Benton County Community Health Improvement Plan

2018 - 2022

Benton County Health Department

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2018-2022 Benton County Community Health Improvement Plan

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Benton County Health Department

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Table of Contents

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Benton County Courthouse: Corvallis Gazette-Times; gazettetimes.com

Corvallis Turkey Trot: Corvallis Gazette-Times; gazettetimes.com

Sister City Event: Benton County Developmental Diversity; www.facebook.com/BentonCoDDP/

SAGE Garden: Corvallis Environmental Center; corvallisenvironmentalcenter.org

Get Outdoors Day: OSU Research Forests; cf.forestry.oregonstate.edu/

Introduction and Background

The Benton County Health Department (BCHD) is proud to present the 2018-2022 Benton County Community Health Improvement Plan (CHIP). This document embodies deep collaboration between the Benton County Health Department and diverse community partners and organizations working together to improve the health of those who live, learn, work, and play in Benton County.

The Benton County CHIP outlines four priority health improvement areas for targeted work over the next five years, and serves as a guide for collective community efforts to address and measure progress. Selection of these priority areas does not diminish the importance of other public health issues faced by our community or the ongoing efforts by the Health Department and multiple stakeholders to improve the overall health status of everyone who lives, works, learns and plays in Benton County. It is a living document, which can evolve and adapt to unanticipated changes and health opportunities.

Our Community

Benton County lies in the central Willamette Valley of Oregon, between the Coast Range Mountains to the west and the Willamette River to the east. Approximately 90,000 community members live in Benton County. Benton County is home to families, migrant workers, immigrants, farmers, teachers, and many others. The population includes many younger individuals and highly educated professionals due to the presence of Oregon State University, Linn Benton Community College, and Samaritan Health Services.

Benton County ranks highly on most standard health indicators. However, like many other communities in Oregon, Benton County struggles with many of the key social determinants of health. Housing, transportation, and access to healthy food are unevenly distributed between higher socioeconomic status and lower socioeconomic status populations. Wide differences exist between English speaking families and non-English speaking families, urban and rural communities, and white and non-white households.

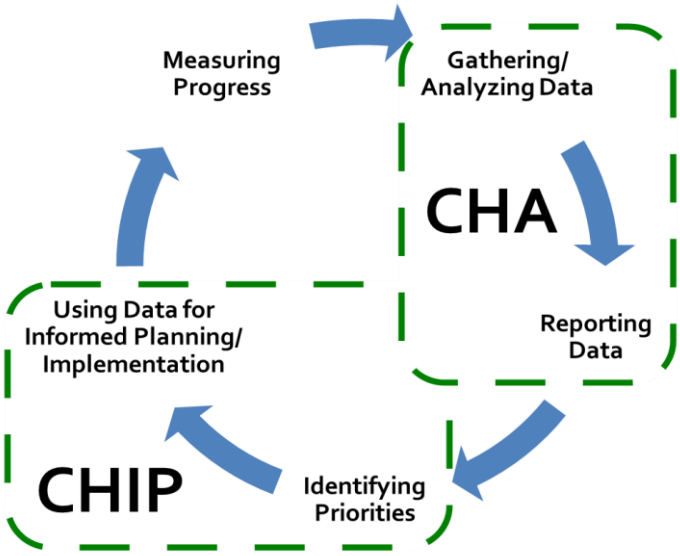
Benton County's CHIP seeks to improve population health outcomes by advancing strategies that address the social determinants of health. The strategies outlined in the CHIP seek to improve the health status of the entire county population and benefit the community's overall health status as opposed to providing treatment for individual conditions.

Community Health Improvement Plan Development

Community Health Assessment

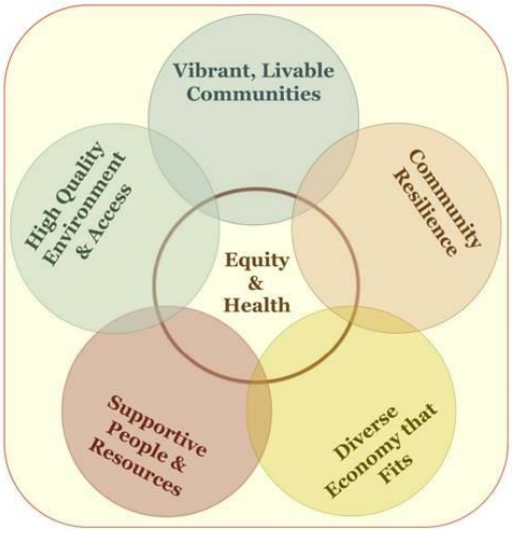
Benton County Health Department (BCHD) utilized a data-informed improvement cycle to develop this CHIP. BCHD initiated this process in 2017 by identifying and gathering data to update the county's Community Health Assessment (CHA). The CHA describes the health indicators, outcomes, and factors that influence health in a county and provides a health data resource for the County and community stakeholders.

BCHD completed the updated CHA in 2017 with input from a steering committee comprised of community members.



2040 Thriving Communities Initiative

The 2040 Thriving Communities Initiative is a community-driven, visioning process that will use community-identified Core Values in order to address long-term, complex issues. The Core Values were developed through a collaborative process that will guide strategies, actions, and progress measures to align community activities and government services surrounding the dynamic challenges and opportunities facing the county now and into the future.



