
Snapshot of Adolescent Health in Oregon

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PUBLIC HEALTH DIVISION

Adolescent and School Health Unit

- Our **Vision:** Oregon is the very best place for all youth to learn, grow, and thrive.
- Our **Mission:** To support the health of all youth in Oregon through evidence-based and data driven policies, practices, and programs.



Our Goals

- Improve access to quality health services and health education for all youth in Oregon.
- Provide partners with opportunities to build capacity, learn new information, and improve practice in order to better meet the needs of all youth in Oregon.
- Illuminate the strengths and needs of all youth in Oregon through collection, analysis and dissemination of accurate and timely data.

Adolescent and School Health Programs

- Adolescent Health Policy and Assessment
- School-Based Health Centers
- School Nursing
- Youth Sexual Health



Goals of the Snapshot

- Generate a set of health metrics that is meaningful to youth and stakeholders who serve youth
- Identify health disparities in adolescent subpopulations and develop strategies to promote equity in access and delivery of clinical preventive services
- Develop socioeconomic and policy context for health of adolescents
 - Identify social determinants
 - Track major policy changes

Goals of the Snapshot cont.

- Build on the goals and targets of the State Health Improvement Plan for the adolescent population
 - Prevent and reduce tobacco use
 - Slow the increase of obesity
 - Improve oral health
 - Reduce harms associated with alcohol and substance use
 - Prevent deaths from suicide
 - Improve immunization rates
 - Protect the population from communicable diseases
 - Promote youth sexual health
 - Ensure access to youth friendly clinical preventive services

Oregon Healthy Teens Survey

- Representative sample of Oregon's 8th and 11th graders
- Survey takes place biennially on the odd years (most recent 2017)
- ~27,000 students, 232 schools surveyed
- Provides state and county level data
- Questions range: general, oral, and mental health topics, resilience, behavior, and perceptions of peer and parental attitudes.

For more on the Survey:

<https://public.health.oregon.gov/BirthDeathCertificates/Surveys/OregonHealthyTeens/Pages/index.aspx>

Oregon School Health Profiles Survey

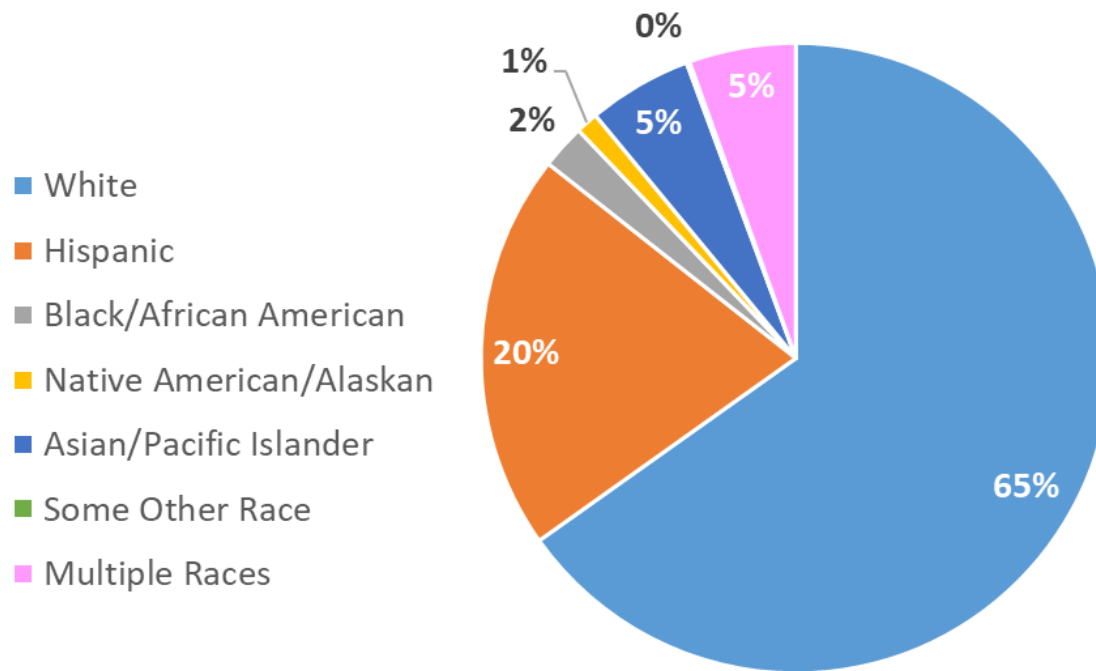
- National survey: representative sample of Oregon's Middle and High Schools
- Survey takes place biennially on the even years (most recent 2016)
- ~300 Lead Health Educators, ~300 Principals/School Administrators
- Provides state level data
- Questions on school health policy and curriculum

For more on the Survey:

- <https://www.cdc.gov/healthyyouth/data/profiles/index.htm>

Socioeconomic Context of Oregon Adolescents (Race/Ethnicity)

	Population
Adolescents (Aged 10-24)	763,431



Source: 2016 American Community Survey 1-Year PUMS data

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Adolescent and School Health

Socioeconomic Context of Oregon Adolescents (Economic Circumstance)

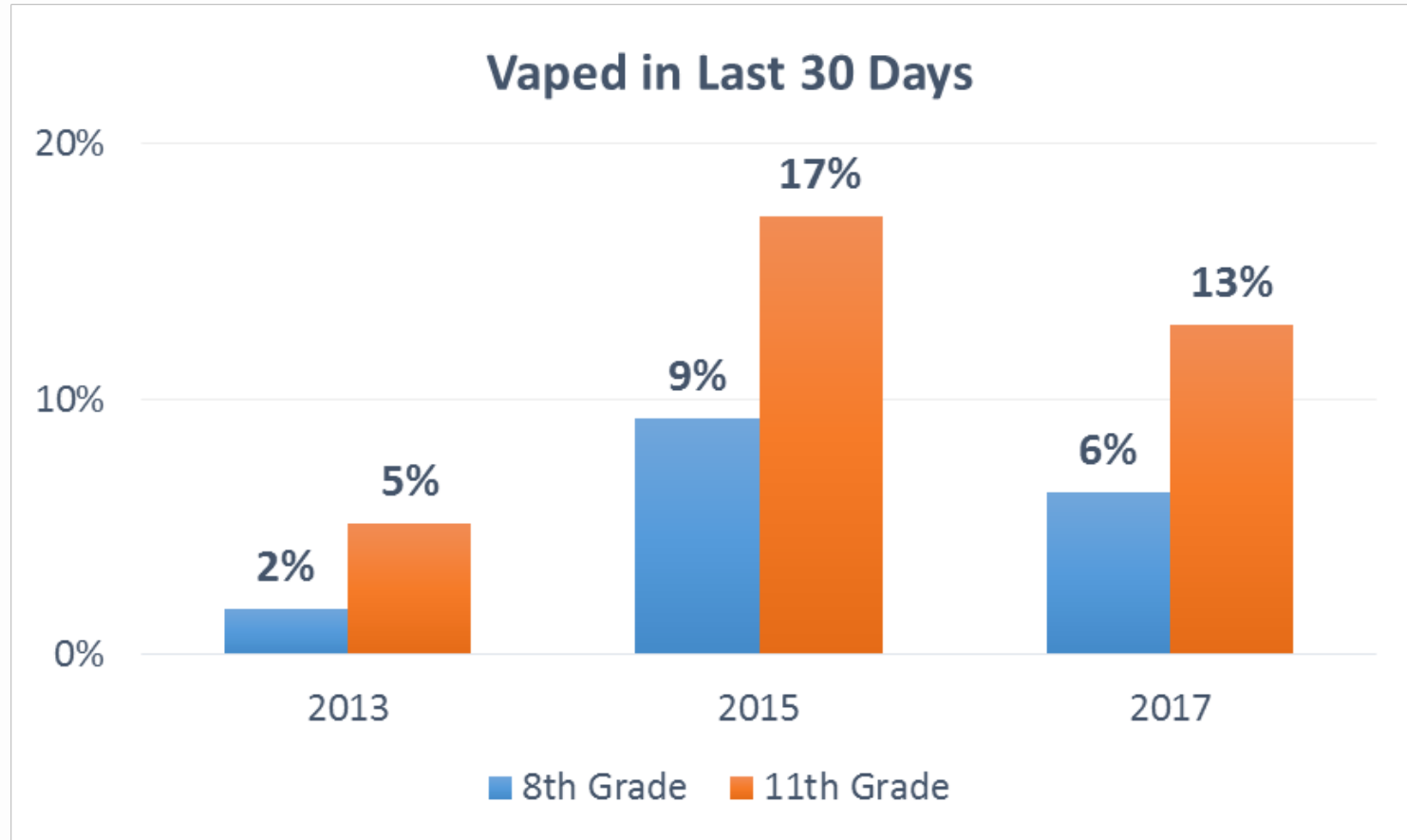
2016-2017	Oregon Youth	Oregon	United States
Health Coverage	97% (<18)	94%	91%
Poverty Rate	21%	13%	14%
Rent Burden (>30% income)	52%	48%	46%
Extreme Rent Burden (>50% income)	27%	24%	23%

Source: 2016 American Community Survey 1-Year PUMS data and American Fact Finder tables. OR youth Insurance Statistics from 2017 Oregon Health Insurance Survey. Coverage rate for OR youth is rate for age 18 & under. Rent burden estimates are based on household units – Oregon Youth number is household units which include an adolescent.

Adolescent Tobacco Use

- SHIP Priority Targets
 - Cigarette smoking prevalence (in the last 30 days)
 - Other Tobacco Use (vaping, cigars, pipe tobacco, chew, smokeless, hookah)
- Additional Measures
 - Vaping/e-cigarettes prevalence
 - Smoking Cessation Attempts

Adolescent Tobacco Use – Vaping



Source: 2013, 2015, & 2017 Oregon Healthy Teens Survey

Adolescent Tobacco Use

Policy and Program Initiatives:

- CCO metric, cessation benefits, and strategies document
- Tobacco Prevention and Education Program Funding
- **HB 2546 (2015):** Defines Inhalant Delivery System (vaporizers and e-cigs), prohibits sales to kids, includes inhalants in Oregon Indoor Clean Air Act, and prohibits use or possession in schools

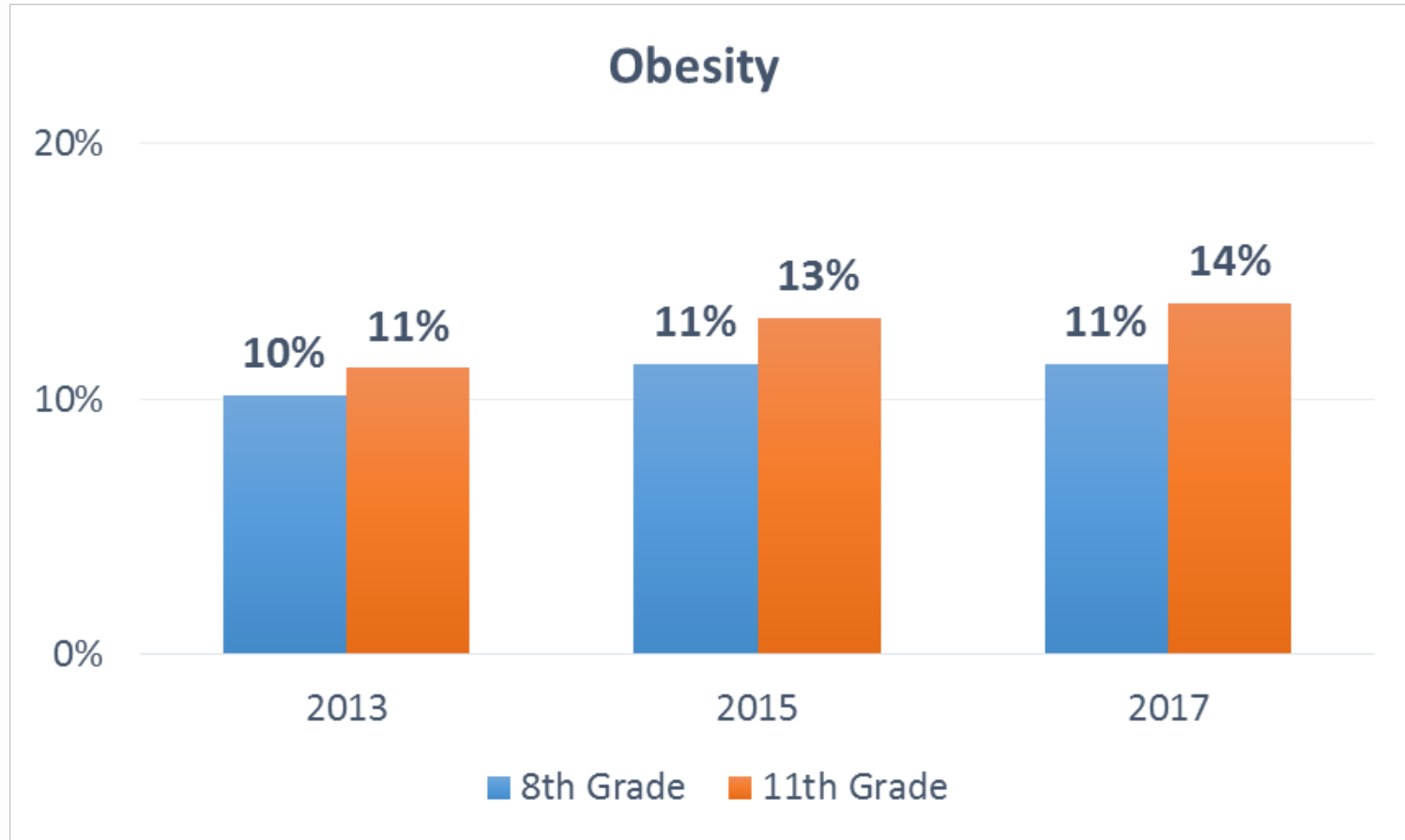
On the Horizon:

