MULTNOMAH COUNTY, OREGON

BOARD OF COMMISSIONERS

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Portland, Or 97204-1914
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ANY QUESTIONS? CALL BOARD
CLERK DEB BOGSTAD @ 248-3277
Email: deborah.l.bogstad@co.multnomah.or.us

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

MARCH 16 & 18, 1999 BOARD MEETINGS

FASTLOOK AGENDA ITEMS OF INTEREST

Pg 2	9:30 a.m. Tuesday Children in Poverty Briefing
Pg 2	11:00 a.m. Tuesday Ethics & Public Meetings Law Briefing
Pg 3	9:30 a.m. Thursday DSS RESULTS Presentations
Pg 3	9:50 a.m. Multnomah County Employee Benefits Board Ordinance
Pg 3	10:20 a.m. IGA with Portland Relating to City Liens on Foreclosed Property
Pg 4	10:35 a.m. DA Budget Modifications
Pg 4	10:45 a.m. Resolution Supporting Census 2000
✳	Check the County Web Site: http://www.multnomah.lib.or.us

Thursday meetings of the Multnomah County Board of Commissioners are cable-cast live and taped and may 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

Tuesday, March 16, 1999 - 9:30 AM
Multnomah County Courthouse, Boardroom 602
1021 SW Fourth Avenue, Portland

BOARD BRIEFINGS

B-1   Overview of the Benchmark Framework and Draft Report: Reducing the Number of Children Living in Poverty. Presented by Carol Ford, Jim Carlson, Van Le, Pauline Anderson and Karen Gibson. 1.5 HOURS REQUESTED.

B-2   Public Ethics Law for Elected Officials, and Legal Issues Relating to Public Meetings Executive Sessions. Presented by Thomas Sponsler. 1 HOUR REQUESTED.

Thursday, March 18, 1999 - 9:30 AM
Multnomah County Courthouse, Boardroom 602
1021 SW Fourth Avenue, Portland

REGULAR MEETING

CONSENT CALENDAR

SHERIFF'S OFFICE

C-1   ORDER: Acknowledgement of Found/Unclaimed Property and Authorization of Transfer for Sale or Disposal

PUBLIC CONTRACT REVIEW BOARD

C-2   ORDER Exempting from the Formal Competitive Bid Process a Contract for the Purchase of Blood Glucose Testing Materials from Abbott Diagnostics

C-3   ORDER Exempting from the Formal Competitive Bid Process a Contract for the Purchase of Rapid Strep and Pregnancy Testing Kits from Abbott Diagnostics

C-4   ORDER Exempting from the Formal Competitive RFP Process a Contract for the Purchase of an Upgrade to the IBM Enterprise Server from IBM, Corp.

DEPARTMENT OF ENVIRONMENTAL SERVICES

C-5 ORDER Authorizing the Execution of Deed D930766A Upon Complete Performance of a Contract with Mildred W. Gilbert

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 Results from RESULTS: The DSS Intranet Services Committee (DISC) Process Improvement Team. Presentation by Larry Bartasavich & DISC Committee. 10 MINUTES REQUESTED.

R-3 RESOLUTION of Multnomah County's Support of SB 1201 to Improve the Local Budget Law Statutes

R-4 RESOLUTION Authorizing Issuance of a Financing Agreement

R-5 First Reading and Possible Adoption of an ORDINANCE Creating a Multnomah County Employees' Benefits Board with the Authority to Approve Health and Welfare Benefit Plans, and Declaring an Emergency

R-6 RESOLUTION Adopting Salary Adjustments and Payments of Health Benefits for Employees Not Covered by Collective Bargaining Agreements

DEPARTMENT OF ENVIRONMENTAL SERVICES

R-7 Intergovernmental Agreement 500689 with the City of Portland Relating to How City Liens will be Paid on Foreclosed Properties

DEPARTMENT OF HEALTH

R-8 ORDER Authorizing Execution of Agreement for Lease of Certain Real Property for the Operation of La Clinica de Buena Salud, a Health Clinic

DEPARTMENT OF COMMUNITY AND FAMILY SERVICES

R-9 ORDER Authorizing Execution of Agreement for Lease of Certain Real Property for the Operation of La Clara Vista Family Resource Center

DISTRICT ATTORNEY'S OFFICE

R-10 Budget Modification DA 99-1 Adding a Support Enforcement Agent and an Office Assistant 2 to the Support Enforcement Division for a Gresham Office and Adding Funds for the Computer Conversion Project

R-11 Budget Modification DA 99-5 Appropriating Funds for the Victims of Crime Act Grant

SHERIFF'S OFFICE

R-12 Retail Malt Beverage Liquor License Renewal for CORBETT STATION, 2605 NE CORBETT HILL ROAD, CORBETT

NON-DEPARTMENTAL

R-13 RESOLUTION Expressing Support for the Census 2000

R-14 Intergovernmental Agreement 500679 with Clackamas County to Bring Oregon Pathways Computer Program to Multnomah County, Using Bond Technology Program Funds

COMMISSIONER COMMENT/LEGISLATIVE ISSUES

R-15 Opportunity (as Time Allows) for Commissioners to Provide Informational Comments to Board and Public on Non-Agenda Items of Interest or to Discuss Legislative Issues.

MEMORANDUM

TO: Chair Beverly Stein
Commissioner Serena Cruz
Commissioner Lisa Naito
Commissioner Sharron Kelley
Board Clerk Deb Bogstad

FROM: Beckie Lee
Staff to Commissioner Diane Linn

DATE: March 9, 1998

RE: Board Meeting Absences

Commissioner Linn will not be able to attend Board briefing on Tuesday, March 16, as she will be in Salem.

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"Printed on recycled paper"

LISA H. NAITO
Multnomah County Commissioner, District 3
1120 SW Fifth Avenue, Suite 1500
Portland, Oregon 97204-1914
Phone (503) 248-5217   Fax (503) 248-5262

MULTNOMAH COUNTY OREGON

MEMORANDUM

TO: Chair Beverly Stein
            Commissioner Diane Linn
            Commissioner Serena Cruz
            Commissioner Sharron Kelley
            Board Clerk Deb Bogstad

FROM: Charlotte Comito
            Staff to Commissioner Lisa Naito

DATE: February 5, 1999

RE: Board absences

Commissioner Naito will be attending the NACO Conference in Washington D.C. on February 26 through March 3. Commissioner Naito will also be absent for the BCC briefing on Tuesday March 16 and the BCC meetings on Thursday March 18 and Thursday March 25th.

MEETING DATE: **MAR 1 6 1999**
AGENDA NO: B-1
ESTIMATED START TIME: 9:30

(Above Space for Board Clerk's Use ONLY)

AGENDA PLACEMENT FORM

SUBJECT: Benchmark Briefing: Reducing Children in Living in Poverty

BOARD BRIEFING: DATE REQUESTED: March 16, 1999
                          REQUESTED BY: Chair Stein
                          AMOUNT OF TIME NEEDED: 1.5 hours

REGULAR MEETING: DATE REQUESTED:

                          AMOUNT OF TIME NEEDED:

DEPARTMENT: Non-Departmental   DIVISION: Chair's Office

CONTACT: Carol M. Ford   TELEPHONE #: 248-3956
                                    BLDG/ROOM #: 106/1515

PERSON(S) MAKING PRESENTATION: Carol Ford, Jim Carlson, Van Le, Pauline Anderson, (Chair, Poverty Advisory Committee, CCFC) and Karen Gibson, Portland State University

ACTION REQUESTED:

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

SUGGESTED AGENDA TITLE:

Benchmark Briefing:
Reducing Children Living In Poverty

SIGNATURES REQUIRED:

Beverly Stein

ELECTED OFFICIAL:

(OR)
DEPARTMENT
MANAGER:

ALL ACCOMPANYING DOCUMENTS MUST HAVE REQUIRED SIGNATURES

Any Questions: Call the Board Clerk @ 248-3277

2/97

Beverly Stein, Multnomah County Chair

Room 1515, Portland Building   Phone: (503) 248-3308
1120 S.W. Fifth Avenue   FAX: (503) 248-3093
Portland, Oregon 97204   E-Mail: mult.chair@co.multnomah.or.us

STAFF SUPPLEMENTAL MEMORANDUM

TO   : **Board of County Commissioners**

FROM : Carol M. Ford *Carol M. Ford*

DATE : March 10, 1999

RE   : **Benchmark Briefing: Reduce the Number of Children Living in Poverty, March 16, 1999**

I.   Recommendation/Action Requested:

In preparation for the upcoming budget discussions and as part of the ongoing research and analysis of the County's progress towards its three long term benchmarks, the Department of Support Services' Evaluation and Research Unit (DSS/ERU) has completed a working Benchmark Report draft:

Multnomah County Benchmark Approach:
Alleviate Consequences of Current Child Poverty,
Reduce Causes of Future Poverty

The March 16 briefing is to provide an overview of the benchmark framework and draft report, answer Board questions and discuss coordination with the Multnomah Commission on Children, Families & Community.

Briefing Agenda:

1. Briefing Introduction and Goals – Carol Ford *(5 mins)*

2. Overview of Three Long Term Benchmarks – Jim Carlson *(10 mins)*
   (Attachment 1: *Funding the Benchmarks*)

3. Review Report Findings - Van Le, DSS/ERU *(20 mins)*
   (Attachment 2: *Executive Summary - Multnomah County Benchmark Approach: Child Poverty)*

4. Coordination with the Multnomah Commission on Children, Families & Community's Poverty Advisory Committee - Pauline Anderson, Committee Chair and Karen Gibson, Committee Member/PSU *(20 mins)*

5. Additional Board Discussion: Priorities, questions, discussion and feedback – Chair Stein to facilitate *(30 mins)*

6. Next Steps – Jim Carlson *(5 mins)*

II.   Background/Analysis:

In September 1996, the Board of County Commissioners selected three long-term strategic benchmarks to focus on over several years:

- Reduce Number of Children Living in Poverty
- Increase School Completion
- Reduce Crime

In January 1998, a Board resolution established Commissioner benchmark sponsorships around the three long-term benchmarks. At worksessions/ retreats in August 1998 and January 1999, the Chair used the three benchmarks as a framework for policy and values discussions. The Board continues to use the three benchmarks as a focus for budget and policy discussions. County departments are also using the three benchmarks in their strategic planning processes.

To assist the Chair's Office and the Board's policy and budget discussions, the DSS/ERU's workplan includes ongoing research and analysis of how the County is progressing toward the improvements in the three long-term benchmarks. This includes staffing assigned to work specifically in the areas of public safety, poverty and educational success.

Today is a part of a series of briefings to bring the benchmarks research information to the Board.

III.   Financial Impact:

None at this time. Board budget and policy decisions could focus new resources and or realign existing resources toward the three long-term benchmarks.

IV.   Legal Issues: None.

V.   Controversial Issues: None.

VI.   Link to Current County Policies:

County's Three Long Term Benchmarks:

- Reduce Number of Children Living in Poverty
- Increase School Completion
- Reduce Crime

VII. Citizen Participation:

The working draft of the poverty report has been reviewed and discussed with the Multnomah Commission on Children, Families & Community's Poverty Advisory Committee. Their input has been incorporated into the draft.

Citizens and community groups also participated in a early visioning process and in the development of the County's original list of benchmarks.

VIII. Other Government Participation: None.

Attachments:

1. Powerpoint presentation slides - *Funding the Benchmarks*

2. *Executive Summary: Multnomah County Benchmark Approach: Alleviate Consequences of Current Child Poverty, Reduce Causes of Future Poverty.*

Cc: Jim Carlson, Van Le, Pauline Anderson, and Karen Gibson

Multnomah County Benchmark Approach:
Alleviate Consequences of Current Child Poverty, Reduce Causes of Future Poverty

EXECUTIVE SUMMARY

A. How do we define poverty? See Section A

1. Since 1996, one of the three long term benchmarks is to reduce the number of children living in poverty. It is not clear how this benchmark is being defined. What kind of poverty? What kind of reduction? And what measure? What kind of time frame?

2. First, we need to select from the different ways to define poverty: pre-tax income; pre-tax income and benefits; earnings; wages; program participation; job availability; media headlines; societal indicators; assets; levels of hardship, housing costs, etc.

