MEETING MINUTES

RAC Members Present
Lezlee Craven
Robin Roberts
Patricia Muchmore
Shelley Morris
Jessica Rice
Heather Murphy

Staff Present
Debi Farr, Trillium Community Health Plan
Karen Gaffney, Lane County Health & Human Services (call-in)
Ellen Syversen, Lane County Public Health
C.A. Baskerville, Lane County Public Health
Sandy Moses, Lane County Public Health

RAC Members Absent
Rick Yency
Char Reavis
Joyce Richardson

Guests
Melissa Bowers, Junction City- City Hall Manager
Nancy Pierce, District Aid-Representative De Fazio
Kay Metzger, Oregon Health Authority
John Baumann, City of Veneta, Mid Lane Cares
Cindy Land, Volunteer, 4-H Lane County

1. Call meeting to order
2. Public Comment-Cindy Land, Volunteer, New 4-H Program Lane County
   a. Cindy Land, volunteer with the new 4H program provided public comment.
      i. 4H is coming back to Lane County.
      ii. They will provide a variety of programs related to nutrition education and
          food preservation as well as providing food pantry options. Camps,
school enrichment programs, special interest and short term programs are all possibilities.

iii. 4-H is a national organization specializing in non-sports, hands-on educational activities. 4-H volunteer mentors use animals, agriculture, arts, sciences and other interests as catalysts for teaching life skills and encouraging lifelong learning.

iv. A long term study by Tufts University compares how 4-H participants are impacted in many positive manners relative to their non-4-H peers [5]:
   1. 4-H Helps Young People Excel: Better grades, higher levels of academic competence, twice as likely to attend college, three times more likely to contribute to society in a positive way.
   2. 4-H Youth Make Healthier Choices: Thriving in positive non-sports active and outdoor activities, more likely to exercise, significantly lower drug, alcohol and cigarette use than their peers.
   3. 4-H Life and Workforce Skills Add Value to Their Lives: More likely to pursue careers in science, engineering and technology, higher levels of civic identity and civic engagement, more likely to complete school and pursue advanced degrees.
   4. 4-H is an OSU Extension Service program, and like other Extension programs, it no longer receives county government funding. We’re building it back under a new model that will rely on user fees, community sponsorships and lots of volunteers.
      a. During the rebuilding phase, grants and assistance from community partnerships will underwrite these educational programs to make them more affordable for youth and families.
      b. We’ve had tremendous support, but we still need about $20,000 in “seed money” plus additional community sponsorships to meet our budget in FY2013-14.
      c. Cindy can be reached at 541-953-2107 (cell) and 541-344-2932. The Extension phone number is 541-344-5043.

b. Dr. John Baumann also provided public comment to give an update on Mid-Lane Cares and the Fern Ridge Service Center.
   i. Those involved are continuing to work on fundraising and overall organization.
   ii. They are working with Peace Health and are excited about the progress of the project.

3. Introductions and Welcome
   a. Members introduced themselves and provided their top two choices of issues they would like the RAC to move forward.
      i. Patricia- Tobacco Prevention and obesity (prevention).
      ii. Shelly-ACES and Mental Health
      iii. Heather-Childhood obesity and mental health
      iv. Melissa (City of JC, guest)-Food security and access to services
      v. Robin-Mental health and prevention of drugs, alcohol, obesity, and accessing services
vi. Dr. Baumann (guest)-mental health, substance abuse and rural medical outreach
vii. Ellen (staff)-mental health promotion and nutrition and physical activity promotion for children
viii. CA-Nurturing environments
ix. Karen Gaffney-tobacco/ACES
x. Lezlee-mental health, access to care, childhood obesity
xi. Rick (via e-mail later)-lack of dental care, telemedicine in rural areas (Dr. Michael Maez)

4. Get to Know Our Community-Junction City: Melissa Bowers
   a. Melissa discussed the services available; full police department, own jail and municipal court, finance and administration, garbage and water and recycling.
   b. Junction City has a Community Services Department which includes parks (10), a skate park to come in the Fall, a seasonal pool (swim lessons June-Aug.), a senior center since 1978, meals on wheels and connections program.
   c. The old fire hall serves as a community center which is a non-profit and city partnership. The center provides after school programs, camps, adult fitness and recreation, ESL classes (scholarships via Education Together Foundation), and library services.
   d. They are hoping for an urban growth boundary extension.
   e. A construction of a water treatment plant is underway due to high levels of iron and manganese. A state hospital project and a prison project (5 years out) are in the works.
   f. JC has a school nurse and counselor at the elementary school. They have a lice removal program and bundles of lunches program (25 children who go without food on no school days can pick up a backpack with food-hope to add more).
      i. Schools are 55% free and reduced school lunch.
      ii. 1 out of 5 families us the food pantry.
   g. The JC food pantry has been moved to a larger location and now has more offices than can be filled. The hope is to have a partnership with DHS where they are offered free space and internet to keep their office open in JC. Gas and eggs are cheaper in JC.
   h. They were hard hit in 2008 due to collapse of RV industry, but there are signs of regrowth (e.g., country coach, carmel corn).
      i. School district boundaries-Population 10,000 district wide and 5,000 in city limits
      ii. Scandinavian festival-Aug. 9-12, always the second full weekend, Thursday through Sunday.

