# ANNOTATED MINUTES

Tuesday, September 17, 1996 - 8:30 AM - 4:30 PM
Justice Center, 14th Floor Conference Room B
1111 SW Second Avenue, Portland

## BOARD RETREAT

*Chair Beverly Stein convened the meeting at 8:40 a.m., with Vice-Chair Dan Saltzman, Commissioners Sharron Kelley, Gary Hansen and Tanya Collier, Peter Ozanne, Michael Schrunk, Ginnie Cooper, Jim McConnell, Tamara Holden, Elyse Clawson, Vickie Gates, Gary Blackmer, Dan Oldham, Tom Fronk, Lolenzo Poe, Larry Nicholas, Carol Wire, Jim Clay, Jeanne Goodrich, Gary Oxman, Bill Wood, Larry Aab, Kelly Bacon, Pamela Wev, Jim Carlson, Meganne Steele, John Hutzler, Karyne Dargan, Chris Tebben, Wendy Byer, Anthony Rainey, Jan Sinclair, Mike Oswald, John Legry, Robert Trachtenberg, Tom Darby, Cameron Tyler-Vaughan, Barry Crook, Bill Farver, Dave Warren, Chiquita Rollins, Carol Ford, Mary Li, Mike Delman, Cilla Murray, Ed Metzler, Carolyn Marks Bax and Tom Simpson present.*

JM-1  The Multnomah County Board of Commissioners Will Meet with Other Elected Officials and Department Directors to Review Multnomah County Benchmarks Trends and to Select "Breakthrough" Benchmarks. The Breakthrough Benchmarks Will Provide Direction for the Upcoming Cross-Functional Strategic Planning Process and the Fiscal Year 1997-98 Budget Process. Facilitated by Jeff Luke and Carol M. Ford.

*JEFF LUKE, CAROL FORD, JIM CLAY, CILLA MURRAY, PRESENTATION AND RESPONSE TO GROUP QUESTIONS AND DISCUSSION.*

*At 9:18 a.m. participants convened into three small discussion groups. The full group reconvened at 10:15 a.m.*

*The meeting recessed for lunch at 12:00 p.m. and reconvened at 1:15 p.m.*

*The meeting recessed at 2:40 p.m. and reconvened at 2:50 p.m.*

*JEFF LUKE AND CAROL FORD RECAP OF BOARD RETREAT, WHICH RESULTED IN TWO VISION GOALS: SENSE OF PERSONAL OPPORTUNITY/SUCCESS; AND SENSE OF SAFETY*

*IN COUNTY. THREE LONG TERM BENCHMARKS: INCREASE HIGH SCHOOL COMPLETION RATE; REDUCE CHILDREN LIVING IN POVERTY; AND REDUCE CRIME. FIVE ULTIMATE BREAK-THROUGH BENCHMARKS: INCREASE NUMBER OF CHILDREN MEETING DEVELOPMENTAL STANDARDS AT KINDERGARTEN; ASSURE LOVING ADULT FOR EVERY CHILD; REDUCE DOMESTIC VIOLENCE; REDUCE JUVENILE CRIME; AND REDUCE TEEN PREGNANCIES. NEXT STEPS: OCTOBER 23 - DEPARTMENT STRATEGIC PLANNING WORK SESSION. NOVEMBER 5 - ELECTION DAY. NOVEMBER 12 – BOARD FINANCIAL UPDATE AND STRATEGIC PLANNING REVIEW. NOVEMBER 14 & 15 – DEPARTMENT STRATEGIC PLANNING WORK SESSIONS. DECEMBER & JANUARY – BUDGET DEVELOPMENT.*

*There being no further business, the meeting was adjourned at 3:10 p.m.*

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Thursday, September 19, 1996 - 9:30 AM
Multnomah County Courthouse, Room 602
1021 SW Fourth, Portland

## REGULAR MEETING

*Commissioner Sharron Kelley convened the meeting at 9:39 a.m., with Commissioners Gary Hansen and Tanya Collier present, Chair Beverly Stein excused, and Vice-Chair Dan Saltzman arriving at 9:40 a.m.*

## CONSENT CALENDAR

*UPON MOTION OF COMMISSIONER HANSEN, SECONDED BY COMMISSIONER COLLIER, THE CONSENT CALENDAR (ITEMS C-1 THROUGH C-6) WAS APPROVED WITH COMMISSIONERS HANSEN, COLLIER AND KELLEY VOTING AYE.*

## DEPARTMENT OF LIBRARY SERVICES

C-1   Intergovernmental Revenue Agreement 600077 with Clackamas County, Multnomah County and Washington County, for Reciprocal Public Library Services to the Residents Each County

## DEPARTMENT OF JUVENILE JUSTICE SERVICES

C-2   Intergovernmental Revenue Agreement 700247 with the Oregon Youth Authority, for Utilization of 32 Detention Bed Spaces for the Detention of Juveniles Referred to the Oregon Youth Authority

## DEPARTMENT OF COMMUNITY AND FAMILY SERVICES

C-3   Intergovernmental Revenue Agreement 102897 with the City of Portland, Bureau of Housing and Community Development, Providing Omnibus Funding for Homeless, Housing, Public Safety, and Youth Employment and Empowerment Programs

C-4   Budget Modification DCFS 4 Transferring $20,000 from General Fund Contingency to the Behavioral Health Program, Children's Mental Health Pass Through Budget to be Contracted Out to the Morrison Center as Required Match for a Robert Wood Johnson Grant

## DEPARTMENT OF ENVIRONMENTAL SERVICES

C-5   FINAL ORDER CU 1-96; HV 1-96; SEC 1-96 Affirming the June 14, 1996 Hearings Officer Decision Subject to Certain Modifications and Additional Findings

### ORDER 96-163.

C-6   Amendment 1 to Intergovernmental Agreement 300636 with CH2M HILL, INC., Increasing the Amount of the Contract by an Additional $13,000 and Extending the Termination Date in Connection with the 207th Connector Unit 3 Project

## REGULAR AGENDA

## PUBLIC COMMENT

*Vice-Chair Dan Saltzman arrived at 9:40 a.m.*

R-1   Opportunity for Public Comment on Non-Agenda Matters.  Testimony Limited to Three Minutes Per Person.

*DIANNA ROBERTS REQUESTED INFORMATION REGARDING THE BOARD VOTE ON THE VALERIE YOUNG ADULT CARE HOME CASE.*

## DEPARTMENT OF SUPPORT SERVICES

R-2  PROCLAMATION Proclaiming the Week of September 22 - 28, 1996 as MINORITY ENTERPRISE DEVELOPMENT WEEK in Multnomah County, Oregon

> *COMMISSIONER COLLIER MOVED AND COMMISSIONER KELLEY SECONDED, APPROVAL OF R-2. JERRY WALKER AND GRACE GALLEGOS EXPLANATION. PROCLAMATION READ. BOARD COMMENTS IN SUPPORT. PROCLAMATION 96-164 UNANIMOUSLY APPROVED.*

*The meeting was recessed at 9:50 a.m. for group photos and reconvened at 9:52 a.m.*

## SHERIFF'S OFFICE

R-3  Intergovernmental Agreement 800427 with the Housing Authority of Portland, City of Portland Police Bureau and Multnomah County Department of Community and Family Services, for Law Enforcement and Prevention Services to Housing Authority Properties

> *COMMISSIONER KELLEY MOVED AND COMMISSIONER COLLIER SECONDED, APPROVAL OF R-3. MEL HEDGPETH EXPLANATION AND RESPONSE TO BOARD QUESTIONS AND COMMENTS. AGREEMENT UNANIMOUSLY APPROVED.*

## NON-DEPARTMENTAL

R-4  Board Decision and Consideration of an ORDER Regarding the Appeal of Luis Solomon from the Hearings Officer Decision on an Adult Care Home License. **OPTION 1** Schedule a Hearing to Accept Evidence or Argument on this Appeal; OR **OPTION 2** Decide this Appeal on the Record that has Already Been Created.  MCC Section 8.90.090 (J) and Section 890-90-450 of the

Administrative Rules for Licensure of Adult Care Homes Give the Board
Discretion to Follow Either Course.

> *BOARD ATTORNEY PETE KASTING EXPLANATION
> OF BOARD OPTIONS AND RESPONSE TO BOARD
> QUESTIONS REGARDING PROCEDURE.
> FOLLOWING DISCUSSION, BOARD CONSENSUS
> TO ALLOW INTERESTED PARTIES THREE
> MINUTES EACH TO PRESENT TESTIMONY PRIOR
> TO CONSIDERATION OF THE OPTIONS.
> RAINBOW ADULT FOSTER CARE CENTER CO-
> OPERATOR LUIS SOLOMON TESTIMONY IN
> SUPPORT OF A REVERSAL OF THE REVOCATION
> OF HIS ADULT CARE HOME LICENSE. DIANNA
> ROBERTS TESTIMONY IN SUPPORT OF A
> REVERSAL OF THE REVOCATION OF MR.
> SOLOMON'S ADULT CARE HOME LICENSE.
> ADULT CARE HOME ATTORNEY KATIE GAETJENS
> TESTIFIED THAT THE RECORD CONTAINS CLEAR
> REASONS FOR THE REVOCATION, THAT MR.
> SOLOMON HAD AN OPPORTUNITY TO
> PARTICIPATE AT THAT TIME, AND THAT IT
> WOULD BE INAPPROPRIATE TO START OVER
> AGAIN. COMMISSIONER SALTZMAN ADVISED HE
> MAY KNOW A RESIDENT OF THE RAINBOW
> ADULT FOSTER CARE HOME AND WILL
> THEREFORE ABSTAIN FROM VOTING.
> COMMISSIONER COLLIER MOVED AND
> COMMISSIONER HANSEN SECONDED, TO DECIDE
> THE APPEAL ON THE RECORD, AND TO UPHOLD
> THE HEARINGS OFFICER DECISION. AT THE
> REQUEST OF MR. KASTING, COMMISSIONERS
> COLLIER AND HANSEN ADVISED THE MOTION
> INCLUDES ADOPTION OF THE ORDER PREPARED
> IN THIS MATTER. FOLLOWING DISCUSSION
> WITH MR. KASTING AND AT THE REQUEST OF
> COMMISSIONER KELLEY, MR. SOLOMON WAS
> GIVEN ADDITIONAL TIME TO SPEAK. MR.
> SOLOMON EXPLAINED HE WAS OUT OF TOWN
> BECAUSE HIS MOTHER WAS ILL AT THE TIME OF
> THE HEARING. MS. GAETJENS ADVISED THAT
> MR. SOLOMON HAD AN OPPORTUNITY TO HAVE A
> CONFERENCE CALL HEARING. COMMISSIONERS*

*KELLEY AND HANSEN COMMENTED IN SUPPORT OF THE HEARINGS OFFICER DECISION, ADVISING THEY BASED THEIR DECISION ON THE EVIDENCE IN THE RECORD WHICH WAS SERIOUS AND VERY SUBSTANTIAL. ORDER 96-165 REGARDING DENIAL OF THE ADULT CARE HOME LICENSE APPLICATION OF LUIS SOLOMON WAS APPROVED, WITH COMMISSIONERS KELLEY, HANSEN AND COLLIER VOTING AYE, AND VICE-CHAIR SALTZMAN ABSTAINING.*

R-5   Board Decision and Consideration of an ORDER Regarding the Appeal of Essie Rene Askew from the Hearings Officer Decision on an Adult Care Home License. **OPTION 1** Schedule a Hearing to Accept Evidence or Argument on this Appeal; OR **OPTION 2** Decide this Appeal on the Record that has Already Been Created. MCC Section 8.90.090 (J) and Section 890-90-450 of the Administrative Rules for Licensure of Adult Care Homes Give the Board Discretion to Follow Either Course.

*RAINBOW ADULT FOSTER CARE CENTER OWNER/OPERATOR ESSIE RENE ASKEW TESTIMONY IN SUPPORT OF A REVERSAL OF REVOCATION OF HER ADULT CARE HOME LICENSE. ADULT CARE HOME ATTORNEY KATIE GAETJENS TESTIFIED THAT THE RECORD IS COMPLETE AND CONTAINS CLEAR REASONS FOR THE REVOCATION, THAT STAFF WENT TO THE HOME ON MANY OCCASIONS, AND NUMEROUS AND SERIOUS VIOLATIONS HAVE OCCURRED. DIANNA ROBERTS TESTIMONY IN SUPPORT OF A REVERSAL OF THE REVOCATION OF MS. ASKEW'S ADULT CARE HOME LICENSE, AND ALLEGING CITY AND COUNTY STAFF MISCONDUCT. COMMISSIONER COLLIER MOVED AND COMMISSIONER HANSEN SECONDED, TO DECIDE THE APPEAL ON THE RECORD, TO UPHOLD THE HEARINGS OFFICER DECISION, AND ADOPTION OF THE ORDER PREPARED IN THIS MATTER. AT THE REQUEST OF COMMISSIONER KELLEY, MS. ASKEW WAS GIVEN ADDITIONAL TIME TO SPEAK. MS. ASKEW TESTIFIED THAT SHE HAS WORKED HARD TO*

*MAKE THIS BUSINESS SUCCESSFUL AND IN RESPONSE TO A QUESTION OF COMMISSIONER HANSEN, ADVISED SHE DID NOT ATTEND THE HEARING AS SHE HAD TO WORK AT NABISCO THAT DAY. MS. GAETJENS ADVISED THAT WRITTEN NOTIFICATION WAS PROVIDED TO MS. ASKEW AND THAT THE HEARING PROCEDURES ARE SPELLED OUT VERY CLEARLY IN BOLD FACE WRITING. COMMISSIONER KELLEY COMMENTED IN SUPPORT OF THE MOTION, ADVISING MEDICATION MISMANAGEMENT IS A SERIOUS LIFE-THREATENING ISSUE. ORDER 96-166 REGARDING DENIAL OF THE ADULT CARE HOME LICENSE APPLICATION OF ESSIE ASKEW WAS APPROVED, WITH COMMISSIONERS KELLEY, HANSEN AND COLLIER VOTING AYE, AND VICE-CHAIR SALTZMAN ABSTAINING.*

*There being no further business, the meeting was adjourned at 10:40 a.m.*

BOARD CLERK FOR MULTNOMAH COUNTY, OREGON

*Deborah L. Bogstad*

# MULTNOMAH COUNTY OREGON

# AGENDA

## MEETINGS OF THE MULTNOMAH COUNTY BOARD OF COMMISSIONERS

## FOR THE WEEK OF

## SEPTEMBER 16, 1996 - SEPTEMBER 20, 1996

*Thursday Meetings of the Multnomah County Board of Commissioners are \*cablecast\* live and taped and can be seen by Cable subscribers in Multnomah County at the following times:*

*Thursday, 9:30 AM, (LIVE) Channel 30*
*Friday, 10:00 PM, Channel 30*
*Sunday, 1:00 PM, Channel 30*

*\*Produced through Multnomah Community Television\**

*INDIVIDUALS WITH DISABILITIES MAY CALL THE OFFICE OF THE BOARD CLERK AT 248-3277 OR 248-5222, OR MULTNOMAH COUNTY TDD PHONE 248-5040, FOR INFORMATION ON AVAILABLE SERVICES AND ACCESSIBILITY.*

*AN EQUAL OPPORTUNITY EMPLOYER*

*Tuesday, September 17, 1996 - 8:30 AM - 4:30 PM*
*Justice Center, 14th Floor Conference Room B*
*1111 SW Second Avenue, Portland*

## BOARD RETREAT

JM-1    *The Multnomah County Board of Commissioners Will Meet with Other*
        *Elected Officials and Department Directors. to Review Multnomah*
        *County Benchmarks Trends and to Select "Breakthrough" Benchmarks.*
        *The Breakthrough Benchmarks Will Provide Direction for the Upcoming*
        *Cross-Functional Strategic Planning Process and the Fiscal Year 1997-*
        *98 Budget Process. Facilitated by Jeff Luke and Carol M. Ford.*

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*Thursday, September 19, 1996 - 9:30 AM*
*Multnomah County Courthouse, Room 602*
*1021 SW Fourth, Portland*

## REGULAR MEETING

### CONSENT CALENDAR

### DEPARTMENT OF LIBRARY SERVICES

C-1     *Intergovernmental Revenue Agreement 600077 with Clackamas County,*
        *Multnomah County and Washington County, for Reciprocal Public*
        *Library Services to the Residents Each County*

### DEPARTMENT OF JUVENILE JUSTICE SERVICES

C-2     *Intergovernmental Revenue Agreement 700247 with the Oregon Youth*
        *Authority, for Utilization of 32 Detention Bed Spaces for the Detention of*
        *Juveniles Referred to the Oregon Youth Authority*

### DEPARTMENT OF COMMUNITY AND FAMILY SERVICES

C-3     *Intergovernmental Revenue Agreement 102897 with the City of Portland,*
        *Bureau of Housing and Community Development, Providing Omnibus*
        *Funding for Homeless, Housing, Public Safety, and Youth Employment*
        *and Empowerment Programs*

C-4     *Budget Modification DCFS 4 Transferring $20,000 from General Fund*
        *Contingency to the Behavioral Health Program, Children's Mental*

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*Health Pass Through Budget to be Contracted Out to the Morrison Center as Required Match for a Robert Wood Johnson Grant*

## DEPARTMENT OF ENVIRONMENTAL SERVICES

C-5      *FINAL ORDER CU 1-96; HV 1-96; SEC 1-96 Affirming the June 14, 1996 Hearings Officer Decision Subject to Certain Modifications and Additional Findings*

C-6      *Amendment 1 to Intergovernmental Agreement 300636 with CH2M HILL, INC., Increasing the Amount of the Contract by an Additional $13,000 and Extending the Termination Date in Connection with the 207th Connector Unit 3 Project*

## REGULAR AGENDA

## PUBLIC COMMENT

R-1      *Opportunity for Public Comment on Non-Agenda Matters. Testimony Limited to Three Minutes Per Person.*

## DEPARTMENT OF SUPPORT SERVICES

R-2      *PROCLAMATION Proclaiming the Week of September 22 - 28, 1996 as MINORITY ENTERPRISE DEVELOPMENT WEEK in Multnomah County, Oregon*

## SHERIFF'S OFFICE

R-3      *Intergovernmental Agreement 800427 with the Housing Authority of Portland, City of Portland Police Bureau and Multnomah County Department of Community and Family Services, for Law Enforcement and Prevention Services to Housing Authority Properties*

## NON-DEPARTMENTAL

R-4      *Board Decision and Consideration of an ORDER Regarding the Appeal of Luis Solomon from the Hearings Officer Decision on an Adult Care Home License.* **OPTION 1** *Schedule a Hearing to Accept Evidence or Argument on this Appeal; OR* **OPTION 2** *Decide this Appeal on the Record that has Already Been Created. MCC Section 8.90.090 (J) and Section 890-90-450 of the Administrative Rules for Licensure of Adult Care Homes Give the Board Discretion to Follow Either Course.*

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# AGENDA PLACEMENT FORM

SUBJECT: _Multnomah County Benchmarks_

BOARD BRIEFING:                    DATE REQUESTED: _Sept. 17, 1996_
                                   REQUESTED BY: _Carol M. Ford_
                                   AMOUNT OF TIME NEEDED: _7 hrs (8:30 - 12:00; 1:00 -_
                                   _4:30)_

REGULAR MEETING:                   DATE REQUESTED: _____

                                   AMOUNT OF TIME NEEDED: _____

DEPARTMENT: _Non Departmental_          DIVISION: _Office of the Chair_

CONTACT: _Carol M. Ford_                TELEPHONE #: _248-3956_
                                        BLDG/ROOM #: _106/1515_

PERSON(S) MAKING PRESENTATION: _Facilitators: Jeff Luke and Carol M. Ford, County_
_staff_

## ACTION REQUESTED:

[ ] INFORMATIONAL ONLY   [X] POLICY DIRECTION   [ ] APPROVAL   [ ] OTHER

## SUGGESTED AGENDA TITLE:

The Multnomah Board of County Commissioners will meet with other county elected officials and department directors to review Multnomah County benchmarks trends and to selection "breakthrough" benchmarks. The breakthrough benchmarks will provide direction for the upcoming cross-functional strategic planning process and the FY1997-98 budget process.

96 SEP 10 PM 1: 56
MULTNOMAH COUNTY
OREGON
BOARD OF
COUNTY COMMISSIONERS

## SIGNATURES REQUIRED:

ELECTED
OFFICIAL: _Beverly Stein_
(OR)
DEPARTMENT
MANAGER: _____

### ALL ACCOMPANYING DOCUMENTS MUST HAVE REQUIRED SIGNATURES

12/95

# Multnomah Board of County Commissioners
# Benchmark Retreat

**8:30 - 4:30**
**Justice Center, 14ᵗʰ Floor, Conference Room B**
**September 17, 1996**

Included in this packet:

**I.   Agenda Outline**

**II.  Benchmark Trends Reports:**
- 10 Multnomah County Urgent Benchmarks
  _8 Multnomah Commission on Children and Families (MCCF) benchmarks*
  18

    *MCCF has 15 children and family benchmarks.  Seven directly overlap the County's
    urgent benchmarks; eight remaining have also been included.

- This packet also includes the Public Safety and Service Access benchmarks.
  (Access to Mental Health Services to be distributed later this week).

- The children and families benchmarks summaries distributed for the MCCF
  meetings are still basically the same.  Only minor changes have been made.

- Good Government benchmarks have not been included in this packet:
      Increase County Work Force And Contractor Diversity
      Increase County Government Accountability & Responsiveness

  It is assumed that these benchmarks will be integrated into the planning and
  implementation around whichever breakthrough benchmarks are selected.

**III. Complete List of All 85 Multnomah County Benchmarks**

**IV.  "Community Advice on Human Investments"**, from the Office of the Governor.
  Summary of the results from a series of meetings held to discuss local community
  priorities.

**AGENDA OUTLINE FOR**
**SEPTEMBER 17, 1996 BENCHMARKS RETREAT**                    **Sept 3, 1996**

| Time | Length | Activity | Participant |
|------|--------|----------|-------------|
| 8:30 | 15 mins | **Introductions/Agenda** | Chair Stein<br>Facilitator: Jeff Luke<br>Total Group: BCC, Electeds, Dept. Heads, Op. Council, staff |
| 8:45 | 30 mins | **Review:**<br>Expectations, Process and Q & A | Jeff Luke<br>Total Group |
| 9:15 | 1 hr | **Interrelationships and Linkages.**<br>First Impressions/Understanding:<br>    Which ones influence or drive<br>        other benchmarks?<br>    Which ones are the ultimate<br>        outcomes? | Group Exercise<br>    Jeff Luke<br>    Board of Co. Commissioners<br>    Electeds<br>    Dept. Heads |
| 10:15 | 15 mins | Break | |
| 10:30 | 1.5 hrs | **20 Benchmarks - Trends.**<br>    Discussion. Gaps. New Info.<br>    Linkages to other benchmarks. | Jeff Luke, Carol Ford, Karyne<br>    Dargan, Wendy Byers, Jim Clay,<br>    Chris Tebbin.<br>Total Group |
| 12:00 | | Lunch | |
| 1:00 | 1 hr. and 15 mins | **Rethink Benchmark Linkages.**<br>    - Greatest leverage/influence.<br><br>    - Most affected by other<br>        benchmarks. | Back to Group Exercise:<br>    Jeff Luke<br>    Board of Co. Commissioners<br>    Electeds<br>    Dept. Heads |
| 2:15 | 15 mins | Break | |
| 2:30 | 30 mins | **Criteria for selecting "breakthrough" benchmarks.**<br>Examples:<br>    - Leverage<br>    - Urgency<br>    - Balanced agenda | Jeff Luke<br>Board of Co. Commissioners |
| 3:00 | 60 mins | **Selection of "breakthrough" benchmarks.** | Jeff Luke<br>Board of Co. Commissioners |
| 4:00 | 30 mins | **Next Steps**<br>    Strategic planning by depts and<br>        agencies (Oct, Nov) | Jeff Luke<br>Board of Co. Commissioners<br>Electeds<br>Dept. Heads<br>Operating Council |

## BENCHMARK TREND REPORTS

### Multnomah Board of County Commissioners
*Benchmarks Retreat - September 17, 1996*

INCREASE ADEQUATE PRENATAL CARE

**MULTNOMAH COUNTY (Not an Urgent Benchmark):**
Prenatal Care - Percentage of babies whose mothers received adequate prenatal care beginning in the first trimester.

**COMMISSION ON CHILDREN AND FAMILIES:**
Increase Prenatal Care.

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Increase the percentage of healthy birthweight babies.

**I.    Why It Is Important**

Timely prenatal care significantly increases the likelihood of a healthy infant of normal birthweight. Delaying prenatal care increases the health risk for both mother and baby. Healthy babies are dependent on a variety of factors - adequate prenatal care, born drug-free, a healthy birthweight, and mothers' lifestyles. Healthy babies have fewer birth defects, disabilities and other long-term complications. These may result in significant healthcare costs and may also affect the baby's developmental future, including readiness for school.

**II.   Benchmark Data**

- Current benchmarks look at healthy birth outcomes through adequate prenatal care and percent of low birthweight babies. Adequate prenatal care is defined as care starting in the first trimester of pregnancy. Low birthweight is defined as less than 5.5 lb. at birth.

- Oregon Vital Statistics Annual Report for 1994 shows:

| For 1994 | Oregon | | Multnomah Co. | |
|---|---|---|---|---|
| Total Population | 3,082,000 | | 620,000 | (20% of the state's total) |
| Total Live Births | 41,832 | | 8,903 | (21% of state's total) |
| # of low birthweight babies | 2,217 | (5% of all live births) | 524 | (6% of county births) |
| # of infants that received 1st trimester prenatal care | 33,016 | (79% of all live births) | 6,933 | (78% of county births) |
| # of infants that received inadequate prenatal care. [1] | 2,376 | (6% of all live births) | 536 | (6% of all county births) |

[1] Less than five prenatal care visits or care started in the third trimester.

- Rate of Births Below Normal Birth Weights (Under 5.5 lbs.). Rates have stayed fairly stable over several years.

*From the Portland Multnomah Progress Board 1996 Annual Report*



**Rate of Births Below Normal Birth Weight**
Multnomah County 1990-1994
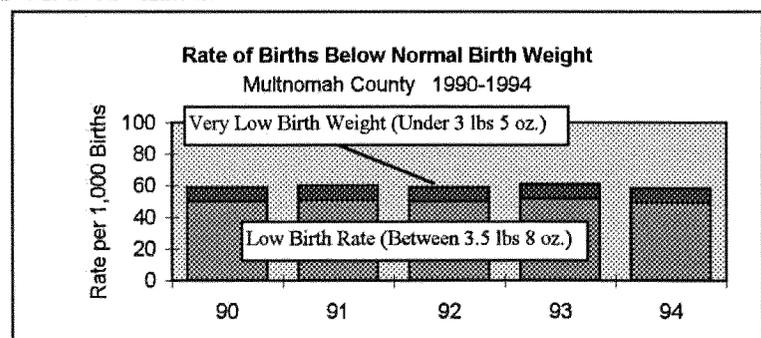
- The Portland Multnomah Progress 1996 report also shows birthweight trends and difference by race/ethnicity and by geographical area for Multnomah County:

  African Americans have the highest rate per 1,000 of low birthweight babies, twice the rate for whites (52.4, the lowest rate for the County). Also the African American infant mortality rate is 3 times the rate for white.

  Looking by geographic area, east Portland has the highest rate of low birth weight babies. Gresham and the remainder of Multnomah County have the lowest rates.

## III. Key Trends and Issues

### Low Birth Weight Trends
- The Casey Foundation's Children's Count Data Book shows that from 1985 through 1993, the rate of low birthweight babies (as a percentage of all babies born) has gotten worse. The national percentage increased from 6.8 to 7.2 (6% worse) while Oregon increased from 5.1 to 5.2 (2% worse). Multnomah County's rate has not varied much over the last five years from the current 6% level.

### Prenatal Care Trends
- Since 1989, Multnomah County has shown improvement in the percent of women who received adequate prenatal care, from 74.7% in 1989 to 77.6% in 1994. However, the rate of improvement varies by race/ethnicity and women with different risk factors. The state's 1994 rate was 79%.

- Age and education are also closely related to patterns of prenatal care. Women under 15 and women without a high school education are least likely to get adequate prenatal care.

### Ability to Improve Trends
- In 1995, Oregon achieved 95% of all births at healthy birth weights. A U. of O. study concluded that it may be prohibitive to reach the state's benchmark target of 97% due to the difficulty of "squeezing out the last 5% of anything." The study could not identify any policy path that would achieve 97%. Since Multnomah County is currently at 94%, is it in the same status as the state? Once the last 1-2% is achieved, how realistic will it be to focus on reaching an higher level?

### Interrelationships
- The U. of O. study also concluded that at the state level only weak relationships existed between teen pregnancies, smoking, drinking, and inadequate prenatal care. It estimated that if there had been no teenage pregnancies, if none of the adult mothers had smoked or drank, and if all had received adequate prenatal care, Oregon's rate of healthy birthweight babies would have only reached 96%.

- Locally, differences in "healthy babies" outcomes indicate that race/ethnic groups and geography may require targeted strategies. "Healthy babies" strategies could be designed for specific communities.

  For example, there could be focus on the disparity shown between African American low birth weight babies and infant mortality to the rates of communities. Data on Hispanic mothers shows that they tend to have low rates of adequate prenatal care but have a fairly high rate of healthy birthweight babies. This may be due to a healthy lifestyle; they tend to smoke and take drugs less and practice better nutrition habits than other groups. A focus on healthy lifestyle issues such as nutrition, smoking, alcohol and drug treatment, etc. may help increase the number of healthy babies with other communities.

- According to the US Office of Technology Assessment, the healthcare system saves $14,000-$30,000 in hospitalization and long-term healthcare costs for every low birth weight avoided through early or comprehensive prenatal care.

**Data Limitations**
- Prenatal care data is collected through self-reported birth certificate information provided by the mother. Only the starting date and number of prenatal care visits are collected; it does not address type of care visits. there is no assurance that "adequate" care is being received (for example simple office welfare visits may be counted.) The validity and accuracy of the data is questionable, probably overstated.

IV. **Desired Continuum Of Services And Support For Achieving The Benchmark**
Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

**Major system elements**
- Preconception Care
- Family Planning
- Early Identification or Pregnancy
- Access to Comprehensive Prenatal Care

**Potential strategies**
- Early identification of pregnancy, access to services.
- Teen pregnancy prevention programs
- Universal health care, including alcohol & drug treatment
- Targeted programs design for specific communities and populations at risk
- Community & social support networks and outreach.
- Transportation and childcare support
- Education and risk assessment. Psychosocial intervention

- Cultural and attitude changes (elimination of sexism)
- Health and nutrition education
- Home visits
- Care coordination with Human Services

V.   **Sources Used:**
- Wellness Team
- MCCF 1994 Comprehensive Plan
- Portland Multnomah Progress Board, <u>1996 Annual Report</u>
- The Annie E. Casey Foundation - 1996 Kids Count Data Book;
- 1996 Status of Children - County Data, Children First for Oregon
- Profiles of Oregon Counties, 1996 Edition, Oregon Dept of Education
- Oregon Vital Statistics Report 1994

4

## REDUCE ADOLESCENTS' USE OF TOBACCO, ALCOHOL AND OTHER DRUGS

**MULTNOMAH COUNTY (An Urgent Benchmark):**
Reduce Student Alcohol and Drug Use.
   a. % of students free of involvement with alcohol in the previous month.
   b. % of students free of involvement with illicit drugs in the previous month.
   [both of the above measured at 8th and 11th grades]

**COMMISSION ON CHILDREN AND FAMILIES:**
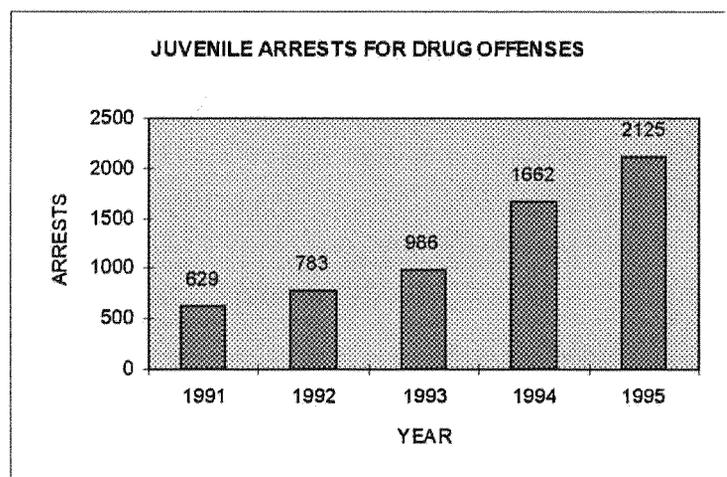Reduce adolescents' use of tobacco, alcohol and other drugs.

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Increase the % of students not involved with alcohol, illicit drugs, and/or tobacco.

## I.    Why it is Important

The abuse of alcohol and other drugs among young people is once again increasing in Oregon, following a national trend. Adolescent substance abuse harms individual growth and development, and imposes staggering financial and social costs to society. Although substance abuse is not the direct cause of delinquency, nor is delinquency the direct cause of substance abuse, they have similar root causes, including nonfunctional family structure, negative peer associations and influences, lack of commitment to school, psychosocial attributes, unemployment, and social class and racism. Injection drug use is a key predictor of HIV transmission.

## II.    Benchmark Data

- More than half of seventh grade students in Portland Public Schools reported having used alcohol, and most of them cited "home" as their source.

- The Oregon Medical Examiner's office has reported that drug related deaths in Multnomah County nearly doubled between 1993-1995.

- A survey of Multnomah County residents conduced by the Regional Drug Institute concludes that 40% of all families have experienced an alcohol problem, and 25% have experienced a drug problem.



**JUVENILE ARRESTS FOR DRUG OFFENSES**

| Year | Arrests |
|------|---------|
| 1991 | 629 |
| 1992 | 783 |
| 1993 | 986 |
| 1994 | 1662 |
| 1995 | 2125 |

Source: Drug Impact Index, Regional Drug Initiative

## REDUCE ADOLESCENTS' USE OF TOBACCO, ALCOHOL AND OTHER DRUGS

**III. Key Trends and Issues**

- The Regional Drug Initiative, in operation since 1987, serving as the lead convener on issues related to alcohol and other drugs, has recently lost the majority of its funding, but may continue at a lesser level.

- Some of the most severe and habitual drug abusing behavior, involving needles for injecting drugs, is widespread among Multnomah County young people who are homeless and not attending school. Their concerns are never included in surveys of students who serve as the majority of data gathering subjects. This population, estimated in 1991 to be as high as 2,000 and increasing, faces extraordinarily high risks of HIV infection. Consideration is needed about additional HIV risks, knowing that many of these youth work in prostitution, employed by middle- and upper-class adult males.

- Heavy drinking among youth has been conclusively linked to fights, property destruction, academic and employment problems, and trouble with the law.

**IV. Desired continuum of services and support for achieving benchmark**

Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- Support drug-free lives
- Promote drug-free neighborhoods
- Increase the number of drug-free workplaces
- Encourage responsibility
- Promote positive social attitudes
  (Source: Regional Drug Initiative objectives, July, 1996)

**V. Sources Used**

- Wellness Team
- Drug Impact Index, 7th Edition, July, 1996, Regional Drug Initiative
- The Case for Support, Regional Drug Initiative
- Service Plan for Displaced Youth, 1991, Tri-county Youth Services Consortium and Multnomah County Department of Social Services, Youth Program Office
- 1996 Annual Report, Portland Multnomah Progress Board
- 1995 Youth Risk Behavior Survey, Summary Report, ODE, ODHR, CDC&P
- Oregon's 1996 Drug & Violent Crime Strategy, John Kitzhaber, MD, Governor

INCREASING ACCESS TO ALCOHOL & DRUG TREATMENT

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**MULTNOMAH COUNTY (An Urgent Benchmark):**
Increase Drug Treatment Services. % of people seeking alcohol or drug treatment who receive it

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Reduce the percentage of adults who use illegal drugs or abuse alcohol.

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I. **Why It Is Important**

Drug and alcohol abuse affects an individual's well being and health and is associated with a variety of diseases, including cancer, heart, and liver disease. However, individuals who use illegal drugs or abuse alcohol are not the only ones affected by their unhealthy behavior. Drug and alcohol abuse is associated with fires, crimes, drownings, rape, school failure, child abuse, injury, violence, lost productivity and so forth Many families and individuals need access to drug and alcohol treatment to address problems which have far reaching implications - at home, at school and at work. Access is limited by the cost of treatment and the lack of slots, creating waitlists for many services. Lack of access to drug and alcohol treatment can create greater future costs on all Oregonians.
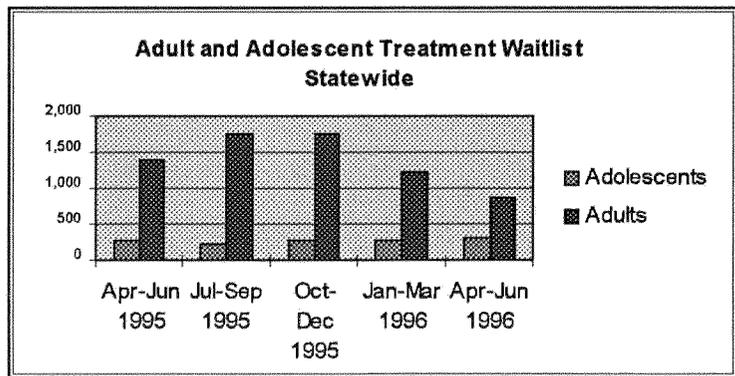
II. **Benchmark Data**

- For most residential services, except for those who can pay the cost of highend treatment and/or those with insurance, there are waiting lists.
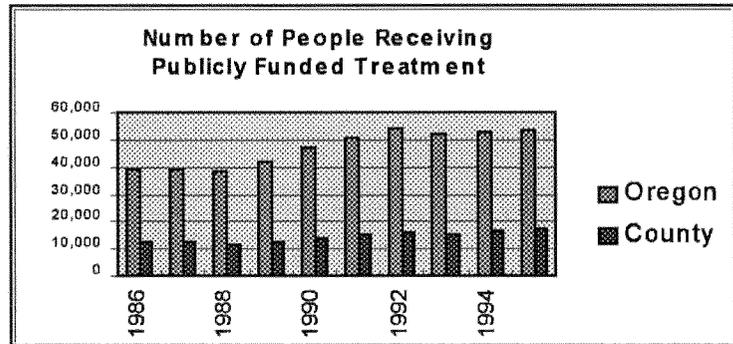


*Regional Drug Initiative, July 1996*

- The number of people treated statewide and in Multnomah County increased consistently from 1988 through 1995 except for a minor decrease in 1993.



*Oregon Office of Alcohol & Drug Abuse Programs, August 1996*

- For the fourth quarter of the FY95-96, June 1996:
    852 adults were on waitlists, of which 210, or 25%, were in Multnomah County.
    294 adolescents were on waitlists, of which 53, or 18%, were in Multnomah County.

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- As of September 5, 1996, there are 922 publicly funded treatment beds/slots available for alcohol and drug treatment.

- Nationally, 25% of all injuries are alcohol-related. Alcohol-related injuries alone cost an estimated $47 billion annually. 25% to 40% of all Americans in general hospital beds are there for alcoholism treatment.

- In Multnomah County, over 60% of arrestees booked into Multnomah County jail over the last several years have tested positive for illegal drugs. Of the females arrested, 71% tested positive , primarily on cocaine. In comparison, 63% of the males tested positive for drugs. Males tends to shoe a greater use of multiple drugs.

## III. Key Trends, Issues & Interrelationships

- Studies show that alcohol and drug prevention and treatment save money. A recent Oregon State Office of Alcohol and Drug Abuse Programs showed that for each dollar spent on alcohol and drug abuse treatment results in a savings of $5.60. A recent national study estimates each dollar invested in prevention saves approximately $15.00.

- Alcohol and drug dependent persons need a wide variety of services to succeed in recovery. This creates linkages between drug and alcohol treatment and
    community corrections
    health care access, especially for pregnant women and women of child-bearing age
    mental health services
    child protection services
    Headstart (early childhood development)
    JOBS welfare reform program

- In Multnomah County, a wide variety of diverse community-based alcohol and drug treatment providers (over 20) offer a wide array of "service delivery units". .

- Also see "Reduce Adolescents' Use of Tobacco, Alcohol and Other Drugs" and Increase Access to Health Care Services" benchmarks.

## IV. Desired Continuum Of Services And Support For Achieving The Benchmark
Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- Holistic approach to providing services, currently being undertaken by the Portland Target City Project:
    Collective problem solving among separate elements of the system

Coordinated treatment resource management

Evaluation and information systems for the service outcomes, through uniform comprehensive individual assessments, information system to track services and clients.

Intensive intervention services to inmates of the county jail and linking them to community treatment upon release.

Better assessment of alcohol and drug needs of people with mental disorders.

Improvement of facilities to meet the needs of physically disabled peo0ple.

Assist in the development of culturally appropriate treatment services, including diversity of personnel.

**V.   Sources Used**
- Portland Multnomah Progress Board, <u>1996 Annual Report</u>
- Oregon Office of Alcohol & Drug Abuse Programs data
- Regional Drug Initiative, <u>July 1996</u> <u>Drug Impact Index</u>
- Portland Target City Project, <u>On Target</u>

**MULTNOMAH COUNTY (An Urgent Benchmark):**
  Drug-Free Babies - Percentage of infants whose mothers did not use illicit drugs, alcohol, or tobacco during pregnancy.

**COMMISSION ON CHILDREN AND FAMILIES:**
  To reduce the number of babies born drug affected.

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
  Increase the percentage of infants whose mothers did not use the following: illicit drugs, alcohol, and/or tobacco during pregnancy.

## I.    Why It Is Important

Children born to mothers who use tobacco, alcohol or drugs during pregnancy show marked differences in health, often with long term implications:
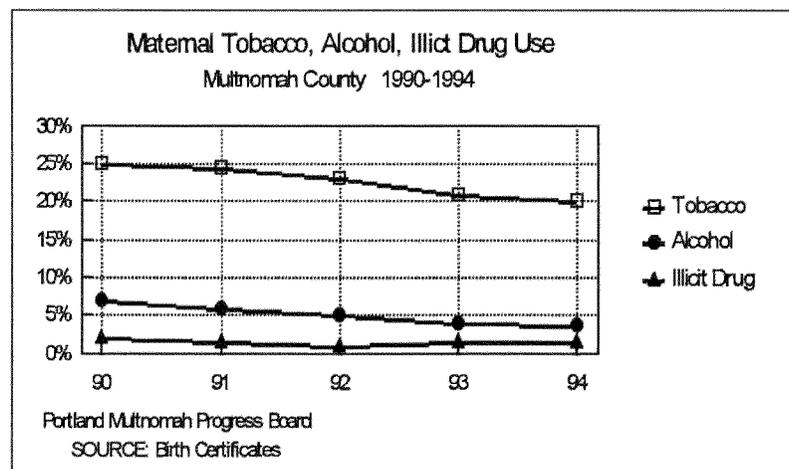
**Drugs:**  Drug exposure puts babies at a greater risk of complications during pregnancy and correlates with low birthweights.  Babies in drug abusing families face greater risks of health problems, inadequate nutrition, and abuse and neglect.

**Alcohol:** Used during pregnancy, alcohol can cause deformity and developmental problems. In the extreme, babies can suffer from fetal alcohol syndrome.  Even as few as two drinks per day during pregnancy has been associated with health problems in a significant share of exposed infants.

**Tobacco:**  Women who smoke when pregnant have a far higher incidence of low birthweight babies than non-smokers.  As with alcohol, there is no know low threshold of safe tobacco use during pregnancy.

## II.    Benchmark Data

- The data above shows that tobacco is used more frequently than alcohol and drugs, although the percentage who smoke has declined over the past five years.

**Maternal Tobacco, Alcohol, Illict Drug Use**
Multnomah County 1990-1994



Portland Multnomah Progress Board
SOURCE: Birth Certificates

- In 1994, over one-third of Oregon resident births were paid for by Medicaid (e.g. the Oregon Health Plan) as compared to just over one-fourth of total births in 1989.

## III. Key Trends and Issues

### Trends

Significant differences in maternal tobacco, alcohol and drug use are seen by age group and by race/ethnicity. This may indicate strategies that target communities to address problem.

- Younger mothers are more likely to smoke than older mothers. In Multnomah County, over 30% of mothers under 19 years smoke during pregnancy; smoking then drops off as age increases (10% of mothers over 40 smoked during pregnancy).

- The percentage of mothers who smoke during pregnancy is markedly different by race/ethnicity. Native Americans, African-Americans and whites are much more likely to smoke than Hispanic or Asian mothers. Also geographic areas show differences; mothers in North Portland and East Portland are more likely to smoke .

- In 1994, Multnomah County's tobacco and alcohol use was higher than state levels. 20.7% of mothers reported they smoked during pregnancy, as compared to 18.1% for the state. 3.3% reported alcohol use during pregnancy, compared to the state's 2.7%.

  However, Multnomah County's tobacco and alcohol use has been declining over the several years, while the state's tobacco and alcohol rate has remained fairly stable over the last three years.

- For Multnomah County, 1.2 % reported using illicit drugs during pregnancy, as compared to 1.1% for the state.

### Reducing Exposure During and After Pregnancy

- While the benchmark focuses only on tobacco, alcohol and drug use during pregnancy, a wider definition to "substance exposure" may be more descriptive of the issue. Substance exposure includes alcohol, nicotine, and the inappropriate use of prescribed/unprescribed and legal/illegal drugs. The goal could be to reduce exposure, both in-utero exposure (during pregnancy) and exposure through living with drug-affected families (environmental exposure).

### Interrelationships

- Increased prenatal care significantly impacts the reduction of babies born drug affected through early pregnancy detection and access to drug and alcohol treatment.

**Data Limitations**

- The data on tobacco, alcohol, and drug use is based on birth certificate information which is self reported by the mother. Because of the social/cultural stigma and the fear of legal issues attached to this information, the validity and accuracy of the data is questionable. Generally birth certificate data is considered to under report alcohol and drug use, but be fairly accurate for tobacco use.

  Multnomah County is currently participating in a statewide study of random sampling technique of newborn merconium which should assist in defining the problem of drug use by pregnant women. In 1994, preliminary results, based on half of the samples, showed a Multnomah County rate of drug use slightly double the rate from birth certificate data.

**IV. Desired Continuum Of Services And Support For Achieving The Benchmark**
Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

**Elements of a System**

- Prenatal outreach and support
- Prenatal care
- Prenatal substance use programs

**Potential Strategies**

- Early identification of pregnancy and access to services, including alcohol and drug treatment. Tailored approaches to specific communities.

- Prenatal outreach for specific populations.

- Cultural and age appropriate promotion for not using substances and prevention/ education.

- Home visit capacity for all pregnant women and for those in need

- Health care access for all pregnant women.

- Case management for pregnant women in treatment. Child care during treatment. Transportation to treatment. Transition between treatment levels.

- Longer Residential programs. Provide more beds/longer stays for mothers with their children at residential treatment facilities.

- Recovery Support: Community/family support. Affordable decent housing. Services for teaching life skills; job training.  Living wage.

- For women who continue to use drugs & alcohol in subsequent pregnancies, and have lost custody of previous children, a different model of services is needed that includes intensive, multidisciplinary, long term support, including working with state agencies.

**V.   Sources Used:**
- Wellness Team
- Multnomah Commission on Children and Families 1994 Comprehensive Plan
- Portland Multnomah Progress Board, 1996 Annual Report
- 1996 Status of Children - County Data, Children First for Oregon
- Oregon Vital Statistics Report 1994

**Other Documents/Areas to Research**
- Fetal Alcohol Study by Ann Streissguth, University of Washington
- Long term effect and costs to county, state & education systems
- Oregon Health Division Prenatal Substance Prevalence and Health Service Needs Study

INCREASE QUALITY CHILD CARE

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**MULTNOMAH COUNTY (Not Urgent Benchmarks):**
Child Care Quality - Percentage of child care facilities which meet established basic standards.
Child Care Availability - Number of identified child care slots available for every 100 children under age 13.

**COMMISSION ON CHILDREN AND FAMILIES:**
Increase Quality Child Care.

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Increase the percentage of child care facilities which meet established basic standards.

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## I. Why It Is Important

Parents want quality care for their children, but many are limited by what they can afford to spend. From the perspective of the child care providers and teachers, affordable fees seldom can buy the quality demanded. Low wages for child care providers increase the turnover and loss of available slots. Setting minimum standards for child care providers is important because it provides some assurance that our children are receiving a basic level of quality day care. Quality child care can play an important part in "readiness for school" and developmental milestones.
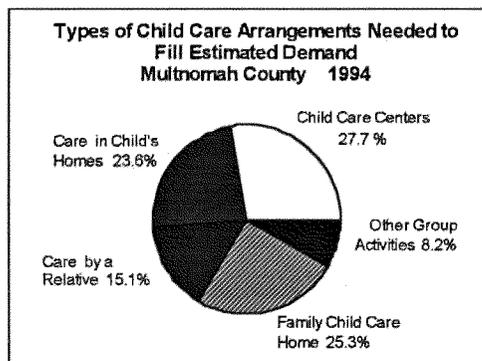
## II. Benchmark Data

- 33% of females who had children under the age of six were working in 1975. By 1993, the percentage working had risen to 53%. (Oregon Labor Trends, January 1996.)

- In Multnomah County, there are a total of 3,784 child care providers. 39% meet basic standards. For the state, 47% of all providers meet basic standards of care.

  In Oregon, group homes and child care centers are required to be certified yearly. Certification includes on-site visits, achieving minimum standards for staff, children's programs, nutrition and meals, discipline and health policies. Other types of child care (family child care, school-age programs and pre-schools) must register, requiring only agreement with state child care guidelines, an adult over 18 and a criminal records check.

- The Oregon Child Care and Education Data Project estimated that 38.7% of all Mult-nomah children needed child care in 1994. The largest demand was for Child Care Centers (27.7%) followed by Family Child Care Homes (25.3%). These percentages follow the statewide demand by type.

  *Portland Multnomah Progress Board 1996 Report*



Types of Child Care Arrangements Needed to
Fill Estimated Demand
Multnomah County 1994

Child Care Centers 27.7%
Care in Child's Homes 23.6%
Other Group Activities 8.2%
Care by a Relative 15.1%
Family Child Care Home 25.3%

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## III. KEY TRENDS

Child care is impacted by three concerns: Accessibility, quality and affordability.

### Accessibility

- Children First for Oregon indicates that Multnomah County's child care supply (slots per 100 kids under 13) has improved since 1990 at a faster rate than the state. Multnomah got better by 29%; over the same period, the state's rate improved by only 14%.

- Metro Child Care Referral and Resources Team report that there are 12,000 available child cares slots in Multnomah County. A 1993 Association of Portland Progress estimated a 40% growth (15,600 slots) needed by the year 2010 for child care services for downtown workers alone. When the 2040 Plan population and job growth projections for downtown are added, that need is even greater.

- The quantity of available slots varies, creating estimated shortfalls and gaps of between 30-40% of meeting the school age need and 70-80% of the preschool need. The true "gap" needs to be studied and quantified in numbers and type of care.

### Quality

- "Quality child care" is defined as accredited child care facilities and certified child care providers (an Early Childhood Education Associate Degree and Child Development Associate National Credentiating Program).

- Child care programs (centers, group homes, and family settings) are often a child's first teacher and have significant impact on a child's success in school, social and emotional competence and cognitive development. There is clearly an educational, developmental process the occurs in these facilities. Yet there are no requirements or incentives for formal accreditation or certification. The quality of the available slots varies from excellent (accredited programs) to extremely poor (well below minimal standards). In Multnomah County, there is currently no way to track and monitor quality child care.

### Affordability

- As family incomes drop and more families become the "working poor", the percentage of income needed for child care doubles or triples over the average 5% - 7% spent on childcare.

- There is a significant turnover rate among family child care providers due to low compensation and lack of benefits. The average full-time child care worker's salary in 1994 was about 30% above minimum wage and below the poverty line for a family of three. The majority are without health care or other benefits.

## III. Key Trends and Issues

- Increasing the number of child care providers meeting quality standards is impacted by:
  - Setting high and consistent standards
  - Provider training and technical assistance
  - Developmentally appropriate practices
  - Provider compensation
  - Monitoring compliance with established standards

- 80% of children in out-of-home care have employed parents, and employers have a stake in meeting their employees' child care needs. There is a need to expand the public/private partnership to increase business financial support for recruiting and improving child care quality and supply.

- Increasing the quality and quantity of child care and retention of existing slots/recruitment of new providers is related to equitable "family living wage" for child care workers and technical and financial support/incentives for centers.

## III. Desired Continuum Of Services And Support For Achieving The Benchmark

Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

**Elements of a Quality Child Care System**

- Training for child care providers (child care basics, healthy and safety, business practices, special needs)
- Education for individual child care providers (associate, bachelor and masters degrees)
- Accreditation for centers, center staff and family providers
- Quality standards (state and professional standards, child care center certification, etc.)
- Access (recruitment and support, provider data base, sliding fee scales, scholarships/ loans, etc.)

**Potential Strategies**

- **Training**
  Training requirements for family providers regarding basic health and safety
  Provide resources and support
  Consistent with state career plan. Integrate training into career lattice.
  Develop advanced training
- **Education**
  Economic support for advanced degrees
  Increase requirements for child care center directors and staff
- **Accreditation**
  Advisory system to increase access to Child Development Associate (CDA) National Credentiating Program.

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- **Quality Standards**
  Health and safety inspections of family providers
  Increased requirements for all providers
  Raise minimum standards. Compliance and inspections
  Retention and compensation programs
  Program support and resources
- **Access**
  Expand database to assist in recruitment and track gaps
  Recruitment of providers for special needs children, infants/toddlers and school age children
  Develop employer consortiums

V. **Sources Used**
  - Wellness Team
  - MCCF 1994 Comprehensive Plan
  - Portland Multnomah Progress Board, <u>1996 Annual Report</u>
  - 1996 Status of Children - County Data, Children First
  - Oregon Labor Trends, January 1996.
  - Multnomah Child Care Resource/Referral.
  - Oregon State Department of Education, "Forging the Link"

**Other Documents to Consult**
  Perry School Study
  Art Emler report

REDUCE CRIMES AGAINST PEOPLE BY ADULTS AND YOUTH

**MULTNOMAH COUNTY (An Urgent Benchmark):**
Reduce Violent Crimes Against People (By Juveniles and Adults): Crimes against people per 1,000 population

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Monitor the reported number of crimes per 1,000 population

**I.    Why It Is Important**
A community's crime rate is one of the best indicators of its livability. People value personal safety greatly, and when they feel threatened, other valuable community assets become secondary. Crime rates affect personal decisions about where to live and work. High crime rates can have a devastating effect on a community's prosperity.

Also see **"Reduce Juvenile Crime"** and **"Crime By And Against Youth"** Benchmarks reports (following sections).

**II.   Benchmark Data**
*Crime Reporting*
*   There are three important variables that affect the crime rate. First, victimization rates vary greatly among different crimes and among different populations. Second, rates of arrest vary according to police initiatives. Third, reported crime rates are influenced by the incidence of reporting by private citizens, which may vary among the county's various age, gender and cultural communities and across time.

*Crime Rate*
### Rate of Crime Incidents Reported per 1,000 Population
### Multnomah County
### 1990-1994

| Year | Total Reports/1,000 | Crimes Against People | Crimes Against Property | Behavioral Crimes |
|------|---------------------|-----------------------|-------------------------|-------------------|
| 1990 | 181.72 | 30.21 | 106.18 | 45.33 |
| 1991 | 183.74 | 30.04 | 108.23 | 45.47 |
| 1992 | 181.29 | 30.03 | 109.01 | 42.25 |
| 1993 | 177.38 | 29.71 | 105.03 | 42.65 |
| 1994 | 185.25 | 29.89 | 109.55 | 45.81 |

*   The table presents reported crime rates in Multnomah County from 1990-94. During this period the crime rate rose 1.94%. The rate for crimes against people decreased 1.06%, while property crime rates increased 3.17% The behavioral crime rate increased 1.06%

*   General crime rates have remained relatively flat, while enforcement and corrections efforts have increased dramatically.

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- *Nationally:* The Uniform Crime Report shows that the number of reported crimes in the US increased by 9% from 1984 to 1993.  Violent crimes (38.4%) during that time period increased at a faster pace than property crimes(5.4%)

- *Statewide:* The Law Enforcement Data System (LEDS) shows that the total crime rate per 1,000 increased form 138.69 to 146.02 in Oregon from 1990-1994.  Increases in property crimes were largely responsible for the increase in the total crime rate.

- *Locally:* In 1994, Multnomah County had the highest number of reported crimes of any county in Oregon, representing approximately 25% of all crimes reported in he State of Oregon.  The population in Multnomah County represented 20% of the state population.

- Property crimes make up the greatest number of crimes in Multnomah County at 59%.  Behavioral crimes are second at 25% and crimes against people constitute 16% of the total.

*Crime in Oregon*
- Offenses reported in the Uniform Criminal Report increased 7.7% in 1994 when compared to 1993.  The counties of Clackamas, Lane, Marion, Multnomah and Washington represent 56.6% of the state's population.  These 5 most populous counties reported 60.3% of total crime and 64.5 % of the crimes against persons.

- Between 93-94, Crimes Against Person increased 2.9%.  Increases were reported for homicide, robbery, aggravated assault, and simple assault.  Decreases were reported for rape, other sex crimes, and kidnapping

### Number and Rate per 10,000 Population of
### Violent Crime Incidents and Arrests

|  | 1990 | 1991 | 1992 | 1993 | 1994 |
|---|---|---|---|---|---|
| Violent Crime Incidents Reported | 22,076 | 23,375 | 23,890 | 24,008 | 24,045 |
| *Rate* | *77.6* | *79.8* | *80.2* | *79.0* | *78.0* |
| Arrests for Violent Crimes | 5,866 | 5,929 | 6,373 | 6,517 | 6,697 |
| *Rate* | *20.6* | *20.2* | *21.4* | *21.5* | *21.7* |

- In 1994, violent crimes constituted 5.3% of total reported crimes. Simple assault constituted 6.8%, property crimes constituted 56.3% and behavioral crimes constituted 31.6%

- According to a recent report (6/96) released by the Multnomah County Health Department, homicide represents a significant public health problem.

- The increase in arrests for juveniles (age 17 and under) is reflected in all categories of crime and most geographical areas of the state.

REDUCE CRIMES AGAINST PEOPLE BY ADULTS AND YOUTH

### Number and Rate per 10,000 Juvenile Population of Juvenile Arrests for Violent Crime

|  | 1990 | 1991 | 1992 | 1993 | 1994 |
|---|---|---|---|---|---|
| Juvenile Arrests for Violent Crimes | 1,066 | 1,305 | 1,545 | 1,568 | 1,632 |
| *Rate* | *14.8* | *17.2* | *20.1* | *20.0* | *20.4* |

- Nationally, in 1988 the gun homicide rate per 100,000 was less that six for the population as a whole.

- The gun homicide rate per 100,000 teenagers, 15-19, was eight. In 1989, the gun homicide rate for the same age group (teenagers, 15-19) for black males was 83.4. For white males, it was 7.5.

**State of Oregon: County Juvenile Arrest Data - 1994**
**Total Juvenile Arrest per 10,000 Juvenile Population**
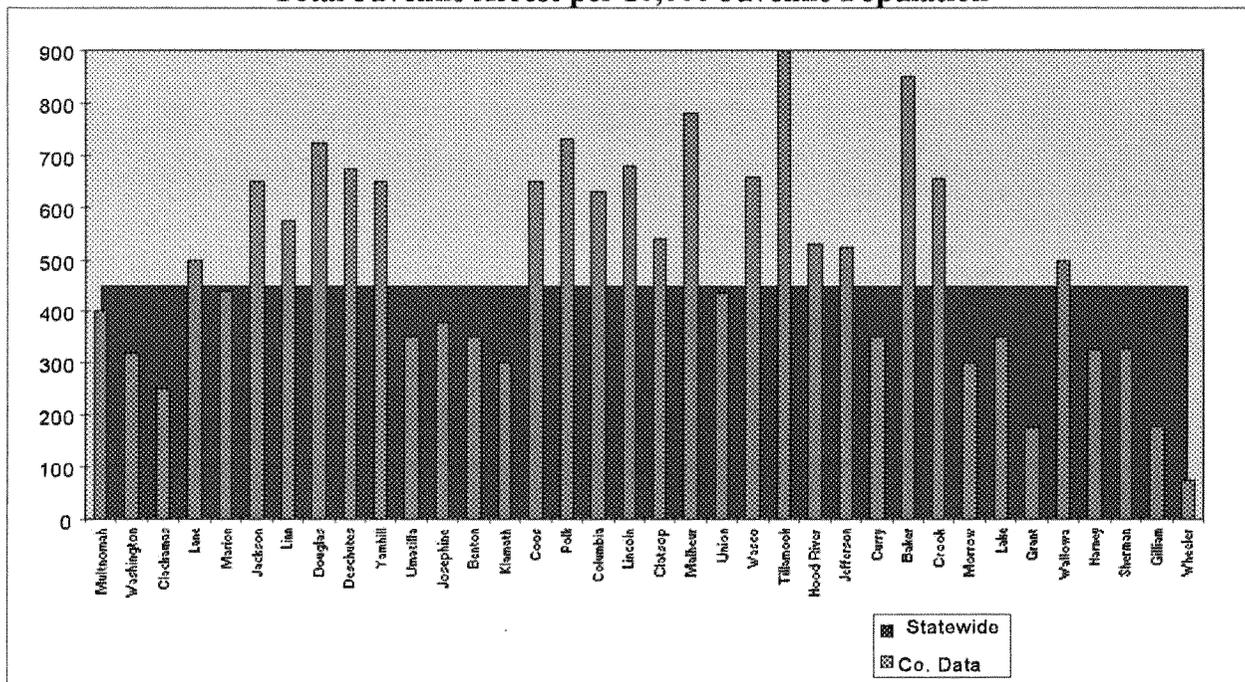


- Juvenile arrests are not distributed evenly among counties. Tillamook has the highest juvenile arrest rate overall. The most populous county is illustrate on the left with the remainders of Oregon's counties listed in descending order by population.

### III. Key Trends and Issues
- The ready availability of guns greatly increases the likelihood that a conflict will result in death or serious injury. The risk of death from a gun homicide is highly elevated for adolescents, particularly black males

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REDUCE CRIMES AGAINST PEOPLE BY ADULTS AND YOUTH

- Findings from the *Faces and Voices of Violence*, indicate that the reality of violence in Multnomah County is different from the popular image of violence. Gang violence accounted for less that 10% of the homicides in 1994. Only one in six homicides occurred in the context of another crime. The data on violent crimes suggest that most people face a greater risk of violent assault from someone they know, often someone they know very well.

- Men, especially young men are more frequently victims of violence. Violence is also has a substantial financial cost to our community. Based on the average annual incidence, it is estimated that in the US, the lifetime cost of intentional injury is $178 billion. This includes $10 billion in direct health care costs. The major financial impact o violence is lost economic productivity and reduced quality of life.

- While violence is wide-spread, affecting every part of Multnomah County, the data suggest that it is particularly concentrated in economically disadvantaged communities.

- No area of the county is spared from violence. Every community in Multnomah County experiences some level of at least some kinds of violence. There is substantial variation in the types and levels of violence from community to community.

- Better information on the actual rate of violence that community members experience is needed. Most data used to describe violence is created for other purposes. It is dependent on people seeking and using existing services (police or social services). Basing an analysis of violence on service data provides a reflection of reality that can be far removed from the broader community's real experiences. To overcome this there is a need for:    New population based data (i.e. periodic victimization survey)
  Need information to address the nature of each of the forms of violence - how and why violence occurs in order to develop effective intervention and prevention approached.
  Creation of strong local data to identify unique local issues, and create community understanding and ownership.

- There is a lack of evaluation of enforcement efforts

- Variables affecting the reporting of crime rates make it difficult to draw sweeping conclusions about data. Changes are slight, except in reported property crime increases.

**IV.  Desired Continuum Of Services And Support For Achieving The Benchmark**
Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- Prevention
- Apprehension
- Deterrence
- Rehabilitation
- Rehabilitation

**Potential strategies and promising practices**
- Community-based crime prevention projects

- Truancy reduction programs

- Increase availability of community corrections sanctions, including alcohol and drug abuse intervention, job and life skills training, and work and education programs.

- Develop prevention and intervention programs that are relevant to ethnic communities.

- Teach non-violent solutions to conflict.

- Focus effective responses on first-time juvenile offenders to decrease the likelihood of further contact with the system.

- Provide effective sanctions and services for repeat juvenile offenders.

- Support public commitment to funding primary education, including a full spectrum of extracurricular activities available to rich and poor alike.

- Adequate jail-beds for violent and chronic offenders.

**V. Sources Used**
- 1996 Annual Report Benchmarks...Progress Measured One Step at a Time, Portland Multnomah Progress Board.
- Oregon's 1996 Drug & Violent Crime Strategy, 1996
- Multnomah County Benchmarks 1995-96.
- Combating Violence and Delinquency: The National Juvenile Justice Action Plan, Coordinating Council on Juvenile Justice and Delinquency Prevention, 1996.
- Islands of Safety, Assessing and Treating Young Victims of Violence, Zero to Three/The National Center, 1996.
- Seeking Justice, Crime and Punishment in America, The Edna McConnell Clark Foundation, 1995.
- Crime and Politic in the 1990's, Creating Demand for New Policies, Campaign for an Effective Crime Policy, 1996.
- Faces and Voices of Violence, Multnomah County Health Department, June 1996.
- Understanding and Preventing Violence, National Research Council.

**Other Documents to Consult**
- Law Enforcement Data System (LEDS) Technical Report, 1995
- Criminal Justice Information Systems Project Work Plan
- Oregon Serious Crime Survey

REDUCE JUVENILE CRIME

**MULTNOMAH COUNTY (An Urgent Benchmark):**
Reduce Violent Crimes Against People (By Juveniles and Adults): Crimes against people per 1,000 population

**COMMISSION ON CHILDREN AND FAMILIES:**
Reduce juvenile crime.

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Number of reported crimes against people per 1,000 population
Decrease firearm injuries and fatalities rate per 1,000 population.
Reduce the number of crime victims per 1,000 population.

**I.     Why It Is Important**
A low crime rate is one of a community's leading indictor of its livability. Crimes committed by juveniles are often associated with young people's lack of hope for the future. Many other social issues are related to juvenile crime, like poverty, alcohol and other drugs, and racism. Responding to juvenile crime has recently been a core public concern.

**II.    Benchmark Data**
*   Juvenile arrests for personal and property crimes rose rapidly until 1992, then leveled off
*   Average annual growth rate for property crimes from 1986-94: 3.2%
*   Average annual growth rate for crimes against persons from 1986-94: 5.9%



Juvenile Arrests for Crimes Against Persons and Property, Multnomah County
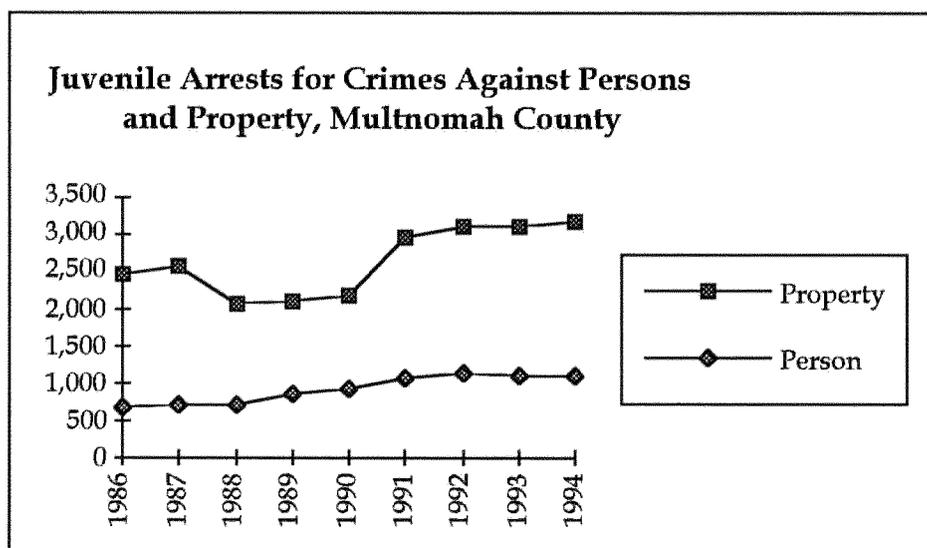
Source: Oregon Criminal Justice Council

*   Arrests for youths under 15 grew more rapidly than arrests for youths 15-17
*   1986-94 average annual growth rate for youths 14 and under: 4.9%
*   1986-94 average annual growth rate for youths 15-17: 3.1%
*   The majority of juvenile arrests for personal & property crimes are youths 15-17.

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**Multnomah County Arrests for Person and Property Crimes, by Age**
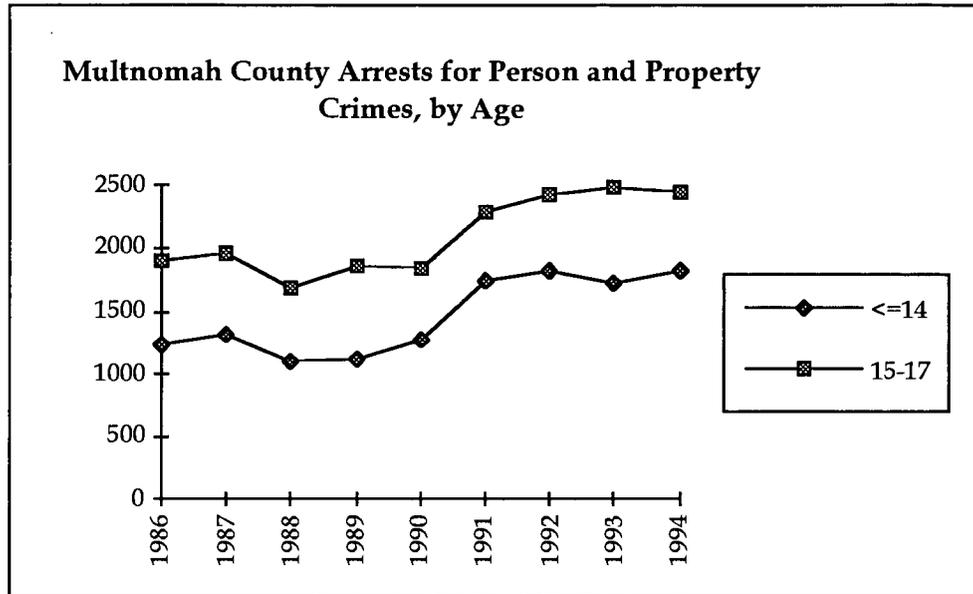


Source: Oregon Criminal Justice Council

## III. Key Trends and Issues

### Chronic Offenders
- Youths who have been arrested 5 or more times are considered chronic offenders. Chronic offenders comprise 6% of all boys, but account for over 50% of all arrests.
- Youths who have been arrested 5-6 times have a 90%+ chance of being arrested again.

### Factors contributing to juvenile crime
- Inadequate parenting is considered one of the strongest predictors of later delinquency
- Family factors: early childbearing, teenage pregnancy, and substance abuse during pregnancy, poor parental supervision, erratic child-rearing behavior, parental disharmony, and parental rejection of the child
- Being abused or neglected as a child increases the likelihood of arrest for a violent crime by 38%.
- Individual factors: childhood conduct problems
- Poverty

### Relationship between juvenile crime and future adult crime
- Most chronic adult offenders have had multiple contacts with the juvenile justice system.
- The age of initial criminal behavior and severity of juvenile record are two of the best predictors of adult criminality.

### Interrelationship with other benchmarks
- Delinquent youths are more likely to use alcohol & other drugs, drop out of school, and become pregnant as a teen. Causality is believed to run in both directions.

**IV. Desired Continuum Of Services And Support For Achieving The Benchmark**
Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- Diversion program services
- Gang supervision programs
- Classification of delinquents leading to targeted services to high risk youth
- Flex fund program allowing wraparound services
- Truancy prevention/intervention services
- Focused services for the entire family
- Development of a range of intermediate sanctions between probation supervision and commitment to the state training schools.
- Adequate detention space for violent and chronic offenders.

