EXECUTIVE SUMMARY
The Linn Benton Health Equity Alliance (LBHEA) is one of 4 Regional Health Equity Coalitions in Oregon and a program of DevNW (formerly known as Willamette Neighborhood Housing Services, or WNHS). LBHEA has leadership representation of key local stakeholders from multiple sectors, including housing, healthcare, public health, education, non-profit organizations, and grassroots organizations. Our coalition works on behalf of people who may experience health inequities because of their race, ethnicity, national origin, language, social and economic status, social class, religion, age, disability, gender, gender identity, sexual orientation and other socially determined circumstances.

Between January 2018 and June 2019, our work was centered on the following strategies:

1) Meaningful Community Engagement
   a. Capacity Building Mini-Grant Program

2) Organizational Capacity Building
   a. Health Equity Summits and Trainings
   b. Race Conversations Coalition Training

3) Social Norm and Environment Change
   a. Worked to improve access to fresh food and outdoor areas to Latino families
   b. Offered nutrition and parenting education to rural families with young children
   c. Offered support to local parent teacher associations serving dual-language schools
   d. Organized community education events about diversity in Albany

4) Policy and Systems Change
   a. Participation in local- and state-level advisory boards and committees
   b. Introducing a new menu of healthy and culturally appropriate foods in Corvallis schools
   c. Housing strategic messaging education and advocacy efforts in Corvallis

Our key recommendations for moving health equity forward in the state of Oregon are the following:

- Include communities of color in all processes and efforts geared toward policy, system, and environmental changes aimed at improving health equity.
- It is key to reward community expertise and lived experience in the same ways that we have historically rewarded academic expertise and professional experience.
INTRODUCTION

Our History

As a coalition, the Linn Benton Health Equity Alliance (LBHEA) began its work before 2008, in a very organic and grassroots way. Our coalition’s origins can be traced back to a group of community members who decided to organize showings of the “Unnatural Causes: Is Inequality Making us Sick?” series followed by community discussions on the role of social determinants on our community’s health. Back then, the very idea of social determinants of health was a pretty innovative approach to public health, and health equity in itself was a relatively unknown concept at the community level. Those movie showings and community discussions led to the creation of a more organized group, which received its first grant from Northwest Health Foundation in 2008. At that point in time, the backbone organization for the LBHEA was Benton County Health Department. In 2011, when the Oregon Health Authority (OHA) established the Regional Health Equity Coalition (RHEC) initiative, LBHEA was funded as one of three original RHECs. RHECs work using community-driven and culturally-specific activities to reduce health inequities and address social determinants of health in their respective regions and in the state of Oregon.

In 2012, LBHEA transitioned from Benton County Health Department to a new backbone organization – DevNW (formerly known as Willamette Neighborhood Housing Services, or WNHS); this move made sense because DevNW is a non-governmental, non-profit organization, which is uniquely positioned to advocate for policy and system changes. DevNW is a community development organization committed to improving lives and strengthening communities through quality affordable housing, homeownership, economic opportunity, and community partnerships. DevNW was formed in 1991 and is a chartered member of the NeighborWorks Network. DevNW services include the development of multifamily rental housing and owner occupied housing; assistance to first-time homebuyers; financial education; home repair loans; health navigation and resident service programs. With the addition of the Linn Benton Health Equity Alliance to its programs, DevNW was able to more effectively address the social determinants of health, policy, and system changes in partnership with member individuals and organizations.

Our Vision and Mission

LBHEA’s vision and mission have been revised in the last year to more accurately reflect our commitment to underrepresented people and their communities.

LBHEA’s vision is that healthy communities begin where we live, learn, work, and play. Together, our coalition is working to ensure a future where healthy opportunities are possible for underrepresented people in Linn and Benton Counties. We acknowledge the historical and structural underpinnings of inequities in health and the need for societal change. To that end, our mission is to gather people from a
variety of backgrounds to build on community strengths and create policy, systems, and environmental change so that underrepresented people have the opportunity to be healthy.

In our work, we adhere to the following guiding principles:

• We honor respect and dignity for all humans;
• We create and promote opportunity and access for those that have historically lacked it;
• We practice inclusivity and reciprocal learning;

Who We Serve

Our coalition works to empower underrepresented individuals, their communities, and the organizations that serve them across Linn and Benton Counties. We work on behalf of people who may experience health inequities because of their race, ethnicity, national origin, language, social and economic status, social class, religion, age, disability, gender, gender identity, sexual orientation and other socially determined circumstances. Most of our current work is centered in Corvallis, Albany, and surrounding rural areas including Monroe, Philomath, Lebanon, and Sweet Home. The closest tribe to our region is the Confederated Tribes of the Siletz, which are headquartered in Lincoln County. We are working to establish communications with the Siletz Tribes, considering that members of these tribes reside in several different Oregon counties.