The 2040 Thriving Communities Initiative is incorporated into our community health improvement planning. Community feedback gathered during the outreach component of the Thriving Communities Initiative helped to identify the priority areas of the CHIP. Furthermore, equity and health are the core principles that serve as a foundation for all strategic work in the County. These two principles are also at the heart of the CHIP. Achieving a thriving, healthy, and equitable community will require the dedicated work of county government, but it also needs leadership and action from the community. The greatest value the CHIP brings to the Thriving Communities Initiative may be the community-centered approach to collective impact.

Based on data from the CHA and informed by community outreach and engagement efforts conducted through the Benton County Thriving Communities 2040 Strategic Planning Initiative, Health Department

staff identified seven potential CHIP priority health issues. BHCD presented these findings at eight public workshops where participants selected four areas on which to focus collective efforts over the next five years. Health Department staff worked with community partners to develop goals, strategies, and metrics in each of the four priority health issues.

Focus on Health Equity

Health equity means no individual, group, or people experiences worse health outcomes or unequal access to health supports because of factors that are beyond their control or are the result of injustice. Achieving health equity requires valuing everyone equally and taking action to prevent inequalities, address injustice, and eliminate health disparities.

Benton County, in partnership with Linn Benton Health Equity Alliance and community partners, took the additional step of conducting an equity screen on each of the community-generated ideas to ensure that the strategies chosen have the greatest potential to increase equity.

The priority health issues apply a health equity perspective by considering health determinants – the circumstances and conditions affecting people's health opportunities – and health outcomes as a means to end the systematic creation of health inequities. Each priority health issue includes strategies that address a specific equity component and focus on correcting health disparities.

2018-2022 Priority Health Issues

Informed by the 2017 CHA and the 2040 Thriving Communities Initiative, Benton County Health Department (BCHD), with input from the community, prioritized the following four issues for strategic community health interventions in 2018-2022.

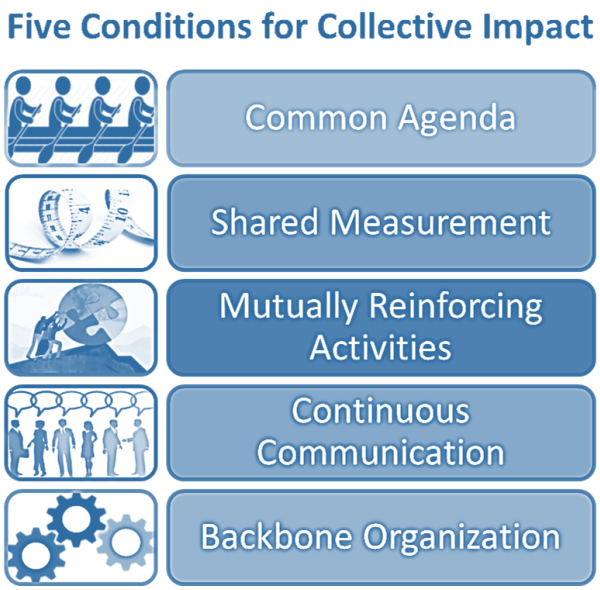
Healthy food systems
Housing, transportation, and development
Mental well-being and community resiliency
Communicable disease

Community Health Improvement Plan Implementation and Measuring Progress

The Benton County Health Department (BCHD) uses a collective impact framework to convene community stakeholders in developing long-term health improvement activities. Key elements of this

model include: a common agenda, shared measurement, mutually reinforcing activities, continuous communication, and backbone support organizations.

The Community Health Improvement Plan (CHIP) priority areas serve as the common agenda for advancing health improvement efforts over the next five years. BCHD will track measures identified in the CHIP through annual progress reports, as well as progress on the collaborative work plans. Work plans outline agreed-upon, mutually reinforcing activities to improve health and conditions in each of the selected priority areas. BCHD will serve as the convening "backbone" organization to support continuous communication and coordination among partners who have agreed to take collective action to improve health and health-influencing factors outlined in the priority areas.



Rural Health Information Hub, https://www.ruralhealthinfo.org/toolkits/network

To foster ongoing collaboration, BCHD will convene and/or participate in regular planning activities with community partners and other stakeholders who are taking action on the work plans. This will provide ongoing opportunities for partners to update each other on their work and serve as a venue to help troubleshoot and solve problems that arise. BCHD will track the progress made in each priority area, and will coordinate with community partners to re-assess available data over the next five years to ensure resources are allocated to support strategic interventions where they are most needed.

Priority Area: Healthy Food Systems

Farm to Fork Camp: Corvallis Environmental Center, corvallisenvironmentalcenter.org

Overview

Eating nutritious food every day is essential for children and adults to maintain a healthy and active life. Local agriculture provides healthy food and economic opportunity for our communities. Increasing food security, developing policies that support nutrition, and preventing nutrition-related conditions such as obesity are potential areas for community health improvement. An equitable and healthy food system assures availability and adequate access at all times to affordable, sufficient, nutritious, safe, and culturally appropriate food.