**V. Sources Used**
- Wellness Team
- Multnomah County Public Safety Coordinating Council, <u>Direction to the Working Group</u>
- <u>Public Safety Benchmark Information</u> summary, Joanne Fuller, Deputy Director, Multnomah County Department of Juvenile Justice
- Rand Study: <u>Diverting Children from a Life of Crime</u>
- <u>Diversion Outcome Project: Implementation Follow-up Report</u>
- MCCF 1994 Comprehensive Plan
- Department of Juvenile Justice Services presentation to LPSCC
- <u>Juvenile Crime in Multnomah County 1986 through 1993</u>, Oregon Criminal Justice Council Statistical Analysis Center, 1994.

**Other Documents to Consult**
- Research establishing that property offenders tend to have long criminal histories, whereas violent offenders tend to commit relatively few, isolated crimes.
- Measure 11 - Sarah Lutes at Juvenile Justice has done a lot of analysis regarding Measure 11 offenders.

REDUCE VIOLENCE BY AND AGAINST CHILDREN AND YOUTH

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**MULTNOMAH COUNTY (An Urgent Benchmark):**
Reduce Violent Crimes Against People (By Juveniles and Adults): Crimes against people per 1,000 population

**COMMISSION ON CHILDREN AND FAMILIES:**
Reduce violence by and against children and youth.

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Number of reported crimes against people per 1,000.
Reduce the number of crime victims per 1,000 population

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I. **Why It Is Important**
The problem of violence is a pervasive one the United States. One of its most disturbing expressions is in violence committed by and against youth. This benchmark is closely related to the child abuse and juvenile crime benchmarks, but it also addresses other violence in the lives of children. This violence takes many forms: physical violence, emotional violence, sexual and dating violence, self-directed violence, and hate, bias and prejudice.

II. **Benchmark Data**

**Teen Violent Death Rate - Ages 15-19**
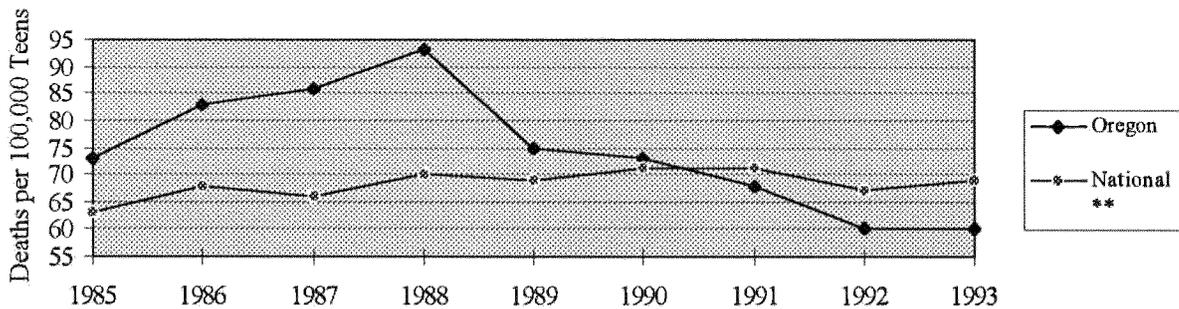


\*\*Raw Data for 1993: Rate equals total of 11,897 deaths nationally and 123 deaths for State of Oregon.

- The Teen Violent Death Rate reflects deaths from homicide, suicide, and accidents. National declines in teen deaths due to accidents were offset by a doubling in the number of homicides. Suicides stayed about the same.

2b

- The Juvenile Violent Crime Arrest Rate reflects the number of arrests per 100,000 youths between the ages of 10 and 17 for homicide, forcible rape, robbery, or aggravated assault. During 1994, about one-fifth of everyone arrested for a violent crime was under age 18.

**Juvenile Violent Crime Arrest Rate - Ages 10-17**
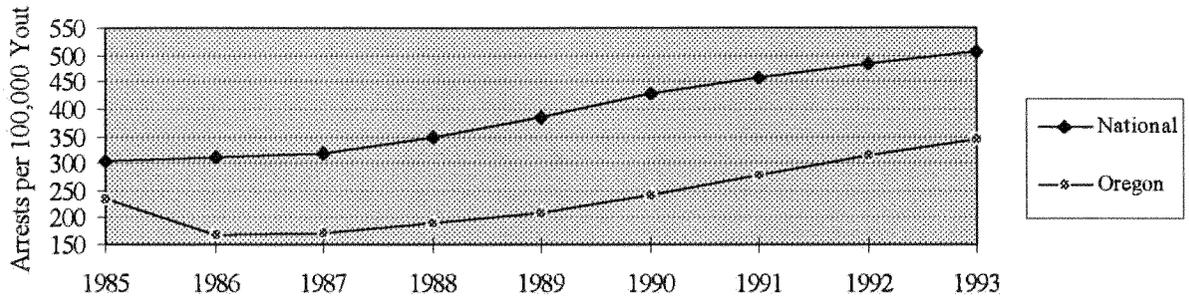


- In Multnomah County, suicide causes one and a half times as many deaths as homicide, and is a leading cause of death among young men.

**Reported Suicide Attempts by Youth - Age 10-17**
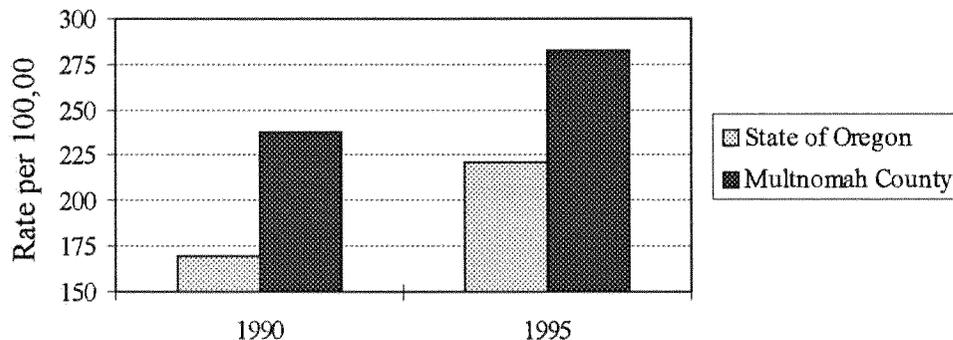


### III. Key Trends and Issues

- Nationally in 1994, males 14 to 24 years old were only 8 percent of the population, but they made up more than a quarter of all homicide victims and nearly half of all murderers.

- In 1980, juveniles were murdered at a national rate of five per day. By 1994, the rate was seven per day, and most of the juveniles were 15 to 17 years old. The availability and use of handguns has contributed to this increase in homicides. In Multnomah County handguns are the most common weapons associated with violence.

- In Multnomah County, arrests of juveniles for violent crimes increased 53 percent between 1990 and 1993.

- Suicide and homicide respectively have been the second and third leading causes of death among young men 15 to 24 years old in Multnomah County in recent years, trailing only injuries.

- To complete the picture of violence by and against youth additional local and national data should be collected on injury reports from violence, as diagnosed and reported by hospital emergency rooms; number of youth suspended or expelled from school for violent activity; reports of weapons discovered in the school setting; rate of successful rehabilitation of violent young offenders.

**IV. Desired Continuum Of Services And Support For Achieving The Benchmark**

Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- Family development/support
- Intervention - schools, family service centers, health clinics
- Diversion
- Job/Economic development
- Prenatal Care
- Family support services to promote early childhood development
- HeadStart
- Reading and literacy programs
- Rehabilitation services
- Youth employment services
- School Based Health Centers
- Conflict resolution services
- Alcohol and Drug treatment and prevention
- Access to quality child care
- Domestic/dating violence prevention & education

**V. Sources Used**
- Wellness Team
- Multnomah Commission on Children and Families 1994 Comprehensive Plan
- Portland Multnomah Progress Board, 1996 Annual Report
- 1996 Kids Count Data Book - Annie E. Casey Foundation
- Faces and Voices of Violence - Multnomah County Health Department

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## MEETING DEVELOPMENTAL STANDARDS BY KINDERGARTEN

**MULTNOMAH COUNTY (Not an Urgent Benchmark):**
Early Childhood Development - Increase percentage of children entering kindergarten meeting specific developmental standards for their age.

**COMMISSION ON CHILDREN AND FAMILIES:**
Meet developmental standards by kindergarten.

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Increase the percentage of children entering kindergarten meeting specific development standards for their age.

### I.   Why It Is Important

Children must be physically, emotional and intellectually ready to learn when they enter kindergarten. Children's experiences in the first five years are important indicators of their later success in school and in jobs. Dimensions of development standards or milestones for kindergartners include physical well-being, social confidence, emotional maturity, language richness and general knowledge commensurate to a five-year-old's development. Parents are the key to seeing that a child is ready for school. A child who is not ready to learn, cannot learn, and must be identified and given remedial attention. The long term impact is to help keep kids in school, decreasing later teen problems.

### II.   Benchmark Data

*   The science of assessing the readiness of children entering kindergarten is in its infancy. or local trend data for school readiness at this time.

*   School readiness is defined as the developmental milestones that a child needs to reach to be ready to enter school. They are: **physical well being, cognitive, social, emotional, language, literacy, and fine and gross motor development**.

*   There are accepted levels for each of these development areas tied to school readiness for kindergarten. However, only some interim indicators such as vision, hearing, and immunizations are being collected through well child examinations and developmental screenings. Due to funding constraints, kindergarten assessments data is not being collected or reported by local school districts.

*   The term developmental "standards" implies success vs. failure. The term "milestones" is suggested because it implies a point along an ongoing developmental process. Developmental milestones should be determined by nationally validated, reliable screening instruments administered by school districts.

*   While there has been a decline in the percent of eligible 3-4 year olds served by Head Start, there has been a sharp increase in the poverty rate for children ages 0-5 years.

## III. Key Trends And Issues

- Even though there is little research-based data on percentage of children developmentally ready for kindergarten, there is significant research tying school readiness to a set of necessary community conditions. The Carnegie Foundation report "Ready to Learn - a Mandate for the Nation" cites seven conditions necessary for children to be ready to enter school:
  - a healthy start
  - a language rich environment with caring, empowered parents
  - quality early child care and education, including preschools and child care
  - a responsive, family-friendly workplace for parents
  - responsible, nonviolent and education TV programming on all major networks
  - safe, supportive neighborhoods where learning can take place
  - a web of supports for families and greater inter-generational connections.

- These conditions are directly impacted by the benchmarks of poverty, prenatal care, childcare, violence and abuse, teenage pregnancy, teenage graduation, health care access and housing.

- Because of the complexity and interrelationships between these family and community conditions, a comprehensive system is needed to coordinate a collaborative network to help develop and support families' ability to nurture their children and address the changing needs of young children and families.

- Child Care and Education: Forging the Link. Oregon is one of two states that received a Danforth Foundation grant for a project called "Forging the Link". The project's goal is to develop a coordinated and collaborative early childhood care and education system that ensures continuity and quality across programs for children ages 0-8 and school age children (5-12) who are in child care and recreation programs.

  A draft of "Essential elements of programs for children" is being reviewed at this time. It focuses on the elements of positive relationships, family involvement, program for child development and learning , professional staff, safe, healthy learning environments, health promotion, inclusion practices, effective administration and business practices, continuity for children and families. This project should provide assistance in designing and developing a comprehensive system.

## IV. Desired Continuum Of Services And Support For Achieving The Benchmark

Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- **System Elements**

    Access to Health and Nutrition

    Screening

       Mental Health

Age Appropriate Education
Family Support
Parent Education

- **Potential Strategies**
  Periodic screening at critical development stages

  Increased coordination and collaboration of Multnomah county divisions and community agencies that serve children and families.

  Expansion of the neighborhood-based Family Center services, including Parent Child Development services, to increase access and enhance service to all families.

  Outreach to families from conception or entrance into the system.

  Public awareness campaign of child development, parent education and other child and family issues.

**V.  Sources Used**
- Wellness Team
- MCCF 1994 Comprehensive Plan
- Portland Multnomah Progress Board, 1996 Annual Report
- "Forging the Link", Danforth foundation grant project, Child Care Division and Department of Education, lead agencies.
- "Ready to Learn: A Mandate for the Nation", Ernest Boyer of the Carnegie Institute for the Advancement of Teaching.

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INCREASE SUCCESS OF DIVERSION PROGRAMS

**MULTNOMAH COUNTY (An Urgent Benchmark):**
Increase success of Diversion Programs: % of diverted offenders who commit any offense within one year after completing the diversion program [by juveniles and adults]

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Reduce the percentage of diverted offenders who commit the same type of offense within one year after completing the diversion program

## I. Why It Is Important

Diversion programs and deferred sentencing programs offer cost effective alternatives to incarceration. For drug related crimes, diversion programs offer a form of treatment and intervention which can reduce an offenders recidivism. Deferred sentencing programs provide opportunities for offenders to make restitution to their victims and the community and to change their behavior.

## II. Benchmark Data

**Drug Diversion**

- The STOP Program (Sanction-Treatment-Opportunity-Progress) is a drug diversion program aimed at reducing substance abuse and related criminal activity. Offenders who are arrested for drug possession are offered the chance to participate in the 12-month program in lieu of a trial. Upon successfully completing the program, criminal charges are dismissed with prejudice. The offenders who do not enter the program, are often left with a felony criminal conviction on their records.

- Between July 92 and March 94, approximately 54% of clients entering the S.T.O.P. program successfully completed the program. A total of 571 clients left the program during that period.
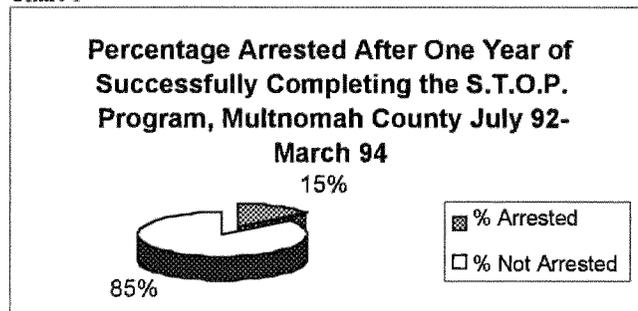
Chart 1



**Percentage Arrested After One Year of Successfully Completing the S.T.O.P. Program, Multnomah County July 92- March 94**
15%
■ % Arrested
□ % Not Arrested
85%

Chart 2



**Percentage Arrested After Failure to Successfully Complete the S.T.O.P. Program Multnomah County April 94**
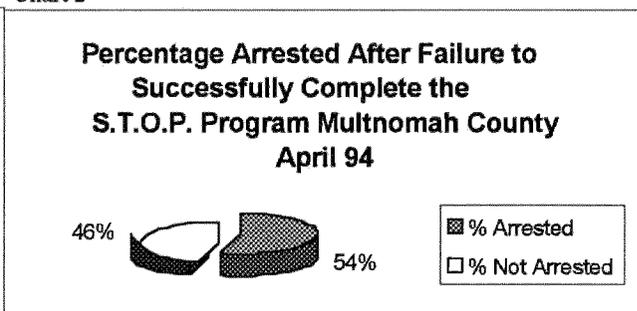46%
54%
■ % Arrested
□ % Not Arrested

- In April 94, a sample of S.T.O.P. cases were reviewed for post-program recidivism. Of those offenders who completed the program, 15% were arrested within one year (see Chart 1). In contrast, of those who started but were unsuccessful in completing the program, 54% were arrested within one year (see Chart 2).
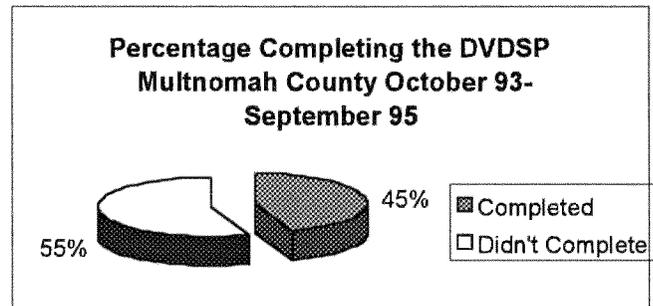
INCREASE SUCCESS OF DIVERSION PROGRAMS

- A recent survey taken in Oregon to determine the extent of alcohol and other drug use indicated that 133,000 persons are classified as dependent and nearly 120,000 are classified as abusing. The Oregon Health Plan will cover the treatment costs for Oregonians at the federal poverty level and below. Only six out of ten people who need alcohol and drug treatment receive it.

- County agencies estimate that over 80% of criminal offenders in the county have a substance abuse problem.

**Domestic Violence Deferred Sentencing Program(DVDSP)**
- Multnomah County's Domestic Violence Deferred Sentencing Program (DVDSP) requires offenders to plead guilty before being referred to the program. Upon successful completion, the criminal case is dismissed.



Percentage Completing the DVDSP
Multnomah County October 93-
September 95

45% ⊠Completed
□Didn't Complete
55%

Between October 93 and September 95, there were 582 offenders entering the program. Of this number 44.5% completed the program. No figures on recidivism one year after leaving the program are available.

## III. Key Trends and Issues

- **Treatment Access:** The Drug Diversion Program provides immediate access to treatment through a dedicated provider and service agreements with other community agencies. Participants enter treatment on the third or fourth day after arrest. In the absence of the program, most offenders would not enter treatment until adjudication of their charges and assignment to a probation officer, some four to six months after arrest.

- **Reducing Demand for Jail Beds:** Demand for jail beds is increasing. The state and local justice systems have come to rely on diversion programs to assist in making wise use of jail resources. Based on sentencing data for those convicted of drug possession (provided by the Oregon Criminal Justice Council), it is estimated that the 504 defendants who entered drug diversion in 1994 would have used 18,670 prison and jail bed-days in the absence of the program. The Drug Diversion Program's 504 participants used approximately 5,040 bed-days. The net savings is 13,630 bed-days. (Based on sentencing data which does not include pretrial or probation violation detention.)

- **Drug-free Babies:** One of the objectives of the drug diversion program is to impact the generational element of substance abuse, consistent with benchmarks for healthy babies. In 1994-95, eight of ten babies born to program participants were drug-free.

INCREASE SUCCESS OF DIVERSION PROGRAMS

- **Systems Integration:** Local policy-makers realize that no single agency can impact problems such as substance abuse and domestic violence. The diversion (or deferred sentencing) program in those areas rely on interagency collaboration in planning and operations. Law enforcement, prosecution, the courts, the public defender, corrections and private not for profit agencies have become partners in these efforts.

- **Data Limitations:** To date, there has been no extensive evaluation of the costs and benefits and long term impacts of the Drug Diversion Program. However, a grant from the State Justice Institute will result in an independent evaluation to be completed by June 1997.

IV. **Desired Continuum Of Services And Support For Achieving The Benchmark**
Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- Counseling
- Referral
- Training
- Deferred/Diversion Sentencing- Courts
- Arrest

- Investigation
- Adjudication
- Defense
- Judiciary

**Potential Strategies**
- Continuation of S.T.O.P. program
- Increase resources to respond to drugs and violent crimes
- DUII Diversion Program
- Develop a long range strategy to coordinate law enforcement and corrections resources.
- Involve communities in developing and implementing a public safety strategic plan to ensure coordination between treatment, prevention, education, law enforcement and custodial sanctions.

V. **Sources Used**
- Portland Multnomah Progress Board, 1996 Annual Report
- Oregon's 1996 Drug & Violent Crime Strategy, 1996
- Multnomah County Benchmarks 1995-96.
- Seeking Justice, Crime and Punishment in America, The Edna McConnell Clark Foundation, 1995.
- Crime and Politics in the 1990's, Creating Demand for New Policies, Campaign for an Effective Crime Policy, 1996.
- Societal Outcomes & Cost Savings of Drug & Alcohol Treatment in the State of Oregon, Governor's Council on Alcohol and Drug Abuse Programs, 1996.
- What Works? A Review of the Corrections Literature on Program Effectiveness, Lane County Community Corrections Manager, 1993.

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REDUCE DOMESTIC VIOLENCE

**MULTNOMAH COUNTY (An Urgent Benchmark):**
Child Abuse:    Children abused or neglected per 1,000 persons under 18
Spousal Abuse:  Spouses or partners abused per 1,000 persons
Elderly Abuse:  Elderly abused per 1,000 persons

**COMMISSION ON CHILDREN AND FAMILIES:**
Reduce domestic violence within families

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Monitor the reported incidents of spouses or domestic associates abused per 1,000 people.

## I.    Why It Is Important

Domestic Violence is probably the most common form of violence occurring in the United States. Partner violence episodes represent nearly one third of all violent crimes reported to local police agencies. Three quarters of reported episodes involved physical violence that would be classified as either simple or aggravated assault. Nationally there are close to 4,000 domestic violence homicides annually. In Multnomah County one third of all homicides involved family or domestic violence. Domestic violence creates family instability and has long-term negative effects on children. Witnessing parental violence is a greater predictor of perpetrating or being the victim of domestic violence than is being abused as a child. Youth reporting violence between their parents have a higher rate of violence in their dating relationships. These youth and children have high rates of alcohol and drug abuse, are more frequently involved in the juvenile justice system, and have academic or social adjustment problems.

## II.   Benchmark Data

- In the first six months of 1995 the following was reported in Multnomah County:

| Calls Made to Crisis Line | Number of Victims Seeking Shelter | Number of Victims Sheltered | Victims Turned Away from Shelters |
|---|---|---|---|
| 11,448 | 14,406 | 660 | 13,746 |
| 911 calls to Police | Reports Made by Police | Number of People Arrested | Number of Cases Charged |
| 8,032 | 3,542 | 1,870 | 750 |

## III.  Key Trends and Issues

- Domestic Violence is probably the most common form of violence occurring in the United States. In Multnomah County between July 1993 and June 1994, there were 17,500 police dispatches by 9-1-1 for domestic and household disturbances, restraining order violations, and custodial interference.

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- Domestic violence episodes represent nearly one third of all violent crimes reported to local police agencies. 48 percent of all assaults involve the use of a dangerous weapon including guns, knives, and other weapons.

- Women are more likely to be victims of domestic violence than men. In Multnomah County 90 percent of victims are women.

- Women who leave their batterers are at a 75 percent greater risk of being killed by the batterer than those who stay.

- Domestic violence is the single greatest reason women leave the workforce. Violence is often used as a way to prevent the victim from obtaining economic independence.

**Interrelationships**
- Domestic violence is closely related to child abuse, poor birth outcomes, alcohol and drug abuse, homelessness, and suicide.

- More babies are born with birth defects as a result of the mother being battered during pregnancy, than from the combination of all diseases for which we immunize pregnant women.

- At least 8 percent of pregnant women are battered during pregnancy. These women are 2 times more likely to miscarry, and 4 times as likely to have low birth weight infants. These infants are 40 percent more likely to die in the first year.

- In Oregon, among 70 percent of child abuse cases, domestic violence is also occurring. 100 percent of all child abuse fatalities occurred in homes where domestic violence also took place.

- Nationally, 50 percent of all homeless women and children are on the streets because of violence in the home.

- All data on this benchmark focuses on reported incidents of domestic violence. Not all battered women seek help either through police intervention or through the crisis lines. Success towards achieving this benchmark should not be measured by a decrease in the reported rate of domestic violence. Reporting domestic violence is often the first step towards receiving the help and services needed to stop the abuse.

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IV. **Desired Continuum Of Services And Support For Achieving The Benchmark**

Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- **Crisis Intervention**
    Emergency Shelter
    Transportation
        Medical Care
        Police intervention
        Community support

- **Law Enforcement**
    Police
    Jail/Corrections
    Prosecutors
    Courts
    Probation/Parole

- **Victim Alternatives**
    Housing
    Restraining order
    Divorce
    Custody/support
    Job training
    Education
    Living wage employment
    Child care

- **Prevention Education**
    Batterers' education
    Teachers and students
    Community education
    Health professionals
    Public agencies - AFS, Employment offices, CSD, etc.
    Employers, EAP programs
    Religious leaders

V. **Sources Used**
- Wellness Team
- Multnomah Commission on Children and Families 1994 Comprehensive Plan
- Portland Multnomah Progress Board, 1996 Annual Report
- Faces and Voices of Violence - Multnomah County Health Department
- Benchmark Forum 1995 - Chiquita Rollins Multnomah County Domestic Violence Coordinator.

REDUCE CHILD ABUSE AND NEGLECT

**MULTNOMAH COUNTY (An Urgent Benchmark):**
Reduce Child Abuse. No. of children abused or neglected per 1,000 persons under 18.
(included in Domestic Violence benchmark)

**COMMISSION ON CHILDREN AND FAMILIES:**
Reduce child abuse and neglect.

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Monitor the reported number of children abused and neglected per 1,000 children under the age of 18.

I.   **Why It Is Important**

The reduction and prevention of child abuse is important for two reasons. First, it can and does cause substantial physical and emotional injury to children. Second, victims abused as children often grow up to become abusers themselves. · Without treatment, child abuse can be perpetuated across generations. Child abuse reporting continues to increase. In part, this reflects a growing public sensitivity to child maltreatment but experts believe that increasing economic stress on families and crisis caused by substance abuse and violence are the main causes of this troubling trend. Evidence suggests that although child abuse is reported through all social strata, it is disproportionately represented among low income families where there are higher incidence of unemployment, early childbearing, and substance abuse. Neglect and physical abuse, in particular, have been correlated with poverty, while sexual abuse and emotional maltreatment appear to be more evenly distributed among all social classes.

II.  **Benchmark Data**

- In 1994, Services to Children and Families (SCF), formerly CSD, implemented mandated changes to the way services are provided to the families of abused and neglected children. Consequently, the data for 1994 must be considered transitional.
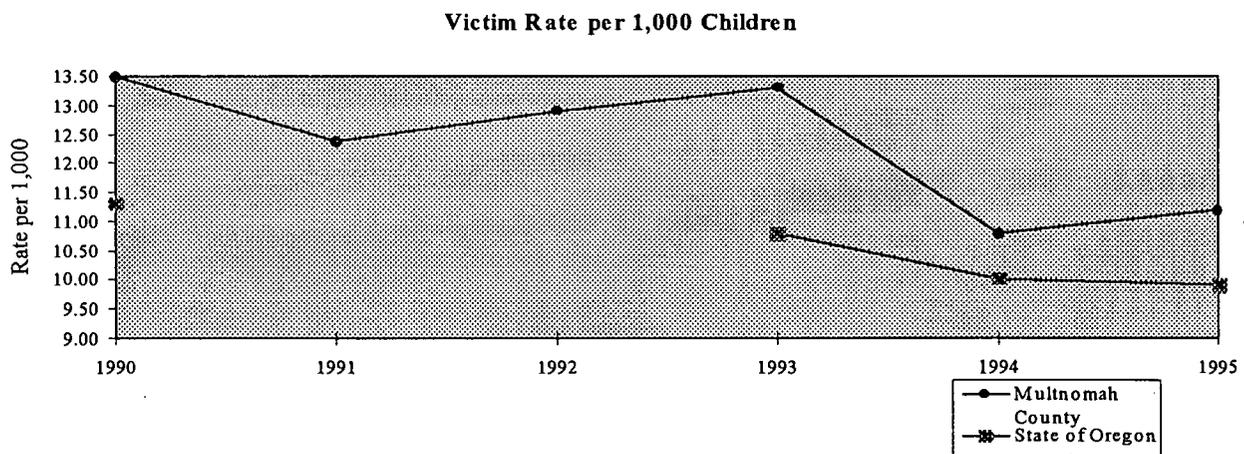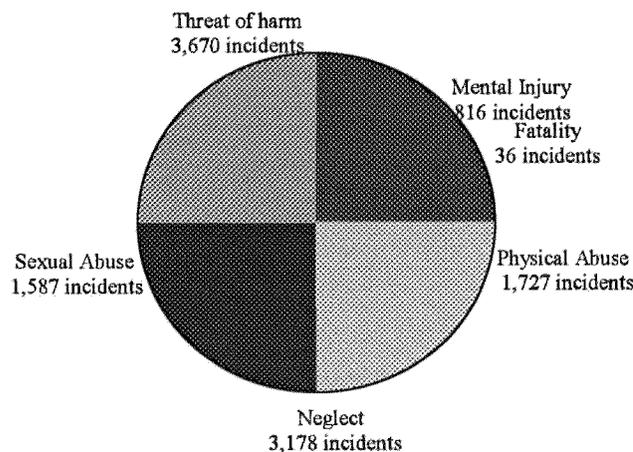
**Victim Rate per 1,000 Children**

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- In 1994, 4,599 suspected cases of abuse of children living in Multnomah County were reported to SCF. Suspected cases are defined as meeting the statutory definition of abuse or neglect. After review by SCF under defined protocols, 1,586 were determined to be "founded cases." That is, there was adequate evidence to confirm that these 1,586 children were victims of abuse and/or neglect.

- In 1995, the number of "founded cases" increased to 1,747 per 1,000. Multnomah County's victim rate of 11.2 per 1,000 in 1995 remains higher than the state rate of 9.9.

- In 1994, 4,599 suspected cases of abuse of children living in Multnomah County were reported to SCF. Suspected cases are defined as meeting the statutory definition of abuse or neglect. After review by SCF under defined protocols, 1,586 were determined to be "founded cases." That is, there was adequate evidence to confirm that these 1,586 children were victims of abuse and/or neglect.

- The number of "founded cases" increased to 1,747 in 1995. Multnomah County's victim rate of 11.2 per 1,000 in 1995 remains higher than the statewide rate of 9.9 per 1,000.

**Types of Child Abuse for Oregon 1995**



Threat of harm
3,670 incidents

Mental Injury
816 incidents
Fatality
36 incidents

Physical Abuse
1,727 incidents

Neglect
3,178 incidents

Sexual Abuse
1,587 incidents

- Neglect is potentially as lethal as abuse, and often requires more services over a long period of time. A record 36 Oregon children died in 1995 from causes related to abuse and neglect. Of those deaths 28 resulted from neglect, continuing a trend in which neglect-related deaths outnumber abuse-related deaths. Most of the victims (72 percent) were less than 5 years old.

**Deaths in Oregon from Child Abuse & Neglect 1985-1995**
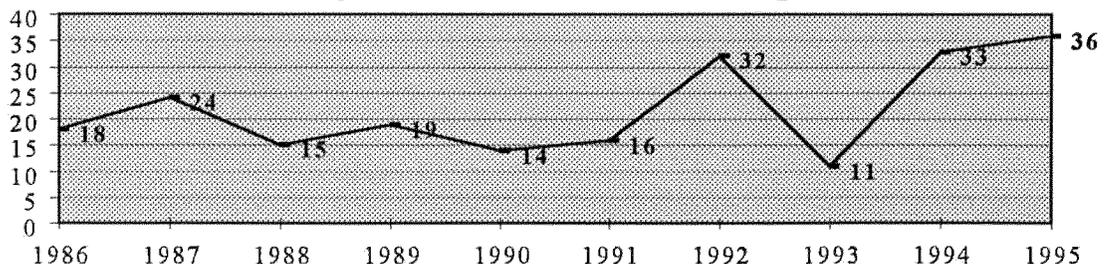
REDUCE CHILD ABUSE AND NEGLECT

**III.**      **Key Trends and Issues**

- Infants make up the largest single age group of victims. This reflects several factors: the number of children who were found to be drug-affected at birth, the extreme vulnerability of this population, and the stresses that occur in families when children are born.

- In 1995, 58 percent of neglect incidents involved children aged 0-5. However, this may reflect that younger children are perceived to be more vulnerable. Therefore, cases involving young children may be reported more frequently.

- The young age of children needing services also impacts foster care. Ten years ago, 16 percent of children in foster care were less than 6 years old. Today, that age group represents 42 percent of foster care.

- Mothers and fathers are the two most prevalent perpetrators of child abuse, 68 percent of all cases, with familial perpetrators constituting 90 percent of total. The increasing trend toward familial perpetrators are consistent with younger victims of child abuse and neglect, and with the difficulties associated with single parenting.

- Families whose children are abused and neglected often have significant problems which may affect their ability to keep their children safe. In addition to the stress factors reported below by SCF, Portland Police data also suggests a connection between a high prevalence of poverty, and a high prevalence of child abuse.

| STRESS INDICATORS | Percent of Founded Abuse Reports for 1995 |
|---|---|
| Single Parent | 45.1% |
| Suspected Drug/Alcohol Abuse | 44.0% |
| Head of Family Unemployed | 28.1% |
| Parental Involvement with Law Enforcement Agencies | 27.3% |
| Physical Abuse of Spouse/Fighting | 22.1% |
| Heavy Child Care Responsibility | 18.4% |
| Parental History of Abuse as a Child | 13.9% |

- An SCF study of 1,950 cases where children had been removed from their homes because of abuse found that alcohol and drug problems are pervasive in families of abused and neglected children and that substance abuse is a substantial barrier to these children returning home. Additionally, in more than half of the child abuse deaths the children were from families in which parents had drug and alcohol problems.

- In Oregon, domestic violence is also occurring in 70 percent of child abuse cases. 100 percent of all child abuse fatalities occurred in homes where domestic violence also took place.

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- Data on this benchmark is all founded incidents of reported child abuse from SCF. It does not reflect unreported abuse, and victim rates do not reflect suspected abuse if there was not sufficient evidence to confirm abuse. While it is important to reduce the rate of abuse, it is also important to increase the proportion of abuse cases that are reported.

- Additional data is needed to determine how many children are abused by first time child abuse offenders vs. victims from families with repeat offenses. This is important information to evaluate and determine its effect on strategies and programs.

IV. **Desired Continuum Of Services And Support For Achieving The Benchmark**
Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- Growth promotion and primary prevention
- Specialized prevention
- Crisis intervention
- Universal visits to all newborns
- Parent education
- Affordable quality childcare
- Targeted abuse prevention work with children
- Respite care
- Community training and protocol for health, mental health, and law enforcement
- Culturally appropriate and accessible intervention and prevention services

V. **Sources Used**
- Wellness Team
- Multnomah Commission on Children and Families 1994 Comprehensive Plan
- Portland Multnomah Progress Board, 1996 Annual Report
- Faces and Voices of Violence - Multnomah County Health Department
- 1996 Status of Oregon's Children County Data For Community Action - Children First for Oregon
- 1995 Child Abuse and Neglect Report - State Office for Services to Children and Families Oregon Department of Human Resources

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INCREASE FAMILIES CARING FOR THEIR CHILDREN

**COMMISSION ON CHILDREN AND FAMILIES:**
Increase the number of families caring for their own children

## I. Why It Is Important

It is almost always in the best interests of children and youth to live with and be cared for by their birth families. The stability of living with one's own family and the sense of identity that comes from family membership is very important to children's well-being and personal adjustments. While it is occasionally necessary for children to be removed from their family home, it is important that every effort be made to keep substitute care to a minimum. Infants and toddlers consigned to foster care after forming specific attachments to their parent often show emotional disturbances. Children of this age are sufficiently mature to feel attached to the parent but cannot understand why that relationship should be broken.

## II. Benchmark Data

- In 1993, Services to Children and Families (SCF) placed over 2,400 children from 2,342 Multnomah County Families in some type of substitute care. This represents a placement rate of 16.29 per 1,000 children, the second highest rate among Oregon counties.

- The rate of increase in the number of children in substitute care in Oregon is substantially lower than the national rate in general, and of other west coast states in particular. Between 1987 and 1994 the national rate of children in foster care increased 70 percent as compared to 50 percent in Oregon.

- The placement of minority children in substitute care is substantially higher than for non-minority children. Thirty-five percent of the children in substitute care are of African American descent.

- The demand for foster care has increased substantially in recent years. Between 1993 and 1994, the average daily population of children in paid foster care in Oregon has increased 12.5 percent, with the most dramatic increase among children under 6 years old. Ten years ago, 16 percent of children in foster care were less than 6 years old. In 1995, that age group represents 42 percent of foster care.

## III. Key Trends and Issues

- There are multiple factors that put children, youth, and families at risk for separation. They include: teen pregnancy, substance abuse, domestic violence, and involvement in criminal activity.

- The percentage of families in Oregon with substance abuse problems has increased 7.5 percent over the past two years. Drug/alcohol problems were found in 79 percent of the "parental absence" cases and 73 percent of the neglect cases investigated by SCF in 1995.

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- An SCF study of 1,950 cases where children had been removed from their homes because of abuse found that alcohol and drug problems are pervasive in families of abused and neglected children and that substance abuse is a substantial barrier to these children returning home. Half of the children who are in foster care for at least one year do not return home because of their parents' severe drug/alcohol problems.

- The percentage of families in Oregon that have experienced domestic violence has grown 13 percent over the last two years. Currently, 40 percent of all SCF families have experienced domestic violence.

- In 1995, 27 percent of all parents involved with SCF are also involved in the criminal justice system. An average of 12 percent of SCF parents are incarcerated. Of the children in foster care, 22 percent cannot be returned home because the primary care-taker is incarcerated.

- This benchmark is closely related to the child abuse and neglect benchmark, in that abuse, neglect, and abandonment are the primary reasons for placing children in substitute care. Achieving this benchmark would result in less demand for substitute care along with a decline in child abuse and neglect.

- Data is not currently available which indicates the number of children in substitute care with teenage parents or how many of the parents with children in substitute care gave birth to their first child while they were teenagers. Both are important pieces of information to obtain.

**IV. Desired Continuum Of Services And Support For Achieving The Benchmark**
Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- Early childhood development programs
- School-based programs
- Youth programs

- Special populations
- Employment Services

These programs would need to focus on multiple social and economic conditions that impact capable families, including:

- Economic conditions
- Parenting capacity
- Substance abuse
- Health and mental health

- Delinquent behavior
- Family violence
- Housing and environmental conditions
- Out-of-control/non-delinquent behavior

**V. Sources Used**
- Wellness Team
- Multnomah Commission on Children and Families 1994 Comprehensive Plan

**MULTNOMAH COUNTY (An Urgent Benchmark):**
    Health Care Access/Economic - Percentage of population with economic access to health care.
    Health Care Access/Geographic - Percentage of citizens who have geographic access to basic
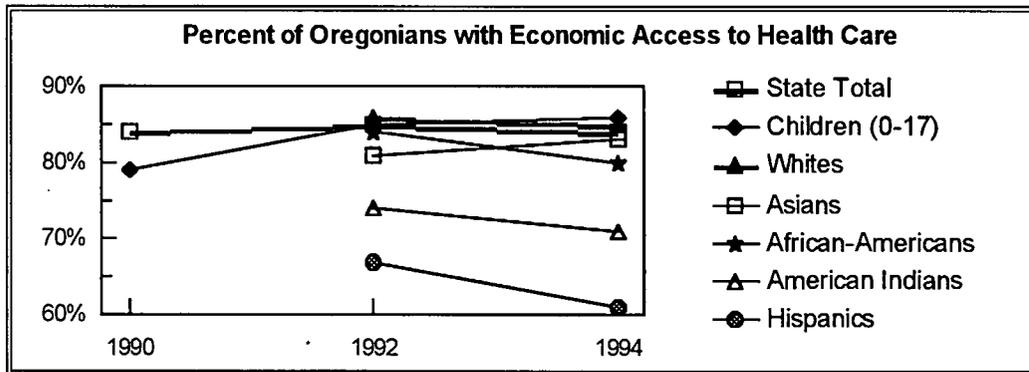    health care.

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
    Increase % of citizens who have economic access to basic health care.

I.    **Why It Is Important**
      Access to healthcare, economic and geographic, is essential to the growth and well being of
      individuals and families.   Families and individuals need to be able to afford healthcare.  They
      need to be able to get to healthcare services.   Lack of access to health care imposes greater
      future costs on all Oregonians.  Those who do not seek health care when they first need it
      risk developing much more serious problems or health emergencies through delay.  The
      concept of access extends beyond just affordability and location, it includes everything from
      transportation to language barriers to culturally appropriate services. Access to healthcare
      emerged as a leading state value, as surveyed by an Oregon Business Council study and
      Governor Kitzhaber's "Community Advice on Human Investments".

II.   **Benchmark Data**

   *   This benchmark measures economic access by looking at the percent of population that
       report being covered by health insurance, including the Oregon Health Plan.  According to
       the State Office of the Health Plan Administrator, there were 400,000 uninsured
       Oregonians in 1994, about 16% of the state's population.



**Percent of Oregonians with Economic Access to Health Care**

Legend: State Total, Children (0-17), Whites, Asians, African-Americans, American Indians, Hispanics

|                | 1990 | 1992 | 1994 |
|----------------|------|------|------|
| State Total    | 84%  | 85%  | 84%  |
| Children (0-17)| 79%  | 85%  | 86%  |
| Whites         |      | 86%  | 85%  |
| Asians         |      | 81%  | 83%  |

|                   | 1990 | 1992 | 1994 |
|-------------------|------|------|------|
| African-Americans |      | 84%  | 80%  |
| American Indians  |      | 74%  | 71%  |
| Hispanics         |      | 67%  | 61%  |

SOURCE: Oregon Progress Board 1995  Benchmarks Report

   *   24 percent of Oregon's uninsured are children under 18 years.  Nationwide, an estimated
       16 percent of the uninsured are children.

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- Geographic access looks at the availability of primary care physicians in different areas. There are 1,037 primary care physicians in Multnomah County, including family and general practitioners, internists, pediatricians, obstetricians, and gynecologists. There appears to be enough full-time equivalent (FTE) primary care physicians in most geographic areas, but there is not enough FTE available to Medicaid and low income residents.

**Number of Primary Care Physicians Available**
**(Full-Time Equivalents - FTE)**
**Multnomah County, 1994**

| Service Area | FTE Available to Entire Population | FTE Available to Medicaid | FTE Available to low Income | Percent FTE Available to Medicaid and Low Income |
|---|---|---|---|---|
| Albina | 33.57 | 5.78 | 1.56 | 22% |
| Downtown Portland | 71.88 | 13.93 | 6.55 | 28% |
| Gresham | 20.5 | 3.83 | 1.13 | 24% |
| Inner South Portland | 10.69 | 1.21 | 0.21 | 13% |
| Middle South Portland | 49.55 | 4.65 | 1.59 | 13% |
| Outer North Portland | 20.15 | 1.70 | 0.49 | 11% |
| Outer South Portland | 33.70 | 5.18 | 1.04 | 18% |
| St. Johns | 7.15 | 1.22 | 0.32 | 22% |
| West Portland | 41.94 | 5.42 | 1.58 | 17% |
| County Totals | 289.13 | 42.92 | 14.47 | 20% |

*SOURCE: Primary Care Physician Capacity in Oregon, 1994.*
*From Portland-Multnomah Progress Board 1995 Annual Report.*

## III. Key Trends and Issues

- According to the State Office of the Health Plan Administrator, there were 400,000 uninsured Oregonians in 1994. The uninsured share distinct characteristics:
  - They tend to be low-income.
  - A high proportion are Hispanic.
  - A high proportion of those with jobs work in retail, service and \manual labor occupations.
  - They face many barriers -- labor market, education and social -- to acquiring health insurance.

- People in the working poor -- those between 100 and 200 percent of the federal poverty level -- make up the majority of Oregon's uninsured. In most cases, they are ineligible for Medicaid through the Oregon Health Plan, but don't earn enough to buy health insurance, particularly family coverage, without assistance from an employer.

- According to a 1994 Oregon Health Division survey, a full-time equivalent (FTE) ratio of physicians to the general population between 1:1500 and 1:2500 will provide

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adequate access to services.  In Multnomah County, the ratio is estimated to be 1:787, at least twice the acceptable ratio.  However, low income residents in certain geographic areas have less access to primary care physicians than other Multnomah County residents.

- Statewide, uninsured children are twice as likely to live in poverty as those children who are insured.  Oregon currently offers coverage for all children under the poverty level (and for children 6 and under up in families up to 133 percent of the poverty level).  Why so many children still don't have coverage needs to be identified.

- The issue of access to healthcare includes access to culturally appropriate services for the county's diverse population.  Access to specialized health care is limited to different communities.  Access also means the ability have transportation to services and childcare while using the services.

**Interrelationships**
- "Working poor" incomes directly affect an individual's or family's ability to afford health insurance coverage or to live where health care is geographically available.

- Because of the cause of violence is so complex, a multifaceted approach is needed to address the problem.  Access to healthcare, mental healthcare and drug & alcohol treatment needs to be included in this approach.

- Access to health care can increase adequate prenatal care and healthy babies born drug free; identification of abuse; and can help stabilize family environment.


**IV.  Desired Continuum Of Services And Support For Achieving Benchmark**
*Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches.  It is not meant to be a comprehensive list.*

- Funding system to support universal health care


**V.   Sources Used**
- The Office of the Health Plan Administrator, The Uninsured in Oregon  - Who are They?, November 1995.
- Oregon Progress Board, Oregon Benchmarks - Report to 1995 Legislature, December 1994.
- Portland Multnomah Progress Board, 1996 Annual Report
- Multnomah County Health Department, Annual Report 1994 through 1995.

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## INCREASE HIGH SCHOOL COMPLETION

**MULTNOMAH COUNTY (Not an Urgent Benchmark)**
High School Completion - % of students completing high school or an equivalent program.

**COMMISSION ON CHILDREN AND FAMILIES:**
Increase the number of youth graduating from high school.

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Increase the high school completion rate.

### I.   Why it is Important

Youths dropping out of school creates a personal and societal hardship. Over a lifetime, a high school dropout will earn on average $200,000 less than a high school graduate. One-half of the heads of households on welfare did not complete high school. Eighty-two percent of the persons incarcerated in 1990 were high school dropouts. Workers who haven't completed High School are 170 percent more likely to be unemployed. Keeping kids in school is a sound investment.

### II.   Benchmark Data

Note on Data Limitations:
Currently, students who leave school but complete their GED are counted as dropouts. In 1994-95, the basis for reporting dropout rates was revised in Multnomah County to include alternative schools. Most of the increase in the rate for that year is attributable to this reporting change.



**High School Dropout Rate**
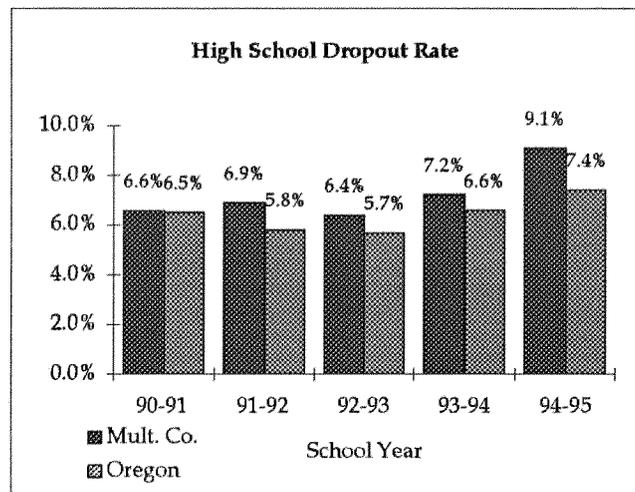
Source: Oregon Department of Education; chart developed by Portland-Multnomah Progress Board

- MCCF Target: By 2000, 2% or fewer of all young people in Multnomah County will leave high school before graduation.

- Nationally, 87% of the population of young adults (ages 19-20) had a high school credential (either diploma or alternative credential) in 1992. This rate varied by race/ethnicity:
  - African American 81%
  - Hispanic 65%
  - White 91%

- In Oregon, the dropout rate for Hispanic students is more than twice as high as the overall dropout rate.

- In Multnomah County, the percent of individuals 18-24 in 1990 who had completed high school or higher was:
    - African American 70%
    - Asian 80%
    - Hispanic 57%
    - Native American 63%
    - White 79%

## III. Key Trends and Issues

- Mobility of students increases the likelihood of dropout and academic success. One study of middle school students showed that each time a student changes schools, the odds of dropping out increase by 30%. Another study showed students who have changed schools four or more times are about a year behind by sixth grade.

- Unsupervised wandering around increases the likelihood of juvenile crime for boys, and teen pregnancy for girls.

- Hispanic students who were born outside of the United States have a higher dropout rate (43%) than first generation (17%) or second generation (24%)

- Poor attendance rate in the middle schools is an indicator of future juvenile crime activity for boys.

## IV. Desired Continuum Of Services And Support For Achieving Benchmark

Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- Encourage collaboration and coordination between schools and social services.
- Create a community atmosphere by using the school as a center of activity beyond the school day.
- Encourage community decision making.
- Involve youth in decision making at the community level.
- Address issues related to mobility such as loss of peer, credit makeup, and optional attendance at previous school until end of year. Also availability of affordable and adequate housing.
- After school activities on a regular basis for all students.
- Engage all parents in a culturally sensitive manner in their child's educational plan.
- Consistently monitor attendance data for students and offer supports to children and families in order to achieve better attendance.
- Target efforts aimed at retaining students in school to research on why students dropout.

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**V.    Sources Used**
- Portland Public Schools High School Monitoring Study Year 4 Report
- School Board News, "School Completion Rates:  A Public School Success Story"
- MCCF 1994 Comprehensive Plan
- Leaders Roundtable materials
- 1990 US Census
- Dropout rates by school for Multnomah County high schools
- Portland Multnomah Progress Board 1996 Annual Report

INCREASE SAFE STABLE HOUSING

**MULTNOMAH COUNTY (Not an Urgent Benchmark):**
Percentage of home owners and renters below median income spending less than 30 percent of their household income on housing and utilities.

**COMMISSION ON CHILDREN AND FAMILIES:**
Increase safe stable housing.

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Percentage of home owners and renters below median income spending less than 30 percent of their household income on housing and utilities.

### I. Why it is Important

While housing and poverty are separate benchmarks, they are closely related issues. Poverty limits a family's ability to afford the basic necessities, including safe stable housing. More children and families in Multnomah County are living in poverty and there is more family homelessness than in the past. However, low income people are faced with a decreasing supply of affordable rental housing as rental costs outpace inflation combine with low vacancy rates. In addition to the high rents and large deposits required for move-in, prospective renters are often required to show earnings that are three times the amount of monthly rent. Such barriers make finding and keeping housing difficult for low-income people, especially those with fixed incomes.

### II. Benchmark Data

- The number of low-income renters in the Portland Metro area in 1990 was 56,900 while the number low-cost rental units was 31,000. This means that the affordable housing gap was 25,900 units.

- In keeping with the large increases in housing costs in the county over the last 15 years, rental units in the lower rent ranges decreased dramatically between 1980 and 1990.

Number of Units by Monthly Rent Range For Multnomah County
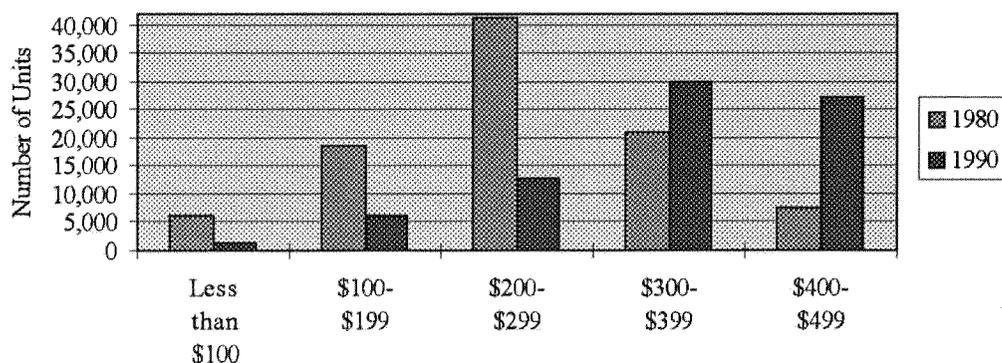
- Nationally, the number of poor renters in the U.S. has increased due to recession-related declines and ongoing depletion of low-cost housing stock.

- Low income renters are more likely than others to live in housing with problems. In 1990, 1,437 households in the county lacked complete plumbing facilities and 2,014 households lacked complete kitchen facilities.

## III. Key Trends and Issues

**Affordability**
- The Housing Authority of Portland has nearly 10,000 households on its Public Housing and Section 8 waiting lists. Some waiting lists are closed. In 1990, only 40 percent of poor renters were in subsidized housing.

- Thirty percent of income is considered the maximum share of income that should be devoted to housing expenses. In the Portland-Metro area for 1990, 22,500 or 70 percent of poor renters were paying 30 percent or more of their income for housing; 15,500 or 48% were paying 50 percent of more. Most low income renters are carrying a high rent burden compared to their income.

- For the past 10 years, the rental vacancy rate has been extremely low, indicating a tight housing market, particularly in close-in neighborhoods.

- A 1996 study by Northwest Pilot Project shows that downtown housing stock has declined by 5 percent over the past two years. Two new low-income projects were complete in 1994, but rent hikes in other once-affordable apartments resulted in 248 fewer low income units in downtown.

**Homelessness and Safety**
- Home is unsafe for many women and children. Between July 1993 and June 1994, domestic violence shelters turned away 27,000 women and children seeking shelter. Many unaccompanied youth report becoming homeless because of abuse or alcohol or drug use of parents.

- Over 1,437 adults and 600 children were homeless in Multnomah County on the night of the November 17, 1995 one night shelter count.

- Over three-fourths of the women in the local Community Action Program's Homeless Families Program have experienced three or more types of violent acts in domestic relationships. This does not include the 11% of women in domestic violence shelters who are homeless.

- There is a strong correlation between frequent moves and household stability and the school dropout rate. One third of youth who dropped out of high school in 1994-95 had been enrolled in that school for one year or less.

**IV. Desired Continuum Of Services And Support For Achieving The Benchmark**

Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- Increase affordable housing stock
- Housing stability
- Safety
- Advocate for increasing availability of living wage employment
- Advocate for affordable housing through Metro process.
- Expand housing options that keep families together, i.e. group living, 3+ bedroom units
- Expand teen parent programs to include independent living skills
- Family center access to the Landlord-Tenant Medication program
- Rent Assistance and support services
- Community policing efforts
- Expand safe housing for women and children escaping domestic violence

**V. Sources Used**

- Wellness Team
- Multnomah Commission on Children and Families 1994 Comprehensive Plan
- Portland Multnomah Progress Board, 1996 Annual Report
- Poverty in Multnomah County: A Descriptive Report - Multnomah County Department of Community and Family Services Office for Community Action and Development
- Comprehensive Plan for Children and Families - Multnomah Commission on Children and Families

## INCREASE ACCESS TO MENTAL HEALTH CARE SERVICES

**MULTNOMAH COUNTY (An Urgent Benchmark):**
   Increase Mental Health Care Services: % of population with access to public or private treatment for mental or emotional problems [ by children and adults ]

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
   Increase the percentage of mentally ill residents who are self-sufficient.

**Data to be provided prior to September 17**

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### REDUCE MINORITY OVER-REPRESENTATION IN THE JUVENILE JUSTICE AND CHILD WELFARE SYSTEMS

> **COMMISSION ON CHILDREN AND FAMILIES:**
> Reduce minority over-representation in the juvenile justice and child welfare systems

## I. Why It Is Important

Social justice for minority youth is an issue for both the juvenile justice and the child welfare systems. Most planning has involved the juvenile justice system. The Juvenile Justice Department has concentrated on reducing the over-representation of African-American youth in the juvenile justice system through a variety of programs funded with state, federal and county money. The MCCF is committed to these efforts and to similar future efforts related to the child welfare system. The MCCF's predecessor funded programs targeting minority youth in the state training schools and funded a SE Asian youth needs assessment. There has been a decrease in minority over-representation in the juvenile justice system in the past few years, especially for African American youth, but the reasons for this have not been fully examined.

## II. Benchmark Data

- For many years, the juvenile justice system has been the focus of research on the perception of bias toward minority youth. Studies of Multnomah County include the ongoing Office of Juvenile Justice & Delinquency Prevention study, begun in 1992 by the State Commission on Children and Families, and the more recent research of the Oregon Supreme Court Task Force on Racial/Ethnic Issues in the Judicial System.

  While the nature of reasons for over-representation are not fully addressed, the research to date indicates a need for further and more refined analysis of the system data, controlling for the influence of the number of prior referrals, crime severity, and selection factors. All of these can affect the accumulation of cases at certain decision points in juvenile justice processing.

- Qualitative data analysis suggest the need for additional research on the availability of client resources and services.

- No comparable research of similar issues within the child welfare system has been undertaken since 1982.

## III. Key Trends and Issues

- The Supreme Court Task Force's report called for:
  - A comprehensive statewide plan to reduce minority over-representation and disproportionate confinement in the juvenile justice system

  - More skilled interpreters to assist non-English speaking parents/care-givers.

**REDUCE MINORITY OVER-REPRESENTATION IN THE JUVENILE JUSTICE AND CHILD WELFARE SYSTEMS**

- More trained and culturally-sensitive experts available to juvenile court staff and practitioners

Although it is phrased more generally, this initiative deals nearly entirely with young, African American males.

- Over-representation for young African American males becomes more acute as system penetration increases from early warnings, to diversion, to early detention, to commitment to state training schools, to remand to the adult system.

## IV. Desired Continuum Of Services And Support For Achieving Benchmark

Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

**System development activities**
- Study the need and effectiveness of current programming.
- Develop processes to ensure that all services and supports are relevant, gender specific, and appropriate for diverse populations including ethnic, cultural, sexual and linguistic minorities. Also ensure an equitable distribution of resources and services.
- Cooperate and collaborate with local, state and federal efforts to identify and address the problems of over-representation and develop community-based alternatives
- Develop a resource listing of interpreters
- Advocate for a system of cross-cultural training for juvenile justice personnel and other care-givers
- Continue work with the state Commission on Children and Families, DJJS, and CSD on the pilot study of over-representation of minority youth in the juvenile justice system
- Coordinate services on a broader scale, involving state, county, school and community-based organizations
- Support cross-cultural diversity training and education for juvenile justice personnel, practitioners, elected officials, the general public and the at-risk populations

**Direct service activities**
- Advocate with Oregon Children Services Division (CSD) for residential placements that are accessible and available to minority youth
- Advocate for continued funding of community-based alternatives to secure confinement
- Continue to advocate for and fund post-commitment transitional and community-based placement for minority youth
- Increase the availability and improve the quality of diversion programs
- Provide after-care programs to facilitate the reintegration of minority youth from state/county facilities back into their home communities
- Advocate for an increased level of mental health services

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**REDUCE MINORITY OVER-REPRESENTATION IN THE JUVENILE JUSTICE
AND CHILD WELFARE SYSTEMS**

- Provide interpreters as needed for non-English-speaking children, parents and care-givers in all juvenile proceedings, including informal proceedings

**Other activities**
- Develop alternatives to secure confinement for minority youth
- Encourage study of minority youth over-representation of in child welfare system
- Develop a systematic ongoing monitoring procedure to determine at regular intervals the percent of minority youth being processed through each stage of the juvenile justice system, in order to target more specifically the decision points at which major disparities occur

**V.   Sources Used**
- Wellness Team
- Report of the Oregon Supreme Court Task Force on Racial/Ethnic Issues in the Judicial System, 1994.
- Office of Juvenile Justice & Delinquency Prevention study, begun in 1992, Oregon Commission on Children and Families
- Multnomah Commission on Children & Families Comprehensive Plan, 1994

## REDUCING THE NUMBER OF CHILDREN LIVING IN POVERTY

**MULTNOMAH COUNTY (Not Urgent Benchmarks):**
**Children in Poverty:** Percentage of children living above poverty [by ethnicity]
**Poverty:** Percentage of citizens with incomes above 100% of Federal poverty level.
**Income:** Percentages of citizens with incomes above 125% of the Federal Poverty Level.
**Homelessness:** Number of citizens who were homeless at some time in the last year [by children and adults]

**COMMISSION ON CHILDREN AND FAMILIES:**
Reduce number of families living in poverty

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Reduce number of families living in poverty
Increase the % of citizens with incomes above 100% of the federal poverty level.
Increase average annual payroll per non-farm worker.

### I.   Why it is Important

Poverty limits a person's ability to reach his or her potential in every aspect of life, including the ability to provide for self and family, and to contribute to the health of the community. Poverty affects the abilities of families to provide for their basic needs, contributes to health and mental health problems, and can lead to homelessness. Although many factors put children at risk, nothing predicts bad outcomes for a child more powerfully than growing up poor. Children living in poverty are more likely to die in infancy, become pregnant teens, drop out of school, suffer health, mental health and behavior problems, and chronic illness, abuse and neglect, and are more likely to have developmentally delayed growth and cognitive development.

### II.   Benchmark Data

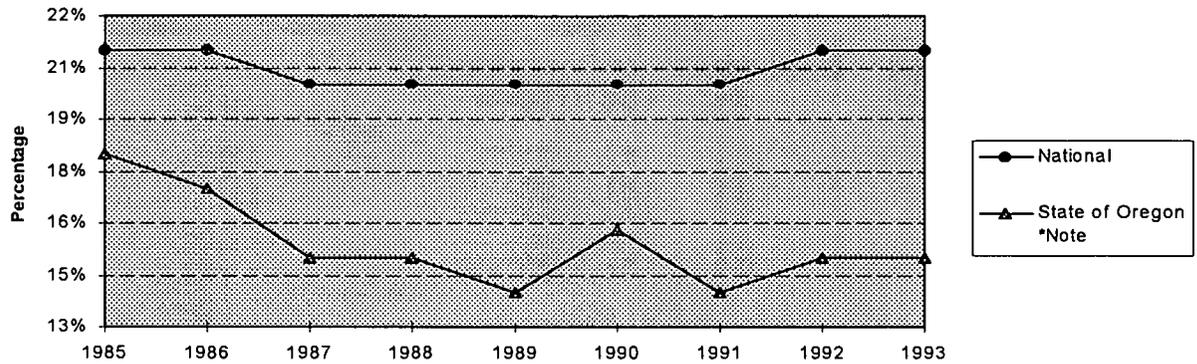**Percentage of Multnomah County Population Living in Poverty**
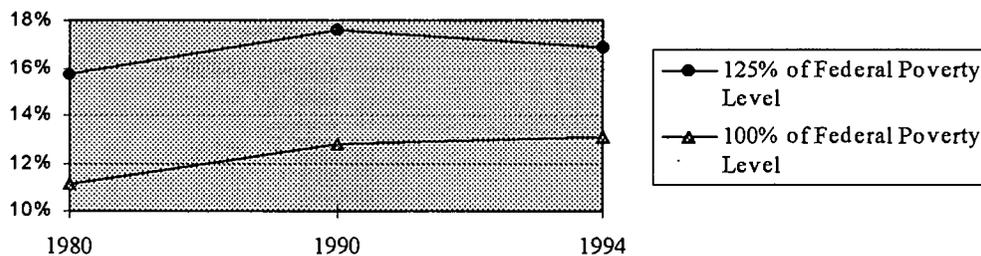


- The number and percentage of people living in poverty in Multnomah County grew from 11.1% in 1980 to 13.1% in 1994.

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- In 1990, 74,639 people in the county were living in poverty; more than 21,000 were children.

**Percentage of Children In Poverty**



* Note: In Multnomah County, 14% of children aged 17 and under were in poverty in 1990.

- People of color, including children, are more likely to be poor, compared to other racial/ethnic populations.   All racial and ethnic minority populations in the county are disproportionately poor compared to whites.

**Percentage of Children of Color  0-17 Living Below Poverty Level,
Multnomah County, 1980 & 1990**

| Ethnic Group | 1980 | 1990 |
|---|---|---|
| African-American | 37% | 38% |
| American Indian | 23% | 34% |
| Asians | 31% | 26% |
| Hispanic | 23% | 33% |
| Whites | 10% | 13% |

## III. Key Trends and Issues

- Locally, persons in female-headed households are more likely to be poor or homeless, compared to other types of families.  Nationally, single female-headed families are the demographic group most likely to be chronically poor.

- Children under the age of 18 are disproportionately poor.  Nationally, the percentage of children in poverty grew from 15.4 percent in 1974 to 22 percent in 1994.  This is well over 15 million poor children.  Of these children, one third were from working poor families where one or both parents worked all year.  In the years since 1989, a period of overall strength in the national economy, the number of children in working-poor

families has jumped 30 percent.

- Real wages in the county, adjusted for inflation, have stagnated, and minimum wage jobs alone do not place families above poverty level.

- The Outer East contains the highest number of people in poverty, followed by Southeast. Downtown, North, and Northeast contained the highest percentages of people in poverty when compared to total population in those districts. Poverty has moved North and East between 1980 and 1990. Outer East and Southeast contain half of all people in poverty in the county.

Distribution of Poverty in Multnomah County by Service District (1990 census)
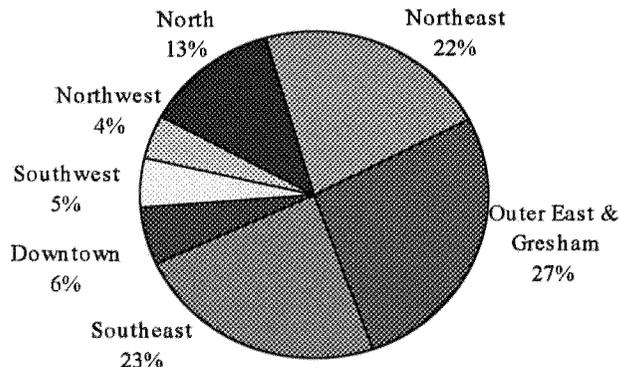


**Housing and Homelessness**
- Housing costs in the county have far outpaced the rate of inflation, and low-income people are faced with rapidly increasing rents and low vacancy rates, which create a landlord's market. Nearly half of all poor and homeless in the county are people in families.

- The US Census tends to undercount the homeless because of their mobility and the instability of their living conditions. Therefore, data from One Night Shelter Count (ONSC) is used locally to estimate the homeless population. However, the ONSC underestimates the number of homeless in the county, because it includes only those people who seek shelter on the night of the count. It does not include "campers" or others who did not seek shelter.

**Federal Poverty Level**
- The federal government defines poverty according to standards for costs of food and shelter, which many believe are too conservative. For example, in 1996 the Federal Poverty Level for a family of four is $15,600 annually. The number of poor families, those unable to provide three nutritious meals a day, stable housing, and access to health care and other needs is higher than the federal poverty guidelines would indicate. The Panel on Poverty and Family Assistance (a panel of the National Research Council with

representation from universities nationwide) has recommended that the poverty level should incorporate a range that goes up to about 125% of the current guidelines, or $19,500 for a family of four.

**Interrelationships**

- The strains and lack of options associated with poverty make poor families vulnerable to a variety of problems at higher rates than the general population; including meeting basic needs for housing and sustenance, utilities assistance, ability to gain and hold employment and child care and transportation issues, mental health concerns, physical health concerns, and for children, developmental delays and teen pregnancy.

- As a result of domestic violence, many women become single heads of household, placing them at greater risk for poverty and homelessness. Over three-fourths of the women in the local Community Action Program's Homeless Families Program have experienced three or more types of violent acts in domestic relationships. Addressing issues of domestic violence will allow many families living in poverty to take the steps necessary to move to self-sufficiency.

- Adequate supplies of permanent affordable housing, accessible and affordable child care, and living wage jobs are needed to facilitate families moving from poverty to self-sufficiency.

- Changing federal, state, and local policies will impact low-income families, including: the devolution of federal programs to state block grants, which will affect low-income programs locally; the restructuring of public housing programs, which is likely to reduce affordable housing both through the Housing Authority of Portland and through nonprofit development efforts; and welfare reform, which will limit welfare recipients to two years of assistance.

## IV. Desired Continuum Of Services And Support For Achieving The Benchmark

Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

**Basic Needs**

- Includes emergency shelter, food, clothing, transportation, health access, energy assistance, information, and personal advocacy.

- Strategy for those who are not able to be self-supporting: Provide for their basic needs through linking to appropriate resources and income supports.

September 17
Benchmark Retreat
Last Rev. 9/10/96

**Social Services**
- Community Action's Homeless Families Program has demonstrated effectiveness in stabilizing long-term homeless families in housing by building a social service structure that links services to housing.
- Head Start programs for preschool children and families have demonstrated effectiveness in providing low-income children with the skills to succeed in school.

**Employment**
- Social services provide the bridge between basic needs and employment for those who can be self-supporting.
- Strategy for those who are able to be self-supporting: Link these families, who are part of the transitional labor force, to social services and resources (e.g., ESL-ABE, vocational education, transportation, child care, etc.), coupled with employment and training services to enable them to obtain and keep living wage employment.
- Steps to Success, which operates the local JOBS and JOBS-Plus programs for AFDC recipients, is a model of the integration of basic needs and social service supports to reduce welfare rolls through employment and assisted child care.
- Women in Transition is a local model program that does one-on-one mentoring with low-income women assisting them to obtain employment and training and to achieve living wage employment and needed services through intensive support services.

**Education and Training** [for those who can become self-sufficient]
- Rural Development Initiatives (RDI) in Redmond is a model that helps communities suffering major economic dislocations to develop new strategies for economic health. It should be adaptable to an urban County.

**Health Care** [including mental health and substance abuse ]
- The Women, Infants, and Children (WIC) program is a cost-effective, public health program that improves the health of mothers and children, increases the chance of healthy birth outcomes, decreases the chance of low-birthweight babies, increases a child's cognitive development and increases access to other health and social services.

**Personal Safety**
**Housing**
**Child Care**
**Income Supports** [for those unable to achieve self-sufficiency, e.g., aged or disabled]

**V. Sources Used**
- Wellness Team
- Multnomah Commission on Children and Families 1994 Comprehensive Plan
- Portland Multnomah Progress Board, 1996 and 1995 Annual Reports
- Poverty in Multnomah County: A Descriptive Report - Multnomah County Department of Community and Family Services Office for Community Action and Development
- 1996 Kids Count Data Book - Annie E. Casey Foundation

**REDUCE RECIDIVISM**

I.  **Why It Is Important**
Individuals who repeatedly return to prison for criminal behavior are a drain on government resources. According to the Oregon Department of Corrections (DOC), it costs $19,611 a year to house a prisoner in the state prison system. A consistent definition has yet to be established between agencies.

II. **Benchmark Data**
This benchmark measures the percentage of parolees who return to prison within three years. Returning to prison soon after incarceration suggest that parolees may have trouble changing their criminal behavior. The only data currently available on a system wide basis, is provided by DOC.

- *Nationally:* From 1980 to 1991 the number of parole violators who were returned to prison quadrupled, increasing from 28,800 to 142,000.

- Within 3 years of their release from the Federal Bureau of Prisons (BOP) in 1987, 40.8 percent of former inmates had either been rearrested or had their parole revoked.

- *Statewide:* From 1987 to 1991, Oregon tracked parolees being released for the first time and observed that over periods of three years, they were returned to prison from 38.9% to 46.7 percent. Approximately half of these were returned for technical violations of parole.

- In a 1992 DOC study of felony probation and parole/post prison supervision revocation, researchers found that 67% of offenders who were revoked also experienced problems with alcohol and drug use prior to revocation. Seventy-three percent of those revoked had been required to participate in alcohol/drug treatment. There is clearly a significant correlation between alcohol/drug problems and revocations.

- *Locally:* For those prisoners released from state prison by the end of 1991, 43% were returned within three years. Of those released the first half of 1992, 31.8% were returned within three years indicating a decline. However, the percentage increases 35.3% for prisoners released to Multnomah county between July-December, 1992.

- Approximately 18% of 1992 prisoners released to Multnomah County returned within one year of incarceration, 28.3% within two years, and 35.3% within three years.

