

Lead Agency: Health Department

Program Contact: NORMAN Kathy M

Program Offer Type: Existing Operating

Related Programs:

Program Characteristics: Backfill State/Federal/Grant, Measure 5 Education

Executive Summary

The Adolescent Health Program implements community and school-based parent and youth services, teacher training, and policy development designed to address key health disparities among adolescents that include: teen pregnancy, educational attainment and other health concerns.

Program Description

Teen pregnancy impacts every racial/ethnic group and is one of the primary health indicators for a community. The overall teen pregnancy rate in Multnomah County is higher than the state's rate and when analyzed by race/ethnicity, is significantly higher among Latinas, American Indians, and African Americans when compared to the County as a whole. A recent study of drop out rates in Oregon showed that Multnomah County high schools have the worst graduation rate in the state with dropout rates ranging from 43% to 47%. Teen pregnancy is a factor contributing to dropout rates.

This program works to reduce teen pregnancy and delay the onset of sexual activity and other high risk adolescent behaviors that impact educational attainment. All program components stress prevention and use culturally specific, evidence based, population focused approaches. Component 1) Community Services: Based on the theoretical framework of positive youth development, the program utilizes two best practice models, "Parent-Child Connectedness" & "Lets Talk" to provide educational sessions that increase communication between youth, parents and other supportive adults within the community. While there will be a strong focus on teen pregnancy prevention, healthy relationships, and sexual health (including LGBTQ issues), other topic areas such as violence prevention, bullying, mental health, nutrition/physical activity may be included in programming depending on the community need. Component 2) Teacher Training: Due to ongoing budget deficits, Multnomah County middle schools have eliminated many health teachers and reassigned health education to other areas. The program will support school districts in providing evidence-based comprehensive sexuality education through implementing a teacher training course designed to build classroom teachers skills and abilities to teach sexuality education. Trained teachers will receive CEU credits, resource development and ongoing support for district to meet the Oregon statute on Human Sexuality Education. Component 3) Public Health Policy/Advocacy: The program will work in collaboration with school districts and community organizations to develop policies that strengthen sexual health education and address other prominent issues that are identified through participatory community engagement practices.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY09-10)	Current Year Purchased (FY10-11)	Current Year Estimate (FY10-11)	Next Year Offer (FY11-12)
Output	Number of participants in educational sessions/training	0	0	0	1,200
Outcome	Percent of participants demonstrating increased knowledge	0.0%	0.0%	0.0%	80.0%
Quality	% of participants utilizing skills to increase parent to youth communication	0.0%	0.0%	0.0%	80.0%

Performance Measure - Description

 **Measure Changed**

The performance measures are designed to track efforts to reduce teen pregnancy and delay the onset of sexual activity, and other high risk adolescent behaviors that impact educational attainment. 1) Skill and capacity building will be measured through tracking the number of teachers, community members, and internal partners that successfully complete training and implement the curricula. 2) The percentage of program participants that demonstrate increased knowledge. 3) The percentage of program participants that plan to utilize information, skills, and abilities gained in the program to increase the connection between parents, youth and other supportive adults.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2011	2011	2012	2012
Personnel	\$78,345	\$628,785	\$241,583	\$20,442
Contracts	\$0	\$46,650	\$0	\$0
Materials & Supplies	\$655	\$5,016	\$26,122	\$703
Internal Services	\$0	\$144,292	\$54,465	\$1,914
Total GF/non-GF:	\$79,000	\$824,743	\$322,170	\$23,059
Program Total:	\$903,743		\$345,229	
Program FTE	1.00	7.62	3.00	0.06
Program Revenues				
Indirect for dep't Admin	\$49,044	\$0	\$1,381	\$0
Intergovernmental	\$0	\$824,743	\$0	\$23,059
Total Revenue:	\$49,044	\$824,743	\$1,381	\$23,059

Explanation of Revenues

Adolescent Health Promotion is supported by \$322,170 in county general fund. In FY2011, the program's adopted budget estimated that the federal Community Based Abstinence grant would be renewed. However, Multnomah County was not successful in a competitive grant application process. In addition the Northwest Health Foundation grant expired. For FY2012 the scope of the program was changed and the general fund partially backfills expired grant funds.

Significant Program Changes

✔ Significantly Changed

Last year this program was: #40025, Adolescent Health Promotion

Last year the program had a grant to address teen pregnancy prevention in Multnomah County middle schools and community organizations. The grant ended in September 2010. The program has changed the service model to continue supporting Multnomah County middle schools and community organizations through capacity building, training, targeted community interventions, resource and policy development at a lower cost. As a result of these changes, general fund revenue has increased by \$243,170 while grant support has decreased by \$824,743 and 5.62 FTE.