Data from the most recent Regional Health Assessment of Linn, Benton, and Lincoln Counties (2015) indicates that Linn and Benton counties have approximately 216,000 residents, ¾ of whom live in urban centers. Linn and Benton counties are also home to a diverse population in terms of race and ethnicity, socioeconomic status, immigration status, and sexual orientation - as described in the two figures below.

<table>
<thead>
<tr>
<th>LBHEA Target Population</th>
<th>Benton County (Population = 91,000)</th>
<th>Linn County (Population = 125,000)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Latino/Hispanic</td>
<td>7.3%</td>
<td>8.8%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>1.2%</td>
<td>0.7%</td>
</tr>
<tr>
<td>Other communities of color</td>
<td>11.5%</td>
<td>6.3%</td>
</tr>
<tr>
<td>Arabic-speakers</td>
<td>0.8%</td>
<td>Unknown</td>
</tr>
<tr>
<td>Immigrants/Refugees</td>
<td>9.5%</td>
<td>4.1%</td>
</tr>
<tr>
<td>Low-income</td>
<td>18.4%</td>
<td>13.1%</td>
</tr>
<tr>
<td>Rural residents</td>
<td>19%</td>
<td>32%</td>
</tr>
<tr>
<td>LGBTQ</td>
<td>Best estimate is 5%</td>
<td>Best estimate is 5%</td>
</tr>
</tbody>
</table>

Sources: Population estimates, race/ethnicity, foreign-born and low-income percentages were taken from the U.S. Census QuickFacts websites for Benton and Linn Counties. Rural residency and LGBTQ were taken from local Community Health Assessments.
NOTE: Numeric estimates for communities of color in LBHEA’s service area when counted as a single race are as follows: American Indian/Alaska Native (n=2,451), Asian (n=5,677), Black/African American (n=1,486), Multi-racial (n=6,142), Native Hawaiian/Pacific Islander (n=400) and when counted alone or in combination: American Indian/Alaska Native (n=5,546) Asian (n=7,797), Black/African American (n=2,501), Multi-racial (N/A), Native Hawaiian/Pacific Islander (n=1,052).


In terms of the socioeconomic status, both counties have lower median household and per capita incomes than the state of Oregon. In terms of income inequality, Linn County has a lower ratio than the state of Oregon, while Benton County has the highest income inequality in the state. About 1 in 5 residents of Linn County and 1 in 4 residents of Benton County live below the poverty line; children less than five years of age represent the highest percentage living below the federal poverty level. A higher percentage of non-White residents live below the federal poverty line.

In terms of immigration status, we know that around 9% of the population in our two counties speak a language other than English at home (59% of speak Spanish at home, and 41% speak another language). Benton County also has a diverse immigrant population due to the student population at Oregon State University and their families.

Affiliated Organizations

There are three different ways through which organizations become affiliated with our coalition: leadership team, partners, and coalition members. Each type of affiliation carries its set of responsibilities and level of engagement.

The Leadership Team makes executive decisions for the coalition; members are expected to regularly attend meetings, which happen every other month in person, and over the phone as needed. Our Leadership is currently composed of 11 members, 8 of whom identify as people of color, including Black, Latino/Hispanic, and immigrant members. Most of the leadership team members are women (9), and two prefer to communicate in Spanish. The organizations listed to the right are represented on our leadership team.

- Benton County Health Department
- Linn County Public Health
- Samaritan Health Services
- Casa Latinos Unidos
- Organizacion de LATINAS Unidas
- Corvallis/Albany NAACP Chapter
- IHN Coordinated Care Organization
- Early Learning Hub
- Oregon State University Extension
- Strengthening Rural Families
- Padres en Accion / Parents in Action
A second way to be affiliated with our coalition is by becoming a Partner. In 2018, we granted 13 Capacity Building Mini-Grants and 5 Policy and System Change Grants to a total of 14 partner organizations. These partners help further the mission of the coalition through their actions in our communities and are expected to participate in an ongoing and active manner at our monthly meetings, trainings, and other events.