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**REDUCE RECIDIVISM**

**Percentage of Parolees Released Who Are Returned to Prison Within Three Years
Multnomah County, July-December, 1992**

*Number of Months After Release That Parolees Are Returned*

| Months | Percentage |
| --- | --- |
| 36 months | 35.3% |
| 33 months | 33.0% |
| 30 months | 31.6% |
| 27 months | 30.4% |
| 24 months | 28.3% |
| 21 months | 25.7% |
| 18 months | 23.7% |
| 15 months | 21.3% |
| 12 months | 18.1% |
| 9 months | 12.1% |
| 6 months | 6.2% |
| 3 months | 2.3% |
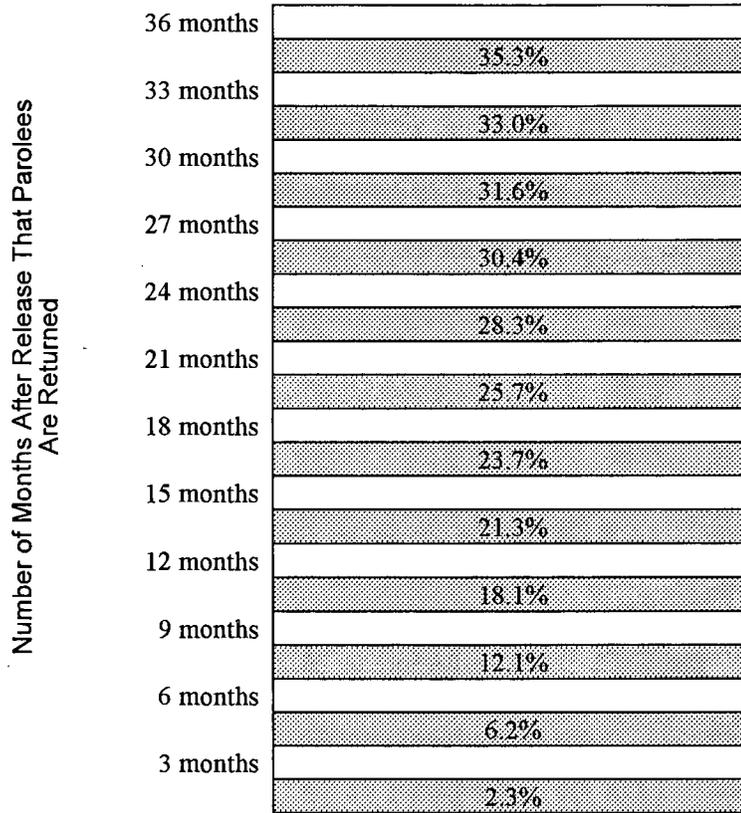
- The National Institute of Justice produced a study that looked at all associated costs, tangible (the dollar amount calculated by adding up property losses, productivity losses, medical expenses, etc.) and intangible (the less easily quantifiable pain, emotional trauma and risk of death from victimization). The researchers found that victimizations generate $150 billion annually in property and productivity losses and outlay for medical expenses. This amounts to an annual "crime tax" of roughly $425 per individual in the US. When the intangibles are put in dollar terms, the costs rise to $450 billion annually (or $1,800 per person) These findings have the potential to affect programs and strategies aimed at reducing crime and criminal behavior. Early releases programs are an example. When offenders are kept in prison, there is no cost to individual victims during the incapacitation period. By contrast, when an offender who is released early commits a crime, the costs are shifted to the victim. The high cost the victim must pay highlights the importance of ensuring public safety in matrixing.

## III. Key Trends
- The percentages of parolees returned to prison is largely the result of changes in public policy and administrative practices. The increase in returns to prison in 1995 was likely influenced by the passage of Measure 11 and similar changes in government policy.

- Wilson and Richard Herrnstein, the authors of <u>Crime and Human Nature</u>, argue that "criminal behavior depends as much or more on age as any other demographic characteristic." Almost 60% of the people who were arrested and charged with crimes in 1993, were between the ages of 13 and 29. Because the youth are high-rate offenders, changes in the proportion of the population that falls within this age group will have an impact on the national crime rate. Shifts toward a more youthful population, such as during the 'baby boom' would be expected to produce increasing crime rates as the babies grew into adolescence. Current projections indicate there will be a 25% increase in the number of teens in the 15-19 age range by the year 2005.

- Between 1987 and 1993, state spending increases for corrections outpaced higher education by 41% nationwide.

  A recent study in Oregon by Michael Finigan, Ph.D., entitled Societal Outcomes & Cost Savings of Drug and Alcohol Treatment in the State of Oregon, demonstrates the effectiveness of alcohol and drug intervention in reducing recidivism on a cost-effective basis.

*Percentage of Clients who have Arrests and Convictions*

|  | Treatment Complete | Treatment Incomplete | Percent Difference |
|---|---|---|---|
| % who had at least one subsequent arrest | 16.6 | 24.9 | 33% |
| % who had at least one subsequent conviction | 10.5 | 15.9 | 34% |
| % who committed at least one subsequent drug crime | 6.1 | 9.2 | 34% |
| % who committed at least one subsequent property crime | 5.8 | 9.7 | 40% |
| % who committed at least one subsequent violent crime | 3.6 | 4.7 | 23% |

**DOC Database, Finigan Study 1991-92

**Key Issues**
- How can we best allocate our criminal justice resources. While prisons and jails are a necessary component of a well-balanced criminal justice system, what are the trade-offs in terms of costs and results between jails, education and other public services?

- Can we use SB1145 as an opportunity to develop or increase the current use of cost-effective corrective programs and prevention strategies?

- The current data is somewhat problematic because the definition of recidivism does not take into account local policy. The methodology used by DOC counts returns to prison for technical violations as well as returns to prison for new crimes. The State is currently revising their definition of recidivism and is likely to include some level of indexing the offenders by classification of high, intermediate and low risk classifications.

- There is a lack of agreement on the definition of recidivism and there is a lack of agreement on what it is really an indicator of.

- The crowding of the nation's prisons has a "trickle-down" effect. When state prison inmates take up too much room in local jails, sheriffs and police may run out of space for new arrestees.

- Is incarceration the most effective way to reduce crime in a particular case and, therefore, to reduce the cost of crime to victims and society? What is the best balance to protect the public from an immediate threat to their safety while encouraging long term changes in offender behavior?

- Lack of community transition programs for inmates returning from prison in order to reduce recidivism. Lack of comprehensive programs to address training and employment needs of offenders.

- Outdated hardware and communications systems to track offenders after their participation in corrections programs and to demonstrate "what works".

- When confronted with the higher stakes of new "mandatory minimum sentence" laws, like Ballot Measure 11, defendants are less likely to forgo their right to a trial by jury, thereby increasing the costs of adjudicating crimes and reducing the effectiveness of community corrections programs.

**IV. Desired Continuum Of Services And Support For Achieving The Benchmark**

*Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.*

- Apprehension
- Pre-trial incarceration
- Investigation
- Prosecution
- Adjudication
- Jail Sentence
- Supervision
- Structured Sanctions (including jail)
- Treatment
- Comprehensive *(programs which strive to address the complex issues of addiction often cannot be successful unless they also address basic needs and chronic skill deficiencies)*

**Potential strategies and promising practices**

- Balance corrections supervision, custodial sanctions and community based programs and sanctions.

- Match offenders to services - make informed decisions regarding the selection of offenders for appropriate treatment and custody programs.

- Target high-risk, drug- involved offenders who sentenced locally to jail, diverted or released from state prison.

- Swift and certain interventions and adjudications so the offender understands the relationship between a his or her behavior and the community's response to that behavior. The response must be predictable and as immediate as possible.

- Develop long-range strategy to coordinate public safety resources. Develop a clear definition of roles; eliminate duplication of services; allocate resources according to community and regional needs; recognize the interrelationship between all aspects of public safety and other government activity.

- Support programs that demonstrate cost-effective methods to reduce recidivism.

- Focus on substance abuse, cognitive restructuring, education and work programs, as well as the critical, high-risk transition period between incarceration and reintegration into the community.

- Examining different models for community courts and identify groups of crimes/offenders that could be better served through this system.

- Timely and effective services for juvenile offenders.

- In the largest randomized corrections experiment conducted in the United States, the effectiveness of Intensive Supervision programs (ISP) was compared with routine probation. It was concluded that, while more supervision was not associated with reductions in recidivism, supervision coupled with counseling, employment assistance, restitution and community service was associated with lower levels of arrest and technical violations.

V. **Sources Used**
- 1996 Annual Report Benchmarks, Portland Multnomah Progress Board.
- Oregon's 1996 Drug & Violent Crime Strategy, 1996
- Multnomah County Benchmarks 1995-96.
- Combating Violence and Delinquency: The National Juvenile Justice Action Plan, Coordinating Council on Juvenile Justice and Delinquency Prevention, 1996.
- Islands of Safety, Assessing and Treating Young Victims of Violence, Zero to Three/The National Center, 1996.
- Seeking Justice, Crime and Punishment in America, Edna McConnell Clark Foundation, 1995.
- Crime and Politic in the 1990's, Creating Demand for New Policies, Campaign for an Effective Crime Policy, 1996.
- Faces and Voices of Violence, Multnomah County Health Department, June 1996.
- Societal Outcomes & Cost Savings of Drug & Alcohol Treatment in the State of Oregon, 1996 Prepared for Office of Alcohol and Drug Abuse Programs and ODHR and Governor's Council on Alcohol and Drug Abuse Programs by Michael Finigan, Ph.D.
- What Works, A Review of the Corrections Literature on Program Effectiveness, Lane County Community Corrections Manager, 1993
- Extent and Costs of Crime Victimization: A New Look, National Inst. of Justice, 1996.

## REDUCE THE RATE OF TEEN PREGNANCY

**MULTNOMAH COUNTY (An Urgent Benchmark):**
   Reduce Teen Pregnancy: pregnancy rate per 1,000 females ages 10 - 17

**COMMISSION ON CHILDREN AND FAMILIES:**
   Reduce the rate of teen pregnancy.

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
   Reduce the pregnancy rate per 1,000 females ages 10-17.

### I. Why it is Important

A community with high rates of pregnant teens carries many direct risks to the mother and the child, and many other indirect risks to the father and the community. A teen mother is far more likely to never graduate from high school, to give birth to a low birthweight baby, not to experience adequate prenatal care, and to become pregnant again soon. Teen mothers are less likely to have the direct emotional and financial support of a father, and more likely to become dependent on public assistance for most basic needs, like food, shelter and health care. The fathers of babies born to teen mothers are less likely to be connected to the mother or the child, and less connected and committed to the community, giving them little incentive for developing caring and nurturing qualities. Sons of teen mothers are more likely to go to prison than sons of mothers who delay childbearing.

### II. Benchmark Data

#### Dimensions of teen pregnancy

- 833 pregnancies among teens aged 10-17 in 1994.
- In 1994, 6.3% of all pregnancies were among teens aged 10-17.
- In 1994, 5.4% of all births were to teens aged 10-17.
- The majority of teen pregnancies are among older teens: 60% of teen pregnancies were to mothers 18-19 years old in Multnomah County in 1992.



Teen Pregnancy Rate, 1988-95
* 1995 provisional rolling data only
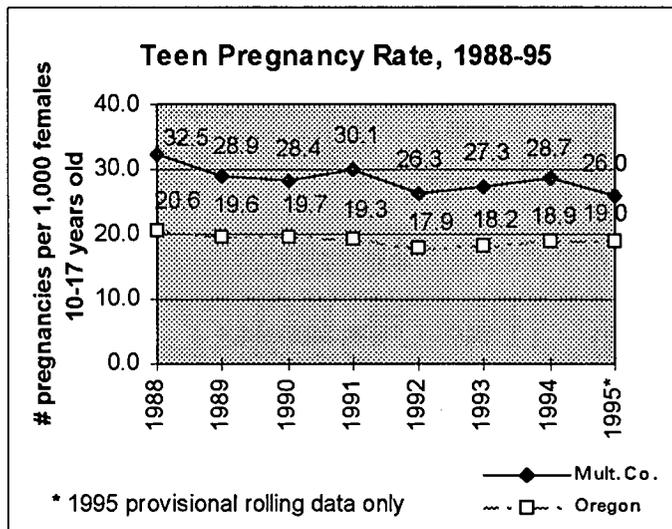
Source: Oregon Health Division

### Teen Pregnancy Rates by Race/Ethnicity

1990 rates in Multnomah County for teens age 10-17 vary by race/ethnicity:

- African Americans 57.9 per thousand
- American Indians 33.1 per thousand
- Hispanics 32.5 per thousand
- Asians 18.7 per thousand
- Whites 24.0 per thousand

## First birth versus repeat birth

- 25% of births to teen mothers in 1992 were to teens with at least one prior delivery; 75% were to first time mothers. Of the repeat births, 80% of the mothers were 18-19 years old.
- There is a 20% chance a first-time teen mother will have a repeat pregnancy within 1 year.

## Earlier Sexual Involvement

- According the Alan Guttmacher Institute's *Sex and America's Teenagers,* 1994, a larger percent of teens are having sex than in previous decades:

### Percent Sexually Active By Age

| 12: 9% | 13: 16% | 14: 23% | 15: 30% | 16: 42% | 17: 59% |
|--------|---------|---------|---------|---------|---------|

## Fathers

- Nationally, 70 percent of the births to teen mothers (10-18) are fathered by adult men.
- Statewide, for teen mothers under 15, the father was at least 4 years older roughly 75% of the time. The age differential is lower for older girls. For 17-year-old teen mothers, the father was 4 or more years older approximately 45% of the time.

### Adolescent Births by Age of Father: Multnomah County, 1989-94

| Age of Father | Age of Mother | | | |
| | <15 | 15-17 | 18-19 | Total |
|---------------|-----|-------|-------|-------|
| <18 | 6 | 118 | 51 | 175 |
| 18-19 | 11 | 267 | 349 | 627 |
| 20-24 | 11 | 330 | 1148 | 1489 |
| 25-29 | 0 | 67 | 312 | 379 |
| 30+ | 2 | 26 | 122 | 150 |
| Total | 30 | 808 | 1982 | 2820 |

Note: 56.9% of teen births did not have the father's age recorded on the birth certificate. 81.6% of <15 year old teen births did not record father's age. 66.3% of 15-17 year old teen births did not record father's age. 50.2% of 18-19 year old teens did not record father's age.

## III. Key Trends and Issues

## Cycle of teen pregnancy

- Daughters of adolescent mothers are 83% more likely to become mothers before age 18 than daughters of older mothers.
- Daughters of adolescent mothers are 50% more likely to have children out of wedlock than daughters of older mothers.

**Relationship to Child Sexual Abuse**
- Several studies have examined the link between teen pregnancy and child sexual abuse. A Washington State study of girls enrolled in teen parent programs found that 62% of girls had been sexually abused prior to their first pregnancy. The study found that girls who had been sexually abused were more likely to have repeat pregnancies, less likely to use contraception, began voluntary intercourse a year earlier than non-abused girls, and had partners who were older than those of non-abused girls. This study was limited to girls participating in teen parent programs, so may not be representative of girls who chose to abort, or who were pregnant but did not participate in a teen parent program.

**School Success**
- Adolescents in the bottom 20% of class for basic reading and math skills are five times more likely to become teen mothers than those in the top 20% of the class.

**Relationship to Future Poverty**
- The Oregon Progress Board reports "roughly 50% of teenage mothers end up on welfare and food stamp caseloads, at a cost of approximately $80,000" over the mother's lifetime.
- New data will be soon available in the Robin Hood Foundation report.

**Consequences of Adolescent Pregnancy**
- Teen mothers are more likely to:
    - Drop out of school more often than mothers who delay first birth.
    - Give birth to low birthweight babies more often than mothers who delay first birth.
    - Receive inadequate prenatal care more often than mothers who delay first birth.
- Teen mothers are less likely to receive child support from fathers.
- Nearly one-half of all families on welfare are families that were started by teens.


**IV. Desired Continuum Of Services And Support For Achieving Benchmark**
Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- Focus efforts in three main directions:
    - Capacity: Efforts to expand the capabilities of young people.
    - Opportunity: Efforts to create a reason for young people to believe in the future.
    - Motivation: Efforts to create needed internal and external social supports.
- Family Life and Sex education; family planning and contraceptive access.
- Delay sexual initiation.
- Build behavioral, decision making and assertiveness skills.
- Address dating violence.
- Support school based health centers.
- Provide pregnancy resolution support.
- Provide mental health and drug and alcohol treatment services.

- Provide numerous life-skills trainings, including literacy, general academic support.
- Expand recreational opportunities.
- Expand vocational training and opportunities.
- Provide remediation and treatment for victims of child sexual abuse.

## V. Sources Used
- Wellness Team
- Adolescent Pregnancy Prevention Initiative: Progress Toward a Healthy Community, Linda Doyle, 1996
- Analysis of Oregon Health Division data by Linda Doyle
- MCCF 1994 Comprehensive Plan
- Boyer & Fine
- Portland Multnomah Progress Board, 1996 Annual Report
- Rational Enquirer, April 1996
- "Sexual Abuse as a Factor in Adolescent Pregnancy and Child Maltreatment", Debra Boyer and David Fine, *Family Planning Perspectives*, (24:4, 1992).

**Other Documents to Consult**
- Robin Hood Foundation 1996 report on teen pregnancy. The report examines the societal cost of teenage pregnancy by considering the higher utilization of welfare and other services. It also appears to have some useful statistics about teenage mothers which Linda Doyle cited in her teen pregnancy summary.
- STARS/PSI Outcome Evaluation, August 1995

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## COMPLETE LISTING OF ADOPTED MULTNOMAH COUNTY BENCHMARKS

1. **Teen Pregnancy** - Pregnancy rate per 1,000 females ages 10 - 17.  [By ethnicity]
   (OR #1P; P/MC #26)*

2. **Prenatal Care** - Percentage of babies whose mothers received adequate prenatal care beginning in the first trimester.  (OR #9P)

3. **Drug-Free Babies** - Percentage of infants whose mothers did not use illicit drugs, alcohol, or tobacco during pregnancy.  (OR #11P; P/MC #28)

4. **Immunization** - Percent of two year olds adequately immunized.  (OR #14P; P/MC #29)

5. **Teenagers' Sexually Transmitted Diseases** - Rate per 1,000 population ages 10 - 19.
   (OR #32P)

6. **HIV and AIDS** - Annual percentage/number of HIV cases with an early diagnosis.
   (OR #70P; P/MC #46)

7. **Sexually Transmitted Disease** - Rate for adults 20 to 44 years old.  (OR #71P)

8. **TB** - Incidence of tuberculosis per 1,000 population.  (OR #72P)

9. **Hepatitis** - Incidence of hepatitis B per 1,000 population.  (OR #73P)

10. **Health Care Access/Economic** - Percentage of population with economic access to health care. [By ethnicity] (OR #70Q; P/MC #44)

11. **Health Care Access/Geographic** - Percent of citizens who have geographic access to basic health care.  (OR #71Q; P/MC #45)

12. **Mental Health Care Access** - Percentage of population with access to public or private treatment for mental or emotional problems.  [By children or adults] (OR #74Q)

13. **Care of elderly** - Percentage of elderly living independently or with adequate support.
    (OR #89P; P/MC #56)

14. **Mental Illness and Housing** - Percentage living in housing of their choice with adequate support.  (OR #93P; P/MC #47)

15. **Mental Illness and Employment** - Percentage of citizens with mental illness who are employed.  (OR #94P; P/MC #48)

16. **Mental Illness and Poverty** - Percentage of citizens with mental illness living above

*Similar benchmarks from the Oregon (OR) and the Portland/Multnomah County (P/MC) Progress
Boards are noted.

## COMPLETE LISTING OF ADOPTED MULTNOMAH COUNTY BENCHMARKS

poverty. (OR #95P; P/MC #49)

17. **Developmental Disabilities and Housing** - Percentage living in community housing of their choice with adequate support. (OR #96P; P/MC #50)

18. **Developmental Disabilities and Employment** - Percentage of citizens with developmental disabilities who are employed. (OR #97P; P/MC #51)

19. **Developmental Disabilities and Poverty** - Percentage of citizens with developmental disabilities living above poverty. (OR #98P; P/MC #52)

20. **Physical Disabilities and Housing** - Percentage living in housing of their choice with adequate support. (OR #99P; P/MC #53)

21. **Physical Disabilities and Employment** - Percentage of citizens with physical disabilities who are employed. (OR #100P; P/MC #54)

22. **Physical Disabilities and Poverty** - Percentage of citizens with physical disabilities living above poverty. (OR #101P; P/MC #55)

23. **Access to Facilities** - Percentage of public buildings and facilities accessible to Oregonians with physical disabilities. (OR #40Q)

24. **Homelessness** - Number of citizens who were homeless at some time in the last year. [By children and adults] (OR #37Q; P/MC #59)

25. **Housing** - Percentage of home owners and renters below median income spending less than 30 percent of their household income on housing and utilities. [By ethnicity] (OR #35Q and #36Q; P/MC #58)

26. **Tax Foreclosures** - Number of tax foreclosures per 1,000 homes. [By owner occupied v. rental] (N/A)

27. **Child Care Quality** - Percentage of child care facilities which meet established basic standards. (OR #78Q; P/MC #32)

28. **Child Care Availability** - Number of identified child care slots available for every 100 children under age 13. (OR #80Q; P/MC #33)

29. **Student Alcohol Use** - Percentage of students free of involvement with alcohol in the previous month. [At 8th and 11th grades] (OR #29P; P/MC #34)

30. **Student Drug Use** - Percentage of students free of involvement with illicit drugs in the

*Similar benchmarks from the Oregon (OR) and the Portland/Multnomah County (P/MC) Progress Boards are noted.

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# COMPLETE LISTING OF ADOPTED MULTNOMAH COUNTY BENCHMARKS

previous month. [At 8th and 11th grades] (OR #30P; P/MC #35)

31. **Adult Drug Use** - Percentage of adults who use illegal drugs. (OR #75P; P/MC #92)

32. **Drug Treatment** - Percentage of people seeking alcohol or drug treatment who receive it. (OR #76Q)

33. **Family Wage Jobs** - Average annual payroll per worker. (P/MC #3)

34. **Poverty** - Percentages of citizens with incomes above 100% of the Federal poverty level. [By ethnicity] (OR #7E; P/MC #6)

35. **Children in Poverty** - Percentage of children living above poverty. [By ethnicity] (OR #3P; P/MC #30)

36. **Child Support** - Percentage of Court ordered child support paid to single parent families. (OR #8)

37. **Income** - Percentage of citizens with incomes above 125% of the Federal poverty level. (OR #8E)

38. **High School Completion** - Percentage of students completing high school or an equivalent program. [By ethnicity] (OR #39P; #43P; P/MC #38)

39. **Workforce Readiness** - Percentage of people who leave post-secondary programs possessing skill sets to match workforce needs. (P/MC #42)

40. **Early Childhood Development** - Percentage of children entering kindergarten meeting specific developmental standards for their age. (OR #16P; P/MC #25)

41. **Early Library Contact** - Percent of children having contact with a public library before starting kindergarten. (N/A)

42. **Children's' Library Use** - Percentage of children who have library cards and have used them within the last six months. [By selected grades - 1st, 6th, and 11th] (N/A)

43. **Library Use** - Books borrowed per capita. (OR #63Q)

44. **Adult Literacy** - Percentage of adults with English literacy skills [detailed by prose literacy, document literacy, and quantitative literacy]. (OR #52P - 55P; P/MC #43)

*Similar benchmarks from the Oregon (OR) and the Portland/Multnomah County (P/MC) Progress Boards are noted.

# COMPLETE LISTING OF ADOPTED MULTNOMAH COUNTY BENCHMARKS

45. **Child Abuse** - Number of children abused or neglected per 1,000 persons under 18. [By ethnicity] (OR #4P; P/MC #86a)

46. **Spousal Abuse** - Domestic violence calls per 1,000 households. (OR #5P; P/MC #86b)

47. **Elder Abuse** - Rate per 1,000 in elderly population. (OR #92P; P/MC #86c)

48. **Hate crimes** - Per 1,000 population. (OR #87P and #59Q; P/MC #91)

49. **Sense of safety** - Percentage of citizens who feel safe and secure from crime. (P/MC #84)

50. **Violent Crime** - Crimes against people per 1,000 population. [By juveniles and adults] (OR #48Q, #49Q, 58Q; P/MC #81)

51. **Property Crimes** - Crimes against property per 1,000 population. [By juveniles and adults] (OR #48Q; P/MC #88)

52. **Firearm Injuries** - Firearm injury rate per 1,000 population. (P/MC #90)

53. **Weapons Permits** - Number of concealed weapons permits issued per 1,000 population. [By male/female] (N/A)

54. **Weapons Seized in Schools** - Number of weapons seized in public schools. [By high school or below] (OR #33P)

55. **Diversion Programs** - Percentage of diverted offenders who commit any offense within one year after completing the diversion program. [By juveniles and adults] (P/MC #94)

56. **Recidivism** - Percentage of felons who commit new felonies within three years of re-entry into the community. [By juveniles and adults] (OR #51Q; P/MC #93)

57. **Drugs & Crime** - Rate of arrestees who have one or more drugs in their system at time of arrest. (OR #52Q; P/MC #89)

58. **Offender Drug Treatment** - Percentage of offenders needing drug and alcohol treatment who receive it. (OR #77Q)

59. **Community Policing** - Number of communities involved in a community-based strategic plan for law enforcement. (OR #54Q)

60. **Victimization** - Victimization rates for hate crimes, rape, domestic violence, and juvenile

*Similar benchmarks from the Oregon (OR) and the Portland/Multnomah County (P/MC) Progress Boards are noted.

4

coerced theft. [By ethnicity] (OR 48Q, 58Q, 59Q; P/MC #91)

61. **Community Preparedness** - Percentage of residences, institutions, and businesses which are prepared for an emergency by being able to sustain themselves for 72 hours. (OR #47Q; P/MC #95)

62. **Emergency Losses** - Property and person loss due to emergency/disasters: number of lives lost per 1,000; dollar value of loss as a percentage of structure/property exposed. (OR #44Q; P/MC #96)

63. **Emergency Services Preparedness** - Percentage of emergency service agencies (defined by ORS 401) with emergency plans and emergency response procedures in place that are regularly exercised and updated per federal standards. (OR #46Q; P/MC #97)

64. **Animal Control** - Reported incidents of personal injuries from dangerous dogs per 1,000 population. (N/A)

65. **Sense of Community in Neighborhoods** - Percentage of people who feel a sense of community in their neighborhood.

66. **Water Quality** - Number of days per year our rivers and streams meet government in-stream water quality standards. (OR #3Q; P/MC #69)

67. **Recycling and Solid Waste** - Pounds of solid waste landfilled per capita per year. (OR# 13Q; P/MC #71)

68. **Clean Streets** - Percentage of streets rated acceptably clean. (P/MC #64)

69. **Open Spaces** - Acres of parks and protected green spaces per 1,000 population. (OR 19Q; P/MC #57)

70. **Land Use Planning** - Percent of rural lands that are included within a current, approved Rural Area Plan (R.A.P.). (N/A)

71. **Community Design** - Percentage of population that lives within one-half mile walk of all of the following: park/open space; transit service; elementary school; neighborhood commercial mode; bike path. (OR 20Q, 21Q; P/MC 6D)

72. **Proximity of Home to Work** - Percentage of people who commute [one-way] within 30 minutes between where they live and work. (OR 29Q; P/MC #62)

73. **Transportation Alternatives** - Percentage of people who commute to and from work

*Similar benchmarks from the Oregon (OR) and the Portland/Multnomah County (P/MC) Progress Boards are noted.

and use multiple modes of transportation for commuting.  (OR #32Q; P/MC #63)

74. **Civic Participation** - Percent of eligible citizens who vote.  (OR #65Q; P/MC #74)

75. **Taxes** - Total taxes per $1,000 income.  (P/MC #22)

76. **Cost of Government** - Per capita cost of government.  (P/MC #82)

77. **Financial Capacity and Performance** - Multnomah County's general obligation bond rating.  (OR #71E; P/MC #81)

78. **Infrastructure Investment** - Real per capita outlays for public infrastructure. (P/MC #24)

79. **Streamlined Permits/Licenses** - Percent of permits/licenses issued within target time period or less.  (OR #51E; P/MC #19)

80. **Citizen Satisfaction** - Percentage of citizens who are satisfied that County services are necessary, responsive, and cost-effective.  [By type of service]  (P/MC #76)

81. **Knowledge of Government** - Percentage of citizens who understand the Oregon governmental system.  (OR #68Q)

82. **Citizen Involvement** - Percentage of citizens who volunteer at least 50 hours per year to civic, community, or non-profit activities.  [By age and ethnicity]  (OR #67Q; P/MC #78)

83. **Government Responsiveness** - Percent of citizen volunteers in a governmental advisory capacity who are satisfied that their recommendations were carefully and respectfully considered.  (P/MC #76)

84. **County Workforce and Contractor Diversity** - Percent of minorities and women presently employed by the County or its contracted service providers versus percent presently available within the local labor market.  (OR #3E, #84P; P/MC #7)

85. **Government Accountability** - Percentage of agencies that employ results-oriented performance measures.  (OR #69E; P/MC #79)

*Similar benchmarks from the Oregon (OR) and the Portland/Multnomah County (P/MC) Progress Boards are noted.

# Community Advice on Human Investments

## OFFICE OF THE GOVERNOR
## JOHN A. KITZHABER, M.D.

### MAY 1996

# Contents

May 1996

Two months ago, I invited community leaders from throughout Oregon to participate in a process to help provide input to the development of a policy framework which would allow us to better define key human resource investments.

To the 400 of you who responded so enthusiastically, I thank you. Many of you spent several hours of travel to participate in the meetings. All of you took three hours out of your very busy schedules to share your views and participate in discussions with others about how we can work across traditional interest areas to further increase the well-being of Oregonians. Your experiences on the "front lines" demonstrate the importance of recognizing the interrelated nature of the challenges we face and the need for state and local partners to work together to meet these challenges.

As you will see in the report from these meetings, both the priorities you identified and the values you emphasized will be central to the direction I am providing to state agencies involved in these areas.

I appreciate your current involvement in community efforts as well as your help in discussing how we can work together to help make Oregon an even better place to live.

Sincerely,

John A. Kitzhaber, M.D.

JAK:gs/jit

# EXECUTIVE SUMMARY

During March 1996, the Governor's office convened a series of discussion groups composed of citizens who are actively engaged in their local communities. We were seeking a better understanding of the priorities of local communities, as the state's agenda for human investment is developed. Almost certainly, Oregon faces more limited resources in the coming biennium. In addition, while there is less money anticipated from federal sources (as well as the state's General Fund), there is potentially more flexibility in how we will be able to spend it.

In inviting participants, the governor noted, "it is important that we work together to define a policy framework for how our public resources can best be used to make key human resource investments." Participants were asked to work together to identify and advance issues where more focus is needed to further the development of that broader agenda.

Community leaders from across the state gathered in Pendleton, Portland, Corvallis and Medford. The interest and response was much greater than expected. Final attendance included 80 people in Pendleton, 120 in Portland, 90 in Corvallis and 110 in Medford.

Working across individual interests and the boundaries of traditionally separate arenas like education, workforce development, and social services, participants prioritized human investment benchmarks and identified what they need most to advance them. Detailed data from all meetings is appended to this report.

There was significant uniformity at all of the meetings in the benchmarks selected for special focus. These benchmarks will link to objectives the Kitzhaber administration is pursuing. The first two relate to **education:**

- ❑ *Basic Student Skills* (reading, writing, math in the 3rd, 5th, 8th and 11th grades). This benchmark was number one in all sessions except Corvallis, where Health Care Access topped the list.

  Governor Kitzhaber's current objectives include completing Oregon's commitment to high academic standards through successful implementation of the Certificates of Initial and Advanced Mastery of the Education Act for the 21st Century.

- ❑ *Early Childhood Development.* This made every list but Pendleton's, where it was replaced by the benchmark on Abuse. A major area of emphasis for this administration is increasing pre-schoolers' readiness to learn when they enter kindergarten (through increased funding for Oregon Head Start).

The final three benchmarks selected are linked to the Governor's emphasis on **independence and productivity.**

His stated goal is that, "All Oregonians will become independent and productive to the full extent of their abilities; those who are unable to fully care for themselves will receive the support necessary to ensure their safety, health and dignity."

- ❑ *Health Care Access.* Governor Kitzhaber spelled out his intent to increase access to health (and mental health) care for low income Oregonians in his State of the State address earlier this year.

- ❑ *Reducing Poverty.* The Kitzhaber administration has provided strong support for Oregon's welfare reform effort, which has dramatically lowered caseloads by connecting people with jobs. He is equally supportive of further workforce development initiatives.

- ❑ *Housing Affordability.* This benchmark was on all lists except Medford's, where it was replaced by the benchmark on reducing Cigarette, alcohol and illicit drug use.

Results from the community workshops reinforced several basic concepts that are fundamental to the Governor's development of an integrated human investment policy framework. These include:

❏ Recognizing the inter-relatedness of various efforts.

❏ Acknowledging that there must be a proper balance in the allocation of public resources among a variety of needs (for example, in addressing the needs of our educational system, we should also acknowledge that children need to be healthy to take advantage of those educational opportunities).

❏ Noting that issues and solutions need to be worked on in partnership with state agencies, local agencies and community members — local commitment and energy are critical to solutions.

❏ Recognizing that there is a continuum of responsibilities inherent in addressing various needs. Involvement is needed from the public sector, families, community groups and business.

❏ Affirming that public resources should be used to assist people to move to self-sufficiency (including support of education), and also that individuals and their families should assume more financial responsibility as they move up the educational or economic ladders.

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# THE COMMUNITY REPORT

Outlined below are the details of the Governor's Office outreach to Oregon communities for advice and priority emphasis in evaluating opportunities for human investment.

## Process

Each three-hour workshop involved significant amounts of small group discussion. Because each meeting was larger than originally anticipated, the format was necessarily more structured (which may have been unsatisfactory to some participants).

The meetings began with a series of questions, followed by small group discussion about a list of 21 benchmarks representing issues in the areas of education, economic status/self-sufficiency and social supports. Individuals then voted to identify the top five benchmarks the group believed were most important to our human investment strategy. Additional small group discussion around the relative responsibilities of various sectors followed, and participants then voted again to express preferences on that topic.

Discussion concluded with an exploration of a final question: Aside from money, what single resource would make it most likely that you could help achieve the Benchmarks identified as most important in this workshop?

## Participant Responses

❑ Almost unanimous agreement that individuals need a system of social supports to take advantage of educational and economic opportunities.

❑ Very high agreement that families have the primary responsibility for providing these supports (although Portland had 32% who disagreed with that statement).

❑ Generally high agreement that skills being taught in schools need to have a direct connection to skills required in the workplace (although Portland had 47% who disagreed -- outside Portland 21% disagreed).

❏ Almost unanimous agreement that public resources should be used to help individuals and families move to at least minimal self-sufficiency. But also that, as individuals move up the income or educational ladder, they should assume more financial responsibility for advancing themselves and the government should assume less.

❏ The statement generating the most division was that public resources should be used to enhance the ability of business to generate high-wage jobs (45% agree, 55% disagree).

*Participants were also asked to rate their impression of the general public's beliefs as well as their own.*

❏ An extremely high percentage of participants at all locations (96%) thought the general public believes the overall tax level is too high. As individuals, however, their beliefs were much different (24% too high, 47% just right, 28% too low). Although they personally may believe taxes aren't too high (and in fact may be too low), they acknowledge that that is not the mood of the public.

❏ Most thought the general public would rate government performance as mediocre (65%), with a fairly high percentage believing the public would rate it as poor (34%). On a personal level, the ratings for government performance were somewhat better (19% believing government performance is good, 73% mediocre, 8% poor).

## Benchmark Selection

*Participants were also asked to identify the top five benchmarks they believed were most important to our human investment strategy.*

❏ Three of the four groups selected Basic Student Skills (meaning meeting basic standards in the 3rd, 5th, 8th and 11th grades) as a number one choice (number 2 in the 4th location).

❏ Health Care Access was number 2 in all areas but one (where it was first).

❏ Reducing Poverty was third in all areas.

❏ Three areas placed Early Childhood Development and Affordable Housing in their top five.

❏ In addition, one area (Medford) selected Cigarette/alcohol/drug use and one area (Pendleton) selected Abuse.

In those meetings where time allowed for discussion around the rationale for these selections, the comments revolved around the need to deal with issues early. For example, if children don't receive basic skills, they will not be able to successfully reach other educational achievements. People also need to be healthy to become educated and productive, and a reduction of poverty would avoid other social problems. Prevention and reinvestment to minimize future problems were stressed.

## *Responsibilities for Action*

Participants were then asked to assign primary and secondary responsibilities among four sectors of society for moving the five priority benchmarks. The four sector choices were public; business; community groups; and individuals and their families. Participants could also indicate if they thought any of the sectors had no responsibility in advancing those same benchmarks. Only a very small number of participants said that any sector had *no* responsibility in moving one or more of the benchmarks forward. Discussion consistently focused on the need for partnerships among all sectors in addressing these issues.

When asked to assign primary responsibility, however, definite patterns emerged. In almost all cases, most participants believed that government had the primary, catalytic role in moving these benchmarks forward.

There were some exceptions to that, however. In looking across benchmarks, participants tended to believe that business had a significant role in increasing access to health care, increasing the affordability of housing, and reducing poverty. Community groups, and individuals and their families also were given significant roles in early childhood development.

## A New Dynamic

Recognizing the reality of shrinking resources, participants also consistently noted the need to combine forces and work smarter to solve community problems. When asked to name in discussion and on the evaluation forms what single resource, besides money, could contribute the most to moving forward on these benchmarks -- participants responded thoughtfully and articulately. They had been asked to think broadly, outside the confines of their usual policy or advocacy area, and to take responsibility beyond their own immediate concerns. Participants responded in a new dynamic, and moved beyond simply advocating loudly on behalf of their own constituencies.

Recurring themes that were included in the answer to this question included the need for leadership, commitment from all sectors of the community, collaboration and partnership in planning and implementation, more focus on outcomes, recognition of the inter-relatedness of these issues, an active role for the private sector, and stability in financing and policy direction.

## Concerns/Comments

Throughout the meetings and in their evaluation forms, many workshop participants expressed concerns about how the data from these sessions would be used. Some expressed concerns that perhaps this could be seen as a popularity contest among benchmarks in the budget process. Others expressed concerns that isolating benchmarks did not acknowledge the interrelationships that many of the benchmarks have to each other. Others feared that the absence of benchmarks specifically relating to the elderly or persons with disabilities might mean that those people would be left behind.

Many participants also expressed an appreciation and a hopefulness that their views, as involved community members, were important to a public policy process. They are

people at the front-line who, perhaps more than others, recognize that Oregonians'
educational, economic and social needs are interrelated. The planning and action required to
meet these needs must therefore be comprehensive in nature and carefully coordinated.
Workshop participants discussed the need for leadership and a vision in this process.

## *Next Steps*

The Governor will finalize his vision by laying out a broad framework for the articulation
of Oregon's education, workforce development, welfare and social support systems. He
will also propose general areas of responsibility by sector.

The outcomes from this series of workshops reinforce the need for thinking beyond the
traditional boundaries of our usual issue areas. The concepts of shared responsibility and
partnerships will be central to the vision being developed by the Governor.

State agencies will be charged with collaborating on aligning current programs or policies to
support this effort. Agencies will also be expected to reach out to additional partners at
both the state and local levels — to further both current initiatives (around education, and
independence and productivity) and the integrated human investment policy framework.

The Governor is also committed to clearly defining the roles and responsibilities of various
state and local entities in addressing human investment needs, including the identification
of gaps in service. He is also aware that this will require long-term, concerted effort. And
communities, in the meanwhile, have not been waiting for outside direction. The ongoing
work that has been taking place at the local level to bring some of these pieces together is a
valuable contribution to this continuing dialogue.

The framework we ultimately adopt will be designed to support people's efforts to move forward with this agenda regardless of the level at which they are working. It will also enhance our collective ability to think beyond traditional issue boundaries.

# APPENDIX

## Governor's Focus Groups
## Results of Voting

### *DEMOGRAPHICS/OPINIONS*

| Category | Pendleton | Portland | Corvallis | Medford |
|---|---|---|---|---|
| Males | 24 | 47 | 35 | 42 |
| Females | 42 | 55 | 37 | 66 |
| Primary Interest in:  Business | 5 | 7 | 2 | 6 |
| Labor | 1 | 2 | 1 | 1 |
| Social Services | 31 | 65 | 40 | 62 |
| Education | 12 | 10 | 12 | 19 |
| Employment & Training | 11 | 9 | 7 | 11 |
| Other | 12 | 19 | 13 | 8 |
| Age:  0-17 | 0 | 0 | 0 | 0 |
| 18-45 | 36 | 40 | 33 | 35 |
| 46-60 | 27 | 51 | 32 | 57 |
| 61+ | 6 | 16 | 8 | 15 |
| Volunteer Hours:  less than 10 | 21 | 40 | 17 | 32 |
| 10-19 | 23 | 28 | 35 | 43 |
| 20-29 | 12 | 20 | 16 | 18 |
| 30 or more | 8 | 15 | 8 | 17 |
| Individuals have an interest in being independent and productive with high income levels. Agree/Disagree | 80/0 | 103/4 | | |
| Business has an interest in access to a well-trained workforce. Agree/Disagree | 80/0 | 107/0 | | |
| The public/communities have an interest in a healthy economy where people are self sufficient, capable of contributing to the economy, and are unlikely to commit a crime. Agree/Disagree | 80/0 | 107/0 | | |
| Individuals need a system of social supports to take advantage of educational and economic opportunities. Agree/Disagree | 80/0 | 107/0 | 70/2 | 109/2 |
| Families have the primary responsibility for providing these supports. Agree/Disagree | 74/6 | 73/34 | 65/11 | 96/10 |
| Skills being taught in schools need to have a direct connection to skills required in the workplace. Agree/Disagree | 48/15 | 57/50 | 59/17 | 90/19 |

*DEMOGRAPHICS/OPINIONS*
*continued*

| Category | Pendleton | Portland | Corvallis | Medford |
|---|---|---|---|---|
| Public resources should be used to help individuals and families move to at least minimal self sufficiency. Agree/Disagree | 80/0 | 105/2 | 80/0 | 98/2 |
| As individuals move up the income or educational ladder, they should assume more financial responsibility for advancement and the government less. Agree/Disagree | 79/1 | 104/3 | 66/2 | 103/2 |
| Public resources should be used to enhance the ability of business to generate high-wage jobs. Agree/Disagree | 23/27 | 48/59 | 33/36 | 29/41 |
| Businesses have a responsibility to provide training to current employees. Agree/Disagree | 80/0 | 104/3 | 82/2 | 98/4 |
| The general public believes the overall tax level is: too high/just right/too low | 61/2/0 | 99/9/0 | 80/5/0 | 106/3/0 |
| I believe the overall tax level is: too high/just right/too low | 24/35/8 | 26/41/35 | 11/41/31 | 26/52/26 |
| The general public believes government performance is generally: good/mediocre/poor | 0/55/13 | 1/72/46 | 1/41/40 | 0/78/29 |
| I believe government performance is generally: good/mediocre/poor | 12/48/5 | 19/80/5 | 27/47/9 | 8/80/11 |

Governor's Focus Groups
Results of Voting

*BENCHMARKS*
*Top 5 choices of each city are in bold.*

| Benchmark | Pendleton | Portland | Corvallis | Medford |
|---|---|---|---|---|
| 1. Basic Student Skills | **53** | **83** | **50** | **75** |
| 2. Percentage of students who attain a CIM | 1 | 3 | 2 | 2.5 |
| 3. High School Graduation Rate | 24 | 20 | 35 | 21 |
| 4. Percentage of Oregon high school graduates who enter college after graduation | 6 | 4 | 3 | 8 |
| 5. Percentage of Oregon adults who have completed an Associate's degree in professional-technical education. | 3 | 5 | 5 | 18 |
| 6. Percentage of Oregon adults who have completed a baccalaureate degree. | 6 | 4 | 3 | 10 |
| 7. Percentage of Oregon workers who have received at least 20 hours of skills training in the past year | 1 | 13 | 8 | 4 |
| 8. Real per captia personal income | 6 | 15 | 6 | 14 |
| 9. Percentage of Oregon adults employed full time | 0 | 18 | 14 | 7 |
| 10. Percentage of Oregonians in the middle income range | 15 | 10 | 20 | 25 |
| 11. Poverty Level | **45** | **80** | **37** | **54** |
| 12. Percentage of displaced workers re-employed within 24 months and earning at least 90% of previous income | 10 | 11 | 3 | 7 |
| 13. Unemployment Rate | 1 | 4 | 4 | 5 |
| 14. Early Childhood Development | 26 | 51 | 43 | 59 |
| 15. Pregnancy Rate | 13 | 15 | 15 | 15 |
| 16. Abuse | **30** | 35 | 2 | 46 |
| 17. Homelessness | 4 | 7 | 8 | 2 |
| 18. Child Care Affordability | 14 | 20 | 10 | 17 |
| 19. Cigarette, alcohol, and illicit drug use | 16 | 35 | 16 | **53** |
| 20. Health Care Access | **46** | **74** | **55** | **62** |
| 21. Housing Affordability | **36** | **59** | **47** | 39 |

Governor's Focus Groups
Results of Voting

*PRIMARY RESPONSIBILITY*

| Benchmark | Pendleton | Portland | Corvallis | Medford |
|---|---|---|---|---|
| 1. Basic Studen Skills | Public Sector 60<br><br>Families/Indiv 8 | Public Sector 75.5<br>Private Sector 7<br>Community Grps 2<br>Families/Indiv 12.5 | Public Sector 48<br>Private Sector 1<br>Community Grps 11<br>Families/Indiv 7 | Public Sector 65<br>Private Sector 2<br>Community Grps 7<br>Families/Indiv 10 |
| 11. Poverty Level | Public Sector 38<br>Private Sector 26<br>Community Grps 3<br>Families/Indiv 7 | Public Sector 56.5<br>Private Sector 17<br>Community Grps 7<br>Families/Indiv 2 | Public Sector 31<br>Private Sector 18<br>Community Grps 12<br>Families/Indiv 5 | Public Sector 65.5<br>Private Sector 9<br>Community Grps 7<br>Families/Indiv 8.5 |
| 14. Early childhood development | | Public Sector 60<br>Private Sector 5<br>Community Grps 6<br>Families/Indiv 19 | Public Sector 21<br><br>Community Grps 5<br>Families/Indiv 44 | Public Sector 38<br>Private Sector 1<br>Community Grps 8<br>Families/Indiv 39 |
| 16. Abuse | Public Sector 34<br>Community Grps 15<br>Families/Indiv 23 | | | |

| Benchmark | Pendleton | Portland | Corvallis | Medford |
|---|---|---|---|---|
| 19. Cigarette, alcohol and illicit drug use | | | | Public Sector 33 Private Sector 0 Community Grps 14 Families/Indiv 28 |
| 20. Health Care Access | Public Sector 20 Private Sector 30 Families/Indiv 9 | Public Sector 60 Private Sector 23 Families/Indiv 1 | Public Sector 35 Private Sector 25 Community Grps 1 Families/Indiv 7 | Public Sector 52 Private Sector 29 Community Grps 3 Families/Indiv 6 |
| 21. Housing Affordability | Public Sector 39 Private Sector 24 Community Grps 2 Families/Indiv 6 | Public Sector 56 Private Sector 16 Community Grps 8 | Public Sector 32 Private Sector 18 Community Grps 12 Families/Indiv 2 | |

## SECONDARY RESPONSIBILITY

| Benchmark | Pendleton | Portland | Corvallis | Medford |
|---|---|---|---|---|
| 1. Basic Studen Skills | Public Sector 8 <br> Private Sector 68 <br> Community Grps 63 <br> Families/Indiv 62 | Public Sector 8 <br> Private Sector 37 <br> Community Grps 31 <br> Families/Indiv 50 | Public Sector 17 <br> Private Sector 28 <br> Community Grps 21 <br> Families/Indiv 41 | Public Sector 14 <br> Private Sector 20 <br> Community Grps 27 <br> Families/Indiv 52 |
| 11. Poverty Level | Public Sector 29 <br> Private Sector 44 <br> Community Grps 60 <br> Families/Indiv 54 | Public Sector 17.5 <br> Private Sector 35 <br> Community Grps 24 <br> Families/Indiv 18 | Public Sector 28 <br> Private Sector 28 <br> Community Grps 21 <br> Families/Indiv 16 | Public Sector 14 <br> Private Sector 45 <br> Community Grps 37 <br> Families/Indiv 19 |
| 14. Early childhood development | | Public Sector 22 <br> Private Sector 33 <br> Community Grps 42 <br> Families/Indiv 46 | Public Sector 37 <br> Private Sector 22 <br> Community Grps 38 <br> Families/Indiv 4 | Public Sector 27 <br> Private Sector 14 <br> Community Grps 56 <br> Families/Indiv 17 |
| 16. Abuse | Public Sector 32 <br> Private Sector 54 <br> Community Grps 52 <br> Families/Indiv 47 | | | |

*SECONDARY RESPONSIBILITY*
*continued*

| Benchmark | Pendleton | Portland | Corvallis | Medford |
|---|---|---|---|---|
| 19. Cigarette, alcohol and illicit drug use | | | | Public Sector 24<br>Private Sector 19<br>Community Grps 47<br>Families/Indiv 29 |
| 20. Health Care Access | Public Sector 45<br>Private Sector 38<br>Community Grps 49<br>Families/Indiv 51 | Public Sector 17<br>Private Sector 45<br>Community Grps 21<br>Families/Indiv 18 | Public Sector 25<br>Private Sector 36<br>Community Grps 12<br>Families/Indiv 13 | Public Sector 34<br>Private Sector 36<br>Community Grps 24<br>Families/Indiv 19 |
| 21. Housing Affordability | Public Sector 28<br>Private Sector 41<br>Community Grps 61<br>Families/Indiv 54 | Public Sector 14<br>Private Sector 46<br>Community Grps 24<br>Families/Indiv 5 | Public Sector 31<br>Private Sector 33<br>Community Grps 16<br>Families/Indiv 9 | |

## NO RESPONSIBILITY

| Benchmark | Pendleton | Portland | Corvallis | Medford |
|---|---|---|---|---|
| 1. Basic Studen Skills | Public Sector 1 | Private Sector 3 Community Grps 1 | | |
| 11. Poverty Level | Public Sector 1 Private Sector 1 | Community Grps 3 Families/Indiv 1 | | |
| 14. Early childhood development | | | Families/Indiv 2 | |
| 16. Abuse | Public Sector 1 Private Sector 4 | | | |
| 19. Cigarette, alcohol and illicit drug use | | | | Families/Indiv 1 |
| 20. Health Care Access | Public Sector 3 Private Sector 3 Community Grps 6 | Community Grps 3 Families/Indiv 6 | | |
| 21. Housing Affordability | Public Sector 1 | Families/Indiv 8 | | |

INCREASE SUCCESS OF DIVERSION PROGRAMS

**MULTNOMAH COUNTY (An Urgent Benchmark):**
Increase success of Diversion Programs: % of diverted offenders who commit any offense within one year after completing the diversion program [by juveniles and adults]

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Reduce the percentage of diverted offenders who commit the same type of offense within one year after completing the diversion program

## I. Why It Is Important

Diversion programs and deferred sentencing programs offer cost effective alternatives to incarceration. For drug related crimes, diversion programs offer a form of treatment and intervention which can reduce an offenders recidivism. Deferred sentencing programs provide opportunities for offenders to make restitution to their victims and the community and to change their behavior.

## II. Benchmark Data

**Drug Diversion**

- The STOP Program (Sanction-Treatment-Opportunity-Progress) is a drug diversion program aimed at reducing substance abuse and related criminal activity. Offenders who are arrested for drug possession are offered the chance to participate in the 12-month program in lieu of a trial. Upon successfully completing the program, criminal charges are dismissed with prejudice. The offenders who do not enter the program, are often left with a felony criminal conviction on their records.

- Between July 92 and March 94, approximately 54% of clients entering the S.T.O.P. program successfully completed the program. A total of 571 clients left the program during that period.

Chart 1

**Percentage Arrested After One Year of Successfully Completing the S.T.O.P. Program, Multnomah County July 92- March 94**

15%

% Arrested
% Not Arrested

85%

Chart 2

**Percentage Arrested After Failure to Successfully Complete the S.T.O.P. Program Multnomah County April 94**
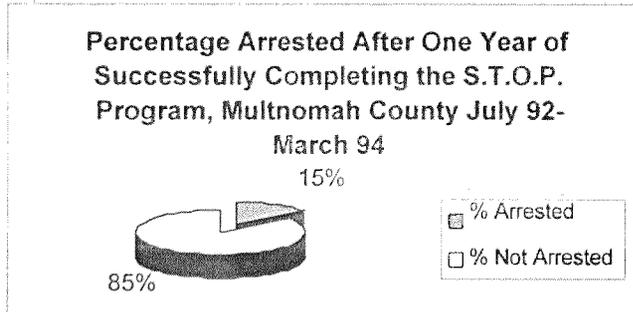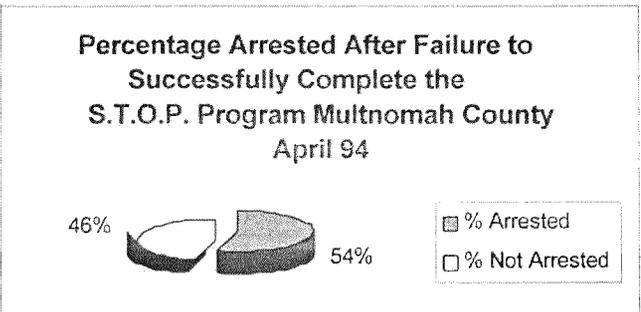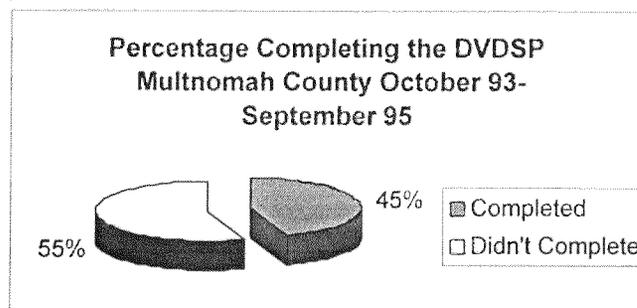
46%

54%

% Arrested
% Not Arrested

- In April 94, a sample of S.T.O.P. cases were reviewed for post-program recidivism. Of those offenders who completed the program, 15% were arrested within one year (see Chart 1). In contrast, of those who started but were unsuccessful in completing the program, 54% were arrested within one year (see Chart 2).

INCREASE SUCCESS OF DIVERSION PROGRAMS

- A recent survey taken in Oregon to determine the extent of alcohol and other drug use indicated that 133,000 persons are classified as dependent and nearly 120,000 are classified as abusing. The Oregon Health Plan will cover the treatment costs for Oregonians at the federal poverty level and below. Only six out of ten people who need alcohol and drug treatment receive it.

- County agencies estimate that over 80% of criminal offenders in the county have a substance abuse problem.

**Domestic Violence Deferred Sentencing Program(DVDSP)**
- Multnomah County's Domestic Violence Deferred Sentencing Program (DVDSP) requires offenders to plead guilty before being referred to the program. Upon successful completion, the criminal case is dismissed.



Percentage Completing the DVDSP
Multnomah County October 93-
September 95

55%   45%   ▣ Completed   □ Didn't Complete

Between October 93 and September 95, there were 582 offenders entering the program. Of this number 44.5% completed the program. No figures on recidivism one year after leaving the program are available.

**DUII Diversion**
- Those persons arrested for a DUII in which there was no significant injury or property damage and who have not had a previous DUII within the past ten years qualify for Multnomah County's DUII Diversion Program. Upon successful completion of treatment and other obligations, the DUII charges are dismissed.

- In 1991 there were 29,108 DUII arrests in the State; 4,554 of these were in Multnomah County (15.6% of the State's total). In 1995, the number of DUII arrests in the State was 20,241; 3,450 of these were in Multnomah County (17% of the State's total)

- Multnomah County is the State's smallest but most populous county and the rate of DUII arrests, 55.1 per 10,000 population is among the lowest in the State, while the arrests, 3,450 is the highest in the State
- The 1996 Regional Drug Initiative Drug Index Report on "Alcohol-involved traffic deaths" indicates that 20% of the State's alcohol-involved traffic deaths in 1986 occurred in Multnomah County (55 of 275 deaths). In 1995, the percentage had failed to less that 10% (22 of 228).

- In 1994-95, over 95% of the 337 DUII individuals who entered an alcohol and drug education series completed them. Most DUII's are referred for non-intensive or intensive outpatient

treatment. The completion rate for treatment was over 81% for the 1,635 DUII Diversion clients and over 76% for the 1,317 DUII convicted persons.

### Statewide Behavioral Crimes 1995 - DUII

| | Total | Adult | Juvenile | Male | Female |
|---|---|---|---|---|---|
| Under .05 | 1,820 | 817 | 53 | 799 | 151 |
| .05-.14 Alcohol | 9,416 | 4,664 | 76 | 3,926 | 750 |
| .15--.19 Alcohol | 9,395 | 4,703 | 33 | 3,874 | 785 |
| .20 or Above | 5,967 | 2,997 | 9 | 2,442 | 519 |
| B.A. refused | 6,946 | 3,477 | 16 | 2,945 | 508 |
| B.A. not given | 762 | 378 | 6 | 309 | 69 |
| Or drugs | 563 | 277 | 7 | 203 | 76 |
| Undetermined | 1,655 | 914 | 11 | 609 | 121 |
| Total | 36,524 | 18,327 | 212 | 15,107 | 2,979 |

(header above Total–Female columns: ----Persons Arrested----)

## III. Key Trends and Issues

- **Treatment Access:** The Drug Diversion Program provides immediate access to treatment through a dedicated provider and service agreements with other community agencies. Participants enter treatment on the third or fourth day after arrest. In the absence of the program, most offenders would not enter treatment until adjudication of their charges and assignment to a probation officer, some four to six months after arrest.

- **Reducing Demand for Jail Beds:** Demand for jail beds is increasing. The state and local justice systems have come to rely on diversion programs to assist in making wise use of jail resources. Based on sentencing data for those convicted of drug possession (provided by the Oregon Criminal Justice Council), it is estimated that the 504 defendants who entered drug diversion in 1994 would have used 18,670 prison and jail bed-days in the absence of the program. The Drug Diversion Program's 504 participants used approximately 5,040 bed-days. The net savings is 13,630 bed-days. (Based on sentencing data which does not include pretrial or probation violation detention.)

- **Drug-free Babies:** One of the objectives of the drug diversion program is to impact the generational element of substance abuse, consistent with benchmarks for healthy babies. In 1994-95, eight of ten babies born to program participants were drug-free.

- **Systems Integration:** Local policy-makers realize that no single agency can impact problems such as substance abuse and domestic violence. The diversion (or deferred sentencing) program in those areas rely on interagency collaboration in planning and operations. Law enforcement, prosecution, the courts, the public defender, corrections and private not for profit agencies have become partners in these efforts.

- **Data Limitations:** To date, there has been no extensive evaluation of the costs and benefits and long term impacts of the Drug Diversion Program. However, a grant from the State Justice Institute will result in an independent evaluation to be completed by June 1997.

IV. **Desired Continuum Of Services And Support For Achieving The Benchmark**

Here are some of the potential approaches which could help achieve this benchmark. This list includes several strategies from the sources listed below to illustrate a variety of approaches. It is not meant to be a comprehensive list.

- Counseling
- Referral
- Training
- Deferred/Diversion Sentencing- Courts
- Arrest
- Investigation
- Adjudication
- Defense
- Judiciary

**Potential Strategies**

- Continuation of S.T.O.P. program
- Increase resources to respond to drugs and violent crimes
- DUII Diversion Program
- Develop a long range strategy to coordinate law enforcement and corrections resources.
- Involve communities in developing and implementing a public safety strategic plan to ensure coordination between treatment, prevention, education, law enforcement and custodial sanctions.

V. **Sources Used**

- Portland Multnomah Progress Board, 1996 Annual Report
- Oregon's 1996 Drug & Violent Crime Strategy, 1996
- Multnomah County Benchmarks 1995-96.
- Seeking Justice, Crime and Punishment in America, The Edna McConnell Clark Foundation, 1995.
- Crime and Politics in the 1990's, Creating Demand for New Policies, Campaign for an Effective Crime Policy, 1996.
- Societal Outcomes & Cost Savings of Drug & Alcohol Treatment in the State of Oregon, Governor's Council on Alcohol and Drug Abuse Programs, 1996.
- What Works? A Review of the Corrections Literature on Program Effectiveness, Lane County Community Corrections Manager, 1993.

## INCREASE ACCESS TO MENTAL HEALTH CARE SERVICES

**MULTNOMAH COUNTY (An Urgent Benchmark):**
Increase Mental Health Care Services - % of population with access to public or private treatment for mental or emotional problems [ by children and adults ]

**PORTLAND-MULTNOMAH PROGRESS BOARD:**
Increase the percentage of mentally ill residents who are self-sufficient.

### I. Why It Is Important

The effects of mental disorders, which strike a substantial portion of Americans, extend far beyond those who are in direct need of services. Mental disorders create a burden on our health care system because patients with untreated psychological disorders are heavy users of medical services. In addition mental disorders have a direct effect on families, especially those already at risk. Mental disorders also effect the economy by resulting in diminished productivity in the workplace. Providing appropriate mental health care helps those who suffer from psychological disorders and helps their families, saves valuable health care resources, and restores productivity in the workplace. Also see "**Increase Access to Health Care**" Benchmark.

### II. Benchmark Data

- Locally, data about the scope of the issue - how many are not getting mental health care when they need it due to several reasons including economics, geographic, cultural, etc., - is not directly available.

- A recent World Health Organization and World Bank study reported a finding that mental illness - led by depression - will be the second leading cause of disability by the year 2020. This is up from 4th major cause in 1990.

According to the Government Relations - Mental Health Care Practice Directorate:
- Nationally, mental disorders affect a substantial portion of Americans including children and older Americans. In 1994, an estimated 15-18% of Americans, including 14 million children, suffer from a diagnosable mental disorder. A random sample of elderly residents in Medicaid facilities found that nearly 80% of the residents had moderate to intense needs for mental health care.

- Fifty to 70% of usual visits to primary care physicians are for medical complaints that stem from psychological factors. Anxiety and depression are among the six most common conditions seen in family practice. Twenty-five percent of patients seen by primary care physicians have psychological disorders.

- In any one-month period, nearly 8 million Americans suffer from depression. As many as one in five Americans will suffer at least one major episode of depression during their lifetimes.

*53*
*Revised*

## III. Key Trends and Issues

- Access to mental health care can be limited by poverty, lack of insurance or disability and sometimes simply by paperwork barriers. Inability to read and understand material, transportation problems and lack of culturally appropriate services compound the difficulties. Also see "**Increase Access to Health Care**" Benchmark.

- The World Health Organization study reported that the challenge in mental health is not making people well but keeping them well. Many mental illnesses are chronic, recurring conditions and requires long treatment and maintenance.

- Mental disorders often are more disabling than chronic physical illnesses including high blood pressure, gastrointestinal problems (e.g., ulcers), and even diabetes. They are the third most limiting health condition in terms of performing major daily activities, preceded only by cancer and stroke.

- Mental disorders are real and debilitating. They result in lost productivity that affects all Americans. In 1990, major depression alone cost an estimated $23 billion in lost work days. Minor depression, which affects more people, may account for 51% more disability days than major depression. A three-year study of a large corporation showed that 60% of employee absences were due to psychological problems..

- Providing appropriate mental health care saves valuable health care resources. Patients with mental disorders are heavy users of medical services, averaging twice as many visits to their primary care physicians as patients without mental disorders. When appropriate mental health services are made available, this heavy use of the system often decreases, resulting in overall health savings. Cost offset studies show a decrease in total health care costs following mental health interventions even when the cost of the intervention is included.

## IV. Desired Continuum Of Services And Support For Achieving The Benchmark
- See "**Increase Access to Health Care**" Benchmark.

## V. Sources Used
- "The Costs of Failing to Provide Appropriate Mental Health Care", Government Relations Mental Health Care Practice Directorate, 1996.
- "An Inefficient Bureaucracy And Cultural Barriers Often Hinder Care For Hispanic Immigrants", Tori DeAngelis, Monitor.
- Portland Multnomah Progress Board, 1996 Annual Report
- Oregon Progress Board, Oregon Benchmarks - Report to 1995 Legislature, December 1994.
- The Oregonian, September 16, 1996.