3. Second we need agreement on what level of wage, assets, earnings, etc. means you are poor. Some people say that the Federal Poverty Level is too low a level. Count people as poor even if they are 200% of the Federal Poverty Level.

4. Third we need agreement on the way we are going to measure the poverty. Is it using a program participation count? A survey of income? A survey of hardship? The way we count is related to what we count.

5. The present benchmark is an idea of what we want. We need a goal to aim for. For instance, the goal could be 100 families a year out of poverty. Or, we can aim for reducing poverty by 2% in Rockwood area. Or, 50% of people in job training get a job at a living wage.

B. What are the causes of poverty? See Section B

6. Child poverty is caused to a large degree by adult poverty. One can decrease child poverty by decreasing adult poverty.

7. Adult poverty is caused by both personal factors (e.g. lack of skills and readiness to work) and structural factors (e.g. lack of local job opportunities and racism).

8. Poverty is transitional for 2/3 of families.

9. There are levels of poverty and some families will require more assistance than others because they have a lower level of assets and much higher levels of risks.

C. What is the best thinking on how to reduce poverty? See Section C

10. The two strategies most commonly identified by poverty researchers are:

EXECUTIVE SUMMARY

> **Strategy 1**: Increase the level of education, training, skills, and other human capital characteristics of those at the bottom of the capability distribution.
> (e.g. job training, school success, school-to-work, unpaid community service; readiness-to-work training)
> **Strategy 2**: Increase the return that the least capable member of society receives on the use of their human capital. (e.g. wage subsidies, earned income tax credits, individual development accounts, living wages, child tax credits)

11. The literature review for this paper has found 20 successful social programs that have been evaluated using an experimental design. The main intervention in these programs is intensive case management.

12. The two main outcomes of these programs are increases in employment and earnings

❖ Programs that are successful in these two these strategies have some common characteristics: Emphasize self-sufficiency activities to build human capital

❖ Measure effectiveness in terms of self sufficiency. Employment and earnings are valid and required outcomes of programs claiming to reduce poverty.

❖ Intensive case management reduces poverty for youths, low income people, public assistance recipients and the unemployed. Promote linkage at the level of coordinated services for clients rather than at the level of administration.

❖ Provide services at an adequate intensity.

D. What is the county doing to reduce poverty? See Section D

13. Multnomah County is only one actor in the county region helping low income people. This report provides a view of only County-funded activities.

14. The County's focus on school success and support for the Workforce Development Board is consistent with the Strategy 1 to build human capital. Multnomah County has also lobbied for living wages for its employees and contractors. Recently, there are also discussions about County support for individual development accounts.

15. Generally speaking, however, we are focussed on alleviating poverty suffering and rather than reducing poverty causes. Analysis of the current budget shows that 28% of the entire $900 million County Budget goes to programs to ameliorate the consequences of poverty by providing support or maintenance to people with low incomes.

16. 11% of the entire County Budget goes to programs to reduce causes by building self-sufficiency. These programs reduce aim for short term gains (e.g. GED completion) or long term gains (e.g. quality childhood development). Most of our self-sufficiency

EXECUTIVE SUMMARY

programs focus on children and investing for long term self-sufficiency. For adults, county spending to build self sufficiency and marketable assets is limited.

17. The system of services is fragmented and frustrating for staff and clients. There is little, if any sharing of client information across Departments. Planning, delivery and coordination of services to people with low incomes seems to be ad-hoc. Further, amelioration programs are not adequately connected to self-sufficiency programs.

18. People with low incomes in the county access services from a large variety of providers. There is no countywide system to ensure that they are receiving adequate outreach, adequate services or how they are moving out of poverty due to existing programs. The fragmentation of funding, service and accountability starts at the federal level.

19. The County is part of a complex funding transfer system that makes it very difficult to track the source, recipient and accountability of funds.

F. What else can we do to reduce poverty? See Section F

This Report supports the strategies of investing in people and providing a good return on people's efforts. Multnomah County has a record of investing in its children, as School Success is also a major Benchmark. As research suggests that reducing poverty means investing in adults there may be a new opportunity for County endeavors. The second strategy emphasizing structural change may also be arena for the County. Recent conversations regarding the Individual Investment Account and Living Wages for County contractors are two examples of how we are interpreting this strategy.
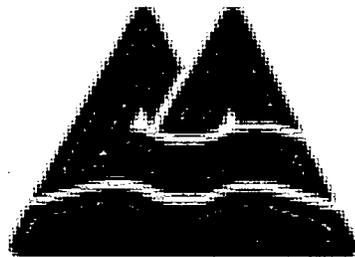
The four characteristics of successful poverty reduction programs also offers the County some ideas to consider. There are many ideas to experiment with and test. This report has been developed as a way to encourage conversation on the topic.
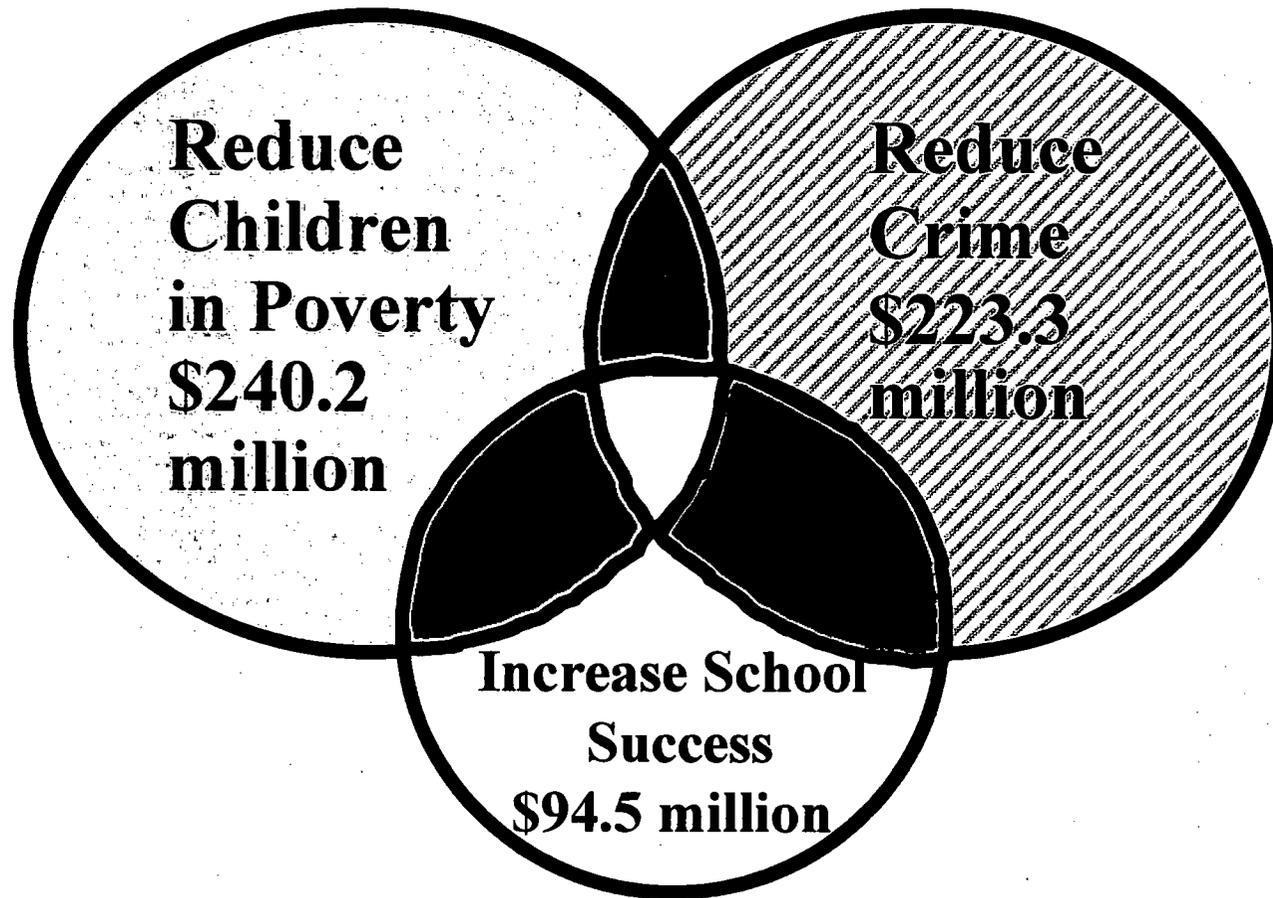
Funding the Benchmarks

A Presentation to the Multnomah
County Board of Commissioners

prepared by Budget & Quality Office,
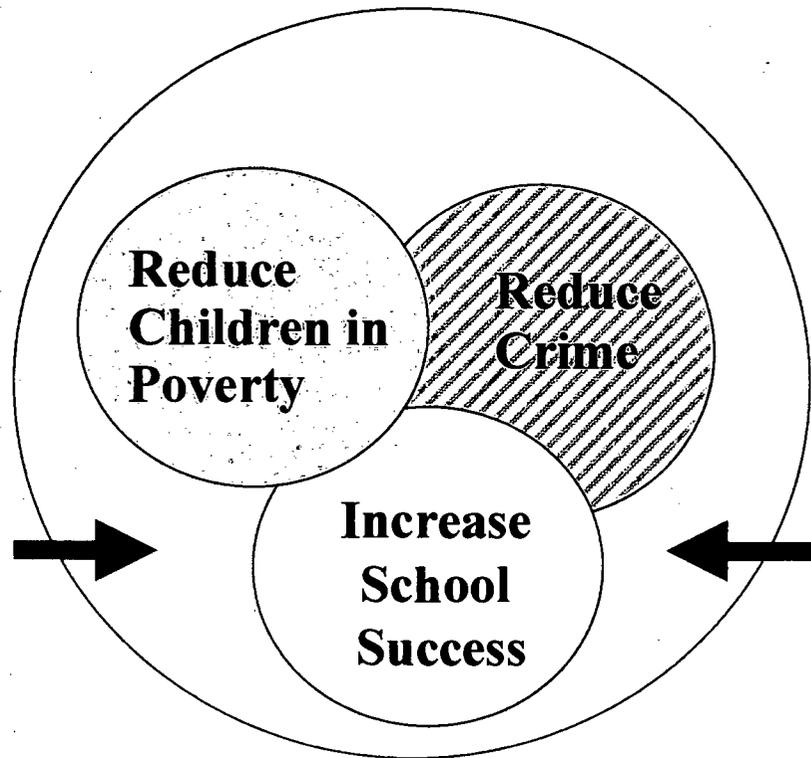
Department of Support Services

March 16, 1999

Long-Term Benchmark Funding FY98-99

Reduce Children in Poverty $240.2 million

Reduce Crime $223.3 million

Increase School Success $94.5 million

50% of the total budget is spent in these 3 areas;
75% of the general fund is spent in these 3 areas

Programs Not Directly Linked to Long-Term Benchmarks

Disease control

Restaurant inspection

Animal control

Transportation

Tax collection & recording

Elections

Reduce Children in Poverty

Reduce Crime

Increase School Success

Adult library services

Facilities

County Commissioners

General Administration

Support Services

Reducing Children in Poverty

Family Centers

Community Action programs

Mental health

Most County provided
alcohol & drug treatment

Developmental Disability Services

Aging & Disability Services

Health care

Teen pregnancy

Programs which supervise criminal
justice offenders & teach job skills

Strategic Investment Program--
workforce development

Programs which
primarily serve the
poor

$240.2 million;
24% of the GF

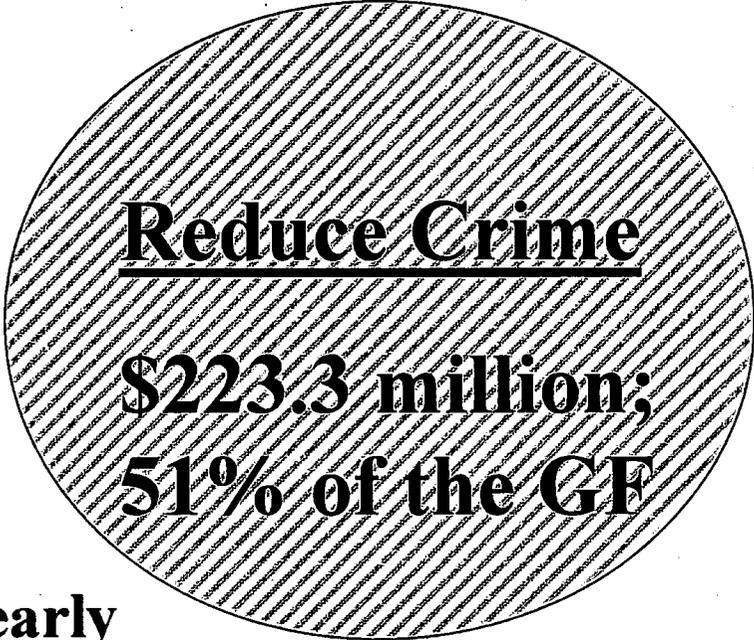# Reducing Crime

District Attorney

Dept. of Community Justice

Sheriff's Office

Protective services functions

Most County provided alcohol
  & drug treatment

Domestic violence programs

Prevention programs including early
  childhood development & youth
  intervention programs