Healthy Food Systems in Benton County

Access to and utilization of the Supplemental Nutrition Assistance Program (SNAP or Food Stamps) is an important component in a healthy food system. Qualifying individuals and families receiving SNAP have more access to healthy food, and are less likely to experience food insecurity than people who qualify but do not utilize SNAP. Low-income seniors who access SNAP have fewer admissions to hospitals and residential care facilities. Community partners have long funded and coordinated SNAP matching programs that increase access to fresh produce. However, Benton County's SNAP utilization rate is the lowest in the state, lagging far behind other counties.

Linn Benton Food Share and Oregon State University have been at the forefront of innovations to increase access to nutritious foods for food-insecure individuals and households. Local growers participate in food donations and support for community gardens has increased availability of fresh produce during warmer months. Nevertheless, the food safety net experiences chronic shortages of fresh, healthy food.

Benton County has benefited from strong partnerships providing food education in area schools, including Oregon State University Extension and the Linus Pauling Institute. Community support for a strong local food system has raised awareness about the economic and health benefits of eating local food. However, low-income, rural, racial and ethnic minority, and immigrant communities still face significant barriers to establishing healthy food systems. Grocery stores in rural Benton County face significant challenges to offering the range of healthy, fresh, and nutritious food compared to those in Corvallis. Low-income neighborhoods and communities of color have the greatest concentration of fast food restaurants. Low-income children who rely on school breakfast and lunches are dependent on federal, state and local school food policies that shape their access to adequate nutrition during the day.

Goals

The community identified healthy food systems as a priority area for the 2018-22 Benton County Community Health Improvement Plan (CHIP) using the data provided in the 2017 Benton County Community Health Assessment (CHA). More specifically, the community and Benton County Health Department (BCHD) will work together to achieve the following goals:

Goal 1:	Ensure that everyone experiences food security in Benton County.
Goal 2:	Increase access to and the consumption of nutritious and healthy food among all community members.
Goal 3:	Foster a local food system that supports local food producers and a vibrant local food economy.

Strategies

Benton County Health Department (BCHD), in partnership with a workgroup of community partners, developed the following strategies to advance the goals of the healthy food systems priority area. Each strategy is linked to one or more goals.

Strategy 1:	Increase coordination and promotion of services for low-income community members experiencing food insecurity to improve access to other services.
Equity component	Food insecurity is often one of many challenges facing individuals living in poverty. Increasing access to healthy, nutritious food and other social services will reduce the health disparity experienced by the lowest income community members.
Linked to:	Goal 1
Strategy 2:	Influence the implementation of improved school food and nutrition policies in local school districts, including changes in food served to students, nutrition education, and changes in the school food environment.

Equity component	Children qualifying for free and reduced price meals often eat the majority of their daily meals at school. Improving the health of school food can have significant impacts on the health of children living in poverty. The schools with the highest percent of students qualifying for free and reduced price meals serve rural students and large numbers of Hispanic/Latino and other diverse children.
Linked to:	Goal 2
Strategy 3:	Educate the public and decision makers on the food security and nutrition issues faced by low-income community members and challenges low-income food providers face in addressing those issues.
Equity component	Understanding the lived experiences of people living in poverty helps the public and decision makers recognize the needs of underserved communities.
Linked to:	Goals 1 and 2

Measurement

The data indicators listed below illustrate why BCHD identified healthy food systems as a CHIP priority. Tracking these indicators over the next five years will allow BCHD to measure success in achieving the proposed goals.

Indicator (Source)	Baseline (Year)	Jan 1, 2023 Target (rationale)	Linked to:
Supplemental Nutrition Assistance Program (SNAP) Utilization rates. (DHS and ACS)	32 % (2017)	Increase to 57 % (2017 state average)	Goal 1
SNAP utilization rate among children. (DHS and ACS)	61 % (2017)	Increase to 70 % (2017 state average)	Goal 1
SNAP utilization rate among the elderly. (DHS and ACS)	26 % (2017)	Increase to 38 % (2017 state average)	Goal 1
Proportion of 8th graders eating 5 or more servings of fruits and vegetables each day. (OHT)	33 % (2017)	Increase to 40 %	Goal 2
Proportion of adults eating 5 or more servings of fruits and vegetables each day. (BRFSS)	20 % (2012-2015)	Increase to 25 %	Goal 2

Priority Area: Housing, Transportation, and Development

2017 Corvallis Open Streets: Corvallis Bicycle Collective, corvallisbikes.org

Overview

Affordable, safe housing is a major social determinant of health. Convenient and affordable public transit can provide more equitable access to employment, healthcare, food, and social and civic opportunities, and alternative modes of travel support active lifestyles. Policies and planning that promote affordable, integrated housing; accessible, active transportation, and community development can advance community health and improve equitable access to community resources.

Housing, Transportation, and Development in Benton County

Benton County continues to have growing housing costs. This affects housing, transportation, and development in related ways. Low and moderate income persons frequently cannot afford quality housing in Benton County, and must either live in substandard housing or commute long distances to access employment, education and other resources.

Approximately one-half of all persons who work in Corvallis live outside of the city. Many cite lack of affordable housing, contributing to regional transportation and environmental challenges. Public transportation and other transit services do not facilitate commuting in rural Benton County or neighboring counties.