54 Revised
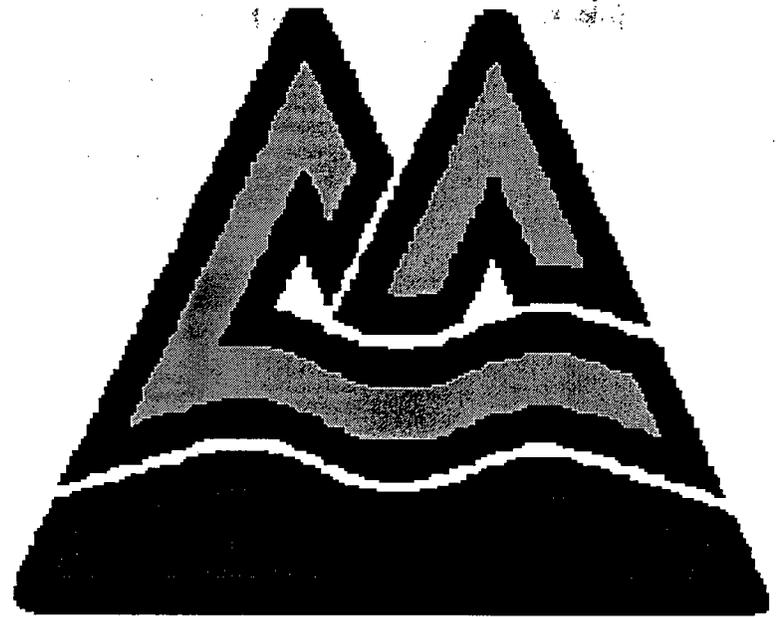
# Multnomah County Oregon

# Benchmarks

# Benchmark
## Reduce Domestic Abuse: Child, Spousal, Elderly Abuse

▶ **Domestic Abuse - Interrelationships**

---

- Birth Outcomes

- Child Abuse

- Homelessness

# Benchmark
## Reduce Domestic Abuse:  Child, Spousal, Elderly Abuse

▶ **Child Abuse - Interrelationships**

---

Alcohol and Drug

•Domestic Violence

•Poverty

# Benchmark
## Reduce Domestic Abuse: Child, Spousal, Elderly Abuse

▶ **Elderly Abuse:**

Elder Abuse Investigations by Multnomah County Aging Services
Department
1990-1995
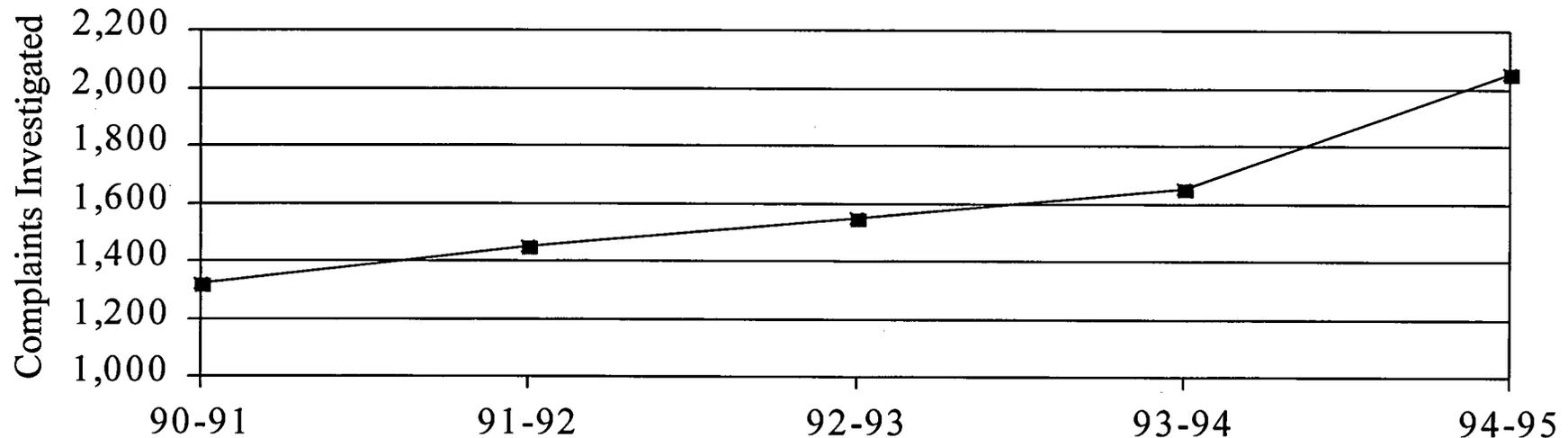
# Benchmark
## Reduce Juvenile Crime

Juvenile Arrests for Crimes Against Persons and Property, Multnomah County
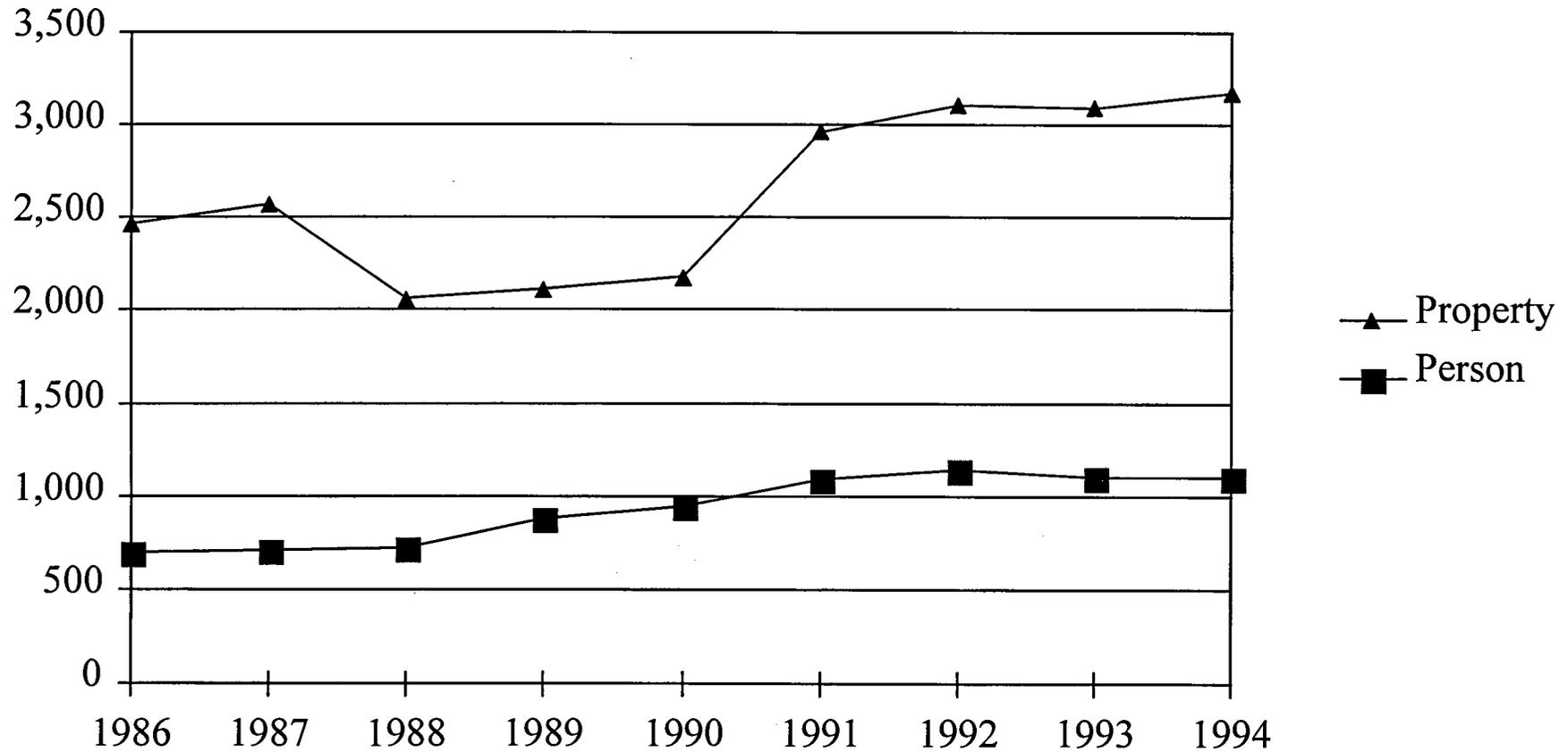
# Benchmark
## Reduce Juvenile Crime

Multnomah County Arrests for Person and Property Crimes, by Age
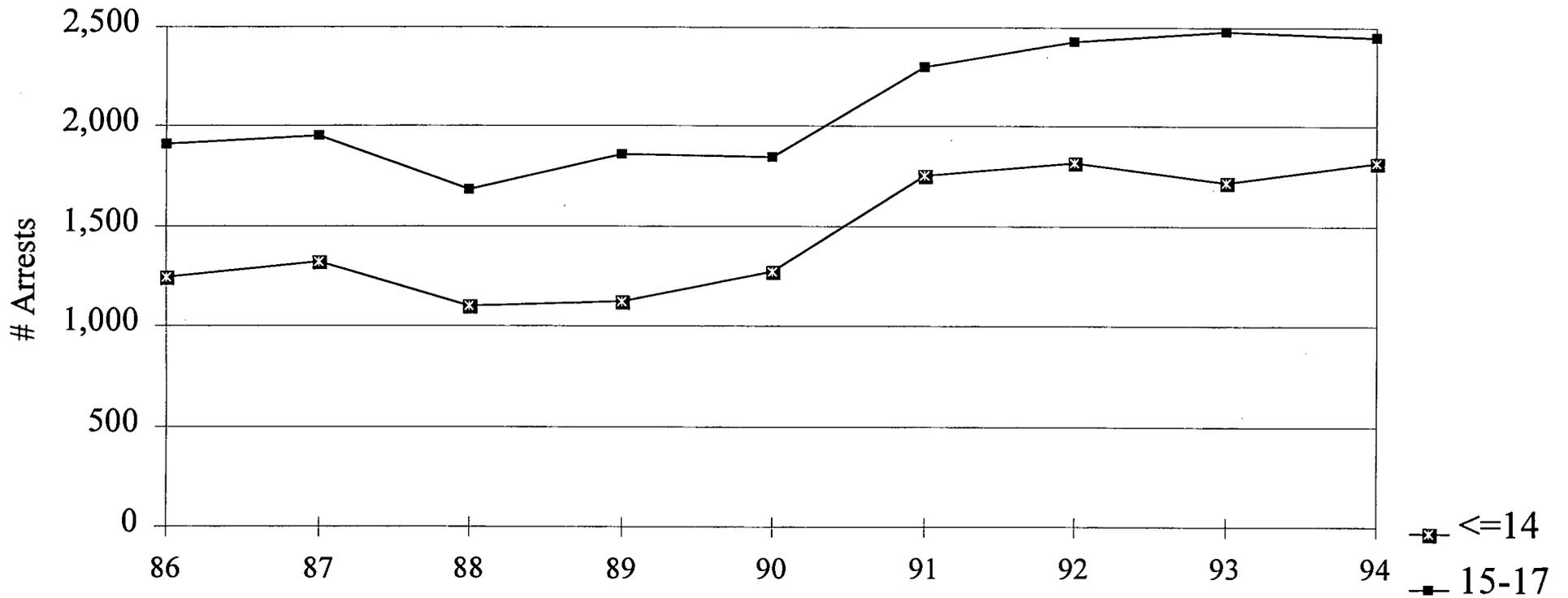
# Benchmark
## Reduce Juvenile Crime

**Interrelationships -**

- Alcohol and Drugs

- High School Graduation

- Adult Crime

# Benchmark
## Reduce Violence By and Against Children

**Teen Violent Death Rate - Ages 15-19**
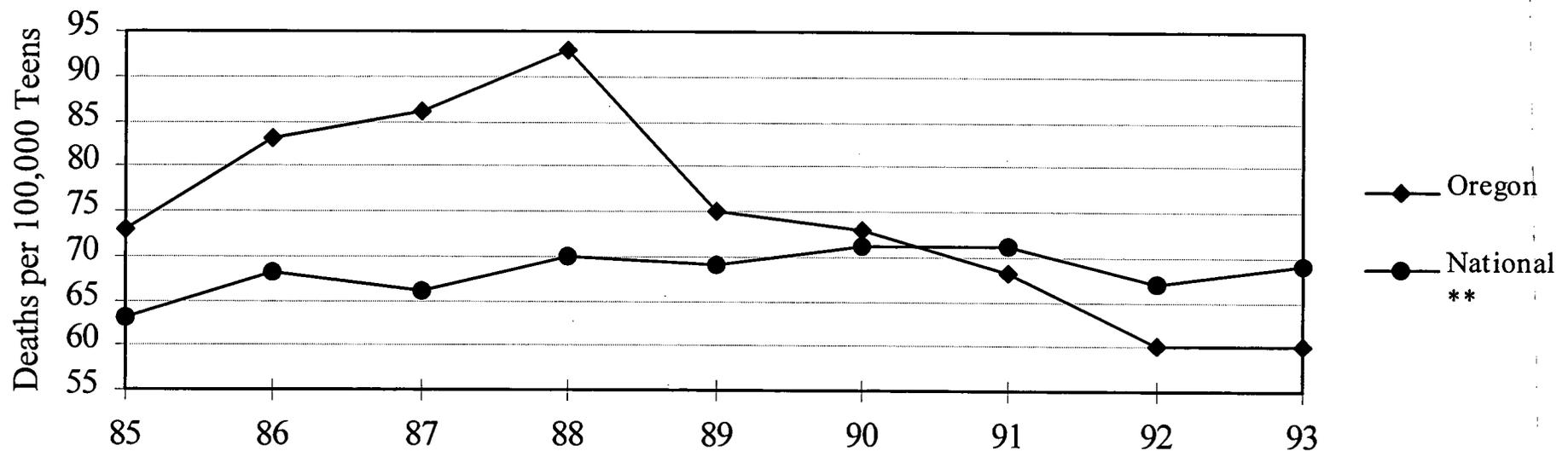


**\*\*Raw Data for 1993:** Rate equals total of 11,897 deaths nationally and 123 deaths for State of Oregon.

# Benchmark
## Reduce Violence By and Against Children

**Interrelationships -**

- Child Abuse / Domestic Violence

- Violent Death Rate

- Hand gun access

# Benchmark
## Reduce Minority Over-Representation in the Juvenile & Child Welfare Systems

**Interrelationships -**

- Decision Points in System

- Increasing Diversion

- Neighborhood Influence

# Benchmark
## Reduce Violent Crimes Against People

**Violent Crime Incidents and Arrests for State of Oregon**
**Rate per 10,000 population**
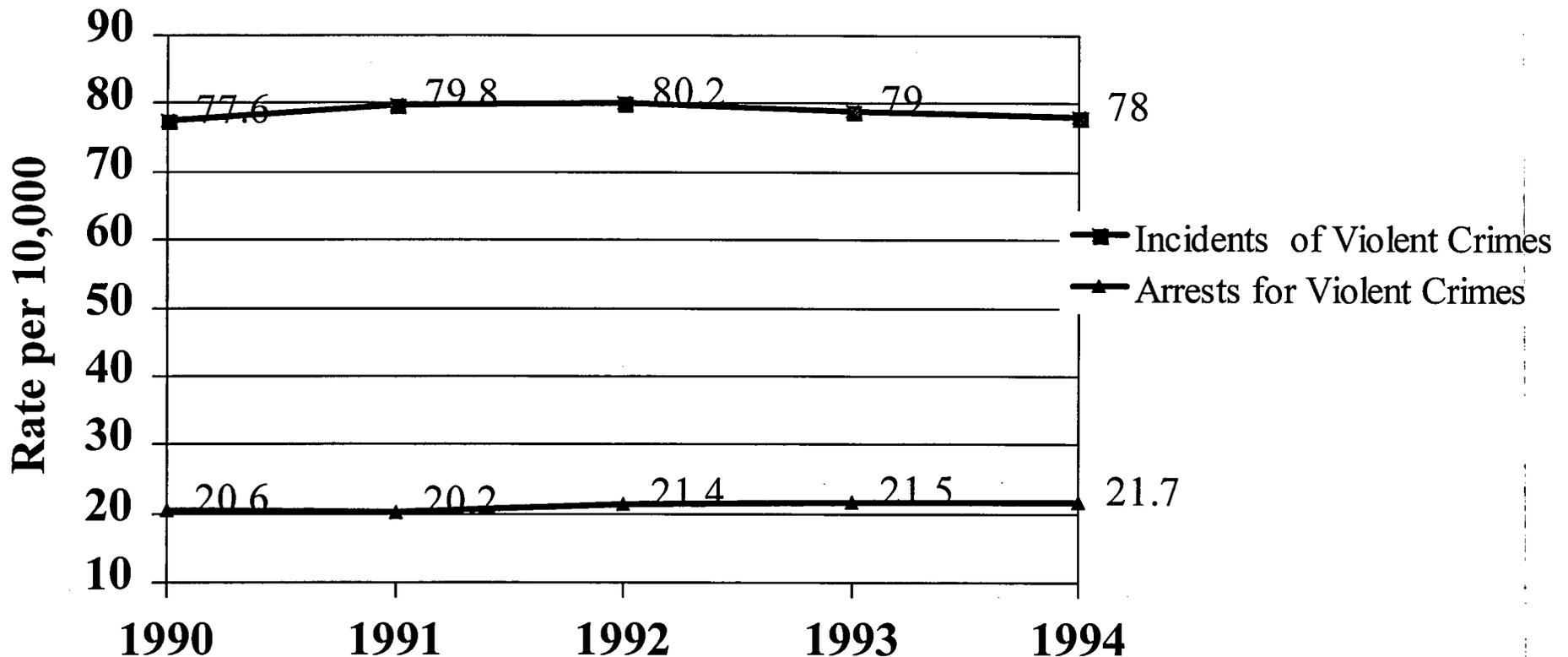
# Benchmark
## Increase Success of Diversion Programs

### Percentage Arrested After One Year

Successfully Completing the S.T.O.P. Program
Multnomah County
July 92- March 94
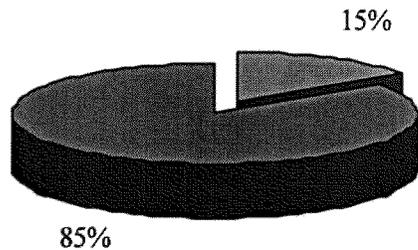
Failure to Successfully Complete the S.T.O.P.
Program
Multnomah County April 94

15%

85%

46%

54%

■ Arrested

■ Not Arrested
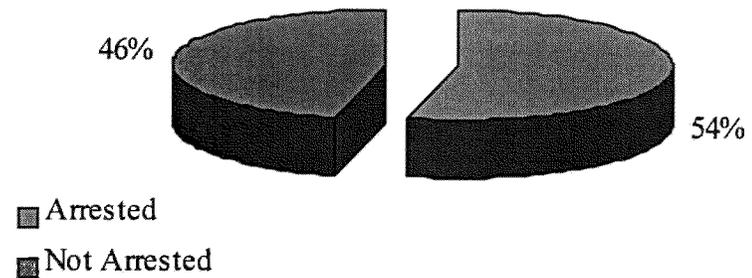
# Benchmark
## Reduce Recidivism

Percentage of Parolees Released Who Are Returned to Prison Within Three Years
Multnomah County July-Dec. 1992
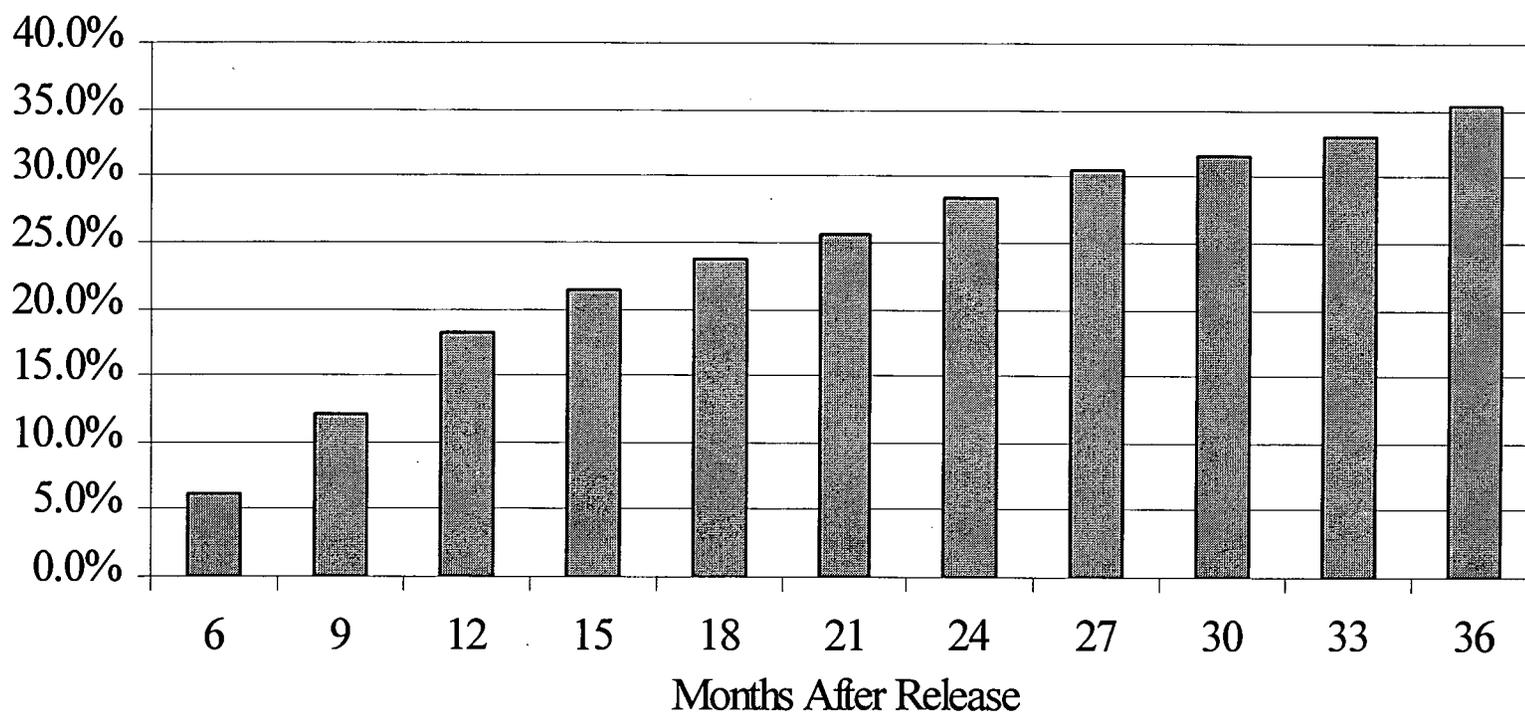
# Benchmark
## Increase Access to Health Care Services

**Percent of Oregonians with Economic Access to Health Care**



Legend:
- State Total
- Children (0-17)
- Whites
- Asians
- African-Americans
- American Indians
- Hispanics
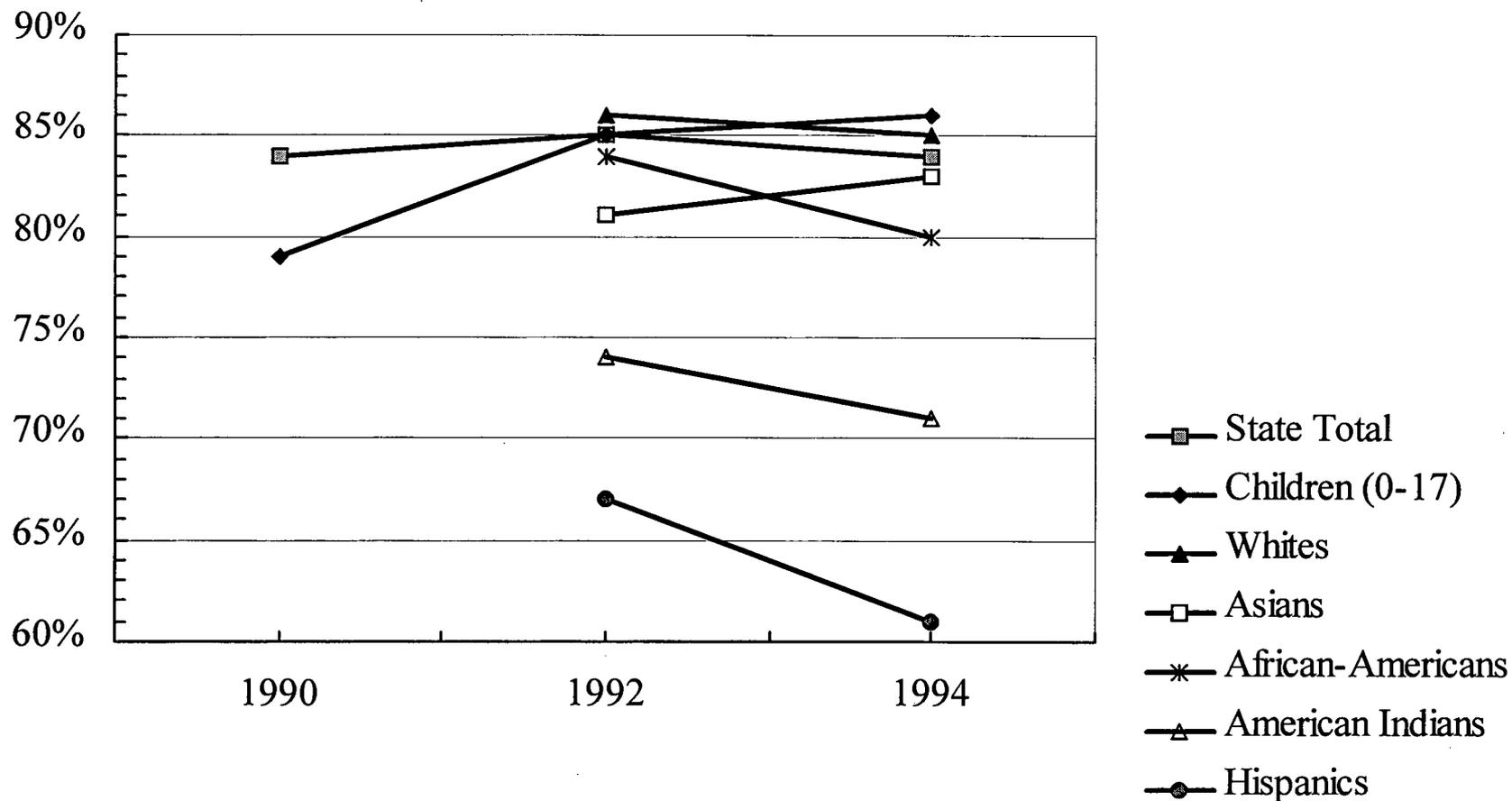
# Benchmark
## Increase Access to Health Care Services

**Interrelationships -**

- Poverty

- Violence

- Prenatal /Healthy Babies

- Family Stabilization

# Benchmark
## Increase Drug Treatment Services

**Number of People Receiving
Publicly Funded Treatment**



Bar chart legend: ■ Oregon, ▨ County. X-axis years: 86, 87, 88, 89, 90, 91, 92, 93, 94, 95. Y-axis: 10,000 to 55,000.
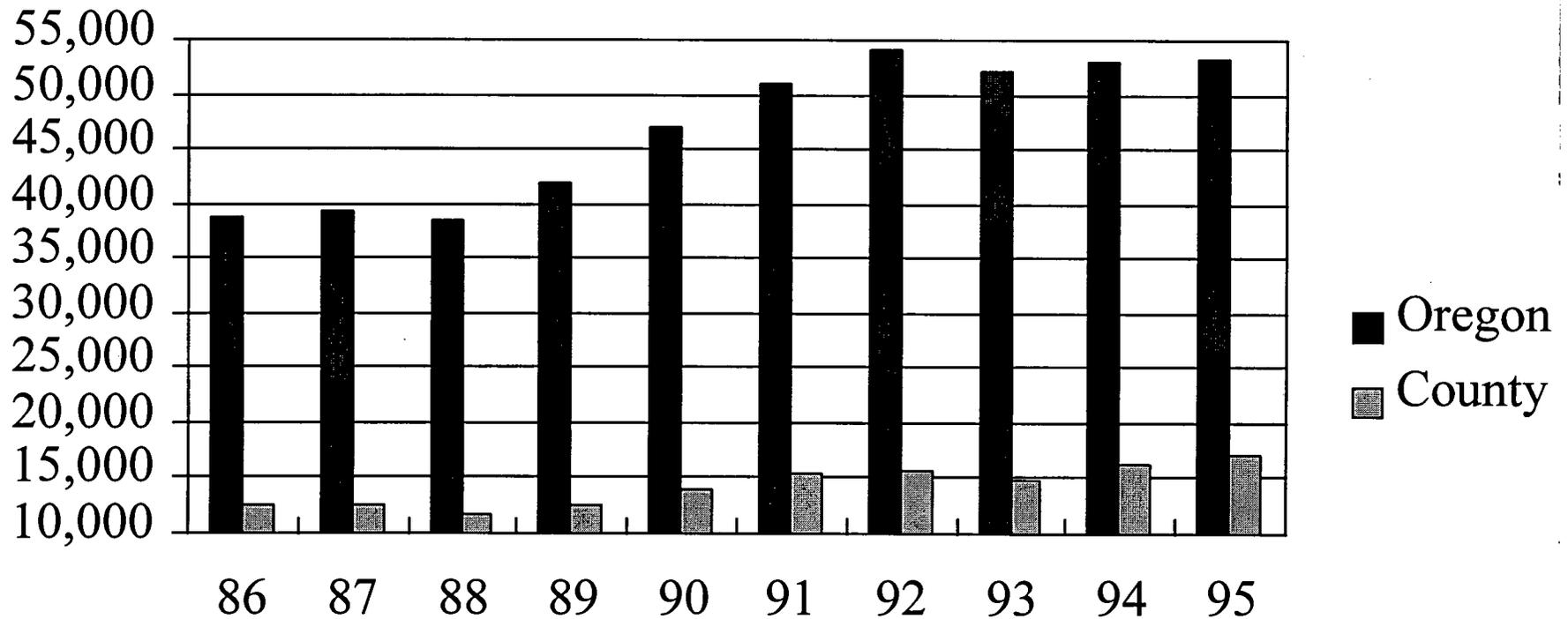
# Benchmark
## Increase Drug Treatment Services

**Adult and Adolescent Treatment Waitlist**
**Statewide**



| | Apr-Jun 1995 | Jul-Sep 1995 | Oct-Dec 1995 | Jan-Mar 1996 | Apr-Jun 1996 |
|---|---|---|---|---|---|
| Adolescents | ~270 | ~230 | ~270 | ~270 | ~300 |
| Adults | ~1,400 | ~1,750 | ~1,760 | ~1,210 | ~850 |
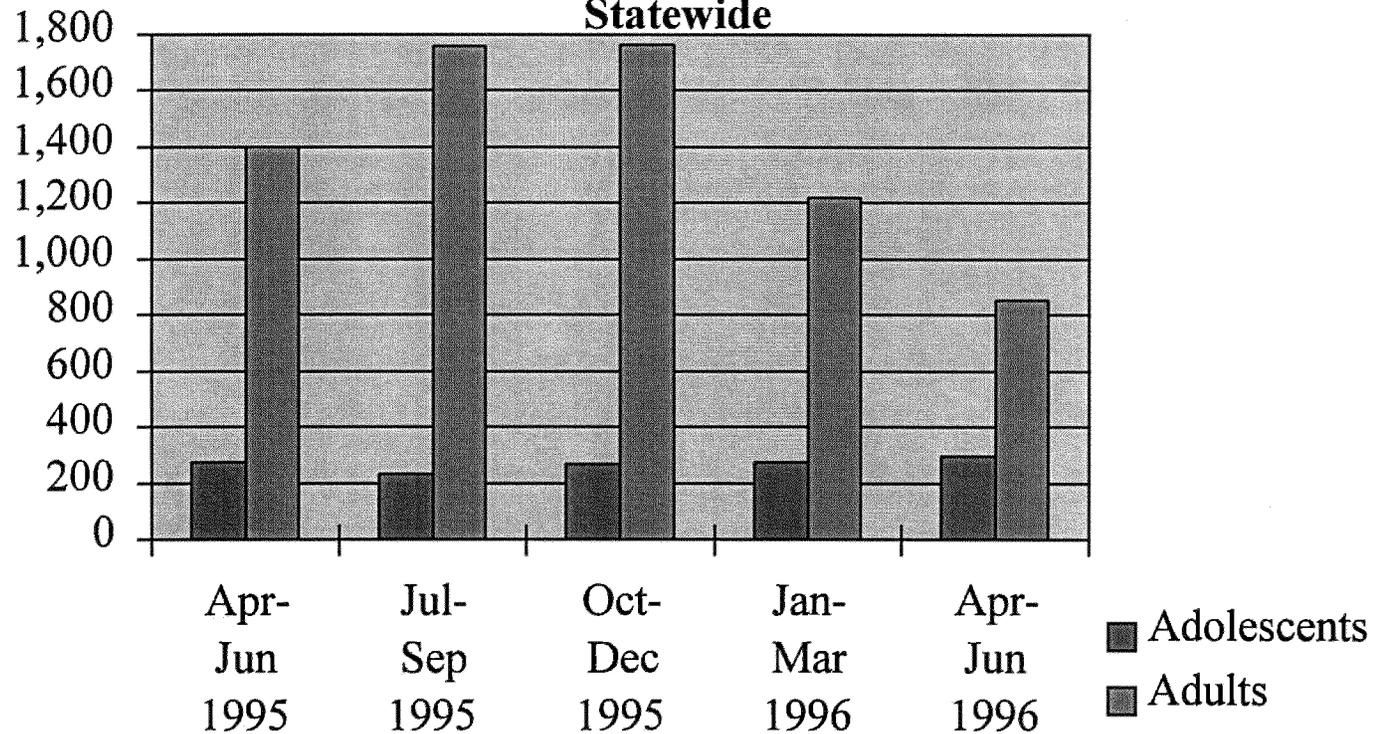
# Benchmark
## Adequate Prenatal Care

**Interrelationships -**

- Teen Pregnancy

- Targeted Populations

- Cost Savings

# Benchmark
## Reduce Student Alcohol & Drug Use

**Interrelationships –**

- Poverty

- Teen Pregnancy

- Violence and Crime

- High School Completion

# Benchmark
## Increase Percentage of Drug Free Babies

**Interrelationships -**

- Prenatal Care

- Alcohol and Drug Treatment

# Benchmark

## Quality Childcare

**Interrelationships -**

- •Accessibility

- •Quality

- •Affordability/Poverty

# Benchmark
## Early Childhood Development

**Interrelationships -**

- Poverty

- Health Care

- Childcare

- Prevention

# Benchmark
## Increase Number of Families Caring for Their Own Children

**Interrelationships -**

- Alcohol and Drugs

- Domestic Violence

- Criminal Justice

# Benchmark
## High School Completion

**Interrelationships -**

•Poverty and Housing Stability

•Juvenile Crime

•Teen Pregnancy

# Benchmark
## Increase Safe, Stable Housing

**Interrelationships -**

- Domestic Violence and Homelessness

- Alcohol and Drug abuse

- Success in School

# Benchmark
## Reduce Poverty

**Interrelationships -**

- High risk

- Domestic Violence & Homelessness

- Affordable housing

# Benchmark
## Reduce Teen Pregnancy

**Interrelationships -**

- Child Abuse

- Poverty

- School Success

# CHILDREN & FAMILY BENCHMARKS
## ALIGNED WITH A CHILD'S DEVELOPMENT

Increase Safe, Stable Housing

Decrease Families in Poverty

Increase Families Caring for their Children

Decrease Child Abuse & Neglect

Decrease Domestic Violence

Decrease Violence by/against Children/Youth

| birth to 5 years | 6 to 12 years | 13 to 18 years | adulthood |
|---|---|---|---|
| Increase Child Care Quality Standards | | Reduce Minority Overrepresentation | Other Urgent Benchmarks |
| Increase Prenatal Care | | Reduce Tobacco, Alcohol, Drug Use | Other Urgent Benchmarks |
| Reduce Drug-Affected Babies | | Reduce Juvenile Crime | Other Urgent Benchmarks |
| | | Reduce Teen Pregnancy | Other Urgent Benchmarks |
| Increase Children Ready for School | | Increase High School Graduation | Other Urgent Benchmarks |

# POVERTY AND THE
# MULTNOMAH COUNTY URGENT BENCHMARKS

## *WHAT IS POVERTY?*

***Poverty is not having enough money to pay for essentials of living - rent, utilities, food, health care.***

- The 1996 federal poverty level is $1,300 per month for a family of four. A 1992 AFS Cost of Living study shows that a family of four needs $1,420 per month for basic expenses. A full-time minimum wage job in Oregon pays $823 per month. Most poverty level families have a working adult.

- Households headed by young parents, ethnic minorities, and single women have poverty rates that greatly exceed the overall median poverty rate. Many two-parent families are also in poverty, particularly among Hispanics. In Multnomah County, the majority of the poor are white and live in Outer East, Southeast, or North/Northeast Portland.

- Poverty is statistically correlated with higher morbidity (death rates), slower development in children, lower scholastic achievement scores, higher rates of teen pregnancy, and higher adolescent crime.

- People fall into poverty primarily due to loss in earnings (job loss, reduction in hours, reduction in wages) and/or changes in family composition (divorce, separation.) People escape from poverty primarily when their earnings increase. *(Source: Davis, Elizabeth and Weber, Bruce, "Oregon Benchmarks: Policy, Linkages, and Drivers: Presentation to the Oregon Progress Board.")*

## *HOW PERVASIVE IS POVERTY?*

***For want of a nail.... Poverty is a core issue for the health of the community. It permeates almost all social problems and wellness strategies.***

- 13.1% (74,639 in 1990) of the Multnomah County population is in poverty. The rate of poverty for children is much higher, at 17% (21,000+). More than a third of African American, Hispanic, and American Indian children live in poverty.

- The link between poverty and other social ills is often noted. The Oregonian, 9/12/96 "Achievement Gap Remains" states: "Learning and excellence depend on factors more complex than race or ethnicity. **Poverty** appears to be tied to students' performance..." The Oregonian, 9/16/96 "Study Sees Chronic Disease as Worst Woe" states: "Infectious diseases, which wreak the greatest havoc among children, **the poor**, and the uneducated, will remain dangerous and unpredictable foes."

- Governor Kitzhaber's A Framework for Oregon's Human Investment Policies recognizes the interrelationships among human investment in education, health, and basic services, a health economy, and a healthy, crime-free society. "The use of public resources must be focused on helping individuals move to a point of being at least minimally self-sufficient."

- Oregon State University has selected poverty as the focus of a pilot project to demonstrate a conceptual framework to analyze the links between policy and progress toward the Oregon Benchmarks.

- In a Lane County survey conducted for the Oregon Commission on Children and Families, child poverty was identified as one of the top four benchmarks, out of 12.

# HOW DOES POVERTY RELATE TO THE MCCF PRIORITY BENCHMARKS?

*If we provide a system of social supports linked to workforce efforts to assure that adults can achieve economic self-sufficiency and be supported in their critical parenting roles, we address the core problem that underlies progress towards achieving our benchmarks for children.*

The top five priority benchmarks of the Multnomah Commission on Children and Families (MCCF) interrelate closely with the issues of poverty. Poverty underlies most of the risks and problems identified in the benchmarks. Therefore, strategies to reduce these benchmark risks must address poverty if they are to succeed.

"Many of the antecedents of adolescent crime, school failure, and early childbearing have been identified....Risk factors implicated in one adverse outcome appear again with another....*Risk factors leading to later damage occur more frequently among children in families that are poor* and still more frequently among families that are persistently poor and live in areas of concentrated poverty....*The close association between poverty and risk* holds for every component of risk - from premature birth to poor health and nutrition, from failure to develop warm, secure, trusting relationships early in life to child abuse, from family stress and chaos to failure to master school skills. Persistent and concentrated poverty virtually guarantee the presence of a vast collection of risk factors and their continuing destructive impact over time." (*Source: Schorr, Lisbeth and Schorr, Daniel. Within Our Reach, 1989. Italics in original)*

## Priority #1:   Reduce Child Abuse and Neglect

An abused child is likely to experience difficulties in school, social and developmental difficulties, violence throughout childhood and life, and is likely to repeat the pattern of abuse as a parent. The child is likely to have come from a poverty household, where higher levels of unemployment, single parenting, early childbearing, and substance abuse interrelate with poorer child health, fewer family supports and resources, and a greater likelihood of domestic violence. The abused child is more likely to be a poor child, and to end up a poor adult, unless the cycle of abuse is stopped.

Strategies to combat child abuse and neglect focus on increasing parental capacity to operate within a family, including raising children. The strategies provide parents with the resources to obtain livable wage jobs, alcohol and drug treatment, stress reduction, anger managementand parenting training, and family supports, such as affordable child care and access to stable, affordable housing.

## Priority #2:   Reduce Domestic Violence

When domestic violence occurs, it is likely to have long-lasting effects. Women and children are likely to become homeless or fall into poverty. If the woman is pregnant, she may miscarry or give birth to a low birth weight infant. Low birth weight is associated with greater health and developmental problems, which are further associated with greater difficulties in school. If the woman and her child enter poverty, these risks are magnified.

Low income women are less likely to leave a violent homelife, as they have few resources to support becoming self-sufficient. Domestic violence is closely related to child abuse. According to the Multnomah County Benchmark Trends Report (1996), 100% of child abuse fatalities occurred in homes where domestic violence took place. Domestic violence is also implicated in negative youth behavior, from alcohol and drug abuse, to youth violence and social/academic adjustment problems. These problems are all correlated with poverty.

Strategies addressing domestic violence reduction and poverty focus on providing the victim of abuse with resources to become self-sufficient: education, jobs, housing, support systems. By providing alternatives so that an abused parent can leave violence and support her children, these services provide an avenue out of the abusive situation and an opportunity to provide a stable, caring family in which to raise children.

## Priority #3: Meet Developmental Standards by Kindergarten

When children fail to meet developmental standards, there is frequently a health-related problem. Health concerns rise dramatically when the child is in poverty. Poor children are less likely than nonpoor children to have preventive health care and nutritionally-balanced diets. Poor diet is linked to developmental delays, more frequent and severe infectious diseases, iron deficiency, disrupted cognitive development, and disruptive social behavior. Poor families are also more likely to live in substandard housing, which may lack adequate plumbing and sanitary systems. They are also more likely to live in older houses, which have more problems with lead paint and perhaps high levels of carbon monoxide. Elevated lead levels in children under age 6 are linked to aggression, poor health, attention deficits, and developmental problems.

Strategies to improve the appropriate development of poor children address the childen's health status, including the provision of an environment which meets children's needs for quality nutrition, health care, and environmental safety.

## Priority #4: Increase the Number of Youth Graduating from High School

Poverty is closely tied to the issue of high school graduation. Poor youth tend to finish high school less frequently than nonpoor youth. They also tend to have higher rates of absenteeism and poorer performance scores. Poor health, lack of family and social supports, and poorer schools in poverty-impacted neighborhoods all contribute to lack of school performance.

Failure to graduate from high school is also related to the entry into poverty. "Poverty rates decrease dramatically as years of school completed increases." "The educational level of parents is closely associated with child poverty. Parents who have not completed high school are less likely to be employed steadily than parents with more education." *(Source: Leidenfrost, Nancy. Fifty Facts About Poverty. 1993)*

Strategies to increase high school graduation rates address family resources to support education, school curricula and activities designed to encourage and support low income youth school attendance, and continuing education programs for people beyond high school age so that they can get the basic education they need.

## Priority #5: Reduce Violence By and Against Children and Youth

Poor children and youth are at greater odds of being victimized, or of perpetrating violence, than are nonpoor children, and there is a high correlation between juvenile crime and children in poverty. *(Kids Count Data 1996, and Kids Count Missouri, 1995)* Nationally, many juvenile offenders came from homes with single parents, particularly the mother; statistically, single female headed households are prevalent in the poverty population.

Factors that interrelate with violence include: alcohol and drug abuse, poor school attendance, social adjustment problems, lack of family and community support, child abuse and domestic violence. These are all factors that also interrelate with poverty.

Strategies more closely linking County social service programs to Public Safety Council initiatives will address child safety, positive alternatives, youth empowerment, and community support.

Income per capita as a percentage of U.S. real per capita income • Per capita income as a percentage of Oregon's real per capita income broken down by race • Average annual payroll per worker (all industries) • Per capita income • Annual total payroll • Percentage of citizens with incomes above 100% of the federal poverty level • Total employment (in thousands) broken down by race • Unemployment rate (as compared to the Portland Metropolitan region) broken down by race • Percentage of income from goods and services sold outside of the United States • Percentage of income from goods and services sold outside the Portland Metropolitan region • Number of small business that fail in one year, two years, and five years • Percentage of employer payroll dedicated to training and education • Percentage of 25 year olds with a certificate granted from education and training programs • Percentage of employees working in firms which train over 50% of their workforce 20 hours or more annually in work skills or work processes • Percentage of high school students who are engaged in Certificate of Advanced Master programs that involve work place experience • Number of U.S., Canadian and Mexican metropolitan areas over 1 million population served by non-stop flights to and from any Oregon commercial airport • Number of international cities of over 1 million population (outside Canada & Mexico) served by direct or non-stop flights to and from any Oregon com-

...rates compared to those in Seattle & Tacoma (percent greater or less than) • Percentage of government permits issued within the target time period ... less in ... business licenses, building permits, water ...ing/electrical/heating & ventilating, parking, street use, and conditional use/zoning/variances • Percentage and n...er of ... acreage identified in compreh... ... plans ... ...tually suitable for development • Total taxes per capita as percentage of U.S. average • Total taxes per $1,000 in ...me • Pe... ...federal, state & local business taxes ...d fees p... ...of business income • Real per capita capital outlays for public infrastructure • Percentage of children enterin... kinderg... ...ing specific development standards for ...ir age. ...ment includes cognitive, language & literacy, physical well-being, and social/emotional development. • Pre...ancy ra... ...00 females ages 10-17 broken down by race • Percen... ...althy birthweight babies • Percentage of infants whose mothers did not use the follow-ing: Illicit drugs th...ugh pr... ...lcohol during pregnancy (self-reported by ...her), a... ...o during pregnancy (self-reported by mother) • Percentage of two year olds who are adequately immuni... • Per... ...children 0-17 living above 100% of the pove... ...level b... ...wn by a... ...

...time in the last year • Percent... ...e of chi... ...ilities which meet established basic standar... • Num... ...ntified child care slots available for every 100 children under age 13 • Percentage of students free of inv...ement ...ol in the previous month broken down by th... ...ighth ... ...th grades • Percentage of students free of involvement with illicit drugs in the previ-ous month broken d...wn by t... ...and eleventh grades • Percentage of studen... ...ree of ... ...ent with tobacco in the previous month broken down by the eighth and eleventh grades • Percentage of stu...nts wh... ...established skill levels broken down by r... and g... ... • High school graduation rate • Percentage of adults who have completed at least one year of educational ...ograms ...ndary school broken down by race • P...entag... ...s who completed a certified ap...ticeship ...ram • Percentage of adults who have com-pleted an associate ...gree in ...nal- technical education broken dow... ...race ... ...tage of people leaving post-seco... ...la ... ...ool s... ...s... ...kill sets to match work force needs • Percentage ... adults ...ss English literacy skills brok... ...own b... ...document, quantitative, and information/technology literacy • Percentage of citizens who have eco-nomic access to bas... health ... ...down by race • ... ...ca... ...s who have geographic access to basic healt... ...th... ... ...ercentage and number of people with early d...nosis ... ...ental ... ...iving in housing of their choice with adequate support • Percentage of citizens with mental illness who are employed • Percen...e of ci... ...mental illness living above the p...rty level ... ...age of citizens with developmental disabilities living in housing of their choice with adequate support • Percenta...of citiz... ...evelopmental disabilities who are employ... • Percen... ...itizens with developmental disabilities living above the poverty level • Percentage of citi-zens with physical d...abilitie... ...housing of their choice with adequate support ...Percenta... ...ens with physical disabilities who are employed • Percentage of citizens with physi-cal disabilities livin... above th... ...level • Percentage of elderly living in the least re...tive se... ... ...s and pro-tected green space ...r 1,000 ... Percentage of home owners and renters below med... income ... ...ties: gas, electric, water, garb...e, sewe... • Number of citizens who were homeless at some tim... n the la... ... ...of the fol-lowing: park/open ...ce, tra... ...elementary service, neighborhood commercial nod... ...nd bik... ...centage of people who feel a sense of community in their neighborhood • Percenta... ...s of trans-portation ...

...ts govern-ment ambient air q...ty star... ...arbon dioxide emissions as a percentage of 1990 emiss...s • Pe... ...samples per year the community's river and streams meet government in-stream water qual... ...tandar... ...al water usage per capita broken down by industrial, ...identia... ...mercial categories • Number of energy units used per capita broken down by industrial, resi...al, and ...ial categories • Pounds of solid waste landfilled per...pita per ... ...ercentage of Portland metropolitan area population growth since 1990 occur-ring within the Ci... ...Portla... ...down by special needs • Percentage of total non-m...ufactur... ...the Portland metropolitan area located in downtown Portland • Percentage of eligible citizens w... ...ote • ... ...capita public and private financial support for th...arts in ... ...including: libraries, museums, visual arts, and performing arts • Percentage of citizens who are ...ied tha... ...re necessary, responsive, and cost-effect... Perce... ...izen volunteers in a governmental advisory capacity who are satisfied that their rec-ommendations ... ...arefull... ...onsidered • Percenta... ...itizens w... ...eer at least 50 hours of their time per year to civic, community, or non-profit activities • Perc... ...rs incorporat... ...udget and/or planning processes, and collect support...g ...ata • Percentage of community organiza-tions that adopt benchmarks, incorporate them into budget and/or planning processes, and collect supporting data. • General obligation bon... ...(Standard & Poor's) • Per capita cost of government • Direct government service delivery expenses as a percentage of total government expenditures • Percentage of citizens ... ...fe and secure • Number of reported crimes against people or property motivated by prejudice including race, sexual orientation, religion and national origin • Number of re... ...ts of domestic violence including: Children abused and neglected per 1,000 people under 18 • Spouses or domestic associates abused per 1,000 people • Elderly abuse pe... ...ople • Families repeatedly victimized by such incidents • Number of reported crimes against people per 1,000 population. Crimes include murder, rape, robbery, kidnapping, and assault broken down by age • Number of reported crimes against property per 1,000 population. Crimes include burglary, larceny, motor vehicle theft, arson, and vandalism b...k...n d...n by a... ...tees testing positive for alcohol or illicit drugs in Multnomah County • Firearm injuries and fatalities rate per 1,000 population broken down by age • ...ccination rates per 100,000 population. Crimes include hate crimes, domestic violence, rape & juvenile coerced theft broken down by race • Percentage of adults who use illegal drugs • Percentage of felons who commit new felonies within three years of reentry to the community • Percentage of diverted offenders who commit the same type of offense within one year a... ...gram broken down by sub-stance abuse, alcohol, and domestic violence • Percentage of residences, institutions, and businesses which are prepared for an emergency by being able to sustain themselves for 72 hours • Property and person loss, due to emergency/disasters broken down by number of lives lost per 1,000 and dollar value of loss as percentage of structure/property exposed • Percentage of emergency service agencies (defined in ORS 401) with emergency plans and emergency response procedures in place that are regularly exercised and updated per federal standards

**1996 ANNUAL REPORT**

**COMMUNITY
BENCHMARKS**

# ENCHMARKS...

## PROGRESS MEASURED ONE STEP AT A TIME

*Portland Multnomah
Progress Board*

# City Council and County Commissioners

## Portland City Council

Honorable Vera Katz
Mayor

Honorable Gretchen Kafoury
Commissioner of Public Affairs

Honorable Charlie Hales
Commissioner of Public Safety

Honorable Mike Lindberg
Commissioner of Public Utilities

Honorable Earl Blumenauer
Commissioner of Public Works


Honorable Barbara Clark
City of Portland Auditor

## Multnomah County Commissioners

Honorable Beverly Stein
Multnomah County Chair

Honorable Dan Saltzman
Commissioner, District 1

Honorable Gary Hansen
Commissioner, District 2

Honorable Tanya Collier
Commissioner, District 3

Honorable Sharron Kelley
Commissioner, District 4


Honorable Gary Blackmer
Multnomah County Auditor

# 1995-96 Portland Multnomah Progress Board

Honorable Vera Katz, Co-Chair
Mayor, City of Portland

Honorable Beverly Stein, Co-Chair
Chair, Multnomah County

John E. Bierwirth, Superintendent
Portland Public Schools

Honorable J.E. "Bud" Clark
Mayor, City of Portland 1985-1992

Sho G. Dozono, President/CEO
Azumano Travel Service

Barbara M. Karmel, Ph.D., President
The Reed Company

David Lohman
Director of Policy & Planning
Port of Portland

Honorable Ruth McFarland
Presiding Officer (1995)
Metro Council

Daniel F. Moriarty, Ed.D., President
Portland Community College

Lawrence J. Norvell, President/CPO
United Way of the Columbia-Willamette

Mary Zoe Petersen, Owner
Gresham Optical/Custom Eyes

Judith A. Ramaley, Ph.D., President
Portland State University

The Reverend Luther Sturtevant
Ecumenical Ministries of Oregon

Honorable Sharon Wylie, State Representative
Wylie & Associates

Duncan E. Wyse, President
Oregon Business Council

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*The Portland Multnomah Progress Board*

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*The Portland Multnomah Progress Board*

# Benchmarks...

## PROGRESS MEASURED ONE STEP AT A TIME

Each day we read stories in the newspaper about impoverished teenage mothers, sensational crimes, or raging epidemics. It makes us wonder: Are we making *progress*? Are conditions in Multnomah County better than they were a generation ago? These are questions we all want to know, and policymakers and civic leaders in Multnomah County are finding out the answers.

The Portland Multnomah Progress Board considers these issues through the Benchmarks which are indicators reflecting the status of our community. Established in 1994 through an extensive effort involving 3,000 citizens, the Benchmarks tell us if we are making *progress*. They also serve as a catalyst to bring the community together to address issues of concern.

The 1996 Portland Multnomah Progress Board Annual Report analyzes information concerning 76 benchmarks. Information to analyze twenty-four benchmarks was not available to us at press time, however, we will continue to pursue and analyze data for them during the coming year.

We maintained the original numbering system for the benchmarks, which was a random compilation. In order to simplify the number of benchmarks and focus discussion, the Board is committed to analyzing each benchmark related to people by gender,

ethnicity, age, and income. In doing so, we were able to eliminate several duplicative benchmarks. Several benchmarks were added in 1995, and the wording of some benchmarks was changed to more clearly reflect the data available for analysis.

To focus discussion and analysis, the benchmarks are discussed in this report according to six clusters: The Economy, Education, Children and Families, Quality of Life, Governance, and Public Safety.

During 1995 we carefully studied the benchmarks in three cluster areas: Public Safety, Governance, and Education. We believe that the benchmarks in those clusters are now complete and reflect the best available, or potential, data. However, our analysis is never complete for any benchmark; we continually seek data sources and policy expertise on the appropriateness and meaning of our benchmarks. The network of partners who help us with that process is under construction for each cluster, and we look forward to its continuing expansion.

At the upper right of each benchmark two symbols may appear. The logo of the Portland Multnomah Progress Board appears in every benchmark. The seal of the State of Oregon appears on those benchmarks which are also reported by the Oregon Progress Board.

To state each benchmark as a quantifiable indicator, we try to begin the phrasing of the benchmarks with an active verb such as "increase" or "decrease". Although the Board has not established targets for all benchmarks, the direction of the desired trend should be clear. However, for some benchmarks the desired trend has not been established, usually because the present situation of the benchmark is not known. In these cases, we use the term "monitor".

For public safety benchmarks which track crimes where there is a large disparity between victimization rates (crimes that occur) and reported crimes (crimes reported to authorities), we may actually want to see an increase in reported crimes, as victims feel more comfortable reporting incidents to police. (See Benchmarks #85, 86A, 86B, 86C, and 87.) For governance benchmarks which track per capita expenditures for capital infrastructure and services, and taxes as a percent of income, the Board has not determined whether the target should be higher or lower than present conditions. (See Benchmarks #24, 82, and 103.)

The benchmarks will always be a work in *progress*, as we refine our data and analyses and discover better ways to measure progress in achieving our vision for our community. We welcome contributions of data and ideas for all of the benchmarks.

# Benchmarks...
## PROGRESS MEASURED ONE STEP AT A TIME

⚖ **Seventy-eight percent of citizens rate their neighborhood livability as good or very good.** *(Benchmark #61)*

⚖ **Over 75% of citizen advisors to Portland and Multnomah County government are satisfied with their experiences.** *(Benchmark #77)*

⚖ **Over 57% of citizens volunteer in our community; 32% volunteer over fifty hours a year.** *(Benchmark #78)*

Residents of Multnomah County have been asked their opinions on many issues through a variety of survey methods during the 1990's. The Portland Multnomah Progress Board has studied the findings of these surveys, as well as other information brought forward by experts in various fields.

The Board began by exploring allegations that the population is becoming increasingly polarized and greedy. Public surveys tended to dispute this. Extreme positions on public issues have become more "shrill", as characterized by Portland pollster Adam Davis, however, he sees an increasing concentration of moderate view points from which people seek consensus and solutions, real movement toward the achievement of public goals.

Davis offers the contrast seen in Table 1 between the public mood in 1990 and today. It is rich in symbolism and provides an excellent snapshot of current trends. (Davis, December 18, 1995)

After its study and discussion, the Portland Multnomah Progress Board found five important components to the public mood in Multnomah County in early 1996:

*Citizens have more confidence in local government.*

They believe local government services are improving. Pollster Noel Klein reports citizens have an increased understanding of the roles of different local government entities, although Metro remains a distant enigma to many. They favor consolidation of special service districts with local governments, but they are generally pleased with the make-up of sub-regional governments in the area. (Klein, January 1995) Davis reports that citizens become less confident as government becomes more distant.

**Table 1**
**1990 Public Mood vs. 1996 Public Mood**

| 1990 | 1996 |
|---|---|
| John Rambo | Forrest Gump |
| Standard of Living | Quality of Life |
| Things | Time |
| Hot Tubs | Green Houses |
| Good Deals | Good Deeds |

Source: Davis & Hibbits, Inc.

# *The Public Mood (continued)*

Recently, citizens have added two more targets to their unhappiness with distant institutions: business and the media. Recent tax abatements to large semiconductor companies fueled citizen suspicion that large companies get richer, while the working person gets poorer. This was of particular concern to the City of Portland and Multnomah County, because such abatements were aimed to benefit low income and unemployed people.

The media is seen as superficial and sensational in its reporting. Citizens are increasingly turning to neighborhood sources of information - word of mouth from friends and associates and neighborhood newspapers which are drawing significant audiences in Multnomah County.

## *Citizens seek community.*

Many citizens believe that present suburbanization counters an individual's sense of community. Citizens are seeing the benefits of living patterns that increase access, not only to neighborhood services, but also to jobs and recreation. The increase in citizen dependence on neighborhood newspapers and other forms of communication, cited above, reinforces this trend.

Issues of growth management are of increasing concern to residents, supplanting crime as their primary neighborhood concern. What citizens mean when they use the term is vague, but generally applies to the impacts of growth on the overall condition of their neighborhood. This issue is discussed more fully in the next section.

## *Citizens understand how complex public issues are.*

During the recent years of the Your City Your Choice Survey conducted by the City of Portland during its budget process, a dramatic trend has emerged: Citizens no longer identify one issue in their community, such as transportation or public safety, as dominating their concerns. They express a rather consistent level of concern among several issues, such as education, economic development, growth management, and public safety. In citizen forums, participants often expressed an understanding of the interrelationships of different issues and of the need

to work on all fronts to address issues, all of which would contribute to the prosperity of their neighborhoods.

## *Citizens are anxious about their long term financial future.*

We shape our opinions about public issues based on our own experience. It is a rare citizen who has the luxury of information concerning societal trends, and who acts in other than his or her own self interest. However, few citizens have escaped the direct impact of changing patterns in our economy that have created a greater degree of separation, and alienation, between the wealthy and the middle class. The economic realities of slower, and for many, stagnant, wage growth have literally "brought home" the changes taking place in the workplace. These trends, discussed more fully below, have produced a sense of insecurity among our citizens. The changing workplace environment caused by the continued loss of traditional high paying manufacturing jobs in favor of low paid service jobs, has impacted those entering the workforce during the 1990's. And as business "downsizes" and continually reorganizes, workers are threatened with changes and job loss in areas where a decade ago they might have expected security for the duration of their working life.

*Citizens increasingly seek spiritual connectedness.*

Davis reports that membership in mainline churches and alternative religious organizations is once again on the rise. The popularity of books such as Thomas Moore's *Care of the Soul* and James Redfield's *The Celestine Prophecy* are indicative of a growing interest in spiritual issues. Davis cites the recent exercise and fitness craze as being linked to spiritual experiences. It appears that many people are taking time from their busy lives to explore their inner nature and their relationship to a greater being. This movement is consistent with the sense of community which people also seem to be seeking.

# Growth Management

🐟 **The average time that residents commute to work has increased ten percent in the past two years.** *(Benchmark #62)*

🐟 **The percentage of residents using public transportation declined two percent from 1993 to 1994. The 1994 rate held steady in 1995.** *(Benchmark #63)*

🐟 **The number of days per year that the region does not meet air quality standards continues to decline.** *(Benchmark #66)*

🐟 **The City of Portland grew 35% from 1980 to 1995. The city of Gresham grew 134% during the same period.** *(Benchmark #72)*

## The Regional 2040 Plan

Portlanders cite growth management as being of increasing concern to them. This issue has received much public attention in the past year as Metro has stimulated public discussion with its adoption of the Regional Plan for the year 2040. Metro describes the following characteristics of its vision for the future of the region:

• A strong central city core.

• Thriving community centers throughout the region.

• Compact development that encourages innovative design patterns that increase the efficient use of land.

Oregon has a unique method for containing urban sprawl and protecting our valuable farm and resource lands - the Urban Growth Boundary. Mandated by our strong land use planning and zoning requirements, the Urban Growth Boundary clearly marks the perimeter of the urban area. It includes all Multnomah County cities and portions of Clackamas and Washington counties. In order to achieve the vision of the 2040 Plan, Metro may have to adjust the Urban Growth Boundary accordingly to accommodate projected growth within the region.

Put in place in 1974, Oregon's land use system is only now being challenged by rapid growth; the survival of the system depends on how well the region can implement its vision for the 21st Century. In conjunction with the region's cities, Metro is developing projections to track the rate at which land must be developed in order to achieve the vision of the 2040 Plan. When these numbers are finalized, the Portland Multnomah Progress Board will develop benchmarks to measure progress toward the plan.

The vision of the 2040 Plan is to offer residents increased opportunities to meet their yearning for a greater sense of community. Because this yearning manifests itself in many different ways, "growth management"

can mean different things to different people. However, if we can achieve the efficiencies in land development articulated in the 2040 Plan, many of those favorable attributes of community have a greater probability of being fulfilled: community services such as libraries, schools, and resource centers within walking distance of homes; mass transit that links homes and work; vital neighborhood shopping districts; affordable, flexible housing for our changing family structure.

The pattern of development in the Portland area since 1970 has been similar to that of comparable cities, with most housing and job growth occurring away from the central city, in our case, toward the Urban Growth Boundary. However, single family housing development in Multnomah County has followed the general trends of such development in the region, only at a slower rate. Growth in multi-family housing has kept a consistent pace throughout the region.

Although several suburban "edge cities" have seen considerable growth in employment, notably Lake Oswego, Hillsboro, and Clackamas; Multnomah County employment growth has maintained a respectable, if slower, pace, particularly given environmental and possible land availability constraints.

## Trends impacting how we manage growth.

The Portland Multnomah Progress Board believes that several major trends in our community should be taken into account as we develop our growth management program for the 21st Century.

## The demographic profile of our population is changing.

Our community is becoming more ethnically diverse, and will probably continue to do so well into the 21st Century. Multnomah County has had a relatively small proportion of minorities compared to other urban areas

of its size. However, in-migration and higher birth rates among minorities will change that in the coming years.

Although we can expect a small increase in the number of children among us, the average age of our adults will increase as well, mirroring trends nationally. We are also impacted by economic conditions elsewhere in the nation. The recession of the early 1990's in California caused in-migration of Californians to Oregon which has subsided recently as economic conditions have improved to our south.

Although divorce rates have slowed recently, there continue to be profound changes in the structure of the American household. Single parent families will continue to be a presence. Several factors, including increased housing costs, will continue the trend in multiple, unrelated adults living together, as well as the return of young adults to their childhood household.

# Growth Management (continued)

*We must change the way we educate ourselves.*

Oregon has anticipated 21st Century changes in the way we educate ourselves. Education reform has triggered a debate concerning preparation of our children for the changing workplace which will extend well into the next decade. Learning must be seen as a life-long process that begins at birth and extends through retirement. Our traditional education institutions are greatly challenged by the implications of this trend.

The Portland Multnomah Progress Board intends to track closely education trends in the future, and will make every attempt to identify those factors which are indicators of success in adapting our present systems to necessary change.

*There will be changes in where we work.*

It is clear that many changes in the way we work loom on the immediate horizon. Technological innovation, demand for more leisure time, and family patterns have already caused changes in work site locations, commuting patterns, and support services needed for workers.

The Portland Multnomah Progress Board will collaborate with others in the near future to better understand this trend and to identify appropriate public and private actions which can better prepare our citizens for these changes.

🖎 **Per capita income has not returned to its pre-1980 level, in comparison with national rates.**
*(Benchmark #1)*

🖎 **The amount of employer-provided training did not increase from 1992 to 1994.**
*(Benchmark #14)*

🖎 **We are seeing increases in student achievement levels.**
*(Benchmark #37)*

## *The regional economy is thriving.*

After the prolonged recession of the early 1980's which was followed by a briefer recession in 1991, the Oregon economy is enjoying the very best kind of economic growth - slow and steady. Multnomah County has mirrored this economic health, although to a more moderate extent than its suburban neighbors.

In the late 1980's, then Governor Neil Goldschmidt led a state planning initiative that resulted in a prescient document, *Oregon Shines*, a blueprint for how Oregon might prepare its people for the economic challenges of the 21st Century. The Oregon Benchmarks were an outcome of this document, providing indicators to how well the state was progressing toward its goals.

The *Oregon Shines* project will be revisited during 1996. The Portland Multnomah Progress Board will be an active participant in this effort. We will carefully examine the implications of trends emerging in our changing local economy.

Let's begin thinking about the economic issues of the 21st century.

## *Imagine the 21st Century.*

Imagining the economy of the new millennium requires leaving behind all of our present assumptions about how we educate ourselves and our children, how and where we work, what kind of work we do, and, probably, how we organize our lives. Technological changes are likely to be sweeping, with even greater impacts on our work and families than the personal computer has brought during the last decade.

Such imaginings will require that we truly "get out of our boxes" and see the world as others see it, and as no one has ever seen it before. It will also demand a great deal of "giving up and letting go" ...an acknowledgement that things as they are, even in our personal existence, are likely to change, and that we must accept personal responsibility for being willing to adapt our own circumstances, and expectations as well. As a friend of the Progress Board is fond of saying, "The future is *not* the present with fins on it."

# *The Economy (continued)*

*Should we redefine economic indicators?*

Even those outside of the economics profession are familiar with economic conditions that are tracked regularly by the federal government and reported by the media. The unemployment rate, inflation rate, and index of leading economic indicators are followed closely as bellwethers of national and local economic health. However, traditional economic indicators do not measure conditions that may be equally important to the well being of our community.

A new organization has emerged from this debate. Redefining Progress stimulates public debate over the nature of economic progress and the best means of attaining it. The group has designed a "genuine progress indicator" (GPI) to replace the gross domestic product (GDP) presently measured by national economists. The GPI takes into account spending on activities which can be seen as negative - medical and property costs of crime, natural resource depletion and environmental harm, loss of leisure, and unequal income distribution. GPI positively accounts for valuable things that the GDP ignores such as household and volunteer activities that contribute to social stability and family success. (Cobb, October 1995)

The Portland Multnomah Progress Board has discussed these positive contributions, called "social capital", along with standard economic indicators, and found them important in our community. Robert Putnam, a leading researcher in social capital issues, has studied the decline of social capital throughout the last several decades. (Putnam, January 1996) He defines that decline as the loss of strong community networks of people that support each other as individuals and contribute energy to organizations that nurture the community. After exploring factors that might have contributed to the decline of social capital (such as increased numbers of working mothers, increases in welfare recipients, mobility, and family instability), Putnam concludes that the culprit is *television*. We will explore this issue further.

In Multnomah County, discussions of economic growth include consideration of those factors that contribute to the *quality* as well as the quantity of prosperity. Community livability is an important goal of all of our community plans, and we are interested in developing indicators that adequately measure that goal. Whether called sustainability, quality of life, or livability, these issues are an important component of community progress.

The Portland Multnomah Progress Board will continue to explore alternatives for assessing economic and social conditions in our community, and we will integrate them into the benchmarks in future reporting of community conditions. We expect that such efforts will reinforce our belief that land use, economic, and social issues are interrelated.

*How will we finance the future?*

The present system of publically financed physical infrastructure has evolved over two centuries. The system has given us stability over time, but has proved not to be flexible enough to adapt to the rapidly changing late Twentieth Century. We now face crises in funding all of the major systems that are necessary to our success in the next century. School finance is the Multnomah County crisis of 1996. Law enforcement absorbs an increasing share of local government budgets; corrections finance looms as the next great challenge. Transportation finance lurks constantly on the horizon until a major bridge collapse or gridlock draws public attention.

The education debate has recently focused primarily on the K-12 system. The higher education system is challenged by three other important trends: First, the rapid shift from jobs that require a high school diploma

or professional/technical education to jobs that require at least a bachelor's degree. Second, the need for continued access to adult education in order to increase the competitiveness of our current workforce and help our employees and employers adapt to the changing nature of our local economy. Third, the deficit in advanced research capabilities by our university system, especially in areas where our economy is fast growing such as high technology and finance.

The social service finance system is now over sixty years old, dating to the inception of Social Security in the 1930's. Programs of the 1960's Great Society have now matured into a labyrinth of service providers, public and private, financed by every level of government through a complex bureaucracy which is uncoordinated and duplicative.

Delivery of necessary public services such as water and waste disposal to all citizens, occurs through diverse providers in Multnomah County. Special districts deliver emergency, water, sewerage, and fire services. General purpose governments deliver all or some of these. Land use regulations related to environmental protection and aesthetics are supported by unclear public and private costs. These systems are a product of historical expedience and accident, certainly not of a consciously designed

system that maximizes service and minimizes costs.

Will we do a better job of financing these systems in the 21st Century? If so, we had better start the discussion now.

## How will we train and retrain the workforce?

As discussed in *Growth Management*, above, the Portland Multnomah Progress Board intends to address anticipated changes in the workplace, and its implications for the training of the workforce, during the coming year. These issues are central to any discussion of the economy.

# The Status of Our Children

🖎 There are 24,679 children living in poverty ... about 12% of our children ... and this is poverty defined very conservatively. *(Benchmark #6)*

🖎 Almost 30% of babies are born to mothers 17 and younger. *(Benchmark #26)*

🖎 Only 39% of almost 3800 day care providers meet basic standards. Over 13,000 children lacked adequate child care arrangements in 1994. *(Benchmark #32)*

🖎 The age of first use of alcohol and tobacco is declining. *(Benchmark #34)*

🖎 Almost ten percent of our children do not graduate from high school on time. *(Benchmark #38)*

🖎 All minority groups are over-represented in these numbers.

*Some of our children are being left behind.*

Those who care about the condition and future of our children have cause to be concerned. The benchmarks show that our most vulnerable people are at an increasing risk of poverty. Citizens are generally feeling better about their communities; the region has agreed to manage growth cooperatively; the economy is expanding and creating job opportunities. Why are we leaving so many of our children behind?

The system that addresses the needs of children has been developed disjointedly over the past century. Welfare is funded by the federal government and administered by the state. Additional funding for special purposes such as mental health treatment and services to the disabled are also funded by federal dollars and administered by the state, county and local providers. In our community Multnomah County administers the public health care system and programs for children and families funded by county, state and federal dollars, and Portland and Gresham provide services to children and families mostly through community development funds from the federal government. Federal, state, and local funds are brought together to fund education, workforce train-

ing, and libraries. Funds from all levels of government also support a public safety system which seeks to ensure safe neighborhoods and minimize the worst impacts of poverty. Private charities provide a small portion of the overall system.

This system is complex and expensive, so complex that it is difficult to measure its results or its costs. When citizens demand accountability for their tax dollars, they are demanding that this system be understandable, that its goals be clearly defined, that results are measurable, and that costs be rational. The Portland Multnomah Progress Board is working with several partners to better define and measure the system that serves our children.

Our primary partner is the Multnomah Commission on Children and Families. Innovative state legislation in 1991 created a state commission on children and families and commissions in every county to plan for the long term delivery of services to children and families. It was the first such program to be charged with system-wide planning and the first to use benchmarks as the basis for its vision.

Preliminary analysis of the system that serves children and families indicates that most resources are spent on remediating the

ill effects of poverty, rather than on the prevention of poverty itself. Clearly the system must change its focus in order to prevent the social and economic problems that result from a poor, dependent population.

We have a theory about the status of our kids. Recent Progress Board discussion of the condition of children and families has led to a thesis that the Board will continue to explore in the coming months: *The increase of young children in poverty might be caused by the unemployment and underemployment of young parents in their twenties who are unable to earn a family wage.* This thesis puts forward the following facts:

● In the past decade the increase in poverty among adults has been largely in the 20 to 34 year old age group.

● Young children of this group are "at risk" for a variety of conditions: inadequate prenatal care, poor early childhood health, lack of readiness to learn when entering kindergarten, and subsequent poor academic and social performance.

Thus, the cycle of poverty and dependence is perpetuated and exacerbated.

What are the causes of the unemployment and underemployment of this population? Poor quality basic education? Inadequate years of education? Inadequate job training? Poor attitudes toward work? Anti-social behavior? What can be done to improve the condition of this population while helping their young offspring to combat the effects of their present poverty? The Portland Multnomah Progress Board intends to further study this thesis and find answers to these questions.

Children First for Oregon, an advocacy and research group for children, recently released its 1995 Report Card on the condition of children in Oregon. (Children First for Oregon, December 14, 1995) Table 2, a report card on the status of kids, shows Oregon to be a mediocre guardian.

**Table 2
Children First for Oregon's
1995 Report Card**

| Indicator | Grade |
|---|---|
| **Safety** | C |
| A stable crime rate and better reporting of child abuse make this problem only slightly better. | |
| **Early Childhood** | B |
| Improvements in infant mortality, immunization, and child care should be celebrated! | |
| **Teen Years** | D |
| Needs immediate attention! All indicators are down: teen pregnancy, juvenile arrests, substance abuse, suicide. | |
| **Education** | C |
| We are making no improvements in early childhood education and are not doing well enough in improving school and job training performance. | |
| **Investing in families** | C |
| Some improvements in child support collection, health insurance, and housing affordability, but too many children remain in poverty. | |

Source: Children First for Oregon

# Benchmarks: State of the Art

## Accountability

Benchmarking is part of a larger movement - generally described as performance measurement - within government that seeks to make government programs more accountable to citizens. As resources for government services become more scarce, and as citizens demand more value for their tax dollar, we must hold ourselves to higher standards of efficiency and performance. Benchmarks seek to simplify this accountability in a way that is understandable to managers and citizens alike.

The benchmarking concept is borrowed from private business, particularly manufacturers, who define an industry standard and measure their firm's performance against it. Some governments in the nation have also begun to establish such benchmarks to evaluate their performance. However, in Oregon, we use the term "benchmarks" to refer to a measurable, community-wide condition that can be tracked over time, such as the crime rate, livability measures, and health status of people. Our benchmarks are strategic performance indicators that will tell us if we are making adequate progress toward achieving our goals.

## Setting Targets

Setting "targets" for benchmarks has proven to be a difficult task. Most of us are uncomfortable with the high degree of subjectivity inherent in this process, and with the uneasiness caused by holding organizations and the community accountable to unrealistic, or too easily achieved, targets. We know that we lack knowledge about the many variables that contribute to the performance of a selected benchmark, and we understand the reluctance of managers who fear that future funding may depend on benchmark performance. We are also becoming aware that marginal gains in certain benchmarks may have unreasonable costs, and it is clear that we need to better assess the marginal costs and benefits of our targets.

The Portland Multnomah Progress Board intends to establish targets for every benchmark, however, we remain in the process of collecting and analyzing data that will allow us to set targets according to the following methods:

• *Public Will* - Ask the public! Information can be derived from surveys, electronic voting, advisory groups, etc.

• *Trend Projection* - Trend analysis that shows a positive improvement in a benchmark may be forecast as continuing into the future.

• *Comparability* - A benchmark may be compared to conditions in comparable jurisdictions, programs, or populations.

• *Widely Accepted Standards* - Standards have been developed by professional groups and others for many indicators.

• *Targets Set by Others* - Oregon Benchmarks provide targets for most benchmarks, and can be used locally in some cases.

• *Continuous Improvement* - As our programs focus on moving community indicators in positive directions, sometimes the best we can hope for is slow, but continuous improvement.

## A Suggested Hierarchy

● *Vision:* The overall character that a community wants to achieve by a certain time in the future.

● *Goals:* The conditions which must be in place to ensure the community's future vision.

● *Strategic Benchmarks:* Indicators of community conditions that can be tracked over time in order to measure progress toward the achievement of goals.

● *Comparative Indicators:* Conditions in communities comparable in population size, density, cost of living, and other factors. Such comparisons cannot be rigorous because of differing combinations of factors which also give communities their special ambience.

**Benchmark Hierarchy**

VISION

GOALS

STRATEGIC BENCHMARKS

COMPARATIVE INDICATORS

PERFORMANCE/ OUTCOME MEASURES
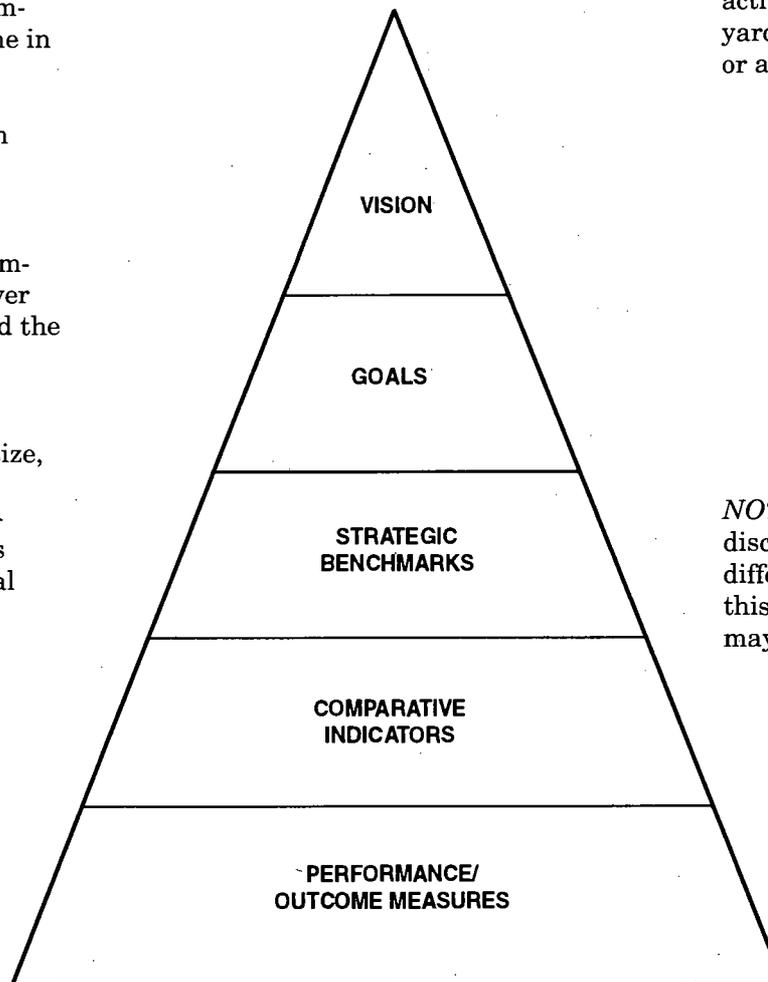
● *Performance Measures:* Indicators used to evaluate the performance of a program or activity. Performance measures are the yardsticks by which the results of a program or activity can be assessed. These include:

●*Workload Measures:* Indicate the amount of work actually performed by a program.

●*Efficiency Measures:* Establish a relationship between resources used and work performed.