Reduce Crime

$223.3 million;

51% of the GF

Increasing School Success

Early childhood development

Youth investment programs

Library programs for children

Delinquency prevention

Health care for children

Mental health care for children

Juvenile Justice programs

School Attendance Initiative

Caring Community

Domestic violence programs

Take the Time Campaign (youth asset survey,
mini-grants and collaboration grants)

Increase School Success

**$94.5 million;
23% of the GF**

Overlap-- Potential High Leverage Points

•A&D treatment, work
skills, supervision,
sanctions & transition
issues for offenders

•Early Childhood
Development;

•Family Centers;

•Teen Pregnancy;

•Homeless Youth;

•Juvenile Justice
treatment &
supervision programs
which serve the poor

Reduce
Children in
Poverty

Reduce
Crime

Increase School
Success

•Delinquency prevention;

•Juvenile Justice
treatment & supervision
programs which serve
all youth;

•Domestic Violence

•School Attendance Initiative

•Health care & mental
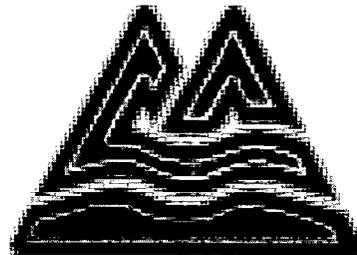health care for poor
children

Challenges

- Better understanding of community trends and their inter-relationships

- Better understanding of our service system

- Better focus and coordination of existing services

- Limited high-leverage investments in an era of funding restraint

- Improving system accountability
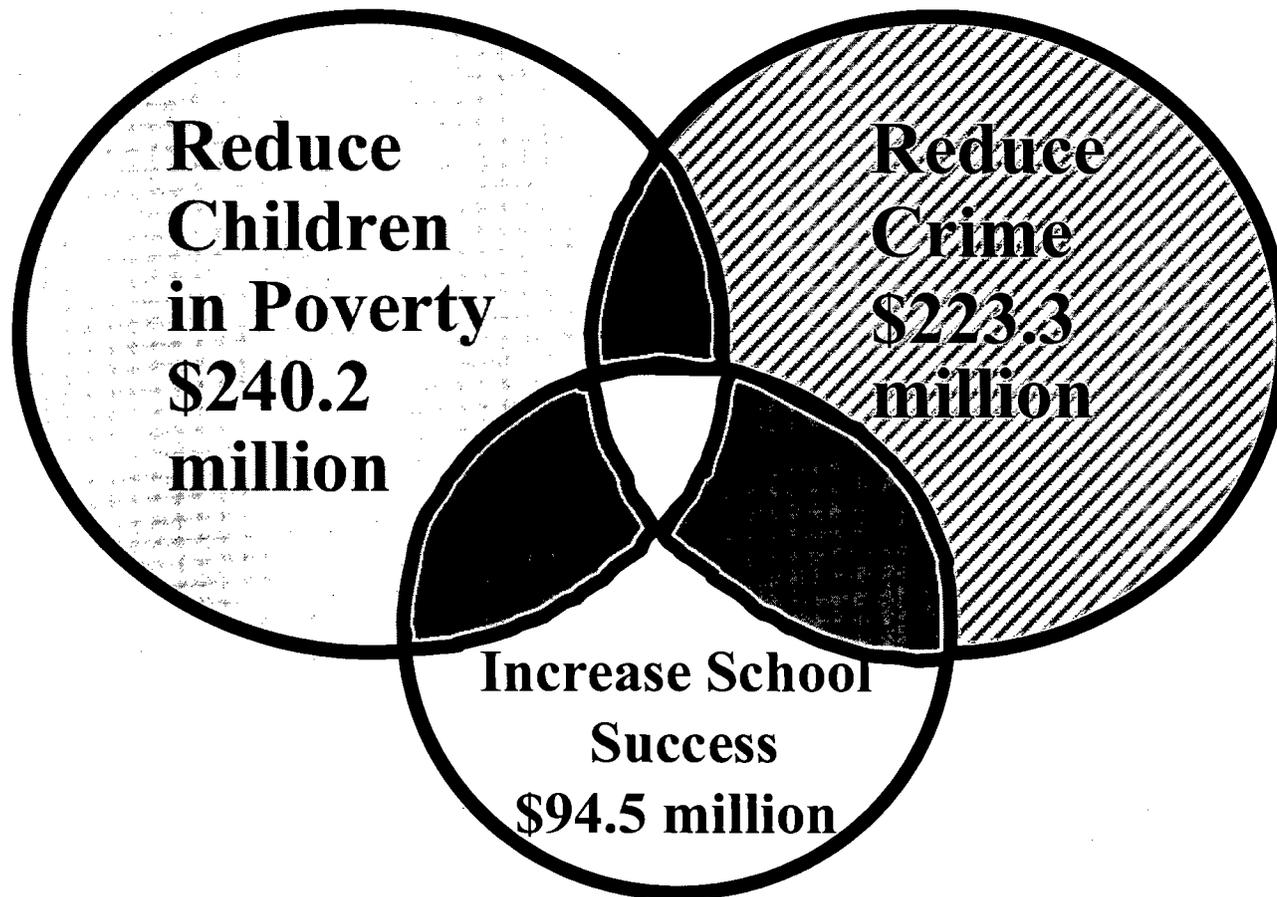
Funding the Benchmarks

A Presentation to the Multnomah
County Board of Commissioners

prepared by Budget & Quality Office,

Department of Support Services

March 16, 1999

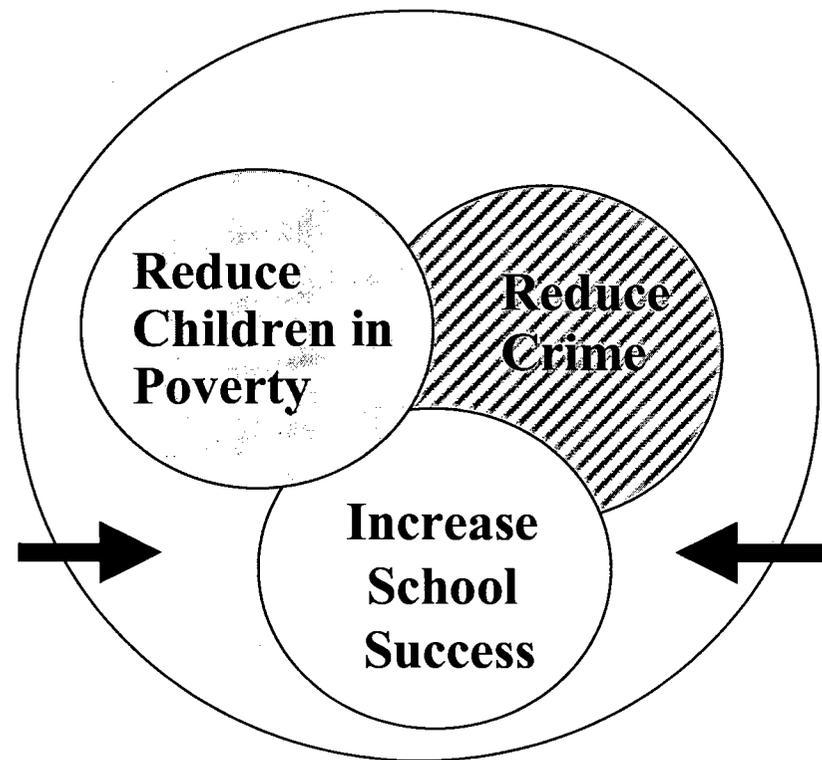# Long-Term Benchmark Funding FY98-99

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Increase School Success $94.5 million

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Programs Not Directly Linked to Long-Term Benchmarks

Disease control

Restaurant inspection

Animal control

Transportation

Tax collection & recording

Elections

Reduce Children in Poverty

Reduce Crime

Increase School Success

Adult library services

Facilities

County Commissioners

General Administration

Support Services

Reducing Children in Poverty

Programs which primarily serve the poor

$240.2 million; 24% of the GF

Family Centers

Community Action programs

Mental health

Most County provided alcohol & drug treatment

Developmental Disability Services

Aging & Disability Services

Health care

Teen pregnancy

Programs which supervise criminal justice offenders & teach job skills

Strategic Investment Program-- workforce development

Reducing Crime

District Attorney

Dept. of Community Justice
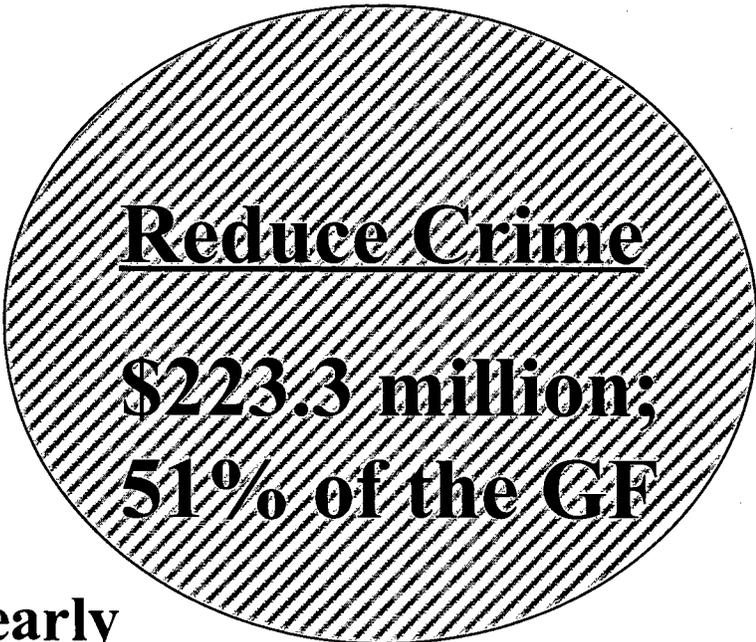
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Increasing School Success