- **SB 754 (2017):** Tobacco 21 – illegal to sell inhalant delivery systems or tobacco products to persons under the age of 21

Adolescent Obesity, Physical Activity, Food Security

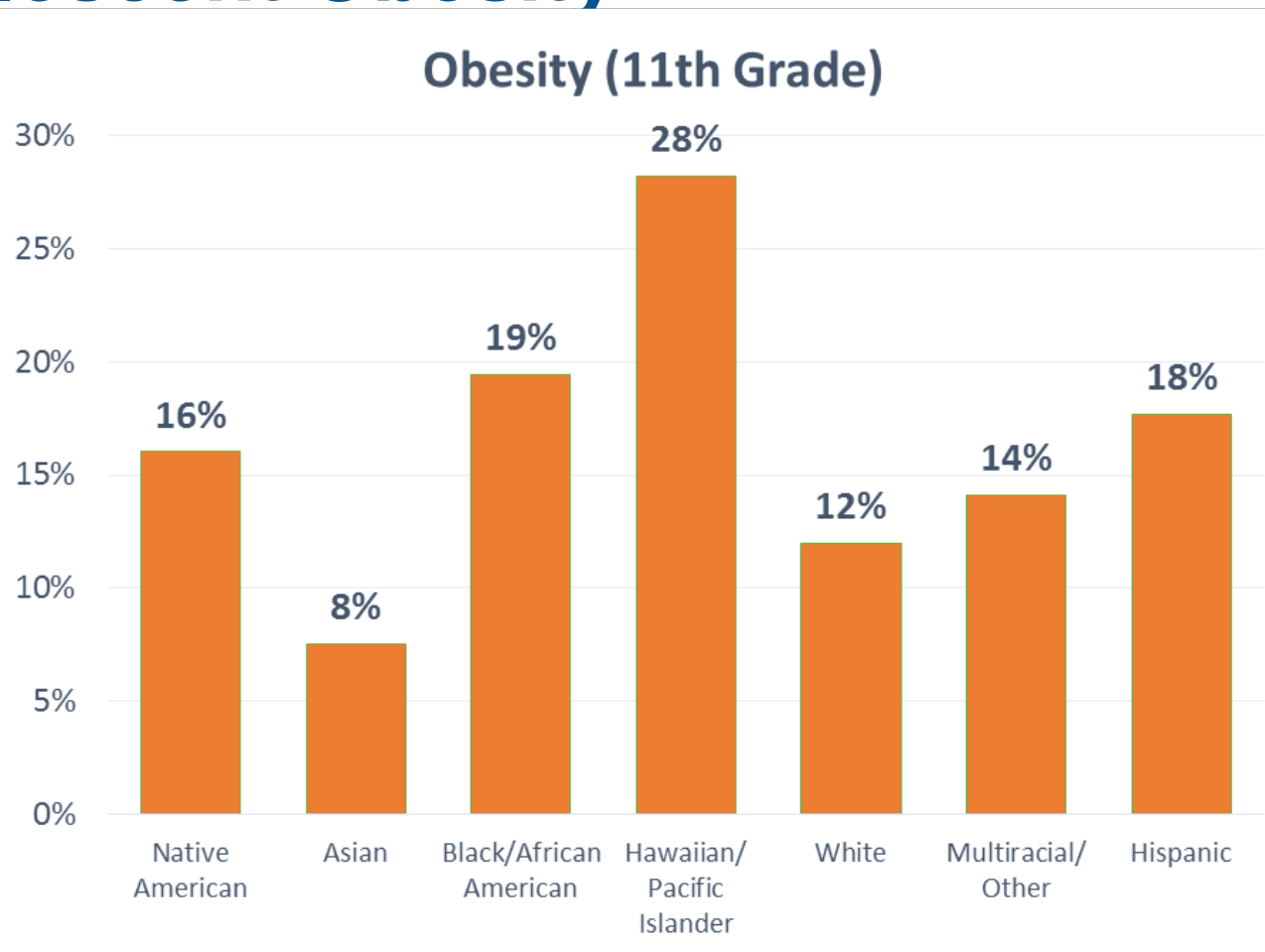
- SHIP Priority Targets
 - Obesity
- Additional Measures
 - Schools/Grades Required PE Courses
 - Physical Activity for 60 min for 5 out of the last 7 days
 - Food Security among 8th and 11th graders

Adolescent Obesity



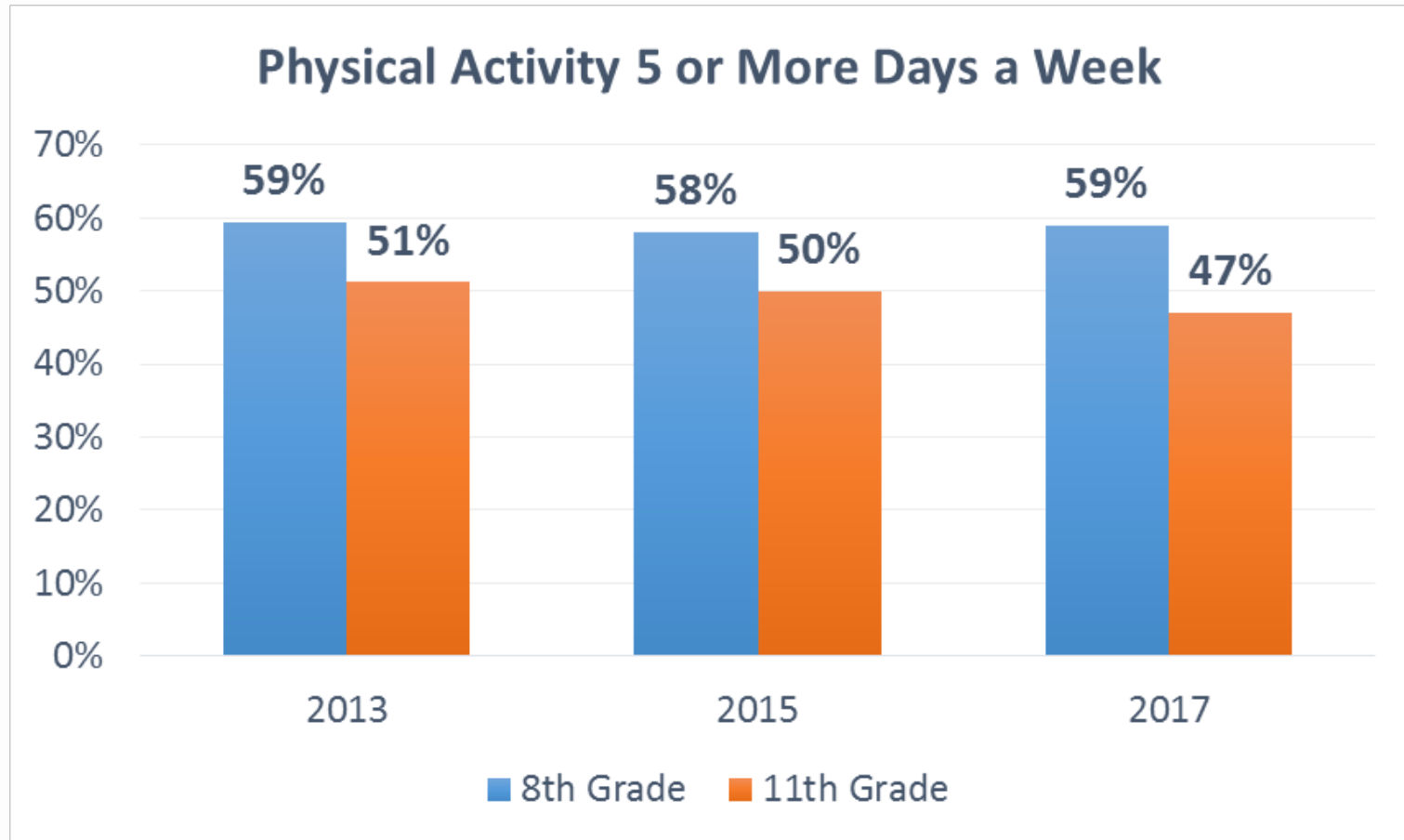
Source: 2013, 2015, & 2017 Oregon Healthy Teens Survey

Adolescent Obesity



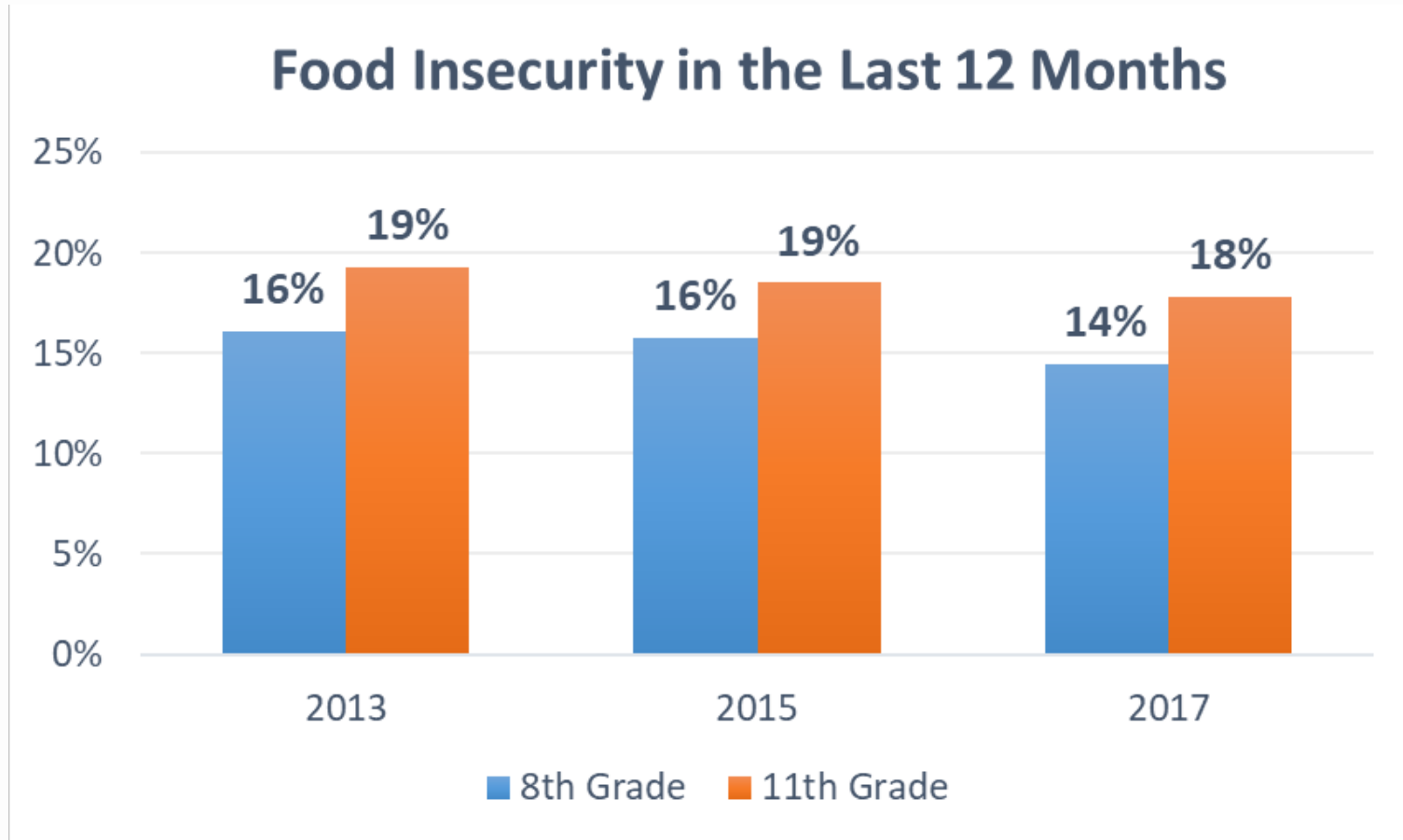
Source: 2017 Oregon Healthy Teens Survey