5. CAC Business/Announcements
   a. Minutes were approved.
   b. Members filled out Conflict of Interest Forms (Rick, Heather, Patricia, Shelly)
   c. Ellen asked the group to assess level of interest for the CATCH program and Living Well program in their communities.
      i. The group discussed the possibility of getting OHP members covered to take the Living Well classes. The program is sometimes called the Stanford Model, 541-682-3888-Nancy Sargent Johnson.
d. Members asked to have the obesity strategy resent to them.
e. Members discussed how to have a youth voice for the RAC. The Youth Advisory Committee in Cottage Grove was mentioned as a way to do this. Also, Heather Murphy suggested the youth could have a voice through the parenting classes taking place in Creswell and Pleasant Hill.
f. Debi Farr mentioned the CCO Community Conversation happening on April 25th from 6-7:30 at Hilyard Community Center. Debi also provided copies of the RAC coverage in the Siuslaw news from the Florence meeting.
g. Members were asked if they wanted to host a community conversation in their community. Lane County Public Health and United Way are looking for members to take a lead in recruiting and reminding attendees of the focus group.
h. Ellen asked RAC members to think about consumer members in their community who may want to join the RAC. This could be a topic of conversation for future meetings.

6. Mental Health Promotion and Suicide Prevention Strategies: Sandy Moses
   a. Sandy Moses talked about the 10x10 campaign that is designed to increase life expectancy by 10 years in 10 years.
      i. Based on the idea that wellness is not the absence of disease, illness and stress but the presence of purpose in life, active involvement in satisfying work and play, joyful relationships, a healthy body and living environment and happiness.
      ii. She talked about the scale of someone who is flourishing to languishing. You can be without a mental health diagnosis and still be miserable.

   b. Sandy talked about the eight dimensions of wellness.
      i. Fact: 1/4 of women are depressed before or after a pregnancy. Stress during pregnancy has a big impact on the health of the child.
      ii. Sandy talked about the importance of reducing prejudice and stigma as barriers to recovery.

   c. Risk and protective factors and ecological models: We tend to look more at risks and less at protective factors (e.g., connectedness and social relationships).
      i. Mental health promotion is the active process of creating conditions that enhance the well-being of people (Australia is doing a lot with mental health promotion).
      ii. Tony Biglan of ORI helped develop this definition and associated recommendations.
      iii. The group talked about upstream prevention and what that means. CA shared an analogy using the McKenzie River.

   d. Sandy discussed the more recent research on brain development and the relationship to addiction. We know that good nutrition early in life prevents depression.

   e. The integration of physical and mental health will be key in moving forward. We need to treat the body as a whole. Health Care is only a small portion of the pie.

   f. Suicide prevention has traditionally started at the high school level, but now the focus is on middle school and earlier (good behavior game).
i. We need to teach parents how to help kids with stress. We need stress management for whole families. Stress management is now becoming a need for physicians and nurses (nurses at higher risk for smoking).

ii. Sandy stressed the need for continuity of care. It is not expensive to check in on someone, send a card, or bring food. The importance of diet, exercise, stress management, sense of purpose and sleep hygiene can’t be underestimated.

iii. The importance of peer support services was mentioned.

iv. Sandy discussed the available trainings as well as specific recommendations:
   1. QPR (question, persuade, refer)
      a. No experts and do not need to be a trained medical professional
      b. Basic suicide prevention 101, 2 hours and low cost
      c. Depression is a high risk for suicide attempts and this training will help determine warning signs
      d. Teach people to connect, listen, and find out what is going on
   2. ASIST (Applied Suicide Intervention Skills Training)
      a. Will be offered in May
      b. Can’t offer very often
      c. Best for schools, social service agencies, government, libraries
   3. Mental Health First Aid (MHFA)
      a. 2 day program with the goal of decreasing stigma and increasing the capacity to respond, identify and help
      b. Exercise as a treatment for depression.

7. Next Steps
   a. Next meeting date: **May 10th, 11:00am-1:00pm, Upper McKenzie-Location TBD-possible bus tour of area.**
   b. Group discussed having a meeting in Oakridge in June and possibly taking a break for July and August (Need to vote on this).

8. Adjourn 1:00pm

**CAC Workgroups**
(Room 525, Lane County Health & Human Services Building, 151 W. 7th Ave., Eugene)

1. Community Health Assessment/Community Health Improvement Plan
   a. Meets on the 2nd Tuesday of each month from 2:00pm – 4:00pm
   b. Staff contact: Ellen Syversen ([Ellen.Syversen@co.lane.or.us](mailto:Ellen.Syversen@co.lane.or.us))

2. Health Disparities
   a. Meets on the 2nd Thursday of each month from 12:00-1:30pm
   b. Staff contact: Brian Johnson ([Brian.Johnson2@co.lane.or.us](mailto:Brian.Johnson2@co.lane.or.us))

3. Prevention
   a. Meets on the 3rd Tuesday of each month from 1:15-2:45pm
   b. Staff contact: Jennifer Webster ([Jennifer.Webster@co.lane.or.us](mailto:Jennifer.Webster@co.lane.or.us))