Early childhood development

Youth investment programs

Library programs for children

Delinquency prevention

Health care for children

Mental health care for children

Juvenile Justice programs

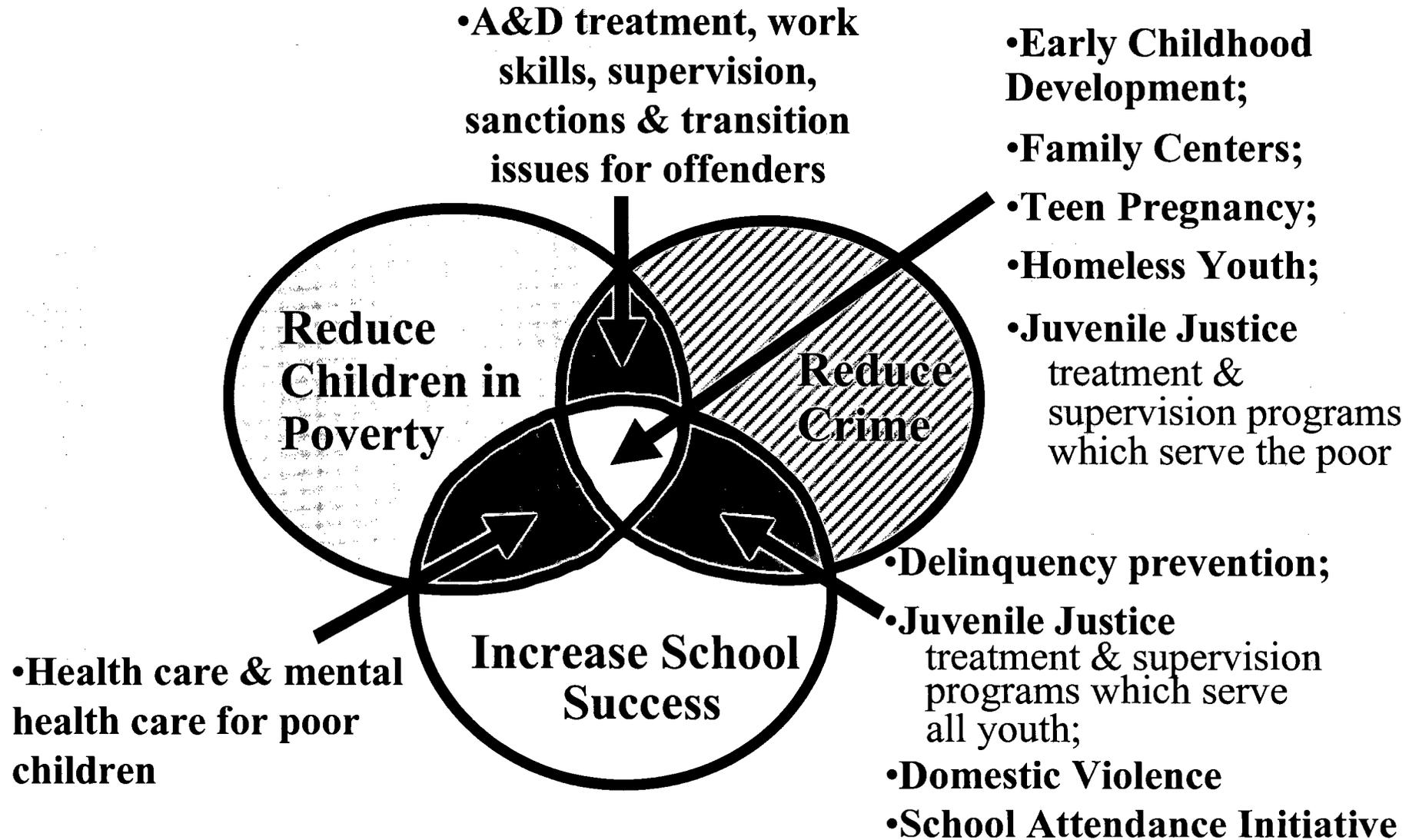School Attendance Initiative

Caring Community

Domestic violence programs

Take the Time Campaign (youth asset survey, mini-grants and collaboration grants)

Increase School Success

$94.5 million; 23% of the GF

Overlap-- Potential High Leverage Points

•A&D treatment, work skills, supervision, sanctions & transition issues for offenders

•Early Childhood Development;

•Family Centers;

•Teen Pregnancy;

•Homeless Youth;

Reduce Children in Poverty

Reduce Crime

Increase School Success

•Juvenile Justice treatment & supervision programs which serve the poor

•Health care & mental health care for poor children

•Delinquency prevention;

•Juvenile Justice treatment & supervision programs which serve all youth;

•Domestic Violence

•School Attendance Initiative

Challenges

- Better understanding of community trends and their inter-relationships

- Better understanding of our service system

- Better focus and coordination of existing services

- Limited high-leverage investments in an era of funding restraint

- Improving system accountability

MULTNOMAH COUNTY PUBLIC SAFETY:

A BRIEF REVIEW OF NATIONAL, STATE AND LOCAL CRIME TRENDS

WORKING PAPER, MARCH 1999 DRAFT
Prepared by Matt Nice,
Evaluation/Research Unit

BUDGET & QUALITY OFFICE
DEPARTMENT OF SUPPORT SERVICES
MULTNOMAH COUNTY, OREGON

Budget and Quality Office 1120 SW 5th Suite 1400 Portland Oregon 97204
Matt Nice (503)-248-5015 Extension 22306

Summary Review

- U.C.R. data indicates the number of Index Crimes (both offenses & arrests) has been declining at the national, state, & county levels for several years (see Figure 1 & Figure 2)
- Oregon L.E.D.S. data indicates Multnomah County arrests for Property and Person-to-Person crimes have been declining since 1995 (see Figure 3)
- Multnomah County arrests for Behavioral crimes (arrests) have been steadily increasing since 1990 (see Figure 3)
- Increases in Multnomah County Behavioral crimes (arrests) have been driven primarily by Drug Law violations- possession, manufacture, distribution (see Figure 3 & Figure 4)
- Multnomah County Drug Law arrests (not including D.U.I.I. or Liquor Law violations) totaled 1313 in 1985 and rose to 5677 in 1996 (see Figure 4)
- The majority Multnomah County Drug Law arrests are Adults (18+)
- A.D.A.M. data for Multnomah County estimates that more than 71% of adult (21+) males and 77% of adult (21+) females test positive for drugs (not including alcohol)
- A.D.A.M. data found that those testing positive for cocaine or opiates averaged 3 prior arrests within the previous 12 months
- A.D.A.M. data finds positives for at least one drug has increased 5.4% for males and 3.6% for females from 1996 – 1997
- Results from a 1992 study (CALDATA) found that for every $1 spent on substance abuse treatment, an average of $7 was saved (4:1 for residential and 10:1 for outpatient)
- Results from a 1994 RAND study found that substance abuse treatment is 7 times more cost-effective in reducing cocaine use than law enforcement
- Results from a 1996 Oregon OADAP study found a $5.60 savings in avoided costs for every $1 spent on substance treatment
- An estimate of the advantages of expanding Multnomah County's Drug Court (S.T.O.P.) program suggests a savings of nearly $5500 per substance abusers (an estimated $1.1 million dollars for 200 abusers)

Terms:
U.C.R.- Federal Bureau of Investigation's Unified Crime Report
Index Crimes- Eight crimes (4 violent & 4 property) reported in the UCR
L.E.D.S.- Oregon's Law Enforcement Data System
D.U.I.I.- Driving while under the influence of intoxicants
A.D.A.M.- Arrestee Drug Abuse Monitoring Program (previously DUF)
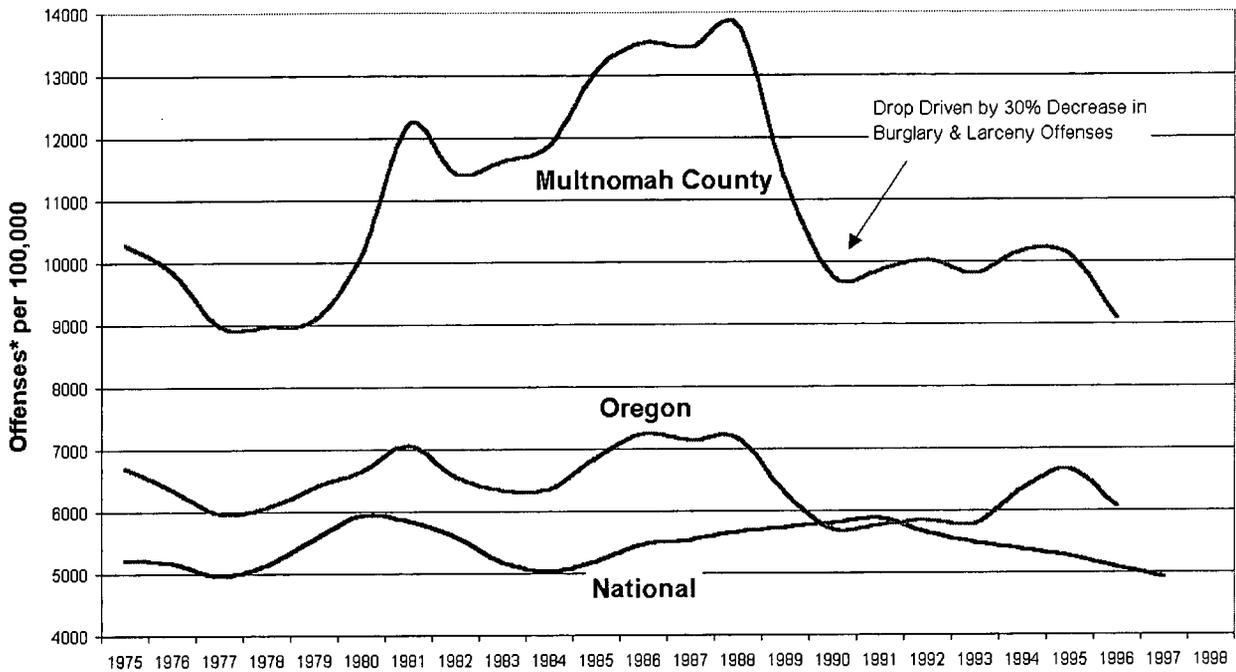CALDATA- Research by the California Department of Alcohol & Drug Programs
RAND- The RAND Corporation (Drug Policy Research Center)
S.T.O.P.- Sanctions, Treatment, Opportunity, Progress, a Multnomah County drug diversion program
OADAP- Oregon's Office of Alcohol & Drug Abuse Programs

Figure 1

National, State, & County Total Index Crimes (Offenses) per 100,000

Total Index Crimes are based on the 4 violent crimes (murder, rape, robbery, & aggravated assault) and 4 property crimes (burglary, larceny, motor-vehicle theft, & arson) as defined by the FBI Uniform Crime Report. Offenses refers to crimes committed (not arrests) and are standardized per 100,000 persons.
Source: LEDS & Uniform Crime Report

Figure 2

## National, State, & County Total Index Crimes (Arrests) per 100,000
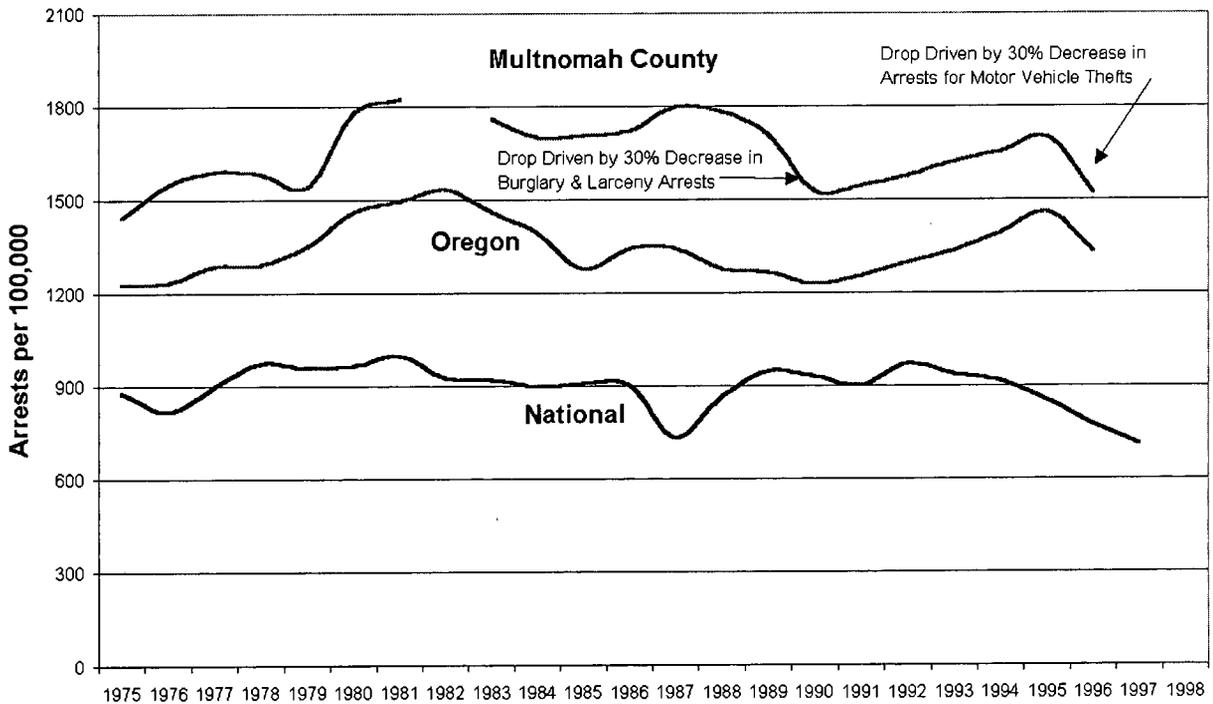
Total Index Crimes are based on the 4 violent crimes (murder, rape, robbery, & aggravated assault) and 4 property crimes (burglary, larceny, motor-vehicle theft, & arson) as defined by the FBI Uniform Crime Report. Arrests refers to those persons apprehended and are standardized per 100,000 persons.
Source: LEDS & Uniform Crime Report