Adolescent Physical Activity



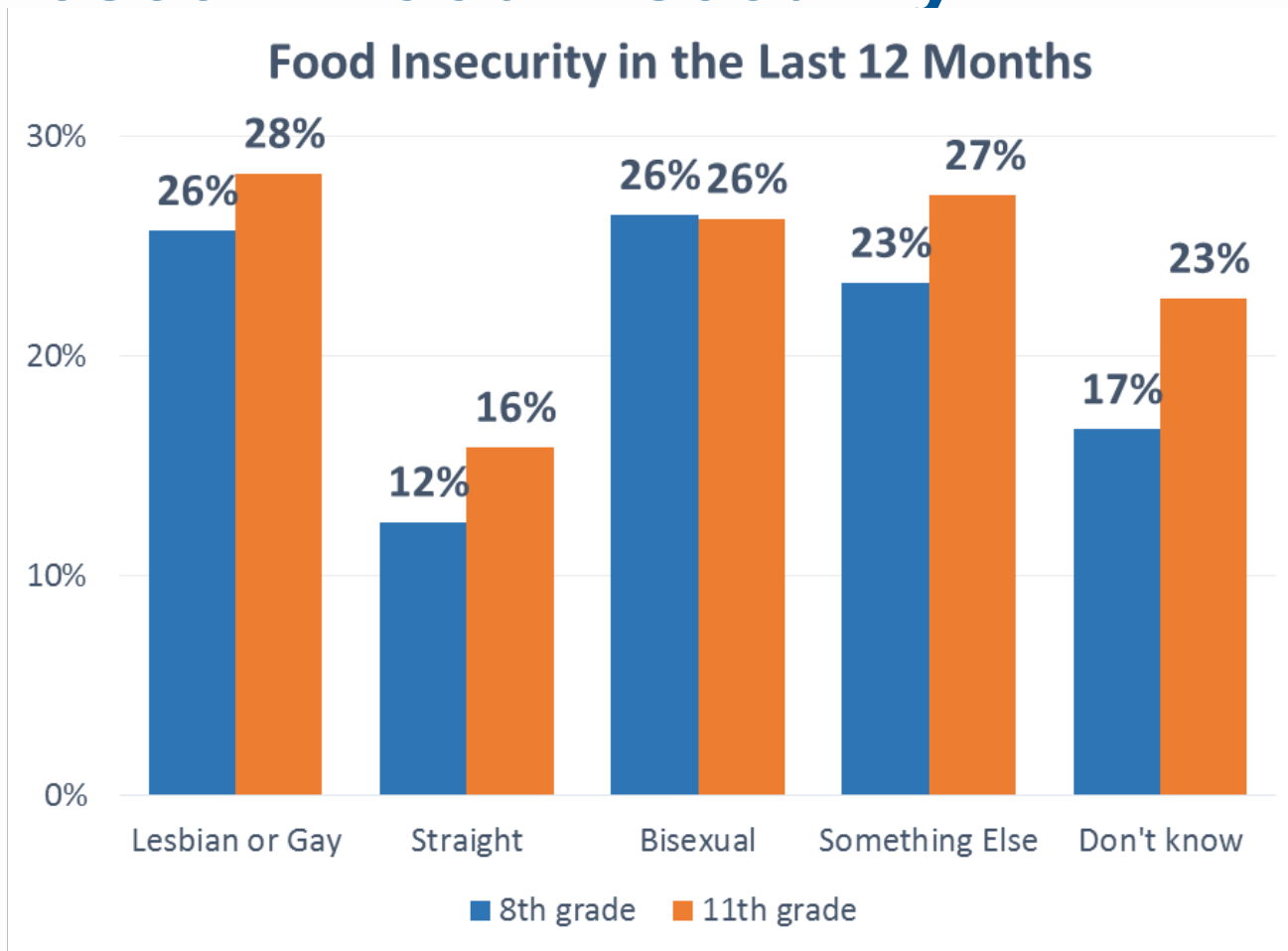
Source: 2013, 2015, & 2017 Oregon Healthy Teens Survey

Adolescent Food Insecurity



Source: 2013, 2015, & 2017 Oregon Healthy Teens Survey

Adolescent Food Insecurity



Source: 2017 Oregon Healthy Teens Survey

Adolescent Obesity, Physical Activity, Food Security

Policy and Program Initiatives:

• Nutrition

- **HB 2800 (2011):** reimburse for farm-to-school and school gardening program
- **SB 480 (2011):** grants to encourage participation in USDA Afterschool Meals and Snack Program
- **SB 4090 (2014):** grants to encourage participation in national summer meal programs
- **Screen and Intervene**

• Physical Activity

- **ORS 329.496:** requires minimum PE minutes

• Nutrition

- **HB 2545:** free lunch to reduced price eligible
- **HB 2846:** breakfast as instructional time

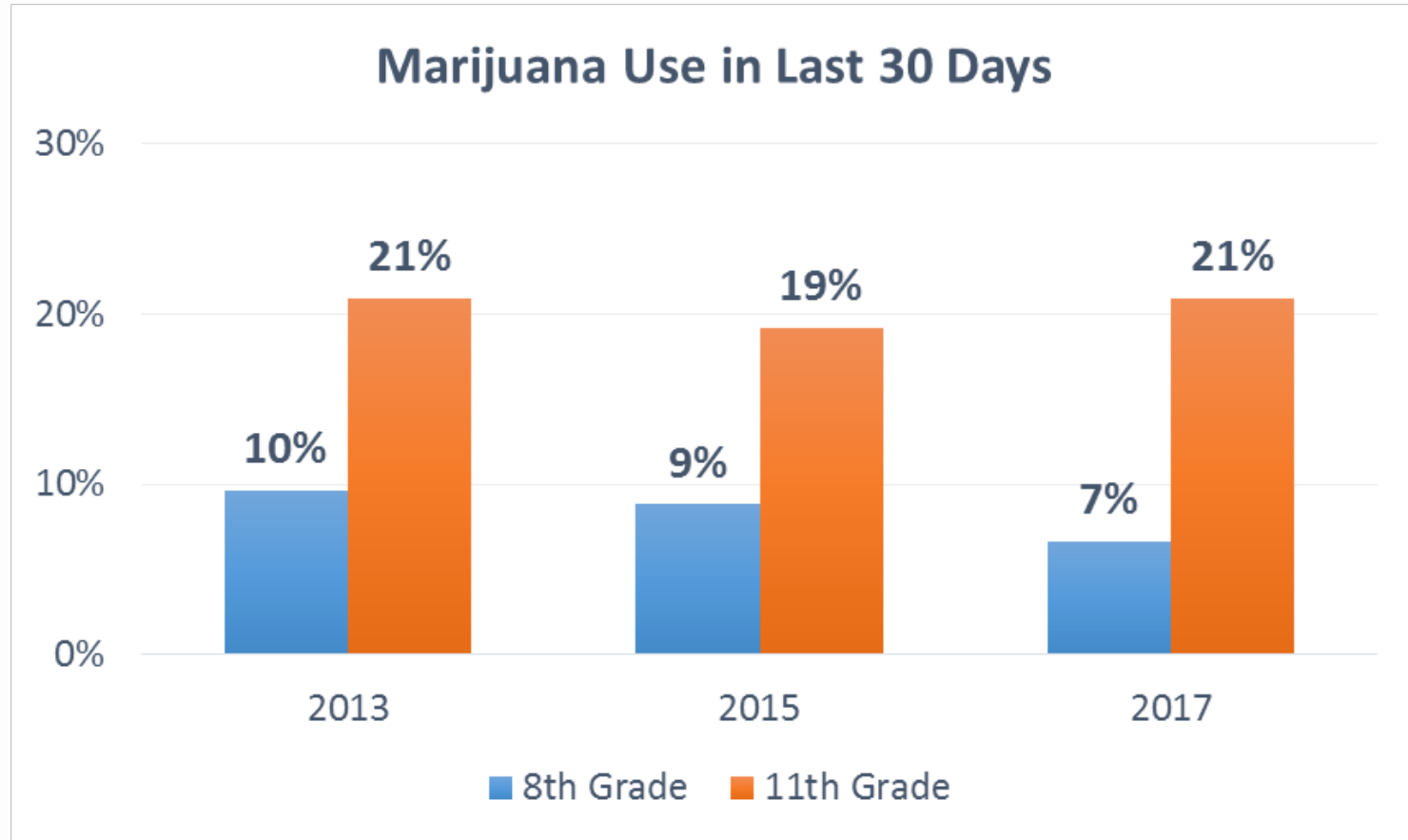
On the Horizon (2017):

- **SB 4:** prorates minute requirements, budget restraints, phase in to 2022-23
- **HB 3454:** Prohibits School Meal Withholding

Adolescent Substance Use

- SHIP Priority Targets
 - No Measure
- Additional Measures
 - Binge Drinking (5 or more drinks within a couple of hours)
 - Marijuana Use
 - Prescription Drugs

Adolescent Substance Use



Source: 2013, 2015, & 2017 Oregon Healthy Teens Survey



Adolescent Substance Use

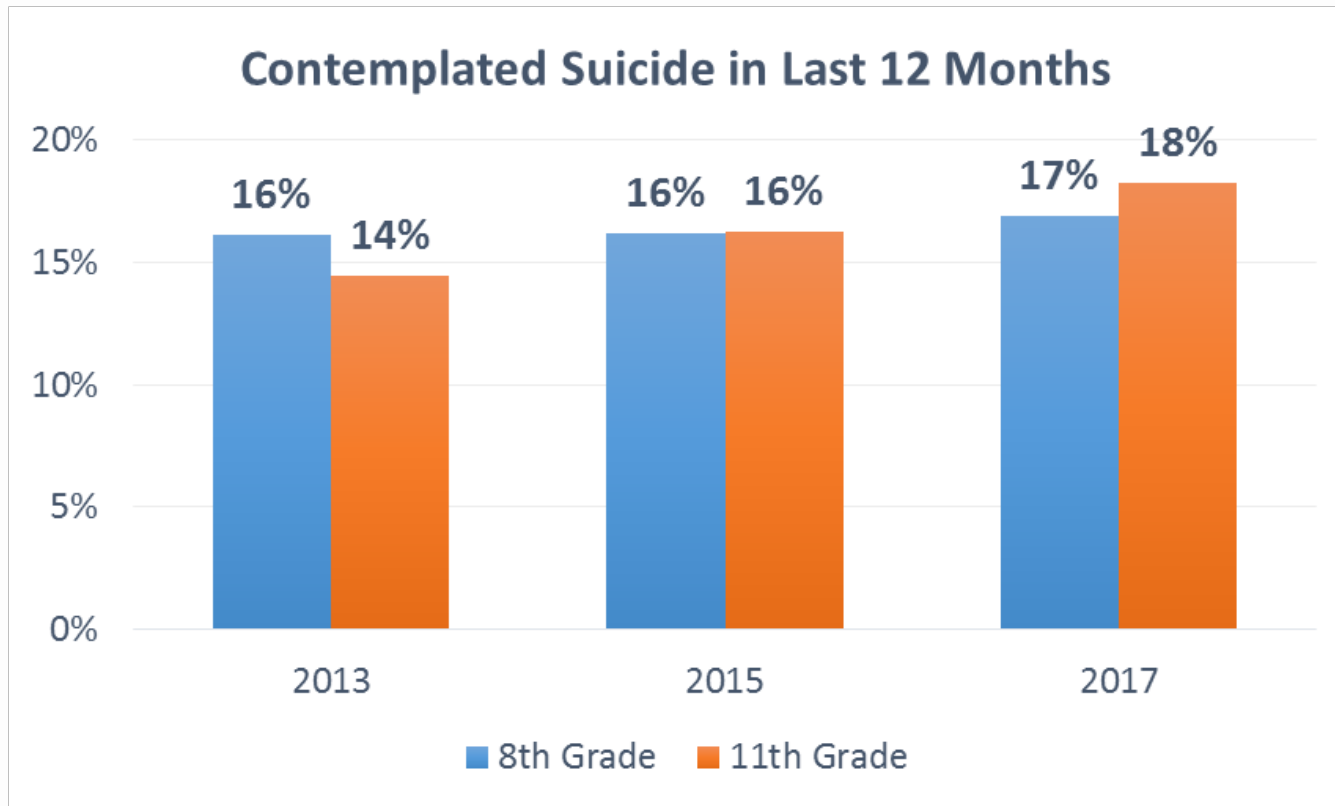
Policy and Program Initiatives:

- **SB 470 (2013):** Adds to information collected for Prescription Drug Monitoring Program
- **Schedule II Classification of hydrocodone (2014)**
- **mORe Campaign**
- **Measure 91 and SB 460:** As a result of legalization, prohibits purchase of marijuana by person under age 21
- **Retail Marijuana Scientific Advisory Committee**
- **Marijuana Report 2016**
- **HB 4014 (2016):** Youth Marijuana-Use Prevention Pilot
 - **Stay True To You Campaign**

