

### History

The Oregon Public Health Division's (OPHD) Office of Multicultural Health (OMH) was established in 1993 by leadership at the Oregon Department of Human Services. In 2001, the State Legislature mandated that ODHS collect data on racial/ethnic health disparities and create a state program to certify medical interpreters.

### Health Priorities

The OPHD at the Oregon Department of Human Services (DHS) has identified the following health priorities for the general population of Oregon, one of which focuses specifically on culturally competent health services to reduce health disparities:

Health Priorities for the General Population
Improve capacity of the public health system to protect people
Strengthen environmental public health
Promote early childhood assessment and services
Increase cultural competency of all public health services
Improve training and public health knowledge of local public health leadership

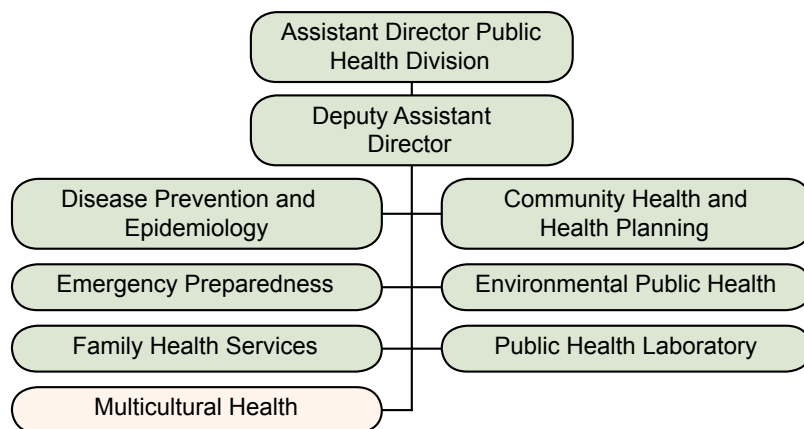
### Overview

	Funding for MH/HD Activities	Personnel Dedicated to MH/HD	MH/HD Unit	MH/HD Advisory Body	State MH/HD Legislation or Mandate	MH/HD Strategic Plan	Evaluation of MH/HD Activities
Oregon	✗	✓	✓	✗	✗	✓	✓
Total Affirmative Responses out of 46	30	38	36	36	27	36	39

### Organization, Infrastructure and Resources

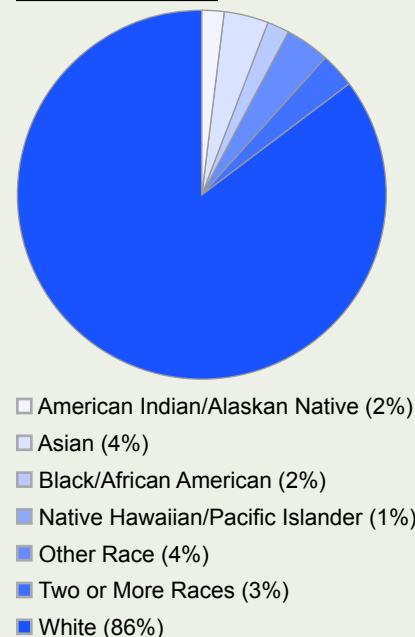
The following is a simplified organizational chart that demonstrates the location, at the time of the survey, of the state's racial/ethnic minority health focal point in relation to the State/Territorial Health Official and/or other key public health offices. However, changes at ODHS that occurred after the completion of the survey has led to the Office of Multicultural Health being moved out of the Public Health Division and directly into ODHS' Director's Office. Reporting duties will be directly to the ODHS Director and Deputy Director. This change was initiated in accordance with an agency-wide initiative to create a strong presence of multicultural health issues for all clients served by ODHS.

#### Oregon Department of Human Services

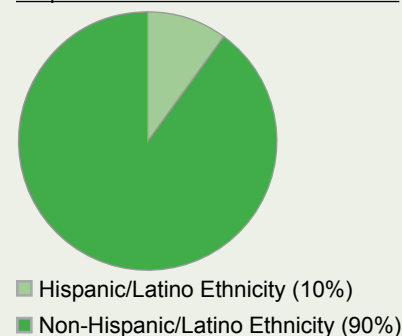


Total State Population:  
3,700,758

Racial Distribution



Hispanic/Latino Ethnic Distribution



*Note: People can self-identify as members of any racial group in the Census, as well as report having Hispanic/Latino ethnicity.*

Source: 2006 American Community Survey, US Census Bureau

## Strategic Planning

The DHS-OPHD does not have a division-wide strategic plan to address racial/ethnic health disparities; however, their Office of Multicultural Health's work plan - that was still awaiting leadership approval at the time of the survey - included the following goals. No tracking or measurement information was reported by the ODPH.