●*Effectiveness Measures:* Determine the extent to which a program achieves a result.

*NOTE*: The terms used in this emerging discipline are sometimes confusing, and often differ among jurisdictions. Definitions in this report are of concepts; organizations may use different terms for similar ideas.

## Some Thoughts on Indices

Some proponents of performance measurement advocate the creation of indices of community conditions - a formula that combines various benchmarks to create an overall rating for how a community is achieving its goals.  The media has been receptive to this grading system, and publishes them without questioning the formula on which the grade is based.  Several periodicals publish annual ratings of "best cities for bicycles", "most small-business friendly cities", and "best places to raise children".  Portland often ranks high on such indices when issues of affordability and livability are prominent.

The Portland Multnomah Progress Board studies such cumulative indicators with interest.  We believe they hold great promise for drawing the public's interest to benchmarks.  However, data collection for benchmarks is in its infancy, and we are still struggling to report benchmarks in the most credible manner possible.  We do not feel prepared to embark on a more complicated formula-building venture, until we have established public confidence in the credibility of our data and analyses.

## Benchmarks Point to Our Need to Roadmap Our Systems

The greatest challenge of benchmarking is to identify indicators which most clearly point to overall conditions in the community.  We continue to add to, subtract from, and refine our body of benchmarks, so they draw a complete picture of the status of our community.  Our inclination is to reduce the total number of benchmarks, while analyzing each one thoroughly.  It is an iterative process of matching data to words, constantly refining both while also maintaining constancy for analysis over time.  It is very hard work!

We see an urgency to go beyond the benchmarks to understand the *system* that impacts the indicators.  For example, in 1995 the Progress Board convened a group of officials from law enforcement, the courts, prosecutors, and corrections in Multnomah County to reevaluate the public safety benchmarks.

Our objective was to develop a data system that could track individuals through the system in order for us to better evaluate the effectiveness of policies and programs.  Both "before and after" information is necessary to assess the results of any system.  Not only did we find the information system lacking,

but a comprehensive understanding of the system itself was lacking as well.

The Portland Multnomah Progress Board will "map" such systems in the future in an effort to better understand the appropriate benchmarks and to identify opportunities for collaborations to achieve the benchmarks.

# Benchmarks...

## PROGRESS MEASURED ONE STEP AT A TIME

The following benchmarks have been designated by the Portland Multnomah Progress Board as "urgent". When these benchmarks signal negative trends, we should focus public and private efforts on solving the problems they identify.

**#3**    Average annual payroll per non-farm worker is increasing.

**#6**    Percentage of people with incomes above 100% of the federal poverty level is decreasing.

**#37**    Percentage of students who achieve at established skill levels is moderately increasing.

**#44**    Percentage of citizens who have access to basic healthcare is remaining stable.

**#61**    Percentage of people who rate their neighborhood livability high is increasing.

**#76**    Percentage of citizens who feel local government is doing a good job at providing services is increasing.

**#82**    Per capita dollars spent for city and county government are decreasing.

**#84**    Percentage of people who feel safe walking alone in their neighborhoods during the day and night is increasing.

**#86**    Number of reported incidents of domestic violence cannot be evaluated at this time. It is clear that better data is needed to understand this issue.

**#87**    Number of reported crimes against people per 1,000 population is declining slightly.

## *Benchmarks to Watch Carefully*

In compiling the 1996 Annual Report, we found the following benchmarks to be indicators that signal alarm, usually because they have implications for larger public issues.

**#26**    We are losing our battle to reduce teen pregnancy.

**#32**    We do not have enough day care slots for our children.

**#34**    Our children are using tobacco, drugs, and alcohol at an earlier age.

**#12/14**    Businesses are not investing enough in training.

**#13**    Too many 25-year-olds lack basic education and training.

**#27**    Too many low birthweight babies are being born to African-American mothers.

**#29**    Too many of our youngest children are still not adequately immunized against diseases.

**#47/53**    Too many of our mentally and physically disabled residents are not self-sufficient.

**#63**    Too many people are driving alone in their cars to work.

**#90**    Too many people are injured or die from firearms.

**#93**    Too many adults use drugs and abuse alcohol.

# Benchmarks...
## PROGRESS MEASURED ONE STEP AT A TIME

# Introduction to the Economy Benchmarks

*The regional economy is expanding.*

The Portland regional economy is one of the fastest growing in the nation. We are making a comfortable transition from a resource based economy to a high technology economy. As the state's urban center, our service sector is outpacing our manufacturing sector, however, our manufacturing activity is of an increasingly high quality. Exports from our regional port are growing rapidly, especially in the high value products which are air freighted.

*Multnomah County is sharing in regional growth.*

Economic indicators within Multnomah County are also positive. Per capita income is up, total payroll is up, and unemployment is down. County incomes exceed the state average, although they have not returned to the higher-than-national rate prior to the 1980 recession.

*Poverty is growing in the midst of economic prosperity.*

The rate of poverty in Multnomah County is growing. Vigorous economic expansion is not benefiting those in our community who need its benefits the most.

There remain neighborhoods where we are certain there are a disproportionate number of people in poverty. Our uncertainty is based on our lack of current data about these areas. We must rely on 1990 Census information for some of our most important poverty indicators, and we are uncomfortable that we cannot track the changes that we believe have occurred. The Portland Multnomah Progress Board is working on several initiatives to explore alternative ways to collect data on small areas.

*We are not meeting the training needs of our work force.*

Employers tell us that they value training that occurs on the job site above all other types of training. Although we lack trend data on this issue, it appears that employers are not investing enough in on-site training.

In the Education Benchmarks section we discuss the value of education to long term income for business and individuals.

*Our data on business activity is limited.*

We are also sharpening our data on businesses. We are working with the Association for Portland Progress to refine our analysis of economic activity in downtown Portland. And we are experimenting with surveys of small businesses in targeted areas done by neighborhood residents.

*We should study further the land use implications of economic growth.*

As we augment our benchmarks data with projections from the 2040 Plan, we will explore the land use implications of present and anticipated economic growth.

# Per Capita Income

## Benchmark #1 Increase per capita income.

### Why It's Important

Per capita income is the single most important indicator of community well being. A household with adequate income can afford to purchase the goods and services that provide comfort and prosperity: housing, food, healthcare, education, and leisure.

### Per Capita Income

As Figure 1 indicates, since 1990, per capita income in Multnomah County has risen slightly faster, and remains slightly higher, than in Oregon and the U.S. Per capita income for the City of Portland and Multnomah County are virtually the same.

However, taking a longer historical view, Figure 2 illustrates that residents of Oregon and Multnomah County have yet to recover the share of per capita income relative to the national average that they enjoyed in 1970. Even with the prosperity of the early 1990's, the impact of the recession a decade earlier continues to put us at a disadvantage nationally. However, the Oregon Employment Department suggests that, "Judging by the continuing employment growth and low



**Figure 1: Per Capita Income Multnomah County, Oregon, and U.S. 1989-1993**
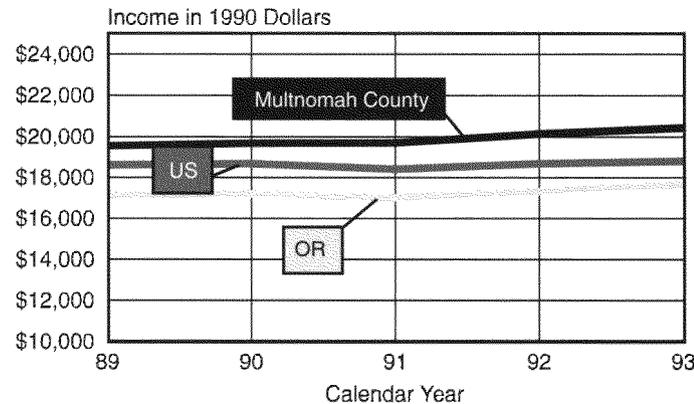
SOURCE: U.S. Department of Commerce, Bureau of Economic Analysis.

unemployment in Oregon, it is reasonable to expect that the gap between Oregon and U.S. wages will continue to narrow, albeit slowly." (Oregon Employment Department, November 1995, p. 2) Such recovery should be even greater in Multnomah County.

### How should this benchmark change in the future?

Through efforts to improve the quality of the resident workforce and to attract and grow family wage businesses, we should expect continuous improvement in per capita income. The annual target is 1.5% increase.

**Figure 2: Real Per Capita Income as a Percentage of the U.S.**
**Multnomah County, Oregon**
**1970-1990**

Percentage of U.S.

```
130
120    Multnomah County
110    U.S.
100
 90    Oregon
 80
 70
       70      80      88      90      92      94
                        Year
```
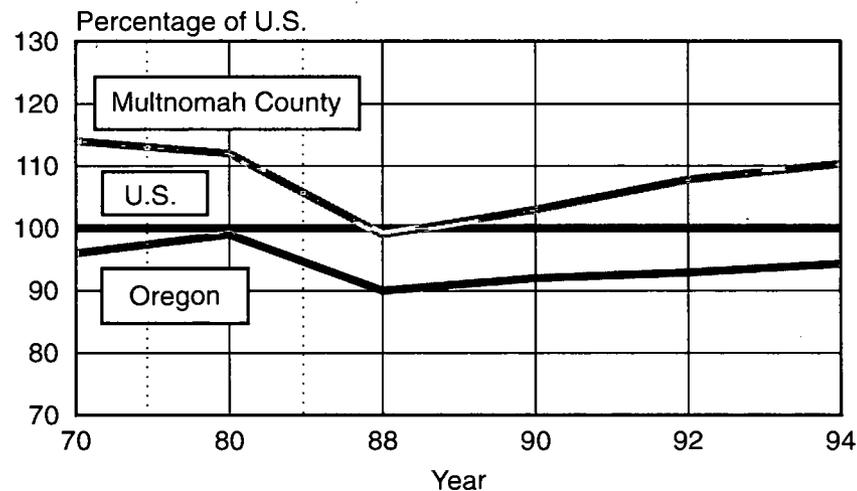
SOURCE: Oregon Department of Economic Development.

**Targeted Neighborhood Project**

The City of Portland has attempted to address the most basic need of each household in a small area of North Portland - full-time employment through the Targeted Neighborhood Project. Going house-to-house, two neighborhood workers visit residents to learn their most fundamental needs for training and employment. Working through the Northeast Workforce Center, this project has been successful in linking residents directly with training and employment.

Almost 200 residents have been placed in positions averaging $7.64 per hour. Over 100 residents have been placed in training.

Those who reenter the workforce are most likely to lose their jobs within the first six months of employment. This is generally due to complications with child care, transportation, and appropriate clothing and equipment. The project continues to mentor clients after job placement to ensure that such barriers can be overcome.

# Average Annual Payroll

## Benchmark #3 Increase average annual payroll.

### Why It's Important

Our priority benchmark is to increase per capita income; the most certain way to accomplish that is to create a beneficial environment for those businesses that pay high wages to their employees. In addition to the obvious benefits of high wage jobs, they also provide added value to the community, because they tend to be augmented by benefits and relative stability that allow a household to maintain a higher standard of living.

### Annual Payroll

● Workers in Multnomah County have shown a steady increase in their average annual wage since 1984. (See Figure 4.) Given that increases in employment have occurred mostly in the service sector where wages are lower, this increase is notable.

● Wage growth has only slightly outpaced inflation. Wage rates have increased 46%, while inflation has increased only 41%.

● The Oregon Employment Department recently prepared a forecast of employment statewide from 1995 to 2005. Figure 3 shows the distribution of wages within three wage categories in 1995, compared to projections for 2005. Changes in the structure of the economy mean fewer jobs in the average wage range, more jobs in the high wage range and the most growth in the low wage range. This trend is likely to apply to Multnomah County, as our economy continues expansion in retail services.

### How Should This Benchmark Change in the Future?

The target for this benchmark is continuous improvement from the present condition.



**Figure 3: Projected Job Growth by Salary Range Oregon 1995-2005**
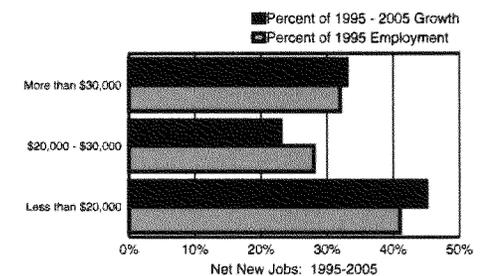
SOURCE: Oregon Employment Department, 1996.

## Figure 4: Average Annual Payroll
## Multnomah County
## 1984-1994
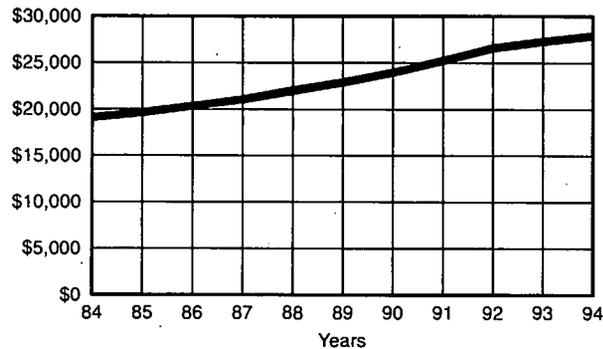


SOURCE: *Oregon Employment Department.*

**Region 2 Workforce Quality Committee**

In Multnomah and Washington Counties, 12 workforce agencies are collaborating to formulate a set of benchmarks and performance measures for use throughout the education and training system. The Oregon Workforce Quality Council is sponsoring the effort as part of the Oregon Option. Initially, eight federal funding programs have agreed to honor the benchmarks and performance measures. This work is in preparation for anticipated federal legislation which will create "block grants" to states for employment and training programs.

The Regional Committee has identified several types of performance measures which have seldom been used before in measuring the success of training programs: customer satisfaction (both trainee and employer), quality of the job in which the trainee is placed (based on wages, benefits, and potential), achievement of several standards used in education reform (SCANS, CIM, and CAM), and movement from public assistance to self-sufficiency.

# People in Poverty

## Benchmark #6 Increase the percentage of people with incomes above the federal poverty level.

### Why It's Important

An adequate income provides a family with the opportunity to be self-sufficient, providing its members with housing, food, clothing, medical care, and other necessary things. Adequate income makes a family part of the American marketplace, leaving dependency on costly public services behind, and contributing to the economic prosperity of the entire community.

### The Federal Government Defines the Poverty Level

The federal government defines poverty according to standards for costs of food and shelter, which many believe are too conservative. These defined poverty levels are used throughout the nation as the standard for measuring poverty. In March, 1996, revised poverty levels were published as seen in Table 3.

**Table 3**
**Federal Definitions of Poverty**
**1996**

| Size of Family | Monthly Income (100% Poverty) | Monthly Income (125% Poverty) |
|---|---|---|
| 1 person | $645 | $806 |
| 2 persons | $863 | $1,079 |
| 3 persons | $1,082 | $1,352 |
| 4 persons | $1,300 | $1,652 |

SOURCE: *Federal Register.*

### Poverty in Multnomah County

Information on poverty is difficult to analyze for several reasons. First, the most reliable data is from the decennial US Census, with some estimates made during intervening periods, so the farther we move into the decade, the older and less reliable the data become. Second, even the US Census tends to undercount those living in poverty because of their mobility and the instability of their living conditions. They are simply hard to count.

● The percentage of people living below 100% of the poverty level in Multnomah County increased from 1980 to 1994 from 11.1% to 13.1%. Those living below 125% of the poverty level increased from 1980 to 1990, but declined from 1990 to 1994. (See Table 4)

● There were 24,679 children living in poverty in Multnomah County in 1994. This is an increase of 12% since 1990, equivalent to the overall estimated population growth.

The Multnomah County Community Action Office (CAPO) published its Draft Report on Poverty in April 1996, providing in-depth information on this important issue. Figure 5 shows the geographic distribution of poor people in the County in 1990.

**Table 4**
**Percentage of Population Living in Poverty**
**Multnomah County**
**1980-1994**

| Federal Poverty Level | 1980 | 1990 | 1994 |
|---|---|---|---|
| 100% | 11.1% | 12.8% | 13.1% |
| 125% | 15.7% | 17.6% | 16.9% |

SOURCE: Oregon Employment Department.

## Figure 5: Poverty as a Percentage of the Total Population in Multnomah County By CAPO Service Area 1990
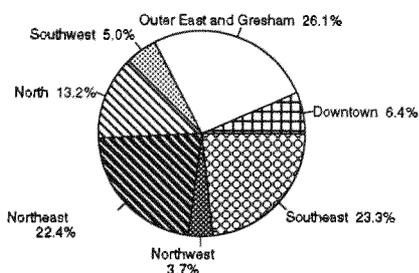


SOURCE: *Multnomah County Community Action Program Office.*

● The largest number of people in poverty (26%) live in East Multnomah County and Gresham. Southeast Portland has 23% of the County's poor, and Northeast Portland has 22%.

● Poverty in Multnomah County is almost entirely concentrated on the east side of the Willamette River. Only 15% of the County's poor live west of the river.

The CAPO report presents several other important facts about poverty in Multnomah County:

● Women are more likely than men to be in poverty.

● Persons in female-headed families are the most likely demographic group to be chronically poor. Sixty percent of all families in poverty were headed by single females. In North Portland 73% of all families were.

● All racial and ethnic minority populations are disproportionately poor compared to whites.

● Most of the black population living in poverty is concentrated in North and Northeast Portland. Other racial and ethnic populations in poverty are dispersed throughout the east part of the County.

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board has targeted continuous improvement for this benchmark.

# Jobs in Our Community

## Benchmark #7: Increase total employment.

### Why It's Important

A healthy economy is constantly creating new jobs in existing firms and in newly established businesses. Especially where structural changes in industry are abolishing jobs, as in Oregon, it is important for the economy to be diversifying to an extent that will create additional jobs in expanding industries. The decline of timber industry jobs in Oregon has been more than compensated for by an increase in jobs in the high technology and other industries.

### Employment in Our Community

There were approximately 1,400,000 non-farm jobs in Oregon in February of 1996. Over 700,000 of those are in the Portland area; almost 400,000 of them are in Multnomah County.

● Table 5 shows the distribution of these jobs between manufacturing and non-manufacturing industries. Recent changes in local industry employment are consistent with state and national trends. Manufacturing jobs are declining, while service industry employment is expanding. However, there

are several notable trends in Multnomah County.

● Since 1990, total employment has increased by almost 22,000 in Multnomah County. The manufacturing sectors have lost over 1,000 jobs. The increase has come largely in non-manufacturing jobs and primarily in those with traditionally low wages such as services (+10,000 jobs) and retail trade (+3,000). Over 4,000 jobs have been added to governments, and over 4,000 have been added in transportation, finance, insurance, and real estate. (See Table 6)

● Because Portland is the urban center of the regional and state economy, service positions are expanding at an even greater rate than

in the rest of the state and nation. Table 5 shows the 5.7 percent increase in jobs created in Multnomah County between 1990 and 1995, and its distribution between manufacturing and non-manufacturing sectors.

The decline of manufacturing employment in the timber industry is being offset by an increase in employment in high technology and printing and publishing, both high wage manufacturing sectors. With the imminent expansion and location of two major semi-conductor firms in Gresham, this trend will continue in 1996 and 1997.

### Table 5
### Employment Growth
### Multnomah County
### 1990 - 1995

| Sector | 1990 Employment | 1995 Employment | % Change |
|---|---|---|---|
| All Manufacturing | 50,200 | 49,000 | -2.6 |
| Non-Manfacturing | 323,200 | 345,550 | 6.9 |
| Total | 373,400 | 394,550 | 5.7 |

SOURCE: Oregon Employment Department.

| Sector | 1990 Employment | 1995 Employment | % Change | Average Annual Pay |
|---|---|---|---|---|
| **All Manufacturing** | **50,200** | **49,000** | **-2.6** | **$33,814** |
| Food Products | 5,150 | 5,150 | 0 | $29,195 |
| Textiles | 1,400 | 1,450 | -2.6 | $24,991 |
| Apparel and Leather | 1,600 | 1,400 | -12.5 | $17,650 |
| Lumber/Wood | 2,250 | 1,800 | -20 | $38,413 |
| Furniture and Fixtures | 1,150 | 1,250 | 8.7 | $28,408 |
| Paper Products | 1,750 | 1,750 | 0 | $42,272 |
| Printing/Pub | 5,500 | 6,500 | 18.2 | $33,951 |
| Chemicals | 1,450 | 1,500 | 3.4 | $37,190 |
| Stone, Clay, Glass | 1,450 | 1,300 | -10.3 | $33,071 |
| Metals | 10,300 | 9,100 | -11.7 | $34,223 |
| Machinery | 4,600 | 4,150 | -9.8 | $37,703 |
| Electrical Equipment | 2,150 | 2,100 | -2.3 | $33,260 |
| Trans. Equipment | 8,450 | 8,550 | 1.2 | $38,827 |
| Other | 3,000 | 3,000 | 0 | $26,069 |
| **Non-Manfacturing** | **323,200** | **345,550** | **6.9** | **$27,092** |
| Construction | 15,750 | 15,600 | -0.95 | $34,068 |
| Trans/Comm/UT | 28,000 | 30,700 | 9.6 | $34,280 |
| Trade | 90,300 | 93,650 | 3.7 | $21,765 |
| FIRE | 29,850 | 32,000 | 7.2 | $33,796 |
| Services | 105,700 | 115,650 | 9.4 | $24,130 |
| Government | 53,650 | 57,950 | 8 | $32,215 |

The creation of high wage manufacturing jobs in the 1990's requires large parcels of land, close to transportation and other important resources. The availability of such sites in Multnomah County is in doubt and will be studied by the Portland Multnomah Progress Board in the coming months.

*How Should This Benchmark Change in the Future?*

The target for this benchmark is continuous improvement.

**Table 6**
**Change in Employment and**
**Average Annual Pay by Industry**
**Multnomah County**
**1990-1995**

SOURCE: Oregon Employment Department, July 1995.

# Unemployment Rate

### Benchmark #8 Decrease the unemployment rate.

*Why It's Important*

The unemployment rate is probably the most popularly understood indicator of the economic health of a community. A low unemployment rate usually means that those who seek jobs can find them, and that jobs are being created to accommodate natural growth in the population. A high unemployment rate usually indicates that businesses are neither being started nor expanding, creating new jobs, and that even more often, employers are decreasing their workforces because of weak market conditions for their goods and/or services. Until the 1970's, "full employment" was judged to be 3.0 percent. However, even in a robust economy, the rate has not fallen that low since then. The percentage of the workforce that wants to be employed, but cannot find a job, is not only an understandable statistic, but a situation with which most of us can empathize.

**Table 7**
**Comparative Unemployment Rates**
**Portland Metro, Oregon, U.S.**
**February 1996**

| Area | Rate |
|------|------|
| Multnomah County | 4.4 |
| Clackamas County | 3.6 |
| Washington County | 3.6 |
| Portland-Vancouver PMSA | 4.2 |
| Oregon | 4.9 |
| U.S. | 5.5 |

SOURCE: Oregon Employment Department.

*The Unemployment Rate*

The unemployment rate in Multnomah County has mirrored recent economic conditions. Since the early 1990's the rate has fallen steadily, and in February 1996 it stood at an excellent 4.4 percent. As Table 7 shows, that is .8 percent higher than neighboring Clackamas and Washington Counties, however, it remains below the Oregon average of 4.9 and the national average of 5.5.

In Multnomah County in February 1996 there were 362,000 people in the labor force, those holding or seeking full-time or part-time employment. Of those 16,100 were unemployed. In addition there are people with jobs who are seeking to upgrade their jobs by working for higher wages and benefits, better working conditions, or longer hours. During 1995, 72,000 of those persons registered their skills with the Oregon Employment Department in Portland. The Portland Multnomah Progress Board ana-

## Table 8
## Present and Projected Occupations
## Multnomah and Washington Counties (Region 2)
## Compared to
## 1995 Multnomah County Job Seekers

| Occupation Group | Region 2 1995 Jobs | % of Total | Region 2 2005 Jobs | % of Total | 1995 Job Seekers | % Female | % Male | % of Total |
|---|---|---|---|---|---|---|---|---|
| Managers/Officials | 37,656 | 6.50 | 46,319 | 6.44 | 4,006 | 43.29 | 56.71 | 5.53 |
| Professional/Technical | 126,507 | 21.81 | 164,954 | 22.93 | 9,161 | 49.99 | 50.01 | 12.64 |
| Sales | 70,683 | 12.18 | 87,297 | 12.14 | 6,933 | 52.60 | 47.40 | 9.57 |
| Clerical | 108,342 | 18.68 | 124,121 | 17.26 | 12,290 | 71.76 | 28.24 | 16.96 |
| Service | 75,238 | 12.97 | 96,171 | 13.37 | 11,403 | 48.97 | 51.03 | 15.74 |
| Agriculture, Forest, Fishing | 7,861 | 1.36 | 9,665 | 1.34 | 1,746 | 14.38 | 85.62 | 2.41 |
| Mechanical, Production, Construction, Operations | 141,331 | 24.35 | 168,200 | 23.38 | 26,921 | 17.24 | 82.76 | 37.15 |
| Other Miscellaneous | 12,792 | 2.15 | 22,606 | 3.14 | N/A | N/A | N/A | N/A |
| Total | 580,140 | 100.00 | 719,333 | 100.00 | 72,460 | 40.37 | 59.63 | 100.00 |

SOURCE: Oregon Employment Department, Portland Multnomah Progress Board.

lyzed these applicants, as shown in Table 8 and Figure 6, and found some interesting characteristics of this group:

● The skills of the group reflected the overall occupational make-up of the workplace, with one important exception: The proportion of those with mechanical and trade skills far exceeded the proportion of those jobs in the workplace. This group was composed largely of white males. This occupational group tends to work on projects of limited duration, with frequent unemployment periods. It is also a group which the Employment Department has traditionally served well through its job referral system, so those seeking employment in the trades may be more likely to seek Employment Department services than those in other occupations. Distribution of job seekers among these occupations is likely to be similar in neighboring counties.

● Ethnic distribution of job seekers is consistent except for the large proportion of Hispanic men seeking agricultural related jobs. Minorities and women tend to be under-represented in the professional and managerial occupations. Women are over-represented in the sales and clerical occupations, and under-represented in agricultural and mechanical occupations.



Figure 6: Comparison of Job Seekers by Race
Multnomah County
1995

Racial/Ethnic Groups
☐ White
■ African-America
■ Hispanic
☐ Native American
▨ Asian
■ Other

SOURCE: Oregon Employment Department, Portland Multnomah Progress Board.
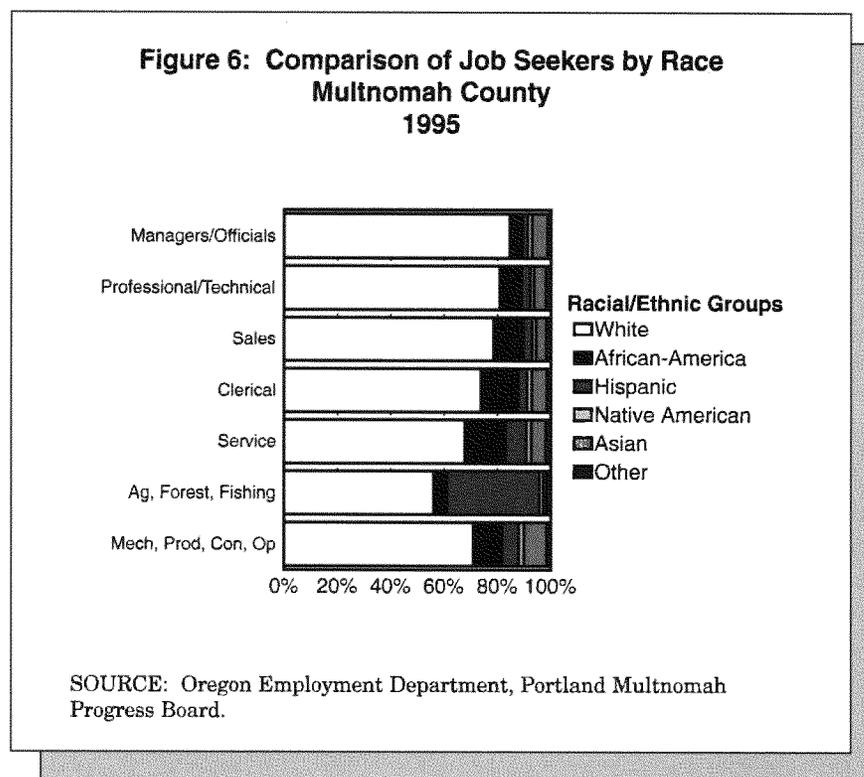
**Table 9**
**Comparative Labor Force Participation Rates for Portland Metro, Oregon, U.S. 1994**

| Area | Overall Rate | Rate by Women |
|------|--------------|---------------|
| Portland- Vancouver PMSA | 72.6 | 66.0 |
| Oregon | 68.9 | 62.2 |
| U.S. | 66.6 | 58.8 |

SOURCE:  Bureau of Labor Statistics, *Geographic Profile of Employment and Unemployment, 1996.*

● In the Portland area, women participate in the labor force at higher levels than in other areas in Oregon and the U.S. (See Table 9) It is difficult to determine the reason for this, because the two most often cited reasons are "good news and bad news" factors.  Married women enter the labor force in greater numbers when household incomes from the primary, usually male, wage earner are not adequate to support the household...implying low per capita wages.  Conversely, women also enter the workforce when they are given equal opportunities for jobs available in their occupations...implying that Portland is an open labor market for women.

## How Should This Benchmark Change in the Future?

The target for this benchmark is the metro average of 4.2%.

# Export Activity of Business

**Benchmark #9 Increase the percentage of income from goods and services sold outside of the United States.**

**Benchmark #10 Increase the percentage of income from goods and services sold outside of the Portland Metropolitan region.**

*Why It's Important*

As trade barriers fall and business seeks customers throughout the world, the volume and value of export activity is important to track.

*Data Issues*

Foreign export data is only available for the Columbia Snake Customs District which includes ports in Southwest Washington and Idaho as well as Portland. However, because of the large presence of the Port of Portland in the district, the numbers are indicative of goods that flow through Portland. We will continue to attempt to measure these benchmarks, as we refine our abilities.

**Figure 7: Value of Exports from the Columbia Snake Customs District 1991-1995 (in billions of dollars)**

Billions of Dollars

| Year | Value |
|------|-------|
| 91 | $5.1 |
| 92 | $5.6 |
| 93 | $6.1 |
| 94 | $7.2 |
| 95 | $9.4 |
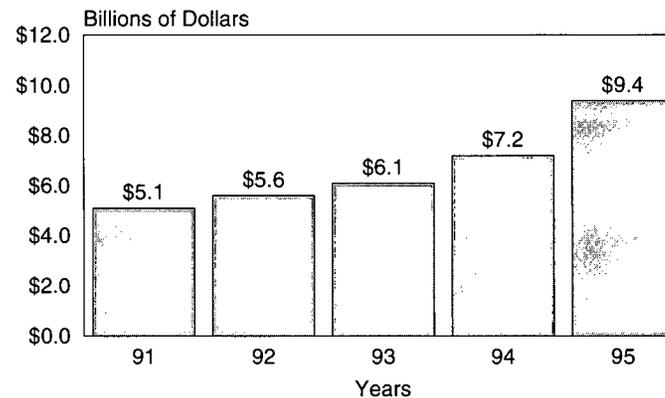
SOURCE: *Gary Finseth, Inc.*

## Regional Exports

During the last four years exports through the Columbia Snake Customs District have grown at twice the national average. Export items include agricultural products from grain to wine from eastern Washington and Oregon and the Willamette Valley, high technology products from the Portland area, and trucks and rail cars manufactured in Portland. Figure 7 describes this air, maritime, and some truck activity:

● Portland's position on the Pacific Rim accounts for its growing trade with Canadian and Asian markets, however, Western European trade has expanded as well. Table 10 shows our leading trading partners.

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

**Table 10**
**Leading Export Destinations**
**Columbia Snake Customs District**
**1995 (in billions of dollars)**

| Nation | Value |
|---|---|
| Japan | 2.1 |
| Canada | 1.1 |
| Korea | .839 |
| Singapore | .509 |
| Germany | .454 |
| Taiwan | .417 |
| United Kingdom | 3.77 |

SOURCE: *Gary Finseth, Inc.*

# Small Business Failures

**Benchmark #11 Decrease the number of small businesses that fail.**

## Why It's Important

Small businesses provide more jobs in the community than do large businesses, however, they are much less stable. In a growing economy, small businesses are being constantly created, many of which do not succeed. Activity among small business is an important indicator of the overall health of the economy.

## Small Business Information

It is difficult to collect information about small businesses. Many are created and fail, without leaving "data tracks" in tax, employment, or other public records. Our analysis is therefore incomplete, and the Portland Multnomah Progress Board will improve this data in the future.

We present two primary sources of data for this benchmark: Oregon Employment Department files from firms that report on their employees' wages and hours and the Portland Bureau of Licenses which collects business license fees for the city and, since 1995, for Multnomah County.

### Table 11
### Industrial Classification of Firms Doing Business in Portland and Multnomah County (1995 only) 1989-1995

| Industry | 1989 | 1991 | 1993 | 1995 |
|---|---|---|---|---|
| Manufacturing | 1,719 | 1,911 | 1,822 | 1,788 |
| Finance | 288 | 280 | 337 | 408 |
| Insurance | 88 | 77 | 81 | 69 |
| Real Estate | 3,526 | 3,523 | 3,519 | 4,092 |
| Building Contractor | 3,126 | 3,454 | 3,632 | 4,112 |
| Transportation | 1,191 | 1,221 | 1,071 | 1,034 |
| Professional Services | 4,985 | 3,316 | 3,300 | 3,423 |
| Other Services | 7,987 | 11,640 | 10,235 | 11,988 |
| Retail | 6,097 | 6,537 | 5,653 | 5,849 |
| Wholesale | 2,442 | 2,280 | 2,149 | 2,143 |
| Agriculture | 521 | 611 | 562 | 581 |
| Other | 461 | 435 | 491 | 1,513 |
| Total | 32,431 | 35,285 | 32,852 | 37,000 |

SOURCE: *City of Portland Business License Database.*

● The Employment Department counted over 22,000 business locations in Multnomah County in 1994. Assuming that approximately 20% of businesses are not registered with the Department, because they are individuals working out of their homes, we estimate that there would have been 28,000 firms in the County in 1994 doing business in 62,000 locations. That is consistent with the Portland Bureau of Licenses count of 28,368. Approximately 3,500 of these firms are located outside of the City of Portland. In addition, almost 9,500 firms (most within the Portland region) are located outside of Multnomah County, but do business here.

● Table 11 lists firms doing business in the City of Portland by industrial classification from 1989 to 1995. Changes in total number of firms reflect two events: the slight recession in 1991 which resulted in decreased business activity from 1991 to 1993 and the collaboration between Multnomah County and the City of Portland in 1995 which centralized business license collection in the City. The City-County effort resulted in both "finding" more businesses that had previously paid license fees to only one entity.

● Table 11 also illustrates a healthy industry mix, with declines in manufacturing and distribution activity and increases in services. It is not always accurate to correlate business income with firm size, however, some general conclusions might be made from Table 12 which breaks down firms by net profit (the basis for business license fees). Only 1.6 percent (590) of firms declared net profits over $10,000 for 1995. This suggests a high concentration of small business in our community.

The Bureau of Licenses estimates that approximately 3,400 businesses (some at multiple locations) are located in Gresham and East Multnomah County.

*How Should This Benchmark Change in the Future?*

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

**Table 12**
**Net Revenue Reported by Businesses**
**Doing Business in City of Portland and Multnomah County (1995 only)**
**1988-1995**

| | Number of Businesses | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Net Revenue | 1988 | 1989 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 |
| Neg. - 10K | 32,008 | NA | 33,585 | 33,517 | 32,934 | 32,464 | 27,934 | 36,410 |
| 10K - +100K | 169 | NA | 288 | 313 | 316 | 388 | 454 | 590 |
| Total | 32,177 | NA | 33,873 | 33,830 | 33,250 | 32,852 | 28,388 | 37,000 |
| +/- per year | NA | NA | 1,691 | 1,157 | (1,780) | (398) | (4,484) | 8,632 |

SOURCE: *City of Portland Business License Database.*

# On-the-Job Training

## Benchmark #12 Monitor the total employee time actually used for on-the-job training.

### Why It's Important

Employees can be trained through a variety of ways:

* By taking courses offered at schools or other places.
* By taking courses offered internally through their company.
* By receiving on-the-job training.

Employers frequently use on-the-job training to orient new employees to a company. In addition, it is a way to show employees how to master certain skills. This benchmark evaluates employers' commitment to using on-the-job training for improving employee skills.

### On-the-Job Training

In 1992 and 1994, the Oregon Economic Development Department commissioned a written survey of employers throughout Oregon called the *Oregon Works Survey*. Although data are not available for Multnomah County, statistical tests revealed that there is little difference in how

Multnomah County employers answered the questions compared to other employers in Oregon. In addition, data for on-the-job training is not comparable between the 1992 and 1994 surveys. The following highlights from the *1994 Oregon Works II Survey* discuss on-the-job training.:

● The *1994 Oregon Works II Survey* reports that a median of five percent of employee time is spent in on-the-job training. This figure is based on an employer's approximation; rarely is on-the-job training formally measured in exact employee time.

● Figure 8 shows the percentage of employers who agree that on-the-job training is an important part of training. Over 60% of employers "strongly agreed" with this statement. Less than five percent said they "disagreed".

● Figure 9 shows the percentage of employers (39.3%) who include the costs of on-the-job training in their training budget. However, roughly the same percentage (37.9%) disagreed with the statement which asks them whether or not on-the-job training is in their budget.

● According to the survey, supervisors, lead workers, and co-workers are usually expected

**Figure 8: Employers Who Feel On-the-Job Training is Important Part of Training**
Oregon
1994

Strongly Agree 62.3%
Strongly Disagree 1.1%
Somewhat Disagree 3.7%
Neither 11.7%
Somewhat Agree 21.2%
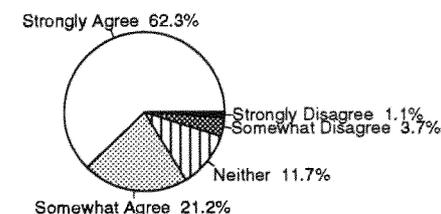
SOURCE: *Oregon Works II Survey: 1994 Survey of Oregon Employers.*

**Figure 9: Employers with Budgets that Include On-the-Job Training**
Oregon
1994

Somewhat Agree 18.1%
Strongly Agree 21.2%
Neither 22.9%
Strongly Disagree 18.3%
Somewhat Disagree 19.6%
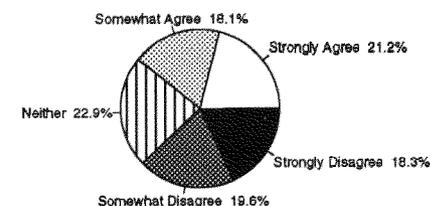
SOURCE: *Oregon Works II Survey: 1994 Survey of Oregon Employers.*

**Figure 10: Employers Who Expect Supervisors to Deliver On-the-Job Training Oregon 1994**

Strongly Agree 45.8%
Strongly Disagree 1.4%
Somewhat Disagree 3.3%
Neither 12.8%
Somewhat Agree 36.6%

SOURCE: *Oregon Works II Survey: 1994 Survey of Oregon Employers.*

**Figure 11: Employers Who Measure Results of On-the-Job Training Oregon 1994**

Somewhat Agree 19.7%
Neither 26.7%
Strongly Agree 11.9%
Strongly Disagree 17.7%
Somewhat Disagree 24.0%

SOURCE: *Oregon Works II Survey: 1994 Survey of Oregon Employers.*

to deliver on-the-job training as seen in Figure 10.

● Less than one-third (31.6%) of employers reported that companies measure the results of on the job training as seen in Figure 11. A greater percentage (41.7%) did not.

## How Should This Benchmark Change in the Future?

The Oregon Progress Board has determined that five percent of employee time should be the target spent in on-the-job training for the year 2000. Since this target has been met, the Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Ongoing Workforce Training

## Benchmark #14 Increase the percentage of employers who provide more than 20 hours of training per employee per year.

### Why It's Important

Employee training is a necessity if workers are to have the skills needed to keep pace with technological advances and the changing economy. Employers also benefit from employee training. By having a trained workforce, employers can minimize costly mistakes and increase productivity. This benchmark measures employers' commitment to training.

### Employee Training

● In 1994, Multnomah County residents were asked if they had ever taken part in a training program provided at the work-site by their employer. Only 46% said they had. (See Figure 12.)

● According to the Oregon Works II Survey, only 38% of Oregon employers provided more than 20 hours of training to their employees in 1994. The greatest percentage of employers indicate they provide 1-10 hours of training annually per employee. This is much lower than the 20 hours targeted for this benchmark. (See Figure 13.)

● The number of training hours is not the same for all occupational groups. As seen in Table 13, 50% of managers and administrators are trained over 20 hours per year. In contrast, only 29% of operators and laborers receive over 20 hours of training per year.

● The amount of employer-provided training per employee did not increase from 1992 to 1994. As stated in Oregon Works II, "Oregon employers have not made progress since 1992 toward meeting a goal of 20 hours per worker per year. All occupational groups except production workers and operator/laborers show a larger percentage in the lower 0 or 1-10 hours categories in 1994 than in 1992. Conversely, five of eight groups show decline in the over-20-hours categories; managers/administrators are even with the 1992 data at 50% in the over-20-categories and operator/laborers are even at 28 percent. Only production workers showed a clear increase: 37 percent received more than 20 hours in 1992 rising to 40 percent in 1994." (p. 15) Oregon Works II concludes that this is caused by the trend to streamline and downsize both numbers of employees and operating budgets.

### Figure 12: Residents Who Received Employer Training Multnomah County, 1994



Received Training 46.1%

No Training 53.9%
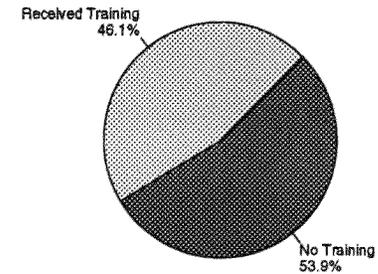
SOURCE: Oregon Population Survey, 1994.

### Figure 13: Percentage of Employees Receiving Training by Hours Oregon, 1994



0 hours 10.0%
1-10 hours 28.0%
40+ hours 20.0%
11-20 hours 24.0%
21-40 hours 18.0%
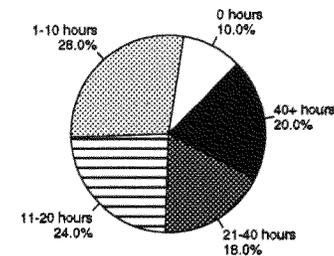
SOURCE: Oregon Works II Survey: 1994 Survey of Oregon Employers.

**Table 13**
**Employees Who Receive Training by Occupational Group**
**Oregon**
**1994**

| Occupational Group | 0-20 Hours | 21-40 Hours | 40+ Hours |
|---|---|---|---|
| Managers and Administrators | 50% | 20% | 30% |
| Professional | 49% | 26% | 25% |
| Technical | 57% | 23% | 20% |
| Sales | 64% | 17% | 19% |
| Clerical and Administrative | 76% | 13% | 11% |
| Services | 66% | 17% | 17% |
| Production | 60% | 19% | 21% |
| Construction and Maintenance | 72% | 12% | 16% |
| Operators and Laborers | 71% | 13% | 16% |
| Total | 62% | 18% | 20% |

SOURCE: *Oregon Works II Survey: 1994 Survey of Oregon Employers.*

● Employers are more highly motivated to provide training if it is linked to tangible and current return on the training investment than for the future needs of the employer or employee. However, only 32 percent report that they systematically measure the results of training. The *Oregon Works II* report concludes that employers could make stronger commitments to workforce training if they saw an immediate return that enhanced the success of their organization.

*How Should This Benchmark Change in the Future?*

The target for this benchmark is continuous improvement from the present condition.

# Air Traffic

**Benchmark #16 Increase the number of areas over 1 million population served by non-stop flights to and from Portland International Airport.**

*Why It's Important*

Whether for vacation or business, air travel has become an important mode of transportation in this century. In addition, having direct access to U.S., Canadian, and Mexican markets is a compelling reason for businesses to locate in Multnomah County.

Portland International Airport makes air travel and shipping convenient for many individuals and businesses. Direct non-stop domestic flights to given areas reduce transportation time. This benchmark measures the number of cities with a population greater than one million that are served by non-stop flights to and from Portland International Airport.

*Air Traffic*

Since 1927 when the first municipal airport was built on Swan Island, the Port of Portland has offered aviation services to the greater Portland area. To date, the Port of Portland manages the Portland International

Airport and three general aviation airports (Troutdale, Hillsboro, and Mulino).

● The Portland International Airport (PDX) is the fastest growing airport in the country (AVITAS). More than 11 million passengers flew through Portland in 1995. This number

is up from 10 million in 1994. The Port of Portland estimates this number will grow to 18 million by the year 2001 (Schmid, p. F10).

● According to Airports Council International North America, PDX was the 33rd busiest airport in North America in 1994 (Barnett, p.



Figure 14: Number of Airports in Metro Areas (Over One Million Population) Served by Non-Stop Flights To and From Portland International Airport 1990-1995
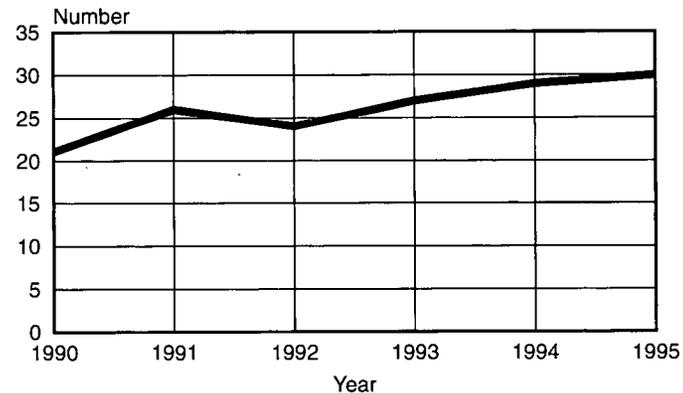
SOURCE: The Port of Portland.

14). The largest gains in domestic air traffic are from passengers flying up and down the West Coast.

● Air freight growth has been increasing as well. In 1995, over 241,000 short tons of cargo were shipped through the Port of Portland. Air freight has grown 19% since 1994.

● Figure 14 shows the number of domestic cities that are served by non-stop flights from Portland International Airport. The box at the right lists the direct flight cities.

● The number of direct international flights grew from one to four between 1980 and 1990. The number of international flights dropped to three in 1995. The three cities with non-stop service from Portland are Tokyo, Nagoya, and Seoul.

## How Should This Benchmark Change in the Future?

The Port of Portland expects that airlines serving the airport could offer non-stop flights from PDX to 36 airports in metropolitan areas of population greater than one million by the year 2000. The target for this benchmark is continous improvement from the present condition.

### AIRPORTS

**Cities* with Non-Stop Service from
Portland International Airport During 1995**

Atlanta, Georgia
Chicago, Illinois-O'Hare
Cincinnati, Ohio
Dallas/Ft. Worth, Texas
Denver, Colorado
Detroit, Michigan
Las Vegas, Nevada
Los Angeles, California:
    Burbank
    Los Angeles
    Long Beach
    Ontario
    Orange County
Minneapolis/St. Paul, Minnesota
Nagoya, Japan
New York City, New York-JFK

Phoenix, Arizona
Pittsburgh, Pennsylvannia
Sacramento, California
St. Louis, Missouri
Salt Lake City, Utah
San Diego, California
San Francisco, California:
    Oakland
    San Francisco
    San Jose
Seattle, Washington
Seoul, Korea
Taipei, Taiwan
Tokyo, Japan
Vancouver, British Columbia
Washington, D.C.-Dulles

SOURCE: The Port of Portland.
* Cities in metropolitan areas with a population greater than one million.

# Export Container Rates

**Benchmark #18: Monitor the Portland transpacific container export rates compared to those in Puget Sound (percent greater or less than).**

## Why It's Important

The Port of Portland has realized substantial growth in containerized cargo over the past ten years. In order to maintain this growth, the Port's shipping rates must be competitive with neighboring ports to attract shippers. Puget Sound ports are the closest to the Port of Portland and are among its biggest competitors. Therefore, it is important that Portland's export rates remain competitive with Puget Sound ports.

## Export Rates

General cargo typically consists of value-added products and therefore represents the highest value cargoes in international trade. Today, over 90% of all general cargo is containerized. The predominance of containerized cargo in ocean shipping today requires that local shippers have cost-effective access to this mode of transportation.

**Table 14:
Portland Transpacific Container Rates Compared to Those in the Puget Sound (expressed as a percentage greater or less than)**

| Year | % |
|------|------|
| 1992 | + 4% |
| 1994 | + 1% |
| 1995 | + .64% |

SOURCE: The Port of Portland.

This benchmark measures the rates local shippers must pay to move containerized commodities via the Port of Portland against those charged out of Puget Sound ports. Shipping costs can influence the cost of the goods delivered. By keeping transportation rates in relative parity to the Puget Sound, we can continue to maintain the price competitiveness of local products in the international marketplace.

● As seen in Table 14, Port of Portland shipping rates are increasingly competitive with Puget Sound rates.

## How Should This Benchmark Change in the Future?

The Oregon Progress Board has established a target for the Port of Portland of maintaining rates within 5% of those of Puget Sound ports by the year 2000. According to Table 14, this target was reached in 1992. The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

The Port of Portland has two public cargo handling facilities along the Willamette River, Terminals 2 and 4, and one terminal on the Columbia River, Terminal 6. The Port of Portland owns and operates one of the most efficient container terminals on the West Coast, Terminal 6.

A three-berth container terminal, T-6 offers seven 55-ton capacity container cranes, a 52 acre on-dock intermodal yard, and over 400 refrigerated container plug-ins. Both Burlington Northern Santa Fe and Union Pacific have direct access to the T-6 intermodal yard, which has a capacity of three unit trains. T-6 is also home to both Honda's and Hyundai's auto import/export terminals. Ten steamship lines provide regular service between Portland, the Pacific Rim, and Europe. Carriers calling at T-6 also offer connecting services to Africa, the Middle East, and the Russian Far East.

A multi-product terminal, Terminal 2's facilities include container and breakbulk cranes, roll on/roll off capacity, and an ocean going barge dock. Carriers providing service between Portland and Northern Europe, the Mediterranean, Australia, the South Pacific, and Latin America call at Terminal 2.

**Figure 15: Total Container Twenty-foot Equivalent Units Passing Through the Port of Portland, 1990-1994**
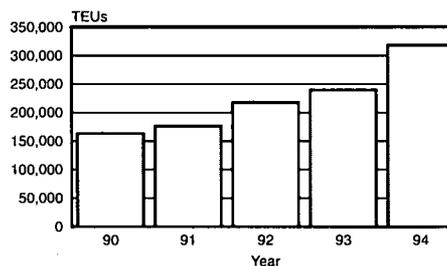


SOURCE: 1994 Port of Portland Business Report.

The Port's Terminal 4 (T-4) is the most diverse marine terminal on the west coast. With cranes, an auto complex, a mineral bulk handling facility, and a grain terminal, cargo handled at T-4 ranges from grain to lumber to autos.

In 1995, 329,758 total containers (TEU's) were shipped through the Port of Portland. This was a 3.7% increase from 1994 as seen in Figure 15.

# Benchmarks...

## PROGRESS MEASURED ONE STEP AT A TIME

# Introduction to the Education Benchmarks

*Education data has been harmed by funding cutbacks.*

Education benchmarks data are among the most frustrating to analyze. We know *how* to measure academic performance from pre-school to adulthood, but we do not have the *resources* to do it consistently over time.

We have a recent history in Oregon of developing excellent assessment tools. The Portland Public Schools are nationally known for their work in developing high quality testing materials. However, in order to protect classroom teaching positions, the district reduced funding for support services that funded test administration and analysis of the results. Funds are also not available to train enough teachers in the administration of such tests.

The Northwest Regional Educational Laboratory in Portland has developed a model pre-school assessment test that measures physical health, language, and literacy status of kindergartners. Once envisioned as a biennial benchmark for young children funded by the Oregon Progress Board, this test has been conducted only once because of lack of resources (Jewett, March 1994).

The Early Screening Inventory, a shorter kindergarten assessment test, is used by many Multnomah County schools, but resources are not available to collect and analyze these results or to extend its use to other schools.

The Oregon Literacy Survey, a ground breaking adult assessment, was done in 1991 and has not been repeated as originally planned, because funds were not available.

In 1995 the Portland Multnomah Progress Board contracted for an analysis of the Education Benchmarks. The consultants' conclusion was that, with some revisions, our present benchmarks are the right ones. They gave us excellent advice about how to find and assess data on the benchmarks. However, we continue to be frustrated by the lack of completeness and continuity in the data (Riles, February 1996).

*Given the limitations of our data, what do the benchmarks tell us?*

Achievement scores tell us that students in Multnomah County are generally improving their reading and math skills. From information that gives us no trends or data

specific to Multnomah County, we know that Oregon pre-schoolers vary widely in how well prepared they are for kindergarten. Sixty-nine percent are at or above normal for physical health development, and 87% are at or above normal for language and literacy skills.

With similar data constraints, we know that Oregon's adult population is highly literate compared with national norms.

So there is some good news in the education benchmarks. We look forward to more complete data on student achievement and participation in the Certificate of Advanced Mastery (CAM) in the future.

The bad news in the benchmarks is troubling, particularly given the crisis in funding our schools in Multnomah County. We have seen increases in high school dropout rates and reductions in the educational achievement of 25 year olds. However, the high school dropout rate poses an interesting irony. We believe the rate has increased because of ambitious retrieval programs by our high schools, which have sought out dropouts for enrollment in alternative schools. Our data in these areas need further study, yet existing resources to do so are being cut back.

# Educational Attainment

## Benchmark #13 Increase the percentage of 25-year-olds and older who have completed a certificate or diploma from any post-secondary training or educational program.

### Why It's Important

Education pays off for both individuals and businesses. Individuals with some college education earn more than individuals without college training. In addition, college graduates earn more than those without a college degree. For some businesses, such as the high-technology industry, a highly trained workforce is required for competitiveness.

This benchmark is important because, without a highly trained workforce, businesses will either locate elsewhere or seek expertise from outside the area. Highly skilled, high paying jobs will then go to newcomers in the area rather than current residents.

## Educational Attainment

● According to the 1990 U.S. Census, nearly 85% of Multnomah County residents have at least a high school diploma as seen in Figure 16. Over half (57.2%) have some college education. However, only 28.2% have a college degree.

● Educational attainment differs among racial/ethnic groups. Among all groups, a greater percentage of whites have attained a high school diploma than any other group in 1990 (see Figure 17). However, the percentage of Multnomah County residents 25 and older with a high school diploma increased from 1980 to 1990 for all racial/ethnic groups.

College education does boost productivity. The National Center for Educational Quality in the Workforce (EQW) conducted a survey of 3,000 organizations that employ 20 or more people in 1995. (Riles, p. 37) The results of the survey show that a highly educated workforce translates into increased productivity, contributing more to the bottom line than increases in capital stock.



Figure 16: Educational Attainment of People 25 and Older Multnomah County, 1990

HS Diploma 27.4%
Grade/High School 15.4%
Grad/Prof Degree 7.3%
Some College 29.0%
Bachelor's 14.9%
Associate 6.0%
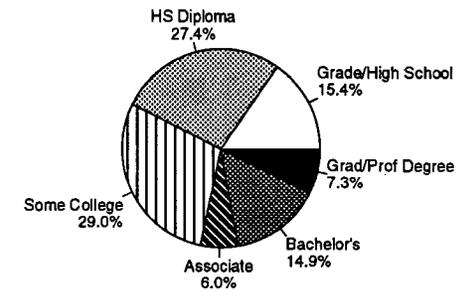
SOURCE: *1990 U.S. Census of Population.*

**Figure 17: Residents with High School Diplomas by Race/Ethnicity Multnomah County, 1990**
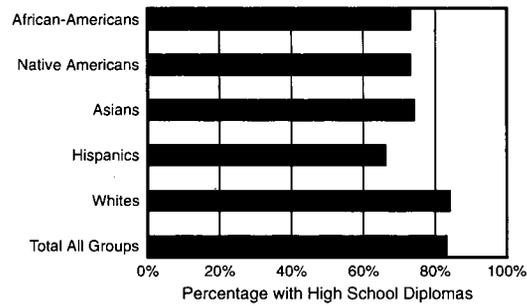
SOURCE: *1990 U.S. Census of Population.*

*How Should This Benchmark Change in the Future?*

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Certificate of Advanced Mastery Programs

## Benchmark #15 Increase the percentage of students who earn a Certificate of Advanced Mastery.

### Why It's Important

Today's students will become tomorrow's workers. The ability of today's youth to succeed in the workplace is dependent on their acquisition of knowledge and skills. Traditionally, schools have been the place where youth have acquired these skills, but early in 1990, Oregon leaders recognized that traditional ways of educating our youth in public schools were not sufficient to prepare them to succeed in the workplace. Oregon leaders began to look for new ways to prepare our youth for the next millennium.

This benchmark looks at the Certificate of Advanced Mastery (CAM). It is one approach to ensuring that today's students will have the skills needed to become productive workers in the future.

### Certificate of Advanced Mastery

Oregon's Educational Reform Act for the 21st Century, also known as House Bill 3565, was enacted by the Oregon Legislature in June 1991 and revised by the Legislature as House Bill 2991 in June of 1995. It requires high school students to work toward attainment of two types of certificates as well as the traditional high school diploma.

Students receive their Certificate of Initial Mastery (CIM) at the end of their sophomore year after completing rigorous course work emphasizing skills such as writing, reading, speaking, and listening. Once students attain their CIM, they can advance into programs aimed at achieving their Certificate of Advanced Mastery (CAM). It is expected that most students will complete their CAM by the end of their senior year in high school.

The Certificate of Advanced Mastery (CAM) requires students to complete a program that combines academic study with work-related learning experiences. Students can map their own plan toward achieving the CAM with the help of parents and school staff. By the time a student completes the CAM, he/she will have demonstrated competence in rigorous academic content standards in mathematics, science, history, geography, economics, civics, and English.

Having some experience in a work-related environment allows students to bridge the gap between school and work. Students may choose work-related activities that include visiting businesses, developing business enterprises at school, working for pay, and volunteering and serving in the community. Successful students will earn recognition for both their academic achievements as well as the occupational skills they acquire.

Students may earn a CAM with an endorsement in one (or more) of six areas:

- Arts and communication
- Business management
- Health services
- Human resources
- Industry and engineering
- Natural resources

Students can earn their CAM in a high school, community college, four-year college, and/or trade school. The system is set-up to encourage student choice and allows students to move easily from one program to the next in order to earn an endorsement.

### How Should This Benchmark Change in the Future?

Initial data for this benchmark are expected by the year 2000. At that time, the Portland Multnomah Progress Board will set targets.

# C O L L A B O R A T I O N

## Work Now and in the Future

"Work Now and in the Future" is a national conference, held at the Oregon Convention Center, aimed at helping educators and businesses learn how they can develop our youth to become workers in the future. The conference has been conducted annually for the past twelve years. In 1995, the conference had 140 workshop sessions and over 300 presenters. Over 2,300 people attended the conference. Most participants were residents of the western states.

"Work Now and in the Future" emphasizes how businesses can form partnerships with schools. Various presenters discussed school-to-work programs in their communities. Local presenters in this area represented organizations such as Fred Meyer, Intel, and Delta Engineering.

The conference looked at the needs of the workforce including the use of technology and workforce trends. In one session, presenters from the Oregon Business Council and David Douglas High School discussed their model curriculum design for the Certificate of Advanced Mastery. This session explored some of the opportunities available from this new approach to learning.

The conference itself represents a collaborative effort among local sponsors which include Northwest Regional Educational Laboratory, the Oregon Business Council, KPTV and national sponsors, including the Center for Learning and Competitiveness at the University of Maryland, and the National School-to-Work Opportunities Office, Washington. D.C. Financial sponsors for the event include PacifiCorp, Portland General Electric, and Hotel Employees and Restaurant Employees, Local 9.

# *Preparing Children for School*

## Benchmark #25 Increase the percentage of children entering kindergarten meeting specific development standards for their age.

### Why It's Important

Children must be physically, emotionally, and intellectually ready to learn when they enter kindergarten. Children's experiences in the first five years are important indicators of their later success in school and in jobs. Pre-school programs such as Head Start have had a profound impact on countering the effects of poverty and family problems in preparing children for school. We know that a child who is not ready to learn, cannot learn, and must be identified and given remedial attention.

### Measuring Readiness

The science of assessing the readiness of children entering kindergarten is in its infancy. The Oregon Progress Board has supported some very promising research that establishes norms for such assessment, but no standard assessment has been established for use by elementary schools. Some schools in Multnomah County conduct limited kindergarten assessments, but the information is not collected and reported by the school districts.

The Portland Multnomah Progress Board believes that this is an important indicator for our children, and we will encourage the development of assessment tools throughout the County.

### How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

## The *Parents as Teachers* Program

The *Parents as Teachers* program is funded by the State of Oregon as a benchmark activity designed to increase the number of children entering school ready to learn. The intent of this program is to provide parents with the skills and knowledge to help their children achieve skills, confidence, and developmental milestones in order to enter school prepared to succeed.

The *Parents as Teachers* projects are part of a continuum of early childhood development and education programs funded through the Community and Family Services Division. This continuum attempts to implement a "wellness" or "growth promotion" approach to child development by focusing on the healthy development of all children, not just those determined to be "at-risk".

The *Parents as Teachers* program provides for parent education and support, with a focus on four major areas of childhood development: language, social-emotional, cognitive, and motor development. Services fall into four categories:

**Personal Home Visits:** Visits to parents' homes by certified parent educators. These educators teach parents about child development and practical ways to encourage learning.

**Group Meetings:** Group meetings for parents to get together, discuss their experiences, and gain insights and knowledge about parenting. Meetings are held at times convenient to parents.

**Developmental Screenings:** Periodic screenings of overall child development, language, hearing, and vision, with a goal of early detection of potential problems to prevent difficulties later in school.

**Referral Network:** Linkages of families to special services, as needed.

# Student Achievement

***Benchmark #37 Increase the percentage of students who achieve at the "proficient" or "advanced" level in each subject area tested.***

*Why It's Important*

Children acquire academic skills at different rates. The courses they take, the assistance they receive in classrooms, and the support they receive from their families all contribute to students acquiring the necessary skills and knowledge to achieve academic standards. However, as discussed in *High School Students Ten Years After 'A Nation at Risk'* (U.S. Department of Education), when students are challenged by more rigorous courses, they often are able to reach a higher level of achievement.

This benchmark measures the achievement level of Multnomah County students. Students are expected to acquire a minimum of *basic* skills for their grade level. By encouraging students to achieve at higher (*proficient* or *advanced*) levels, Multnomah County students will become even more prepared to face the challenges of the new millenium.

**Table 15**
**Student Achievement Levels**
**Multnomah County**
**1992-1995**

| Skill Level by Grade | 1992 | | | 1993 | | | 1994 | | | 1995 | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Bas | Pro | Adv | Bas | Pro | Adv | Bas | Pro | Adv | Bas | Pro | Adv |
| **Third Grade:** | | | | | | | | | | | | |
| Reading | 23% | 46% | 31% | 20% | 47% | 33% | 20% | 47% | 33% | 20% | 48% | 32% |
| Math | 20% | 57% | 23% | 20% | 54% | 26% | 20% | 52% | 28% | 18% | 54% | 28% |
| **Fifth Grade:** | | | | | | | | | | | | |
| Reading | 22% | 50% | 28% | 20% | 55% | 25% | 19% | 54% | 27% | 18% | 55% | 27% |
| Math | 22% | 58% | 20% | 21% | 55% | 24% | 24% | 52% | 24% | 23% | 51% | 26% |
| **Eighth Grade:** | | | | | | | | | | | | |
| Reading | 22% | 53% | 25% | 21% | 54% | 25% | 18% | 53% | 29% | 18% | 51% | 31% |
| Math | 27% | 50% | 23% | 23% | 50% | 27% | 21% | 51% | 28% | 19% | 52% | 29% |
| **Eleventh Grade:** | | | | | | | | | | | | |
| Reading | 24% | 57% | 19% | 23% | 54% | 23% | 18% | 52% | 30% | 19% | 51% | 30% |
| Math | 32% | 56% | 12% | 39% | 50% | 11% | 42% | 48% | 10% | 42% | 46% | 12% |

SOURCE: *Oregon Statewide Assessment, Department of Education.*

## Achievement Levels

**Basic:** Students at this level are probably not making satisfactory progress for their grade level and are probably functioning below grade level expectations.

● Roughly one-fourth of Multnomah County students achieve at a *basic* level for reading and math as seen in Table 15. In contrast, approximately 18% of statewide students achieve at a *basic* level.

● The percentages of eleventh grade students in Multnomah County achieving at a *basic* level for math have actually increased over time. This means that fewer eleventh grade students are achieving at the higher levels.

**Proficient:** Students at this level are making satisfactory progress and show solid, strong, acceptable mastery of skills.

● Over half of Multnomah County students achieve at the *proficient* level as seen in Table 15.

**Advanced:** Students at the *advanced* level are performing at very high or superior levels.

● Approximately one-fourth of Multnomah County students perform at this level. However, only 10-12% of eleventh graders perform at this high level.

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Student Graduation Rate

## Benchmark #38 Increase the high school completion rate.

### Why It's Important

Students who do graduate from high school will earn more income (and pay more taxes) in their lifetimes than students who do not graduate. Graduates will also cost the state and federal government less in welfare, unemployment, and other support programs than non-graduates. As the global economy moves toward more service and information industries, and away from extractive and manufacturing industries, a well-educated workforce will be increasingly necessary to maintain United States competitiveness into the future. In sum, high school graduates contribute more financially and cost society less financially than students who do not graduate from high school.

### Graduation Rate

In May of 1995, the U.S. Department of Education Office of Educational Research and Improvement published *High School Student Ten Years After 'A Nation At Risk.'* The first in a series of *Findings From the Condition of Education*, the report documents the educational advances of American high school students in the decade since the



**Figure 18: High School Drop Outs
Multnomah County
1990-1995**
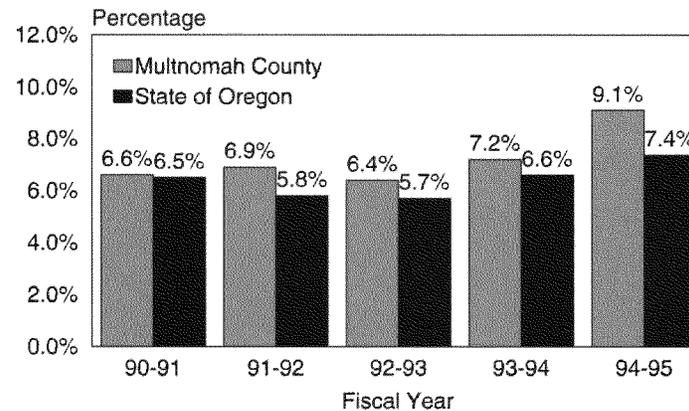
SOURCE: Oregon Department of Education, *Dropout Rates in Oregon High Schools,* Salem, OR.

publication of *A Nation At Risk.* Among the many improvements in educational outcomes documented is the finding that "fewer students are dropping out of high school between 10th and 12th grade than a decade ago" (p. 8).

• Currently, data are not available at the county level to look at the percentage of students who *graduate* from high school. At the state level, however, 77% of students graduated from high school in 1993. This percentage has steadily increased for the

preceeding five years. (Oregon Progress Board, December 1994, p. 32).

● Data are available at the county level on the percentage of students who *drop out* from high school. This percentage is not the inverse of the graduation rate but does give an indication whether we are making progress in this area. Figure 18 shows that the percentage of dropouts in Multnomah County and in the State of Oregon has increased from 93-94 to 94-95.

During the past year, the proportion of students recorded as dropouts grew largely as a result of the increasing success of the Portland Public Schools in identifying and serving dropouts in alternative school programs.

## *How Should This Benchmark Change in the Future?*

The Leaders Roundtable established a goal of 100% completion for high school students by 1996. The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

## C O L L A B O R A T I O N

### The Leaders Roundtable

The Portland area is recognized nationally as having one of the most effective collaborations between private business and schools to improve the opportunities of at-risk youth for education and economic advancement. The Leaders Roundtable is an ad hoc team of civic leaders, educators, business executives, and community activists committed to making a difference for the good of the youth of Multnomah County, Oregon.

The purpose of the Roundtable is to provide policy and resource direction, particularly to see how existing resources can be used to greatest effect to increase the ability of families to raise healthy children who are ready to go to school and to learn. The specific mission of the Roundtable is: to assist young people of color and/or from low income families to achieve self-sufficiency and productive citizenship.

The Leaders Roundtable does not run programs. It is not a formalized organization; it is a unique collaboration. Leaders with influence over policies that affect the workforce and youth come together to understand the cause of school dropout and high youth unemployment and to agree on actions to address the problems.

Each Roundtable member is then expected to take action in his or her own arena, based on common understanding about the problem and solutions. Those Roundtable members who oversee programs for children and youth are expected to implement programs that achieve the goals of insuring that targeted youth (1) complete high school; (2) graduate with employability skills; (3) have access to jobs; and (4) have access to post-secondary education. All Roundtable members are expected to be advocates for needed changes to improve the odds for low income and ethnic minority children and youth. Roundtable members hold themselves accountable to each other for doing their respective parts.

SOURCE: The Leaders Rountable.

# Adult Literacy

**Benchmark #43 Increase the percentage of adults who possess English literacy in prose, documents, and quantitative areas; literacy in a language other than English; and literacy in the use of a computer.**

*Why It's Important*

In the last century, literacy was defined as being able to sign one's name to a legal document. Today, literacy encompasses much more. To be a fully literate adult, one must master skills in prose, documents, and quantitative areas; be able to speak another language other than English; and be able to use a computer. It is important because it shows the outcomes of education in the world community and the ability of adults to acquire new skills.

*Adult Literacy*

In 1991, the Oregon Progress Board conducted the *Oregon Literacy Survey*. This survey evaluated adult literacy throughout the State of Oregon. Data about Multnomah County are not available at this time. However, information about the state is useful for understanding literacy.

**Figure 19: Adult Literacy Skills State of Oregon 1991**
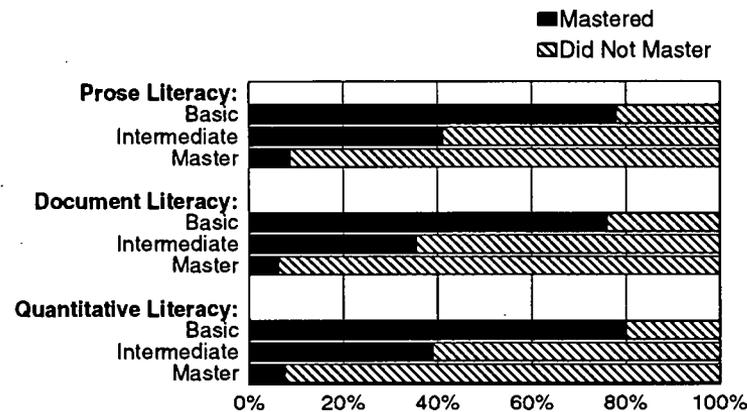


NOTES: This survey uses the same scale used by the *1985 National Survey of Young Adults Literacy Skills*. A score is calculated from combining several questions in each answer category. Those reaching a score of 375 were designated as "master". Intermediate scores are 325 and basic scores are 275.

Prose Literacy means an adult can understand text information. Document Literacy means an adult can understand and use graphs, text, maps, etc. Quantitative Literacy means an adult can understand math and apply it.

SOURCE: *The Oregon Literacy Survey*.