Adolescent Suicide and Mental Health

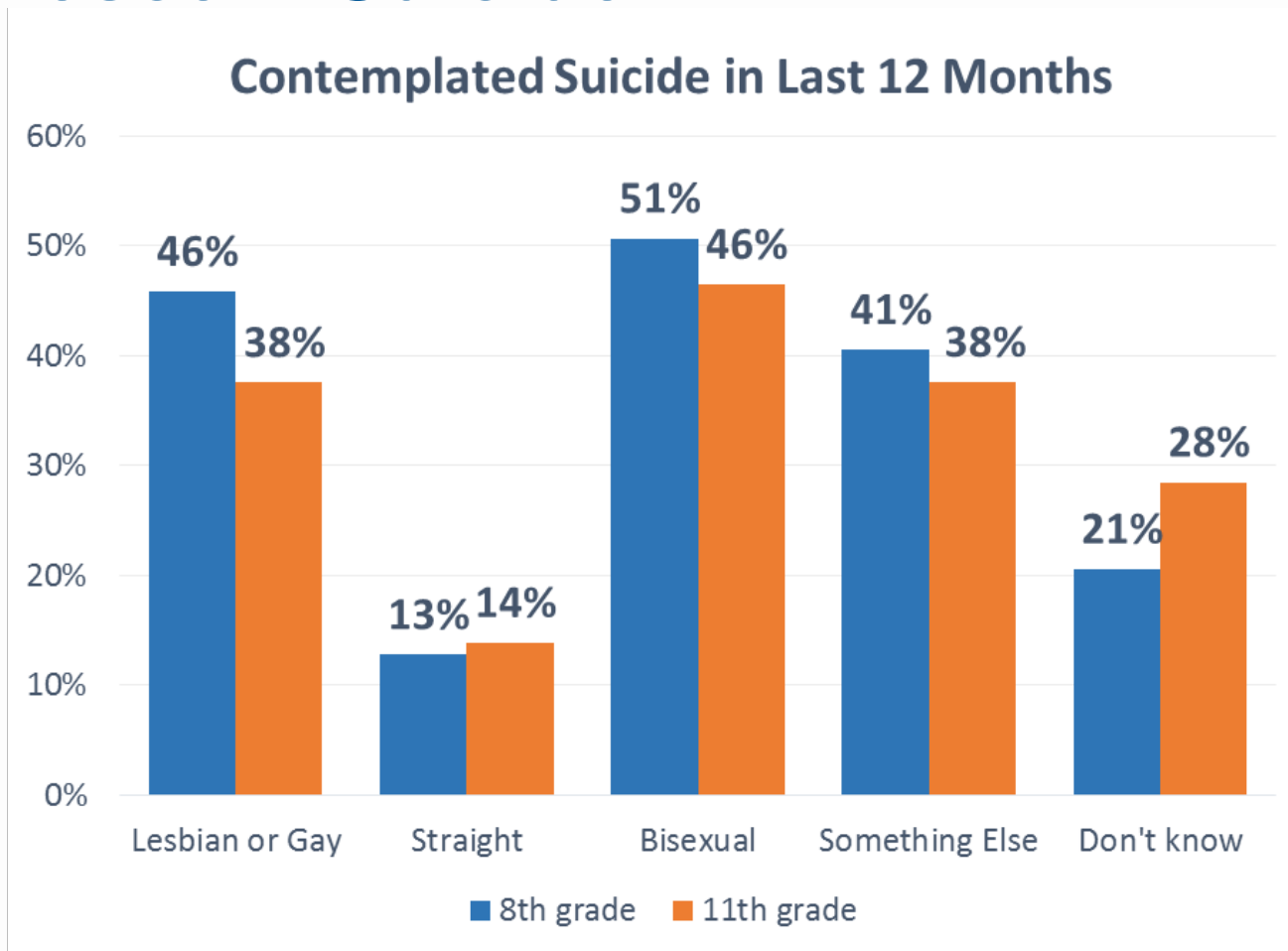
- SHIP Priority Targets
 - Suicide Attempts (8th grade)
- Additional Measures
 - Suicide Attempts (11th grade)
 - Serious Consideration of Suicide
 - Depression
 - Positive Youth Development

Adolescent Suicide



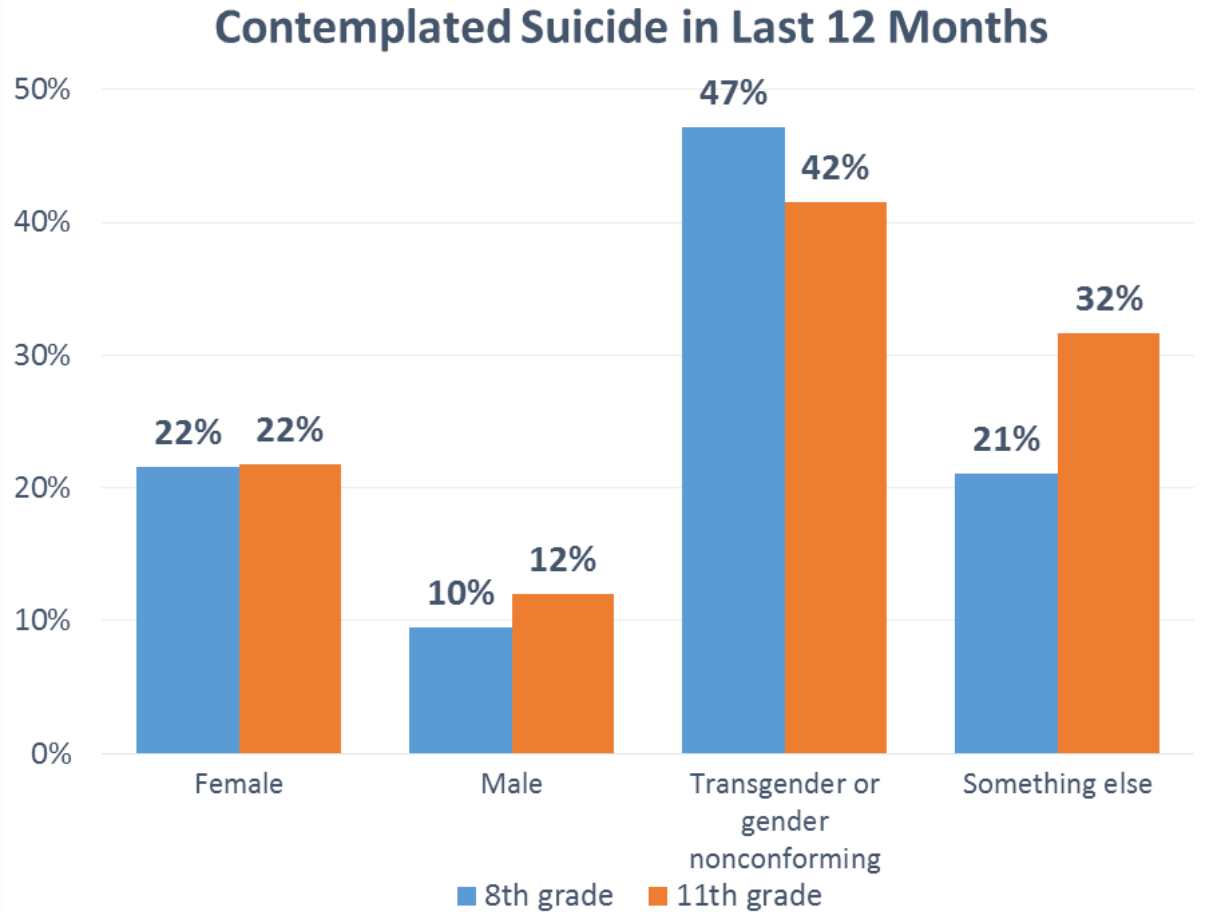
Source: 2013, 2015, 2017 Oregon Healthy Teens Survey

Adolescent Suicide



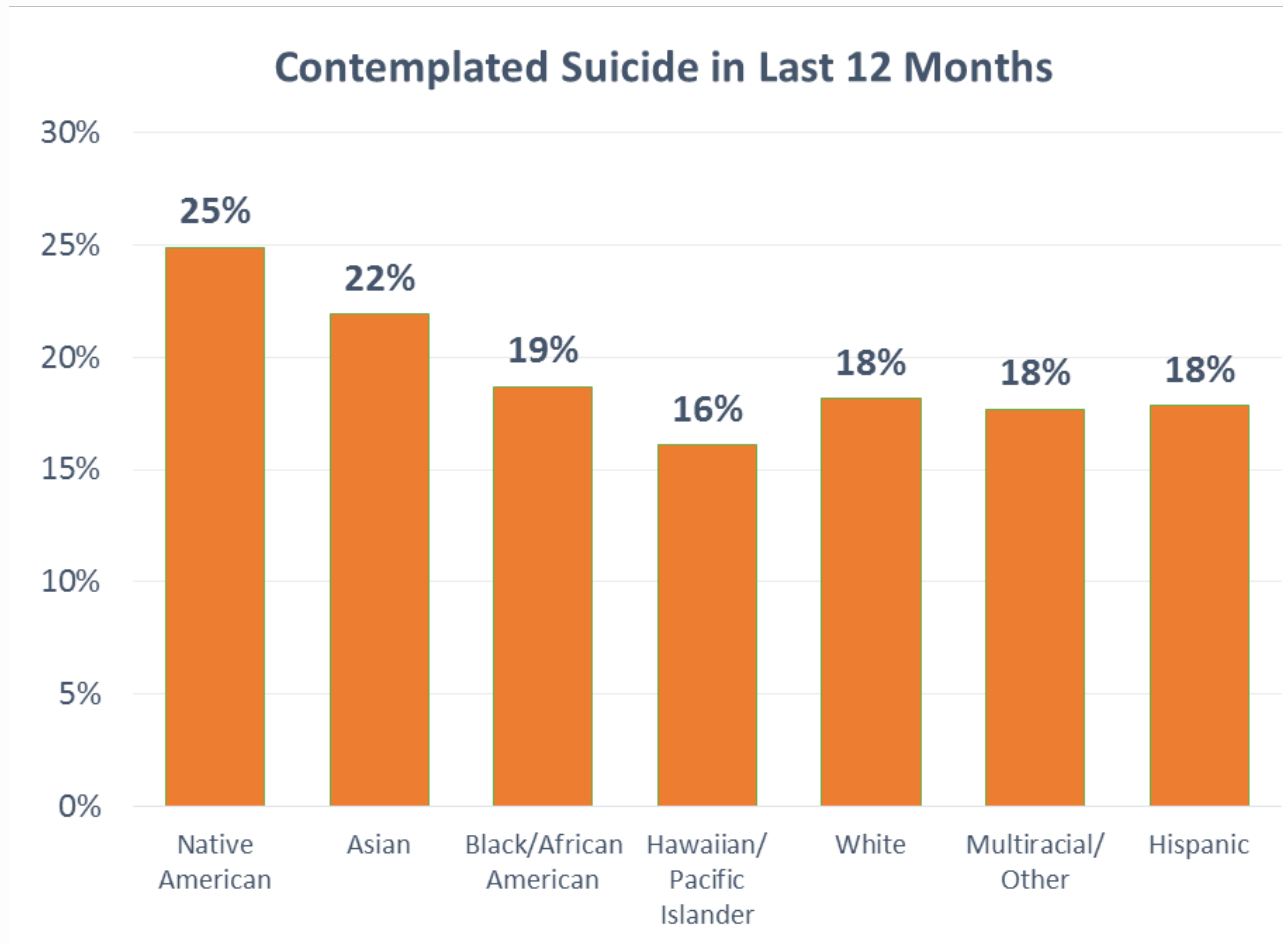
Source: 2017 Oregon Healthy Teens Survey

Adolescent Suicide



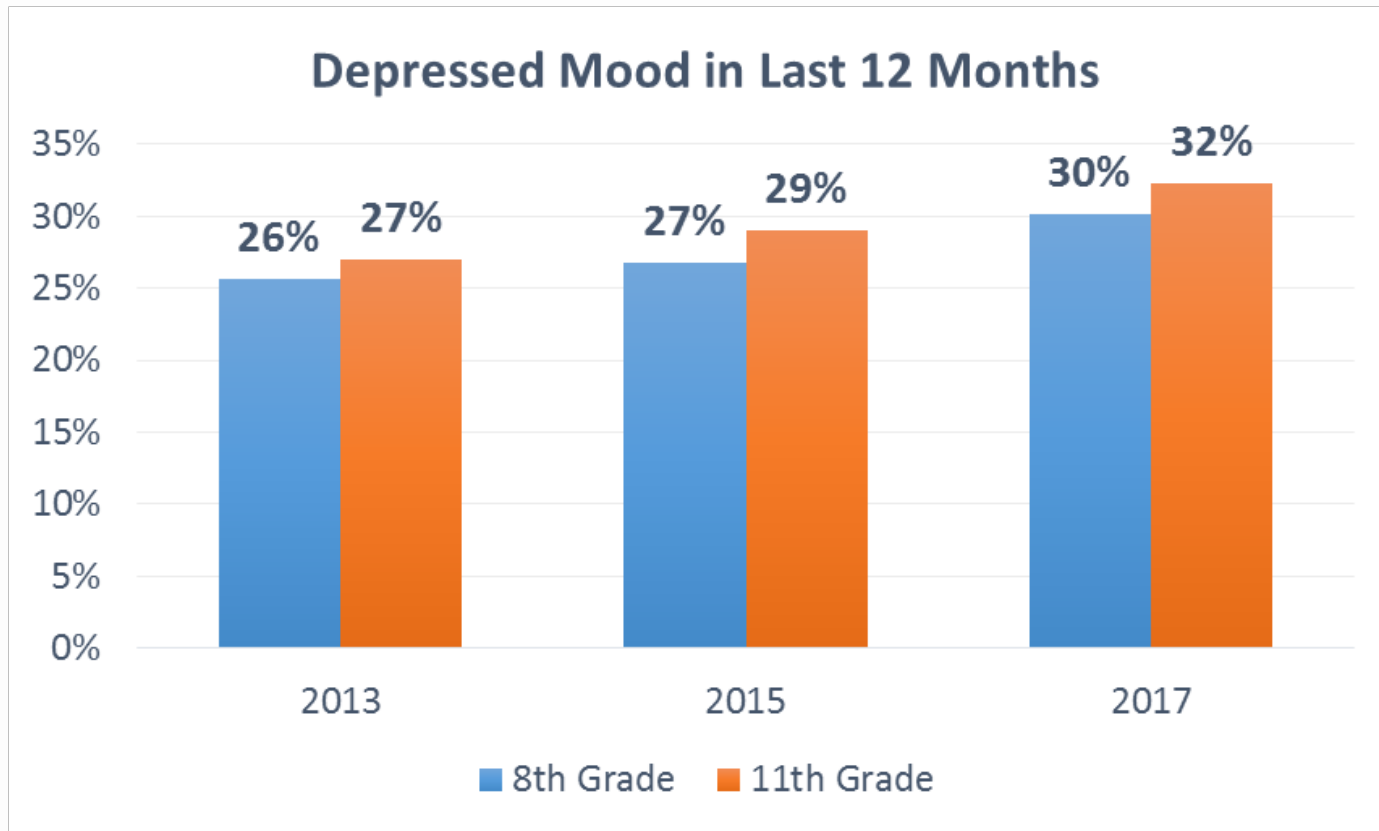
Source: 2017 Oregon Healthy Teens Survey