Finally, there are local organizations that are coalition members. These organizations receive communications from LBHEA on a regular basis, and may choose to engage in specific events and trainings that are of interest to them. They reach out to our coalition when opportunities for collaboration arise, and are quick to offer assistance when called upon by us – but they do are not required and often do not interact with our coalition on a regular basis. These coalition members include other public health entities (such as Lincoln County Public Health and the Siletz Tribal Health Services), health care agencies (Mid-Valley Children’s Clinic), local schools (Corvallis School District and School Board, Greater Albany Public Schools, Lebanon School District), higher education institutions (Linn Benton Community College and Western Oregon University), non-profit organizations (Boys and Girls Clubs across the region, United Way of Lincoln, Benton, and Linn Counties, Community Services Consortium, Community Outreach Inc., Old Mill Center, Kidco Headstart, CARDV, Family Tree Relief Nursery, CHANCE, OCWCOG), public institutions (Department of Human Services, local city governments, local boards of commissioners), and other coalitions (Corvallis Sustainability Coalition, SURJ).
SUMMARY OF ACTIVITIES

Meaningful Community Engagement

- **Capacity Building Mini-Grant Program**

In 2018, we granted 13 Capacity Building Mini-Grants to local partners in the amount of $2,500; grant were extended through June 2019 and organizations were offered an additional $1,250 in bridge funding until our next RFP is released. These mini-grants were awarded based on the strength of their application, demonstrated need for funds to participate in coalition meetings and activities, and the potential for funds to increase diversity of the coalition and contribute to building the capacity of individuals and organizations to address health equity issues in our community. Partner organizations were expected to participate in the coalition as members who help us to think and act strategically and in a unified and coordinated manner.

In addition to that, many partners who received Capacity Building Mini-Grants also used their time and expertise to support other smaller grassroots organizations. As an example, Casa Latinos provided capacity building support to other groups that serve Latinos in our region, such as Organización de Latinas Unidas (OLU), the Latino Parent Advisory board, local Parent Teacher Organizations, and Padres En Acción/Parents in Action. They did so by attending these group’s meetings as much as possible and also offering Leadership development workshops and. In 2018, topics for their workshops included domestic and sexual violence prevention, self-care and self-esteem strategies, working with families with special needs, dealing with the loss of a loved one, and how to communicate with youth.
Organizational Capacity Building

- **RHEC Spring and Fall Gathering**

We were very fortunate this year to have both RHEC gatherings take place in Lebanon, OR. This meant that we could invite a large number of our coalition members to both events. We were able to support 20 coalition members in attending the Spring Gathering, and 5 to attend the Fall Gathering. Our coalition members report that participation at both events was very meaningful in terms of networking with other RHEC staff and members, as well as OHA staff and other stakeholders; they also indicated that many lessons were learned from the available workshops.

- **Health Equity Summits and Trainings**

In 2018, LBHEA was funded by IHN-CCO to implement a pilot project across Linn, Lincoln, and Benton Counties. This pilot aimed to develop, organize, and implement health equity summits, health equity trainings, and technical assistance for health care and social service providers who directly interact with IHN-CCO members in our region.

As part of this grant, we hosted two Health Equity Summits (one in Newport, OR, and one in Albany, OR) during May of 2018; the summits were facilitated by Lilian Tsai and Tricia Tillman, and were attended by over 85 participants. In Lincoln County, only 48.4% of participants who completed evaluation surveys had received prior equity-related training, while 84% reported that they would like additional training. On a scale of 1-7, participants who completed surveys rated their understanding of health equity on average at 4.1 before the summit, and 5.5 after the summit. In Linn and Benton, 58.8% of participants who completed evaluation surveys had received prior equity-related training, and 85.3% of them would like additional training. On a scale of 1-7, participants rated their understanding of health equity on average at 4.2 before the summit, and 5.7 after the summit. Most participants reported making new connections with potential partners in their region who were interested in working toward improving health equity in policies and services.

In addition, LBHEA collaborated with other local organizations (namely, the Boys and Girls Club, OSU Extension, and Corvallis Public Schools Foundation) to bring the Beyond Diversity – Courageous Conversation back to Corvallis. While the training has been offered here in the past, it has often been limited to employees of the school district and select invitees. This time,
the training was open to cross-sectional organizations serving Corvallis. Over 90 individuals participated in the training, which had an overwhelmingly positive response.