Figure 3

Multnomah County Total Arrests by Type per 100,000
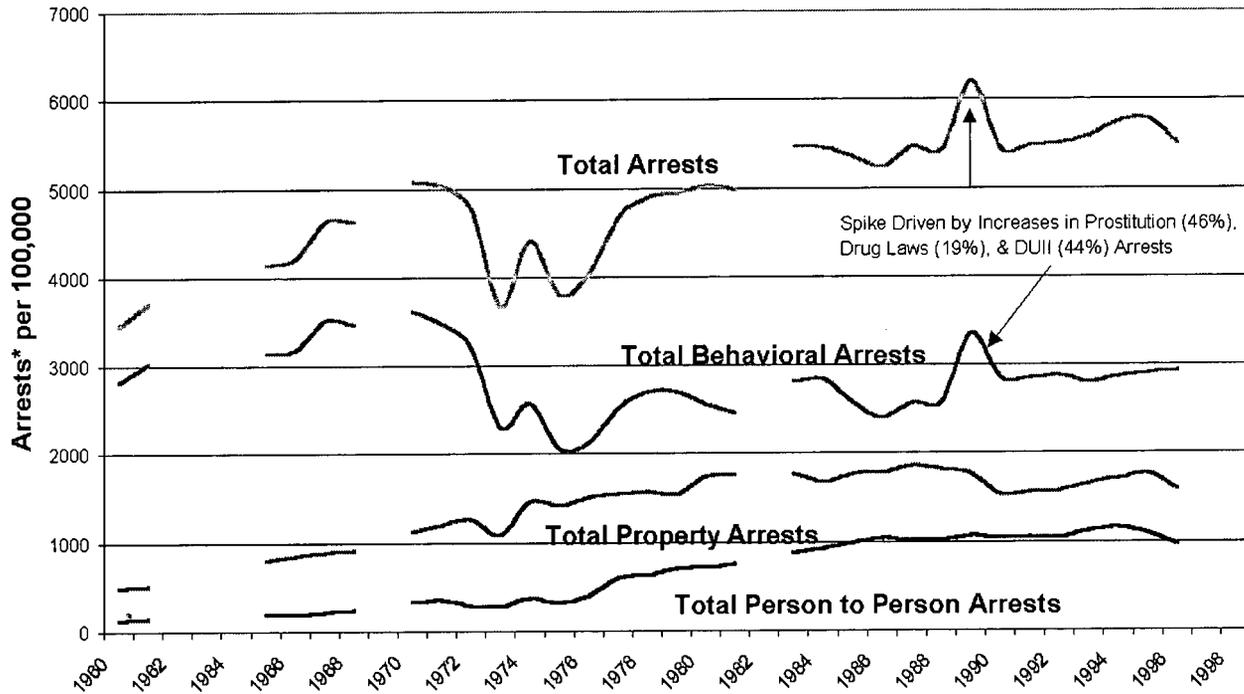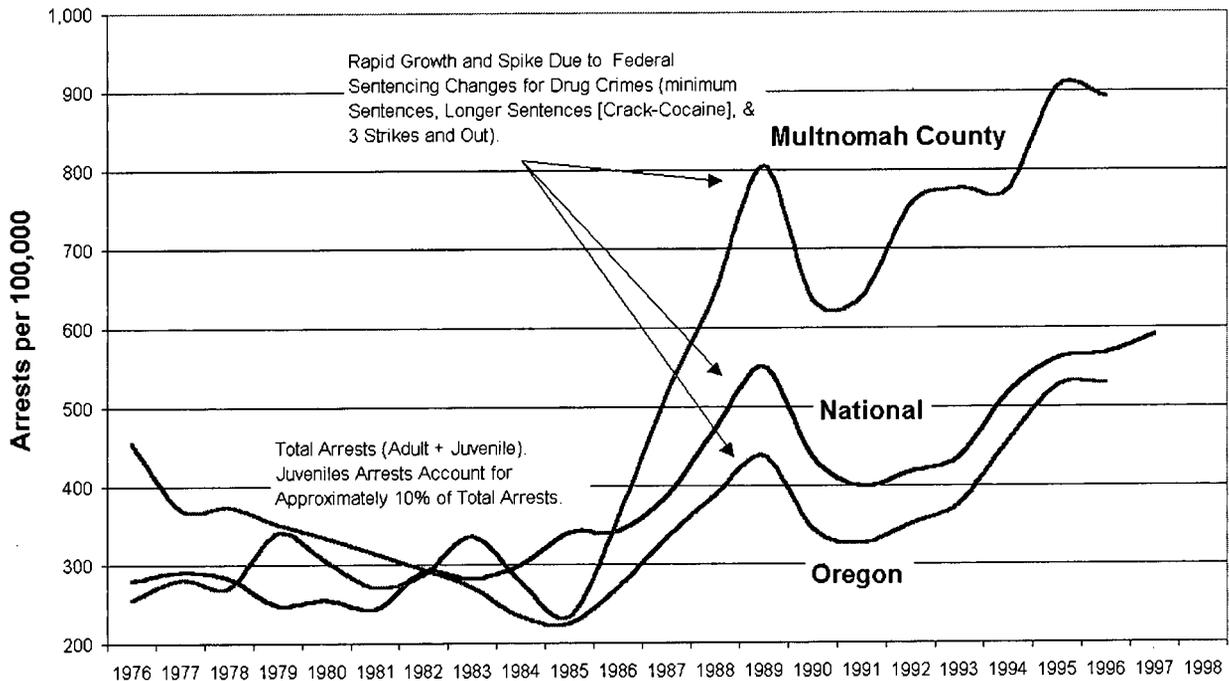

Total arrests refers to all arrests (not an offense) made in Multnomah County and is standardized per 100,000 persons.
Source: LEDS

Figure 4

National, State, & Local Primary Drug Arrests per 100,000

Primary drug arrests refers to the most serious charge for which an offender is charged. Arrests are standardized per 100,000 persons.
Source: LEDS & Uniform Crime Report

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MULTNOMAH COUNTY BENCHMARK APPROACH:

ALLEVIATING CONSEQUENCES OF CURRENT CHILD POVERTY, REDUCING CAUSES OF FUTURE POVERTY

WORKING PAPER, MARCH 1999 DRAFT
Prepared by Van Le,
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MULTNOMAH COUNTY, OREGON

CONTENTS

EXECUTIVE SUMMARY

HOW DO WE DEFINE POVERTY? SEE SECTION A

1. Since 1996, one of the three long term benchmarks is to reduce the number of children living in poverty. It is not clear how this benchmark is being defined. What kind of poverty? What kind of reduction? And what measure? What kind of time frame?

2. First, we need to select from the different ways to define poverty: pre-tax income; pre-tax income and benefits; earnings; wages; program participation; job availability; media headlines; societal indicators; assets; levels of hardship, housing costs, etc.

3. Second we need agreement on what level of wage, assets, earnings, etc. means you are poor. Some people say that the Federal Poverty Level is too low a level. Count people as poor even if they are 200% of the Federal Poverty Level.

4. Third we need agreement on the way we are going to measure the poverty. Is it using a program participation count? A survey of income? A survey of hardship? The way we count is related to what we count.

5. The present benchmark is an idea of what we want. We need a goal to aim for. For instance, the goal could be 100 families a year out of poverty. Or, we can aim for reducing poverty by 2% in Rockwood area. Or, 50% of people in job training get a job at a living wage.

WHAT CAUSES POVERTY? SEE SECTION B

6. Child poverty is caused to a large degree by adult poverty. One can decrease child poverty by decreasing adult poverty.

7. Adult poverty is caused by both personal factors (e.g., lack of skills and readiness to work) and structural factors (e.g., lack of local job opportunities and racism).

8. Poverty is transitional for 2/3 of families.

9. There are levels of poverty and some families will require more assistance than others because they have a lower level of assets and much higher levels of risks.

WHAT ARE THE CURRENT BEST IDEAS TO REDUCE POVERTY? SEE SECTION C

10. The two strategies most commonly identified by poverty researchers are:

    Strategy 1: Increase the level of education, training, skills, and other human capital characteristics of those at the bottom of the capability distribution. (e.g., job training, school success, school-to-work, unpaid community service; readiness-to-work training)

Strategy 2: Increase the return that the least capable member of society receives on the use of their human capital. (e.g., wage subsidies, earned income tax credits, individual development accounts, living wages, child tax credits)

11. The literature review for this paper has found 20 successful social programs that have been evaluated using an experimental design. The main intervention in these programs is intensive case management.

12. The two main outcomes of these programs are increases in employment and earnings

❖ Programs that are successful in these two these strategies have some common characteristics: Emphasize self-sufficiency activities to build human capital
❖ Measure effectiveness in terms of self sufficiency. Employment and earnings are valid and required outcomes of programs claiming to reduce poverty.
❖ Intensive case management reduces poverty for youths, low income people, public assistance recipients and the unemployed. Promote linkage at the level of coordinated services for clients rather than at the level of administration.
❖ Provide services at an adequate intensity.

WHAT IS MULTNOMAH COUNTY CURRENTLY DOING TO REDUCE POVERTY? SEE SECTION D

13. Multnomah County is only one actor in the Multnomah County region helping low income people. This report provides a view of only County-funded activities.

14. The County's focus on school success and support for the Workforce Development Board is consistent with the Strategy 1 to build human capital. Multnomah County has also lobbied for living wages for its employees and contractors. Recently, there are also discussions about County support for individual development accounts.

15. Generally speaking, however, we are focussed on alleviating poverty suffering and rather than reducing poverty causes. Analysis of the current budget shows that 28% of the entire $900 million County Budget goes to programs to ameliorate the consequences of poverty by providing support or maintenance to people with low incomes.

16. 11% of the entire County Budget goes to programs to reduce causes by building self-sufficiency. These programs reduce aim for short term gains (e.g., GED completion) or long term gains (e.g., quality childhood development). Most of our self-sufficiency programs focus on children and investing for long term self-sufficiency. For adults, Multnomah County spending to build self sufficiency and marketable assets is limited.

17. The system of services is fragmented and frustrating for staff and clients. There is little, if any sharing of client information across Departments. Planning, delivery and coordination of services to people with low incomes seems to be ad-hoc. Further, amelioration programs are not adequately connected to self-sufficiency programs. Help increase the coordination by measuring the effectiveness of programs by the impact on the children.

18. People with low incomes in Multnomah County access services from a large variety of providers. There is no countywide system to ensure that they are receiving adequate outreach, adequate services or how they are moving out of poverty due to existing programs. The fragmentation of funding, service and accountability starts at the federal level.

19. Multnomah County is part of a complex funding transfer system that makes it very difficult to track the source, recipient and accountability of funds.

WHAT ELSE CAN MULTNOMAH COUNTY DO TO REDUCE POVERTY? SEE SECTION E

This Report supports the strategies of investing in people and providing a good return on people's efforts. Multnomah County has a record of investing in its children, as School Success is also a major Benchmark. As research suggests that reducing poverty means investing in adults there may be a new opportunity for Multnomah County endeavors. The second strategy emphasizing structural change may also be arena for the County. Recent conversations regarding the Individual Investment Account and Living Wages for County contractors are two examples of how we are interpreting this strategy.

The four characteristics of successful poverty reduction programs also offers Multnomah County some ideas to consider. There are many ideas to experiment and with test and this report has been developed in a way to encourage conversation on the topic.

BACKGROUND AND METHODOLOGY

I. GOAL

In the Summer of 1998, the Department of Support Services, Evaluation/Research Unit began to study current and potential responses to child poverty. The work plan included (1) a best practices review; and (2) a mapping of the current system (funding, services and accountability) in Multnomah County. This study on child poverty addressed two questions:

❖ What is Multnomah County's current approach to reducing child poverty?
❖ What are important elements for a Multnomah County plan to reduce child poverty?

This document is a combination of a literature review and an analysis of Multnomah County administrative data. It provides a national view of poverty causes and best practices to better analyze current Multnomah County funding.