Adolescent Suicide



Source: 2017 Oregon Healthy Teens Survey (11th grade)

Adolescent Mental Health



Source: 2013, 2015, 2017 Oregon Healthy Teens Survey

Positive Youth Development Benchmark

- Uses Oregon Healthy Teens questions to measure strengths and attributes that can buffer the impact of stress and obstacles young people face.
- Supporting PYD often requires a shift from viewing adolescents as trouble makers who exhibit risky behavior to seeing youth as positive change agents, willing and able to contribute to society.
- The PYD benchmark that is reported is calculated based on responses to six questions in the survey related to well-being and social connectedness

Positive Youth Development Benchmark: Questions Incorporated in Benchmark

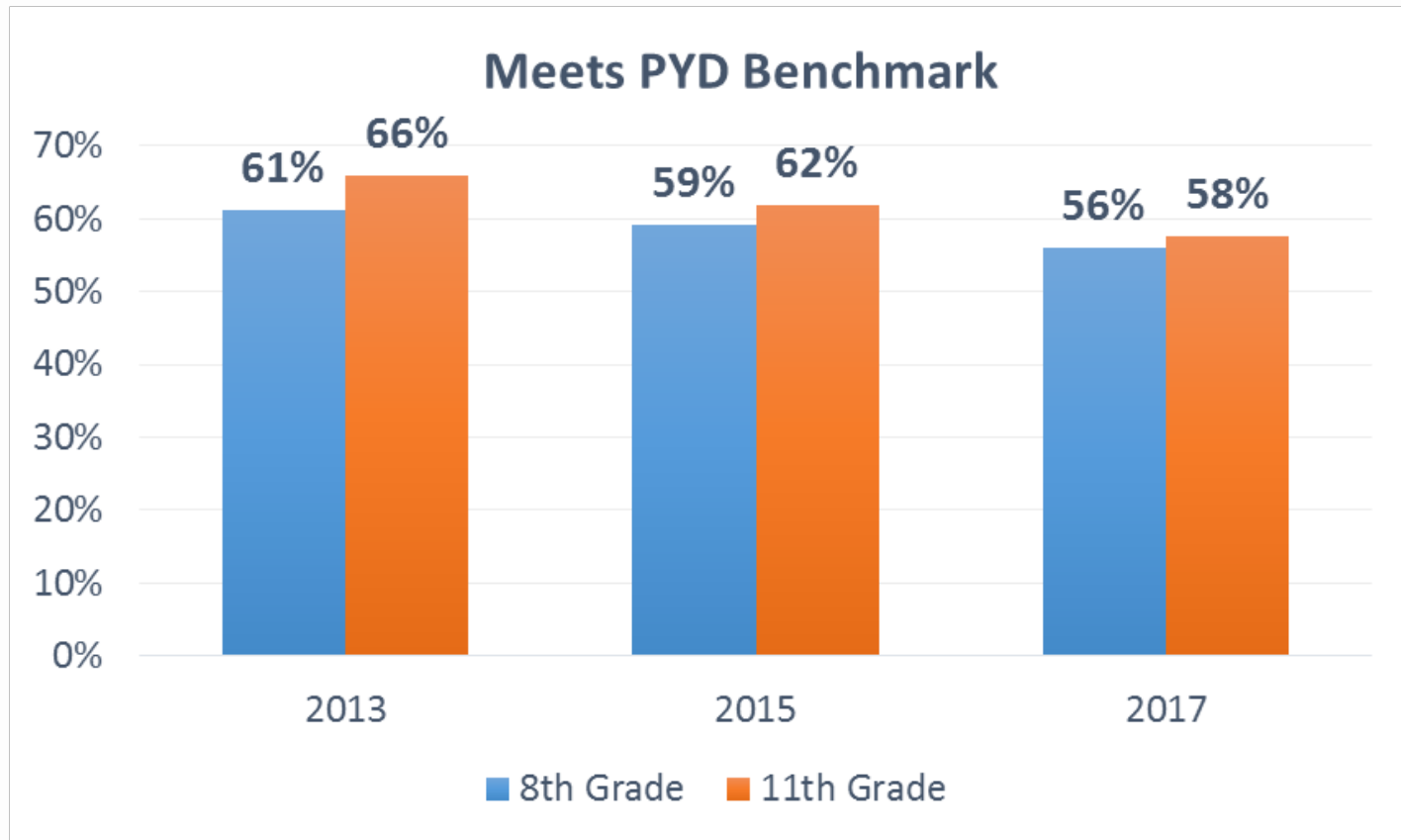
Rate Poor, Fair, Good, Very Good, Excellent

1. Would you say that in general your *physical health* is?
2. Would you say that in general your *emotional and mental health* is?

Mark how true you feel each statement is to you

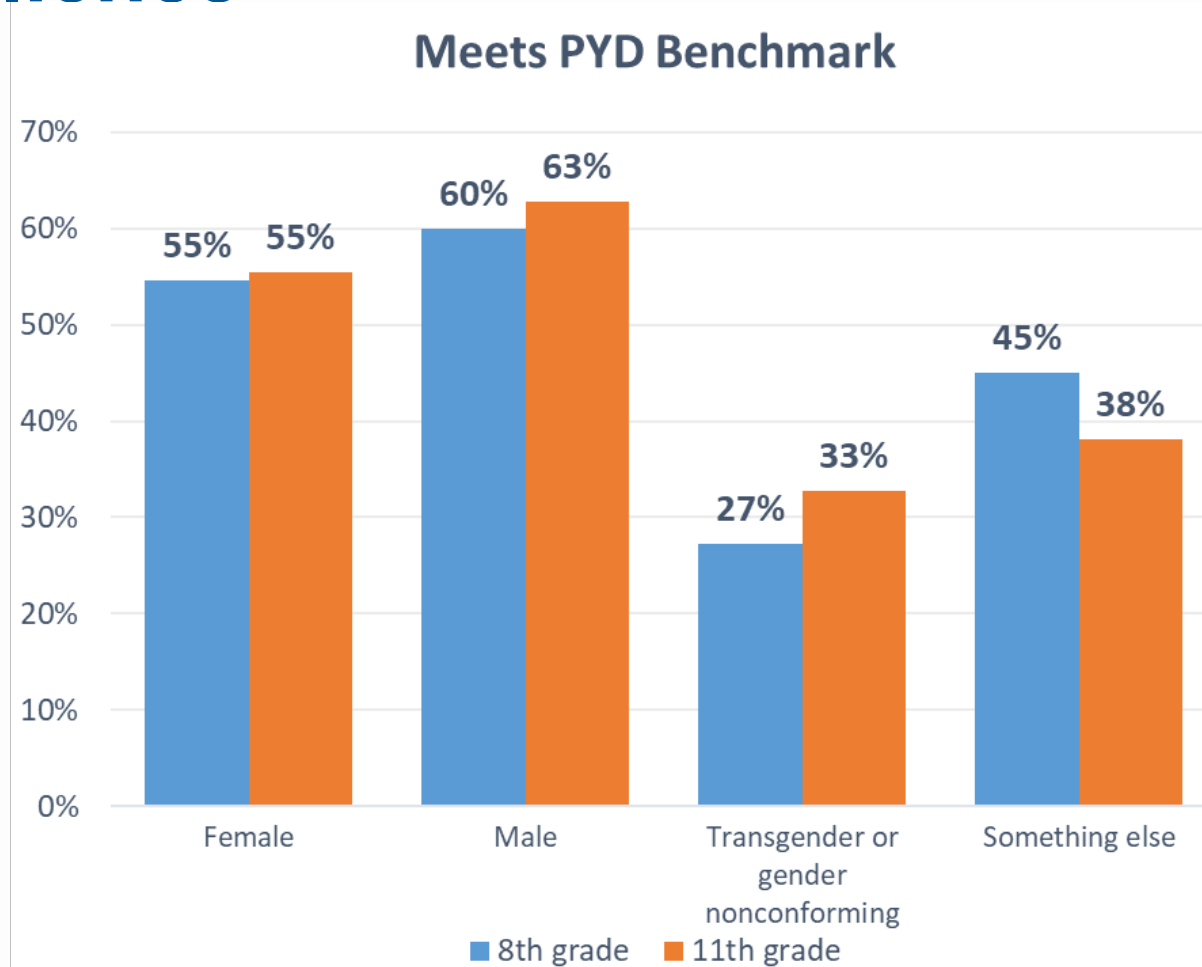
1. I can do most things if I try
2. I can work out my problems
3. There is at least one teacher or other adult in my school that really cares about me
4. I volunteer to help others in my community.

Resilience



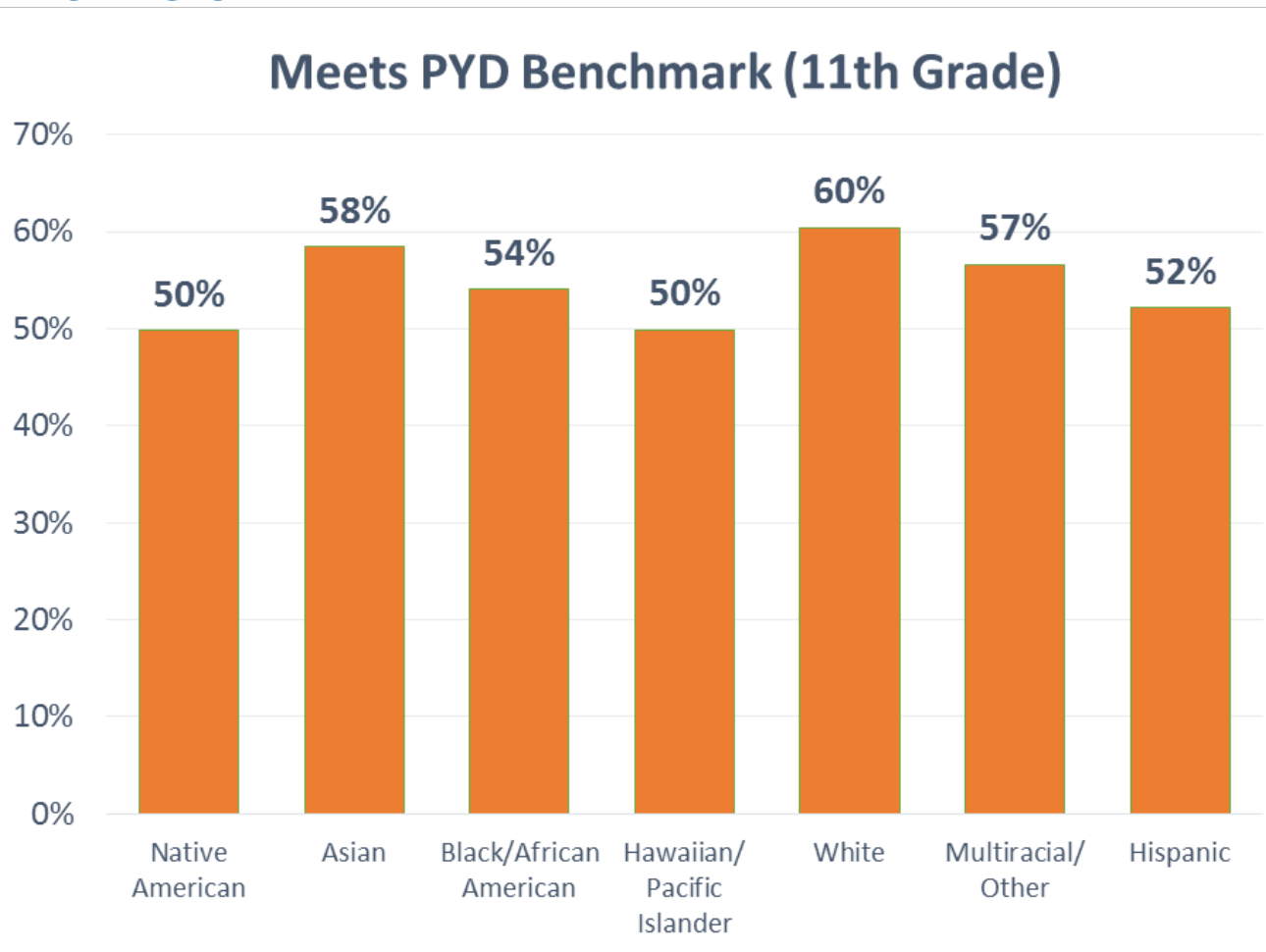
Source: 2013, 2015, 2017 Oregon Healthy Teens Survey

