



**POPULATION  
HEALTH TRUST**  
ADVISORY COMMITTEE

# Skagit County Board of Health

Peter Browning, Chair  
Lisa Janicki, Commissioner  
Ron Wesen, Commissioner

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## **PHT Meeting Minutes November 6, 2025, 8:30-10:30 am**

### **Chinook Meeting Room**

**Members:** Claudia Avendano-Ibarra, Bill Henkel, Linden Jordan, Maddy MacKenzie, Mo Pettitt, Lyndie Simmonds, Jeremy Hiatt, Lindsay Lopes, Thomas Boucher, Anneliese Vance-Sherman, Lilia Ortiz, Patty Codd, Julie Merriam

**Community Stakeholders:** Kas Church, Kristen Ekstran, Jennifer Sass-Walton, Chris Baldwin, Alex Gee, Monica Negrila

**Ex-Officio:** Howard Leibrand

**Guests:** Kelli Baker

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### **Welcome**

Kristen welcomed the group, then turned things over to Bill to provide updates from the last Steering meeting. During the Steering meeting, members discussed the Powerful Partnerships event. Overall, they thought it was a success and that both the pacing and the content were well received by attendees. During the data activity portion of the event, housing and economics rose to the top as issues of concern with some mentions of the need to collaborate with the NorthStar. When asked what was missing, some noted specific populations, LGBTQ+ individuals and older adults. Steering also discussed a landscape data collection activity to capture financial and programmatic changes and their impacts on our community.

### **BOH update**

The Trust shared highlights from CHA theme areas with the BOH during a recent meeting. Specifically called out by the BOH were the data on loneliness, technology use, kindergarten readiness, youth prevention, stigma, connection and belonging, and collaboration with North Star around the housing issue.

Mo noted that in the conversation, there was a discussion about the challenge of measuring prevention, as it is hard to measure what you are preventing. Given that, it was encouraging that the BOH were interested in prevention and not solely focused on issues with easily measured outcomes.

With regards to future collaboration with North Star, the BOH didn't mention specifics. Prevention could be an area where the Trust could lean in. Monica noted that she would appreciate hearing ideas from the group on ways to collaborate and to leverage the resources and subject matter expertise of the Trust.

Overall, the Trust appreciated the format and hoped that the conversational style approach will continue.

### Listening session summary

Kas provided the group with an overview of the Community Listening Sessions. A series of six sessions were hosted around the community, including one in Spanish. Overall, participants were engaged and thoughtful with their feedback. Housing and economic stability topped the list of priority areas, with some calling out behavioral health, child care, and health care access. When asked what was missing, respondents identified specific groups, LGBTQ+, older adults, and other vulnerable populations. Some also noted current fears around deportation.

### Root cause summary

During the last Trust meeting, members spent time identifying the root causes for the health-related issues identified in the CHA. Kristen presented an overview of that content and asked members for their input.

Institutional level	Policies and Practices	Social conditions	Cultural norms/myths
Inequities built into systems	Historical traumas and Displacement	Poverty and generational poverty Unemployment	Emphasis on individual responsibility → stigma toward BH conditions, illness, and homelessness
Systemic scaffolding	Racism/discrimination: employment, housing, higher ed., medical care	Educational attainment	Meritocracy
Undoing of DEI efforts	Inequitable access to capital and other flexible resources (money, knowledge, power and social connections)	Pair of ACES/trauma	Pull yourself up by your bootstraps
Interlocking SDOH	Immigration policies	Housing and food insecurity	Mistrust of facts - misinformation
	Structural violence	Embodied health outcomes (chronic disease burden, preterm birth, stroke)	Crisis intervention over prevention

Members had some questions about specific terms, like systemic scaffolding (decided that systemic oppression/privilege was a preferred way to capture the idea) and added implicit bias as a cultural norm.

The larger conversation, however, was around whether to include root causes in the CHA. Some members felt that it was too complex and may cause more confusion for general readers. One member noted that her understanding of the CHA was that it was a way to solicit action from the community on the issues. She questioned if the root causes would contribute to action.

The conversation wrapped with Kristen suggesting that she and Kas would work on drafting a high-level summary of the root causes for the CHA that she would share the draft with the Trust. Members could provide input on the summary before it was included in the report.

### Activity: Scan of current changes

Maddy shared with the group data collection the Skagit Community Foundation (SCF) is doing to measure the impact of current funding and program changes, a Ripple Survey. This information is useful to SCF as they consider immediate and future funding needs.

Inspired by that idea, Kristen guided the Trust in an activity designed to capture impacts among member organizations. Members were asked to record changes to their programs/support/services because of funding cuts and to share dollar amounts if that information was available.

After recording their impacts, the group discussed issues that seemed to be rising to the top. Below are highlights for that conversation,

-Food security, nearly 16,000 people in Skagit rely on SNAP, which is currently in jeopardy. Better coordination around food security is a huge and immediate right now. Members noted that because the Trust had already committed energy into developing a Food Policy Council, food security should remain a priority for the Trust. This issue rallied members with many wanting to know how they could support community members. Kristen said she'd follow up with members about ways they could support and encourage their networks to do the same.

-Health care access, Medicaid/Medicare reimbursements are dropping and subsidies are reduced. This is contributing to some health care organizations laying off providers. Howard expressed concerns about the trickle-down impacts of this decision, especially as it related to the training of medical staff.

-Youth wellness, concerns about kids experiencing hunger, funding cuts impacting enrichment activities, and how this might contribute to less hope among youth.

-Health equity, with many organizations forced to reduce staff, Community Health Workers were some of those let go. This could impact the ways that we do outreach/provide support to our community, especially those that speak a language other than English.

### **Updates/up next**

-Kristen shared the difficult update that Chris Johnston is no longer with Peace Health.

-Last year's ECHO tour was a success and an important part of the Trust's work in creating a health care pipeline. Unfortunately, due to funding cuts, Career Connects cannot host the event. Kristen and Kas, with the support of the Trust, were going to handle the logistics so that the event could be hosted in 2026, but with staffing changes at public health, that is no longer possible.

### **Adjourn**

Kristen thanked the group and adjourned the meeting. The next Trust meeting is on December 4<sup>th</sup>, no Steering meeting in November due to the holiday.