Finally, during November of 2018 and again in February of 2019, we hosted Sonya Littledeer-Evans, who offered five separate trainings on Applying and Internalizing an Equity Lens in our work and organizations. Over 90 participants from across Linn, Benton, and Lincoln Counties attended the trainings. On a scale of 1-5 (where 1 is poor and 5 is excellent, participants rated their understanding of this subject at a 3.3 prior to the training, and at 4.2 after the training. All but one participant indicated that their ability to take action on this matter after the training was average, good, or excellent. Almost 60% of participants indicated that the information learned on the training was valuable for the performance of their jobs, and that they were extremely interested in applying the tools shared during this training in their organizations. All but one of the participants rated their interest and commitment to the topic as “good” or “excellent”.

race conversations coalition training

Our coalition members had expressed interest in improving their skills in having conversations about race and racial issues. In order to achieve that, we contracted the Racial Equity Coalition of Southern Oregon to come and lead a 5 hour workshop using activities from their Race Conversations Toolkit. The workshop was led by Gilda Montenegro-Fix and Toni Lovaglia and took place in October of 2018. Twenty coalition members participated, and the Race Conversations Protocol allowed us to engage in a deep and complex discussion of how race and racism affects each and every one of us. The discussion was spread across 3 tables, one of which was composed of people who preferred to communicate in Spanish, and part of the training was also facilitated in Spanish to be inclusive of their voices. Coalition members reported a desire for additional opportunities like this one so that we can develop a better understanding of each other’s perspective, function as a safe space for complex race conversations, and become better allies in support of underrepresented communities. At the end of the workshop, several members indicated their interest in bringing back the Racial Equity Coalition folks to a “train-the-trainer” event so that members of our community are able to lead race conversations using the toolkit; we hope to be able to do that in the next year.
Casa Latinos Unidos worked to improve access to fresh fruits and vegetables for Latino children and their families. They collaborated with local Farmers’ Markets in Corvallis and Albany, as well as Benton County Health Department and Organizacion de Latinas Unidas, among other organizations, to offer the annual Farmers’ Market tour. These events include culturally-specific entertainment as well as workshops to learn about spending on a budget, learning the difference between organic and non-organic foods, and about becoming a vendor at the Farmers’ Market. In order to make the Farmers’ Market more accessible to the Latino community, Casa Latinos Unidos also provided $10 tokens to the 31 families that participated at the events. Through these events, Casa Latinos Unidos provide an opportunity to engage Latino families with the Farmers’ Markets, thus making these healthy environments more familiar and accessible to these folks; they also allow Latino families to explore the possibility of becoming vendors at the local Farmers’ Markets.
This year, Casa Latinos Unidos also added a short survey component to the tours, with the intent of assessing the ways in which the regular markets and these special events. Surveys were printed in both Spanish and English and each participant could choose which they were most comfortable filling out. Three out of 4 participating families completed the survey. Results indicated that 60% of participants had heard about the Farmers’ Markets tours through friends and family, which reinforces the need for word of mouth communication when trying to do outreach with the local Latino community. Over half of the participants indicated that their main reason for coming to the event was to spend time with friends and family, again indicating the importance of family and community when creating inclusive spaces. Other reasons for joining the event included 1) learning about the farmer’s market, 2) receiving food vouchers, and 3) culturally-appropriate entertainment. At least one participant joined the event to learn about becoming a vendor at the farmer’s market. When asked how likely they were to attend a similar event if hosted in the future and how satisfied they were with the event, the overwhelming majority of participants responded with “very likely to attend again” and “very satisfied with the event.” The final question asked participants about how their experience at the Farmers’ Market could be improved in the future; 1 in 5 respondents indicated that they would like to see more bilingual or Spanish-speaking vendors.

Garfield Elementary Parent Teacher Association (Garfield PTA):

The Latino Parent group resumed meetings at the beginning of the 2018-2019 school year and has been meeting weekly when school is in session. Four trips to explore the outdoors were conducted as a way to encourage and assist Latino families in exploring Oregon, in partnership with Siuslaw National Forest Outreach. This is important because members of the Latino community have expressed a desire to explore natural areas and also a lack of knowledge or capacity to that independently.
Healthy Youth Program and Strengthening Rural Families Partnership

The Healthy Youth Program implemented one session of the Fresh Grown Cooking for Kids after-school cooking class at the Alsea Library’s community room in Rural Benton County. Thirteen youth attended the class, which also reached an additional ten parents and other community members. The curriculum covers nutrition topics to empower youth and adults with knowledge and hands-on experience to help them make healthy food choices and to advocate for healthy foods at school and at home.

This program also implemented one session of the Healthy Sprouts parent-child class at Kings Valley Charter School, which included 7 adults and 14 children. Parent discussion topics included current school wellness policies, along with tools to advocate for, become involved with, and bolster school wellness committees. Results from participant surveys indicate that after taking the Healthy Sprouts class, 100% of respondents feel more prepared to participate in wellness activities at their children’s school. One respondent commented that she now “can ask better questions” related to school wellness activities. Thanks to this grant and the partnership with Strengthening Rural Families, they were also able to leverage funding to host a second Healthy Sprouts class in Philomath, which included 8 families.