In 2017, the Housing Opportunities Action Council (HOAC) serving Benton County updated a Ten Year Plan to Address Homelessness: Community Strategies to Overcome Homelessness and Barriers to Housing, to ensure that everyone in Benton County has the opportunity to live in decent, safe, and affordable housing. The HOAC is implementing keystone strategies that have the potential to make the greatest impact. This includes increasing the affordable housing supply in Benton County through

affordable housing policies; establishing an emergency cold weather shelter; facilitating entry into permanent housing for persons experiencing homelessness or living in temporary or transitional housing; and securing more permanent supportive housing for special populations.

Benton County Dial-a-Bus has a comprehensive outreach program that serves seniors and persons with disabilities throughout Benton County. Individuals with Medicaid health insurance can also utilize Ride-line services through the Council of Governments. Many additional community groups are working to increase the safety and accessibility of healthy transportation alternatives in Benton County. Access Benton County, the Corvallis Bike and Pedestrian Advisory Committee, AFRANA (Alliance for Recreation and Natural Areas), and the Corvallis Sustainability Coalition have partnered with the health department to improve bicycle and pedestrian connections in Benton County communities.

Goals

Using the data provided in the 2017 Benton County Community Health Assessment (CHA), the community identified housing, transportation, and development as a priority area for the 2018-22 Benton County Community Health Improvement Plan (CHIP). More specifically, the community and Benton County Health Department (BCHD) will work together to achieve the following goals:

Goal 1:	Reduce homelessness by disrupting the pathway from housing instability to homelessness and accelerating the transition from homelessness to stable housing.
Goal 2:	Increase access to and the use of healthy transportation options in low-income, rural, and racially and ethnically diverse communities.
Goal 3:	Align health, housing, transportation, and development efforts to promote healthy, equitable communities.

Strategies

Benton County Health Department (BCHD), in partnership with a workgroup of community partners, developed the following strategies to advance the goals of the housing, transportation, and development priority area.

Strategy 1:	Identify and implement opportunities to limit displacement due to serious violations of the City of Corvallis and Benton County building and safety code enforcement programs.
Equity component	Low-income renters may accept substandard housing for fear of eviction after a complaint, and low-income homeowners may risk defaulting on their mortgages if they are unable to afford maintenance. Increasing the stability and quality of housing will reduce health disparities experienced by these populations.
Linked to:	Goal 1
Strategy 2:	Strengthen partnerships between housing services, local law enforcement, street outreach, and mental health to ensure mental/behavioral health and ensure other support needs of persons experiencing homelessness are appropriately addressed.
Equity component	Individuals experiencing homelessness or severe housing instability are an equity population of significant concern. Strengthening partnerships to serve this population could significantly improve equity in housing.
Linked to:	Goal 1
Strategy 3:	Expand access to reliable public transportation, with a focus on underserved populations and areas of Benton County poorly served by public transit improving transportation connections between communities.
Equity component	Rural communities in Benton County are poorly served by public transportation options. Lower-income communities are more reliant on public transportation. Increasing access to public transportation will have the greatest impact on rural and lower-income communities.
Linked to:	Goal 2
Strategy 4:	Increase access to safe transportation routes and options for bicyclists, pedestrians, and people with disabilities, focusing on policy, planning, and multi-modal design.
Equity component	Increasing access to safe transportation will help lower-income communities participate in healthy activities.
Linked to:	Goal 2
Strategy 5:	Build understanding of equity related to housing, transportation, and development and foster dialogue and coordination across health, housing, transportation, and other sectors.
Equity component	Building understanding of equity can create opportunities to affect upstream determinants of equity in Benton County.
Linked to:	Goals 1, 2, and 3

Measurement

The data indicators listed below illustrate why BCHD identified housing, transportation, and development as a CHIP priority. Tracking these indicators over the next five years will allow BCHD to measure success in achieving the proposed goals.

Indicator (Source)	Baseline (Year)	Jan 1, 2023 target (rationale)	Linked to:
Proportion of households with incomes under $50,000 who have a housing cost burden. (ACS)	66 % (2012-2016)	Decrease to 57 %	Goals 1 and 3
Eviction rate.	To be determined	To be determined	Goal 1
People moved into transitional housing and from transitional housing to permanent housing each year.	To be determined	To be determined	Goal 1
Proportion of community members who commute by bus, bicycle, or walking. (ACS)	18 % (2012-2016)	Increase to 25 %	Goal 2
Proportion of rural Benton County within ¼ mile of public transportation access points. (Oregon EPHT)	25% (2013)	Increase to 30 %	Goal 2 and 3

[1] Rural Benton County is classified as all areas outside of Corvallis, specifically Census Tracts 005, 006, 101, 102, 103, 104, 108, and 109.

Priority Area:
Mental Wellbeing and Community Resiliency

Dunawi Creek Regeneration Project: Corvallis Sustainability Coalition, sustainablecorvallis.org

Overview

A growing body of evidence shows that good mental health is more than just the absence of mental illness or disease, and that social, environmental, and economic factors significantly contribute to positive mental wellbeing and resiliency (e.g., housing, food, transportation, education, employment, income, racism, discrimination, and health care, among others).