Resilience



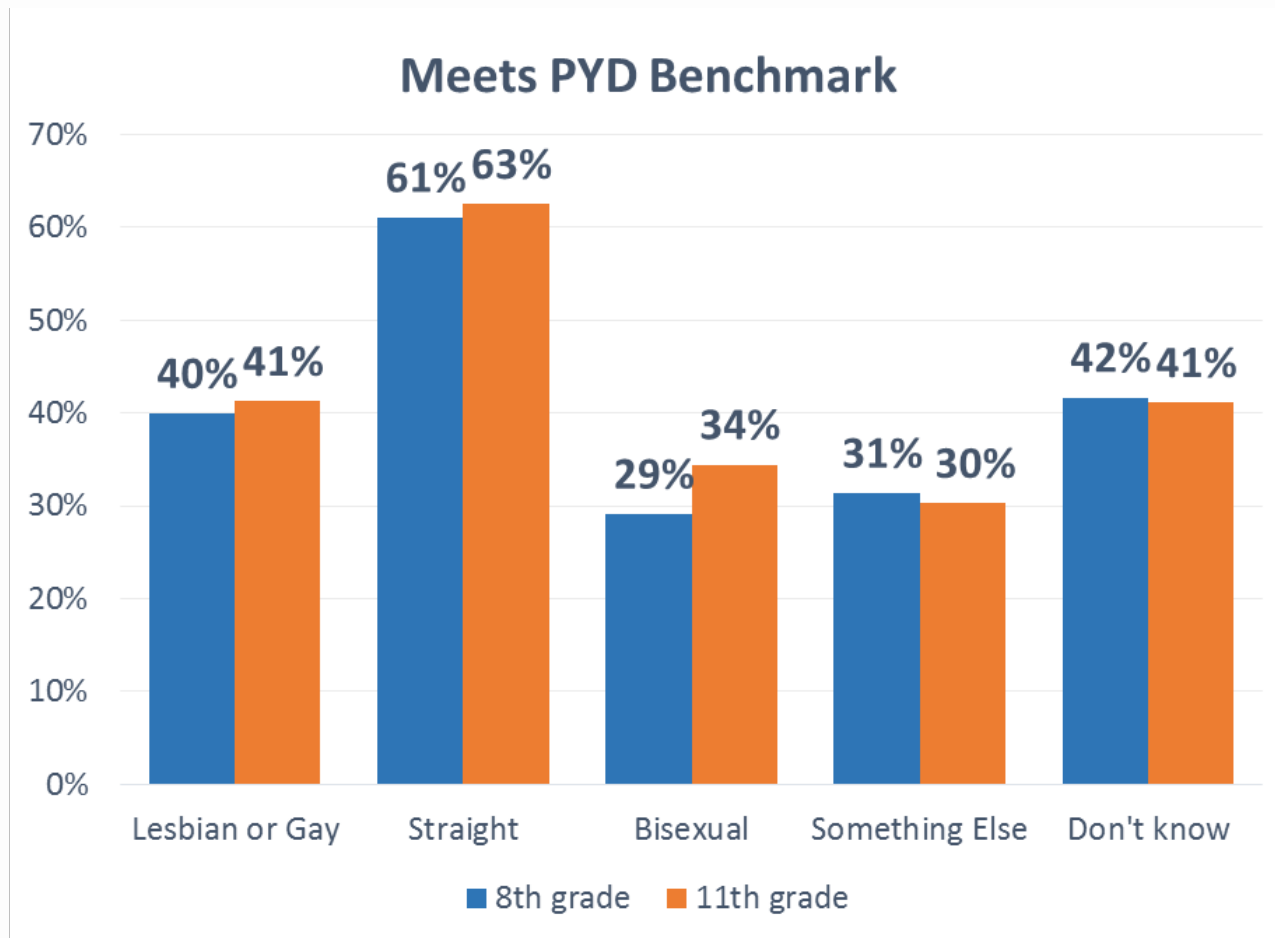
Source: 2017 Oregon Healthy Teens Survey

Resilience



Source: 2017 Oregon Healthy Teens Survey

Resilience



Source: 2017 Oregon Healthy Teens Survey

Adolescent Mental Health & Suicide

Policy and Program Initiatives:

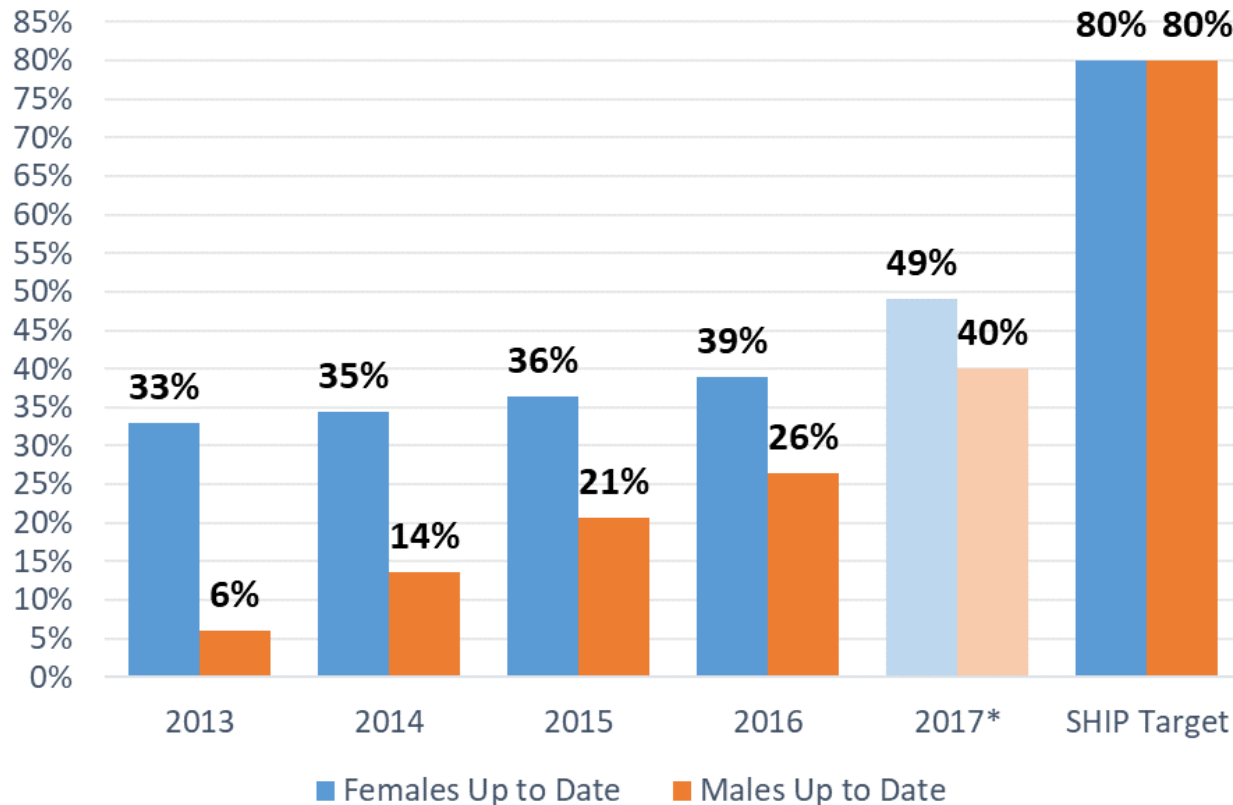
- **SB 1555 (2012):** Required staff reporting on bullying (including cyberbullying)
- **Children's Mental Health Investment Grants**
- **Trauma Informed Services** in publicly funded behavioral health settings
- **SB 491 (2013):** Minor Consent of MH diagnosis and treatment
- **Youth Suicide and Prevention Plan**
- **Oregon Alliance to Prevent Suicide**
- **SB 561 (2015)** post protocols for community MH programs
- **Psychiatric Emergency Services rules adoption (2016)**

Adolescent Immunizations

- SHIP Priority Targets
 - HPV 3 Doses
- Additional Measures
 - Tdap and Mening
 - School Exemption Rates

Adolescent Sexual Health - Immunization

Completion of HPV Vaccination Series



Source: ALERT IIS: 2013-17 Oregon Immunization Program's Adolescent Immunization Rates

*Starting in 2016, adolescents can be up-to-date for HPV vaccine if they received two doses at least 6 months apart, and got their first HPV immunization before age 14. Otherwise 3 doses are still required. The 2017 data reflect this change.



Adolescent Immunizations

Policy and Program Initiatives:

- **SB 132 (2013):** Increased the documentation and parental education needed to claim a nonmedical exemption.
- **SB 895 (2015):** Requires
 - new documentation for nonmedical exemptions
 - LPH to administer regardless of ability to pay
 - Schools must have data publicly available.

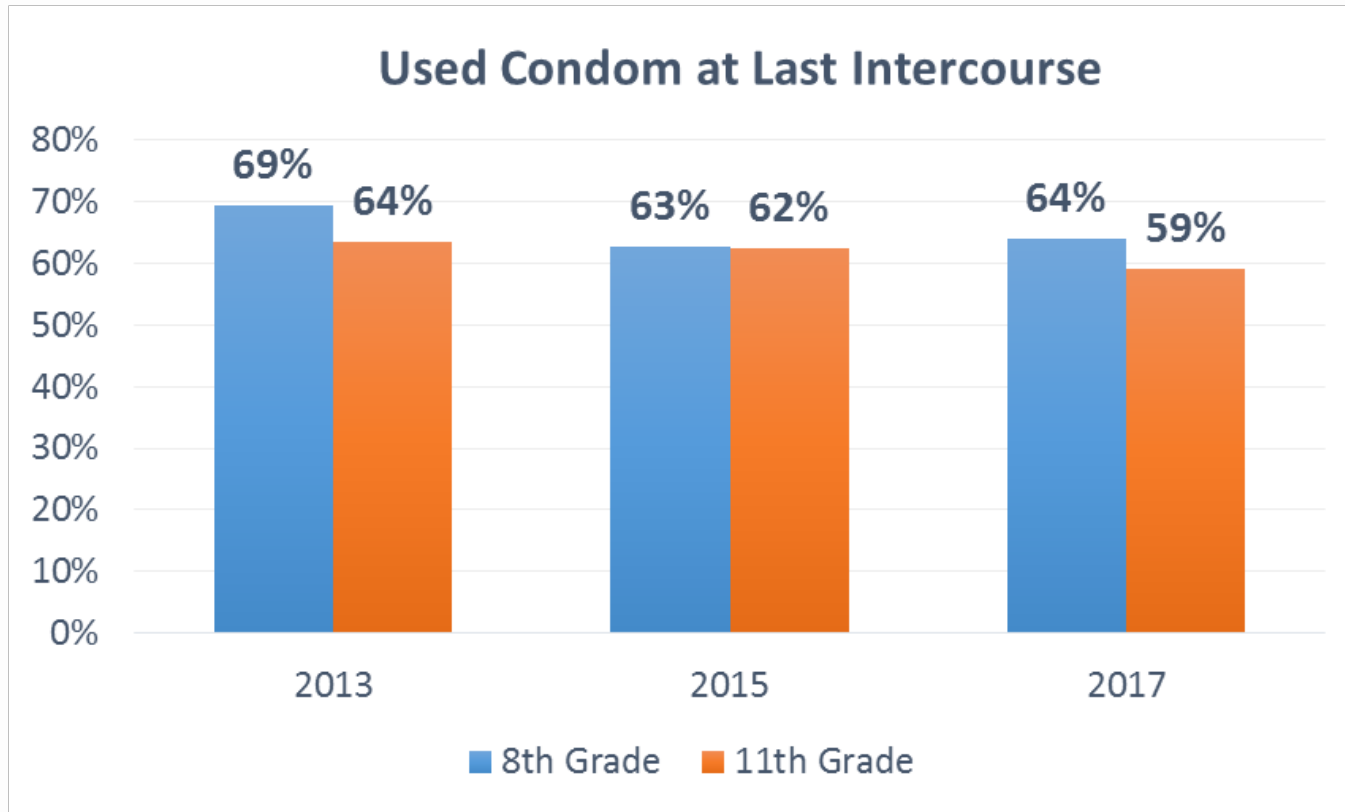
On the Horizon:

- **HPV 2 Dose Recommendation (2016)**
- **SB 274 (2017):** post-secondary education institutions which provide housing, provide info on vaccine-preventable disease know to occur adolescent 16 to 21.