## Figure 20: Second Languages Spoken Multnomah County 1994
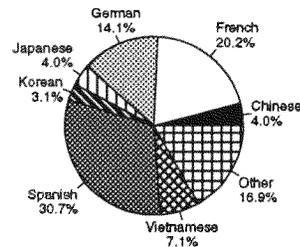


SOURCE: *1994 Oregon Population Survey.*

● According to the survey, "virtually all Oregon adults are literate by past rough definitions of literacy (e.g., signing a social security card in the correct place). Only a small percentage (3%) could not consistently perform tasks such as identifying straightforward information in a short newspaper article." (Oregon Progress Board, May 1991, p. 4)

● Figure 19 shows varying levels of mastery of literacy skills. Approximately 75-80% of adults mastered *basic* skills in prose, documents, and quantitative skills. Between 6

and 9% of adults had scores indicating their achievements at the *master* level.

● Not surprisingly, educational attainment is associated with literacy skills. Those with eight or fewer years of schooling have extremely low skills; however, less than 20% of college graduates could consistently answer questions at the master level.

● Those employed demonstrated higher literacy skills than those unemployed. Managers, professionals, and those in clerical positions had higher literacy skills than skilled crafts workers.

● According to the *Oregon Population Survey*, 20% of residents in Multnomah County speak another language besides English. Figure 20 shows the percentage of languages spoken. Thirty percent of those speaking a foreign language speak Spanish.

## How Should This Benchmark Change in the Future?

The Oregon Progress Board has established a goal of 20% of the population that speaks a language other than English by the year 2000. According to the *Oregon Population Survey*, Multnomah County achieved this target in 1994.

The Oregon Progress Board has not established a 2000 year target for literacy in prose, documents, or quantitative. Without data for Multnomah County, it is difficult to set a target for this county.

# B
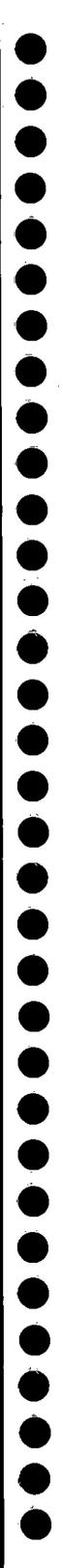
**ENCHMARKS...**

**PROGRESS MEASURED ONE STEP AT A TIME**

# Introduction to the Children and Family Benchmarks

*Our most vulnerable residents are not sharing in our regional prosperity.*

• Children of working parents are not being adequately served by day care facilities.

• Our children are using drugs and alcohol at younger ages.

• Teen pregnancy continues to be a problem in our community. It is not just the fact of such pregnancies that alarms us, it is the long term impacts. Children born to teen mothers are at risk for many of the worst conditions in our community.

• The incidence of AIDS among heterosexual persons is rising.

• Too many of our citizens lack access to healthcare.

*We lack data on how well we are doing in helping dependent citizens achieve self-sufficiency.*

Our benchmarks reflect the vision of our community to bring as many people as possible to self-sufficiency. Unfortunately, our data for the three targeted populations (mentally ill, disabled, and elderly) are not clear on this issue. We will work with our partners to collect and analyze additional data in the coming months.

*There is some good news.*

A successful state-wide effort to improve the rate at which our children are immunized is bringing results. The rate in Multnomah County has increased in recent years, and we are close to the state average.

Maternal use of alcohol, tobacco, and drugs during pregnancy is decreasing. This has probably contributed to the reduction that we found in the percentage of low birthweight babies born in the County.

*The Multnomah Commission on Children and Families is addressing many of these benchmarks.*

As discussed in the trends section of this report, the Multnomah Commission on Children and Families is using benchmarks in their work to plan for the long term delivery of services to children and families.

We expect that in the coming months we will increase our research and reporting capability in this area in partnership with the Commission.

# Teen Pregnancy

## Benchmark #26 Reduce the pregnancy rate per 1,000 females ages 10-17.

### Why It's Important

Having a child as a teen can carry many risks both to the mother and child:

- Earlier school dropout
- Greater risk of a low birthweight baby
- Greater likelihood of inadequate prenatal care
- Greater risk for having another child while still a teen

Many factors put youth at risk for teen pregnancy. These include:

- School failure prior to pregnancy
- Poverty
- Unemployment
- Low self-esteem
- Adolescent risk-taking behaviors
- History of physical/sexual abuse
- Lack of hope for the future

Nearly one-half of all poor children under the age of six in the United States have mothers who were teens when they first gave birth. According to a state report on redesigning Oregon's Public Assistance System, "roughly



**Figure 21: Teen Pregnancy Rates (0-17) Multnomah County, State of Oregon 1988-1995**
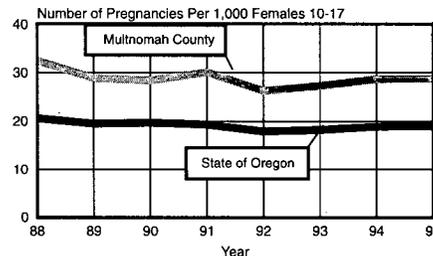
SOURCE: *Birth Certificates.*
NOTE: 1995 data are provisional.

50 percent of teenage mothers end up on welfare and food stamp caseloads, at a cost of approximately $80,000 over the lifetime of the mother." (Oregon Progress Board, March 14, 1995, p. 28)

### Teen Pregnancy

● Although the United States has a long history of early childbearing, younger teens today are overrepresented in teen pregnancy. Possible reasons for this are: First, teens are physically capable of becoming pregnant at an earlier age. In 1988, the average age at menarche had declined to 12.5 years from

15.5 years in 1890 (Brown). Second, earlier sexual activity places them at increased risk for unintended pregnancy. Today, one out of four females and two out of five males are sexually active by age 15. In fact, the vast majority of teen pregnancies are unintended (82%). Third, younger teens are less likely to use contraceptives compared to older teens. Finally, single parenting is more common (in both the adult and teen population), resulting in more teen mothers keeping their babies, instead of choosing abortion or adoption.

● Multnomah County has one of the highest rates of teen pregnancy in Oregon. In 1994, there were 833 teen pregnancies in Multnomah County for a rate of 28.7 per 1,000 teens (see Figure 21). In comparison, the rate in the State of Oregon was 18.9. It must be remembered, though, that Multnomah County is one of the most populated counties in Oregon with a higher percentage of its residents living in poverty (Community Health Assessment Group, p. 16) which directly impacts pregnancy rates.

● Teen pregnancy rates differ by race/ethnicity. The rates for ethnic minority teens are higher than for whites, however, the majority of teen pregnancies in Multnomah County are pregnancies of white teens (67%).

## Figure 22: Teen Pregnancy Rate by Race/Ethnicity Multnomah County 1990

| Race/Ethnicity | Rate Per 1,000 Females (10-17) |
|---|---|
| African-Americans | 57.9 |
| American-Indians | 33.1 |
| Asians | 18.7 |
| Hispanics | 32.5 |
| Whites | 24.0 |
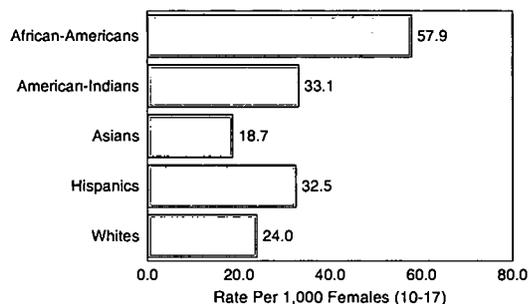
SOURCE: *Birth Certificates.*

*How Should This Benchmark Change in the Future?*

The Multnomah County Health Department has established a goal of reducing teen pregnancies by 30% by the year 2000. To accomplish this goal, there must be a seven percent decrease every year to the year 2000. By the year 2000, the rate should drop to 20.0 pregnancies per 1,000 females aged 10-17 in Multnomah County.

# COLLABORATION

## STARS

The Students Today Aren't Ready for Sex (STARS) program uses a postponing sexual involvement curriculum developed by Marion Howard, Ph.D. in Atlanta, Georgia, and was modified by the Multnomah County Health Department in partnership with Portland Public Schools. Trained teen leaders teach the curriculum to 6th and 7th grade boys and girls.

Collaboration for a statewide STARS effort includes Multnomah County Health Department, the State of Oregon, the STARS Foundation, Oregon Medical Association, Multnomah Commission on Children and Families, AmeriCorp Volunteers, OMSI, Oregon Business Magazine, the media (Channel 12, The Oregonian, Willamette Week), State of Oregon Community Partnership Program, Templeton Foundation, and private corporations (e.g. PGE, Fred Meyer, PacifiCorp, AT&T, Weiden and Kennedy), Representative Elizabeth Furse, and the First Lady of Oregon, Sharon Kitzhaber.

## Are You Ready?

The Boys and Girls Aid Society of Oregon in April 1995 announced plans to implement "Are You Ready?", an Oregon version of the comprehensive, holistic teen pregnancy prevention project developed by Dr. Michael Carrera at the Children's Aid Society of New York. Major partners of the project are Portland Parks and Recreation's University Park Community Center in North Portland, Multnomah County Health Department, Portland State University, and Portland Public Schools. Underwriting from the Irwin Foundation, Kaiser Permanente, and PacifiCare provided funding for planning and development.

## Teen Outreach Program

A Teen Outreach Program was developed in 1995 in collaboration with the Multnomah County Health Department and Planned Parenthood of the Columbia-Willamette. The focus of the program is to increase access to reproductive health care·services for youth who are suspended or who have dropped out of school.

# Healthy Birthweight Babies

## Benchmark #27 Increase the percentage of healthy birthweight babies.

### Why It's Important

Babies born with low birthweight often have more complications during their first year of life, including a greater number of birth defects, disabilities, and other health problems, than other babies. According to the U.S. Office of Technology Assessment, the healthcare system saves $14,000-$30,000 in hospitalization and long-term healthcare costs for every low birth weight avoided through early or comprehensive prenatal care (Join Venture: Silicon Valley Network).

### Low and Very Low Birthweight

Babies with a birthweight below 5 lbs. 8 oz. are considered to be "low birthweight". Babies below 3 lbs. 5 oz. are considered "very low birthweight".

● In 1994, 8.5 infants out of 1,000 died before their first birthday in Multnomah County. This is slightly lower than the national average of nine (Centers for Disease Control, June 1994, p. 87).

**Figure 23: Rate of Births Below Normal Birthweights (Under 5 lbs. 8 oz.) Multnomah County 1990-1994**

Rate per 1,000 Births

Very Low Birth Weight Under 3 lbs. 5 oz.

Low Birth Weight Between 3 lbs. 5 oz. and 5 lbs. 8 oz.
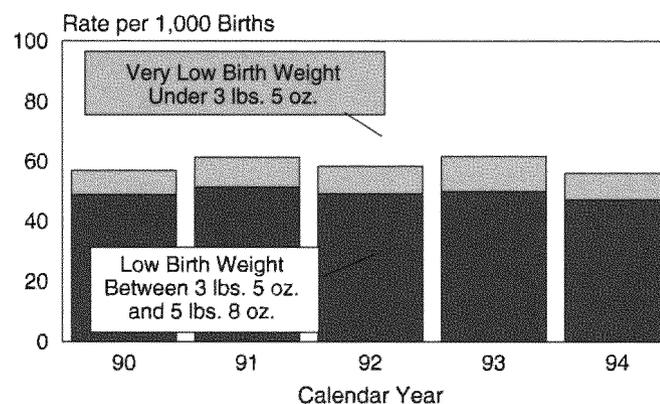
SOURCE: *Birth Certificates.*
NOTE: 1994 data are provisional.

**Figure 24: Rate of Births Below Normal by Race/Ethnicity Multnomah County, 1994**

Race/Ethnicity

| Race/Ethnicity | Rate Per 1,000 Births |
|---|---|
| African-American | 113.9 |
| Native American | 87.4 |
| Hispanic | 61.4 |
| Asian | 57.1 |
| White | 52.4 |

Rate Per 1,000 Births
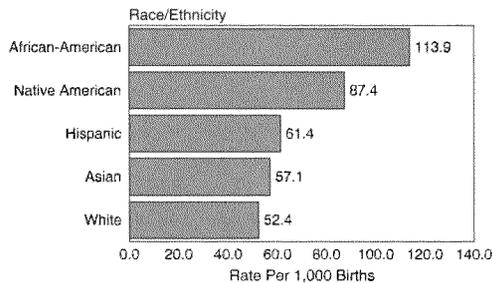
SOURCE: *Birth Certificates.*
NOTE: 1994 data are provisional.

**Figure 25: Rate of Births Below Normal by Geographical Area Multnomah County, 1994**

| Area | Total Number of Births with Low Birth Weight |
|---|---|
| City of Portland: | 62.57 |
| East | 81.69 |
| Northeast | 74.47 |
| North Portland | 70.18 |
| NW/Downtown | 63.49 |
| Central NE | 57.1 |
| Southeast | 52.76 |
| Southwest | 47.87 |
| Gresham | 46.17 |
| Remainder | 44.33 |
| Multnomah County | 58.97 |

Total Number of Births with Low Birth Weight
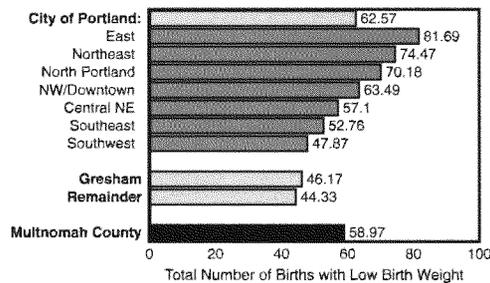
SOURCE: *Birth Certificates.*
NOTE: 1994 data are provisional.

● There were 8,903 babies born to Multnomah County residents in 1994. Of these, 94% had a normal birthweight, 5% were low birth weight but above 3 lbs. 5 oz., and 1% were very low birthweight.

● Figure 23 shows the rate of below normal birth weights per 1,000 births. The rate per 1,000 has not varied greatly over the past five years. In 1994, there were 58.97 babies per 1,000 born with a low birthweight. The rate for very low birthweights is 9.32.

● There are racial/ethnic differences in babies with low birth weight. As seen in Figure 24, African-Americans have the highest rate per 1,000 of low birthweight babies (113.9) in 1994. Whites have the lowest rate (52.4).

● When looking at geographic area, East Portland has the highest rate of low birth weight babies (81.69). Gresham and the remainder of Multnomah County have the lowest rates per 1,000 of low birthweight babies (see Figure 25).

*How Should This Benchmark Change in the Future?*

Recent research by the Oregon Progress Board has shown that the marginal cost of decreasing the incidence of low birthweight babies may be prohibitive state-wide. We will examine targets for Multnomah County during 1996.

# Maternal Drug, Alcohol, and Tobacco Abuse

**Benchmark #28 Increase the percentage of infants whose mothers did not use the following: illicit drugs, alcohol, and/or tobacco during pregnancy.**

*Why It's Important*

Children born to mothers who use tobacco or other substances show marked differences in health:

**Drugs:** Drug exposure puts babies at a greater risk of complications during pregnancy and correlates with low birthweights. Babies in drug abusing families face greater risks of health problems, inadequate nutrition, and abuse and neglect.

**Alcohol:** In the extreme, significant use of alcohol is associated with fetal alcohol syndrome, which includes a wide variety of abnormalities. As few as two drinks per day during pregnancy may be associated with recognizable, though milder, abnormalities in a significant share of exposed infants.

**Tobacco:** Tobacco use is associated with low birthweight infants and the complications arising from low birthweight. As with alcohol, there is no known low threshold of safe tobacco use during pregnancy.

### Figure 26: Maternal Tobacco Use Multnomah County 1990-1994

Percentage of Mothers Who Use Tobacco
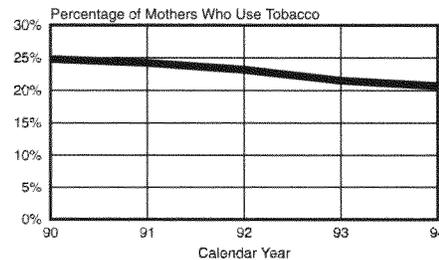
SOURCE: *Birth Certificates.*
NOTE: 1994 data are provisional.

### Figure 27: Maternal Alcohol Use Multnomah County 1990-1994

Percentage of Mothers Who Use Alcohol
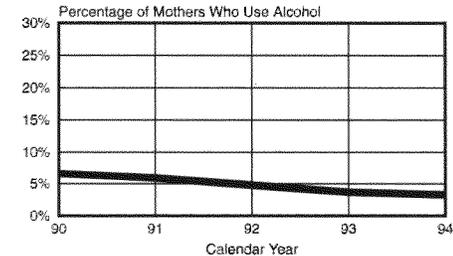
SOURCE: *Birth Certificates.*
NOTE: 1994 data are provisional.

## Tobacco, Alcohol, and Illicit Drugs

Mothers self-report their use of tobacco, alcohol, and drugs on birth records. Figure 26 shows that tobacco is used more frequently than alcohol (Figure 27) and drugs (Figure 28), although the percentage who smoke has declined over the past five years.

● In 1994, 20.7% of mothers reported they smoked during pregnancy.

● Alcohol use during pregnancy declined over time (see Figure 27). In 1994, only 3.3% of mothers reported using alcohol.

### Figure 28: Maternal Illicit Drug Use Multnomah County 1990-1994

Percentage of Mothers Who Use Drugs
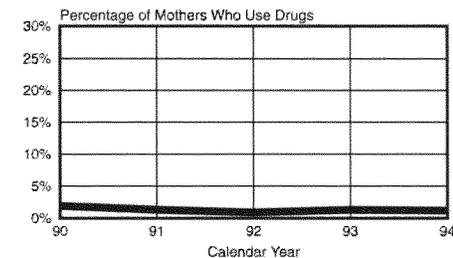
SOURCE: *Birth Certificates.*
NOTE: 1994 data are provisional.

## Figure 29: Maternal Tobacco Use by Age
### Multnomah County
### 1994

Percentage of Mothers Using Tobacco

SOURCE: *Birth Certificates.*
NOTE: 1994 data are provisional.

## Figure 30:  Maternal Tobacco Use
### by Race/Ethnicity
### Multnomah County
### 1994

| | |
|---|---|
| Native Americans | 27.2% |
| African-Americans | 24.4% |
| Whites | 23.0% |
| Hispanic | 7.6% |
| Asian | 4.3% |

0.0%  5.0%  10.0% 15.0% 20.0% 25.0% 30.0% 35.0%
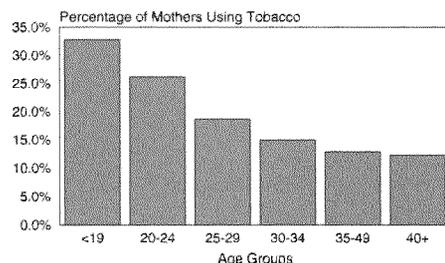
SOURCE: *Birth Certificates.*
NOTE: 1994 data are provisional.

## Figure 31:  Maternal Tobacco Use
### by Geographical Area
### Multnomah County
### 1994

| City of Portland: | 20.7% |
|---|---|
| North Portland | 26.4% |
| East | 24% |
| Northeast | 23% |
| Southeast | 21.8% |
| Central NE | 16.7% |
| NW/Downtown | 16.3% |
| Southwest | 8.3% |
| Gresham | 18.7% |
| Remainder | 24.5% |
| Multnomah County | 20.7% |

0%    5%    10%    15%    20%    25%    30%
Percentage of Mothers Who Use Tobacco

SOURCE: *Birth Certificates.*
NOTE: 1994 data are provisional.

● Drug use is much lower.  In 1994, only 1.2% of mothers used drugs.  However, the percentage of drug users has not changed dramatically over the past five years.

● Because more mothers use tobacco compared to alcohol and drugs, we analyzed tobacco use in more depth.  Figure 29 shows the percentage of maternal smokers by age.  Younger mothers are more likely to smoke than older mothers.

● The percentage of mothers who smoke is markedly different depending on race/ethnicity.  As shown in Figure 30, Native Americans, African-Americans, and Whites are more likely to smoke than Hispanic and Asian mothers.

● By geographic area, mothers in North Portland and East Portland are more likely to smoke (see Figure 31).  Southwest mothers are least likely.

## How Should This Benchmark Change in the Future?

While tobacco and alcohol use has declined, mothers who continue to smoke, drink, and/or use drugs during pregnancy put their babies at risk.  The Oregon Progress Board has established a target of 99% by the year 2000 for mothers who do not use drugs or alcohol and 95% for mothers who do not smoke.

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Immunizations

## Benchmark #29 Increase the percentage of two-year-olds who are adequately immunized.

### Why It's Important

Throughout the United States, children must be immunized before they are allowed to attend school. For most children, this means they are immunized before the age of six. However, the immunization schedule established jointly by the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP), and the American Academy of Family Physicians (AAFP) suggests that immunization should begin at birth.

Parents who do not follow this schedule put their children at needless risk of contracting potentially serious diseases. Moreover, it is during infancy that children are the most vulnerable to these diseases.

### Immunizations

● According to a statewide survey conducted in 1994 by the Oregon Health Division, 67% of two-year-olds in the State of Oregon were immunized by age two with 4 DTP (diptheria, tetanus, perstusis), 3 OPV (oral polio virus), and 1 MMR (measles, mumps,

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**Figure 32: Immunization of Two-Year-Olds Multnomah County, 1994**

Immunized 66%

Not Immunized 34%
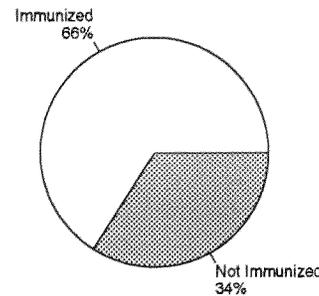
SOURCE: *1994 Two-Year-Old Immunization Survey.*

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rubella). In a similar survey conducted by the Centers for Disease Control between April 1994 and March 1995, Oregon was ranked 47th in the percentage of children immunized (Center for Disease Control, February 1996, p. 145).

● In Multnomah County, 66% of two-year-olds were immunized in 1994 as seen in Figure 32.

● The *2-Year-Old Immunization Survey* compared children who were fully immu-

nized and those who weren't. Factors of sex, race, age of mother, or educational level of mother were not significant in predicting the children who were immunized. However, other differences were noticed. Those children born to families with incomes below $15,000 were less likely to be immunized. Also, later-born children (rather than first-born) and children receiving inadequate prenatal care were less likely to be immunized.

● The survey discovered that some parents believed their children were fully immunized when, in fact, they were missing between one to three immunizations. According to the report, "Of parents whose children were missing one immunization, 76% believed their child needed no more, compared with 10% of parents whose children were missing six immunizations". (Oregon Health Division, July 27, 1995, p. 8) Overall, the study found that 33% of Oregon two-year-olds were missing one or more of the basic set of 4 DTP, 3 OPV, and 1 MMR immunizations.

● What are the barriers to immunizing two-year-olds? According to Table 16, "waiting time" and "side effects" are areas of concern to mothers surveyed in Multnomah County. Cost of immunizations is also a concern especially to mothers with incomes below $15,000.

**Table 16**
**Barriers to Immunizing Two-Year-Olds**
**Multnomah County**
**1994**

| Barrier | Problem | No Prob |
|---|---|---|
| Waiting time is too long | 34% | 66% |
| Worry about serious side effects | 34% | 66% |
| Worry about mild side effects | 32% | 68% |
| Immunizations too costly | 30% | 70% |
| Child gets bored waiting | 28% | 72% |
| Clinic doesn't remind me | 28% | 72% |
| Child sick when due | 19% | 81% |
| Clinic hours inconvenient | 17% | 83% |
| Other things difficult | 16% | 84% |
| Don't like to tell clinic staff that it is hard to pay | 16% | 84% |
| Child has had side effects | 15% | 85% |
| Hard to travel to clinic | 14% | 86% |
| Clinic staff are rude | 11% | 89% |
| Not sure where to go | 6% | 94% |
| Other people in my family don't want child immunized | 2% | 98% |

SOURCE: *1994 Two-Year-Old Immunization Survey.*

## *How Should This Benchmark Change in the Future?*

The Oregon Preschool Immunization Consortium has established a goal of 90% by the year 2000. The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

## COLLABORATION

### Oregon Immunization Alert

Beginning in the summer of 1996, the Oregon Immunization Alert (OIA) will keep track of all immunizations due for each child in the State of Oregon. OIA will notify parents (by phone and postcard) when a child is due to be immunized.

OIA will have up-to-date information on immunizations. Medical providers can easily access this information for new and existing patients. Before OIA, this information had to be transferred from one provider to another when a patient changed doctors. OIA will also produce Certificates of Immunization Status at the beginning of the school year, thereby reducing paperwork for providers and parents.

OIA is sponsored through public and private partners including Oregon Health Systems in Collaboration (OHSIC), Oregon Health Division, and Multnomah County Health Department. OHSIC includes Blue Cross/Blue Shield, Kaiser Permanente, Legacy Health System, Oregon Health Sciences University, and Providence Health System.

# Child Care Facilities

## Benchmark #32 Increase the percentage of child care facilities which meet established basic standards.

### Why It's Important

Parents want quality day care for their children, but many are limited by what they can afford to spend. From the perspective of day care providers and teachers, affordable fees seldom can buy the quality demanded. Setting minimum standards for child care providers is important because it provides some assurance that our children are receiving a basic level of quality day care.

### Child Care

According to the Oregon Employment Department, 33% of females who had children under the age of six were working in 1975. By 1993, the percentage working had risen to 53%. (Oregon Labor Trends, January 1996).

In Oregon, all group homes and child care centers are required to be certified annually. Certification includes on-site visits by the Child Care Division of the Oregon Employment Department (CCD) and the Health Department. Group homes or child care centers applying for certification must have minimum standards for staff, children's programs, nutrition and meals, discipline and health policies. (Multnomah Child Care Resource and Referral)

Other types of day care do not require certification but must be registered. These include family child care, school-age programs, and pre-schools. Registration for these programs means that providers must agree to CCD rules, be an adult over the age of 18, and have an Oregon criminal records check. On-site visits and monitoring are not required for registration.

**Figure 33: Types of Child Care Arrangements Needed to Fill Estimated Demand Multnomah County 1994**

Care in Child's Home 23.6%
Child Care Centers 27.7%
Other Group Activities 8.2%
Family Child Care Home 25.3%
Care by a Relative 15.1%
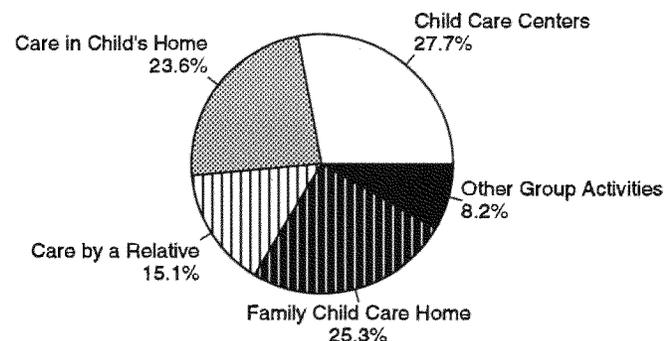
SOURCE: Oregon Child Care and Education Data Project.

● In Multnomah County, there are a total of 3,784 child care providers. Thirty-nine percent of all providers meet basic standards of care. This percentage is smaller than the state in which 47% of all providers meet basic standards of care.

● Is Multnomah County meeting its demand for child care? According to the Oregon Child Care and Education Data Project, it is estimated that 38.7% of Multnomah County children needed child care in 1994. Figure 33 shows the demand by type of child care arrangement. The largest percentage of demand is for Child Care Centers (27.7%) followed by Family Child Care Home (25.3%).

● In total, Multnomah County residents needed 42,679 child care slots to meet the estimated demand in 1994. However, data from the Oregon Child Care and Education Data Project show that there are only 28,481 available slots estimated in Multnomah County. This means that there is a shortage of 13,198 child care slots needed to meet the demand.

## How Should This Benchmark Change in the Future?

The Oregon Progress Board has set a target of 100% of child care facilities that meet basic standards by the year 2000. The Portland Multnomah Progress Board target will be established in 1996.

# Student Substance and Tobacco Abuse

## Benchmark #34 Increase the percentage of students not involved with alcohol, illicit drugs, and/or tobacco.

### Why It's Important

Child and adolescent use of alcohol, tobacco, and/or illicit drugs harms individual growth and is costly to society. The health risks for using alcohol, tobacco, and/or illicit drugs are well known. These habits, established early in life, can have detrimental effects on the development of our youth.

### Alcohol, Tobacco, and Illicit Drugs

**Alcohol Use:** National studies indicate that student alcohol use is declining. In 1979, 37% of 12- to 17-year-olds drank alcohol in any given month. This percentage declined to 20% by the year 1991. (Center for Substance Abuse)

● In 1986, 59.6% of Oregon eleventh graders drank alcohol in the past month (see Figure 34). This percentage declined to 41.6% in 1994. Similarly, 38.3% of eighth graders drank alcohol in 1986. This declined to 29.8% in 1994. However, as seen in Figures 34-35, there was an increase in student alcohol use between 1992 and 1994.

● In Multnomah County, 33.4% of eleventh graders and 27.9% of eighth graders reported drinking in the past month. This is slightly below the percentages seen at the state level.

**Tobacco Use:** Data for student tobacco use has only been collected from 1990 onward in the State of Oregon. As seen in Figures 34-35, the percentages of eleventh and eighth graders who use tobacco has increased slightly since 1990. Oregon students report slightly less tobacco use when compared to the nation as a whole (Finigan, p. 11).

● Disturbingly, the age of first use of alcohol and cigarettes has declined over time. In 1988, students started smoking at 11.6 years of age on average; in 1991, students started smoking cigarettes at 11.5 years (Center for Substance Abuse Prevention, p. 35). Alcohol use has shown a similar pattern. In 1988, students as young as 13.1 (on average) reported using alcohol. By 1991, the age dropped to 12.6, indicating that children are using alcohol and cigarettes at an earlier age.

**Drug Use:** The good news is that drug use among students is declining. National statistics state that 18 percent of all 12- to 17-year-olds in the United States reported using illicit drugs in any given month in 1979. By 1991, this percentage dropped

**Figure 34: Eleventh Grade Student Use of Alcohol, Tobacco, or Drugs in Past Month State of Oregon, 1994**
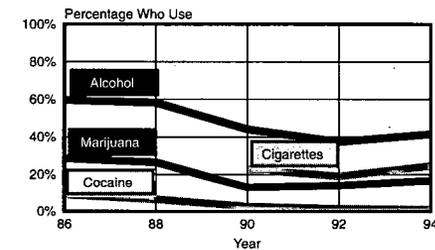
SOURCE: *1994 Oregon Public School Drug Use Survey.*

**Figure 35: Eighth Grade Student Use of Alcohol, Tobacco, or Drugs in Past Month State of Oregon, 1994**
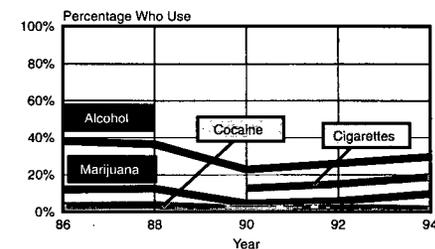
SOURCE: *1994 Oregon Public School Drug Use Survey.*

**Table 17**
**Student Use of Alcohol, Tobacco, and/or Drugs**
**Multnomah County, 1994**

| Substance Used | Eighth Graders | Eleventh Graders |
|---|---|---|
| Alcohol | 27.9% | 33.4% |
| Tobacco: | | |
| Cigarettes | 18.0% | 20.2% |
| Smokeless | 8.2% | 11.2% |
| Drugs: | | |
| Amphetamines | 2.1% | 1.5% |
| Cocaine | 1.2% | .6% |
| Crack Cocaine | .7% | 1.2% |
| Diet Pills | 3.4% | 1.7% |
| Hashish | 3.3% | 2.9% |
| Heroin | .6% | .2% |
| Inhalants | 9.6% | 2.9% |
| LSD/Psychedelics | 2.9% | 3.9% |
| Marijuana | 8.1% | 14.7% |
| Other Narcotics | 1.5% | 1.5% |
| Quaaludes/Barbituates/ Tranquilizers | .6% | .6% |
| Stay Awake Pills | 6.8% | 8.1% |
| Steroids | .4% | .4% |

SOURCE: *1994 Oregon Public School Drug Use Survey.*

below seven percent (Center for Substance Abuse Prevention, p. 23).

● In Oregon, drug use has declined since 1986 when data were first collected. As seen in Figures 34-35, cocaine use has continued to decline. In spite of the overall declines, however, marijuana use has actually increased since 1990. According to Table 17, in 1994 14.7% of Multnomah County eleventh graders reported using marijuana in the past month.

## How Should This Benchmark Change in the Future?

The *Healthy People 2000 Review* submitted to the United States Congress in 1993 set the target at 12.6% of children and adolescents between the years of 12-17 who use alcohol. This is an ambitious target considering that we would hope to reach it by the year 2000. Similarly, the target for marijuana use is 3.2% and cocaine use is .6% for the same age group and for the same target year. *Healthy People 2000* does not have a target for student cigarette use. The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Access to Healthcare

## Benchmark #44 Increase the percentage of people who have access to basic healthcare.

### Why It's Important

According to Marge Jozsa, Executive Director for Neighborhood Health Clinics, access to healthcare "...implies everything from transportation to language barriers to cultural sensitivity to cultural differences. Insurance won't solve these problems." (Hanes, p. 28) Having access to healthcare is a concern for Oregonians. In the *Oregon Values & Beliefs Survey*, conducted in 1993, access to hospitals and healthcare emerged as the leading value on a list of 32 community values (Oregon Business Council).

### Access to Healthcare

There are 15 hospitals in the Portland metropolitan area and 1,037 primary care physicians in Multnomah County. Primary care physicians offer basic healthcare services and include family practitioners, general practitioners, internists, pediatricians, obstetricians, and gynecologists. A shortage of primary care physicians in a given area could limit access to basic healthcare services.

**Table 18**
**Number of Primary Care Physicians Available**
**Multnomah County**
**1994**

| Service Area | Number of Physicians | FTE Available to Entire Population | FTE Available to Medicaid | FTE Available to Low Income |
|---|---|---|---|---|
| Albina | 45 | 33.57 | 5.78 | 1.56 |
| Downtown Portland | 104 | 71.88 | 13.93 | 6.55 |
| Gresham | 28 | 20.50 | 3.83 | 1.13 |
| Inner South Portland | 14 | 10.69 | 1.21 | 0.21 |
| Middle South Portland | 60 | 49.55 | 4.65 | 1.59 |
| Outer North Portland | 27 | 20.15 | 1.70 | 0.49 |
| Outer South Portland | 44 | 33.70 | 5.18 | 1.04 |
| St. Johns | 8 | 7.15 | 1.22 | 0.32 |
| West Portland | 54 | 41.94 | 5.42 | 1.58 |
| **County Totals** | **384** | **289.13** | **42.92** | **14.47** |

SOURCE: *Primary Care Physician Capacity in Oregon, 1994.*

## Figure 36: Residents with Health Insurance Multnomah County and Oregon 1990-1994
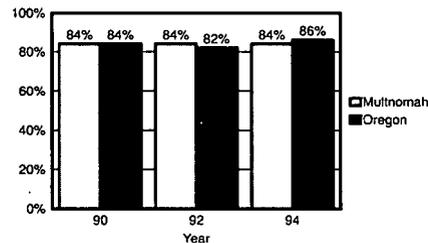


SOURCE: *1990, 1992, 1994 Oregon Population Survey.*

• Low income residents have less access to primary care physicians than other Multnomah County residents. In 1994, the Oregon Health Division conducted a survey to identify shortages of primary care physicians. According to the survey, a ratio of physicians to the general population between 1:1500 and 1:2500 will provide adequate access to services (Oregon Health Division, 1994, p. 7). In Multnomah County, the ratio is estimated to be 1:787, at least twice the acceptable ratio.

• An important indicator of access is the full time equivalent (FTE) number of physicians available per geographic area. Table 18 shows that there are plenty of FTE available in most geographic areas, but there are not enough FTE available to Medicaid and low income residents.

• The percentage of Multnomah County residents with health insurance has remained constant since 1990. Another component of access to healthcare is the ability to pay. Health insurance includes a wide range of benefits from hospitalizations and/or physician care to home health services. Figure 36 shows the percentage of Multnomah County residents who say they have health insurance. In Multnomah County, the percentage remains consistent at 84% for all three years. Differences can be seen among racial/ethnic groups. Native Americans are less likely to have health insurance than any other racial/ethnic group in Multnomah County.

## How Should This Benchmark Change in the Future?

The Office of the Health Plan Administrator has set a target of 100% access to health insurance by the year 2002. With the advent of the Oregon Health Plan, this may be an achievable goal. The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

### Oregon Health Plan

The Oregon Health Plan (OHP) began on February 1, 1994. This plan pays for health services for approximately 118,000 low-income Oregonians. Approximately, 14.5% of members are under the age of 18; the greatest percentage (65%) are between the ages of 18-44.

OHP is unique in the way it pays for health services. Physicians are paid a set amount per OHP member. However, physicians are only allowed to provide certain services under the plan. For example, OHP does not pay for diaper rash and other minor illnesses. OHP does provide most medical and dental benefits under the plan.

To be eligible for the Oregon Health Plan, members must be U.S. citizens or legal aliens and living in Oregon. In addition, members must have one of the following income requirements:

• Have an income below 100% of the Federal Poverty Level
• Be pregnant with an income below 133% of the Federal Poverty Level
• Be a child under age 6 with household income below 133% of the Federal Poverty Level

# Early Diagnosis of HIV

## Benchmark #46 Increase the percentage of people with early diagnosis of HIV.

### Why It's Important

Since the 1980s, Acquired Immune Deficiency Syndrome (AIDS) has developed into a national epidemic of staggering proportions. Human Immunodeficiency Virus (HIV) is the precursor to AIDS, which takes an average of nine to ten years to develop. Those infected with HIV may eventually contract AIDS. Although AIDS is still incurable, early diagnosis of HIV can result in early treatment and, for some, this may prolong their life span even after developing AIDS. This benchmark is important, because it encourages early testing to determine HIV status.

### Human Immunodeficiency Virus (HIV)

● According to the HIV Program of the Oregon Health Division, nearly 3,000 Oregonians have contracted AIDS. It is estimated that there are between 3,800 and 8,600 Oregonians currently infected with HIV (p. 1).

● In 1994, 495 Oregonians were newly diagnosed with HIV. There were 231 cases reported in Multnomah County alone; this is 47% of the state total. Eighty-nine percent of AIDS cases in Oregon are among individuals between the ages of 20-49.

● New cases of HIV infections still occur predominantly among males (78%). The largest percentage of new cases are among men who have sex with other men (MSM). Although the percentage for MSMs is still high compared to the population as a whole, this percentage has actually declined as a proportion of total cases. Percentages for women, heterosexual men, and injection drug users have increased at a greater rate over the past few years, showing that the disease has spread to other population groups.

● According to the HIV Program, 73% of AIDS cases in Oregon were among whites in 1994. African-Americans (8%), Hispanics (7%), and Native-Americans or Asians (3%) represented the remaining percentages (race/ethnicity was not reported in the remaining 9%).

● Figure 37 shows that 75% of new HIV cases in Multnomah County were asymptomatic in 1994. This means that symptoms had not developed before the diagnosis was made. This is slightly higher than the percentage for the State of Oregon. However, the 1994 percentages have declined



**Figure 37: Newly Diagnosed HIV-Positive Asymptomatic Clients Multnomah County, Oregon 1992-1994**
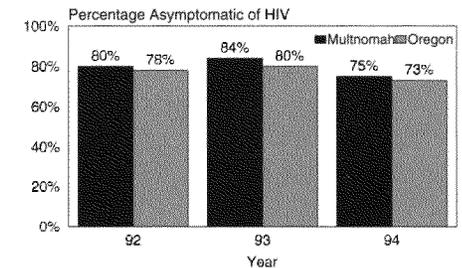
SOURCE: HIV Program, *Oregon HIV/AIDS Annual Report*.



**Figure 38: Annual Incidence of AIDS per 100,000 Multnomah County, Oregon 1992-1994**
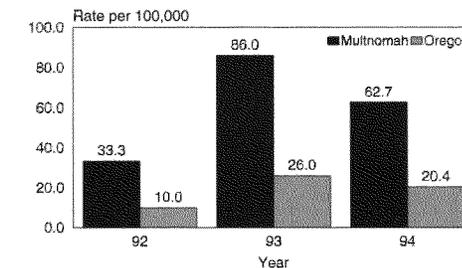
SOURCE: HIV Program. *Oregon HIV/AIDS Annual Report*.

## Figure 39: Annual AIDS Deaths per 100,000
## Multnomah County, State of Oregon
## 1992-1994

Deaths per 100,000

30.0
25.0    22.5      22.6      25.8
20.0
15.0                   10.4
10.0    7.7      8.4
5.0
0.0

■ Multnomah ▨ Oregon

92     93     94

Year
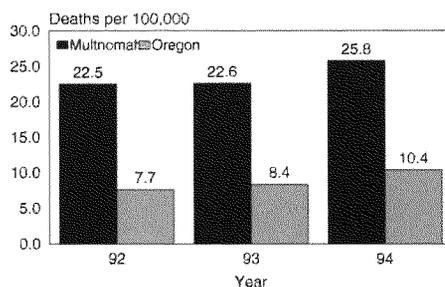
SOURCE: HIV Program. *Oregon HIV/AIDS Annual Report.*

for both Multnomah County and the State of Oregon since 1993.

● Diagnosing HIV cases early is important in treating those who eventually get AIDS. However, another question to ask is whether or not we have made progress in curtailing the AIDS epidemic. The incidence of AIDS in Multnomah County is startling when compared to the entire State of Oregon. Figure 38 looks at the annual incidence of AIDS per 100,000. There were 62.7 cases per 100,000 of AIDS in Multnomah County in

1994. This rate is down from 1993 but still three times greater than the state rate.

● Figure 39 shows that deaths from AIDS in Multnomah County have increased each year since 1992. In 1994, there were 25.8 deaths from AIDS per 100,000 in Multnomah County.

## How Should This Benchmark Change in the Future?

The Oregon Progress Board has set a target of 88% for their statewide benchmark on early diagnosis of HIV. As Figure 37 shows, Multnomah County nearly reached this target in 1993. It may be possible to reach this target in Multnomah County by the year 2000.

While important, this benchmark shows only a partial picture of the AIDS epidemic. Perhaps we should track the incidence of AIDS and the number of AIDS deaths to fully understand this epidemic.

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Mentally Ill

### Benchmark #47 Increase the percentage of mentally ill residents who are self-sufficient.

*Why It's Important*

This benchmark measures the quality of life of those who are diagnosed with a mental illness by analyzing the three most common barriers to attaining self-sufficiency: housing, employment, and poverty.

*Housing As a Barrier*

In the 1980's, housing mentally ill patients shifted from institutions to other situations. Fewer patients were hospitalized; more patients were placed in family homes, nursing homes, or foster homes. Unfortunately, many were left to fend for themselves and often became homeless.

In 1994, the State Office of Mental Health Services conducted the *Quality of Life Survey* of clients receiving mental health services from county agencies. This is just a portion of the mentally ill population. The analysis that follows, therefore, does not include mentally ill persons receiving no services for their illness or those receiving only privately provided services.

● Figure 40 shows the housing situation for respondents in Multnomah County. The largest percentage (35.2%) live in a private house or apartment with family, relatives, or roommates. Approximately 9% have another living arrangement including adult foster care, group home, or homelessness. Unfortunately, this survey does not ask respondents if their current situation is the housing of their choice.

*Employment As a Barrier*

Work provides additional income and other benefits as well. One of the most important benefits is an increase in self-esteem. While some mentally ill have conditions that prevent them from working full-time, some are able to work part-time. Part-time employment may be one way to foster self-sufficiency among those limited by their mental illness.

● The *Quality of Life Survey* asks respondents if they are employed. Most Multnomah County respondents said they are not employed (83.9%) as seen in Figure 41. This is slightly higher than the percentage for the State of Oregon as a whole (73.9%). When asked why they are not currently working, 29.8% said they were temporarily laid off and 44.7% said they are unable to work due to their disabilities.

**Figure 40: The Housing Situation for Mentally Ill Residents Multnomah County 1994**

Alone 31.5%
Private home 35.2%
Other 9.3%
Room & board 7.4%
Supported housing 16.7%
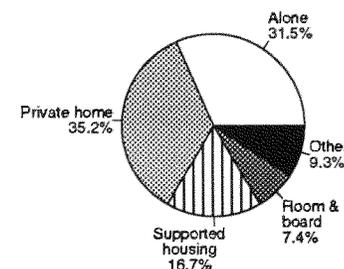
SOURCE: *1994 Quality of Life Survey.*

**Figure 41: The Employed Mentally Ill Multnomah County 1994**

Not employed 83.9%
Irregular (< 16) 7.1%
Part-time (17-34) 3.6%
Employed (35+) 5.4%
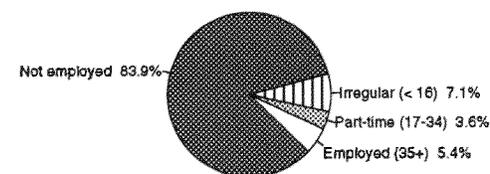
SOURCE: *1994 Quality of Life Survey.*

**Figure 42: Government Assistance
for Mentally Ill
Multnomah County
1994**

Type of Benefit

| Benefit | Percentage |
|---|---|
| Food stamps | 70.8% |
| SSI | 60.0% |
| SSDI | 32.6% |
| AFDC | 29.3% |
| SSA | 15.8% |
| Social welfare | 12.2% |

0.0%    20.0%    40.0%    60.0%    80.0%
Percentage Receiving Benefits
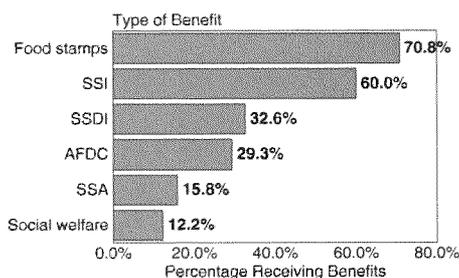
SOURCE: *1994 Quality of Life Survey.*
NOTE: SSI (Supplemental Security Income), SSDI
(Social Security Disability Income), AFDC (Aid to
Families and Dependent Children), and SSA
(Social Security Benefits)

## Poverty As a Barrier

The *Quality of Life Survey* does not contain
questions about poverty status of respon-

dents. However, it does ask whether respon-
dents receive government assistance. Most
assistance programs require recipients to
have an income below poverty to be eligible.

● Figure 42 shows the percentage of Mult-
nomah County clients who receive govern-
ment assistance. Over 70% of those surveyed
receive food stamps. Sixty percent receive
Supplemental Security Income (SSI).

Clearly, our knowledge of the mentally ill is
severely limited. In addition to the popula-
tion discussed above, it is estimated that a
high proportion of the homeless population
as well as those incarcerated in various
corrections institutions are mentally ill.

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board
will study additional data relating to this
benchmark before a target is set.

# Disabled People

## Benchmark #53 Increase the percentage of disabled people who are self-sufficient.

### Why It's Important

Disability: n. inability to pursue an occupation because of physical or mental impairment. This definition, taken from the 1973 edition of Webster's New Collegiate Dictionary, is no longer applicable. More and more individuals who have disabilities are learning to adapt their environment and work style so that they can lead productive lives as workers. In addition, businesses and organizations are realizing that many disabled individuals can work despite their handicap.

What is today's definition of disability? According to *Disability in America*, "the term disability ... refers to limitations in physical or mental function, caused by one or more health conditions, in carrying out socially defined tasks and roles that individuals generally are expected to be able to do." (Pope, p. 35) This benchmark is important because it encourages individuals to seek employment, even though they may have a physical or mental disability.

## Disabilities

Generally, there are three categories of disabilities: developmental disabilities (usually occurs before age 21), injury-related disabilities, and disabilities associated with chronic disease and aging.

**Developmental Disabilities:** "... affect about four percent of the population under 21 and are caused by a variety of conditions, including cerebral palsy, seizure disorders, mental retardation, hearing and vision impairments, autism, structural birth defects (e.g. spina bifida) that cannot be corrected by surgery, and social and intellectual deprivation. These conditions which usually persist throughout an individual's lifetime, are diagnosed in an estimated 80,000 children each year." (Pope, p. 10)

**Injury-Related Disabilities:** Head injuries and spinal cord injuries cause the most significant physical and neurological disabilities. Approximately



**Figure 43: Residents (Aged 16-64) Who Have a Work Disability and Are in the Labor Force Multnomah County 1990**
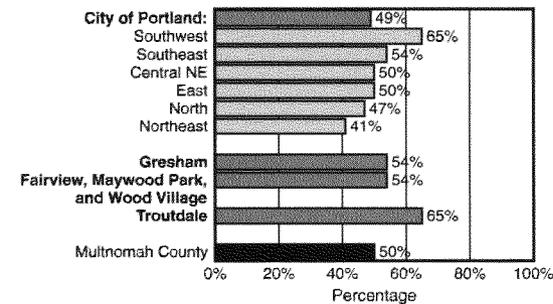
SOURCE: *U.S. Census Bureau, 1990.*

70,000 to 90,000 people in the United States each year will sustain a head injury that causes moderate to severe traumatic brain injuries. There are fewer spinal cord injuries each year (between 10,000 and 20,000.) Motor vehicle collisions and falls are the leading causes for both head and spinal cord injuries. However, acts of violence, which may or may not involve firearms, also contribute significantly to these injuries.

**Disabilities from Chronic Diseases:**
Disabilities in this category are generally associated with the aging process. Some of the more common conditions include sinusitis, hypertension, and hearing impairment. Rarely do these conditions limit activity. However, more serious conditions that do limit activity include conditions such as multiple sclerosis and lung or bronchial cancer.

● In 1990, the U.S. Census Bureau asked Multnomah County residents if they had a physical, mental, or other health condition that lasted for six months or more. Figure 43 shows the percentages of Multnomah County residents who are disabled and who are in the labor force. In total, 50% of those disabled in Multnomah County are in the workforce. However, Troutdale residents and residents in the Southwest Portland have the highest percentage of disabled residents who are in the workforce (65%).

The Census also asked everyone if they are currently employed, and if disabled, whether their disability prevents them from working. Eighty-one percent of disabled residents who do not work say it is because their disability prevents them from doing so.

In 1990, the U.S. Congress enacted the Americans with Disabilities Act (ADA). This act prohibits public or private sectors from discriminating against workers on the basis of disability. ADA is the most comprehensive legislation that is intended "...to assure equality of opportunity, full participation, independent living and economic self-sufficiency" for disabled residents. (Vocational Rehabilitation Division, p. 1)

People often become independent and find satisfaction through their work or livelihood. Increasing the percentage of disabled residents who are employed will help to foster self-esteem among a group that is already mentally or physically challenged. With the passage of ADA, more and more organizations are required to become more accommodating to individuals with disabilities.

*How Should This Benchmark Change in the Future?*

The Portland Multnomah Progress Board has not established a target for this benchmark.

# Elderly

**Benchmark #56   Increase the percentage of elderly living in the least restrictive setting, either in their own home or in an alternative home setting.**

## Why It's Important

People are living longer.  In 1841, a woman expected to live to age 42; the life expectancy of men born the same year was 41 years.  In comparison, a woman born today can expect to live to age 76 on average; men live to age 72.  (Larson, p. 236) As people age, issues of health and independence emerge.  Until recently, the elderly have often been sent to nursing homes when they began to need living assistance.  This is often symbolized as a loss of independence.  Some elderly are not capable of caring for themselves and must live in situations where they receive some degree of assistance; however, many elderly can live independent lives with minimal assistance.

## Elderly Living in the Least Restrictive Setting

Data for this benchmark have been difficult to collect.  The Portland Multnomah Progress Board will explore this benchmark in the coming year.

# BENCHMARKS...
## PROGRESS MEASURED ONE STEP AT A TIME

# Introduction to the Quality of Life Benchmarks

## We value quality of life.

Our community places great value on its quality of life...and we define it broadly to include the beautiful landscape, abundant natural resources, the arts, ethnic diversity, excellent education system, and friendly people.

Portland's high quality of life has economic value as well. As firms and their employees become increasingly mobile, they are drawn to places that are good for living as well as working.

Ironically, the economic prosperity that our quality of life has brought us also threatens to degrade that same quality lifestyle. The tension between economic growth and quality of life will always challenge us to preserve what we value while accommodating change.

## Environmental quality is good.

Indicators tell us that the quality of our air, water, and open space is excellent. We will expand our study of these indicators in the coming year.

## Transportation indicators flash a warning sign.

The time we spend commuting to and from work is increasing, and ridership on our public transit system is down. Those two factors are probably directly related. Our quality of life is greatly threatened when our efficient transportation system is not wisely used. Perhaps the opening of the new Westside Light Rail Line will reverse both of these trends.

## Neighborhood livability is high.

Multnomah County is a community of neighborhoods. We value our small cities, urban neighborhoods, and rural areas for the sense of character and connectedness that they provide us.

Residents of Multnomah County rate the livability of their neighborhoods generally high and getting better. As we would expect, income and livability closely correlate with each other. Those with higher incomes have more choices about where to live, and thus select the nicest areas they can afford.

## Health indicators are important to quality of life.

The Portland Multnomah Progress Board is active in the Healthy Communities Initiative, the tri-county effort to broaden the definition of *health* in our communities and help us understand the relationships among health and other community issues. We expect important results to come from this effort in the coming year.

## The 2040 Plan will help us define many quality of life indicators

As we discussed in the Growth Management Trends section of this report, the 2040 Plan is a roadmap for our community's achievement of our vision of the finest quality of life possible. Metro and the region's cities are in the final stages of designating specific goals for development in the future. During the coming year, we will work with them to create benchmarks that reflect land use and environmental goals within the context of the 2040 Plan. Thus, in this report we have postponed our reporting on several existing benchmarks related to environmental and quality of life factors.

# Land Available to Grow New Jobs

**Benchmark #20 Monitor the percentage and number of industrial site acreage identified in comprehensive plans that is actually suitable for development.**

*Why It's Important*

Growth management laws in Oregon require that communities provide for the full range of land uses necessary to accommodate growth in housing and jobs. Particularly in the Portland area, where the 2040 Plan requires a significant amount of "in-fill" development (building on urban land that is presently vacant or under-utilized), it is important to ensure that adequate supplies of land are available for business location and expansion. With the greatest portion of job growth in the region in recent years occurring in Washington and Clackamas County, it is important that Multnomah County plan and zone an adequate supply of desirable industrial land.

Table 19
Industrial Categories of Land
Multnomah, Clackamas, and Washington Counties
1996

| Industrial Category | Multnomah County | Clackamas County | Washington County |
|---|---|---|---|
| Heavy | 5,146 | 406 | 923 |
| Light | 988 | 648 | 4,387 |
| Mixed-Use | 852 | 590 | 922 |
| Total | 6,986 | 1,644 | 6,232 |

SOURCE: Metro GIS.

## Industrial Land Availability

Metro tracks the net acreage (estimated acreage after roads and other facilities have been built) of land in three industrial categories: heavy, light, and mixed use (industrial land on which other uses, usually commercial, are allowed).

● Over 47% of industrial land in the region is in Multnomah County. Clackamas County, with only a portion of its land within the Urban Growth Boundary, has only 11%, while Washington County has 42%. Multnomah County has by far the most heavy industrial land, concentrated along the Columbia and Willamette Rivers. Washington County has 72% of the light industrial land along its Route 26/Sunset Corridor. Mixed-use industrial land is spread evenly among the counties.

● Is the available land for job creation adequate for Multnomah County to capture the types and number of jobs that will be necessary to keep our economy growing, while maintaining the values of the 2040 Plan? The Portland Multnomah Progress Board will investigate this issue in the coming year.

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Parks and Protected Green Space

## Benchmark #57 Monitor the number of park acres and protected green spaces per 1,000 residents.

### Why It's Important

The residents of Multnomah County have long treasured their parks and protected green spaces. In 1903, the Olmsted Brothers, renowned landscape architects, developed a plan for Portland's system of parks. In the 1930's, Lewis Mumford developed a system of natural areas for Portland/Vancouver. These visionaries understood the role of parks and greenspaces in enhancing the livability of the Portland area.

As the population increases, however, parks and greenspaces become threatened. Development takes over land that could be turned into parks. Similarly, financial resources once available to purchase and maintain additional land have dwindled over time. This benchmark monitors the number of acres set aside for parks and protected green spaces per 1,000 residents.

### Parks and Protected Green Spaces

In 1993, the Center for Urban Studies calculated the number of park and greenspace acres for the City of Portland. Data for the rest of Multnomah County are not available.

● Overall, there are 21.82 acres of parks and green spaces for 1,000 residents in the City of Portland.

● Figure 44 shows differences among geographic areas. The Northwest/Downtown area has the greatest number of acres per 1,000 residents. This is because the Northwest/Downtown area has regional park space with Waterfront Park and Forest Park. Northeast Portland has the fewest number of acres (2.6) per 1,000 residents.

● Parks and greenspaces provide more than a glimpse of nature and recreational opportunities. Nowadays, park systems provide classes, field trips, and social occasions. In 1995, 78% of Multnomah County residents asked on the *Citizen Survey* said they had visited a City park near their home within the last 12 months.

**Figure 44: Acres of Parks and Protected Green Space Per 1,000 Population City of Portland 1993**



| Area | Acres |
|---|---|
| City of Portland: | 21.8 |
| NW/Downtown | 158.3 |
| North | 39.9 |
| Southwest | 12.6 |
| Central NE | 11.4 |
| Southeast | 9.7 |
| East | 5.5 |
| Northeast | 2.6 |

Number of Acres Per 1,000 Population
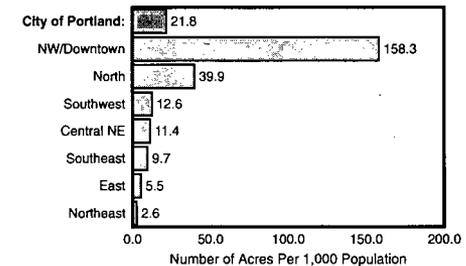
SOURCE: *1993 City of Portland Parks and Open Space Inventory.*

**Figure 45: "Good" Ratings of Park Systems Multnomah County 1995**
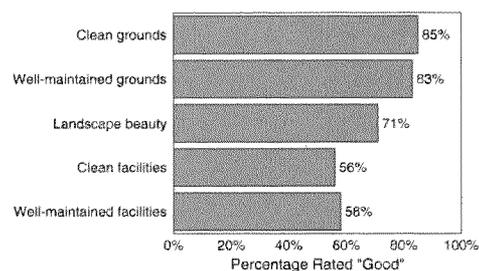
SOURCE: *1995 Portland Multnomah County Citizen Survey.*

• How do Multnomah County residents rate the park systems in their area? Figure 45 shows the percentage of Multnomah County residents who rate features of their park system as "good" or "very good". Eighty-five percent rate the park grounds as "clean". Only 56%, however, rate the facilities as "clean". Female residents tend to give higher ratings of the park system than males.

## How Should This Benchmark Change in the Future?

As stated above, the average number of parks and greenspace acres is 21.82 acres per 1,000 residents in Multnomah County. As part of our collaboration with Metro in establishing benchmarks for the 2040 Plan, we will study this benchmark further in 1996.

# Neighborhood Livability

**Benchmark #61 Increase the percentage of people who rate their neighborhood livability high.**

### Why It's Important

As discussed in the trends section, "The Public Mood", our citizens increasingly seek a sense of community in the places they live. Portland has been called a city of neighborhoods, and each of Multnomah County's smaller cities has a neighborhood flavor as well. This is an Urgent Benchmark, and an important indicator of how well our public and private institutions are meeting the sense of community that our citizens seek.

### Neighborhood Livability

● Figure 46 shows how people in Multnomah County rate the livability of their neighborhood. People in Southwest rate their neighborhood higher than any other area in Portland (93%). North and Northeast residents rate their neighborhood livability lowest but even this percentage seems relatively high (69%).

**Figure 46: "Good" Ratings of Neighborhood Livability**
**Multnomah County**
**1995**

| Area | Percentage |
|------|-----------|
| City of Portland: | 79% |
| Southwest | 93% |
| NW\Downtown | 86% |
| Central NE | 81% |
| East | 79% |
| Southeast | 71% |
| North | 69% |
| Northeast | 69% |
| Gresham | 85% |
| Fairview, Maywood Park, and Wood Village | 82% |
| Troutdale | 87% |
| Unincorporated | 89% |
| Multnomah County | 78% |
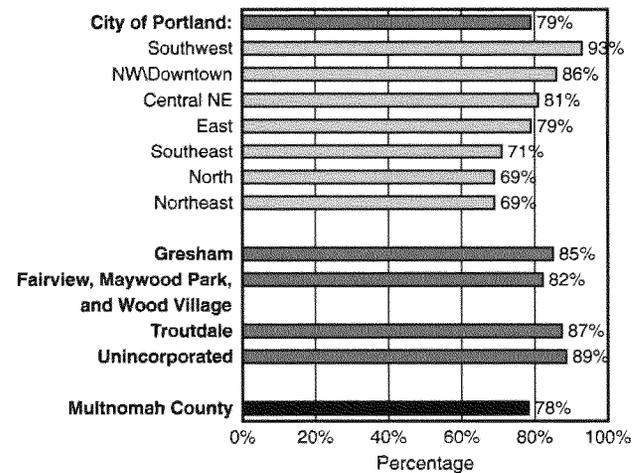
SOURCE: *1995 Portland Multnomah County Citizen Survey.*

● "Good" livability ratings for Portland neighborhoods increased from 77% in 1993 to 79% in 1995.

● There are some demographic differences in ratings for neighborhood livability. The more education one has, the greater likelihood of rating neighborhood livability high. Differences are also apparent for race/ethnicity. Whites rate livability highest while Native Americans rate livability lowest. However, there are no differences in the way males and females rate their neighborhoods.

This data suggests that those with higher incomes (which correlate directly to education) have greater choice in where they live, and choose the most livable neighborhood they can afford.

## How Should This Benchmark Change in the Future?

The Multnomah County target for this benchmark will be established in 1996.

## C O L L A B O R A T I O N

### Healthy Communities Initiative

Healthy Communities is a movement that brings together representatives from businesses, governments, non-profit organizations, and concerned residents, to discuss issues of common concern and work toward achieving greater health for area residents. Health, in this sense, is defined broadly as "a sense of complete physical, mental, and social well-being" (World Health Organization).

The issues of Healthy Communities span across many areas including housing, crime, domestic violence, poverty, environment, and physical health. Each of these can affect neighborhood livability for residents living in a community. Whether or not an individual is healthy is partially determined by the health of the neighborhood in which he/she lives.

A Healthy Communities Initiative began in the Portland tri-county area in 1995.

To launch this effort, a two-day forum was held on November 30 and December 1, 1995. The forum brought 151 leaders together from Clackamas, Multnomah, and Washington Counties to discuss a vision for a healthy community.

The forum had three purposes:

• To learn how others are improving the health of their communities.
• To begin a dialogue about a vision for the tri-county area.
• To establish the next steps toward achieving healthy communities.

The first Healthy Communities Report for the tri-county area was presented at the forum. This report analyzed the health status of the tri-county area.

# Commute Time

## Benchmark #62 Increase the percentage of people who commute fewer than 30 minutes one-way between home and work.

### Why It's Important

According to the Oregon Progress Board, "thirty minutes is an almost universal average for commutes" (Oregon Progress Board, December 1994, p. 85). Long commutes contribute to air pollution and traffic congestion and lesser quality of life for all. A community must have the right distribution of housing and jobs and an adequate transportation system to link them to maintain the standard of this benchmark.

### Commute Time

Figure 47 shows this benchmark in 1990. The data are broken down into smaller geographical areas within Multnomah County.

● For all Multnomah County residents, the percentage who travel fewer than 30 minutes to work was 75% in 1990 according to the U.S. Census Bureau. This is slightly less than the state average of 77%. The *Oregon Population Survey* shows this percentage to



**Figure 47: People Who Commute Less Than Thirty Minutes From Home to Work**
**Multnomah County**
**1990**
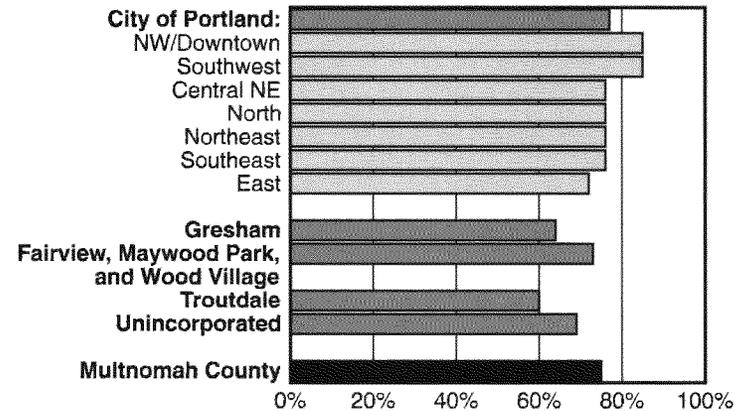
SOURCE: *1990 U.S. Census of Population.*

**Figure 48: Average Number of Minutes It
Takes to Commute
Multnomah County
1990-1994**



Average Number of Minutes
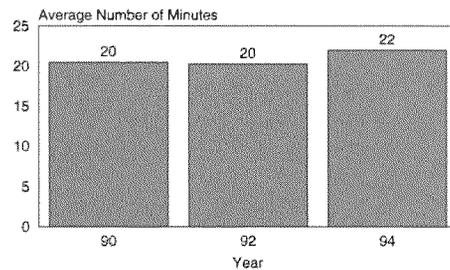
SOURCE: *1990, 1992, 1994 Oregon Population
Survey.*

increase to 86% in 1994 for Multnomah
County.

● The 1990 Census figures show that within
the City of Portland, 85% of residents living
Downtown or in the Southwest travel fewer
than 30 minutes to work; 72% of East side
residents do.

● The farther east a person lives in Mult-
nomah County, the longer time it takes to get
to work. Only 60% of Troutdale residents
take fewer than 30 minutes to get to work.
This suggests that many residents may be
traveling to the Portland downtown core or
farther west to get to work.

● Figure 48 shows the average number of
minutes it takes Multnomah County resi-
dents to commute to work. In 1990, the
average number was 20 minutes. This was
the average number for other residents in
the State of Oregon as well. By 1994, the
average increased to 22 minutes suggesting
that it is taking longer for residents to get to
work.

*How Should This Benchmark Change
in the Future?*

The 2000 target for the Oregon Progress
Board is for 88% of the Oregon population to
commute within 30 minutes one-way be-
tween home and work. The Multnomah
County target for this benchmark will be
established in 1996.

# Public Transportation

**Benchmark #63 Increase the percentage of people who commute to and from work using public transportation.**

## Why It's Important

In the *1994 Oregon Population Survey*, respondents were asked whether they thought auto traffic congestion was a serious problem. Nearly one-fourth (24%) of Multnomah County residents felt that traffic congestion was serious or critical. In contrast, 19% of residents felt it was not a problem at all.

Reducing traffic congestion is just one reason why public transportation is important. Other considerations are air pollution and parking problems. The Portland area is blessed with an efficient and effective transit system.

## Public Transportation

Tri-Met manages the transit system in the Portland area. Tri-Met has 89 bus routes and a light rail system that stretches from downtown Portland to the City of Gresham. Currently, construction is underway for expanding MAX west to Beaverton and



**Figure 49: Transportation Modes to Work
Multnomah County
1995**

Drive alone/motorcycle 65%

Don't know/Refused 6%

Other 6%

Max/Bus 15%

Carpool 8%
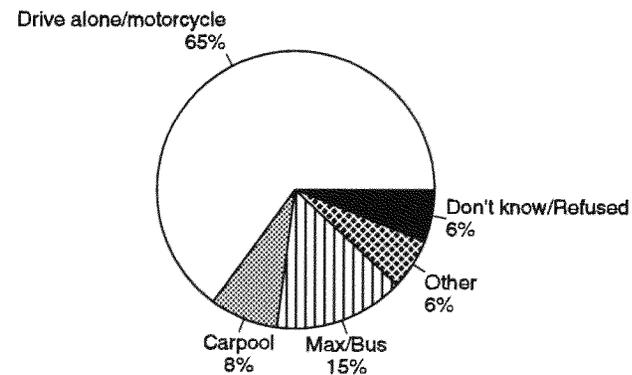
SOURCE: *1995 Tri-Met Attitude and Awareness.*

**Figure 50: Public Transportation Use Multnomah County 1993-1995**
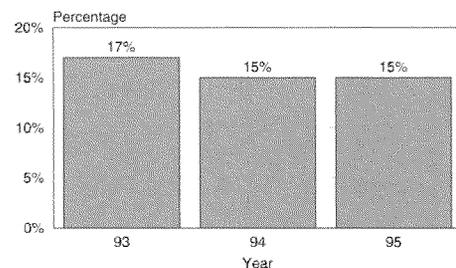


SOURCE: *1993, 1994, 1995 Tri-Met Attitude and Awareness Survey.*

Hillsboro. Construction will be completed in 1998.

In 1995, Multnomah County residents were asked how they commute to work when interviewed for *Tri-Met's Attitude and Awareness Study.* Commuters are defined as people who travel to and from work one or more days per week.

● As Figure 49 shows, 65% of those responding to the *November 1995 Tri-Met Attitude and Awareness Study* said they drive alone or use a motorcycle; 15% commute on MAX or the bus.

● Respondents were asked how many trips they made on a Tri-Met bus or MAX in the past month. Forty-four percent of Multnomah County residents have made two or more trips on transit in the past month, including 12% who made 30 trips or more.

● Of those who made two or more transit trips in the past month, 51% rode the bus only. Nineteen percent rode MAX only and 28% rode a combination of the two.

● What is the usual destination of Tri-Met riders? Sixty percent of riders usually travel to downtown Portland, 15% travel to Lloyd District, and 18% travel somewhere else in the transit area.

● According to Figure 50, the percentage of Multnomah County residents using public transportation declined from 1993 to 1994, but remained constant in 1995.

*How Should This Benchmark Change in the Future?*

The achievement of this goal will help to reduce traffic congestion, air pollution, and parking problems. Tri-Met has set an aggressive goal of increasing ridership 6% per year through the year 2000.

The Multnomah County target for this benchmark will be established in 1996.

# Air Quality

**Benchmark #66 Increase the number of days per year the community meets government ambient air quality standards.**

## Why It's Important

Weather conditions, land use patterns, and geography affect air quality. Poor air quality affects the health of residents in our community. Those suffering from heart, lung, or other chronic diseases may especially feel the affects of poor air quality.

The Federal Environmental Protection Agency (EPA) sets the standards for air quality and they are monitored by the Oregon Department of Environmental Quality (DEQ).

## Air Quality

Testing for air quality occurs at fifteen sites throughout the Portland area where eight contaminants are monitored. The following discussion focuses on three contaminants of particular concern in the Portland area.

## Fine Particulate Matter (PM10)

Fine particulate matter consists of solid particles or liquid droplets that are less than 10 microns in diameter. These particles can be inhaled deeply into the lungs where they can remain for years. The health effects of particulate matter vary with the size, concentration, and chemical composition of the particles.

● The 24-hour average standard set by the EPA is 150 micrograms per cubic meter. Since 1985, there were only three days that Portland exceeded federal standards for particulate matter. Figure 51 shows the highest values found for any site in the Portland area. Because the standard allows for one exceedance, the second highest 24-hour value is used to evaluate compliance with federal standards (DEQ, p. 13). The second highest value peaked in 1991 at 159 micrograms per cubic meter.

## Carbon Monoxide (CO)

Carbon monoxide is a colorless, odorless gas that binds tightly to hemoglobin in the body. Hemoglobin is the red pigment in the blood that moves oxygen from the lungs to the rest of the body. CO takes the place of oxygen in

**Figure 51: Annual Values for Particulate Matter Portland Metro Area 1994**



Micrograms per Cubic Meter
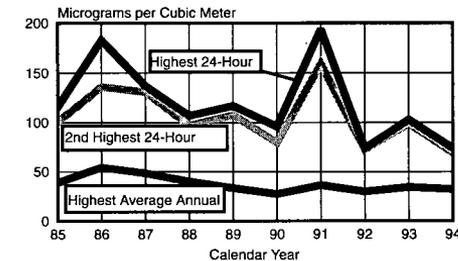
SOURCE: Oregon Department of Environmental Quality (DEQ), *1994 Air Quality Annual Report*.
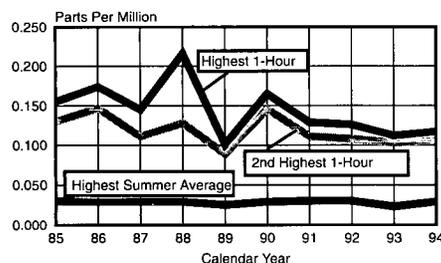NOTE: Values seen at any site in Portland area.

