

Parks

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So far, working with students from David Douglas school district, the committee has found five sites with potential. Currently they are looking closely at two: a site on Southeast 127th, just south of Burnside Street; and a site on Southeast Division Street at 123nd Avenue.

The first site, around 24000 square feet, is owned by Portland Water Bureau. The bureau hasn't made any decisions about future plans for the site, which stands next to a water bureau building. The site also is bordered by an apartment building full of families with young children. The committee dreams of turning it into a small park with play areas, trails, a gathering space and drinking fountain.

"We've done some canvassing at the apartment complex and the residents expressed a lot of interest in that land being turned into a place they can take their kids," says Cohen.

The second site, 51,000 square feet backing up to Southeast Division Street, is owned by two brothers and valued at around \$1.2 million. The brothers, who pay hefty property taxes, want to sell or lease the land. But they're also open to hearing a community-based proposal from the committee. Neighbors say local teens need hangout space. Also on neighbors wish list are: a community center with a commercial kitchen, meeting rooms, an urban garden and a youth sports area.

"I work with a lot of developers searching for property, and this has commercial zoning on the Division Street frontage," notes committee volunteer and land use planner Seth Otto. "You can't ignore the profit potential here. Maybe there's a hybrid development here that would bring profits and satisfy community members."

The committee has tons of expertise, with volunteers such as Otto, Dan Miller of the National Parks Service; Rebecca Wells, from Oregon DEQ; and Abigail Cermak, from Portland Bureau of Environmental Services. Environmental designer Jordan Sector has even drafted proposals for the sites.

we are to where we want to be overnight," said Bruce Goldberg, director of the Oregon Health Authority, the state agency that administers Medicaid.

Some patients will probably have trouble getting speedy access to see a doctor, he said, but the state has taken steps to minimize the disruption.

"We'll be ready," he said. "I don't think we'll be as ready as we want to be, but it's a pretty great opportunity to change all these life circumstances for everybody and make them healthy."

About 1 in 6 Oregonians, 550,000 people, are uninsured, according to state data from February.

State officials project that 120,000 people will become eligible for Medicaid on Jan. 1 under President Barack Obama's health care overhaul. Another 160,000 are expected to buy health insurance through Cover Oregon, a health insurance marketplace where individuals and small businesses can compare plans and access federal subsidies if they're eligible.

By 2016, the state projects the number of uninsured will drop to 170,000. All those newly insured people will enter a health care system that's already struggling to keep pace with demand for primary care, particularly in rural areas.

Oregon on the whole may have enough physicians to meet current demand, "but we have a terrible distribution problem," said

Second Annual King Dream Run



PHOTO COURTESY FLOSSIN MEDIA

The 2nd annual MLK Dream Run is Sunday, Aug. 4, offering a 5-kilometer walk and run, a 10K run and the 15k Geoff Hollister Tribute competitive race crossing through Humboldt, King, Piedmont, Woodlawn, Boise, Eliot, Vernon, Grant Park, Sabin, Woodlawn and Irvington neighborhoods. The event benefits the NNEBA Fellows Program providing internship and jobs skills training for youths; and the NE Community Health Clinic, which gives free and low-cost health care to needy families. The race uses a USA Track & Field sanctioned & certified course, and is expected to attract thousands of local amateur runners and dozens of international elite racers. The event begins at 6 a.m. and post-race festivities begin at 8:30 a.m. and conclude by 11a.m. More info at www.mlkdreamrun.org

But to make any of these dreams a reality, means overcoming a long list of challenges. Neighbors and property owners must agree on a plan for each site. The plans have to meet city, state and federal regulations. And the group has to figure out a sustainable funding and management plan for each site.

"It's a challenge to turn people's visions into reality," Cohen says. It's a challenge to find the resources that can make that hap-

pen, and the resources to preserve the vision —so the community can get what it wants and needs."

Groundwork Portland overcame similar challenges in developing the Emerson Street Garden in Northeast Portland. With support from neighborhood volunteers, the environmental justice group turned a lead-contaminated eyesore into a thriving community garden that will nourish generations

to come. And its Green Team youth internship program offers opportunities for youth to learn as they earn, helping them stay in school and on track.

"It's not just gardening," says Cohen, about the garden. "It's a community gathering place and a safe, multicultural space for elders to share their wisdom with younger generations."

Health

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Mark Richardson, dean of the Oregon Health and Science University's medical school. Doctors are heavily concentrated in the Interstate 5 corridor, he said, and some areas that are considered adequate now may experience a shortfall when people currently without insurance start going to the doctor.

"We need more primary care practitioners in Oregon, but we need them to be in the right place," Richardson said.

increase demand for health care, the number of providers is falling.

Between 2010 and 2012, the number of primary care physicians practicing in Oregon dropped by 320, nearly 8 percent, and the number of physician assistants dropped 2 percent, according to the state report. There were 189 more primary care nurse practitioners, a 20 percent increase, but not enough to keep pace with the loss of physicians and physician assistants.

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Multnomah County has 19 percent of the state's population but 35 percent of its doctors and nurse practitioners, 32 percent of nurses, 38 percent of psychologists and 41 percent of licensed social workers, according to a report this year by the Office for Oregon Health Policy and Research.

Counties along the northern border and south-central Oregon had the highest physician-to-population ratios. In some cases they were five times larger than the statewide ratio.

Even as retiring baby boomers and the coming wave of newly insured patients

The number of dentists also declined 9 percent, and three northeastern counties had no dentists — Giliam, Morrow and Sherman.

Even so, state officials insist Oregon is better prepared for the challenge than most states. A 2011 report by the Association of American Medical Colleges says Oregon had 93 primary care physicians per 100,000 residents, 10th best in the nation.

Oregon has a strong network of low-income clinics known as federally qualified health centers and has been investing in incentives to convince medical professionals to practice in rural areas, Goldberg said.

Also, Oregon has experience with rapidly expanding the health care population, having absorbed thousands of new patients when it created the Oregon Health Plan and loosened eligibility requirements in 1994. Goldberg, who was a family physician then, said the medical community is better prepared this time around.

The Legislature this year voted to expand funding for several scholarship and loan repayment programs for health care providers who practice in underserved areas — an effort to diminish the gap between the lifestyle of a rural primary care doctor and a classmate who pursues a lucrative specialty in Portland.

Oregon's effort to change the way the state pays for Medicaid will also help, officials said. It's supposed to allow more flexibility for primary care providers so they don't have to schedule an office visit just to get paid.

"Not every patient needs to see a physician, or even a nurse practitioner or PA, every time they go to their health office," said state Sen. Elizabeth Steiner Hayward, D-Portland, an OHSU family physician who's pushed for expanding incentives for primary care providers in underserved areas.

Chronic conditions can often be managed with phone calls and emails, she said.

"Not every visit," she said, "needs to happen in person."