It has not, however, analyzed the system for all of Multnomah County region and its many actors. Such an effort would require an extended collaborative effort with these many actors sharing data and time.

II. DATA COLLECTION

There were three main types of data collection for this report: interviews with selected experts and professional staff; a review of available literature; and an analysis of County administrative data.

This report required about 0.60 FTE of direct staff time. Many Multnomah County colleagues and numerous interested and helpful people also assisted in providing suggestions and needed information.

III. OVERVIEW

There are two other County publications on poverty to be issued this Spring 1999.

In the Fall of 1996, the Department of Community and Family Services, Division of Community Programs and Partnership, published a report on child poverty entitled *Poverty in Multnomah County: A Descriptive Report*. The Division also has a follow-up report called *Child Poverty Reduction Initiative*. Janet Hawkins, Community Action Coordinator at the Commission for Children, Families and Community is the lead author.

Also, in the Fall of 1997, the Domestic Violence Workgroup began working, in conjunction with planning for the May 1998 Women's Economic Conference, on a report on the status of women, poverty, and domestic violence. This report will be completed by June 1999 and is titled *Facing the Challenge: A Report on the Economic Status of Women in Multnomah County*. Chiquita Rollins, Multnomah County Domestic Violence Coordinator is the lead author. She is being assisted by Joy Webber and Allison Suter.

SECTION A: HOW DO WE COUNT POOR CHILDREN?

*There is no particular reason to count the poor unless you are going to do
something about them. When it comes to defining poverty, you can only be
more subjective or less so. You cannot be nonsubjective.[1]* M. Orshansky, 1969

I. INTRODUCTION: THREE ISSUES RELATED TO COUNTING THE POOR

It is common to equate "poor people" with "people with low incomes." It is also common to equate "people with low incomes" with those whose incomes are lower than the published Federal Poverty Level. This mental shorthand emphasizing one type of poverty/resource (financial) and one calculation of adequacy (the Federal Poverty Level) is being reconsidered by many, including the US Government Accounting Office, the US Census Bureau, and the National Academy of Sciences. The Institute for Research on Poverty has documented at least 30 federal government projects to redefine the current poverty measure.[2]

This national reconsideration of who is poor can have implications for our local work on the benchmark Reducing the Number of Children Living in Poverty. Currently, we count the poor in Multnomah County by using the 1996 American Community Survey to make estimates based on the above mental shorthand. Perhaps we could be counting the number of poor children in other ways.

There are three steps to counting the poor. The first step is to decide what kind of poverty (or conversely, what kind of resources) to count and what not to count. Multnomah Commission on Children, Families & Community's Asset Survey is part of the work to expand thinking expanding the list of resources beyond

pure financial (e.g., income, earnings) considerations.

After we have decided which resource(s) to count, the second step is to determine the adequate level for the resource that we are counting. For example, if we decide to count income, what level is enough income? Those who do not have enough of this resource are "poor" and those who have enough are "non-poor."

After we decide the type of poverty and how to calculate the poverty, we will need to think about existing or new data collection methods that will count people using the new formula. This last step allows us to regularly report on the benchmark using a consistent method. Having a dependable measure also allows us to set a goal for the benchmark.

The next two subsections outlines the main conceptual choices for the first two steps. subsection four presents seven alternate methods available to us in our reconsideration of who is poor and how many are poor in Multnomah County. The last subsection is a list of policy questions to assist discussion on this topic.

Ruby Payne's framework for describing types of poverty presents a broad framework for understanding the different types of poverty/resources. And, although we are not talking about solutions to poverty in this section, it is clear that some resources are associated with particular strategies. This means that decisions about who to count as poor (e.g., unemployed people, people with low-wage jobs) can have consequences for the strategies that we select to reduce poverty.

According to this view of poverty, our current method of counting only financial resources misses out on crucial needs and capacities. Which of these resource(s) are appropriate to track as a way to monitor our progress in Reducing the Number of Children Living in Poverty?

POVERT(IES) IN DIFFERENT HOUSEHOLDS		
FINANCIAL RESOURCES	INCOME	Having the money to purchase goods. Income can come from savings, employment or programs that provide tax credits or cash benefits.
	EMPLOYMENT	Having a job provides earnings as well as some of the other types of resources.
	NONCASH BENEFITS	These resources (e.g., medical benefits) come from programs seeking to alleviate poverty.
NON-FINANCIAL RESOURCES	EMOTIONAL	Being able to choose and control emotional resources, particularly in negative situations. This is an internal resource and shows itself through stamina, perseverance, and choices.
	MENTAL	Having the mental abilities and acquired skills (reading, writing, computing) to deal with daily life.
	SPIRITUAL	Believing in divine purpose and guidance. This can be a powerful resource because the individual does not see him/herself as hopeless and useless, but rather as capable and having worth and value.
	PHYSICAL	Having physical health and mobility.
	SUPPORT SYSTEMS	Having friends, family, and backup resources available to access in times of need. Support systems can help when an individual needs more financial, emotional, or informational help.
	RELATIONSHIPS/ ROLE MODELS	Having frequent access to adults who are appropriate, who are nurturing to the child, and who do not engage in self-destructive behavior. It is largely from role models that the person learns how to live life emotionally.
	KNOWLEDGE OF HIDDEN RULES	Knowing the unspoken cues and habits of a group. This is crucial to whatever class in which the individual wishes to live. Generally, in order to successfully move from one class to the next, it is important to have a spouse or a mentor to model and teach the hidden rules.

Source: *A Framework for Understanding Poverty*, 1998, pages 16-18.

Family Size	1998 Oregon monthly income threshold as set by the US Department of Health and Human Services	1996 Oregon monthly budgets for typical households as calculated by the Northwest Job Gap Study
1 person	$671	$1745
2 people	$904	$2267
3 people	$1138	$2835
4 people	$1371	$2433
5 people	$1604	$3117

Sources: *Federal Register, 1998,* page 9236 and *Northwest Job Gap Study, 1999.*

Once we have decided what to count, we will need to decide on what is "enough." The Table below has two different conceptualizations of what is enough for a family living in Multnomah County. US Department of Health and Human Services publishes annual poverty guidelines (the cost of the Thrifty Food Budget multiplied three times). In contrast, the Northwest Policy Institute has created budgets for typical Oregon families.

Families whose pre-tax income are lower than the amounts below are designated as poor and are eligible for a variety of programs. Congress recognizes that the Federal Poverty Level is too low and there are many programs that give benefits to families up to 200% of the amount stated below. Programs range in benefits and can offer cash (e.g., utility subsidies) or non-cash benefits (e.g., food stamps) to poor families. It is also important to note that Congress also gives benefits to non-poor families (e.g., school loans, tax credits, and deductions) and corporations and these benefits are not counted as pre-tax income.

The National Academy of Sciences made many recommendations to improve the current poverty measure.[3] Two ideas are that new the new method 1) raise the poverty threshold and 2) reflect the economic realities for today's families.

Raising the threshold could be as simple as deciding that the number of poor people are those under 185% of the income threshold. This is in fact the strategy being used by many federal (e.g., school meals) and state (e.g., Oregon Health Plan) programs needed by low-income people.

One way to reflect economic realities (e.g., cost of living, average wage) is by calculating the median pre-tax income for all families in a region. For example, according to the 1997 American Community Survey, the median household income for Multnomah County in 1997 was $34,559. The annual median income would be $17,279, or $1,440/a month. This is a relative measure of poverty and families with income below the median would be considered poor.

These two new policies to change the threshold would result in a different number and profile of people who we count as poor. An example of this result can be seen in Appendix A

The previous subsections outlined considerations on who is poor. This subsection describes existing measures for counting the poor in Multnomah County. Each measure has assumptions about what to count and what is enough. By deciding what to measure we make it easier to set a goal and make it possible to self-evaluate our progress with the benchmark.

Method 1: Estimate the number of poor children from US Census data or Oregon Population Survey about their parent's income. Children in families with incomes below the Federal Poverty Level are counted as poor. This measure is appropriate if we decide that County-funded programs are intended to increase the level of parental pre-tax income.

Please note that the American Community Survey results and the Oregon Population Survey results differ. We will have to decide which survey to depend on.

Source of Data	1990	1992	1994	1996	1997	1998
CONFLICTING DATA ON POVERTY IN MULTNOMAH COUNTY						
Total population: Center for Population Studies, Portland State University	583,887	605,000	620,000	636,000	639,000	
All people: US Census ('90) and the American Community Survey ('96 and '97)	13.1			14.1	13.6	
All people: Oregon Population Survey	12	20.2	14.5	8.6		11.8
Kids 0-18: US Census ('90) and the American Community Survey ('96 and 97)	16.3			18.9	17.4	
Kids 0-17: Oregon Population Survey	10.6	21.8	20.5	11.7		16.4
Adults 65+: US Census ('90) and the American Community Survey ('96 and '97)	10.4			10.1		11
Adults 65+: Oregon Population Survey	N/A	26.1	16.6	9.6	N/A	14.2

NUMBER OF PEOPLE BELOW THE FEDERAL POVERTY LEVEL IN MULTNOMAH COUNTY
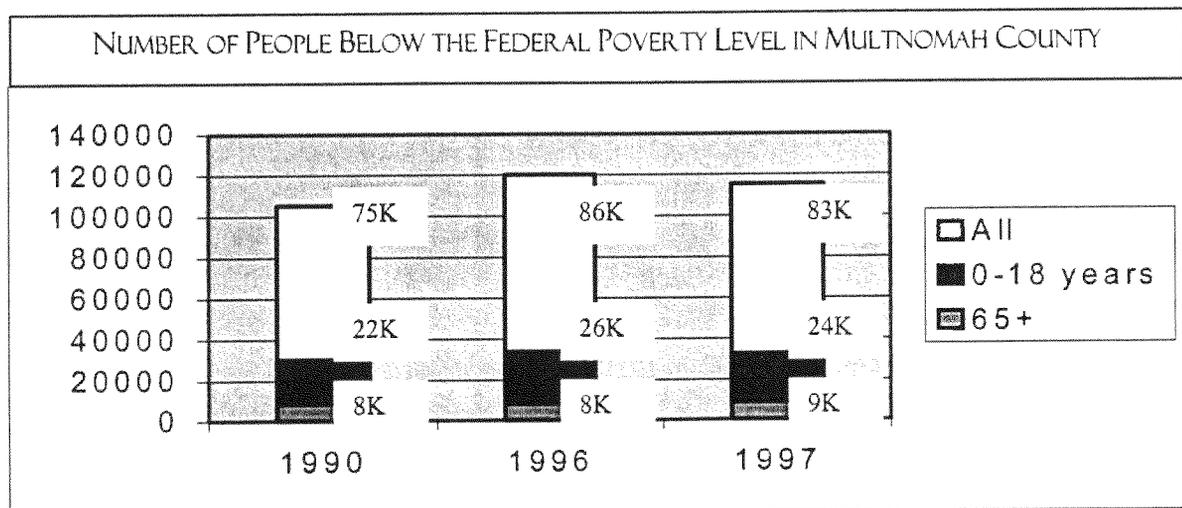
Sources: 1990 data: Bureau of Census. 1996 and 1997 data: American Community Survey

Method 2: Calculate the living wage for each year, survey County-funded program users each year to find out people's wages and household composition. This measure also emphasizes a financial view of poverty but at a higher threshold. The "working poor" will be included in this count and we will have a higher number of "poor" people in Multnomah County.

We should choose this method only if we feel that the programs the County funds, partially or wholly, are designed to increase people's wages. Also, if we want to focus on reducing child poverty then we should focus efforts at increasing the wages of adults who have children in their household.

Method 3: Collect data about the level of program use. Concentrate on programs that are used by poor children. There are programs that have income testing and eligibility is based on parental financial scarcity. Two excellent examples are the Oregon Health Plan and the Federal School Meals Breakfast. We could also choose programs like the County Library reading programs and keep track of the number or % of children and their parents who use the programs each year. This would move us away from a financial view towards other types of poverty.

The biggest constraint in using program participation numbers is that such numbers are greatly influenced by outreach and access factors. For example, if a district increases advertising and recruitment then the numbers of participants in School Meals programs will increase though poverty may not have.