OSU Extension of Linn County

OSU Extension of Linn County provides technical support to Familias Activas, South Shore Elementary School Latino parent advocacy group in Albany. Their meetings and activities are always held at accessible locations, conducted during family-friendly times, and use meeting formats that honor cultural differences and needs. Approximately 30 parents regularly participate in the group, and South Shore Elementary School provides childcare, food, and a family liaison. OSU Extension conducts targeted outreach at school and community events to increase access to information and participation in planned activities, engage Latino (especially non-English speaking parents) in planning, organizing, and supporting school level social marketing.
campaigns, and provides bilingual posters and t-shirts to participants. In 2018, they also implemented the “Look for the Good” program (which included 425 youth participants and 70 teachers/staff) and aims to build a positive and inclusive school culture.

OSU Extension also supported capacity building at North Albany Middle School to engage Latino parents. They worked with the new Family liaison to start a middle school Latino parent support group, which includes approximately 20 participants, and provide culturally relevant middle school parent meetings in 4 languages. North Albany Middle School is a partner and provides childcare, a family liaison, translation of materials, and interpretation for meetings.

Finally, over the last year, OSU Extension of Linn County also helped plan, organize, and run a series of four community education events on living as the other in Albany. These events were planned in partnership with the Albany Human Relations Commission and modeled after Living the Black Experience in Corvallis. Sponsored events were as follows:

1) June 22, 2018 – Albany Pride Parade
2) October 14, 2018 – Albany Community Panel: Strength in Diversity
3) November 11, 2018 – Our lived experience: Small Group Discussion
4) December 9, 2018 – Community resources panel: Meet Local Organizations

Policy and System Change

- Participation in local advisory boards and committees:

<table>
<thead>
<tr>
<th>Organization</th>
<th>Committees and Boards</th>
</tr>
</thead>
</table>
| Albany Partnership for Housing and Community Development (APHCD) | • IHNCCO Delivery Systems Transformation Committee  
• IHNCCO Universal Care Coordination Workgroup  
• IHNCCO Social Determinants of Health Workgroup  
• Homeless Engagement and Resource Team (HEART)  
• Linn County Adult Service Team  
• Sharing Hands Pack Snack Committee  
• Creating Housing Coalition  
• Habitat for Humanity Screening Committee |
| Albany InReach Clinic | • Linn County Public Health Advisory Council  
• Linn County Community Health Improvement Plan Committee  
• Community Services Consortium Advisory Council  
• United Way of Linn County Executive Forum  
• Samaritan Health Services Equity and Inclusion Council  
• Boys and Girls Club of Albany Dental Advisory  
• Linn County and Benton County Oral Health Coalitions |
<table>
<thead>
<tr>
<th>Organization</th>
<th>Memberships</th>
</tr>
</thead>
</table>
| Benton Habitat for Humanity | Housing Opportunities Action Council  
Linn-Benton Housing Authority  
Corvallis Sustainability Coalition  
Housing and Community Development Advisory Board |
| Casa Latinos Unidos | Corvallis Thriving Communities 2040 Council  
District Equity Leadership Team Advisory (DELTA) - Corvallis |
| Corvallis Bicycle Collective | Corvallis Sustainability Coalition  
Jobs Addition Neighborhood Association |
| Garfield Elementary Parent Teacher Association | 509J Corvallis School District-Wide Long-Range Facilities, Health, and Wellness Design Advisory Board  
509J Corvallis School District-Wide Wellness Committee  
Garfield School Wellness and Equity Committees  
Corvallis Schools Foundation Parent Network/Leadership Committee |
| Healthy Youth Program – Linus Pauling Institute | Benton County Food Security Work Group  
Corvallis Healthy Schools Initiative  
OSU Children, Youth, and Family Services Committee  
OSU Extension Community Food Systems Working Group  
Oregon Community Food Systems Network - Veggie Rx |
| Jackson Street Youth Services | Benton County Positive Youth Development Coalition  
Linn County Council for Integrated Child and Family Services  
Homeless Engagement and Resource Team (HEART)  
Oregon Alliance for Children’s Programs  
Housing Opportunity Action Council |
| NAACP Corvallis/Albany | District Equity Leadership Team Advisory (DELTA) - Corvallis  
Meets with Corvallis Mayor, Chief of Police, and District Attorney |
| Organización de Latinas Unidas (OLU) | Imagine Corvallis 2040 Action Network Board  
Casa Latinos Unidos Board  
Latino Parent Advisory Board  
Garfield and Lincoln Parent Teacher Associations |
| Strengthening Rural Families | Parenting Success Network  
4-H Advisory Board  
Thriving Community Initiative Council Steering Committee  
Benton County Positive Youth Development Coalition  
Benton County and Regional Oral Health Coalitions  
Linn Benton Lincoln Early Learning Governing Board  
Center for Nonprofit Stewardship  
Youth Mental Health Community Group |
| LBHEA Coordinator | IHNCCO Delivery System Transformation Committee  
IHNCCO Health Equity Workgroup Co-Chair  
Health Equity Committee (of the Oregon Public Health Board)  
Oregon PartnerSHIP – Committee and Workgroup member |
Garfield Elementary Parent Teacher Association (Garfield PTA):

