



Multnomah County Public Health Advisory Board
Public Health Approaches Minutes
June 2024

Date: Tuesday, June 25, 2024

Time: 3:30pm – 5:00pm

Purpose: To advise the Public Health Division on several areas of work with a strong focus on ethics in public health practice and developing long-term public health approaches to address the leading causes of death and disability in Multnomah County.

Attendees: Jennifer Philllips, Keara Rodela, Su Liu, Karen Wells, Laurel Hansen

County Staff: Andrea Hamberg, Eric Richardson, Amie Zawadzki, Emily Mosites

Item/Action	Process	Lead
Welcome, Introductions & Agenda Review	<ul style="list-style-type: none"> ● Attendees introduced themselves and shared what their favorite summer activity is ● Andrea reviewed the agenda 	Andrea Hamberg
Public Comment & Board Sharing	<ul style="list-style-type: none"> ● No public comment or updates 	Andrea Hamberg
Public Health Division Updates	<ul style="list-style-type: none"> ● Budget and leadership updates <ul style="list-style-type: none"> ○ County board adopted the budget earlier this month; overall positive for the Public Health Division ○ Budgeted a year of funding for HIV/STD clinic <ul style="list-style-type: none"> ■ Added a year of funding for Help me Grow <ul style="list-style-type: none"> ● Partnership with Future generations collaborative ○ Harm reduction services <ul style="list-style-type: none"> ■ 1 Additional street outreach team as an ongoing commitment ○ Nurse family partnership <ul style="list-style-type: none"> ■ Program sends nurses into homes or homestay situations to provide medical support and social connection to families during the first 2 years of a baby's life ● PH Director recruitment <ul style="list-style-type: none"> ○ Anticipating recruiting for position in the fall through a robust national recruitment ○ Input from this group will be used to inform the recruitment 	Andrea Hamberg
MCPHAB Membership and Recruitment	<ul style="list-style-type: none"> ● Acknowledgement for service and share appreciation for board members' dedication to MCPHAB <ul style="list-style-type: none"> ○ Cheryl Carter, Joannie Tang, and Erika Zuel ○ For this upcoming term; we will be recruiting for 3 positions ● Receive an update on Board recruitment and next steps <ul style="list-style-type: none"> ○ The online application will incorporate feedback from this group and will be up and running by Thursday 	Eric Richardson

- Workin on handouts/one-pagers which will be shared with this group and posted on the website
- Discussion and input
 - Suggestion to shorten the application by removing one of the questions so there are only 3 instead of 4 questions
 - “What do you want to accomplish..:
 - Feedback from board members:
 - One board member stated their preference to keep the question
 - One board member stated they are neutral about; likes simplicity

Wellness / stretch break

Fentanyl Fatality Report

- Receive an overview of the fentanyl fatality report
 - [Link to Fentanyl Overdose Deaths report 2018-2023](#)
 - Acknowledgement that the contents of the report may be sensitive to some folks as it is a heavy topic area
 - The report comes from community epidemiologist team and shows the final confirmed data on deaths that were due to fentanyl overdose form vital records
 - Data about who we are seeing death among (ex. Demographics, geographic location, etc.) and trends
 - Methods
 - Categorized race in two ways
 - Number of deaths in smaller age groups
 - Calculations to compare to census data
 - Social contexts that resulted in numbers we see
 - Review process of report
 - Internally and review from colleagues such as Central City Concern
 - What we found:
 - Dramatic rise over time from 2018 where there were 2 fentanyl related deaths per month and in 2023 the numbers will continue to increase
 - Multnomah County doesn't have the highest rate of overdoses but the rise in overdoses has risen
 - Similar to San Francisco; centralized location - hotspots in downtown
 - In the recent year:
 - More prevalence in middle aged age group
 - Gaps between males and females
 - Don't have in depth gender data
 - Higher rates of mortality in males as well as the rise in mortality rates
 - Trends and data
 - Rise highest in Native American and Alaskan Native and Black African American communities

Emily Mosites

- Increase in people who identify as Hispanic
 - Groups that have the highest risk are identified in order for outreach and in which particular ways we want to do outreach
 - Where risk is occurring, not just for use but for fatality
 - Naloxone distribution
 - Culturally specific interventions
- Questions and discussion
 - Q: I wonder why there aren't safer use spaces in these hot spots? It's ok if you don't have the answer to this question but thought I'd share my thoughts anyways.
 - A: Dark blue bars are San Francisco
 - Fall in 2022
 - What do they think caused that?
 - They think the fall is related due to an overdose prevention area
 - Hoping to see connections to long term care but it did close and Emily's team is asking for insights they have
 - Political implications
 - A: As a county, we are still looking at what that might look like, if we are the right people, etc
 - Board member expressed appreciation that all of this is being taken into consideration including the political problems and preventing some fatal overdoses
 - Seeing rise again in the last year, will continue to keep in touch with San Francisco
 - Additional trends: 2023 numbers still not finalized
 - Fentanyl with co-identified methamphetamine use
 - Q: Is it intentional co-use?
 - A: Don't have specific information about that; what Emily has heard is that the co-use is intentional
 - We have been passing out fentanyl test strips
 - On the graph, all do have fentanyl, lighter blue means methamphetamine was also identified
 - Q: How are our rates in the state or nation versus the rest of the world? Just curious
 - A: We have looked at across the country but haven't looked at in the world but will look into it
 - Q: Did community/political education awareness of the benefit of "safer use spaces" be helpful to get the conversation going with politicians? Just a thought. Awareness tends to increase compassion for addressing and tackling this type of issue
 - A: Our commissioners have been very interested in this issue
 - Overdose deaths in our community
 - They are all very engaged in this issue and