Conversely, when program participation numbers decline in for Adult & Family Services caseload, it is not possible to assume that poverty has decreased. (As a matter of fact, a 1998 Tufts University study concluded that poverty in Oregon may have increased although caseload has decreased.)[4]

Method 4: Use social trends data to infer the trend for child poverty. Every year, Children First for Oregon publishes data on 12 indicators to profile Multnomah County children. This is only one of about 40 projects around the country that is tracking and publishing indicators of child, youth, and family well-being.[5]

Multnomah County could choose another set of child related measures (e.g., child immunization, readiness-to-learn) and report on an annual basis as part of a report on how well or poorly is Multnomah County doing at reducing child poverty.

Also, there is an annual report to Congress on predictors or risk factors of welfare dependence. Indicators include: % residing in high poverty neighborhoods, adult literacy and teen alcohol substance arrest rate.[6] We could use these indicators to measure poverty in Multnomah County.

This method moves away from the purely financial view of poverty towards a mental and physical view of child poverty. This method will produce a different profile of who is poor.

Method 5: Measure the level of children's assets. Just as the US Department of Health and Human Services Department sets the Federal Poverty Level, the Search Institute[7] has suggested that children need at least 30 developmental assets of the 40 they have identified.

In 1997, the Commission on Children, Families & Community surveyed a sample of Multnomah County children and found

that only 8% have the recommended number of 30 or more assets. 16% of our children have 10 or fewer[8]

This measure may also produce a different profile of who needs programs in Multnomah County. One potential constraint on this measure lies in the fact that it is not clear how much effort is required to change the results. Consequently, we should decide to measure asset wealth/poverty only if we feel that County-funded programs are focussed on increasing the level of assets in Multnomah youth.

Method 6: Survey people about the "level of hardship" in their lives. The Census Bureau is studying a new measure of "household well-being" as a supplement to their traditional counting.[9] One survey question asks, "*During the past 12 months, has there been a time when your household did not meet its essential expenses. By essential expenses, I mean things like the mortgage or rent payment, utility bills, or important medical care?*"

Analysis of data from a pilot project using this survey shows that these types of hardship have "*a significant influence on high school dropout regardless of the level of poverty*. Multnomah County could use this same survey locally on an annual basis to measure the level of hardship reported by residents.

A survey of this nature is conducted annually by the Oregon Hunger Relief Task Force. Multnomah County could choose to adopt and publicize these findings as a way to describe its progress, or lack of progress, at reducing the number of children living in poverty.

We also have regular surveys by the Department of Community and Family Services that ask program clients about their current situation. Results from surveys conducted since welfare reform concurs with the Oregon Hunger Relief Task Force in that there are more people needing food though welfare caseload has reduced.

Method 7: Count the number of stories in the major media each year about child poverty. How many stories describe an increase in poverty? How many stories describe a decrease? This is certainly not a formal way to count poverty but it is a way to assess the level of concern and general public awareness on whether poverty is going up or down in Multnomah County.

Deciding on a method will make it easier for us to decide a goal. An example of a concrete goal, rather than a conceptual benchmark, can be seen in Opportunities 2000 project in Waterloo Region.[10] This community has decided that their goal is bring 2000 families out of poverty by the year 2000. The entire community is focussed around this goal and it is being carefully evaluated.

This section suggests that three "counting" issues are fundamental when we try to reduce poverty in Multnomah County. The issues relate to what kind of poverty count, what is enough, and not enough, and how to collect data.

This paper suggests that these issues are important no matter what programs strategies Multnomah County chooses to highlight. This is also true no matter what segment of the population we choose to prioritize.

In fact, the type of resource we focus on (e.g., the kind of poverty we want to reduce) will influence the type of program we choose to fund, the amount of funding we support and how we will measure the results of our interventions is connected to the way we define poverty. Consequently, any plan that seeks to reduce poverty in Multnomah County should address these issues.

These four questions are intended to help resolve the issues in this section.

1. Given the range of poverty/resources that we could try to reduce, what is Multnomah County's niche in relation to other actors in the region?

2. Parental financial poverty seems to be a key type of poverty. What does it mean to reduce the number of children in living in poverty if Multnomah County does not focus on reducing parental financial poverty?

3. Should we check for results in reducing child poverty on a region-wide basis or just with residents who use County-funded programs? If it is the latter, can we frame the benchmark as goals for specific programs?

4. At present, we have no annual reporting on how well or poorly Multnomah County is funding or progressing towards the benchmark in the long term. Would it be appropriate or useful to have such a report?

SECTION B: WHAT CAUSES CHILD POVERTY?

I. INTRODUCTION

The previous section questioned the type of poverty we should focus on in Multnomah County. This section reviews the literature about poverty to answer questions about the causes of poverty.

The majority of the literature reviewed for this section was based on the assumption that poverty is a condition of financial scarcity. Also, there was also a great deal of more literature on the topic of general poverty than adult poverty.

Consequently, for this section and the remainder of this paper, descriptions about poverty will mean by-and-large financial poverty and poor people will equate to people with low incomes. When possible, the paper will focus on child poverty but the general discussion from this point on will be about adult and specifically family poverty.

PERSONAL VS. STRUCTURAL CAUSES	
"It's the people and their problems!"	"It's the society and its structure!"
Unprepared/poor parenting: teenager and households with a single adult cannot provide sufficiently.	**Job/housing mismatch**: the poor and minority live in places where there is no job growth and little access to job-rich social networks.
Family changes: divorce or the death of a spouse reduce the number of earners in the household while increasing the expenses.	**Lack of jobs, low wages**: low skilled manual labor jobs moved overseas and union jobs decreased so working families have fewer job choices and less benefits.
Low human capital: adults in the household do not have skills that allow them to work at living wages.	**Discrimination**: racism and sexism in hiring, renting, and lending practices create unfair and difficult obstacles for families seeking to improve their status.
Personal value system: low readiness-to-work or unwillingness to work on the part of adults in the household.	**Societal trends**: declines in public assistance for children, increases in income taxes and cost of living, intergovernmental fragmentation make it difficult for families to get out of poverty.

Adult poverty is due to personal problems, systemic inequalities, plus barriers. Some theories about adult poverty describe a combination of personal problems while other theories emphasize systemic inequalities that can cause poverty.[11]

Historically, there has been a divide between those who emphasized one set of causes over another. Joan Walsh describes one of the achievements of complex community initiatives is to recognize that *"the chronically poor today lack not just jobs or income, but positive relationships with people and institutions that can help them improve their lives."*[12]

The growing consensus that there are varied causes and mixtures of causes is also consistent with the findings in the next section that best practices to reduce poverty are complex and full service.

The literature is also clear that current adult poverty is a cause of child poverty. One study found that 26% of children's poverty spells began at birth, 12% began with the loss of a parent, and 42% began with

reductions in the earnings of an adult household member.[13] Current child poverty can also cause later adult poverty, according to Jay Teachman:

Children who had spent one to three years of their adolescence in a family below the poverty line were about 60% less likely to graduate from high school than children who had never been poor. Children who had spent four years of their adolescence living in a family below the poverty line were about 75% less likely to graduate from high school[14].
Source: *Consequences of Growing Up Poor*, 1997, page 383.

Donald Hernandez tells the same story about parental influence on child poverty:

While the rise of mother-only families is without doubt increasingly important as a proximate cause of childhood poverty, the historical analysis presented here strongly suggests that employment insecurity and low earnings for fathers continues to be prime determinants of the levels of and the trends in childhood poverty, both because of their direct effect on family income and because of

their indirect contribution to the rise in mother-only families. This analysis also strongly suggests that mothers' employment has become increasingly important in determining childhood poverty levels and trends, both directly because of the income mothers bring into the home and indirectly by facilitating separation and divorce.

Source: *Consequences of Growing Up Poor*, 1997, p.33.

While this section does not aim to identify particular segments in Multnomah County that are suffering "more poverty" than others groups,[15] it is clear that for some segments in society have a higher risk for longer periods of poverty. There are also segments of society for whom poverty is a lifelong and intergenerational hazard. This subsection reports the findings in the literature about patterns in poverty experience.

No matter what the cause, or configuration of causes, it seems that poverty is a transitional or situational condition for most people. Karl Ashworth analyzed the Panel Study of Income Dynamics data (a national longitudinal survey that began in 1968 and is still continuing) to find that "*it is possible to predict adequately the kind of poverty experienced by children on the basis of their socio-demographic characteristics.*" The data from families in the survey does not speak about causes, but does show the following patterns of poverty:[16]

❖ 79% of African-American (A-A) children experienced poverty vs. 31% of Caucasian (C) children
❖ One in 12 (A-A) children was permanently poor vs. one in 200 (C)
❖ 50% of children where the household head failed to graduate high school spent at least a year in poverty vs. 14% from better educated homes

Perhaps one of the most interesting findings is that 6% of Caucasian children with well-educated parents will experience poverty during their childhood

Oregon State University researchers, Bruce Weber and Elizabeth Davis summarized research on the topic of transitional and persistent poverty.

Despite popular stereotypes of long-term poverty and welfare dependence, there is a high level of turnover in the poverty population each year. Using national longitudinal survey data, Gottschalk, et.al. (1994) find that nearly 60% of poverty spells last only one year. While many experience repeated spells of poverty, Blank's (1997) analysis found that 59% of American who were poor between 1979 and 1991 were poor for three years or less out of the 13 year time period studied. While long-term poverty is a major concern, for many households' poverty spells do not last more than one or two years.
Source: Linking Policy and Outcomes, 1997, p. 3.[17]

Weber and Davis' diagram shows that entries into poverty and exits from poverty are influenced by the two main supports in most people's lives: family and earnings.[18] Earnings decrease (e.g., job loss) send 45% of people into poverty and it also an earnings increase that brings 52% of the people out of poverty.

A combination of personal (e.g., recent work experience, eligibility for free job training) or background assets (e.g., family loan, neighbor child care) can create enough resilience to take the family out of poverty. Two thirds of families who are poor are transitionally poor, and return to self-sufficiency for at least short periods of time.

Entry Into Poverty

Earnings Decrease 45%

High School Dropouts 3%

Divorces 12%

Other Income Changes 10%

Unmarried Births 9%

Other Family Changes 21%

Dropout Prevention Programs

Teen Pregnancy Prevention Programs

Exit From Poverty

Other Family Changes 20%

Other Income Changes 14%

Marriage Exits 11%

Child Support Exits 3%

Earnings Exits 52%

Social Supports

Economic Development

Child Support Enforcement

Source: *Linking Policy and Outcomes*, 1997.

Tufts University Center on Hunger and Poverty concurs with this research about the profile of people on welfare:

> *Roughly a third of welfare recipients primarily need short-term assistance, and are likely to move into jobs that enable them to become self-sufficient within a relatively short time period. Another third (approximately) of recipients face greater barriers to employment, and need more supports, but can eventually achieve some level of self-sufficiency... A third component of recipients is characterized by severe barriers to employment, and is not likely to achieve economic self-sufficiency.*
> Source: *Are States Improving the Lives of Poor Families.*1998, p.29.[19]

Lisbeth Schorr describes in more detail these families who are on welfare in transition.[20] These families *"may need help with job search and placement, and they need income support to get back on their feet, but these are the families whose behaviour and life choices are not a subject of great concern."*

The second group of families leave welfare but remain in poverty and cycle back in because they *"lack the skills, support, or capacity to find and keep work that pays enough to get the family out of poverty."*

The third group of families are *"unwilling and unmotivated"* to work because they have obstacles like clinical depression or substance abuse. Or, they cannot find work that pays better than welfare.

Schorr points out that some people in these last two groups may lack the educational and educational qualities to get and hold onto a job. The Brookings Institution analyzed results of the Armed Services Qualifying Test and found that 68% of long-term AFDC recipients (3 or more years of benefits in the last five years) scored so low *"that none of these women would be eligible for the armed forces."*

No matter what the causes of poverty may be, Robert Haveman of the Institute for Poverty Research estimates that up to one quarter of welfare recipients encounter *"insurmountable barriers to employment, including chronic mental and physical health problems, lack of basic skills, or serious language deficiencies."*

In April 1997, the Social Support Investment Work Group completed a yearlong study about self-sufficiency in Oregon. Their report to Governor Kitzhaber recognized the variety of risks and the variety of supports Oregonians need. Some Oregonians need more supports than others at different times in their lives. *"For example, a person who is at-risk for access to health care as a child, may or may not be at-risk for affordable housing as an adult."* The report affirms also, *"some individuals will consistently require state support."*[21]

The National Association of Counties surveyed 80 county governments as to the status of welfare reform implementation in 1998. While 98% of the counties reported a reduction in total number of welfare recipients, *"a serious concern exists about the ability to place those people with multiple barriers to employment."*[22]

In conclusion, the research on the causes of poverty shows that there is a variety of contributing causes. Some of the causes are so overwhelming that there is a population that will always need public support and the benefits of asset building activities will be drastically limited for these families. There is also a variety of families in poverty.