The advocacy work done during the school year by the Garfield PTA resulted on a new menu being introduced throughout the whole Corvallis school district. This new menu includes healthy foods that are also culturally-appropriate and is a novelty to date, therefore the Garfield PTA continues to work its promotion within the school. The Garfield School Wellness Committee surveyed all teachers to get a sense how the policy implementation has gone after one year, and the Garfield PTA was able to allocate funding to support healthy snacks in the classroom and continue providing information to parents and teachers regarding the snack policy. They will continue gathering information from parents and teachers regarding their perceptions of school food quality and cultural relevance, as well as their suggestions for improvement, which will be shared with the School District Food Service.

Example of school menu provided by the Garfield Elementary Parent Teacher Association.
OSU Extension of Linn County

OSU Extension of Linn County provides support to the Familias Activas group, which includes parents from South Shore Elementary School in Albany. South Shore serves a diverse, low-income neighborhood and was a starting point for the Greater Albany School District dual-language immersion program. Familias Activas participated in two initiatives during 2018:

1) Dual Language Immersion Program – as a result of their efforts and advocacy, the Greater Albany Public Schools communicated out to Albany parents the vision of the K-12 Dual Language Immersion Program, which resulted in the expansion of the program to include a second middle school (located in North Albany) and incorporated the middle school program into the academic curriculum rather than an elective program.
2) Bullying Prevention – as a result of their efforts and advocacy, the Greater Albany Public Schools improved their existing policies, adopted curriculum at the elementary education level, and implemented comprehensive training to administration, teachers, and staff.

Home Matters – Benton County

This project was originally funded with support from the Meyer Memorial Trust, and implemented by DevNW in partnership with the Linn Benton Health Equity Alliance. Our coalition’s role was to review messaging models from the Oregon Housing Alliance and to adapt their Strategic Messaging for Housing Training so it could be delivered in our region to train local housing advocates. To date, we have provided the advocacy training to 81 individuals, 16 identified as a person of color, and 31 as low-income.

Inspired by the well-known “Home Matters” campaign we launched a Home Matters – Benton County advocacy network to connect those trained in advocacy messaging to opportunities to share their message on important housing issues at hearings, council meeting, in letters to public officials and to the newspaper. Testimony was provided regarding a variety of issues, including but not limited to housing policy. Members of this network helped support increasing the document recording fee as well as Measure 102, both of which will help grow the affordable housing stock in the state. Advocates also engaged in the campaign for the urban renewal district that will be implemented in South Corvallis. They advocated for the adoption of a construction excise tax in Corvallis and asked that the revenue be dedicated to affordable housing; a part of the revenue will be used to hire an “Affordable Housing Planner” that will work to ensure affordable housing policies are implemented in the city of Corvallis. Advocates also encouraged the city council to amend the Land Development Code to make annexations and accessory dwelling units more streamlined. Finally, we also used key strategic messaging skills to provide testimony that was essential to prevent the city of Corvallis from implementing an Enhanced Law Enforcement Area in its downtown, which would place a burden on folks of color and people experiencing homelessness.

ACHIEVEMENTS & CHALLENGES
Achievements

- **Linn Benton Health Equity Alliance Grants**

The achievements described in the previous section are the result of our strong collaborative partnerships with local organizations and key stakeholders. Some of these relationships have existed since the coalition started over a decade ago and some are emerging relationships that started in the recent past. All of them, however, are characterized by mutual respect, shared vision and goals, and joint learning. None of our work would be possible without contributions from all of the organizations that comprise the Linn Benton Health Equity Alliance.

One of the most important ways in which we develop and maintain these important relationships is by spreading coalition resources across the organizations that comprise our coalition. We do so by awarding grants in a process that uses an equity lens. Historically, we have granted two types of grants: **Policy and System Change Grants** and **Capacity Building Mini-Grants**.