Adolescent Communicable Disease

- SHIP Priority Targets
 - None
- Additional Measures
 - Condom Use
 - HIV, STI Topics in Schools
 - STI Infections (Chlamydia, Gonorrhea, Syphilis)

Adolescent Condom Use



Note: Percentages are of youth who have had sexual intercourse

Source: 2013, 2015, and 2017 Oregon Healthy Teens Survey

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Adolescent and School Health

Adolescent Sex Ed – Condom Use

Topic taught in 6, 7 or 8 th grade	% of Schools	95% CI	N
How HIV and other STIs are transmitted	79.1	74.0 – 83.5	156
The importance of using condoms consistently and correctly	54.1	48.2 - 59.9	156
How to obtain condoms	49.3	43.4 - 55.3	155
How to correctly use a condom	43.6	38.0 - 49.4	156
The importance of using a condom at the same time as another form of contraception	54.8	48.7 – 60.8	156

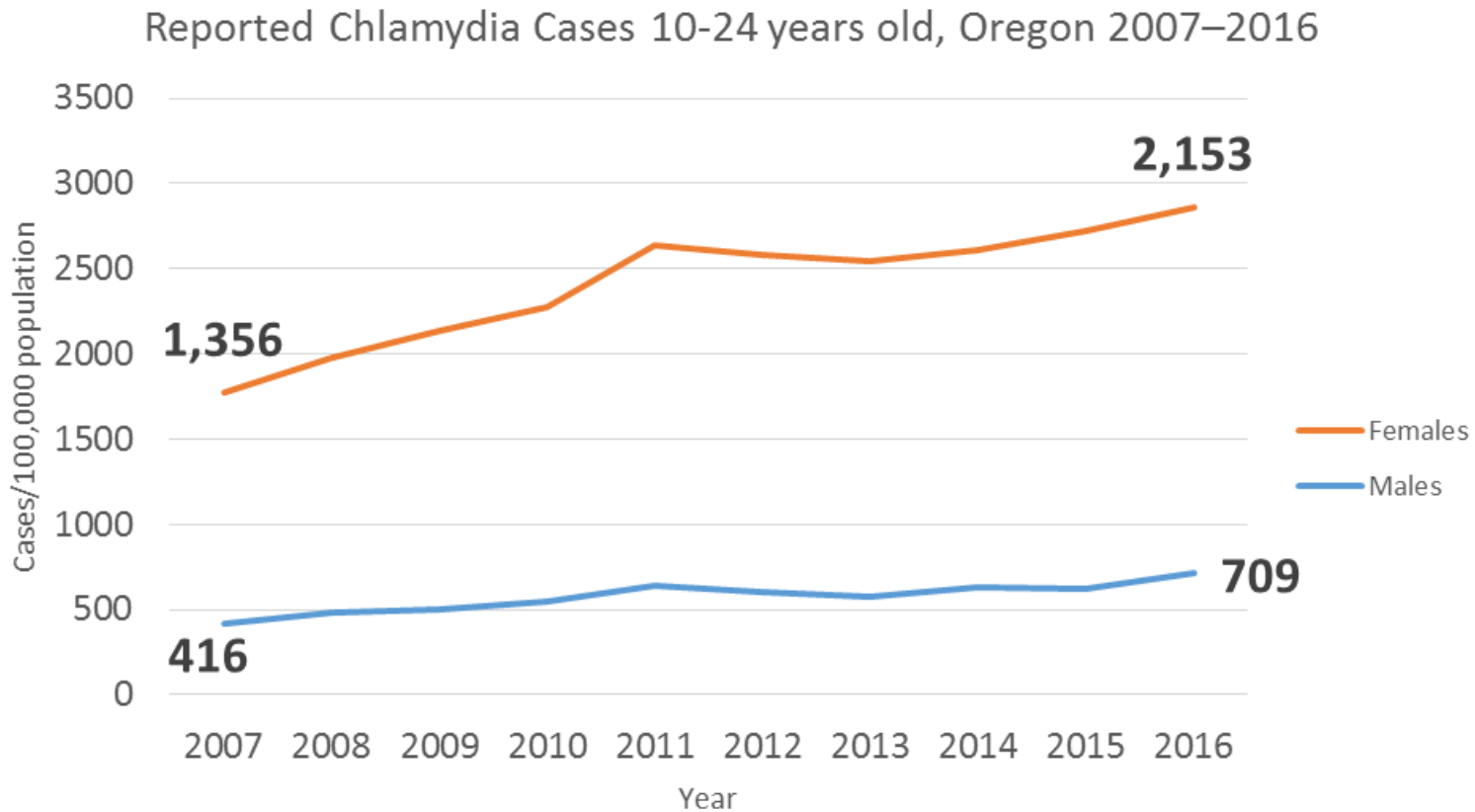
Source: 2016 School Health Profiles – Lead Health Educator Survey

Adolescent Sex Ed – Condom Use

Topic taught in 9, 10, 11, or 12 th grade	% of Schools	95% CI	N
How HIV and other STIs are transmitted	96.8	93.5 – 98.5	135
The importance of using condoms consistently and correctly	87.6	82.2 – 91.5	134
How to obtain condoms	83.4	78.0 – 87.7	133
How to correctly use a condom	80.8	75.3 – 85.4	133
The importance of using a condom at the same time as another form of contraception	91.3	86.8 – 94.4	134

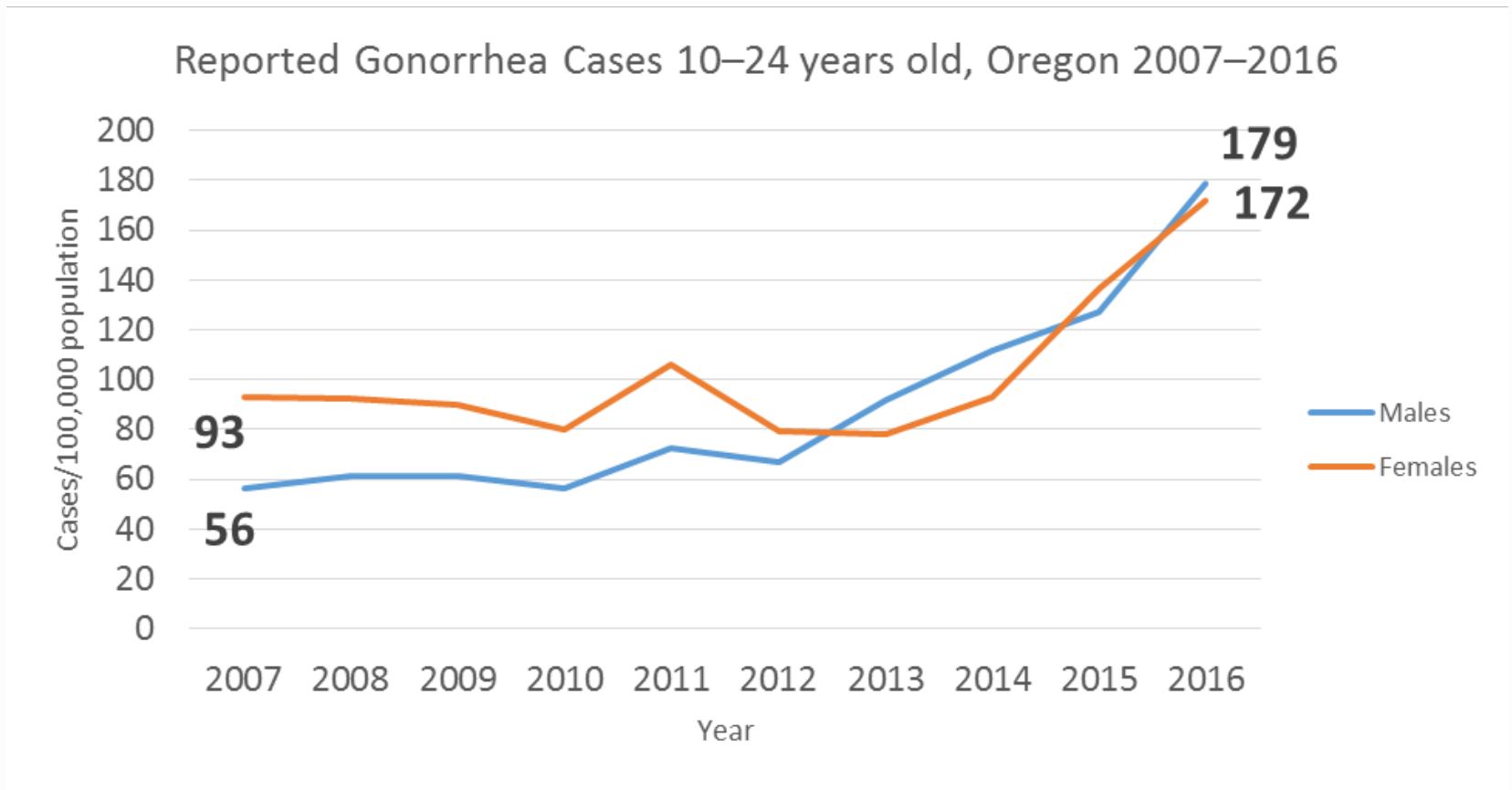
Source: 2016 School Health Profiles – Lead Health Educator Survey

Adolescent STIs



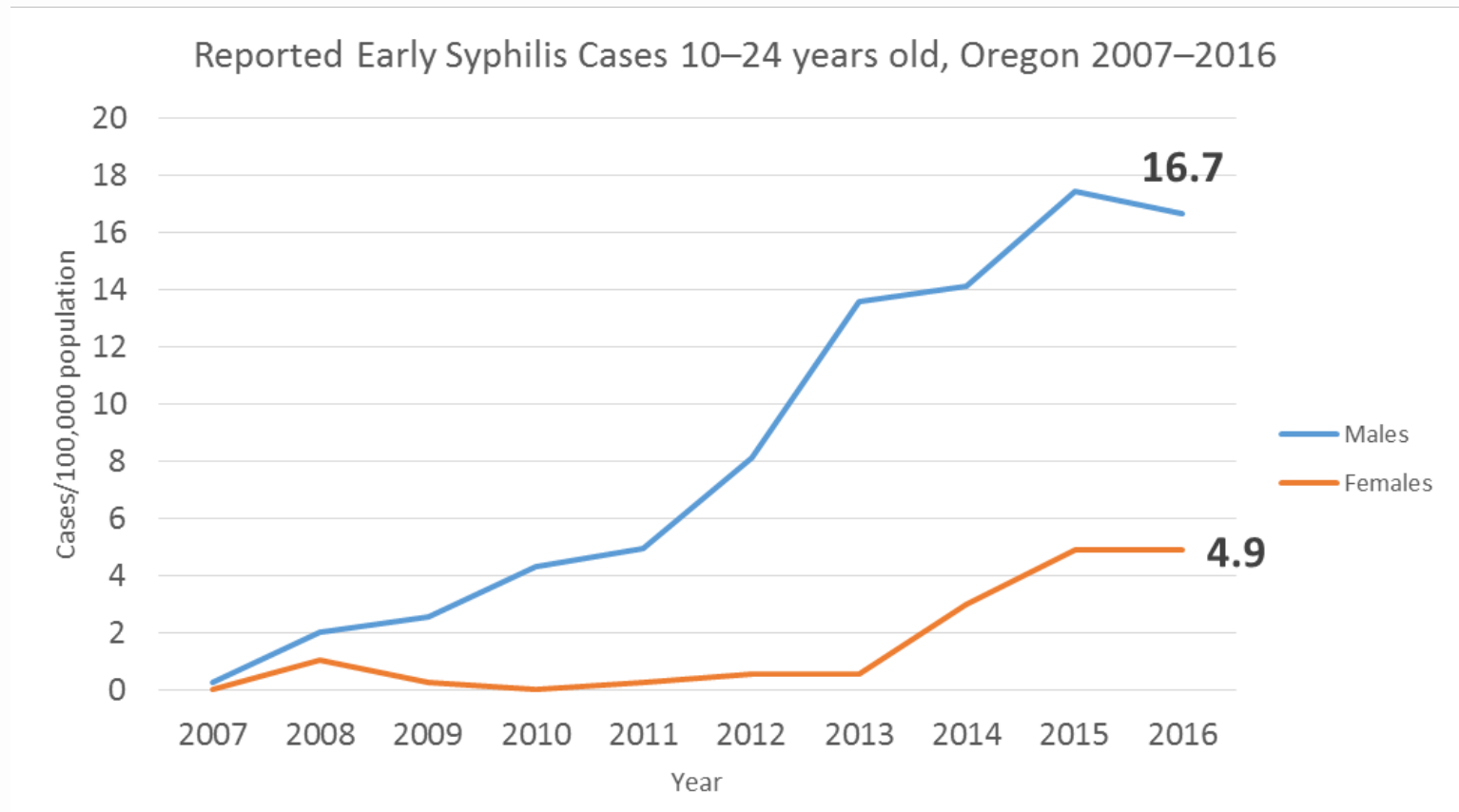
Source: Oregon Public Health Epidemiologists' User System

