

12. Environmental health: Access to clean air, safe drinking water, and healthy living environments.

13. Support for people with disabilities: Including improved physical accessibility and accommodations in healthcare settings.

14. Technology access: Addressing the digital divide, especially for accessing virtual healthcare services.

15. Community safety: Addressing concerns about violence and creating safer neighborhoods.

What the Hospital or CCO is Doing Well

1. Supportive Housing: Several HCWC partners worked together to expand access to safe, affordable, and supportive housing. They established a Regional Supportive Housing Impact Fund (RSHIF) which resulted in over 390 homeless seniors with disabling conditions returning to stable, affordable housing.

2. Investments to Address Health Inequities: Since 2017, major health providers in the region have collectively invested over \$40 million in Project Access NOW, a non-profit focused on improving community health and equity by providing access to care, services, and resources for the underserved and uninsured.

3. COVID-19 Response: Regional Public Health Authorities, Health Systems, and Coordinated Care Organizations partnered with dozens of Community-Based Organizations to provide essential resources, education, and vaccination/testing clinics during the pandemic.

4. Collaborative Approach: The report notes that the HCWC partnership enables creation of an effective, sustainable process for community health needs assessments and helps to advance health equity within the region.

Strengths of the Community

1. Social connectedness: Communities have strong social support networks and relationships that help during times of need.

2. Cultural practices and traditions: These are seen as vital to overall wellness and healing.

3. Storytelling and information sharing: Community members value sharing experiences and knowledge, especially among younger generations.

4. Resilience: Communities are described as good problem-solvers, adapting to challenges and finding workarounds when faced with barriers.

5. Intergenerational knowledge and compassion: There's a strong emphasis on supporting youth and children and passing down cultural practices.

6. Community-led initiatives: Many communities have developed their own solutions and support systems.

7. Increasing awareness of mental health: There's growing attention to mental health issues and efforts to reduce stigma.

8. Connection to the environment: Many community members value their connection to the land for health, healing, and traditional practices.

9. Peer support: Communities often rely on peer-to-peer support and mentoring.

10. Cultural ceremonies and gatherings: These are seen as important for healing and community bonding.

11. Holistic view of health: Communities often have a comprehensive understanding of health that includes physical, mental, spiritual, and community well-being.

12. Community advocacy: There are efforts to bring about inclusiveness and connect people to needed resources.

13. Youth engagement: Young people are increasingly involved in spreading awareness about health issues affecting marginalized communities.

14. Shared experiences: Communities with similar backgrounds often support each other through shared understanding of challenges.

Priorities

1. A Neighborhood For All:

- Safe and affordable housing
- Physical safety in community
- Cultural displacement due to gentrification

2. Essential Community Services and Resources:

- Economic opportunity
- Educational opportunity
- Culturally specific and healthy foods
- Transportation
- Virtual resources

3. Access to Culturally and Linguistically Responsive Health Care:

- Affordable health care
- Linguistically and culturally responsive health care
- Trauma-informed care
- Addressing delayed or avoided health care

4. Support for Family and Community Ways:

- Social connection
- Access to foods and healing medicines or practices specific to communities of origin
- Access to land for physical activity and connection to nature
- Opportunities for ceremonial, religious, cultural, educational, and celebratory community gatherings

Additionally, the report identifies three main health outcome priorities:

1. Mental Well-Being

2. Chronic and Communicable Disease Management

3. Accidental Injury