Policy and System Change Grants range from $2,500 - $15,000 and are granted based on the strength of the application and on the degree to which the application addresses identified coalition priorities, policy/systems opportunities, and engagement of underrepresented communities (particularly communities of color). The purpose of these projects is to address health equity in a meaningful way at the policy and systems level. In 2018, grants were awarded to Casa Latinos Unidos, the Garfield Elementary Parent Teacher Association, OSU Extension of Linn County, Strengthening Rural Families, and Healthy Youth Program. Collaboration on Policy and System Change Grants is encouraged where it creates efficiencies and effectiveness. As an example, Strengthening Rural Families and Healthy Youth Program have had an ongoing collaboration on their grants for a few years now with lots of success. Policy and System Change Grants help drive the changes we want to see in our communities, and are a key way through which we achieve our collective goals as a coalition.

Capacity Building Mini-Grants are granted based on the strength of the application, demonstrated need for funds to participate in coalition meetings and activities, and the potential for funds to increase diversity of the coalition and contribute to building the capacity of individuals and organizations to address health equity issues in our community. In 2018, 13 mini-grants were given in the amount of up to $3750 each. The purpose of these mini-grants is to help LBHEA to further our mission, but also to ensure that grassroots organizations (which are often operating with very limited resources) are able to be at the table, to contribute their insights about health equity needs, and to take advantage of opportunities to build their capacity. These grants are important because historically, people and communities of color have been asked to participate, to offer their insight, to share their knowledge, and to educate white communities and institutions – but were hardly ever compensate for that effort. We believe that no grassroots or volunteer organization serving underrepresented communities should be made to be at our table at their own expense and depleting their already limited resources.
Though these grants are awarded through a competitive Request for Proposals, we try to make the process as open and inviting as possible. To many small organizations, this is their first experience in grant writing. We offer technical assistance and support in both applying for funds, meeting the deliverables, and reporting requirements, and we also assist partner organizations in seeking external funds as their capacity outgrows our funding mechanism. One example of success in this area comes from the local chapter of the National Association for the Advancement of Colored People. The Corvallis/Albany NAACP first engaged with our coalition as a member as we partnered in planning and implementing the three-part Living the Black Experience series back in 2016. This led the organization to apply for their first Capacity Building Mini-Grant in 2017, and another one in 2018. The Corvallis/Albany NAACP is now ready to pursue a Policy and System Change Grant with our coalition, but has also sought funds from other sources – including a Sponsorship from the Office of Equity and Inclusion to support their annual Juneteenth Celebration and a grant from the Benton County Foundation to support a year-long program called Supporting K-12 Black Children and Families. Prior to engaging with our coalition, our local NAACP chapter was self-funded; their incredible contributions to our community came from the pockets and volunteer labor of their leaders and members. Now, 3 years later, they are leveraging their expertise and knowledge to pursue funds that have always been available to them in theory, but were effectively out of their reach due to low capacity. They are better able to serve our community without further depleting the personal resources of their members and leaders, many of whom are people of color.

Recruitment and retention of folks of color and organizations that serve them

Our coalition has always been open to people of color and always had the goal of serving people of color. However, that was not always reflected on our membership and our programs. In recent years, we have been more intentional about becoming a space where folks of color feel safe, seen, heard, and included. We have not always hit the mark, but we are working to improve continuously.

One example of a way in which we have succeeded at recruiting folks of color to the table is our leadership membership. Currently, 8 out of 11 Leadership Team members identify as people of color (including folks who identify as Black, Hispanic/Latino, primarily Spanish speaker, immigrant, and their intersections). This means that the folks making key executive decisions for our coalition have a personal insight into the needs of communities of color, and not just a professional or organizational insight.

Over the last year, we have implemented many strategies to boost our recruitment and retention of folks of color in our coalition. One key strategy was to be very intentional about our use of language. We decided that our regular meetings would be hosted English in one month and Spanish in the next, and always offer interpretation to the other language. This decision was not always easy to follow through, as in the beginning we did have a majority of folks who spoke English and/or were bilingual, which means that meetings were more streamlined when they were hosted in English. However, over time, we have noticed that this strategy provided two key benefits to our coalition. To the Spanish speakers, it created an environment that is welcoming and they can freely and easily communicate, not just among themselves but with everyone else. This means that these folks are more likely to come and keep coming.
to our meetings and events. To the English speakers, it offered insight into the struggles faced when one cannot communicate on the dominant language or has to constantly rely on an interpreter. It offers a personal insight into a health equity issue, which leads to a personal stake into ensuring language access in their professional lives, in their organizations, and in other spheres where they have power.