Adolescent STIs



Source: Oregon Public Health Epidemiologists' User System

Adolescent STIs

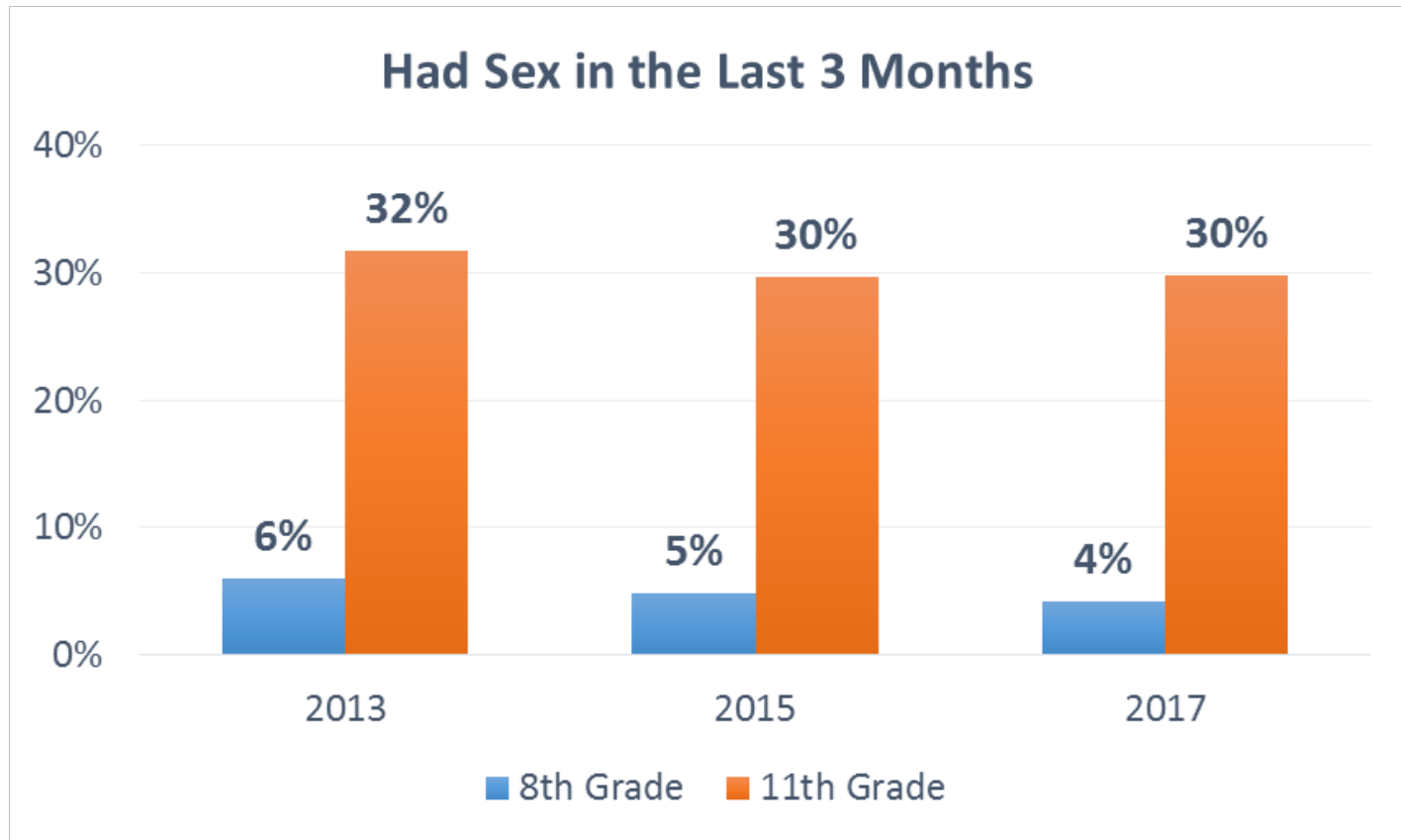


Source: Oregon Public Health Epidemiologists' User System

Adolescent Sexual Health

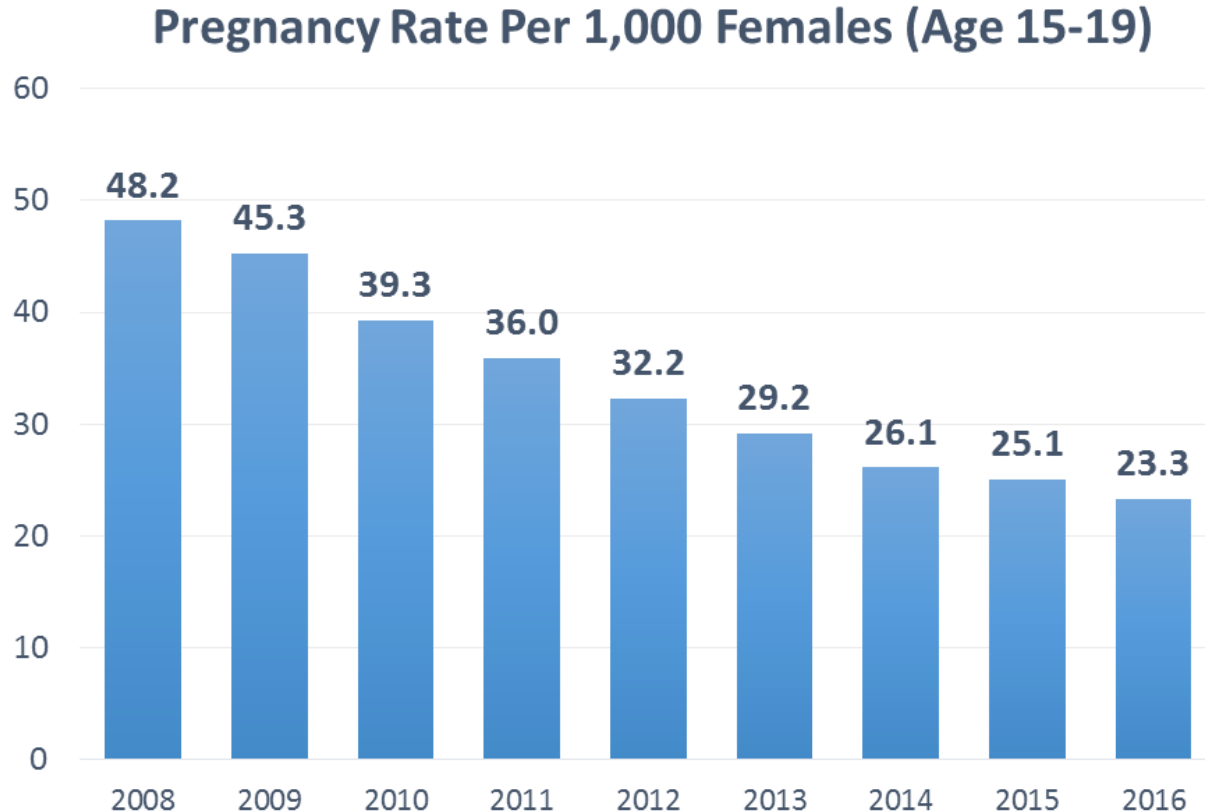
- SHIP Priority Targets
 - None
- Additional Measures
 - Sexually Active (within last 30 days)
 - Effective Contraceptive Use
 - Teen Pregnancy Rates
 - Sexual Assault
 - Physical Dating Abuse

Adolescent Sexual Health



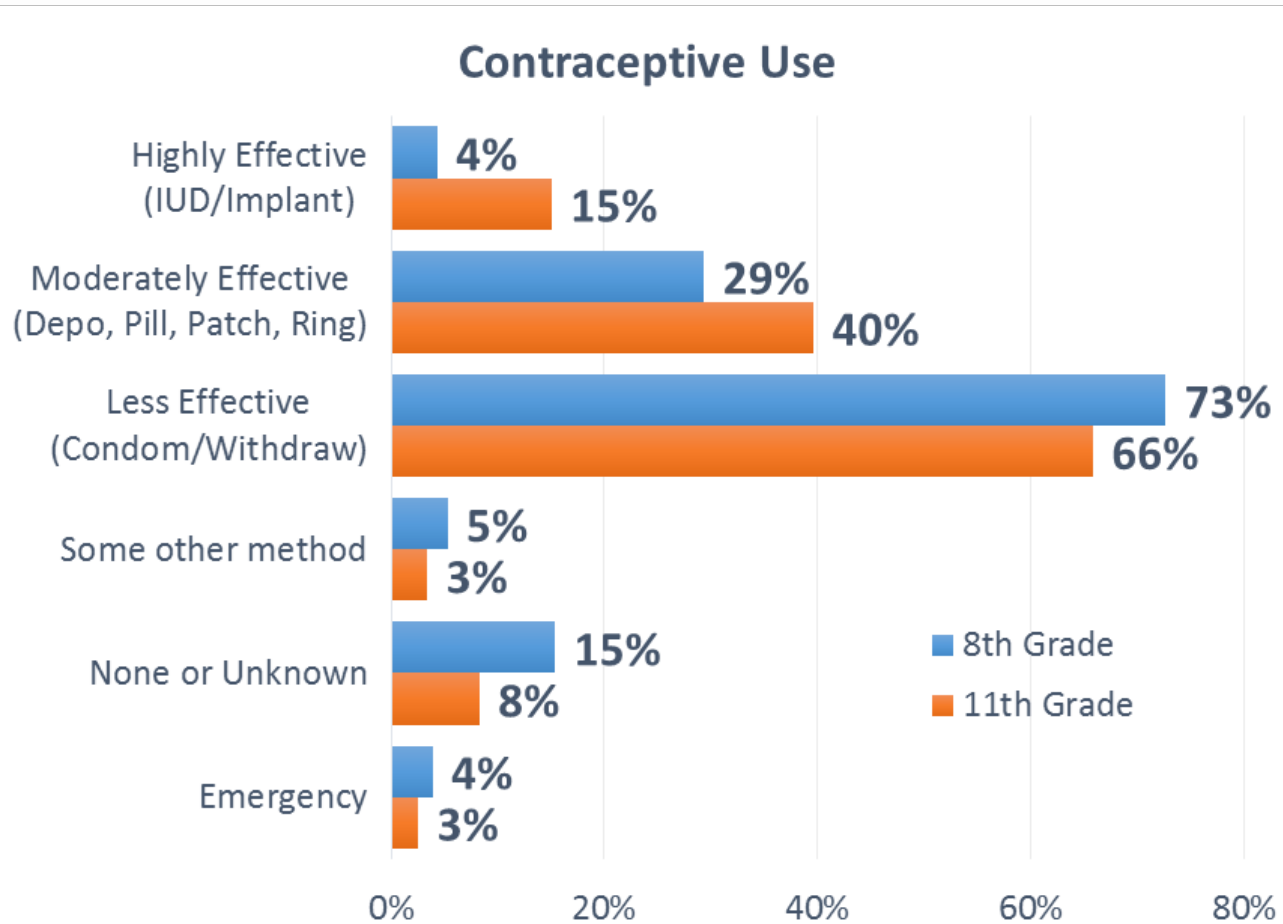
Source: 2013, 2015, & 2017 Oregon Healthy Teens Survey

Adolescent Sexual Health



Source: Oregon Public Health Division, Center for Health Statistics and U.S. Census Bureau

Adolescent Sexual Health



Note: Percentages are of youth who have had sexual intercourse. Categories are not mutually exclusive - students could choose more than one method.

Adolescent Healthy Relationships

Topic taught	% of Schools	95% CI	N
How to create and sustain healthy and respectful relationships (6-8 th grade)	77.4	72.3 – 81.9	157
How to create and sustain healthy and respectful relationships (9-12 th grade)	95.8	92.1 – 97.8	134

Sexual and Physical Dating Violence	2015	2017
Forced Sex/Sexual Assault (11 th Graders)	5.7%	6.1%
Physical Dating Abuse in the Last 12 Months (11 th Graders)	4.5%	3.7%

Source: 2016 School Health Profiles – Lead Health Educator Survey & 2015, 2017 OHT Survey

Adolescent Sexual Health and STIs

Policy and Program Initiatives:

- **LARC CDC Age Recommendation**
- **HB 4077 (2012):** Teen Healthy Relationship Act
- **OR Youth Sexual Health Plan**
- **OR Health Edu. Standards**
- **HB 2879 (2015):** Permits pharmacists to prescribe oral contraceptive and patch
- **SB 790 (2015):** Domestic Violence Education

- **SB 856 (2015):** Sex Abuse Prevention Instruction

On the Horizon:

- **HB 2527 (2017):** expands methods of contraceptives pharmacists are permitted to prescribe (injectable hormonal & self admin. hormonal)
- **HB 3391 Reproductive Health Equity Act (2017)**

Adolescent Access to Services

- SHIP Priority Targets
 - None
- Additional Measures
 - SBHCs
 - School Nurses
 - Well Visit Rates

Adolescent Access to Services

	2015-2016	2016-2017
SBHC	77	78
Students Served	33,941	35,126
School Nurses (FTE)^	218.7	225.8
Nurse (FTE) to Student Ratio^	1 to 2,635	1 to 2,565

	2015**	2017
Annual Visit to Primary Care Provider	58.8% (8) 61.1% (11)	61.8% (8) 62.2% (11)

Source: *SBHC Status Reports, ^ODE School Nurse Annual Reports, and **2015 & 2017 Oregon Healthy Teens Survey.

Adolescent Access to Services

Policy and Program Initiatives:

- **HB 2445 (2013):** SBHC Certification and expansion
- **SB 436 (2013):** CCO maximization of SBHCs in community health improvement plans
- **CCO Well Visit Metric:** Greater emphasis on the Metric in recent years
- **SB 698 (2016):** School Nurse Consultant and Task Force

On the Horizon:

- **SB 558 Healthcare for All Oregon Children (2016):** Covers children regardless of immigration status
- **SB 111 (2017):** Pilot for Medicaid reimbursement of School Nursing Services
- **Increased Funding for SBMH (2018)**

Thank You

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