Racism, discrimination, and marginalization create toxic environments that damage wellbeing and weaken resiliency among children and adults. Childhood neglect, maltreatment, deprivation, and trauma are also strong risk factors for future mental and physical health problems. People affected by violence, poverty, incarceration, or homelessness; lesbian, gay, bisexual, and transgender (LGBTQ) people; indigenous peoples; and people with disabilities are at increased risk of mental health disorders. Interventions that target children and adolescents and their families can significantly reduce mental illness, disabilities, and other health disparities across the life span.

The World Health Organization's 2017 Mental Health Action Plan seeks to advance efforts that prevent or reduce mental disorders through improvements in mental health for whole communities. This increasing emphasis on prevention strategies that target social, environmental, and economic determinants of mental health provide new opportunities to deploy public health strategies to improve community mental health. Refining surveillance and data tracking systems to better target, inform, and evaluate population level interventions is also critical in advancing these efforts.

Mental Wellbeing and Community Resiliency in Benton County

The 2017 Community Health Assessment (CHA) highlights a number of areas of concern related to mental health and resiliency of Benton County communities. Fifty percent of children in Benton County live in environments that create lasting adverse impacts, such as food or housing insecurity, or living with a family member with a substance abuse disorder. Forty percent of adolescents insured through the Oregon Health Plan receive treatment for a mental health condition. As the population of Benton County ages, isolation and detachment among seniors is growing. Suicide, which affects all community members, is actually most common among older adults. There are about 23 deaths by suicide per 100,000 community members over the age of 45 each year.

Adequate funding for community mental health services is an ongoing challenge in Oregon, as it is in many other locales. However, the expansion of Medicaid under the Affordable Care Act and Oregon's Coordinated Care (CCO) system is a national model for integrating behavioral and mental health services with primary care. Benton County's innovative efforts to operationalize this at the local level have been widely recognized.
Local schools, non-profit organizations, and other community coalitions are actively engaged and advocating for resources to address the mental health needs of children and youth. The Early Learning Hub of Linn, Benton, and Lincoln Counties is convening cross-sector partners to coordinate resources for programs serving children from birth to five years old.

In 2016, the Oregon Health Authority funded Benton County to identify opportunities to "increase protective factors, and create living conditions and environments that support mental health and allow people to adopt and maintain healthy lifestyles." This Mental Health Promotion and Prevention (MHPP) initiative also funded a comprehensive community needs assessment that identified a number of social determinants of mental health that impact local youth and families, and the resulting recommendations are closely informing Benton County's 2018-23 Community Health Improvement Plan (CHIP) goals and strategies.

Goals

The community identified mental wellbeing and community resiliency as a priority area for the 2018-2022 Benton County Community Health Improvement Plan (CHIP) using the data provided in the 2017 Benton County Community Health Assessment (CHA). Combined with previous work conducted through Benton County's Mental Health Promotion & Prevention (MHPP) Initiative, and an organizational commitment to advancing public health framework that focuses on the social determinants of mental health and wellness, the Benton County Health Department (BCHD) will work to achieve the following goals:

Goal 1:	Develop organizational and community capacity to implement a public health framework that focuses on the social, economic, and environmental determinants of mental health and wellbeing in Benton County.
Goal 2:	Expand emerging best practices for health promotion, prevention, and policy interventions that minimize the social determinants of poor mental health and promote optimal wellbeing and resiliency.
Goal 3:	Strengthen evaluation, surveillance, and data systems to better understand and track outcomes in fostering mental wellness and resiliency of Benton County communities.

Strategies

Benton County Health Department (BCHD) developed the following strategies to advance the goals of the Mental Wellbeing and Community Resiliency priority area. The indicators listed in the Measurement section informed the development of these proposed strategies.

Strategy 1:	Engage communities to enhance protective and environmental factors that contribute to overall community wellness and neighborhood resiliency.
Equity component	Evidence shows that where people live, work, learn, and play significantly impacts health. Low-income, minority, immigrant, rural, and people with disabilities disproportionately live in communities without easy and safe access to walking, biking, natural and green spaces, healthy and affordable food, and affordable housing. Improvements in the built environment correspondingly increase health equity among these populations. Community engagement is critical for advancing health equity, generating better outcomes and increasing social cohesion and capacity to solve future challenges.
Linked to:	Goal 1
Strategy 2:	Foster access to high quality, affordable, inclusive, and culturally and linguistically appropriate early childhood development, school readiness, parenting education, and family support resources.
Equity component	Children and adolescents living in poverty and/or experiencing trauma, maltreatment, or other violence are at higher risk for mental and physical health problems. Interventions that address adverse childhood experiences significantly reduce mental illness, disabilities, and other health disparities across the life span.
Linked to:	Goal 2
Strategy 3:	Expand the capacity of Benton County Health Services (BCHS), community organizations, and other non-traditional partners to conduct work using a trauma-informed lens.