**Figure 52: Annual Values for CarbonMonoxide Portland Metro Area 1994**
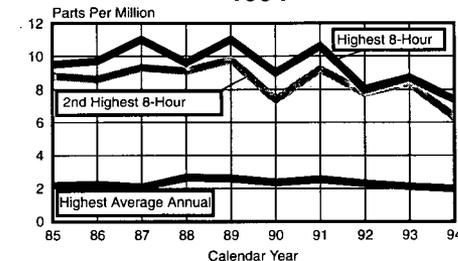


Parts Per Million

SOURCE: DEQ, *1994 Air Quality Annual Report*.
NOTE: Values seen at any site in Portland area.

**Figure 53: Summer Values for Ozone Portland Metro Area 1994**



SOURCE: DEQ, *1994 Air Quality Annual Report.*
NOTE: Values seen at any site in Portland area.

the hemoglobin and prevents the vital function of this oxygen-carrying molecule.

Carbon monoxide primarily comes from gasoline-powered monitor vehicles. Wood stoves and slash burns also contribute to the total tons emitted.

● The 8-hour average standard set by EPA is 9 parts per million. In the past ten years (1985-1994), there were nine days when the Portland area exceeded federal standards for carbon monoxide. However, Portland has not exceeded these standards since 1991. This is largely due to the standards for auto emis-

sions specified by federal laws and augmented by state programs (DEQ, p. 23).

● Figure 52 shows the highest eight-hour values for any site in the Portland area. Like particulate matter, each community can exceed the federal standard in one day during the year (up to 3 years in a row) and remain in compliance with the standards. The second highest 8-hour line shows that Portland was near or exceeded standards between 1985-1989. By 1990, the second highest 8-hour value dropped significantly to 7.4 ppm. In 1994, this value dropped to its lowest point in the past ten years (6.3 ppm).

## Ozone

Ozone is a pungent, toxic, and highly reactive form of oxygen that can irritate the nose, throat, and lungs. Ozone affects the respiratory system and can cause sore throat, chest pain, cough, and headaches in individuals involved in strenuous physical activity or in people with pre-existing respiratory diseases (DEQ, p. 34).

Ozone is a component of smog. Ozone is produced when enough volatile organic compounds and nitrogen oxides are present in combination with high temperatures. Usually the temperature must exceed 95

degrees Fahrenheit before ozone becomes a serious threat.

● The 1-hour average for ozone is .12 parts per million. In the past ten years, there were 14 days when the Portland area exceeded federal standards. Like PM10 and CO, the Portland area is allowed one day a year when it can exceed federal standards. Because of this allowance, Portland has been in compliance with federal standards since 1992.

● Figure 53 shows the highest values for ozone found in the summer months. The second highest value peaked in 1986 at .147 parts per million. In 1994, the second highest value was .106 parts per million and was recorded on July 20, 1994.

The data presented here show that air quality has improved over the last few years and meets federal standards. Maintaining a high air quality will be important for future livability in this area.

## How Should This Benchmark Change in the Future?

The target for this benchmark is continous improvement from the present condition.

# Population Growth

**Benchmark #72 Monitor the percentage of the Portland Metropolitan area population growth since 1990 occurring within the City of Portland.**

*Why It's Important*

It is vital that Portland, the region's central city, maintain its growth, sharing in the region's prosperity. Continued population and economic growth in Portland must be encouraged.

*Population Growth*

In the early 1900's, the Portland area experienced tremendous population growth. In 1900, the population in Portland was 90,000. By 1916, the population tripled to 264,000 (Abbott, p. 29). By 1930, the population in the Portland area grew to 301,815. Multnomah County was the fastest growing county in Oregon, with 352% population growth between the years 1890 to 1930. (Abbott, p. 40)

● Fifty years later, the 1980 Census found 1,050,418 people living in the tri-county area. Figure 55 shows that the largest percentage of the population lived in Multnomah County
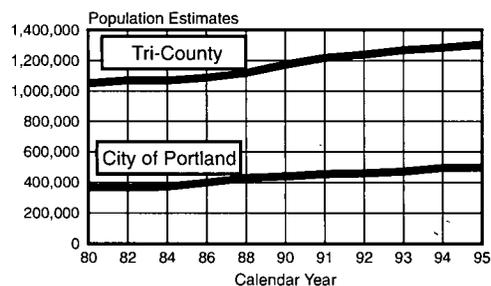
**Figure 54: Population Growth Tri-County Area 1980-1995**



SOURCE: Center for Population Research and Census. *Population Estimates for Oregon: July 1, 1995.* Portland State University.

(54%). Clackamas and Washington counties had the same percentage of the total population (23%). By 1995, the tri-county population grew to approximately 1,205,100. However, the percentage of residents in Multnomah County declined to 48% of the total tri-county area, with Clackamas and

Washington Counties continuing to share about equally in the remainder of regional growth.

● The 1980 Census found 368,139 people living within the city limits of Portland. By 1995, the population grew 35% to nearly half

**Figure 55: Population Growth
City of Portland, Tri-County
1980-1995**

Population Estimates

| | |
|---|---|
| 1,400,000 | Tri-County |
| 1,200,000 | |
| 1,000,000 | |
| 800,000 | |
| 600,000 | City of Portland |
| 400,000 | |
| 200,000 | |
| 0 | |

80  82  84  86  88  90  91  92  93  94  95
Calendar Year

SOURCE: Center for Population Research and Census. *Population Estimates for Oregon: July 1, 1995*. Portland State University.

*How Should This Benchmark Change in the Future?*

As the Portland Multnomah Progress Board refines the benchmarks relating to land use, targets will be set consistent with Metro's 2040 Plan.

a million (497,600). Figure 55 shows the relationship of the Portland population to the total tri-county area. As seen in the figure, any increases in the City of Portland were also mirrored in the tri-county area as a whole. In 1995, 38% of residents in the tri-county area were living within the City of Portland boundaries.

# Downtown Employment

**Benchmark #73 Increase the percentage of total jobs in the Portland Metropolitan area located in downtown Portland.**

*Why It's Important*

Maintaining a healthy downtown core is vital to the continued economic prosperity of Multnomah County. Downtown employment must grow at a rate at least equal to the region in order to maintain its vitality and in order to implement the vision of the 2040 Plan.

*Downtown Employment Growth*

As the Portland Multnomah Progress Board refines the land use related benchmarks in cooperation with Metro in the next year, this information will be completed.

## Benchmark #104 Increase the percentage of people who rate their streets acceptably clean.

### Why It's Important

As discussed in Benchmark #61, neighborhood livability is important in assessing the quality of life in a given area. Included in perceptions of neighborhood livability is the cleanliness of streets. Unclean streets give the impression of urban decay; people associate dirty streets with higher crime, low-incomes, and lack of pride by residents in their neighborhood.

### Street Cleanliness

● Since 1991, the City of Portland Auditor's Office has conducted an annual *Citizen Survey*, which includes questions about street cleanliness. Fifty-seven percent of Portland residents rated street cleanliness as "good" or "very good" in 1991. This percentage increased to 60% in 1992 and 61% in 1993.

● In 1994, the *Citizen Survey* expanded to include all of Multnomah County. In that year, 63% of Multnomah County residents rated the cleanliness of their streets as "good" or "very good". This percentage

declined in 1995 to 61%. However, only 12% rated street cleanliness as "very good".

● Residents of Portland and Gresham rate the cleanliness of their streets lower than residents in smaller Multnomah County cities. Nearly one-fourth of residents in Troutdale, Fairview, Maywood Park, and Wood Village rate street cleanliness as "very good".

● In the City of Portland, the Southwest is rated highest (68%) while the North is rated lowest (53%) as seen in Figure 56.

### How Should This Benchmark Change in the Future?

A target will be established for this benchmark in the coming year.

**Figure 56: "Good" Rating of Street Cleanliness Multnomah County 1995**
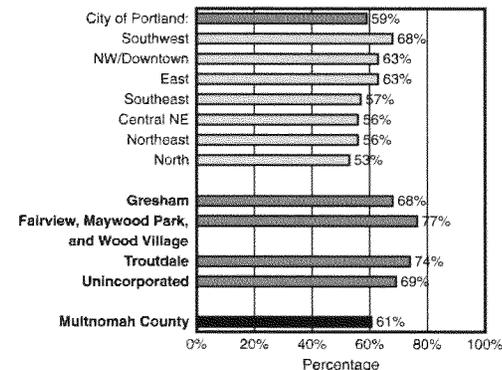
SOURCE: *1995 Portland Multnomah County Citizen Survey.*

# Other Quality of Life Benchmarks

The following benchmarks will be studied further in conjunction with the 2040 Plan.

**#31**   Decrease the percentage of people who are homeless.

**#58**   Increase the percentage of homeowners and renters below median income spending less than 30% of their household income on housing.

**#60**   Increase the percentage of the population that lives within one-half mile walk of all of the following: park/ open space, transit service, elementary service, neighborhood commercial node, and bike paths.

**#65**   Increase the percentage of surfaces where there is little or no graffiti.

**#67**   Decrease the carbon dioxide emissions as a percentage of 1990 emissions.

**#68**   Increase the percentage of samples per year the community's rivers and streams meet government in-stream water quality standards.

**#69**   Decrease annual water usage per capita.

**#70**   Decrease the number of energy units used per capita.

**#71**   Decrease the pounds of solid waste landfilled per capita per year.

**#75**   Increase the annual per capita public and private financial support of the arts in Multnomah County.

# BENCHMARKS...
## PROGRESS MEASURED ONE STEP AT A TIME

# Introduction to the Governance Benchmarks

Government is not just a group of legal public entities. It is the people of the community who, through their own actions and by choosing leaders, carry out their vision for the future.

This group of benchmarks relates to both individual citizens and the governmental entities they have created in our community.

*Our information on social capital lacks trends, but seems positive.*

Social capital represents the time and talent that residents contribute to the community without being paid. There are many opportunities in Multnomah County for citizens to contribute to charities, civic groups, and governments.

The data on volunteerism is sometimes contradictory, with some analysts believing that fewer people spend time on community activities, while others debate that volunteerism is on the rise. We know that over 57% of the members of our community volunteer annually; over 32% donate more than fifty hours a year. We will study this further, as we explore local trends in social capital.

Most of the citizens who volunteer as advisors to Portland and Multnomah County gov-ernment tell us they are pleased with their experience and would do it again. This is important, because government is calling on more and more citizens to volunteer, as budgets are cut back.

*Government finance indicators are positive.*

The City of Portland and Multnomah County governments have received many awards for the way they perform their finance, budgeting, and auditing operations. Much of the information presented in this report is derived from their publications and the work of their staffs. In addition, Multnomah County's Tax Supervising and Conservation Commission (TSCC) maintains useful information on the budgets of all 38 general purpose and special purpose governments in the County. The financial health of these entities is exemplified in their excellent bond ratings.

The cost of government is decreasing significantly; all indicators in this area are positive. Per capita taxes, percent of household income spent on taxes, and expenditures by governments are all down. Expenditures on physical infrastructure are varied, with recent large investments by Tri-Met in the light rail system and the City of Portland for mid-county sewers. We will work with Metro and TSCC to study this issue further.

*The use of benchmarks is growing.*

Seven of the largest public entities in Multnomah County use performance measures of some type in their planning and budgeting systems. This includes the cities of Portland and Gresham, Multnomah County, the Port of Portland, Tri-Met, the Portland Public Schools, and the Multnomah Education Service District.

In refining the benchmarks, the Portland Multnomah Progress Board has reached out to all public entities in the County to coordinate data collection, provide assistance in using the benchmarks in their own organizations, and to ensure that our government benchmarks are appropriate to all public entities.

We will strengthen these partnerships as we move toward more collaboration in achieving the benchmarks.

# Government Efficiency

**Benchmark #19 Increase the percentage of government permits issued within the target time period or less including business licenses, building permits, water, plumbing/electrical/heating and ventilation, and conditional use/zoning/variances.**

*Why It's Important*

One of cities' most important responsibilities in Oregon is the issuance of permits for activities, building construction, and uses of land and buildings. These permits ensure that local laws are enforced relating to personal and public safety. Citizens are entitled to prompt and efficient review of their requests for such permits, and this benchmark measures the time period taken by the city to process requests.

*Permitting*

This benchmark relates only to Multnomah County cities. The Portland Multnomah Progress Board is working with them to develop a process to collect and report this information.

*How Should This Benchmark Change in the Future?*

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Total Taxes Per Capita

## Benchmark #21 Decrease total taxes per capita.

*Why It's Important*

This benchmark measures the tax burden of Multnomah County residents. A greater tax burden could result in similar efforts to curtail tax spending as witnessed by the passage of Measure 5. More importantly, by working to decrease total taxes per capita, government is forced to become more efficient.

*Total Taxes Per Capita*

● Table 20 shows per capita taxes for Multnomah County residents in 1993. It shows that the largest part of the tax burden is for federal taxes. After the federal government, property taxes represent the next greatest share of taxes paid. However, property taxes make up only 15% of total taxes paid.

● Figure 57 shows the average taxes per $1,000 for schools and non-schools. Because of Measure 5, taxes for schools have declined significantly since 1990. Taxes for non-school entities have increased to the maximum of $10 per $1,000.

**Table 20**
**Per Capita Taxes**
**Multnomah County**
**1993**

| Type of Tax | Amount |
| --- | --- |
| Federal income taxes | $4,520.00 |
| State income tax | $826.30 |
| Property tax | $958.00 |
| Business income tax | $39.33 |
| County gas tax | $12.36 |
| State gas tax | $100.49 |
| Weight mile tax | $34.60 |
| Miscellaneous | $20.15 |
| **Total** | $6,511.23 |

SOURCE: Federal taxes: *Tax Foundation*. State income tax: *Oregon Dept. of Revenue*. Property and Business income tax: *Tax Supervising & Conservation Commission*. Gas and weight-mile taxes: *Oregon Dept. of Transportation*. Miscellaneous: *Various* as above.

NOTE: The above does not include fees and Tri-Met tax.

**Figure 57**
**Per Capita Property Taxes**
**Multnomah County**
**1990-1995**

Property Taxes Per $1,000

$20.00

$15.00

Schools

$10.00

Non-Schools

$5.00

$0.00

90      91      92      93      94      95

Year
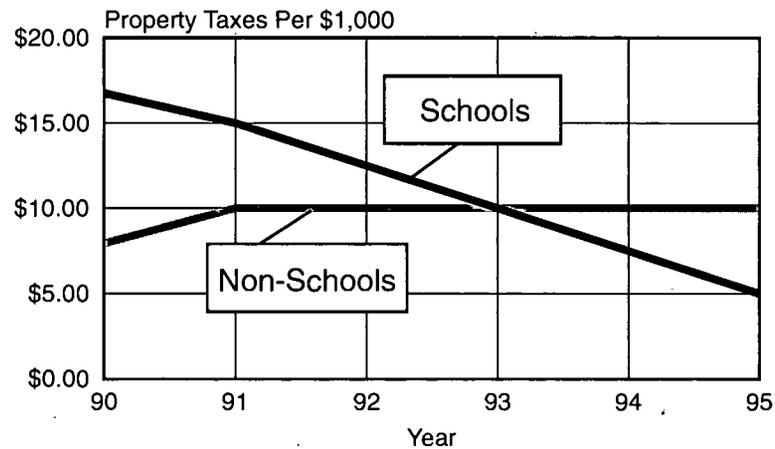
SOURCE: *Oregon Blue Book, 1995-96.*

*How Should This Benchmark Change in the Future?*

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Business Taxes and Fees

**Benchmark #23 Decrease the percentage of federal, state, and local business taxes and fees per dollar of business income.**

*Why It's Important*

Business prosperity is the lynchpin of a healthy economy. Business investments in equipment, facilities, employees, and other purchases drive economic prosperity. Taxes paid by business should be adequate to cover their costs to society, but not so excessive that they divert investments from the private sector.

*Information Problems*

This is an extraordinarily difficult benchmark to measure. Business tax systems at all levels of government are complex and difficult to access given the privacy constraints of such information. The Portland Multnomah Progress Board will explore ways to develop this analysis in the coming year.

# COLLABORATION

## Strategic Investment Program (SIP)

In 1995 Multnomah County signed tax abatement agreements with two companies, based on their future performance under the County's benchmarks. It was the first time anywhere in the nation that benchmarks had been used in such a program.

Until 1996 the State of Oregon allowed counties to grant tax abatements to capital intensive firms, those firms that must invest a great deal in facilities and equipment and are therefore subject to high local property taxes. The Strategic Investment Program (SIP) gave counties flexibility in how the program could be implemented. Multnomah County chose to base its program on the benchmarks and link the abatement to the companies's performance in linking new jobs to targeted populations of unemployed and underemployed people, with a focus on welfare recipients and minorities.

The SIP program expects to create almost 2,000 new jobs. The County has an ambitious program of public information, training, and mentoring to ensure that those jobs are taken and maintained by the target population.

# Public Infrastructure

## Benchmark #24 Monitor the real per capita capital outlays for public infrastructure.
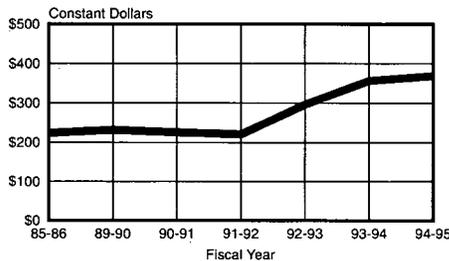
### Why It's Important

Airports, roads, school facilities, mass transit, and sewers are a few examples of public infrastructure. Public infrastructure in Multnomah County benefits all residents in the area and is owned by everyone. Maintaining and expanding this infrastructure is important for our safety and economic vitality.

### Capital Outlay Expenditures

Capital outlay expenditures include public infrastructure and other items such as buildings and equipment.

● Figures 58-60 show the per capita capital outlay expenditures for city residents of Portland, Gresham, and Troutdale. These include expenditures for schools, city government, Multnomah County, and other special districts including Tri-Met, the Port of Portland, and Metro.

● In 1993-94, City of Portland residents paid $357 per capita for capital outlay expenditures for all local governments combined. This amount increased to $369 per capita the

**Figure 58: Per Capita Expenditures for Capital Outlays for All Governments City of Portland 1985-1995**

SOURCE: *TSCC Database, 1985-1995.*

**Figure 59: Per Capita Expenditures for Capital Outlays for All Governments City of Gresham 1985-1995**
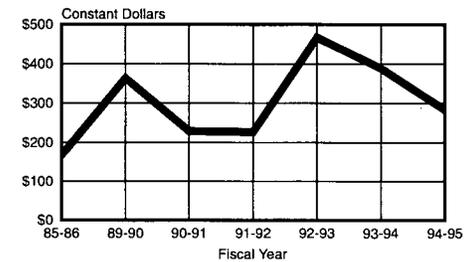
SOURCE: *TSCC Database, 1985-1995.*

**Figure 60: Per Capita Expenditures for Capital Outlays for All Governments City of Troutdale 1985-1995**
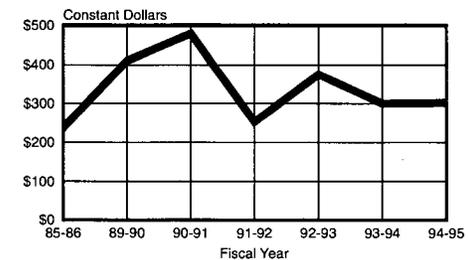
SOURCE: *TSCC Database, 1985-1995.*

following year. Some examples of capital outlays in 1993-94 include expansion of Portland International Airport and sewer installations in mid-Multnomah County.

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

> **Tax Supervising and Conservation Commission**
>
> The Multnomah County Tax Supervising and Conservation Commission (TSCC) was created in 1919 as a result of state legislation. There is no other such commission in the State of Oregon.
>
> The role of TSCC is to review and certify budgets for all general and special purpose local government entities in Multnomah County. There were 38 such entities in 1995 including the City of Portland, Multnomah County, Metro, Tri-Met, and Portland Public Schools. (See sidebar in Benchmark #82, page 121.)
>
> TSCC reviews all budgets for compliance with budget laws and holds public hearings on the budgets of the nine largest entities in Multnomah County. These public hearings are a way for residents to attain information and express their views about how governments should spend their money. In addition, TSCC offers advice and technical assistance.

# Voter Participation

***Benchark #74 Increase the percentage of registered citizens over 18 who vote.***

## Why It's Important

The privilege of voting is a value so great in our democracy that groups have long fought for the right, however, not everyone exercises this right. While voter turnout is greatest for presidential elections, it drops considerably for state and local elections. Low voter turnout means that a party or group of individuals can affect the outcome of the election more easily than when voter turnout is high. Thus, some groups will have more influence on the direction of our local government because others have not chosen to exercise their right to vote.

## Voter Participation

● Since 1970, participation in general elections ranged from 68% to 84% in the State of Oregon. Participation is higher in presidential election years.

● Figure 61 shows that the percentages of Multnomah County citizens who voted in general elections between 1986 and 1994 are lower compared to the State of Oregon. In 1986, 67.2% of Multnomah County citizens



**Figure 61: Registered Citizens Who Voted in General Elections Multnomah County, State of Oregon 1986-1994**
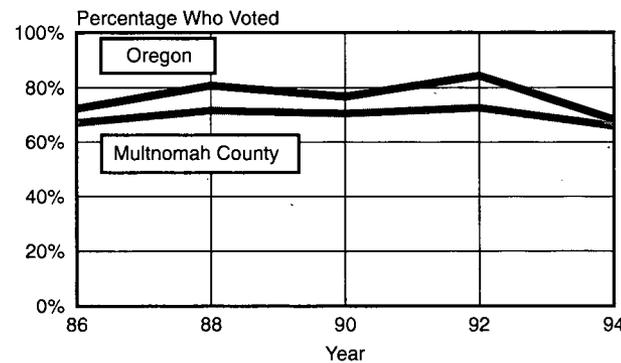
SOURCE: *Multnomah County Elections Data.*

voted in the general election. By 1994, the percentage who voted decreased slightly to 66%.

● Table 21 shows that the percentage of *eligible* voters who voted in the special elections of 1995 ranged from 28% to 57%.

Generally, voters are more likely to vote in a general election compared to a special election.

Table 21 shows that the number of registered voters varied among elections. Depending on the election, ballots were not always sent to

**Table 21**
**Registered Citizens Who Voted in Special Elections**
**Multnomah County**
**1995**

| Election | Number of Registered Voters | Number of Voters Who Voted | % of Registered Voters Who Voted |
|---|---|---|---|
| March 28, 1995 | 384,186 | 107,251 | 28% |
| May 16, 1995 | 367,164 | 151,219 | 41% |
| September 19, 1995 | 296 | 114 | 38% |
| November 7, 1995 | 373,824 | 145,846 | 39% |
| December 5, 1995 | 284,027 | 163,181 | 57% |

SOURCE: *1995 Multnomah County Elections Data.*
NOTE: All elections in 1995 were special elections.

**Figure 62: Ratings of Mail Voting**
**Multnomah County**
**1995**



Very good 51.6%
Very bad 4.3%
Bad 4.5%
Neither 10.5%
Good 28.6%
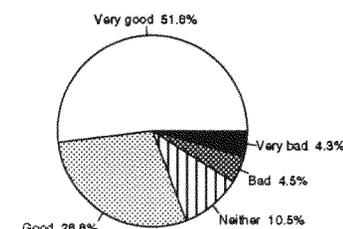
SOURCE: *1995 Portland Multnomah County Citizen Survey.*

everyone in Multnomah County. In some elections, only a subset of Multnomah County voters by geographic location were eligible to participate.

All elections were conducted by mail in Multnomah County in 1995 including the primary election for the U.S. Senate race conducted in December. Until 1995, however, primary and general elections were conducted at polling sites.

● What do Multnomah County residents think of mail voting? In 1995, the *Citizen Survey* asked residents to rate voting by mail. As seen in Figure 62, over 50% of residents felt mail voting was "very good".

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Government Performance

## Benchmark #76 Increase the percentage of people who feel local government is doing a good job at providing services.
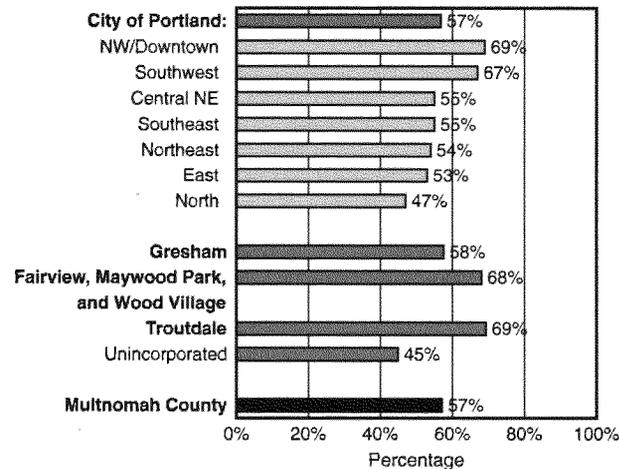
### Why It's Important

Local government services span a broad range of areas from police, fire, elections, parks, public health, libraries, and street maintenance. Public confidence in local government is a testament to government's effectiveness in providing these services.

### Ratings for Local Government

● In 1995, 57% of those surveyed in Multnomah County said that local government is doing a "good job"; six percent felt that government does a "very good job" in providing services. Ratings of local government services improved from the previous year. In 1994, 52% of those surveyed felt that government does a "good job".

● Women tend to rate local government slightly better than men.

**Figure 63: "Good" Ratings of Local Government Multnomah County 1995**

| Area | Percentage |
|------|-----------|
| City of Portland: | 57% |
| NW/Downtown | 69% |
| Southwest | 67% |
| Central NE | 55% |
| Southeast | 55% |
| Northeast | 54% |
| East | 53% |
| North | 47% |
| Gresham | 58% |
| Fairview, Maywood Park, and Wood Village | 68% |
| Troutdale | 69% |
| Unincorporated | 45% |
| Multnomah County | 57% |

SOURCE: *1995 Portland Multnomah County Citizen Survey.*

• Older people tend to rate local government better than younger people.  In fact, those 30 and older progressively rate local government higher as they age.

• Education makes a difference in how people rate local government. College graduates give much higher ratings to government than those who have high school or some college education.

• Differences in ratings are seen by geographic area as shown in Figure 63.  Ratings for the City of Portland vary from 69% in NW\Downtown to 47% in North Portland. Troutdale (population 10,495) has a higher percentage (69%) of those rating government as "good" compared to surrounding cities, although this rating is only slightly better than the combined ratings for the Cities of Fairview, Maywood Park, and Wood Village (combined population of 7,470).

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Citizens Advising Their Government

***Benchmark #77 Increase the percentage of volunteers in a governmental advisory capacity who are satisfied that their recommendations were carefully and respectfully considered and who are satisfied with their experience.***

## Why It's Important

Voting is not the only way that people can set the direction of their local government. They can serve on advisory committees established to advise local government officials so that:

- Governments can tap the experience and expertise of citizens in the community.
- Citizens can learn how government functions through their participation.
- Citizens can help make tough decisions given scarce resources.
- Government is held accountable.

Are citizens satisfied with this experience? Do they believe their recommendations are carefully and respectfully considered? This benchmark considers these questions.
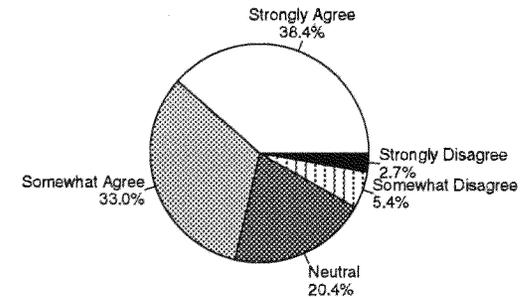
## Citizen Advisors

In 1995, the Portland Multnomah Progress Board, in conjunction with Multnomah County, conducted a mail survey of citizens who serve as advisors to the City of Portland and Multnomah County. The results of this survey are as follows:

- Figure 64 shows the response given by advisory volunteers to Multnomah County and the City of Portland who responded to this statement: How strongly do you agree that your recommendations are carefully and respectfully considered? Over 70% said they "somewhat" to "strongly agree" with this statement. Less than 10% of those returning the survey said they disagreed.

- Citizens could feel that their recommendations are considered but be dissatisfied with their experience while serving on an advisory board. However, Figure 65 shows that over 75% are satisfied with their experience as a volunteer.



**Figure 64: Volunteers Who Feel Their Recommendations are Carefully and Respectfully Considered Multnomah County and City of Portland 1995**
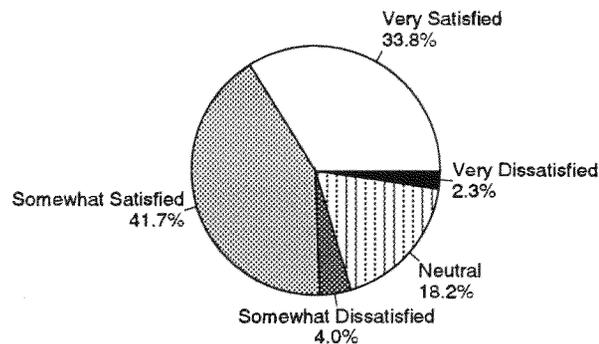
Strongly Agree 36.4%
Strongly Disagree 2.7%
Somewhat Disagree 5.4%
Neutral 20.4%
Somewhat Agree 33.0%

SOURCE: *1995 Portland Multnomah Volunteer Survey.*

- Would citizens serve on other advisory committees? Those who serve on boards for Multnomah County and the City of Portland say a resounding "yes". Why? According to those surveyed, because "they like being involved", "it's a great learning experience", and "it helps set the direction of local government".

**Figure 65: Volunteers Who Are Satisfied
with Their Experience
Multnomah County and City of Portland
1995**

Very Satisfied
33.8%

Very Dissatisfied
2.3%

Somewhat Satisfied
41.7%

Neutral
18.2%

Somewhat Dissatisfied
4.0%

SOURCE: *1995 Portland Multnomah Volunteer Survey.*

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board
will study additional data relating to this
benchmark before a target is set.

### Citizen Involvement Committee for Multnomah County

Multnomah County government created
the Citizen Involvement Committee (CIC)
in 1984 by referendum. This committee
fosters citizen involvement in the process
of governing Multnomah County.

The mission of the Citizen Involvement
Committee is three-fold:

1.  To inform residents of their opportu-
    nities and rights in the decision-
    making processes of all aspects of
    county government.
2.  To create meaningful citizen involve-
    ment opportunities.
3.  To integrate citizens in the decision-
    making process.

The Citizen Involvement Committee
presents openings for boards and commit-
tees through cable television. In total,
there are 32 committees and boards for
Multnomah County including the Animal
Control Advisory Committee, the Food
Service Advisory Committee, and the
Library Advisory Committee.

# *Volunteers*

**Benchmark #78 Increase the percentage of people over 18 who volunteer at least 50 hours of their time per year to civic, community, church, or non-profit activities.**

## Why It's Important

Volunteering can benefit individuals, non-profit agencies, and the community as a whole. Volunteering can also help volunteers to feel good about themselves for giving back something to their community.

## Volunteerism

In a 1994 national survey conducted by the Independent Sector, a non-profit membership organization formed to help non-profits, the following conclusions were drawn about volunteerism in America:

● Forty-eight percent of Americans volunteered in 1993.

● The average hours volunteered per week was 4.2, the same as in 1991.

● The most significant increases in volunteering occurred among senior citizens aged 75 and older (36% volunteered, up from 27%

in 1990) and among divorced, separated and widowed persons (40% volunteered, up from 36% in 1990).

● The fastest and most significant way to increase volunteerism is to ask more people to help. People are more than four times as likely to volunteer when asked than when they are not. Among the 45% of respondents who were asked to volunteer in the past year, 82% actually did. Among the 54% who were not asked, only 21% volunteered.

● Certain demographic groups are asked to volunteer less often: African-Americans and Hispanics; families with household incomes under $20,000; single people; people who are divorced, widowed or separated; and persons who are not employed. But, when asked, these groups volunteer at a similar or even higher rate than the national average.

Oregonians appear to volunteer at a rate higher than the national average. According to the *Oregon Population Survey*, approximately 32% of Multnomah County residents surveyed in 1992 volunteered more than 50 hours in a year. In total, 57.1% of respondents indicated they volunteered in 1992. This is higher than the national average cited by the Independent Sector. Those between the ages of 45-54 were most likely to volunteer compared to any other age group.



**Figure 66: Volunteer Hours Multnomah County 1992**

0 hours 42.9%

1-49 hours 24.9%

50+ hours 32.2%
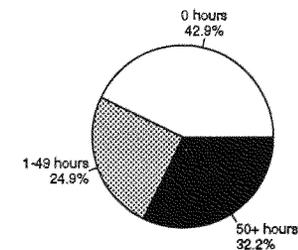
SOURCE: *1992 Oregon Population Survey.*

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# COLLABORATION

## AmeriCorps

AmeriCorps was created by President Clinton to promote and encourage service to communities. In total, there are approximately 20,000 young Americans "who put their lives on hold to serve in AmeriCorps. In exchange for their work, they receive a small living allowance, limited health care coverage and had been promised up to $9,450 in college tuition credits." (Editorial, p. B6)

In Portland, AmeriCorp volunteers have tackled a wide variety of projects. They have tutored inner-city students, weatherized older homes, and restored parks. In addition, they have been involved in lead-paint poisoning abatement.

## The Volunteer Center

The purpose of the Volunteer Center is to increase and strengthen volunteering within Clackamas, Multnomah, and Washington counties. One of the Center's many functions is to match the daily needs of local non-profit public and private agencies with the skills, interests, and available time of those citizens (young and old) who want to volunteer.

The typical volunteer referred through the Volunteer Center is a white female between the ages of 25 and 40 with some college education. However, the number of youth seeking volunteer opportunities has increased over time. A possible reason for this includes community service requirements being established in Oregon's schools and colleges.

More individuals find the Volunteer Center through the telephone book than through any other single source. In addition, the Volunteer Center advertises for available positions in the Living Section of the Oregonian under the heading Volunteer Connection on Mondays, through other media, and on the Internet: http://www.aracnet.com/~vcoregon/.

In total, the Volunteer Center serves 295 non-profit organizations in the tri-county area. The Volunteer Center is a United Way Agency.

# Government Use of Benchmarks

***Benchmark #79 Increase the percentage of government organizations that use measurable results, incorporate them into budget and/or planning processes, and collect supporting data.***

## Why It's Important

Historically, government organizations have measured their performance based on inputs (dollars spent, number of employees, units of production, etc.). Benchmarks provide another way of measuring performance by examining outcomes rather than inputs. Government organizations that use benchmarks to measure performance examine the outcome of a given program instead of the process for achieving the outcome.

## Government Organizations

In Multnomah County, there are 38 governmental entities. In 1995, only five organizations (13.2%) display performance measures in their budget documents:

> City of Portland
> Multnomah County
> City of Gresham
> Port of Portland
> Tri-Met

Please note that the other Multnomah County governmental entities may, in fact, be using performance measures. However, they do not display the performance measures within their budget documents.

## How This Benchmark Should Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

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### Multnomah County Government

Multnomah County government adopted its own benchmarks on February 17, 1994. County commissioners, department and division managers, and citizens were involved in developing benchmarks for this governmental entity. In total, Multnomah County has 85 benchmarks, 12 of which are designated as "urgent". As much as possible, Multnomah County's benchmarks are aligned with benchmarks established by the Oregon Progress Board and the Portland Multnomah Progress Board.

Multnomah County's use of benchmarks is extensive. Each division and department throughout Multnomah County government is assigned benchmarks for accountability. These benchmarks are incorporated into the budget process and supporting data for the benchmarks are collected. Multnomah County reports on the progress of their benchmark targets in their annual budget report and through Benchmark Forums held on topics throughout the year.

---

**Benchmark #80 Increase the percentage of community organizations that use measurable results, incorporate them into budget and/or planning processes, and collect supporting data.**

*Why It's Important*

Benchmarks are more than tools used for government planning; they are tools for the community as a whole. No one entity is responsible for achieving the benchmark targets. We are all responsible. But individual organizations can help in achieving the benchmark targets by using benchmarks for internal planning processes. Benchmarks, in these organizations, become beacons guiding the way for that organization and for the community as well.

*How Should This Benchmark Change in the Future?*

At present, we do not have data that measure the extent to which businesses and organizations use benchmarks. The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

## Legacy Health System

Legacy Health System has always been a mission-driven organization, inheriting two strong church-sponsored missions from Emanuel and Good Samaritan Hospitals, two community-service oriented missions in its suburban hospitals, Meridian Park and Mount Hood, and a home care agency begun many years ago to serve the home health needs of this community, the Visiting Nurse Association.

Legacy's vision is "to create a healthy community with health status exceeding similar communities of the world. In order to achieve this, Legacy will collaborate with other healthcare providers, schools, employers, governments, religious organizations and community groups...". Legacy's commitment to improving the health of its community goes beyond the traditional definition of charity care.

This year, for the first time, Legacy will be looking at its programs to determine more clearly how its programs serve community needs. This assessment will ask specifically: "How does the program serve an identified unmet need? How does it align with the Portland Multnomah and Oregon Benchmarks? How was the unmet need identified?" The benchmarks are seen as an increasingly valuable tool in establishing goals for collaboration, innovation, and contribution.

Legacy participates in OHSIC, Oregon Health Systems in Collaboration. OHSIC has helped bring attention and support to the use of benchmarks in developing, improving, and monitoring the outcomes of community service programs.

# Bond Ratings

## Benchmark #81 Improve general obligation bond ratings for local government entities.

### Why It's Important

Local governments often pay for capital expenditures over time by selling bonds to investors. An investor's willingness to purchase local government bonds depends on his/her perception of the fiscal soundness of the governmental entity. High ratings suggest to investors that a governmental entity is unlikely to default on its obligations. In addition, a government with a high investment bond rating will likely pay a lower interest rate on its debt.

### General Obligation Bond Ratings

John Moody first established the system of rating securities in 1909. Today, Moody's and Standard and Poor's are the leading independent organizations which rate corporate and municipal bonds in the United States.

● In Multnomah County, there are 38 governmental entities. Not all have debts outstanding or bond ratings established.

**Table 22**
**Ratings for General Obligation Bonds for Local Governments**
**Multnomah County**
**1995**

| Government: | Moody | S & P | Target | Government: | Moody | S & P | Target |
|---|---|---|---|---|---|---|---|
| **Regional:** | | | | **K-12 Schools:** | | | |
| Metro | Aa | AA+ | AA | Centennial | A | | AA |
| Port of Portland | | AA+ | AA | Corbett | Aaa* | | AA |
| Tri-Met | AA | AA+ | AA | David Douglas | | AA- | AA |
| **Multnomah County:** | AA1 | | AAA | Gresham Barlow ** | | | |
| **Cities:** | | | |   High School | AAA * | AAA * | AA |
| Gresham | AA | AA- | AA |   Grade School | A1 | A+ | AA |
| Portland | AAA | | AAA | Portland | Aa | AA- | AA |
| Troutdale | A | | AA | Reynolds | AA | | AA |
| **Community Colleges:** | | | | Riverdale | A | | AA |
| Mount Hood | AA | | AA | Sauvie Island | A | | AA |
| Portland Community | A1 | AA- | AA | | | | |

SOURCE: *Bond Ratings Telephone Survey, April 1995.*

NOTES:

* Bond ratings can generally be raised through various "credit enhancements" including the purchase of bond insurance, letters of credit or by setting aside specific reserves. Corbett and Gresham-Barlow school district ratings were raised to AAA through the purchase of bond insurance. The City of Portland is the only entity within Multnomah County that has a non-credit enhanced bond rating of AAA.

** Gresham Barlow is a merger of several school districts. The bond ratings existed before the merger.

● Table 22 shows the general obligation bond ratings for those entities rated in Multnomah County.

● Only two entities in Multnomah County can realistically expect to achieve the highest available ratings: City of Portland and Multnomah County. These entities have the population, assessed valuation, and diversity of resources to warrant the AAA. As seen in Table 22, the City of Portland has already achieved the AAA target.

● Smaller governmental entities can realistically expect to achieve a AA rating without using credit enhancements. Although the ratings can fall as low as a "C" or "D" in the case of a default, all governmental entities in Multnomah County have at least an "A" rating.

## How Should This Benchmark Change in the Future?

Target ratings for each governmental entity are presented in the table.

# Dollars Spent for Local Government Services

### Benchmark #82 Monitor the per capita dollars spent for local government services.

### Why It's Important

Recent citizen dissatisfaction with taxes culminated in the passage of Measure 5, a tax limitation initiative, in 1990. Although there is diversity among citizens concerning the selection and extent of government services, there is widespread agreement that whatever services government provides should be delivered as efficiently as possible. Per capita expenditures of government are a measure of such efficiency.

### Local Government Expenditures

There are 38 governments and special districts in Multnomah County, each with power to assess taxes. These are listed on page 121. A citizen can be taxed by up to eight of these, depending on where in the county he or she resides.

● Figure 67 shows the per capita expenditures of the largest entities within Multnomah County from 1985 to 1994. The overall pattern varies among entities. For most, there is a steady incline since 1990. The City of Portland reflects the adverse

effects of the recession of 1990, followed by economic growth after that, with recent cost-cutting programs reflected in recent years. The Portland Public Schools, and other county school districts, show the only steady decline in expenditures since 1990.

● The City of Portland's per capita expenditures are the highest in the county, reflecting the broad spectrum of services provided by the city. The more specialized services a government provides, the lower per capita expenditures are likely to be, with the exception of elementary and secondary education.

● Figure 68 illustrates the total per capita public expenditures for residents of three cities in Multnomah County: Gresham, Portland, and Troutdale, This total usually includes county taxes, city taxes, Metro, Tri-Met, the Port of Portland, a school district, the county-wide educational services district, and a community college district. Per capita expenditures for residents of the City of Portland were $2,341 in 1993/94. In Gresham, they were $1,991, and in Troutdale they were $1,878 in the same year.

● Taxing entities in Multnomah County provide a wide array of services. Figure 69 shows those services and their percentage of the total. Education accounts for almost one-



**Figure 67:  Per Capita Local Government Operating Expenses Selected Entities, 1985-1994**
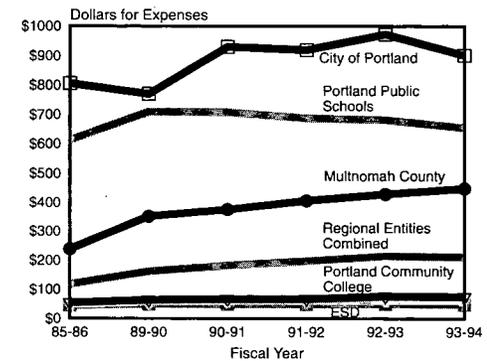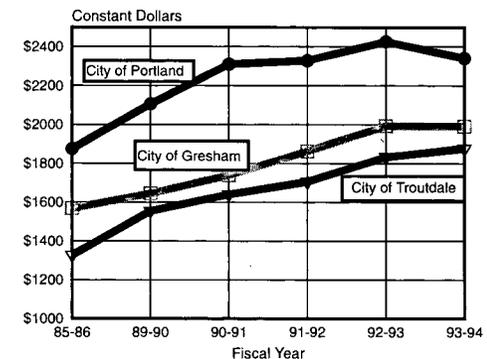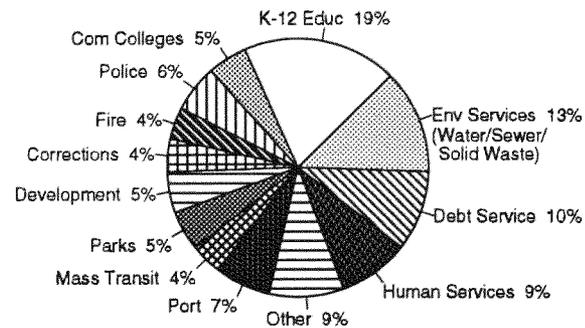


**Figure 68:  Per Capita Local Government Operating Expenses Combined for Selected Cities 1985-1994**

SOURCE: *TSCC Database, 1985-1995.*

## Figure 69: Local Government Expenditures Multnomah County 1994-1995

K-12 Educ 19%
Com Colleges 5%
Police 6%
Fire 4%
Corrections 4%
Development 5%
Parks 5%
Mass Transit 4%
Port 7%
Other 9%
Env Services 13% (Water/Sewer/ Solid Waste)
Debt Service 10%
Human Services 9%

SOURCE: *TSCC Database, 1985-1995.*

quarter of all local public expenditures for services. Public safety follows at 14 percent, with environmental services close behind (13 percent). Transportation services are next at 11 percent. More local funds are spent on debt service than for human services.

*How Should This Benchmark Change in the Future?*

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

### Government Entities in Multnomah County

*City Governments*
Fairview, Gresham, Maywood Park, Portland, Troutdale, Wood Village

*County Government*
Multnomah County

*Regional Government*
Metro

*Regional Special Districts*
Port of Portland, Tri-Met

*School Districts*
Bonneville, Centennial, Corbett. David Douglas, Gresham/Barlow, Mount Hood Community, Multnomah Education Service District, Parkrose, Portland Community College, Portland, Reynolds, Riverdale, Sauvie Island

*Special Districts (Eight)*
Primarily water and fire districts serving unincorporated areas.

# Household Income Spent for Property Taxes

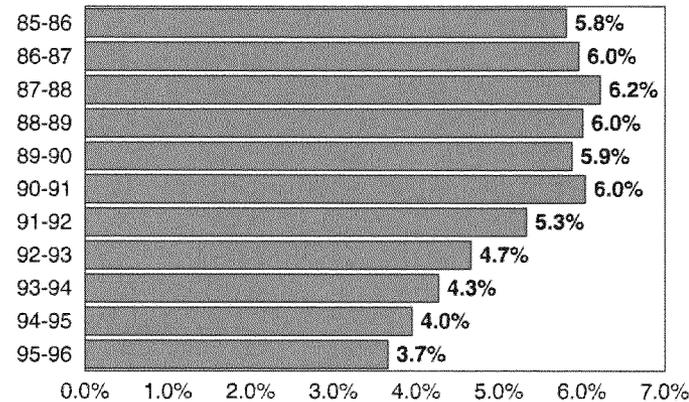## Benchmark #103  Monitor the percentage of per capita income spent on property taxes.

### Why It's Important

Citizens want a balance between the amount of taxes paid and the services government provides. Tax equity has become an important issue nationally as well as in Multnomah County. Many complicated factors contribute to any study of tax equity, however, the Portland Multnomah Progress Board has selected this benchmark, because it focuses on the basic capacity of each taxpayer to contribute to government in the context of his or her other financial needs.

### Property Taxes

In 1990, a tax limitation initiative was passed into law which limits the amount of property taxes that can be collected to pay for local government services. Termed "Measure 5", this initiative reduces the amount of property taxes used for funding local government services, especially schools. In addition, much of the responsibility of funding schools shifted from the local property taxpayer to the state.

**Figure 70: Percentage of Per Capita Personal Income Spent on Property Taxes**
**Multnomah County**
**1985-1996**

| Year | Percentage |
|------|-----------|
| 85-86 | 5.8% |
| 86-87 | 6.0% |
| 87-88 | 6.2% |
| 88-89 | 6.0% |
| 89-90 | 5.9% |
| 90-91 | 6.0% |
| 91-92 | 5.3% |
| 92-93 | 4.7% |
| 93-94 | 4.3% |
| 94-95 | 4.0% |
| 95-96 | 3.7% |

SOURCE: *TSCC Database, 1985-1996.*

• Per capita personal income spent on property taxes in Multnomah County has declined 40% since its peak in 1988. Since 1990 when Measure 5 was passed, it has declined 38%. This means that as property value and income have increased due to economic growth, the tax burden has declined significantly.

## Figure 71: Residential and Commercial Property Taxes
## Multnomah County
## 1990-1996
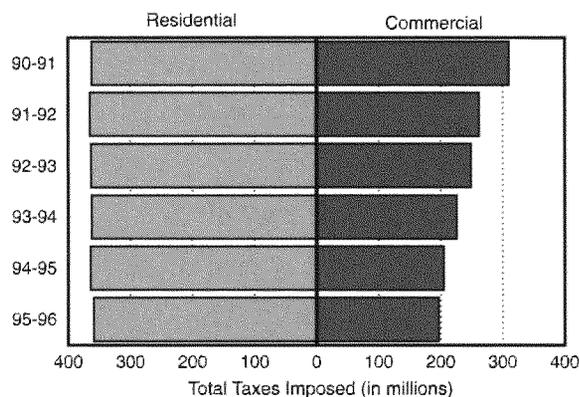


SOURCE: *TSCC Database, 1990-1996.*

● Growth in residential assessments has outpaced commercial assessments since 1990. The actual amount of tax money collected from residential owners has declined slightly, while total commercial assessments have declined one-third. In 1990-91 residential owners paid approximately 54% of total property taxes. By 1996 their portion had grown to 64%.

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Benchmarks...
## PROGRESS MEASURED ONE STEP AT A TIME

# Introduction to the Public Safety Benchmarks

*Citizens are feeling safer; crime rates are stabilizing.*

Surveys show that Multnomah County citizens feel increasingly safe in their neighborhoods during the day and at night, and crime statistics indicate that they are justified in feeling so. Perceptions of safety vary widely among neighborhoods, as do crime rates. However, we are seeing a steady leveling and decrease in most crimes throughout the county, most dramatically in previously high crime areas.

*The system is changing.*

In 1994 Oregon voters passed an initiative requiring mandatory incarceration for certain crimes. This resulted in a state legislative program that will significantly change state and local corrections programs, requiring increased local jail capacity and alternative programs to incarceration. In response to the initiative, Multnomah County created the Public Safety Task Force, a diverse group of stakeholders in the public safety system, brought together to better understand the system as well as to plan for impending changes. The plan created by the Task Force became an application to the state for implementation funds; Multnomah

County will go to the voters in 1996 for financial support to expand this system.

The notable effect of the work of the Task Force, and its successor, the Local Public Safety Coordinating Council, will be to better coordinate the elements of the system - law enforcement, courts, prosecutors, corrections, treatment programs, crime victims, and other stakeholders. This is a necessary task in light of public intolerance of crime and diminished government resources.

*The policy continuum extends from prevention to public protection.*

Limited resources for public safety programs bring into focus policy debates concerning how funds are best spent. At one end of the continuum are those who believe that prevention is the best treatment, and that public dollars should be directed to ameliorate the risk factors that are so clearly present in those who commit crimes. At the opposite end of the continuum are those who advocate incarceration as the only method to prevent and discourage repeated criminal behavior. Somewhere between the two lies the optimum combination of programs to both prevent criminal behavior and protect citizens from repeat offenders. It is a deli-

cate balance, and citizens are demanding that funds be spent in a way that accomplishes both aims.

*We must improve our ability to evaluate the success of public safety programs.*

Our efforts to understand the systemic process of both perpetrator and victim in the public safety system are in their infancy. We must do a better job of mapping the system and identifying the, often inadvertent, impacts of changes to one program in the system on all the others. We must develop information systems that serve system-wide needs and provide decision makers with better information about the causes and effects of their decisions.

Improved information need not require extensive investments in technology; it need only be capable of tracking individuals through the system and indicating the results of various programs. Program evaluation is critical in a system where investments must be carefully made, and impacts are often long term and difficult to track.

# Neighborhood Safety

**Benchmark #84 Increase the percentage of people who feel safe walking alone in their neighborhood.**

## Why It's Important

There are some who believe that all human beings should have a minimally acceptable standard of food, shelter, education, and healthcare. Along with these necessities of life, human beings should feel safe in their home environment. This benchmark measures the level at which people feel safe in their neighborhood.

## Feelings of Safety in Our Community

● A greater percentage of people in Multnomah County felt safe in 1995 (84% in day, 40% in night) when compared to 1994 (81% in day, 38% in night). There are differences in the perception of safety among groups:

● Men feel more safe in their neighborhoods than women.

● The more educated a person, the more likely he/she is to feel safe.

**Figure 72: People Who Feel Safe Walking in Their Neighborhood Multnomah County 1995**
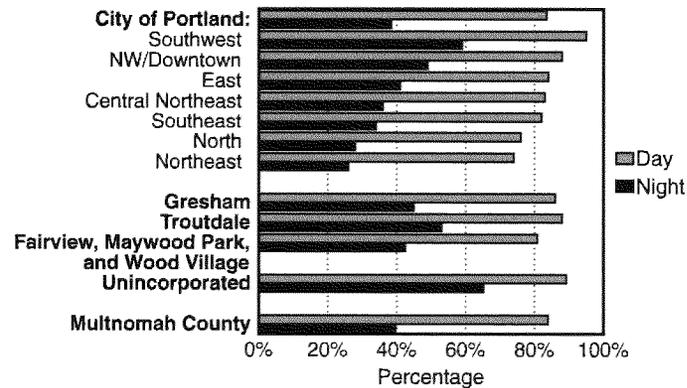


SOURCE: *1995 Portland Multnomah County Citizen Survey.*

● Persons 60 and older feel less safe than younger people.

● Those who have been victims of crime feel less safe in their neighborhoods than those who have not.

● As Figure 72 shows, people feel safer during the day (up to 95% safe in the Southwest). When night falls, however, so does the percentage of people who feel safe. In Northeast Portland, only 26% of people feel safe in their neighborhoods at night.

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

**Public Safety Terms ...**

Words used in the public safety benchmarks are carefully chosen for accuracy and statistical validity. Correct interpretation depends on accurate definition of terms. In describing a wide range of criminal activity and its consequences, the word "crime" is often misinterpreted. It may be described as "victimization rate" when discussing the total number of crimes committed, whether reported by the victim to authorities or not. "Reported crimes" are only those reported to the police and entered into their database as a crime. "Crime rate" is used to compare the number of crimes reported to total population, usually per 1,000 or 100,000 people. As people move through the criminal justice system, they may be described as "perpetrators", "arrestees", "offenders", "inmates", "felons", "parolees", and "ex-offenders"; each has a specific meaning. In the discussion of the benchmarks, we have been careful to define our terms to match the intent of the benchmark, as well as the data used to report the trend.

# Crimes Motivated by Prejudice

**Benchmark #85 Monitor the reported number of crimes against people or property motivated by prejudice.**

*Why It's Important*

A church that is vandalized, a person threatening to inflict serious injury on another because of sexual orientation, and a group assaulting someone because of racial differences are all examples of crimes motivated by prejudice. These incidents are not just examples of criminal behavior; they are also a reflection of attitudes and tolerance of others in a community.

A decrease in reports does not necessarily mean there is a decrease in actual crimes. Some individuals are reluctant to report crimes for fear of retaliation by the offender or for other reasons. In addition, a reluctance to report crimes can also be a reflection of a lack of public confidence in law enforcement agencies. Nevertheless, this benchmark is important in understanding how individuals in a community value the unique differences of others.
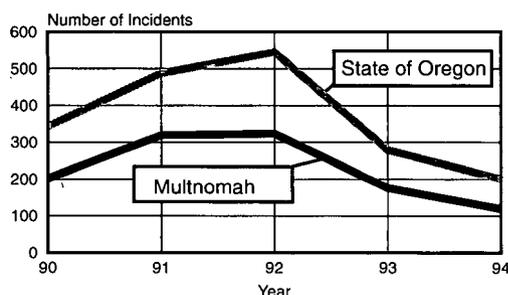
Table 23
Reported Incidents of Crime Motivated by Prejudice
Multnomah County
1990-1994

| Crime | 1990 | 1991 | 1992 | 1993 | 1994 |
|---|---|---|---|---|---|
| Race | 138 | 185 | 162 | 88 | 55 |
| Sexual Orientation | 26 | 50 | 64 | 45 | 32 |
| Religion | 3 | 10 | 30 | 15 | 5 |
| National Origin | 23 | 43 | 15 | 10 | 10 |
| Other | 12 | 31 | 52 | 18 | 17 |
| **Total** | **202** | **319** | **323** | **176** | **119** |

SOURCE: *Law Enforcement Data System. 1990-1994.*

**Figure 73: Reported Incidents of Crime Motivated by Prejudice Multnomah County, the State of Oregon 1990-1994**

Number of Incidents

[Chart showing two lines: "State of Oregon" and "Multnomah" with y-axis from 0 to 600 and x-axis years 90, 91, 92, 93, 94]

Year

SOURCE: *Law Enforcement Data System, 1990-1994*

## Bias Crimes

In 1989, the Oregon Legislature passed a bill requiring law enforcement agencies to report crimes motivated by prejudice to the Law Enforcement Data System (LEDS). This information is then collected and reported quarterly and annually by LEDS.

As seen in Table 23, bias crime data are categorized into five areas: race, sexual orientation, religion, national origin, and other.

● There are more incidents of crime motivated by racial prejudice than any other category. In 1994, this represented 46% of all crimes motivated by prejudice. Sexual orientation was the second highest bias crime reported in Multnomah County, representing 27% of all crimes motivated by prejudice.

● Figure 73 shows that reported crimes increased to a high of 323 in 1992. The year 1992 was the high point for the State of Oregon as well. In that year, 545 incidents of crimes motivated by prejudice were reported throughout the State of Oregon. This was the year that Ballot Measure 9, restricting the rights of gays and lesbians, was rejected by Oregon voters.

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Domestic Violence-Child Abuse

**Benchmark #86A Monitor the reported number of children abused and neglected per 1,000 children under the age of 18.**

## Why It's Important

Child abuse is an unforgettable experience that can remain with individuals throughout their lifetime, but child abuse has even farther reaching consequences. Victims abused as children often grow up to become abusers themselves. Without treatment, child abuse can be perpetuated across generations.

While our ultimate goal is to reduce the number of child abuse victims, we know that there are many cases that go unreported. Encouraging residents to report child abuse can motivate families to seek help. Therefore, we will monitor this benchmark because while we want the number of victims to decrease, we also want a higher proportion of victims to report the crime.

## Child Abuse

In 1971, the Child Abuse Reporting Law was enacted in Oregon. Under the law, certain professionals must report suspected cases of child abuse to the State Department of Services to Children & Families (SCF), formerly known as Children's Services Division.

Child abuse is defined as assault, mental injury, rape, sexual abuse, sexual exploitation, negligent treatment or maltreatment, and threatened harm to a child.

● In 1994, SCF received 26,436 reports of child abuse and neglect in the State of Oregon, involving 7,946 children. Approximately 20% (total is 1,586) of these victims lived in Multnomah County as seen in Figure 74. This is 17% lower than in 1993 when there were 1,911 reported victims of child abuse.

● Figure 75 shows the victim rate per 1,000 children in Multnomah County. The figure shows that the rate declined to 10.8 in 1994. This is lower than at any other time in the past five years.

● Figure 76 shows that younger children (aged 0-4) are more likely victims of abuse than other age groups.

● Figure 76 shows that there is little difference between the sexes for younger victims. By age 10, however, females are more likely to be victimized than males.



**Figure 74: Number of Child Abuse Victims Multnomah County 1984-1994**
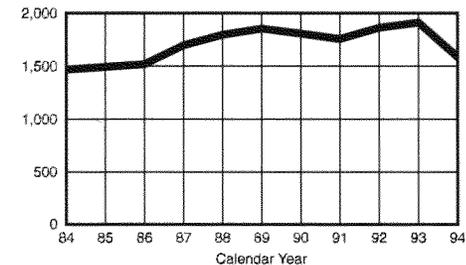
SOURCE: Children's Services Division, *Child Abuse and Neglect Report,* 1994.



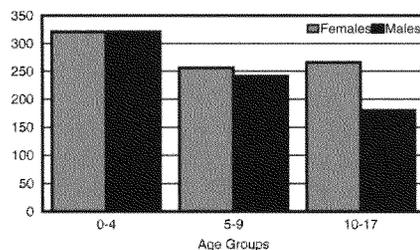**Figure 75: Victim Rate per 1,000 Children Multnomah County 1990-1994**
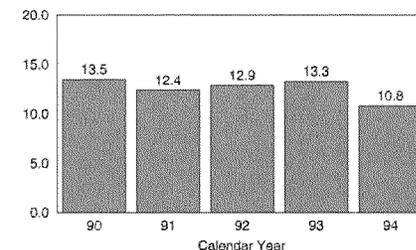
SOURCE: Children's Services Division, *Child Abuse and Neglect Report,* 1994.

## Figure 76: Child Abuse Victims by Age and Sex Multnomah County 1994



SOURCE: Children's Services Division, *Child Abuse and Neglect Report*, 1994.

## How Should This Benchmark Change in the Future?

The Oregon Progress Board established a 2000 target of 6.0 per 1,000 persons under the age of 18. The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# COLLABORATION

## CARES Northwest

Since its inception, CARES Northwest has provided services to victims of child abuse. Their goal is to assess whether child abuse has occurred, with minimal trauma to the child victim. Previously, some children had to undergo numerous interviews and examinations to confirm abuse. With trained interviewers and medical personnel, CARES Northwest provides complete physical examinations and documentation that, in some cases, saves children the emotional trauma of a judicial proceeding. The documentation also assists in providing needed child protection and intervention.

CARES Northwest also ensures appropriate follow-up mental health services for the families. Financial assistance for evaluation is available for families who cannot pay for services. There is no charge for the Multnomah County Family Support Mental Health Services

CARES Northwest sees on average 100 to 120 children per month from the tri-county area. It is a collaborative effort of

Emanuel Children's Hospital, Oregon Health Science University's Doernbecher's Children's Hospital, and Kaiser Permanente.

In addition to assessing child abuse, CARES Northwest has trained thousands of mental health professionals, physicians, law enforcement personnel and State Office for Services to Children and Family staff on child abuse.

## Keeping Kids Alive

In April, 1996, a state summit on Child Fatalities was convened. This summit brought together representatives from local Commissions on Children and Families, Services to Children & Families, Health Departments, Law Enforcement Agencies, District Attorney Offices, Head Start, Medical Providers, and Public Schools. The goal of the summit was to spark local collaborative efforts to reduce child fatalities.

The summit addressed ways to reduce child fatalities, including deaths caused from child abuse.

# Domestic Violence-Partner Abuse

***Benchmark #86B Monitor the reported incidents of spouses or domestic associates abused per 1,000 people.***
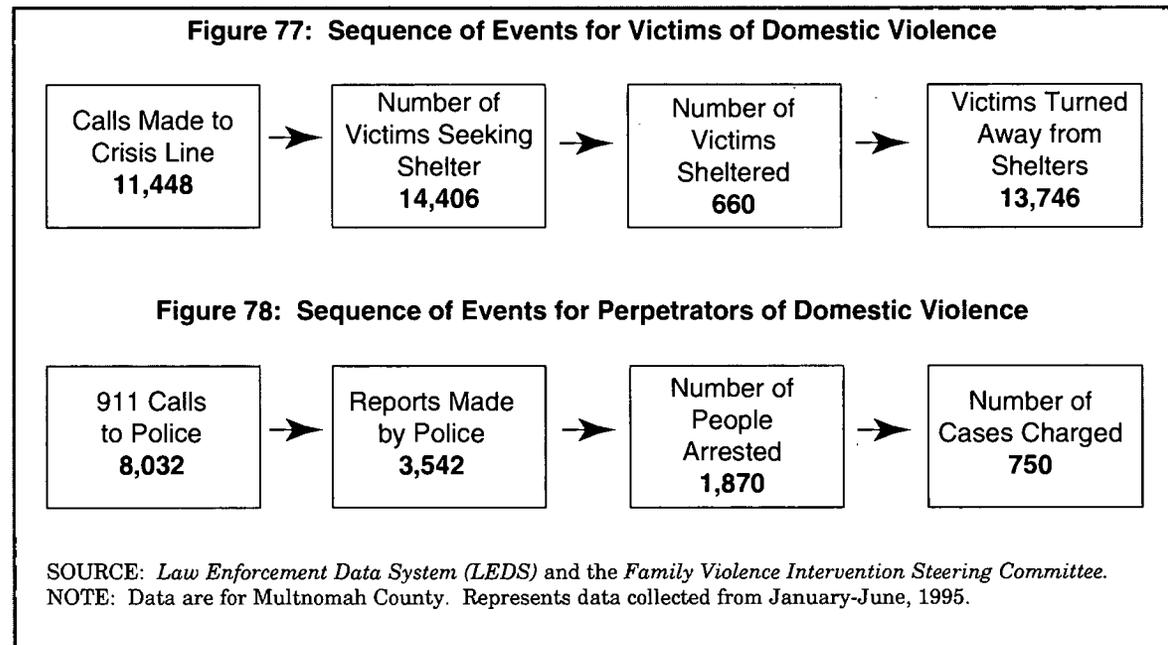
*Why It's Important*

Domestic violence is defined as the threat of, or actual physical or sexual abuse to, an individual in an intimate relationship. This includes spouses, people living together (heterosexual or homosexual), or those who had an intimate relationship in the past. This benchmark is important because of its effects on family stability and the fear which prevents many victims from seeking help.

*Domestic Violence*

In 1990, the FBI determined that every 15 seconds a woman is battered in the United States. Annually, there are 4,000 homicides of domestic violence in the U.S.

With the enactment of ORS 181.055, Oregon's law enforcement agencies began reporting incidents of domestic violence in 1994. A total of 7,762 domestic disturbances were reported between January and June, 1995 in Oregon. Out of this number, 46% occurred in Multnomah County (3,542 in total - see Figure 78).

**Figure 77:  Sequence of Events for Victims of Domestic Violence**

| Calls Made to Crisis Line **11,448** | → | Number of Victims Seeking Shelter **14,406** | → | Number of Victims Sheltered **660** | → | Victims Turned Away from Shelters **13,746** |

**Figure 78:  Sequence of Events for Perpetrators of Domestic Violence**

| 911 Calls to Police **8,032** | → | Reports Made by Police **3,542** | → | Number of People Arrested **1,870** | → | Number of Cases Charged **750** |

SOURCE: *Law Enforcement Data System (LEDS)* and the *Family Violence Intervention Steering Committee.*
NOTE:  Data are for Multnomah County.  Represents data collected from January-June, 1995.

Some facts of domestic violence are listed below:

● Women are more likely to be victims of domestic violence than men.  According to the Family Violence Intervention Steering Committee for Multnomah County, over 90% of domestic violence victims are women.

● The largest percentage of partner abuse is targeted toward a girlfriend or boyfriend.

Victims of boyfriends are most likely to be age 16 to 24.  Victims of spouses or ex-spouses are likely to be age 20 to 34. (Zawitz, p. 25)

● According to the Oregon Department of Services to Children & Families, in 70% of child abuse cases, domestic violence is also occurring.  Even more startling is the percentage of child abuse fatality cases where domestic violence also occurred: 100%.

● Domestic violence spans generations. According to an article in Ladies Home Journal, "...sons who witness their fathers' violence are 10 times more likely to abuse their wives than sons who do not." (July 1995)

● Domestic violence is a serious impediment to women who are trying to get off welfare. The Taylor Institute of Chicago reports that men often use violence as a way to prevent their spouses or partners from obtaining economic independence.

● Studies show that alcohol is involved in more than 50% of all domestic violence incidents. Alcohol is identified in many cases of violence, especially homicides. (Office of Alcohol and Drug Abuse Programs, Nov/Dec. 1995, p. 19)

## How Should This Benchmark Change in the Future?

Reducing the reported rate of domestic violence cannot be the present goal, because not all domestic violence incidents are reported. In fact, reporting one's partner to the police for violence is often an insurmountable barrier toward seeking help. Calling the police is usually the culmination of a long term pattern of abuse. At present,

our goal should be to encourage the reporting of domestic violence so that victims and their families can seek the help needed to stop the cycle of abuse.

# COLLABORATION

## Family Violence Intervention Steering Committee

Its mission is to "provide an inter-agency forum for developing, implementing, and assessing a coordinated response to domestic violence in Portland, Multnomah County, Oregon." It consists of 30 to 40 people who meet monthly to address issues of family violence. The Steering Committee provides a forum to:

• Identify and address problems
• Collaborate to design and implement new programs
• Prioritize program development
• Facilitate recognition and accountability among agencies
• Correct imbalances in the system
• Cooperate, rather than compete, to seek new funding
• Develop community needs assessments
• Increase funding for domestic violence programs
• Coordinate data collection

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

In October 1995, the Family Violence Intervention Steering Committee and other community groups embarked on a campaign to increase awareness of domestic violence. Termed "There's No Excuse Oregon", this campaign drew media attention to the issues of domestic violence. Signs and posters were seen on buildings, billboards, and buses featuring domestic violence.

## ADT Security Systems Pendant

Multnomah County is fortunate to be chosen by ADT Security Systems as a test site for a Domestic Violence Pendant. Victims can activate the pendant if they perceive a threat to their safety while in their household. When activated, the pendant summons the police to the household.

# Domestic Abuse-Elder Abuse

### Benchmark #86C Monitor the reported incidents of elderly abused per 1,000 elders.

### Why It's Important

Elder abuse is the physical, financial, or emotional abuse of individuals 65 years of age or older. Like child abuse and spousal abuse, it is important as a benchmark because it affects the lives of some of Multnomah County's most vulnerable residents. Victims of elder abuse are often caught in situations where they are helpless or incapable of asking for help.

As the population ages, incidents of elder abuse are likely to increase as well. Those 85 and older are the fastest growing population group today and, at the same time, they are among the most vulnerable. By monitoring this benchmark, we can determine the extent of the problem today and develop policies and programs to minimize the impact of elder abuse in the future.

### Elder Abuse

In 1981, the State Legislature enacted the Elder Abuse Mandatory Reporting Law. This law requires certain professionals to report incidents of elder abuse. In 1995 the Oregon Legislature enacted the Elder Abuse Prevention Act which allows those 65 and older to secure a restraining order in cases of abuse (ORS124.050). In the same year, the Oregon Legislature enacted a law that allows seniors to sue for economic damages for physical and fiduciary abuse.

● Reports of elder abuse in Multnomah County are on the rise (see Figure 79). In 1990-91, Multnomah County's Aging Services Division investigated 1,321 complaints of elder abuse to those aged 60 and older. By 1994-95, the number of investigations increased by 55% to 2,052. In contrast, the population of elders (60+) declined from 101,659 in 1990 to 98,280 in 1995.

● In Multnomah County, 73% of elder abuse cases occur in the community at large. Only 27% of cases occur in nursing facilities.

● Figure 80 shows the types of mistreatment for elder abuse in the State of Oregon. The greatest percentages of mistreatment for elder abuse are self-neglect (41.8%), physical abuse (22.4%), and financial exploitation (19.0%).

● According to the National Center on Elder Abuse, the greatest percentage of perpetrators in the United States are adult children (35%). Other relatives (13.6%) and spouses



**Figure 79: Elder Abuse Investigations Multnomah County 1990-1995**
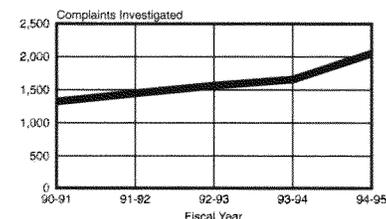
SOURCE: Aging Services Department, *Elder Abuse Briefing Before Multnomah County Commission, October 12, 1995*, p. 4.



**Figure 80: Types of Mistreatment for Elder Abuse State of Oregon 1995**

Abandonment 1.4%
Financial exploitation 19.0%
Self-neglect 41.8%
Sexual abuse 0.6%
Verbal abuse 7.6%
Neglect 7.2%
Physical abuse 22.4%
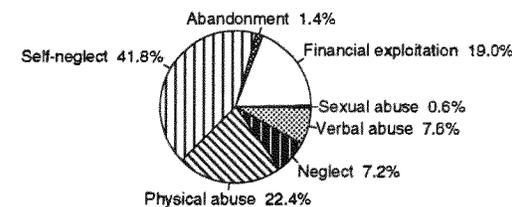
SOURCE: *Community Protective Service & Elder Abuse Report.*

(13.4%) also make up sizeable proportions of the total number of perpetrators.