Goal 1:	Increase ability to serve limited English proficient persons (LEP)
Goal 2a:	Increase Cultural Competence Training for DHS staff, resulting in increased effectiveness of outreach & services to diverse communities
Goal 2b:	Increase effectiveness of DHS Health Services' (HS) programs for diverse communities
Goal 3a:	Provide greater representation & influence of racial/ethnic groups facing health disparities on DHS boards & citizen advisory boards. Create better policies & services to groups with disparities
Goal 3b:	Increase collaboration between communities facing disparities & DHS-HS, resulting in more effective health services
Goal 3c:	Improve communication between DHS & communities; among DHS programs regarding multicultural issues & programs
Goal 3d:	Better communication with racial/ethnic communities by creating messages in formats & languages that resonate and are more effective for targeted communities
Goal 3e:	Improve social marketing strategies within DHS-HS in an effort to decrease health disparities in communities of color
Goal 4a:	Enhance ability of providers, CBO's, and networks to sustain themselves financially and expand services to meet community needs
Goal 4b:	Increase effectiveness of faith-based organizations to promote health and encourage prevention with their constituents
Goal 5a:	Enhance ability of Health Services to collect, analyze & utilize valid and reliable racial/ethnic health disparities data
Goal 5b:	Increase ability to determine effectiveness of DHS programs & progress toward elimination of health disparities
Goal 6:	Increase workforce diversity in DHS, including Health Services
Goal 7:	Increase cultural competency resources available and used by DHS programs and staff, resulting in increased effectiveness of outreach & services to diverse communities

## Partnerships

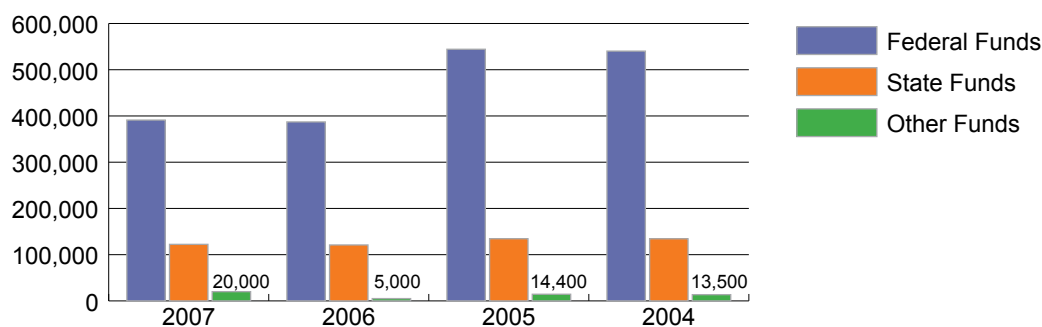
- Minority health and health disparities (MH/HD) activities are conducted and coordinated across several OPHD program offices.
- ODHS has a tribal liaison that conducts quarterly meetings with Oregon's nine federally-recognized tribes and urban Indian communities. ODHS' divisions, including OPHD has a tribal representative that attends quarterly meetings to participate on Tribal concerns and issues.
- OPHD maintains partnerships with an array of external entities active in MH/HD including: local health departments, tribal government, non-profit and community-based organizations, health systems, foundations, professional associations and clinical networks.

## Human Capital Investments

The numbers and types of OPHD staff dedicated to Minority Health/Health Disparities (MH/HD) were not reported; however, the Division reported having personnel in its Office of Multicultural Health program that work to coordinate with other public health program offices. OPHD reported that there were no resource personnel specifically designated in the individual health program offices to coordinate work with the Office of Multicultural Health.

## Financial Investments

The following is the reported annual budget of the OPHD's Office of Multicultural Health for 2004-2007. The amount may not reflect the total state health agency investment in Minority Health/Health Disparities.



## Activities

### Translation of Public Health Program Information

The Hispanic community is the largest racial/ethnic minority population in Oregon. It is also the most at risk for health conditions or complications related to lack of timely, comprehensive maternal and child health care. To respond to this need, the OPHD translated information on maternal and child health care into Spanish.