Equity component	Organizations, environments, policies, and practices that are more trauma-informed benefit everyone, but especially persons with lived experiences of trauma or other adverse life events. These efforts help people access and stay engaged in health and other social services, and help staff and providers deliver high quality programs and services.
Linked to:	Goals 1 and 2
Strategy 4:	Research emerging best practices in the U.S. and internationally that are advancing mental health promotion and prevention strategies at the population level, including corresponding evaluation, surveillance, and data systems. Make recommendations to inform Years 2-4 of the Benton County Community Health Improvement Plan (CHIP).
Equity component	A population health approach that focuses on prevention will help to mitigate the impact of limited and declining public resources for mental health treatment services and the challenges of access to these services in rural areas.
Linked to:	Goal 3

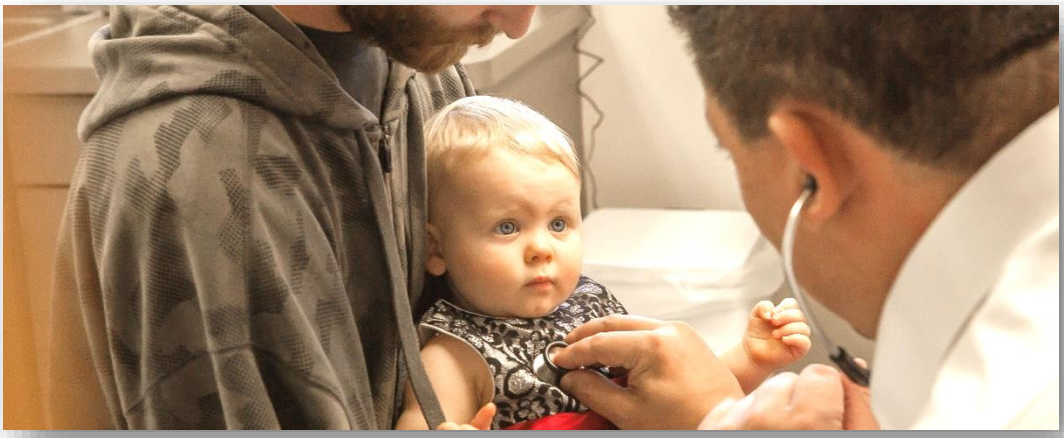
Measurement

The data indicators listed below illustrate why Benton County Health Department (BCHD) identified mental wellbeing and community resiliency as a Community Health Improvement Plan (CHIP) priority. Tracking these data indicators over the next five years will allow BCHD to measure success in achieving the proposed goals.

Indicator (Source)	Baseline (Year)	Jan 1, 2023 target (rationale)	Linked to:
Number of community members and social service staff who have completed a certified Trauma-Informed training (BCHD internal data)	To be determined	To be determined	Goals 1 and 2
Proportion of 8th graders who meet the Positive Youth Development benchmark (Oregon Healthy Teens)	58% (2017)	Increase to 80 %	Goal 2
Proportion of 11th graders who meet the Positive Youth Development benchmark (Oregon Healthy Teens)	62% (2017)	Increase to 84 %	Goal 2
Proportion of community members not limited by poor physical or mental	70% (2012-2015)	Increase to 80%	Goals 1 and 2

health for any days in the past month (BRFSS)			
Proportion of community members who did not experience any poor mental health days in the past month (BRFSS)	56% (2012-2015)	Increase to 65%	Goals 1 and 2

Priority Area: Communicable Disease Prevention



Community Health Centers of Benton and Linn Counties: Studio Lux, Liane Candice

Overview

Improving vaccination rates, slowing the spread of STIs, and ensuring food safety are achievable areas for community health improvement. Decades of rigorous international scientific research has confirmed that vaccinations are the most effective way to prevent injury and death from communicable disease in children and adults, yet the state of Oregon has the nation's lowest child vaccination rates. The largest burden of sexually transmitted infections (STI) is borne by young adults, the Lesbian Gay Bisexual Transgender Queer community, and marginalized populations such as persons experiencing homelessness, substance abuse, and other barriers to accessing testing and treatment. At the same time, the emergence of antibiotic-resistant diseases is a growing threat to everyone.

Communicable Disease Prevention in Benton County

Vaccination rates against common diseases remain low in both Oregon and Benton County. Local research indicates that parental vaccine hesitancy, rather than lack of access, is a primary reason for low child vaccination rates. Adult vaccination rates also lag behind federal and state recommendations, especially for vulnerable populations and older adults.

The past 15 years has witnessed troubling growth in the rate of sexually transmitted infections (STIs), including HIV infection. Benton County, along with Linn and Lincoln Counties, have also seen a dramatic increase in chlamydia, gonorrhea, and syphilis over the last five years, mirroring national trends. STIs affect all communities, but are most prevalent in marginalized communities such as men who have sex with men (MSM), injection drug users IDU), those with prior history of STIs, and low-income persons. Geographic isolation, substance use, mental health challenges, and the increasing crisis of homelessness create further barriers to curbing the spread of these illnesses.

Medical advancements have provided new tools to help address these growing threats. Pre-exposure prophylaxis (PrEP) to prevent HIV infection is more than 90% effective and is covered by most insurance plans, including the Oregon Health Plan. In the Linn, Benton, Lincoln region, new funding through a 5-year grant from the Oregon Health Authority is expanding the availability of STI/HIV harm reduction specialists to conduct community prevention work. A Linn, Benton, Lincoln STI/HIV Prevention Task Force convened in early 2018 is developing and implementing a multi-partner strategic plan to address the growing crisis of HIV/STIs. This multi-disciplinary collaborative is identifying unmet needs, coordinating and leveraging existing and new resources, and maximizing collective expertise across the region's clinical and community health systems.