	<p>suspect they will continue to be very engaged in this issue</p> <ul style="list-style-type: none"> ● Q: would suggest looking at neighbors that are not first world, not considered wealthy. History has shown that a nation that is not considered wealthy has more creativity in solving public health crisis <ul style="list-style-type: none"> ○ A: countries that are not comparable in income level, great point ● Q: Yes it would be helpful to keep planting this seed and putting data at the forefront of the conversation within the political realm . Thanks for this thought Karen. ● Emily's contact info: Emily.mosites@multco.us 	
Feedback & Discussion	<ul style="list-style-type: none"> ● Provide input on Board membership this year <ul style="list-style-type: none"> ○ What worked well? What could be improved? Input from board members: <ul style="list-style-type: none"> ■ I can't think of anything at this time ■ Sorry folks, I got nothing on this - I'm neutral ■ Things that worked well: committees, involvement for membership recruitment, different speakers/presenters coming to meetings ■ Could be improved: more slides (something to view while speakers are presenting on topics); getting the agenda a week in advance (sometimes things change and it helps confirm the meeting is happening) ■ Some things we can all be better about is volunteering to facilitate meetings; both in volunteering to facilitate and specific asks to folks ■ Adding the agenda to the calendar invite ○ Eric and Amie met earlier today and discussed a point brought up and moving forward we will plan to send out agendas a week in advance <ul style="list-style-type: none"> ■ We will also discuss revamping the sign-up system for facilitating meetings ● Question from board member: Are there any asks/things that you at the County would like from us more? <ul style="list-style-type: none"> ○ Feedback from county staff: This group's leadership and thought partnership is deeply appreciated as well as the continued presence of the board 	Eric Richardson
Wrap-up, Meeting Evaluation & Connection	<ul style="list-style-type: none"> ● Poll results were either "strong" or "very strong" for all categories except "The right people were invited and included in the meeting". This received one "Other" vote. ● Meeting adjourned at 4:55pm 	Amie Zawadzki

Join Zoom Meeting

<https://multco-us.zoom.us/j/96971641756?pwd=dGhFRmpJQit4TFo1WEVpT0FoV01JUT09>

Meeting ID: 969 7164 1756

Passcode: PHe@lth1

Meeting ID: 969 7164 1756

Passcode: 52218355

Find your local number: <https://multco-us.zoom.us/j/acwG3SM454>

MCPHAB Group Agreements

- Listen to understand, not to react
- “Land the plane” (attempt to bring the point home to something actionable) and have the permission to come in raggedy
- Acknowledge the perspective you’re speaking from
- Ensure balance of everybody expressing perspectives
- Have fun and bring your whole self • Be creative, flexible, and solution-oriented • Engage fair processes and balance toward fair outcomes
- Focus on the quality of the journey and not just the destination
- Engage and be fully present
- Identify goals to guide our work
- Be mindful of how much space you take up – step up, step back
- Brave and supportive space
- Understand one’s privilege and platform
- Give time for internal and external processing
- Check in with everyone after each agenda item
- One Diva, one mic
- Make sure to take time for yourself and prioritize self care

MCPHAB Consensus Building Process

Five Stages of Consensus-Building

1. Convening
 - Getting the right people to the table with the right expectations.
2. Assigning Roles & Responsibilities
 - The “signing on” phase. Everyone at the table agrees upon the ground rules that will govern decision-making and defines the kinds of responsibilities they are each willing to accept.
3. Facilitating Group Problem-Solving
 - Step 1: “Venting.” This happens when members state any concerns they have about a proposal or a process.
 - Step 2: Round of statements describing interests or priority concerns by members.
 - Step 3: “Inventing.” This happens when members take what they’ve heard about each other’s interests and try to come up with proposals that meet everyone’s needs.
 - The point of these 3 steps is to keep multiple options alive so that a full range of combinations can be “tried on for size.”
4. Reaching Agreement
 - Does not mean voting, but “agreeing to agree.”
 - Facilitator asks: “Can everybody live with this proposal?”
 - If a member says “no,” he or she is asked to explain his or her position clearly, including any changes to the proposal he or she would like to suggest.
5. Holding People to Their Commitments
 - This is the implementation phase.
 - What actions do subcommittees, the Board as a whole, or individual members need to take?
 - What actions are MCHD staff and executives responsible for?