## How Should This Benchmark Change in the Future?

Monitoring this benchmark will be key to understanding elder abuse in the future. Although some incidents of elder abuse are reported, we suspect there are many more cases that go unreported. Moreover, determining the number of elder abuse cases is a challenge among several law enforcement agencies. However, Multnomah law enforcement agencies are working to find a way to get an unduplicated count of elder abuse.

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# C O L L A B O R A T I O N

### The Gatekeeper Program

Since its inception in February 1987, the Gatekeeper Program has recruited over 50 partners in the community to locate vulnerable, older adults (60+) who may be in need of special services. These partners represent businesses and organizations who allow their employees to be trained as "gatekeepers". Gatekeepers are on the watch for individuals 60 years of age and older who may be experiencing physical, mental, emotional, financial, or environmental problems. To date, 3,500 individuals have been trained as Gatekeepers.

Gatekeepers make referrals on at risk seniors to Multnomah County Senior Aging Services Department. Case managers are assigned to assess the senior's needs and offer services. Over 2,500 referrals have been received from Gatekeepers.

Some services available to seniors include:

Transportation
Healthcare
In-home support
Housing
Financial help
Support counseling

Multnomah County Aging Services Department administers and operates the Gatekeeper Program but other participating agencies include Friendly House Senior Center, YWCA East County, Hollywood Senior Center, Neighborhood House, Northwest Pilot Project, Portland Impact, St. Johns YWCA, Urban League and Aging Services Department Branch Offices.

# Reported Incidents of Crime

**Benchmark #87 Monitor the reported number of crimes per 1,000 population.**

## Why It's Important

A community's crime rate is one of the best indicators of its livability. People value personal safety greatly, and when they feel threatened, other valuable community assets become secondary. Crime rates affect personal decisions about where to live and work. High crime rates can have a devastating effect on a community's prosperity.

## Crime Reporting

Most local police departments report crime data in a uniform format to Oregon and the Federal Bureau of Investigation, thus creating two comparable databases: Law Enforcement Data System (LEDS) and Uniform Crime Reports, respectively.

Crime rate data must be carefully interpreted. There are two important variables that affect the crime rate. First, victimization rates vary greatly among different crimes and among different populations. This is discussed more fully in Benchmark #91. Second, rates of arrest vary according to police initiatives. Occasional "sweeps" of certain illegal activities will produce in-

**Table 24**
**Rate of Crime Incidents Reported Per 1,000 Population**
**Multnomah County**
**1990-1994**

| Year | Total Reports/1,000 | Crimes Against People | Crimes Against Property | Behavioral Crimes |
|------|------|------|------|------|
| 1990 | 181.72 | 30.21 | 106.18 | 45.33 |
| 1991 | 183.74 | 30.04 | 108.23 | 45.47 |
| 1992 | 181.29 | 30.03 | 109.01 | 42.25 |
| 1993 | 177.38 | 29.71 | 105.03 | 42.65 |
| 1994 | 185.25 | 29.89 | 109.55 | 45.81 |

SOURCE: *Law Enforcement Data System*

creased crime reports. An increased ratio of police to citizens may do the same. Successful community policing may also generate more crime reports, as citizens place greater trust in the police to act on reports.

## The Crime Rate

● The Uniform Crime Reports show that the number of reported crimes increased 9% from 1984 to 1993 in the United States. Violent crimes (38.4%) during that time period increased at a faster pace than property crimes (5.4%). (U.S. Department of Justice, p. 58)

● The Law Enforcement Data System (LEDS) shows that the total crime rate per 1,000 increased from 138.69 to 146.02 in the State of Oregon from 1990 to 1994. Increases in property crimes were largely responsible for the increase in the total crime rate.

● In 1994, Multnomah County had the highest number of reported crimes of any county in Oregon, representing approximately 25% of all crimes reported in the State of Oregon. The population in Multnomah County represented 20% of the state population in 1994.

• Table 24 presents crime rates in Mult-nomah County from 1990 to 1994. During this period the crime rate rose 1.94%. The rate for crimes against people decreased 1.06%, while property crime rates increased 3.17%. The behavioral crime rate increased 1.06%.

• Variables affecting the reporting of crime rates make it difficult to draw sweeping conclusions about this data. Changes are slight, except in reported property crime increases.

• Property crimes make up the greatest number of crimes in Multnomah County at 59%. Behavioral crimes are second at 25% and crimes against people constitute 16% of the total.

## How Should This Benchmark Change in the Future?

The Oregon Progress Board has established the following 2000 year targets by types of crime:

| | |
|---|---|
| Crimes against persons | 12.0 |
| Crimes against property | 60.0 |
| Behavioral crimes | 35.0 |

The Multnomah County target for this benchmark will be established in 1996.

## CATEGORIES OF CRIME

**Crimes Against People:** Includes criminal offenses where the victim is present and the act is violent, threatening, or has the potential of being physically harmful. These include:

- Willful murder and non-negligent manslaughter *(Part I)*
- Negligent homicide *(Part I)*
- Forcible rape *(Part I)*
- Other sex crimes *(Part II)*
- Kidnapping *(Part II)*
- Robbery *(Part I)*
- Aggravated assault *(Part I)*
- Simple Assault *(Part II)*

**Crimes Against Property:** Includes offenses that involve taking something of value by theft or deception or destruction of property.

- Burglary *(Part I)*
- Larceny *(Part I)*
- Motor vehicle theft *(Part I)*
- Arson *(Part I)*
- Forgery *(Part II)*
- Fraud *(Part II)*
- Embezzlement *(Part II)*
- Stolen Property Offenses *(Part II)*
- Vandalism *(Part II)*

**Behavioral Crimes:** Includes criminal offenses that violate laws relating to personal conduct, responsibility and public order. Although not necessarily violent, or property offenses in themselves, they may often contribute to other criminal acts.

- Weapons regulation laws *(Part II)*
- Prostitution *(Part II)*
- Drug laws *(Part II)*
- Gambling *(Part II)*
- Crimes against family *(Part II)*
- D.U.I.I (driving under the influence of intoxicants) *(Part II)*
- Liquor laws *(Part II)*
- Disorderly conduct *(Part II)*
- All other offenses *(Part II)*
- Juvenile curfew violations *(Part II)*
- Runaway juveniles *(Part II)*
- Traffic crimes *(Part III)*
- Fish and Game violations *(Part III)*
- Marine violations *(Part III)*

More serious crimes are listed as Part I. Less serious crimes are listed as Part II and III.

SOURCE: *1994 Report of Criminal Offenses and Arrests,* Law Enforcement Data System, Salem, OR.

# Arrests

## Benchmark #88 Monitor the number of arrests per 1,000 population.

### Why It's Important

Whenever a crime is reported to the police, it is counted as one incident of crime activity. Based upon this information, law enforcement agencies develop a plan to locate and arrest the perpetrator of the crime. Data on arrestees can determine specific patterns. Are juveniles being arrested at a greater rate than adults? Are some racial/ethnic minorities arrested more often than others? These are questions considered in this benchmark.

### Arrests

Increases or decreases in the rate of arrests are often affected by law enforcement agency missions. "Missions" are described as concentrated efforts to arrest individuals for certain types of criminal behavior. Typical missions might include arrests for prostitution or drug possession. When a law enforcement agency conducts a mission, the rate of arrests increases.

● Table 25 shows that the rate of arrests per 1,000 population has increased from 54.49 in 1990 to 57.54 in 1994 in Multnomah County.

**Table 25**
**Rate of Arrests Per 1,000 Population**
**Multnomah County**
**1990-1994**

| Year | Total Arrests/1,000 | Crimes Against People | Crimes Against Property | Behavioral Crimes |
|------|---------------------|----------------------|------------------------|-------------------|
| 1990 | 54.49 | 10.50 | 15.38 | 28.62 |
| 1991 | 54.88 | 10.66 | 15.65 | 28.57 |
| 1992 | 55.13 | 10.52 | 15.84 | 28.77 |
| 1993 | 55.86 | 11.25 | 16.58 | 28.04 |
| 1994 | 57.54 | 11.64 | 17.15 | 28.76 |

SOURCE: *Law Enforcement Data System*, 1990-1994.

Increases are seen in arrests for crimes against people and crimes against property. Behavioral crime arrests remain consistent for all five years shown.

● Figure 81 shows the percentage of arrestees in Multnomah County in 1994 according to race/ethnicity. Sixty-two percent of arrestees were white. In comparison, 88% of the population was white according to the 1990 Census. Over one-fifth of arrestees were African-American (21.7%). In contrast,

only 6% of Multnomah County residents were African-American in 1990.

● According to the Multnomah County Department of Juvenile Justice Services, total arrests of juveniles increased by 71% from 1988 to 1994. Behavioral crime arrests of juveniles increased by 94%; person and property crime arrests by juveniles both increased over 50%.

● Between 1991 and 1993, white youth and minority youth (other than African-American
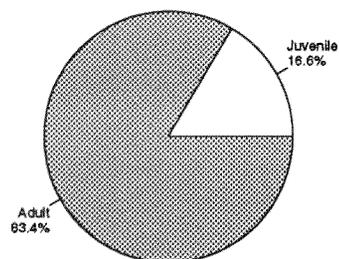
**Figure 81: Percentage of Arrestees
By Race/Ethnicity
Multnomah County
1994**

Whites 62.6%
Indo-Chinese 1.0%
Hispanic 10.7%
Native Americans 2.3%
African-Americans 21.7%
Other Asian 1.7%
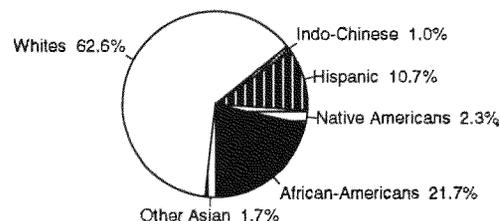
SOURCE: *Law Enforcement Data System*, 1994.



**Figure 82: Percentage of Arrestees
By Age
City of Portland
1995**

Juvenile 16.6%
Adult 83.4%

SOURCE: *Portland Police Data System, 1995.*

youth) accounted for the largest increase in arrests for person and behavioral crimes. African-American youth accounted for the largest increase in arrests for property crimes.

● In 1992, 36% of juveniles arrested were minority youth. This percentage is greater than the actual percentage of minority juveniles (aged 10-17) distributed in the population which was 24%.

● Data on arrestees are not available for 1995 for Multnomah County. However, the Portland Police Bureau has data available for arrestees in the City of Portland. As seen in Figure 82, 17% of arrestees are juveniles.

*How Should This Benchmark Change in the Future?*

We do not suggest setting a target for this benchmark, but rather, this benchmark should be monitored. Of particular concern

are the increased percentages for juvenile offenders. The Oregon Progress Board has set a 2000 target for juvenile arrests to 4.3 for crimes against persons, 18.8 for crimes against property, and 20.0 for behavioral crimes.

# Firearm Injuries and Fatalities

**Benchmark #90 Decrease firearm injuries and fatalities rate per 100,000 population.**

*Why It's Important*

According to the Uniform Crime Reports, 70% of the murders committed in the United States in 1993 were committed by someone using a firearm. Here in Oregon, a little over half of all murders (53%) were committed using a firearm during 1993. The criminal use of firearms is clearly a trend that must be stopped to protect people throughout Multnomah County.

*Firearm Injuries and Fatalities*

Data on firearm injuries are difficult to obtain. However, we do have reliable data on fatalities through death certificates.

● As seen in Figure 83, the rate at which fatalities occur per 100,000 Multnomah County residents showed a downward trend from 1990 to 1992. However, the rate jumped to 15.6 per 100,000 in 1993. This is nearly three times the rate in 1992 (5.63 per 100,000).

**Figure 83: Rates Per 100,00 of Firearm Fatalities Multnomah County, State of Oregon 1990-1993**
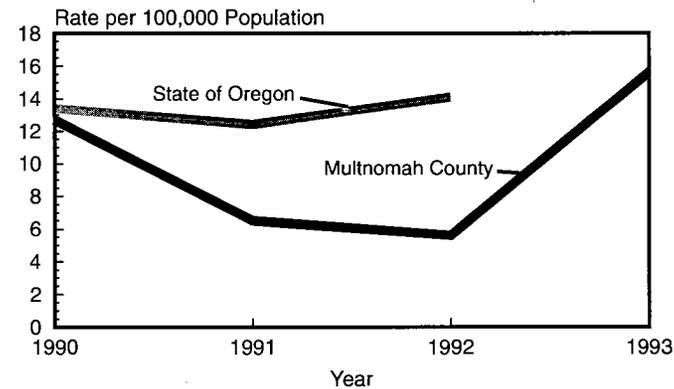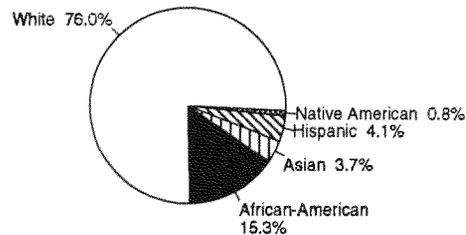


SOURCE: *Death Certificates.*
NOTE: Data are not available for the State of Oregon in 1993.

## Figure 84: Number of Firearm Fatalities by Race/Ethnicity Multnomah County 1990-1993

White 76.0%

Native American 0.8%
Hispanic 4.1%

Asian 3.7%

African-American 15.3%

SOURCE: *Death Certificates.*

## Figure 85: Deaths Due to Firearms by Geographic Area Multnomah County, 1990-1993

City of Portland: 1.5%
Northeast 3.1%
North 1.8%
Southeast 1.5%
NW/Downtown 1.5%
Central NE 1.1%
East 1%
Southwest 0.6%

Gresham 2%
Remainder 2%

Multnomah County 1.6%

0%   0.5%   1%   1.5%   2%   2.5%   3%   3.5%
Percentage of All Deaths Due to Firearms
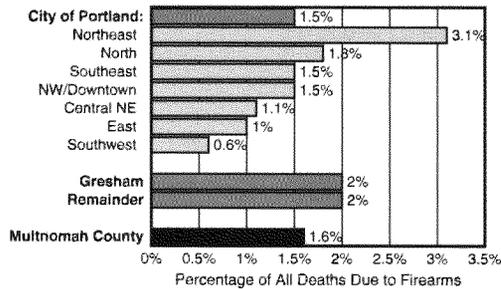
SOURCE: *Death Certificates.*

● Between 1990-1993, there was a total of 243 firearm deaths to Multnomah County residents. As seen in Figure 84, 76% of firearm deaths occurred to whites and approximately 15% occurred to African-Americans.

● As seen in Figure 85, the greatest number of people who died because of a firearm lived in the Southeast and Northeast areas of Portland. Southwest Portland has the fewest number of deaths due to firearms.

## How Should This Benchmark Change in the Future?

The Multnomah County target for this benchmark will be established in 1996.

# Crime Victims

**Benchmark #91 Reduce the number of crime victims per 1,000 population.**

*Why It's Important*

Crimes reported to the police paint only a partial picture of crime activity in a given area, because there are a number of people who choose not to report a crime to police for a variety of reasons.

Is crime increasing or decreasing? Are our efforts to curtail crime effective? The answers to these questions cannot be found by examining just crimes reported to police alone. We need more information about victims and why they choose or do not choose to report a crime to police.

*Crime Victimizations*

According to the *National Crime Victimization Survey* (NCVS), overall crime rates have actually declined or remained stable over the past twenty years (Bureau of Justice Statistics, p. 5). Figure 86 shows that household crimes have showed steady declines. Crimes of violence, however, have remained unchanged over the past twenty years. The number of teenagers involved in violent

**Figure 86: Number of Crime Victims per 1,000 Population by Type of Crime United States 1973-1992**

Victimizations per 1,000 persons age 12 or older

Household Crimes

Crimes of Theft

Crimes of Violence

Year
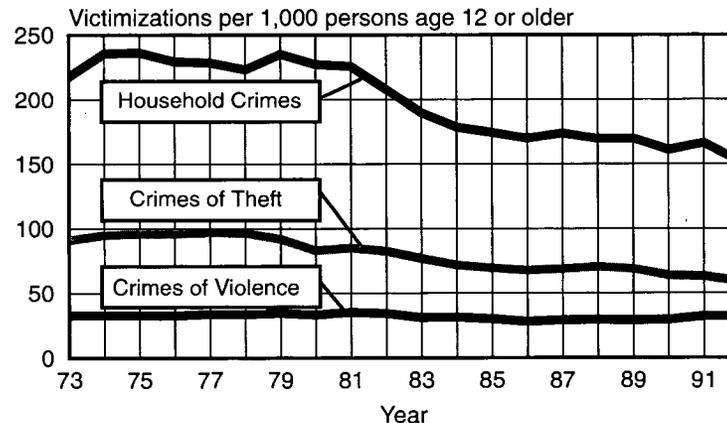
SOURCE: *National Crime Victimization Survey,* 1973-1992.

NOTES: Crimes of violence include rape, robbery, aggravated and simple assaults. Crimes of theft include personal larceny. Household crimes include burglary, larceny, and motor vehicle theft.
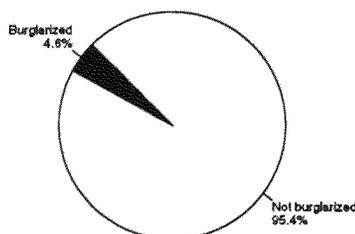
**Figure 87: Percentage of Residents Who Had Their Vehicle Broken Into Multnomah County 1995**

Broken into 23.6%

Not broken into 76.4%
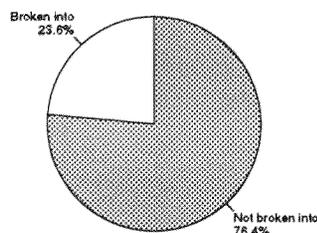
SOURCE: *1995 Portland Multnomah County Citizen Survey.*

**Figure 88: Percentage of Residents Who Were Burglarized Multnomah County 1995**

Burglarized 4.6%

Not burglarized 95.4%

SOURCE: *1995 Portland Multnomah County Citizen Survey.*

crimes has grown while rates for older people have actually declined.

● According to the National Crime Victimization Survey (NCVS), about one-third of all crimes in the United States are reported to police; half of violent crimes are reported.

● In Oregon, 28% of Oregonians were victims of crime between July 1, 1993 and June 30, 1994. According to the 1994 *Oregon Serious Crime Survey* (OSCS), most were victims of a property crime. Only 3% of those surveyed were victims of a crime against people.

● Victimization rates for all crimes committed in Multnomah County are not available. However, the *Citizen Survey* does ask respondents if they had a vehicle broken into or if they were burglarized. As Figure 87 shows, approximately 24% of Multnomah County residents claim to have had their car broken into.

● Are vehicle break-ins reported? According to the *Citizen Survey*, over 40% are *not* reported. This is surprising given the fact that break-ins must be reported to the police before a victim can collect insurance.

● Nearly 5% of residents said they were burglarized within the last year as seen in Figure 88. This percentage declined since

last year when 7% said they were burglarized in Multnomah County. Nearly 70% of burglaries were reported to the police.

*How Should This Benchmark Change in the Future?*

Without data available for Multnomah County, it is difficult to suggest a target for this benchmark. The City of Portland established a target of less than 10% for burglaries in 1990. This target was reached in 1991 and continues to decline each year, but this target is established for only one crime.

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Alcohol or Drug Abuse

### Benchmark #92 Reduce the percentage of adults who use illegal drugs or abuse alcohol.

## Why It's Important

Drug or alcohol abuse affects every organ of the body and is associated with a variety of diseases, including cancer, heart, and liver disease. However, individuals who use illegal drugs or abuse alcohol are not the only ones affected by their unhealthy behavior. Drug or alcohol abuse is associated with fires, crimes, drownings, rape, school failure, child abuse, injury, violence, lost productivity, and so forth. (Center for Substance Abuse Prevention, p. 9) Clearly, this is an issue that has far reaching implications. Reducing the percentage of adults who use illegal drugs or abuse alcohol could reduce or eliminate many social ills while improving the health and extending the lives of individuals.

## Drug or Alcohol Abuse

Consider these facts:

● "Roughly 25% of all injuries are alcohol-related. A heavy drinker increases his or her risk of being burned by a factor of 10 and dying in a fall by a factor of 16. Firearms

and alcohol are another dangerous, often fatal, combination". (Center for Substance Abuse Prevention, p. 14)

● "Twenty-five to 40% of all Americans in general hospital beds are there for treatment of complications of alcoholism." (p. 14)

● "Alcohol-related injuries alone cost an estimated $47 billion annually. This is $188 a year for every man, woman, and child in the country. It represents over $5 million every single minute..." (p. 14)

The Oregon Health Division conducts a telephone survey of individuals throughout the State of Oregon and assesses their risk for certain health conditions. This survey, the *Behavioral Risk Factor Survey*, assesses who is at risk for alcohol abuse. Data from this survey are not available at the present time but will be in the future.

● As stated above, alcohol or drug abuse is often associated with crime. Figure 89 shows the condition of arrestees in Multnomah County who are tested for illegal drugs after being booked into jail. For each year shown, over 60% of arrestees test positive for illegal drugs. In first quarter '93, nearly three-fourths (73%) of arrestees were tested as positive for illegal drugs.
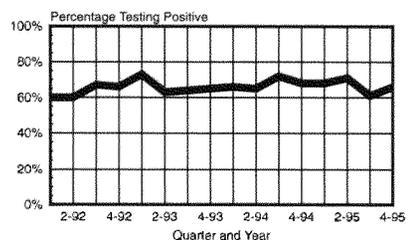
● In fourth quarter 1995, a total of 66% of arrestees tested positive for illegal drugs. A greater percentage of females (71%) tested positive when compared to males (63%). Figure 90 shows that 46% of females tested positive for cocaine. In comparison, only 27% of men tested positive for cocaine. However, men (31%) tend to use multiple drugs at a greater percentage than women (23%).

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

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**Figure 89:  Percentage of Arrestees Testing Positive for Illegal Drugs, Multnomah County 1992-1995**

Percentage Testing Positive

(line chart with x-axis labeled 2-92, 4-92, 2-93, 4-93, 2-94, 4-94, 2-95, 4-95; y-axis 0% to 100%)

Quarter and Year

SOURCE:  *1992-1995, National Drug Use Forecast Program.*

**Figure 90:  Percentage of Male/Female Arrestees Testing Positive for Illegal Drugs Multnomah County Fourth Quarter '95**

Drug

(horizontal bar chart with categories Cocaine, Marijuana, Opiates, Multiple drugs; x-axis 0% to 50%; legend Males, Females)

Percentage Testing Positive
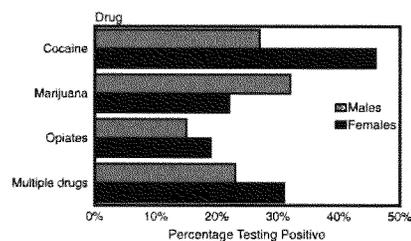
SOURCE: *National Drug Use Forecast Program.*

# Recidivism Rate

**Benchmark #93 Decrease the percentage of convicted felons who are reconvicted for new felonies within three years of completing their court imposed sanction.**

*Why It's Important*

Recidivism: n. a tendency to relapse into a previous condition or mode of behavior, especially relapse into criminal behavior. Individuals who repeatedly return to prison for criminal behavior place a drain on government resources. According to the Oregon Department of Corrections, it costs $19,611 a year to house a prisoner in the state prison system.

This benchmark measures the percentage of parolees who return to prison within three years. Returning to prison soon after incarceration suggests that parolees may have trouble changing their criminal behavior. An increase in the percentages of parolees who return to prison suggest that the community should reevaluate efforts to help parolees bridge the gap between prison and the outside world.

*Percentage Returned to Prison*

The Oregon Department of Corrections has data on the number of parolees returned to prison within three years. The reason for return includes parole violations as well as new convictions.

Corrections data are based upon a release cohort. A release cohort is defined as comprising all individuals who were committed to prison for the first time during the present custody cycle and who were released to parole or post prison supervision (PPS) status during the six-month period.

● For those prisoners released by the end of 1991, 43% were returned within three years. Of those released the first half of 1992, 31.8% were

**Figure 91: Percentage of Parolees Released Who Are Returned to Prison Within Three Years Multnomah County, July-December, 1992**

| Number of Months After Release That Parolees Are Returned | Percentage |
|---|---|
| 36 Months | 35.3% |
| 33 Months | 33.0% |
| 30 Months | 31.6% |
| 27 Months | 30.4% |
| 24 Months | 28.3% |
| 21 Months | 25.7% |
| 18 Months | 23.7% |
| 15 Months | 21.3% |
| 12 Months | 18.1% |
| 9 Months | 12.1% |
| 6 Months | 6.2% |
| 3 Months | 2.3% |

SOURCE: *Corrections Information System.*
NOTES: In 1995, parolees released in December 1992 will have been out of prison for three years. The percentages are cumulative.
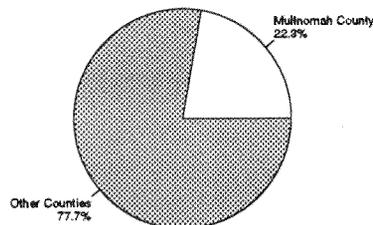
**Figure 92: Percentage of Parolees Released, Multnomah County July-December 1991**

Multnomah County 31.0%

Other Counties 69.0%
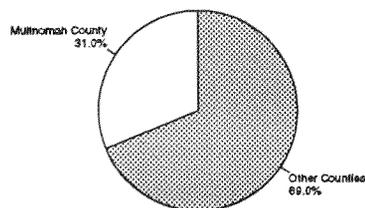
SOURCE: *Corrections Information System.*



**Figure 93: Percentage of Parolees Released, Multnomah County January-June 1995**

Multnomah County 22.3%

Other Counties 77.7%

SOURCE: *Corrections Information System.*

returned within three years, indicating a decline. However, the percentage increases to 35.3% for prisoners released to Multnomah County between July-December, 1992 (see Figure 91).

● Figure 91 shows that approximately 18% of 1992 prisoners released to Multnomah County returned within one year of incarceration, 28.3% returned within two years, and 35.3% returned within three years.

Increases or decreases in the percentages returned to prison are not always caused by criminal behavior but are often affected by changes in government policy. The percentages returned to prison for parole violations or new convictions declined in 1993 and 1994. This was a result of guidelines established by the Oregon Department of Corrections. In essence, the state encouraged local jurisdictions to use other sanctions for parole violations. These might include time spent in county jails or community service in lieu of state prison incarceration.

The percentages of parolees returned to prison increased in early 1995. This may have been caused by the passage of Measure 11. One explanation posed by the Oregon Department of Corrections is that parole and probation officers (PPOs) interpreted the passage of the measure as a mandate from

the public to get tougher with criminals. Therefore, PPOs were more aggressive in their policies to return parole offenders to prison. Some counties, like Multnomah County, tend to be more aggressive in their probation policies compared to other counties in Oregon.

● Figures 92-93 show the percentages of Multnomah County releases compared to the state as a whole. As Figure 92 shows approximately 31% of all state releases were released to Multnomah County in 1991. By 1995, a smaller percentage of state releases (22.3%) were released to Multnomah County.

*How Should This Benchmark Change in the Future?*

The Oregon Progress Board has established a target of 20% by the year 2000. As Figure 91 shows, 35% of the July-December, 1992 cohort returned to prison within three years. Therefore, more efforts must be made to bring down the percentages in Multnomah County in order to meet the statewide goal.

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Diversion Programs

**Benchmark #94 Reduce the percentage of diverted offenders who commit the same type of offense within one year after completing the diversion program.**

## Why It's Important

Diversion programs and deferred sentencing programs offer an alternative to incarceration. For less serious crimes, such as possession of an illegal drug, diversion programs offer a form of treating the addiction. For domestic violence, deferred sentencing programs provide opportunities for offenders to understand their crime and to learn how to change their behavior. This benchmark measures the effect of diversion programs and deferred sentencing programs in Multnomah County.

## Drug Diversion

The S.T.O.P. Program (Sanction-Treatment-Opportunity-Progress) is a drug diversion program aimed at reducing substance abuse and related criminal activity. S.T.O.P. was started in 1991 through a collaboration between Multnomah County Circuit Courts, the District Attorney, Multnomah County Community Corrections, the Metropolitan

Public Defender, the Mayor and the City Council of Portland, and Governor Barbara Roberts.

Under the S.T.O.P. Program, offenders who are arrested for drug possession are offered the chance to participate in the 12-month program in lieu of a trial before pleading their case. Upon successfully completing the program, criminal charges are dismissed with prejudice. Those offenders who do not enter the program most often are left with a felony criminal conviction on their records.

S.T.O.P. uses a multifaceted approach to treating drug addiction. The program provides drug education, group counseling, acupuncture, and random urinalysis. In some cases, community service, a GED requirement, job training, and the obligation to seek and maintain gainful employment are also required. In addition, offenders are required to appear before the Court every thirty days. Treatment providers submit written reports on offenders prior to the court hearings.

● Between July 1992 and March 31, 1994, approximately 54% of clients entering the S.T.O.P. Program successfully completed the program. A total of 571 clients left the program during that time period.

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**Figure 94: Percentage Arrested After One Year of Successfully Completing the S.T.O.P. Program, Multnomah County July 1992-March 1994**

% arrested 15.0%

% not arrested 85.0%
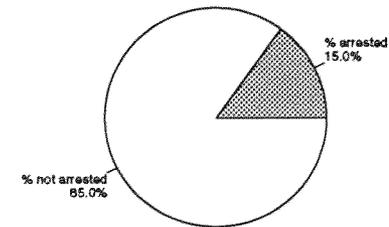
SOURCE: *Corrections Population Management System.*

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**Figure 95: Percentage Arrested After One Year of Unsuccessfully Completing the S.T.O.P. Program Multnomah County April 1994**

% arrested 54.0%

% not arrested 46.0%
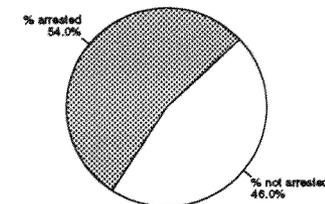
SOURCE: *Corrections Population Management System.*

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**Figure 96: Percentage Completing the DVDSP**
**Multnomah County**
**October 1993-September 1995**



Completed 44.5%

Didn't Complete 55.5%

SOURCE: *Corrections Population Management System.*

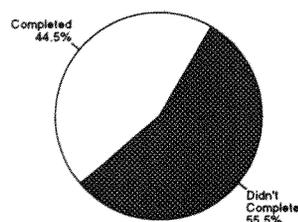● In April 1994, a sample of S.T.O.P. cases were reviewed for post-program recidivism. Of those offenders who completed the program, 15% were arrested within one year (see Figure 94). In contrast, of those who started but were unsuccessful in completing the program, 54% were arrested within one year (see Figure 95).

*Domestic Violence Deferred Sentencing Program (DVDSP)*

Multnomah County's Domestic Violence Deferred Sentencing Program (DVDSP) began in 1993. Deferred sentencing is similar to diversion with the exception that offenders must plead guilty before being referred to the program.

Under the Domestic Violence Deferred Sentencing Program, offenders are monitored and supervised for treatment compliance. They are also engaged in training courses on domestic violence and receive group counseling. In addition, the program refers offenders to other services and makes regular reports to the Court. The program lasts from six to nine months, depending on the case.

● Between October 1, 1993 and September 30, 1995, there were 582 offenders entering the program. Of this number, 44.5% completed the program as seen in Figure 96. Unfortunately, no figures on recidivism after leaving the program one year are available.

*How Should This Benchmark Change in the Future?*

Without better data, it is difficult to assess the long-term effects of either program. The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Emergency Preparedness

**Benchmark #95 Increase the percentage of residences, institutions, businesses, and tourist facilities with operating procedures in place to adequately sustain the populace in an emergency situation for at least 72 hours.**
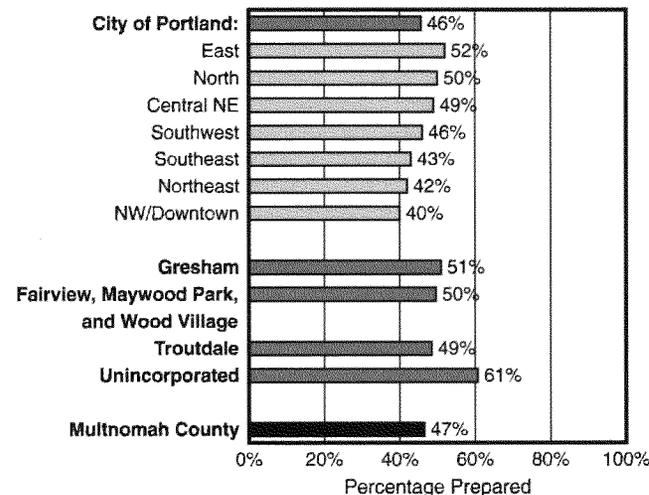
## Why It's Important

It is important that residents be prepared to sustain themselves for 72 hours after a disaster so they can be more responsible for their own safety. At the time of a disaster, all emergency personnel will be involved in the large scale response efforts. Those in less critical need should be capable of caring for themselves, their family, and their immediate neighbors. Every gathering place, whether it be an institution, small business or tourist facility, should educate its patrons about the emergency plan for its facility. Moreover, each entity has different situations and different training needs that should be considered in educating patrons.

## Emergency Preparedness

At present, there are no data available for measuring the preparedness of institutions,

Figure 97: Percentage of People Who Are Prepared for a Disaster Multnomah County 1995

| | Percentage Prepared |
|---|---|
| City of Portland: | 46% |
| East | 52% |
| North | 50% |
| Central NE | 49% |
| Southwest | 46% |
| Southeast | 43% |
| Northeast | 42% |
| NW/Downtown | 40% |
| Gresham | 51% |
| Fairview, Maywood Park, and Wood Village | 50% |
| Troutdale | 49% |
| Unincorporated | 61% |
| Multnomah County | 47% |

SOURCE: *1995 Portland Multnomah County Citizen Survey.*

businesses, and tourist facilities. However, data are available for individuals.

● Multnomah County residents, surveyed on the *Citizen Survey*, were asked if they were prepared to sustain themselves for 72 hours after a major disaster. In total, less than half (47%) said they could. The majority said they could not. Of those who were not prepared, only 52% said they knew how to get prepared.

● Figure 97 shows differences in the percentages who can sustain themselves by geographic area. More residents in the unincorporated area of Multnomah County (61%) said they could sustain themselves than any other area. Residents in NW\Downtown were the least prepared (40%).

● Having a college education does not prepare residents for a disaster. Among all groups, those with a college education were the least prepared for a disaster.

● Males (55%) claim to be more prepared for a disaster than females (38%). This suggests that education efforts should be targeted toward females.

● By far, whites (47%) are more prepared than other race/ethnic groups. Again, education efforts should target race/ethnic

groups. The Portland Fire Bureau, for instance, has written material available in nine languages.

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Emergency Plans and Response Procedures

**Benchmark #97 Increase the percentage of public agencies with emergency plans and emergency response procedures in place that are regularly exercised and updated consistent with guidelines provided by the National Fire Protection Agency 1600 Recommended Practice for Disaster Management - 1995 edition.**

## Why It's Important

Disasters are often unexpected and difficult to anticipate. Planning for a disaster helps to minimize confusion and panic at a time when many residents are coping with the suddenness of the disaster. By developing a disaster plan, each organization can minimize damages and protect the lives of those affected by the disaster.

## National Fire Protection Agency

The National Fire Protection Agency (NFPA) provides guidelines for public agencies and private organizations to use in developing disaster plans. According to NFPA, a disaster plan should be a written document with a policy statement and organization roles and responsibilities clearly identified. NFPA also suggests that a Disaster Management Committee be formed within an organization and that a Coordinator be selected "... to develop, implement, and administer the disaster management program." (NFPA, p. 5)

The Portland Office of Emergency Management is in the process of conducting a survey to determine the percentage of organizations with a disaster plan in place. This survey is conducted through the Portland Fire Bureau's Prevention Division Inspectors. The Inspectors are giving a survey to each business they inspect or contact during a month's time. The survey asks for the following information:

- Do you have a written emergency plan?
- What information do you have on the plan development?
- Please identify the business name, address, contact name, type of business, number of employees, and building classification.

The information gathered from the survey will help in determining a baseline of business and industry preparedness within the City of Portland. In addition, the information will be used in developing an education plan on emergency preparedness.

## How Should This Benchmark Change in the Future?

Until the results of the survey are analyzed, it is impossible to set a target for the future. The Multnomah County target for this benchmark will be established in 1996.

## COLLABORATION

### Regional Emergency Management Group

After meeting informally for several years, in 1994, jurisdictions in the Portland metropolitan area formalized an emergency management committee to discuss issues of mutual interest.

The Regional Emergency Management Group (REMG) was created by an intergovernmental agreement among counties, cities, and Metro, and is composed of elected officials and emergency managers for participating jurisdictions. The Intergovernmental Agreement includes a work plan identifying 21 elements that have regional relevance to emergency managers, one of which is public education in mitigation, preparedness,

response, and recovery during a disaster. The group agreed that the emergency preparedness benchmarks would be valid and valuable to all of their respective jurisdictions and would show the impact of educational efforts.

Represented entities are Clackamas, Columbia, Multnomah, and Washington Counties; the Cities of Beaverton, Fairview, Gladstone, Gresham, Oregon City, Portland, Troutdale, Tualatin, Wood Village; and Metro, Molalla RFPD, Multnomah RFPD, Tualatin Valley Fire & Rescue, and the American Red Cross.

# Matrix Releases

## Benchmark #105 Reduce the number of inmate releases that are matrix released.

### Why It's Important

In 1986, a federal court order required the Multnomah County Sheriff to maintain a jail population within established caps for two of its jails. A census is taken of county jails at 4 a.m. each morning to determine whether the inmate population exceeds these counts. If the counts are exceeded, some inmates are released early (matrix released) before they go to arraignment, trial, or complete their sentences if already convicted.

Inmates are selected to be released based upon a matrix score. This score is calculated according to the seriousness of the crime and whether the inmate exhibits violent behavior. In addition, consideration is given for custody status, disciplinary status, criminal history, and charge characteristics.

This benchmark measures the number of inmates who are released early because of space requirements. It is important because it determines the extent to which Multnomah County Jails are overcrowded, and measures the extent to which arrestees, who would otherwise remain incarcerated, are set free.

**Figure 98: Percentage of Inmate Releases That Are Matrix Released Multnomah County 1986-1995**

Percentage Matrix Released



SOURCE: *Corrections Population Management System.*

### Matrix Releases

Multnomah County has five correctional facilities to house the custody population. The largest and newest jail for adults is Inverness located in mid-Multnomah County with a jail bed capacity of 604. In total, Multnomah County had 1,461 jail beds in 1995. This is 2.5 times the number of jail beds in 1982 (see Figure 99). However, the number of jail beds has not increased significantly over the past five years, even though the number of bookings increased from 28,700 in 1991 to 42,300 in 1995.

● Figure 98 shows the percentage of inmates who are released from jail because of matrixing. The percentage peaked at 15.9%

## Figure 99: Number of Jail Beds
## Multnomah County
## 1982-1995

Number of Jail Beds

| Year | Beds |
|------|------|



Calendar Year
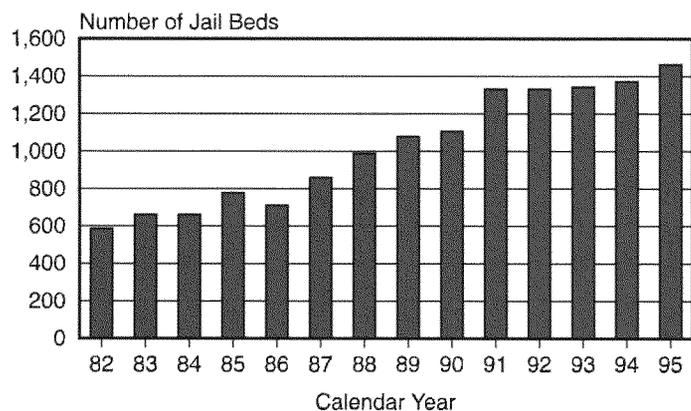
SOURCE: *Corrections Population Management System.*

in 1988 and dropped to its lowest point in 1992 (4.7%). In 1995, the percentage matrixed was 8.8%. Approximately 10 inmates were matrix released each day in 1995.

Multnomah County's matrix system has received attention from other jurisdictions with similar overcrowded jail conditions. Even though the matrix system did not originate here, Multnomah County was one of the first to use this system in the country. The county has received hundreds of requests for information about the system from across the United States.

## How Should This Benchmark Change in the Future?

The Portland Multnomah Progress Board will study additional data relating to this benchmark before a target is set.

# Benchmarks...

**PROGRESS MEASURED ONE STEP AT A TIME**

Benchmarks must reflect the community's common vision for its future. Before developing benchmarks and targets for their achievement, Portland and Multnomah County citizens set forth goals for that vision. The goals describe the community that government, business, non-profit organizations, and citizens are willing to help build in the future.

## *Economy*

● Grow and attract internationally competitive companies that support well compensated jobs with long-term potential.

● Build a world-class workforce that provides the full range of skills necessary to attract and sustain competitive, high performance companies.

● Ensure that all residents, particularly low-income and unemployed people, have the opportunity to benefit from business growth.

● Foster and create vital neighborhoods with affordable housing and healthy commercial districts.

## *Education, Children and Families*

● Value children and help them achieve their full potential.

● Graduate all children from high school with skills enabling them to succeed in the work force and/or in post-secondary education, including the fundamental ability to read, write, compute, communicate, and reason.

● Establish stronger educational programs beyond the secondary level to meet the region's needs for accessible education, expanded graduate programs, high quality research, technology transfer, and economic development.

● Provide access to basic healthcare for all citizens.

● Enable citizens with special needs to live and receive a full range of services throughout the region.

● Make full use of the talents of the elderly and provide excellent human services for them.

## *Quality of Life*

● Preserve and expand the community's system of parks, open spaces, and natural areas.

● Provide an adequate variety and supply of safe, decent, affordable housing.

● Ensure that each neighborhood is healthy and vigorous.

● Enhance the community's quality of life through diverse arts and through cultural and community events that are accessible to all residents.

● Implement alternatives to the automobile in the region.

● Encourage the conservation of resources and energy.

● Retain and continue to develop the unique character of Portland as a major metropolitan area.

● Manage regional growth to provide effective public services at the lowest responsible cost, to improve environmental quality, and to enhance the quality of life.

# *Community Goals*

*Governance*

● Create stronger, more innovative, more responsive citizen and elected leadership.

● Restructure government within the region to more effectively address regional and local needs.

● Restructure local government to provide needed services at lower cost.

*Public Safety*

● Reduce crime, especially violent crime, as well as the fear of crime, and increase city and community partnerships beginning in high crime areas.

● Develop and continue regional partnerships to increase emergency preparedness county-wide.

As the work of the Portland Multnomah Progress Board has evolved, benchmarks have been added and deleted. We have tried to maintain the original numbering system for consistency and continuity for those who work with the benchmarks over time. Following is a complete listing of the benchmarks by number, worded for the 1996 report, with the cluster in which the benchmark appears in this report in parentheses.

**#1**   Increase per capita income *(Economy)*

**#3**   Increase average annual payroll *(Economy)*

**#6**   Increase the percentage of people with incomes above the federal poverty level *(Economy)*

**#7**   Increase total employment *(Economy)*

**#8**   Decrease the unemployment rate *(Economy)*

**#9**   Increase the percentage of income from goods and services sold outside of the United States *(Economy)*

**#10**   Increase the percentage of income from goods and services sold outside of the Portland Metropolitan region *(Economy)*

**#11**   Decrease the number of small businesses that fail *(Economy)*

**#12**   Monitor the total employee time actually used for on-the-job training *(Economy)*

**#13**   Increase the percentage of 25-year-olds and older who have completed a certificate or diploma from any post-secondary training or educational program *(Education)*

**#14**   Increase the percentage of employers who provide more than 20 hours of training per employee per year *(Economy)*

**#15**   Increase the percentage of students who earn a Certificate of Advanced Mastery *(Education)*

**#16**   Increase the number of areas over 1 million population served by non-stop flights to and from Portland International Airport *(Economy)*

**#18**   Monitor the Portland transpacific container export rates compared to those in Puget Sound (percent greater or less than) *(Economy)*

**#19**   Increase the percentage of government permits issued within the target time period or less including business licenses, building permits, water, plumbing/electrical/heating & ventilation, and conditional use/zoning/variances *(Governance)*

**#20**   Monitor the percentage and number of industrial site acreage identified in comprehensive plans that is actually suitable for development *(Quality of Life)*

**#21**   Decrease total taxes per capita *(Governance)*

**#23**   Decrease the percentage of federal, state, and local business taxes and fees per dollar of business income *(Governance)*

**#24**   Monitor the real per capita capital outlays for public infrastructure *(Governance)*

**#25**   Increase the percentage of children entering kindergarten meeting specific development standards for their age *(Education)*

# 1996 Listing of Benchmarks

**#26** Reduce the pregnancy rate per 1,000 females ages 10-17 *(Children & Families)*

**#27** Increase the percentage of healthy birthweight babies *(Children & Families)*

**#28** Increase the percentage of infants whose mothers did not use the following: illicit drugs, alcohol, and/or tobacco during pregnancy *(Children & Families)*

**#29** Increase the percentage of two-year-olds who are adequately immunized *(Children & Families)*

**#31** Decrease the percentage of people who are homeless *(Quality of Life)*

**#32** Increase the percentage of child care facilities which meet established basic standards *(Children & Families)*

**#34** Increase the percentage of students not involved with alcohol, illicit drugs, and/or tobacco *(Children & Families)*

**#37** Increase the percentage of students who achieve at the "proficient" or "advanced" level in each subject area tested *(Education)*

**#38** Increase the high school completion rate *(Education)*

**#43** Increase the percentage of adults who possess English literacy in prose, documents, and quantitative areas; literacy in a language other than English; and literacy in the use of a computer *(Education)*

**#44** Increase the percentage of people who have access to basic healthcare *(Children & Families)*

**#46** Increase the percentage of people with early diagnosis of HIV *(Children & Families)*

**#47** Increase the percentage of mentally ill people who are self-sufficient *(Children & Families)*

**#53** Increase the percentage of disabled people who are self-sufficient *(Children & Families)*

**#56** Increase the percentage of elderly living in the least restrictive setting, either in their own home or in an alternative home setting *(Children & Families)*

**#57** Monitor the number of park acres and protected green space per 1,000 residents *(Quality of Life)*

**#58** Increase the percentage of homeowners and renters below median income spending less than 30% of their household income on housing *(Quality of Life)*

**#60** Increase the percentage of the population that lives within one-half mile walk of all of the following: park/open space, transit service, elementary service, neighborhood commercial node, and bike paths *(Quality of Life)*

**#61** Increase the percentage of people who rate their neighborhood livability high *(Quality of Life)*

**#62** Increase the percentage of people who commute fewer than 30 minutes one-way between home and work *(Quality of Life)*

**#63** Increase the percentage of people who commute to and from work using public transportation *(Quality of Life)*

**#65** Increase the percentage of surfaces where there is little or no graffiti *(Quality of Life)*

**#66** Increase the number of days per year the community meets government ambient air quality standards *(Quality of Life)*

**#67** Decrease the carbon dioxide emissions as a percentage of 1990 emissions *(Quality of Life)*

**#68** Increase the percentage of samples per year the community's rivers and streams meet government in-stream water quality standards *(Quality of Life)*

**#69** Decrease annual water usage per capita *(Quality of Life)*

**#70** Decrease the number of energy units used per capita *(Quality of Life)*

**#71** Decrease the pounds of solid waste landfilled per capita per year *(Quality of Life)*

**#72** Monitor the percentage of Portland Metropolitan area population growth since 1990 occurring within the City of Portland *(Quality of Life)*

**#73** Increase the percentage of total jobs in the Portland Metropolitan area located in downtown Portland *(Quality of Life)*

**#74** Increase the percentage of registered citizens over 18 who vote *(Governance)*

**#75** Increase the annual per capita public and private financial support of the arts in Multnomah County *(Quality of Life)*

**#76** Increase the percentage of people who feel local government is doing a good job at providing services *(Governance)*

**#77** Increase the percentage of volunteers in a governmental advisory capacity who are satisfied that their recommendations were carefully and respectfully considered and who are satisfied with their experience *(Governance)*

**#78** Increase the percentage of people over 18 who volunteer at least 50 hours of their time per year to civic, community, church, or non-profit activities *(Governance)*

**#79** Increase the percentage of government organizations that use measurable results, incorporate them into budget and/or planning processes, and collect supporting data *(Governance)*

**#80** Increase the percentage of community organizations that use measurable

results, incorporate them into budget and/or planning processes, and collect supporting data *(Governance)*

**#81** Improve general obligation bond ratings for local government entities *(Governance)*

**#82** Monitor the per capita dollars spent for local government services *(Governance)*

**#84** Increase the percentage of people who feel safe walking alone in their neighborhood *(Public Safety)*

**#85** Monitor the reported number of crimes against people or property motivated by prejudice *(Public Safety)*

**#86A** Monitor the reported number of children abused and neglected per 1,000 children under the age of 18 *(Public Safety)*

**#86B** Monitor the reported incidents of spouses or domestic associates abused per 1,000 people *(Public Safety)*

**#86C** Monitor the reported incidents of elderly abused per 1,000 elders *(Public Safety)*

# 1996 Listing of Benchmarks

**#87** Monitor the reported number of crimes per 1,000 population *(Public Safety)*

**#88** Monitor the number of arrests per 1,000 population *(Public Safety)*

**#90** Decrease firearm injuries and fatalities rate per 100,000 population *(Public Safety)*

**#91** Reduce the number of crime victims per 1,000 population *(Public Safety)*

**#92** Reduce the percentage of adults who use illegal drugs or abuse alcohol *(Public Safety)*

**#93** Decrease the percentage of convicted felons who are reconvicted for new felonies within three years of completing their court imposed sanction *(Public Safety)*

**#94** Reduce the percentage of diverted offenders who commit the same type of offense within one year after completing the diversion program *(Public Safety)*

**#95** Increase the percentage of residences, institutions, businesses, and tourist facilities with operating procedures in place to adequately sustain the popu-

lace in an emergency situation for at least 72 hours *(Public Safety)*

**#97** Increase the percentage of public agencies with emergency plans and emergency response procedures in place that are regularly exercised and updated consistent with guidelines provided by the National Fire Protection Agency 1600 Recommended Practice for Disaster Management - 1995 edition *(Public Safety)*

**#103** Monitor the percentage of average household income per capita spent on property taxes *(Governance)*

**#104** Increase the percentage of people who rate their streets acceptably clean *(Quality of Life)*

**#105** Reduce the number of inmate releases that are matrix released *(Public Safety)*

# 1996 Benchmark Award Winners

*Category: Organizational Planning and Budgeting*

**Walsh Construction Co.**
Business

A strategic Total Quality Management Plan with reference to employee training, efficiency, and customer service.

**Junior Achievement - Columbia Empire, Inc.**
Small Non-Profit

Plan that displays every aspect of good TQM from vision to outcome measures. A concise plan that is simple and strategic, a great model for young entrepreneurs.

**Legacy Health System**
Large Non-Profit

"Social accountability" program that uses the Portland Multnomah Benchmarks and prevention/wellness concepts to design health delivery services to the community.

*Category: Collaboration and Results*

**CARES Northwest Program & the Multnomah County Family Support Program**
Non-Profit

A collaboration of Kaiser Permanente, Legacy Emanuel Children's Hospital, and Oregon Health Sciences University - Doernbecher's Children's Hospital was formed to evaluate and refer child abuse victims for proper treatment. The program serves approximately 75 children per month.

**Neighborhood Health Clinics, Inc.**
Non-Profit

An initiative to immunize children against preventable diseases, this is a collaboration of Multnomah County Health Department, Kaiser Permanente, Albina Ministerial Alliance, King Community Center, Albina Headstart, and schools. Uses diverse grassroots resources from schools to grocery stores and laundromats to distribute information about child immunization. "First Saturday" clinics provided 242 children and adults with immunizations in its first six months.

*Category: Results*

**Unlimited Choices, Inc.**
Non-Profit

Designs and funds retrofitting of housing units for disabled and elderly people. Has worked mostly in Gresham and East County, but will now begin work in Portland. In under three years, eighty units have been renovated, with commitments from landlords to perpetuate their use by disabled people.

**Urban League of Portland**
Non-Profit

Evolving use of benchmarks and outcomes in management of all programs. Links to 41 benchmarks. Its computer training program places eighty percent of graduates in jobs.

*Category: Superior Overall*
*Performance*

**Multnomah County**
Government

Benchmarks fully integrated into the plan-
ning, management, and budgeting process
and documents. Emphasis on benchmark
data collection, status reporting, and results.
Multnomah County Health Department
increase in child immunization rates of clinic
populations shows results: from 52% in 1994
to 92% in 1995.

**Portland City Auditor**
Government

Portland's Service, Efforts, and Accomplish-
ments Report (SEA) was one of the first such
documents in the nation. Derived from an
annual citizen survey (now done coopera-
tively with Multnomah County Auditor),
performance audits, and comparisons with
other cities. Constantly refined since 1990,
the SEA remains the national model.

Information and understanding come to us from many "partners".

The 1996 Annual Report of the Portland Multnomah Progress Board is truly a collaboration of partners at all levels of government and the private sector. We gather data wherever we can find it, and we are constantly gratified at the willingness of data collectors to share their information and insights with us. Many of our "data partners" are pleased to share their full databases with us, and are open to our performing analyses on their data. Our efforts to coordinate data collection and analysis have been rewarded by the network we have established.

Staff within the City of Portland and Multnomah County are our strongest partners. They have spent many hours sharing and explaining their information and programs to us and helping us understand what it all means. Benchmarking is new to all of us, and the patience and commitment to our program shown by these very busy and dedicated staff are the strength of our report. However, the Progress Board accepts full responsibility for any errors or misrepresentations in this document.

From among the many Multnomah County staffers who have helped with our work, we would like to especially thank the following:

**Kelly Bacon,** District Attorney's Office
**Gary Blackmer,** Auditor's Office
**Jim Carlson,** Budget and Quality Office
**Barry Crook,** Budget and Quality Office
**Linda Doyle,** Health Department
**Vicki Ervin,** Elections Division
**Betty Glantz,** Aging Services Division
**Jeanne Gould,** Health Department
**Cary Harkaway,** Department of Community Corrections
**Linda Jaramillo,** Health Department
**John Legry,** Citizens Involvement Committee
**Loriann McNeill,** Aging Services Division
**Gary Oxman, M.D.,** Health Department
**Chiquita Rollins,** Community & Family Services
**Barbara Simon,** Sheriff's Office
**Jeanette Tudor,** Health Department
**Carol Wire,** Commission on Children and Families
**Bill Wood,** Sheriff's Office

From among the many City of Portland staffers who have helped with our work, we would like to especially thank the following:

**Steve Beedle,** Portland Police Bureau

**Carol Ford,** Office of Finance and Administration
**Debbie Galardi,** Mayor's Office
**Tim Grewe,** Office of Finance and Administration
**Ellen Jean,** Auditor's Office
**Christopher Juniper,** Portland Development Commission
**Dianne Linn,** Office of Neighborhood Association
**Dennis Nelson,** Bureau of Licenses
**Patty Reuter,** Fire Department
**Dick Tracy,** Auditor's Office
**Rosie Williams,** Portland Development Commission

Our other government partners have also contributed greatly to our report. From among the many of them we would like to especially thank the following:

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**Bill Beck,** Portland Public Schools
**George Boyles,** Children's Service's Division
**Michael Dillon,** Mt. Hood Community College
**Scott Drumm,** Port of Portland
**Linda Duke,** Oregon Health Division
Lorraine Duncan, Oregon Health Division
**John Fregonese,** Metro
**Clinton Goff,** State Alcohol and Drug Program

# Partners

Joyce Grant-Worley, Oregon Health Division
Tim Houchen, Oregon Progress Board
George Hough, Center for Population Research and Census
Lydia Hudsick, Port of Portland
Randy Ireson, Oregon Department of Corrections
Steve Johnson, Portland State University, Center for Urban Studies
Rebecca Landau, Oregon Health Division
Deirdre Molander, Oregon Progress Board
Barbara Pizacani, Oregon Health Division
Jennie Portis, Northeast Workforce Center
Cam Preus-Braly, Oregon Workforce Quality Council
Tony Rainey, Gresham Budget & Benchmarks Office
Jim Raleigh, Tax Supervising & Conservation Commission
Tim Reddington, Gresham Budget & Benchmarks Office
Connie Revell, Oregon Option
Suzanne Riles, Portland Public Schools
Ethan Seltzer, Portland State University, Institute on Metro Studies
Chuck Sigmund, Oregon Health Plan
Gary Sincich, Regional Economist, Oregon Employment Department
Steve Slater, Oregon Department of Education
Ray Spooner, Law Enforcement Data System

David Swanson, Center for Population Research and Census
Jeff Tryens, Oregon Progress Board
Kanhaiya Vaidya, State Demographer
Paul Warner, Oregon State Economist
Steve Wilhite, Oregon Criminal Justice Commission
Courtney Wilton, Tax Supervising & Conservation Commission
Dennis Yee, Metro

The non-profit community has welcomed our data gathering efforts. We look forward to working more closely with them in the future. We would like to especially thank:

Swati Adarkar, Children First for Oregon
Dennis Cole, Private Industry Council/ Regional Workforce Quality Committee
Karen Crandal, CCI Enterprise, Inc.
Gary Dombroff, Children First for Oregon
Matt Evans, Oregon Tax Research
Karen Gorton, MCC & RR
Casey Jones, Association for Portland Progress
Pat Nehl, The Boys and Girls Aid Society
Diana Nelson, The Volunteer Center
Emmy Sloan, CARES Northwest Program

We are also gratified at the willingness of many business people to share their knowledge and expertise with us. We would like to especially thank:

Kent Ballantyne, Oregon Association of Hospitals & Health Systems
Adam Davis, Davis and Hibbits, Inc.
Gary Finseth, Consultant
Bobby Heagerty, Legacy Health System
Noel Klein, Western Attitudes
Frances Lindner, Northwest Regional Laboratories
Lynde Paule, Consultant
Duncan Wyse, Oregon Business Council

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**1994 Air Quality Annual Report**, Oregon Department of Environmental Quality. This report is based on tests of air quality conducted by the Oregon Department of Environmental Quality. Data are then compiled and presented in an annual report. *(Benchmark #66)*

**1994 Child Abuse and Neglect Report**, Services to Families and Children.
This report is prepared annually by the State Office of Services to Families and Children (SFC). It is based upon reported cases of child abuse to SFC. *(Benchmark #86A)*

**1994 Oregon Public School Drug Use Survey**, State Office of Alcohol and Drug Abuse Programs.
Eighth and eleventh grade students are asked to complete a written survey about drug use every two years. The survey is administered in schools throughout Oregon. Data are compiled and tabulated by the State Office of Alcohol and Drug Abuse Programs. *(Benchmark #34)*

**1994 Quality of Life Survey,** State Office of Mental Health Services.
This survey was conducted in 1994 of consumers of mental health services offered by the Office of Mental Health Services. *(Benchmark #47)*

**1995 Bond Ratings Telephone Survey**, Portland Multnomah Progress Board.
This informal telephone survey was conducted in April 1995. All 38 governmental entities throughout Multnomah County were contacted and asked to identify their bond rating from Moody's and/or Standard & Poors. *(Benchmark #81)*

**1995 Portland Multnomah Volunteer Survey,** Portland Multnomah Progress Board.
This mail survey was sent to citizens who serve on boards and commissions for the City of Portland or Multnomah County government. *(Benchmark #77)*

**Behavioral Risk Factor Survey,** Oregon Health Division.
The Oregon Health Division, in conjunction with the U.S. Centers for Disease Control, conducts a telephone survey of Oregon residents and asks them about their health and lifestyle habits. *(Benchmark #92)*

**Birth Certificates,** Oregon Health Division. Birth certificates are sent to the Oregon Health Division where they are entered into a computer for analysis. In addition to recording name and address and other items, the birth certificates contain information on medical factors during pregnancy, tobacco

and alcohol use, and conditions of the newborn. *(Benchmarks #26, 27, 28)*

**Citizen Survey,** Joint City of Portland and County Auditors.
The Citizen Survey is a mail survey sent to randomly selected residents throughout Multnomah County. The City of Portland Auditor's Office conducts the survey in collaboration with the Multnomah County Auditor's Office. *(Benchmarks #61, 76, 84, 95, 104)*

**City of Portland Parks and Open Space Inventory,** PSU, Center for Urban Studies.
The inventory measured the number of acres of parks and open spaces by neighborhood in June, 1993. *(Benchmark #57)*

**Corrections Information System,** Oregon Department of Corrections.
This state database tracks inmates and parolees from state prison. *(Benchmark #93)*

**Corrections Population Management System,** Multnomah County Sheriff's Office.
This county database tracks inmates in county jails. *(Benchmark #105)*

**Death Certificates,** Oregon Health Division.
Death certificates are sent to the Oregon Health Division where they are entered into

# Explanation of Data Sources

a computer for analysis. Data from death certificates include the cause of death and whether a firearm contributed to a victim's death. *(Benchmark #90)*

**Multnomah County Elections Data,**
Multnomah County Elections Division.
This database contains voter information on all registered voters within Multnomah County. *(Benchmark #74)*

**National Crime Victimization Survey,**
U.S. Department of Justice.
The National Crime Victimization Survey is a survey administered by the Bureau of the Census for the Bureau of Justice Statistics. The survey tracks crime activity affecting households throughout the United States for a three year period. It is a combination of personal interviews and telephone interviews. *(Benchmark #91)*

**National Drug Use Forecast Program,**
U.S. Department of Justice.
The National Drug Use Forecast data are collected in booking facilities throughout the United States. For approximately 14 consecutive evenings each quarter, trained local staff obtain voluntary, anonymous urine specimens and interviews from a sample of booked arrestees. Multnomah County participates in this program. *(Benchmark #92)*

**Oregon HIV/AIDS Annual Report, 1994,** Oregon Health Division.
This is an annual report about HIV/AIDS in Oregon. Part of the report is based on data collected from HIV testing. According to Oregon law, all laboratories that perform HIV tests are required to send a copy of test results to the Oregon Health Division. *(Benchmark #46)*

**Oregon Literacy Survey,** Oregon Progress Board.
This personal survey was conducted in May 1991 of two thousand residents. Interviewers asked participants to read various pieces of information, such as newspaper articles, check stubs, and bus schedules. *(Benchmark #43)*

**Oregon Population Survey, 1990, 1992, 1994,** Oregon Progress Board.
This telephone survey, based upon a random sample of Oregon households, is funded by a consortium of state agencies. Modeled after the U.S. Census, the survey permits users to track changes in population characteristics over time. In 1990, 3,200 Oregon households were interviewed. In 1992 and 1994, the number of households interviewed were approximately 4,400 and 5,500, respectively. *(Benchmarks #13,14, 43, 44, 78)*

**Oregon Serious Crime Survey,** Oregon Criminal Justice Council.
The Oregon Serious Crime Survey was a mail survey sent to 425 Oregonians in 1994. A total of 264 surveys were returned. The survey reflects crime activity in Oregon from July 1, 1983 to June 30, 1994. *(Benchmark #91)*

**Oregon Statewide Assessment,** Oregon Department of Education.
Each year, Oregon students are tested in grades 3, 5, 8, and 11. Students are tested in reading and mathematics. Some grades are also tested for writing. In 1995, grades 5 and 11 were tested for writing. In 1996, grades 3 and 8 will be tested for writing. Every six years, students are also tested in science. *(Benchmark #37)*

**Oregon Works Survey: Survey of Oregon Employers,** Oregon Economic Development Department.
The Oregon Works Survey was a mail-back survey of Oregon employers conducted in 1992 and 1994. The sample was drawn from the Employment Division database of all employers in Oregon who employ four or more employees. In 1992, approximately 1700 surveys were returned; in 1994, 758 surveys were returned. *(Benchmark #12,14)*

**Report of Criminal Offenses and Arrests,** Law Enforcement Data System (LEDS).
The Oregon State Police collects data from each precinct throughout Oregon for its Law Enforcement Data System (LEDS). This system analyzes crimes reported to the police and provides quarterly and annual reports. *(Benchmark #86B, 87, 88)*

**TSCC Database**, Tax Supervising and Conservation Commission.
The Tax Supervising and Conservation Commission collects data from the Budgets and Financial Statements of all 38 Multnomah County governmental entities. *(Benchmark #21, 24, 82, 103)*

**Tri-Met Attitude and Awareness Survey,** Tri-Met.
This telephone survey is conducted quarterly. One thousand interviews are conducted in November; 500 interviews are conducted in February, May, and August. The survey tracks ridership, attitudes, demographics, and advertising. *(Benchmark #63)*

**Two-Year-Old Immunization Survey,** Oregon Health Division.
The Oregon Health Division conducted a birth certificate-based survey in 1994, using a sample of 2,538 children born in Oregon between September 1991 and January 1992. *(Benchmark #29)*

**U.S. Census of Population,** Bureau of Commerce.
The U.S. Census is conducted every ten years by the Bureau of the Census. It asks people about their age, race, education, labor status, housing, commuting patterns, and income. The Census uses a combination of mail, telephone, and personal interviews to gather information on all U.S. residents. This is one of the few databases in which data are available for small geographic areas. *(Benchmark #13, 53, 62)*

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**KEY**

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# Notes

Income per capita as a percentage of U.S. real per capita income • Per capita income as a percentage of Oregon's real per capita income broken down by race • Average annual payroll per worker (all industries) • Per capita income • Annual total payroll • Percentage of citizens with incomes above 100% of the federal poverty level • Total employment (in thousands) broken down by race • Unemployment rate (as compared to the Portland Metropolitan region) broken down by race • Percentage of income from goods and services sold outside of the United States • Percentage of income from goods and services sold outside the Portland Metropolitan region • Number of small business that fail in one year, two years, and five years • Percentage of employer payroll dedicated to training and education • Percentage of 25 year olds with a certificate granted from education and training programs • Percentage of employees working in firms which train over 50% of their workforce 20 hours or more annually in work skills or work processes • Percentage of high school students who are engaged in Certificate of Advanced Master programs that involve work place experience • Number of U.S., Canadian and Mexican metropolitan areas over 1 million population served by non-stop flights to and from any Oregon commercial airport • Number of international cities of over 1 million population (outside Canada & Mexico) served by direct or non-stop flights to and from any Oregon commercial airport • Portland transpacific container export rates compared to those in Seattle & Tacoma (percent greater or less than) • Percentage of government permits issued within the target time period or less including business licenses, building permits, water, plumbing/electrical/heating & ventilating, parking, street use, and conditional use/zoning/variances • Percentage and number of industrial site acreage identified in comprehensive plans that is actually suitable for development • Total taxes per capita as percentage of U.S. average • Total taxes per $1,000 income • Percentage of federal, state & local business taxes and fees per dollars of business income • Real per capita capital outlays for public infrastructure • Percentage of children entering kindergarten meeting specific development standards for their age. Development includes cognitive, language & literacy, physical well-being, and social/emotional development. • Pregnancy rate per 1,000 females ages 10-17 broken down by race • Percentage of healthy birthweight babies • Percentage of infants whose mothers did not use the following: Illicit drugs through pregnancy, alcohol during pregnancy (self-reported by mother), and tobacco during pregnancy (self-reported by mother) • Percentage of two year olds who are adequately immunized • Percentage of children 0-17 living above 100% of the poverty level broken down by age and race • Percentage of children who were homeless at some time in the last year • Percentage of child care facilities which meet esta-blished basic standards • Number of identified child care slots available for every 100 children under age 13 • Percentage of students free of involvement with alcohol in the previous month broken down by the eighth and eleventh grades • Percentage of students free of involvement with illicit drugs in the previous month broken down by the eighth and eleventh grades • Percentage of students free of involvement with tobacco in the previous month broken down by the eighth and eleventh grades • Percentage of students who achieve established skill levels broken down by race and grade level • High school graduation rate • Percentage of adults who have completed at least one year of educational programs after secondary school broken down by race • Percentage of adults who completed a certified apprenticeship program • Percentage of adults who have completed an associate degree in professional- technical education broken down by race • Percentage of people leaving post-secondary course work that possess skill sets to match work force needs • Percentage of adults who possess English literacy skills broken down by prose, document, quantitative, and information/technology literacy • Percentage of citizens who have economic access to basic health care broken down by race • Percentage of citizens who have geographic access to basic health care broken down by race. • Annual percentage and number of people with early diagnosis of HIV • Percentage of citizens with mental illness living in housing of their choice with adequate support • Percentage of citizens with mental illness who are employed • Percentage of citizens with mental illness living above the poverty level • Percentage of citizens with developmental disabilities living in housing of their choice with adequate support • Percentage of citizens with developmental disabilities who are employed • Percentage of citizens with developmental disabilities living above the poverty level • Percentage of citizens with physical disabilities living in housing of their choice with adequate support • Percentage of citizens with physical disabilities who are employed • Percentage of citizens with physical disabilities living above the poverty level• Percentage of elderly living in the least restrictive setting, either in their own home or in an alternative home setting • Acres of parks and protected green space per 1,000 citizens • Percentage of home owners and renters below median income spending less than 30% of their household income on housing (including utilities: gas, electric, water, garbage, sewer, phone) • Number of citizens who were homeless at some time in the last year • Percentage of population that lives within one half mile walk of all of the following: park/open space, transit service, elementary service, neighborhood commercial node, and bike path • Percentage of people who feel a sense of community in their neighborhood • Percentage of people who commute (one-way) within 30 minutes between where they live and work • Percentage of people who commute to and from work and use multiple modes of transportation for commuting • Percentage of streets rated acceptably clean • Percentage of surfaces where there is little or no graffiti • Number of days per year the community meets government ambient air quality standards • Carbon dioxide emissions as a percentage of 1990 emissions • Percentage of samples per year the community's river and streams meet government instream water quality standards • Annual water usage per capita broken down by industrial, residential, and commercial categories • Number of energy units used per capita broken down by industrial, residential, and commercial categories • Pounds of solid waste landfilled per capita per year • Percentage of Portland metropolitan area population growth since 1990 occurring within the City of Portland broken down by special needs • Percentage of total non-manufacturing jobs in the Portland metropolitan area located in downtown Portland • Percentage of eligible citizens who vote • Annual per capita public and private financial support for the arts in the region including: libraries, museums, visual arts, and performing arts • Percentage of citizens who are satisfied that services are necessary, responsive, and cost-effective • Percentage of citizen volunteers in a governmental advisory capacity who are satisfied that their recommendations were carefully and respectfully considered • Percentage of citizens who volunteer at least 50 hours of their time per year to civic, community, or non-profit activities • Percentage of government organizations that adopt benchmarks, incorporate them into budget and/or planning processes, and collect supporting data • Percentage of community organizations that adopt benchmarks, incorporate them into budget and/or planning processes, and collect supporting data. • General obligation bond rating (Standard & Poor's) • Per capita cost of government • Direct government service delivery expenses as a percentage of total government expenditures • Percentage of citizens who feel safe and secure • Number of reported crimes against people or property motivated by prejudice including race, sexual orientation and national origin • Number of reported incidents of domestic violence including: • Children abused and neglected per 1,000 people under 18 • Spouses or domestic associates per 1,000 people • Elderly abuse per 1,000 people • Families repeatedly victimized by such incidents • Number of reported crimes against people per 1,000 population. Crimes include murder, rape, robbery, kidnapping, and assault broken down by age • Number of reported crimes against property per 1,000 population. Crimes include burglary, larceny, motor vehicle theft, arson, and vandalism broken down by age • Percentage of arrestees testing positive for alcohol or illicit drugs in Multnomah County • Firearm injuries and fatalities rate per 1,000 population broken down by age • Victimization rates per 100,000 population. Crimes include hate crimes, domestic violence, and theft broken down by race • Percentage of parolees who commit new felonies within three years of reentry to the community • Percentage of diverted offenders who commit the same type of offense within one year after completing the diversion program broken down by substance abuse, alcohol, and domestic violence • Percentage of citizens who are prepared to handle an emergency by being able to sustain themselves for 72 hours • Property and person loss, due to emergency/disasters broken down by number of lives lost per 1,000 and dollar value of loss as percentage of structure/property exposed • Percentage of emergency service agencies (defined in ORS 401) with emergency plans and emergency response procedures in place that are regularly exercised and updated per federal standards.

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