Goals

The community, in close partnership with the Linn, Benton, Lincoln STI/HIV Prevention Task Force and regional medical providers, identified communicable disease prevention as a priority area for the 2018-22 Benton County Community Health Improvement Plan (CHIP) using the data provided in the 2017 Benton County Community Health Assessment (CHA). Local medical providers, other regional public health partners, and Benton County Health Department (BCHD) will work together to achieve the following goals:

Goal 1:	Achieve 0 percent growth in infection rates for chlamydia, gonorrhea, and syphilis.
Goal 2:	End new locally acquired HIV transmissions.
Goal 3:	Increase the proportion of community members protected by vaccinations.

Strategies

Benton County Health Department (BCHD), in partnership with the Linn, Benton, Lincoln STI/HIV Prevention Taskforce, developed the following strategies to advance the goals of communicable disease prevention priority area.

Strategy 1:	Engage high-risk populations to build connections and trust in their communities.
Equity component	The growth of sexually transmitted infections has been the greatest among high-risk populations. Connecting with these communities is the critical first step for addressing their health issues, including communicable disease.
Linked to:	Goals 1, 2, and 3
Strategy 2:	Improve access to rapid STI/HIV testing & screening and referral services in primary care and community based settings.

Equity component	Marginalized individuals and people who lack access to the traditional medical system have poorer health and are at higher risk for communicable disease and STI/HIV. Community based testing, referral, and treatment will reduce barriers to care.
Linked to:	Goals 1 and 2
Strategy 3:	Strengthen public health infrastructure to conduct case investigation, partner notification, and referral services to reduce the impact of communicable diseases on local communities.
Equity component	The public health system is the primary mechanism to control communicable disease. Stronger infrastructure will benefit all communities in Benton County, especially those disproportionately impacted by the negative health outcomes of communicable diseases.
Linked to:	Goals 1 and 2
Strategy 4:	Convene and provide administrative support to a regional coalition working to raise awareness about the STI/HIV epidemic and strengthen evidence based communicable disease prevention, testing and treatment services.
Equity component	Convening community leaders and partners to raise awareness of issues that disproportionately impact marginalized communities builds momentum for change. This also provides opportunities to advocate for systems and policy changes, and ensure the input of persons living with HIV/STIs are included in program and policy development.
Linked to:	Goals 1 and 2

Measurement

The data indicators listed below illustrate why BCHD identified communicable disease prevention as a CHIP priority. Tracking these indicators over the next five years will allow BCHD to measure success in achieving the proposed goals.

Indicator (Source)	Baseline (Year)	Jan 1, 2023 target (rationale)	Linked to:
Average annual growth rate of chlamydia infections per 100,000 people (OPHAT)	8.6% annualized increase (2007 to 2016)	Achieve a 0 % annual increase	Goal 1
Average annual growth rate of gonorrhea infections per 100,000 people (OPHAT)	6.6 % annualized increase (2007 to 2016)	Achieve a 0 % annual increase	Goal 1

Average annual growth rate of syphilis infections per 100,000 people (OPHAT)	25 % annualized increase (2007 to 2016)	Achieve a 0 % annual increase	Goal 1
Average number of new HIV infections per year (OPHAT)	3 per year (2007-2016)	Decrease to 0 per year	Goal 2
Proportion of two-year-olds up to date on vaccinations (4:3:1:3:3:1:4). (Oregon Immunization Program)	65 % (2017)	Increase to 91 % (highest rate of completion of individual vaccine – IPV)	Goal 3
Proportion of adolescents up to date on HPV vaccine. (Oregon Immunization Program)	40 % (2018)	Increase to 52 % (90th percentile of Oregon counties in 2018)	Goal 3

Community Partners List

Wall raising: Benton Habitat for Humanity, bentonhabitat.org

Community health improvement cannot be successful without the collaboration and leadership of many community partners. Below is a listing of community partners working in one or more of the priority health intervention areas as of December 2018. Benton County will update this list of partners as the CHIP action plans progress over the next five years.

Partner	Food	Housing and Transportation	Wellbeing	Communicable Disease
211 Info	✓	✓	✓	✓
Access Benton County			✓	
Accountable Behavioral Health Alliance			✓	
AFRANA		✓	✓	
Alpine Community Center	✓		✓	
Alsea School District			✓	
Benton County Community Development		✓		
Benton County Parks and Natural Areas			✓	
Benton County Public Works		✓		
Benton County Sheriff's Department		✓	✓	
Benton County Thriving Communities Initiative, Health in All Actions and Equity Subcommittees			✓	
Benton Habitat for Humanity		✓		

Partner	Food	Housing and Transportation	Wellbeing	Communicable Disease
Benton County Youth Mental Health Coalition		✓	✓	
Benton Local Advisory Committee		✓		
Blodgett Food Bank	✓			
Boys and Girls Club of Corvallis	✓		✓	✓
Casa Latinos Unidos de Benton County	✓		✓	
Center Against Rape and Domestic Violence		✓		
Chintimini Senior Center			✓	✓
City of Corvallis	✓	✓	✓	✓
Community Health Centers of Linn and Benton Counties	✓	✓	✓	✓
Community Outreach, Inc.		✓	✓	
Community Services Consortium	✓	✓		
Corvallis Area Metropolitan Planning Organization		✓		
Corvallis Bicycle Collective		✓		
Corvallis Bike and Pedestrian Advisory Committee		✓		
Corvallis Daytime Drop-in Center		✓		✓
Corvallis Environmental Center	✓			
Corvallis Housing First		✓		
Corvallis Multicultural Resource Center		✓	✓	
Corvallis Parks and Recreation			✓	
Corvallis Police Department		✓		
Corvallis Public Works		✓		
Corvallis School District	✓	✓	✓	✓
Corvallis Sustainability Coalition	✓	✓	✓	
Corvallis-Albany Farmers Markets	✓			
First Alternative Co-op	✓			
Grace Center			✓	
Greenbelt Land Trust		✓	✓	
Housing Opportunities Action Council		✓		

