| Multnomah County Program #40060 - Community & Adolescent Health FY 2025 F | | | | | |
|---|-------------------|----------------------|----------------|--|--|
| Department: | Health Department | Program Contact: | Charlene McGee | | |
| Program Offer Type: | Operating | Program Offer Stage: | Proposed | | |
| Related Programs: | 40007, 40053 | | | | |
| Program Characteristic | S: | | | | |

Executive Summary

Community & Adolescent Health (CAH) programs aim to reduce the leading preventable causes of death, namely chronic disease (e.g., heart disease, stroke, diabetes) and injuries (e.g., drug overdose, traffic accidents, homicide, suicide). CAH employs place-based strategies that address the shared risk factors for chronic disease and injury and a focus on the particularly formative adolescent stage of the life course, including laying the groundwork for sexual and relationship health. CAH programs focus on the social determinants, neighborhood conditions, trauma, and toxic stress at the root of these adverse health outcomes. CAH leads with the goal of eliminating racial and ethnic health disparities by addressing systemic racism's role in driving socioeconomic and other inequities.

Program Description

Research shows zip code is a key determinant of health. Neighborhoods with socioeconomic disparities (higher poverty, lower educational attainment, disinvestment/gentrification) also have significant health disparities (chronic disease, exposure to violence and trauma, sexual/reproductive health). These geographic patterns also align with racial demographic distribution, highlighting the impact of systemic racism and de facto segregation. CAH works alongside community and school partners to prevent and improve these inequities through community-informed planning; training and technical assistance to build partner capacity; community health worker initiatives; communications; and policy, systems, and environmental improvements.

Programs include: Violence prevention – a public health approach including community-led projects to improve neighborhood livability, youth employment programs, and health education and teen dating violence prevention education in school and community settings. Sexual/relationship health - supporting schools to meet Oregon statutory requirements for comprehensive sexuality and healthy relationship education, child sexual abuse prevention programs, access to preventive reproductive health services, and technical support to culturally specific partners. Chronic diseases prevention - complementing other public health strategies by leveraging shared risk and protective factors for sexual health outcomes and violence that also increase access to healthy eating, active living, and smoke/nicotine-free environments.

CAH analyzes and maps local data on the leading causes of death, sexual health outcomes, incidents and exposure to violence, and other related indicators to identify the subpopulations and neighborhoods experiencing disparities. Analysis reveals stark racial disparities, informing CAH's strategic prioritization of racism's role in chronic disease, sexual health, and violence inequities. CAH centers community involvement and voice through cultivated partnerships, focus groups, needs assessments, and feedback loops to inform and guide program design.

| Measure Type | Performance Measure | FY23 Actual | FY24 Budgeted | FY24 Estimate | FY25 Target |
|-----------------|--|----------------|------------------|------------------|----------------|
| Output | # of youth and community members engaged in health promotion and prevention activities | 16,110 | 8,500 | 9,788 | 5,000 |
| Outcome | # of policies, practices, health education, and technical assistance activities | 739 | 100 | 616 | 100 |
| Outcome | # of community and school sites involved in health promotion and prevention activities | 56 | 75 | 44 | 30 |
| Quality | % of trained adults who feel confident leading comprehensive sexuality/violence prevention education | 99% | 85% | 85% | 85% |

Measures 1 and 2 include school and community settings. Measure 4 is based on feedback from adult participants in school and community trainings.

| | Adopted General Fund | Adopted Other Funds | Proposed General Fund | Proposed Other Funds |
|----------------------|-------------------------|------------------------|--------------------------|-------------------------|
| Program Expenses | 2024 | 2024 | 2025 | 2025 |
| Personnel | \$1,589,529 | \$1,331,072 | \$1,266,315 | \$1,150,103 |
| Contractual Services | \$0 | \$815,500 | \$3,545 | \$59,472 |
| Materials & Supplies | \$59,168 | \$35,560 | \$115,165 | \$14,835 |
| Internal Services | \$322,005 | \$238,172 | \$431,918 | \$207,563 |
| Total GF/non-GF | \$1,970,702 | \$2,420,304 | \$1,816,943 | \$1,431,973 |
| Program Total: | \$4,39 | 1,006 | \$3,248,916 | |
| Program FTE | 11.26 | 8.87 | 8.15 | 7.55 |
| Program Revenues | | | | |
| Intergovernmental | \$0 | \$2,420,304 | \$0 | \$1,431,973 |
| Total Revenue | \$0 | \$2,420,304 | \$0 | \$1,431,973 |

Explanation of Revenues

This program generates \$194,482 in indirect revenues. Direct State - Public Health Modernization \$400,739 Direct Federal - PREVAYL Preventing Violence Affecting Young Lives - \$253,763 Direct Federal - BJA STOP School Violence - \$777,471

Significant Program Changes

Last Year this program was: FY 2024: 40060 Community & Adolescent Health

In FY 2024, CAH experienced the loss of grant funding from the Office of Population Affairs Teen Pregnancy Prevention (TPP) at \$1,455,000 per year. A spring 2023 application for the next round of grant funding was unsuccessful. Some level of services will continue through CAH's ongoing County General Funds, but the program will shift to prioritize work based on limited capacity.