

RESEARCH IN OREGON COMMUNITIES' REVIEW SYSTEM

Clatsop County Cultural Landscape

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with support from Clatsop Community Health Advocacy + Research Team





This locally-developed landscape is intended to describe the region of interest, to help guide design choices for proposed cancer prevention and control projects and/or clinical trial research implementation.

Data collected in response to the development of this landscape was offered by community leaders in the region and specifically those who volunteered to participate on a subcommittee of Clatsop Community Health Advocacy + Research Team (CHART). This regionally-specific cultural landscape is the first step along the Research in Oregon Communities' Review System (ROCRS), supported by OHSU Community Outreach, Research and Engagement (CORE).

CORE supports community-academic partnerships, gathers community input for academic research, and increases research in community settings that is responsive to the pressing health concerns of residents in Oregon. To learn more, [visit our website](#) or contact us at CommunityResearch@ohsu.edu.



Cancer

Incidence rates are age-adjusted 5-year average case counts per 100,000 residents

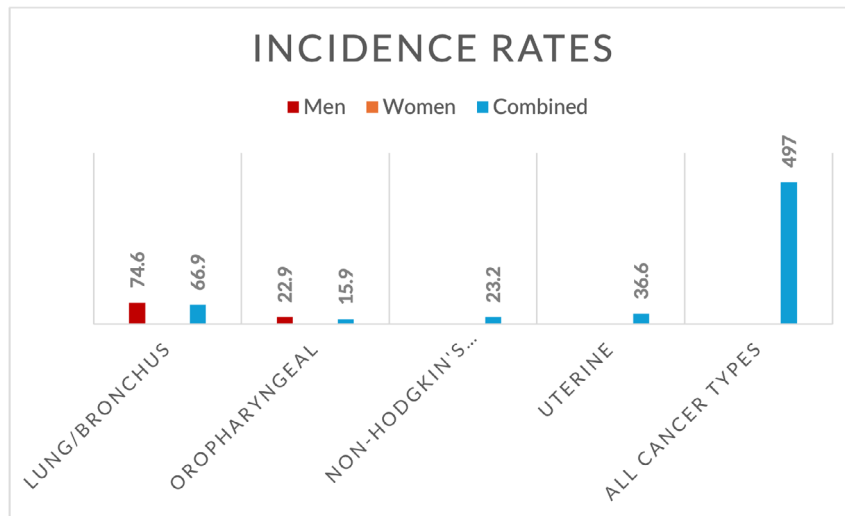


Figure 1

Lung and bronchus cancer

In 2021, Clatsop County reported the third-highest overall incidence rate (66.9 cases) as well as the second-highest incidence rate of males with 74.6 cases (Figure 1). The mortality rate for males (43.7 deaths) and females (37.2 deaths) is consistently higher in Clatsop compared to the state of Oregon.

Oropharyngeal cancer

- Second-highest incidence rate for both sexes (15.9 cases) in the state (Fig. 1).
- Males in Clatsop hold the third-highest incidence rate (22.9 cases) in the state (Fig. 1).

Non-Hodgkin's Lymphoma

- Fourth-highest incidence rate for both sexes (23.2 cases) in the state (Fig. 1).

Incidence and mortality

- Since 2018, the incidence rate for all cancer types combined has decreased across Oregon as a whole, but Clatsop reported an increase in new cancer diagnoses (430.5 cases in 2018 vs. 497 cases in 2021). (Figure 2.)
- Since 2018, mortality rates for all disease sites have fallen throughout all Oregon counties, although Clatsop is not seeing as large of a decrease (174.8 deaths decreased to 170.5 deaths) as the state has seen (167.3 deaths decreased to 153.7 deaths). (Fig. 2.)
- New cases of uterine cancer are rising across Oregon (29.2 cases); the highest incidence rate is found in Clatsop (36.6 cases).
- Clatsop's Hispanic population is experiencing the 8th highest incidence rate of all cancers (399.8 cases) in the state.

Cancer prevention behaviors and modifiable risk factors

- Clatsop is behind the state in the three most common cancer screening activities: mammographies, pap smears, and colorectal cancer screenings.
- Completion of HPV vaccination series for 13- to 17-year-olds lags behind the state: 1 dose = 68%; up-to-date doses = 46% (statewide: 1 dose = 72.7%; up-to-date does = 54.7%). (Fig. 2.)
- All tobacco use (cigarettes, vapes, smokeless) remains high in Clatsop, especially among men (43% in Clatsop compared to 25.5% statewide). Cigarette use among women in

Clatsop = 19.1%; men = 27.9%.

- Men in Clatsop reported higher rates of high blood pressure (41.4%) compared to the rest of the state (26.7%) and to women in Clatsop (15.4%).
- Clatsop residents were less likely to report a “healthy weight” (25.6%) than the rest of the state (35.7%).