Partner	Food	Housing and Transportation	Wellbeing	Communicable Disease
InterCommunity Health Network Coordinated Care Organization	✓	✓	✓	✓
Jackson Street		✓	✓	
Kidco Head Start	✓		✓	
LBCC Small Business Development Center	✓			
Linn Benton Health Equity Alliance	✓	✓	✓	✓
Linn-Benton-Lincoln Early Learning Hub	✓	✓	✓	
Linus Pauling Institute	✓			
Love INC		✓		
Meals on Wheels	✓			
Mental Health, Addictions, and Developmental Disabilities Advisory Council			✓	
Mid-Valley Bike Advocates		✓		
Mid-Valley Healthcare Advocates			✓	
Monroe School District			✓	
National Alliance on Mental Illness Corvallis			✓	
Old Mill Center for Children and Families			✓	
Oregon Cascades West Council of Governments	✓	✓		
Oregon Department of Human Services	✓	✓		✓
Oregon Family Support Network			✓	
Oregon State University Anthropology	✓			
Oregon State University Food Pantry	✓			
Oregon State University Forests			✓	
Oregon State University Human Services Resource Center	✓	✓		
Oregon State University Latino Studies	✓	✓		

Partner	Food	Housing and Transportation	Wellbeing	Communicable Disease
Oregon State University College of Public Health and Human Sciences	✓	✓	✓	✓
Oregon State University Counseling & Psychological Services			✓	
Oregon State University Extension Service	✓		✓	
Oregon State University Student Health Services			✓	✓
Philomath School District		✓	✓	
Public Health Planning Advisory Council			✓	
Saint Mary's Church	✓			
Samaritan Health Services	✓	✓	✓	✓
Shangri-La			✓	
South Corvallis Food Bank	✓			
Stone Soup	✓			
Strengthening Rural Families	✓	✓	✓	
Ten Rivers Food Web	✓			
The Corvallis Clinic			✓	✓
Timberhill Athletic Club			✓	
Trauma Informed Oregon			✓	
Trillium Family Services			✓	
United Way of Benton and Lincoln Counties	✓	✓	✓	✓
Willamette Neighborhood Housing Services	✓	✓		

Public Health Accreditation

Public Health Accreditation

Public health departments provide primary and expert leadership in protecting and promoting the health of people in communities across the country. The Public Health Accreditation Board is a nonprofit organization that sets national standards to help public health departments continuously improve the quality of their services and accredits departments that meet the standards.

Benton County Health Department has been accredited since 2017. Our community health improvement plan is one component of our work as an accredited public health department.

Glossary

Community Health Assessment (CHA): A systematic review of health status indicators that is used to identify key problems and assets in a community. The ultimate goal of a community health assessment is to develop strategies to address the community's health needs and identified issues. Community engagement and collaborative participation are key ingredients.

Community Health Improvement Plan (CHIP): A long-term, systematic effort to address public health problems informed by a community health assessment. A CHIP defines the vision for the health of the community through a collaborative process.

Community Health Improvement Process: The implantation of a community health improvement plan through a partnership of local groups, including government entities, community organizations, and non-profits, among others.

Collective impact: The principle that many organizations from different sectors, working together on a common agenda, can make a larger impact than those organizations would on their own.

Equity: Equity may be defined differently by different communities. One definition is that no individual, group, or people experiences worse outcomes because of factors that are beyond their control or are the result of injustice. Equity is also a process where the empowerment and partnership of marginalized people are specifically valued to achieve the outcomes the community seeks.

Health equity: Health equity may be defined differently by different communities. One definition is that no individual, group, or people experiences worse health outcomes or unequal access to health supports because of factors that are beyond their control or are the result of injustice. Health equity is also a process where the empowerment and partnership of marginalized people are specifically valued to achieve the outcomes we seek.

Health inequality or disparity: Differences in health outcomes or health supports that may be related to internal or external factors.

Health Indicator: An outcome or support that can be measured and describes a dimension of health that is being studied.

Priority area: An identified health need that has been selected for improvement using specific goals and strategies. A priority area is intended to be a focus of collective impact and multiple community partners working together.

Resiliency: The capacity to recover quickly from difficulties.

Social determinants of health: The complex, integrated, and overlapping social structures and economic systems that are responsible for most health inequities. These social structures and economic systems include the social environment, physical environment, health services, and structural and societal factors. Social determinants of health are shaped by the distribution of money, power, and resources throughout local communities, nations, and the world

Trauma: A deeply distressing or disturbing experience, or a pattern of distressing experience that occur over a period of time.

Trauma-informed: Understanding, recognizing, and responding to the effects of all types of trauma.