#### Partners

OPHD Federally Qualified Health Centers (FQHCs) and local health departments throughout the state

#### Activity Outcomes

Spanish language health materials have been requested and used at FQHCs and local health departments serving Hispanic populations.

#### Evaluation Methods

Although an evaluation had not yet been conducted to assess the impacts of this Spanish language health information among Hispanic Oregonians, feedback from Hispanic clients at FQHCs and local health department service sites was positive regarding the translated health literature.

### Spanish Translation of Urgent Public Health Messages

In response to the limited English capabilities of some people in Oregon's Hispanic communities that can result in delays in their receipt of urgent health information, such as food or toy recalls, the OPHD translates all of its urgent public health press releases into Spanish and broadcasts them widely through Spanish-language media sources across the state. This effort has created awareness regarding emerging public health issues and concerns in Hispanic communities throughout Oregon and prevented potential illness or injury.

#### Partners

OPHD and Spanish language television, radio and print media

#### Activity Outcomes

Increased awareness in Hispanic communities regarding urgent public health concerns

#### Evaluation Methods

Process evaluation measures: number of Spanish language media sources carrying/broadcasting public health messages, the number of times each message is broadcast

## Activities continued...

### Culturally-Appropriate Media Projects

Oregon's Office of Multicultural Health (OMH) has partnered with several OPHD programs to design and/or provide feedback on multicultural media projects (i.e. posters, brochures, newspaper ads, radio spots, television programs). OMH also partnered with a local Latino television program and a Catholic Spanish publication to provide culturally-tailored health messages in health disparity areas such as tobacco prevention, safe fish consumption, fire safety, breast cancer, immunization and HIV/AIDS.

#### Partners

Federal DHHS Office of Minority Health, Oregon OMH, OPHD programs, Cita Con Nelly, El Centinela

#### Activity Outcomes

Joint partnerships with OPHD programs, culturally-appropriate media products provided by community media organizations and OMH

#### Evaluation Methods

Feedback from focus groups

### State Partnership to Improve Minority Health

To decrease health disparities in racial and ethnic communities, Oregon OMH provides mini-grants to community-based organizations serving racial/ethnic populations to promote and fund new and/or existing health promotion and disease prevention activities. This is part of a five-year grant program that is focused on providing culturally appropriate services for communities facing health disparities.

#### Partners

Federal DHHS Office of Minority Health, Oregon Office of Multicultural Health, International Center for Traditional Childbearing, Collective Care Services, El Centinela, Oregon Somali Family and Education Center, Northwest Somali Community Center, Korean Senior Citizen's Society of Oregon

#### Activity Outcomes

Mini-grants of up to \$5,000 were given to community-based organizations serving racial/ethnic groups for the organizations to conduct health outreach and programs appropriate for the specific communities they serve.

#### Evaluation Methods

Evaluations from program participants, number of people served by the program, general demographics of participants

### DHS Tribal Liaison Relationship with Oregon Tribal Nations

ODHS has designated a DHS Tribal Liaison, situated in the Director's Office, that coordinates DHS activities with Oregon's Tribal nations and American Indian organizations. This work has facilitated efforts to ensure that all Oregonians are taken into account and protected by the state's emergency preparedness and planning efforts. OPHD reported partnering with the Northwest Portland Area Indian Health Board to develop and coordinate Pandemic Influenza Plans with each tribal community and nation in the state. All tribal plans have been integrated with the general state Pandemic Influenza Plan, and joint preparedness activities have been conducted.

#### Partners and Funding

ODHS, technical assistance and funding from the Centers for Disease Control and Prevention (CDC) for Pandemic Influenza activities, OPHD, Northwest Portland Area Indian Health Board, and Indian tribes and nations of Oregon, urban Indian non-profit organizations

#### Activity Outcomes

Increased awareness of Native American community concerns around health, housing and other social services; progress towards integrating state plans so that they are inclusive of tribal concerns

Quarterly meetings assist the ODHS to assess next steps, assist Oregon tribes to receive state services, and maintain good tribal relationships. Additional subcommittees have been formed on a project-by-project basis.

#### Evaluation Methods

Feedback from tribal participants

Oregon's primary contact for racial/ethnic minority health and health disparities is:

#### Jenny Lee Berry

Interim Administrator

Office of Multicultural Health

Public Health Division, Oregon Department of Human Services

<http://oregon.gov/DHS/ph/omh/index.shtml>

Phone: (971) 673-1240