Finally, our meeting structure has changed to be more inclusive of non-White cultures and to more closely reflect their expectations of what a social gathering should be. We decided that all of our regular meetings would include food and involve socializing at the very beginning, for at least 20 minutes; this helps create community, builds trust, and also allows for folks to be a little late to the meeting when needed. While we do usually have an “agenda”, we don’t always follow it very closely. We find that the most interesting discussions in our coalition are unplanned and sometimes unanticipated, and we want to hold space so that they can happen. We also strive to keep the meetings informal, welcoming, and pleasant to folks who may not be regularly participating at other formal organizational meetings.

Challenges

Over the last 10 years, our collective work in Corvallis, Albany, Lebanon, Sweet Home, Philomath, Monroe, and the surrounding areas has been facilitated through the deep connections between these communities and the organizations that form our coalition. Not only are these communities geographically close, but they also share a large proportion of the population who commutes between these towns and rural areas for the purposes of working or studying. This connection is reflected by the large number of organizations that serve both Linn and Benton counties, including DevNW, Oregon State University Extension, the InterCommunity Health Network Coordinated Care Organization (IHN-CCO), Samaritan Health Services, Linn Benton Community College, the Early Learning Hub, etc. One of the strengths of our coalition is the fact that we are in constant contact with our members, we have each other on “speed-dial”, and we can mobilize them quickly and effectively when opportunities arise to promote health equity policy and systems change.

That being said, we have also faced challenges while trying to work within these two counties. The institutions that serve primarily Linn or Benton counties often have different values and priorities; as an example, while there is capacity and readiness on the part of Benton County Health Department or the City of Corvallis to partner with our organization in promoting health equity policy and systems change, we find a little more reluctance on the part of Linn County leaders and policy makers. We have been working hard at developing those relationships, increasing education and awareness at both the population and the policy-maker levels, and securing buy-in from those institutions and communities while also recognizing that they need time to improve their capacity, achieve readiness, and embrace a more complex and extensive definition of health equity. The cultural differences between Benton and Linn counties mean that we cannot employ one-size-fits-all strategies; rather, we must tailor our goals, our messaging strategies, and our policy goals to work in the context of each of these counties separately – taking into account the specific needs of their population, the kinds of capacity building needed by their policy-makers, and the types of policies that can improve health equity in their local contexts.
There are many strategies that we have used, as a coalition, to overcome these challenges. As an example, we strive to host approximately half of our events, meetings, and trainings in each of our target counties, to facilitate participation and establish our presence. We also ensure that we have representation from organizations that serve Benton-only, Linn-only, and Linn and Benton counties in our leadership. Staff members from the LBHEA also participate in relevant boards and committees in these counties, including IHN-CO workgroups, Community Health Assessment/Community Health Improvement Plan committees, and Regional Transportation Committees. Our coalition members in both counties are able to provide us with the lay of the land in their respective spheres of influence, to connect us to the necessary decision makers, and to include us in the initiatives that best fit our strategic goals. Therefore, we believe that the work done in the past and planned for our future will only serve to strengthen the bonds between Linn and Benton counties, and to help each of them set and achieve the health equity policy and systems change that can most benefit their diverse populations.

POLICY & SYSTEM CHANGE RECOMMENDATIONS

Our coalition’s work over the past year and half has yielded the following suggestions for health equity across our region and the state of Oregon:

- It is key to include communities of color in all processes and efforts geared toward policy, system, and environmental changes aimed at improving health equity. In order to do so, the state should consider the following strategies:
  - Meet people where they are at – in the already existing and well-established community meetings, gatherings, and safe spaces;
  - Invest in cultural and linguistic competency in all community engagement efforts, and implementing these competencies throughout the whole process;
  - Work to establish a child- and family-friendly environment so that families of color and other underrepresented groups feel welcome and able to participate;
  - Establish plain language as the standard for working with communities, and ensuring that all communications (written and spoken) are just as accessible to community folk as they are to professionals.

- It is key to reward community expertise and lived experience in the same ways that we have historically rewarded academic expertise and professional experience. In order to do so, the state should consider the following strategies:
  - Allow for community expertise and lived experience to be weighted along with academic expertise and professional experience when hiring staff, recruiting advisory board members, and selecting contractors;
  - Allocate funds to pay community members and community groups for their time and effort spent collecting data, advising the state, and sharing their knowledge;
  - Designate funds to cover the costs of participation at local capacity building trainings and other leadership opportunities to community members that have been asked to serve the state, in a similar way in which professionals get their training and professional development expenses covered by their employers.