

Department: Health Department **Program Contact:** Jessica Guernsey
Program Offer Type: Existing Operating Program **Program Offer Stage:** As Requested
Related Programs:
Program Characteristics: In Target

Executive Summary

The Future Generations Collaborative (FGC) is a collective impact model whose partners include Native American and Alaska Native community members, Native-serving organizations, and government agencies. The FGC seeks to increase healthy pregnancies and healthy births and strengthen families in Native American and Alaska Native communities.

Program Summary

Research shows the conditions of early life have a profound impact on long-term health and stability. In Multnomah County, one in five births to Native American women results in a poor birth outcome. The historical trauma experienced by Native people has set the stage for poor birth outcomes and associated long-term health effects, and has hindered partnerships between Native communities and government agencies. The Future Generations Collaborative (FGC) is a culturally-specific, trauma-informed collective impact model to reduce serious health inequities experienced by Native communities, especially birth outcomes related to Fetal Alcohol Spectrum Disorders (FASDs). Eliminating the root causes of FASDs ensures that all Native families are supported to heal, grow and thrive; and that a healthy pregnancy and healthy start to life is possible for every Native person.

The FGC has adopted a trauma-informed collaborative process that helps heal people, organizations, and systems. Using the model, the FGC builds trusting relationships between and among people and organizations. Public health and county government’s commitment to this community-led partnership and healing process makes FGC unique. The FGC builds community capacity to mobilize, educate, and inform community through peer-to-peer support and training; increasing use of the relational world view and trauma-informed approaches within health and social service systems; and enhancing participation of Native-identified community health workers and community members in policy and systems changes. Finally, the FGC plays a unique role in Multnomah County, providing culturally-relevant and trauma-informed technical assistance and training to health and social service providers, including community health workers, to more effectively adapt systems and programs to support people and families affected by FASD.

The work of the FGC responds to the 2014 Report Card on Racial and Ethnic Disparities, as well as other local and regional community health assessments and community health improvement plans. The FGC addresses the underlying causes of health inequities by focusing on the social determinants of health, operating in a life course health perspective, and building capacity within the Native community and Native-serving organizations.

Performance Measures

Measure Type	Primary Measure	FY16 Actual	FY17 Purchased	FY17 Estimate	FY18 Offer
Output	# of TA and capacity building trainings addressing root causes of Fetal Alcohol Spectrum Disorders	15	3	6	12
Outcome	% participants w/increased awareness of FASD prevention & effective support for those affected by FAS	87.5%	100%	79%	90%
Quality	# of Elders/Natural Helpers and Native-identified community health workers engaged in policy advocacy	na/-	10	17	13
Quality	# Meaning Making meetings to gather and integrate input on successes and process improvements for the FGC	na/-	na/-	2	2

Performance Measures Descriptions

1) Revised to include technical assistance. 2) Revised to include effective support for those affected by FASD. 3) Revised to include Native-identified CHWs. 4) New quality measure to replace FY17 quality measure.

Legal / Contractual Obligation

The Health Department serves as the backbone agency for the FGC. In this role we have developed contracts with three Native-serving, community-based organizations to complete the planned work. Those contracts are Native American Youth and Family Center [contract number 44-1937], the Native Wellness Institute [44-1092] and SPIRITS [44-1537]. We expect these contracts to continue until the grant period ends (January 2018).

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2017	2017	2018	2018
Personnel	\$153,141	\$0	\$147,265	\$0
Contractual Services	\$221,334	\$133,435	\$71,334	\$263,435
Materials & Supplies	\$2,022	\$0	\$2,143	\$0
Internal Services	\$15,562	\$0	\$15,626	\$0
Total GF/non-GF	\$392,059	\$133,435	\$236,368	\$263,435
Program Total:	\$525,494		\$499,803	
Program FTE	1.50	0.00	1.35	0.00

Program Revenues				
Intergovernmental	\$0	\$20,000	\$0	\$150,000
Other / Miscellaneous	\$0	\$113,435	\$0	\$113,435
Total Revenue	\$0	\$133,435	\$0	\$263,435

Explanation of Revenues

Future Generations Collaborative (FGC) is funded by county general fund, Local Public Health Authority Title V funds, and a Northwest Health Foundation grant. In FY18, Title V support will be increased.

Maternal Child Health Federal Block Grant: \$150,000

Northwest Health Foundation Future Generations Collaborative grant: \$113,435

Significant Program Changes

Last Year this program was: FY 2017: 40057 Future Generations Collaborative

In FY17, this program was 100% funded with general fund. In FY18, 30% of the general fund was replaced with federal Maternal Child Health Title V funding.