



# MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST NOTICE OF INTENT

(revised 12/31/09)

APPROVED: MULTNOMAH COUNTY  
BOARD OF COMMISSIONERS  
AGENDA # R-7 DATE 5/27/2010  
YNDA GROW, BOARD CLERK

## Board Clerk Use Only

Meeting Date: 5/27/2010  
Agenda Item #: R-7  
Est. Start Time: 10:25 AM  
Date Submitted: \_\_\_\_\_

**NOTICE OF INTENT to Submit an Application for up to \$1,000,000 to the US Department of Health and Human Services, Office of Adolescent Health, Teenage Pregnancy Prevention: Replication of Evidence-based Programs Grant Competition.**

*Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title sufficient to describe the action requested.*

Requested Meeting Date:	<u>May 27<sup>th</sup>, 2010</u>	Amount of Time Needed:	<u>5 minutes</u>
Department:	<u>Health</u>	Division:	<u>Community Health Services</u>
Contact(s):	<u>Nicole Hermanns and Kathy Norman</u>		
Phone:	<u>503-988-3663</u>	Ext.	<u>26314</u>
	I/O Address:		<u>160/9</u>
Presenter(s):	<u>Nicole Hermanns and Kathy Norman</u>		

## General Information

### 1. What action are you requesting from the Board?

Authorize the Director of the Health Department to submit an application for up to \$1,000,000 to the US Department of Health and Human Services, Office of Adolescent Health, *Teenage Pregnancy Prevention: Replication of Evidence-based Programs Grant Competition*.

### 2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

The provision of evidence-based, medically accurate, and age appropriate sexuality education and relationship skills to students is a critical component of the development of healthy adults and the prevention of unwanted pregnancy and sexually transmitted infection/disease. Within Multnomah County the birth rate in 2007 (the latest data available) for teens ages 15-19 was 35.4 births per 1,000 teen girls. When examined by race/ethnicity, disparities within both the African American (55.6 births per 1,000 teen girls) and Hispanic (104.9 births per 1,000 teen girls) birth rates are

evident when compared to the White non-Hispanic teen birth rate (22.1 births per 1,000 teen girls) (Oregon State data). Teenage pregnancy has lifelong implications for both the mother and the child. Research has shown that “teen mothers are more likely to drop out of school, remain unmarried, and live in poverty; and their children are more likely to be born at low birth weight, grow up poor, live in single-parent households, experience abuse and neglect, and enter the child welfare system” (*By the Numbers: The Public Costs of Teen Childbearing in Oregon*, The National Campaign to Prevent Teen Pregnancy, November 2006). Children born to teen mothers are also more likely to become teen mothers themselves.

To address this problem, MCHD has used grant funding to develop and offer a comprehensive sexual health education program within both public schools and the community for several years. The ability to provide these services with Health Department staff that have extensive experience as sexuality educators increases the efficacy of the intervention and the responsiveness of students. This grant application will allow us to continue to provide sexual health education within 6<sup>th</sup> and 8<sup>th</sup> grade classrooms and continue to provide targeted culturally-specific interventions for high school students within the African American and Hispanic communities. It will also allow us expand and enhance our current program in the following ways:

- MCHD will be able to use the “Making A Difference!” curriculum with 6<sup>th</sup> grade students and the “Making Proud Choices!” curriculum with 8<sup>th</sup> grade students. Both state-approved, evidence-based interventions include 8 distinct modules that cover all of the required sexuality health components mandated by the State of Oregon.
- MCHD will be able to expand its services to provide all 6<sup>th</sup> and 8<sup>th</sup> grade classrooms within the following school districts: Centennial, David Douglas, Gresham-Barlow, Parkrose, Portland Public, and Reynolds.
- MCHD will use the “Teen Health Project” intervention and increase staffing to provide culturally specific services to high school students in both the Hispanic and African American communities to address teen pregnancy disparities.

The combination of a 6<sup>th</sup> grade, 8<sup>th</sup> grade, and a community-based intervention for high school students allows the Health Department to provide our youth with a continuum of sexual health education that supports health life and relationship skills, and is both medically accurate and age appropriate. This grant directly supports Program Offer 40025: Adolescent Health Promotion, and is linked to program offers related to Maternal/Child Health and Early Childhood Services for first time parents and high risk prenatal, infants and children, and Women, Infants and Children (WIC).

**3. Explain the fiscal impact (current year and ongoing).**

This grant would provide the Health Department with up to \$1,000,000 a year, for five years, to continue its school- and community-based teenage pregnancy prevention project within Multnomah County.

**4. Explain any legal and/or policy issues involved.**

None.

**5. Explain any citizen and/or other government participation that has or will take place.**

School districts will support the school-based interventions.

---

## ATTACHMENT A

---

---

### Grant Application/Notice of Intent

---

If the request is a Grant Application or Notice of Intent, please answer all of the following in detail:

- **Who is the granting agency?**

The U.S. Department of Health and Human Services, Office of Adolescent Health.

- **Specify grant (matching, reporting and other) requirements and goals.**

The purpose of this grant is to support the replication of evidence-based program models that have been proven through rigorous evaluation in preventing teenage pregnancy. There are no cost-sharing or matching requirements; regular financial and progress reporting is required; and participation in national evaluation activities is required.

- **Explain grant funding detail – is this a one time only or long term commitment?**

The grant will provide the Health Department with up to \$1,000,000 a year for five years.

- **What are the estimated filing timelines?**

The grant is due on June 1, 2010.

- **If a grant, what period does the grant cover?**

The grant covers a five year project period, from September 30<sup>th</sup>, 2010 – September 29<sup>th</sup>, 2015.

- **When the grant expires, what are funding plans?**

When the grant expires, additional funding will be obtained to support the intervention if it is still determined to be needed.

- **Is 100% of the central and departmental indirect recovered? If not, please explain why.**

100% of the central and department indirect costs will be covered through this grant. Internal services costs associated with the project will also be covered.

---

## ATTACHMENT B

---

---

### Required Signatures

---

Elected Official or  
Department/  
Agency Director:

KaRin Johnson for

05-13-2010

Date:

*Lillian Shirley*



Budget Analyst:

Date: 05/14/10