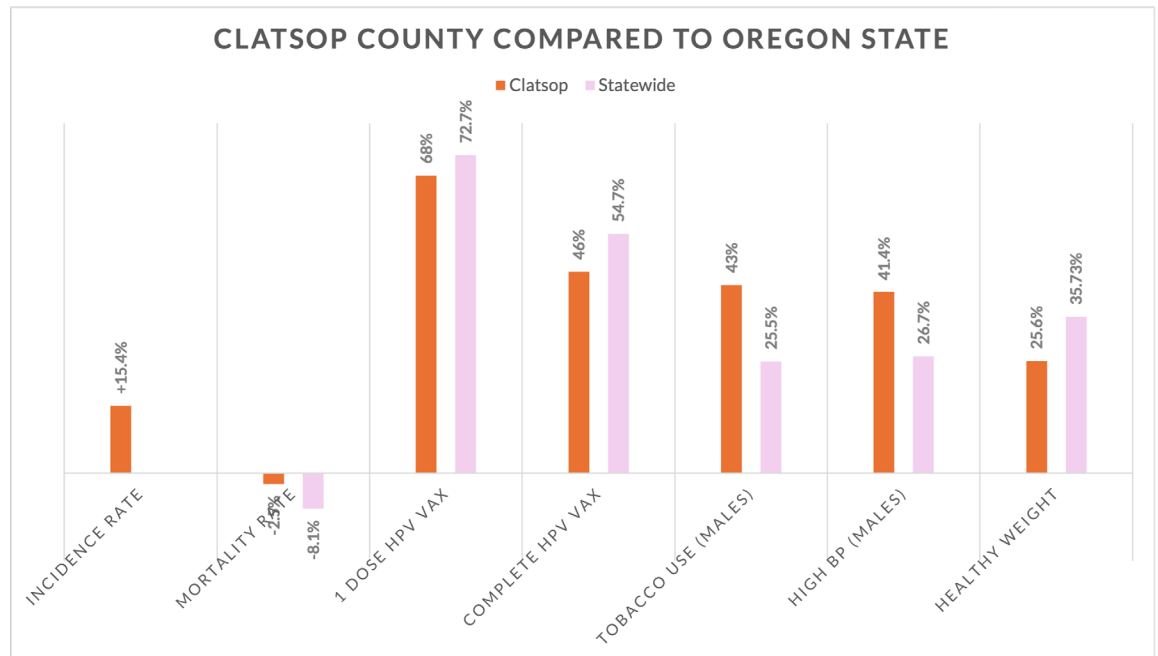


Figure 2

Economic

- Clatsop has the highest rate of an unhoused population (17.4%) of any Oregon county.
- Indoor places for unhoused persons are very limited. Warming shelters in North County and South County are available based on temperature, but Clatsop lacks no- or low-barrier shelters.
- Lack of housing for people in any economic situation. Low wages are not keeping up with the high cost of housing. Large employers lose applicants due to limited housing availability.
- Tourism is the main economic driver locally. Seasonal business cycles are tough on families and “gig” jobs are not adequate for sustainable financial security.

Promotional avenues

- Community radio, local paper, billboards (there is no local TV station)
- Social media: Nextdoor and Facebook groups add networking and sharing possibilities

Social

- Seniors (age 65+) make up 22.3% of Clatsop’s population. Residents age 50+ make up 44% of the population.
- Significant numbers of seniors are rural and isolated; senior and recreation centers’ operations were impacted by COVID-19 closures (Cannon Beach, Seaside, Astoria, Warrenton).
- Clatsop has a “rural attitude,” implying an independent mindset and a mistrust of outsiders telling them what to do.

- Strong family values; parents do not want anyone else to make health decisions for their children.
- There are few indoor social outlets for non-drinkers or families, limited indoor places for youth to spend time without needing money or being around alcohol. The pandemic has made this worse.
- Clatsop has a historical culture of heavy alcohol use (often intergenerational), problem gambling, and other addictive behaviors. Many social activities revolve around alcohol, plus there is now a high density of breweries and cannabis stores. Few affordable substance treatment options exist.

COVID-19 impact

“Just hanging
on by my
fingernails”

- Board of County Commissioners and City councils support the public health pandemic response; the Public Health department has received renewed respect and recognition during the pandemic.
- Post-COVID culture shift: “them vs. us” = the have’s and the have-not’s drove people to stop taking part in Service Clubs. “Unifying” events have been cancelled, impacting the whole county.
- Clatsop’s collective sense of caring for children diminished during COVID (Child Welfare, schools unable to “see” harm at school).

Diversity, equity, inclusion and justice

- Astoria mayor participates in equity conversations with community leaders; however, there does not seem to be representation or advocacy for or by local Native American populations. COVID outbreaks in seafood processing plants revealed blatant racism by community leaders.
- Despite an increasing Hispanic influence and presence in the workforce, there are language barriers and little language support for non-English speakers. Many elected officials appear to have little awareness of the Hispanic community’s size, how strong they are as a group and culture, or how they contribute to the region.
- Poor cell reception, lack of broadband access, Internet speed/reliability, and limited carriers contribute to educational and workforce disparities, impacting access healthcare, behavioral health, and virtual learning.
- Limited access to transportation; limited bus schedule that does not work well for most people.

Political

- Clatsop does not have a track record of investing in social services. Lack of childcare and houselessness are important issues. Public officials often do not understand local food system challenges as they relate to community health, food security, or community resilience.
- School and hospital districts are strong, influential, and progressive. Long-term Clatsop residents and those working in timber, fishing, and social service industries are more conservative than other residents or workforces.
- Historically, Clatsop has been a progressive-leaning county but has become increasingly polarized in the past few years. Political divisions lead to challenges for reaching consensus and taking action.

- The incorporated cities in Clatsop all function independently and do not necessarily community and/or align well (five separate school districts, police departments, etc.)

Environment

- Global Warming is the theme of the 2022 Clatsop County Place Matters Conference.
- Wave energy is not currently a local effort.
- Local government has yet to invest in e-vehicles and charging stations.
- Logging is a major local industry. Environmental impacts of logging include water degradation as well as use of pesticides and herbicides on timber land.

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