The next section will report on the best thinking and best practices to reduce poverty and increase resources. The multiple causes described in this chapter leads to a need for varied and multiple interventions, depending on the individual and context.

The questions for this section about causes of poverty include the following:

1. No matter how families get into poverty, do we agree that the combination of risks and assets in each family vary substantially and it will be easier to help some than others? Do we want to focus our poverty reduction efforts on any particular group of families or everyone?

2. Compared to other actors in the region, how important is Multnomah County's role to reduce adult poverty?

3. Compared to other actors in the region, how important is it for Multnomah County programs to deal with causes of poverty compared to the consequences of poverty?

SECTION C: WHAT ARE PROMISING AND BEST PRACTICES TO REDUCE POVERTY?

I. INTRODUCTION

In 1990, the Council of State Policy and Planning Agencies conducted research into best practices in anti-poverty programs. The working group concluded, "*successful programs recognize and respond to the needs of the community; they reflect the character of its people; ... they build capacity in people and in neighborhoods...[and] best practices are whatever works in a given context.*"[23]

This is a disheartening conclusion but not surprising given the wide variety of causes and families portrayed in the previous section. Reports of program success are often in the eye of the beholder. Efforts to synthesize our current knowledge tended to be non-committal.

- ❖ *More successful schooling is perceived to be linked to lower delinquency rates.*
- ❖ *The involvement of parents in the preschool program may have helped them establish a supportive home environment.*
- ❖ *Others have proposed the combination of the early preschool education and the parental support may have generated the dramatic effects of these interventions.*

Source: *Children, Families & Government*, 1996[24].

Another major synthesis about programs to reduce poverty concluded:

> *The bad news is that there do not seem to be any programs that reduce poverty in a cheap and effective way. There seems to be some programs that do not work. Others seem modestly successful at meeting limited objectives in a cost-effective way. Most observers would say that those programs are well worth pursuing or even enlarging. But no programs seem to be on the horizon that will fundamentally and dramatically reduce the incidence of poverty in the United States.*
>
> Source: *Reducing Poverty in America*, 1996, page 7..[25].

The purpose of this section is to identify such programs, consolidate their learnings and present a summary of the current best advice to reduce poverty. And, while there is a tendency in this section to present poverty as financial scarcity there is also a great deal of best practice understanding that other assets need to be built.

The ideas in this section about the types of programs and policies to emphasize need to connect with the previous sections about the causes of poverty and what kind of poverty we intend to count.

The current "best advice" to reduce poverty and help low income families transition from welfare comes from Robert Haveman and Amdrew Bershadker both of the Institute on Poverty Research. They identified two strategies.[26]

Strategy 1: "*Increase the level of education, training, skills, and other human capital characteristics of those at the bottom of the capability distribution.*" These are educational programs that build academic credentials, relationships, readiness to work, and readiness-to-learn skills. These skills prepare people to be the most self-sufficient they can be.

This strategy includes concentrated opportunities for asset building from pre-K to on-the job training for career advancement as well as school-to-work and lifelong learning. Ensuring readiness to learn, increasing school success, increasing the level of educational attainment, matching training opportunities to aptitude and local labor demands all speak to the fact that everyone needs skills to earn an income to support themselves and their families.

However, when there are few living wage jobs available, or in economic downturns, or there is profound regional economic changes, or the individual is simply not able to produce a living income then, Haveman argues that poverty can only be reduced by subsidy and wage-type supports.

Strategy 2: "*Increase the return that the least capable member of society receives on the use of their human capital.*" These are programs that raise the minimum wage, give subsidized wages rates, or directly subsidize the earnings of low-income workers.

This second strategy has examples like the assisted savings in Individual Development Accounts and Multnomah County's Contractor Living Wage Ordinance. Recently, both the University of Washington and Children First for Oregon have released studies on living wages.[27]

Oregon currently has state Earned Income Credit along with the federal Earned Income Credit. However, the state credit is not refundable. Making it refundable would help more working families.[28]

It is not enough to help people build job skills if current low-skill jobs available do not pay enough to support a family. This situation is especially true for women and minorities whose average wages are still lower than that of men's. In fact, a recent study by the Institute for Women's Policy Research found that women lose about $200 billion of income a year because of gender wage inequality. We can increase the return that women and their families get from their work by enforcing equal pay legislation.[29]

In September 1998, the Levy Institute funded a symposium on the topic of strong economic growth and persistent poverty. Ideas offered at the conference by leading economists included the following: a guaranteed income, increases in the minimum wage, public job creation, improving the K-12 school system, on-the-job-training subsidies, school-to-work opportunities, and improving the English skills and education of immigrants.[30]

Welfare reform is currently one of the most powerful strategies for reducing poverty. Oregon, like Wisconsin, is emphasizing

immediate work experience over extended job training in a "Workfirst" approach. In February 1999, the US Government Accounting Office study concluded that "*it was still too early to tell what the most efficient and effective model*" is for welfare reform across the country.[31]

One more way to "increase the return "is by helping more people take advantage of programs that are already available. Oregon Health Plan, Food Stamps, Earned Income (Tax) Credit, School Meals are examples of programs that need to be more promoted.

The National League of Cities says that "*many eligible workers do not receive the credit because they do not know it exists or how to apply.*"

This is also the same with Food Stamps and WIC. The Government Accounting Office has done several audits to explore why it is that more low-income people are not receiving the benefits.[32]

Multnomah County could make it a goal that every resident who uses County-funded services receives all the federal benefits they qualify for.

The literature review for this subsection set a high standard for programs to be included as best practices. The programs described below have these three characteristics:

❖ Program has been evaluated with a control group
❖ Program ended or was evaluated in 1990, or later
❖ Program demonstrated significant gains in reducing different types of poverty.

Using these criteria, this review found 20 studies. Appendix B describes the studies and their findings. This subsection will only summarize the findings common across studies. The evaluations for these 20 studies cost over $50 million.

These evaluations were summarized in an Urban Institute compendium of social experiments.[33] Two main points are clear from the above table. First, intensive case management helps reduce poverty for a variety of people. Second, programs that claim to reduce poverty must measure changes in employment and earnings.

This emphasis on the view of financial poverty is also supported by the view of the need to build nonfinancial assets through case management so those program participants receive a full range of services.

BEST PRACTICES FOR REDUCING POVERTY		
Group	Interventions Successfully Tested	Outcomes Measured
Homeless (1 study)	❖ Intensive case management, full services	Employment, income, and homelessness
Low Income (2 studies)	❖ In home case management. Employment and training services	Employment, earnings, welfare receipt, and academic credentials
Low Income Children and Their Families (1 study)	❖ High quality preschool program	Cognitive development, academic achievement, delinquent behavior, employment, welfare receipt
Public Assistance-AFDC (7 studies)	❖ Individual case management ❖ Full complement of services and supports or education and job related assistance	Employment, earnings, and welfare receipt
Youth (3 studies)	❖ A variety of life, summer, community, educational services for four years ❖ 190 hour classroom curriculum on social and emotional goals, preemployment and counseling	Academic, social competency, graduation, post-secondary attendance, teen pregnancy, employment, involvement in community service.
Unemployed (4 studies)	❖ Intensive case management, full services ❖ Reemployment bonus	UI payments, employment and earnings
Single/Teen parents (2 studies)	❖ Intensive case management, full services ❖ Unpaid internships with local businesses and mentors	Educational attainment, employment, welfare receipt

The literature review for this subsection looked for a different kind of evidence: evidence that is more qualitative and less conclusive but still promising. These ideas may prove useful to those thinking about how to check and improve programs aiming to reduce poverty.

One of the foremost thinkers on children, families, community building, and poverty is Lisbeth Schorr of Harvard University. She has researched and published extensively on these topics and is affiliated. The following is a summary of the four program characteristics she has identified in her book, *Common Purpose*.

1. **SELF-SUFFICIENCY**: Programs need to help people learn skills that they have not acquired or had equal opportunity to acquire. The following programs have increased client self-sufficiency through building assets (e.g., jobs, training, community service, credentials, etc.) and offering incentives (e.g., income, subsidies, tax credits) at various levels of success.

❖ Success for All is a national pre-K to sixth grade program which provide one-to-one tutoring to primary-grade students who are struggling in reading as well as family support teams to build positive home-school relations and deal with such issues as attendance, behavior, health, and mental health elements[1].

❖ The Neighborhood Academic Initiative in California provides a full range of academic and social service supports to 50 low-income minority students and their families

each year. Evaluation shows that Initiative students score better on math & reading tests than the control class of gifted students.[34]

2. **RESULTS**: Programs need to measure their results to stay on track. The National Partnership for Reinventing Government has stressed the importance of measurable results as a driver in solving intractable social problems. The following programs attribute their success to the ability to focus on results, analyze data, and measure results.

❖ Tampa Bay-Hillsborough County Seamless Systems reduced domestic violence homicides from 34 to 5 case in three years. County homicides have also dropped 35%.[35]

❖ Youthbuild has job preparation courses, trades training and apprenticeship, paid internships, and GED credentialling for low-income minority men. Successful Youthbuilds retain above 70% of their students and 95% of those completing the program are placed in college or jobs averaging above $7.00/hour.

❖ Allen County Healthy Families Home Visitors to high-risk families served 125 high-risk families with 312 children in 1993 in its first year. 97% of the families had no reported incidents of abuse or neglect during the year. This model originated from Hawaii's Healthy Start program. The 241 families in Hawaii's first three years reported zero incidents of abuse or neglect. Home Visitors have caseload limits and provide access to an array of services tailored to each family's needs: medical care, housing applications, parent education, job training, and crisis interventions day and night. There is also a follow-up commitment for as long as 5 years.

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[1] The Commission on Children, Families & Community is collaborating with the United Way to bring this program to Multnomah County.

3. **FULL SERVICE & FULL COMMUNITY MINDSET**: Many researchers have documented the value of a full service mindset to build the person within a family and community context. Full service programs emphasize dealing with whole situations instead of piecemeal responses due to barriers in thinking, funding or innovation. Programs do more than give referrals and business cards.

A full service mindset is not the same as administrative integration. Lisbeth Schorr argues that service integration is *"coming to be seen as an end in itself rather than as a means to achieve improved outcomes."* She explains that the difficulty of integration, *"has deflected attention from the possibility that the services being integrated may be inappropriate, of mediocre quality, rendered grudgingly, and wholly inadequate to actual needs."*[36]

❖ Beacon Schools full service mindset integrated services for high-risk families while student activities include a voter registration booth. Public School 194 reading achievement level went from 580th place to 319th place in three years. Each Beacon School maintains local variations but all share a holistic emphasis.

❖ Hamilton, Ontario's recent evaluation of 800 families on public assistance shows that serving people's whole circumstance with proactive, comprehensive health and social services for mothers and quality childcare and recreation services for children is less expensive and has more short term benefits and long term societal gains. Gina Browne, MacMaster University researcher says, *"Serving the whole circumstances means offering a menu of services, instead of leaving individuals to fend for themselves in a fragmented system."*[37]

4. **ADEQUATE RESOURCES AND INTENSITY**: Programs need to have a balance of resources and goals so that they can deliver what they promise. Children's Defense Fund hired Karen Pittman to identify successful teenage pregnancy prevention programs and she reported that the most striking factor in all programs was the caring relationships. Stanford's Milbrey McLaughlin studied effective schools and found that the teachers' ability to connect with students' families and life outside school mattered more than any other factor in student's willingness to work hard. The National Academy of Science's Panel on High Risk Youth survey of programs for high risk youth found that the opportunity to develop sustained, trusting, relationships with caring adults was central to their effectiveness.

Programmatically, this has meant limited caseloads, comprehensive outreach and intensity of services in terms of variety and amount.

❖ Ruby Payne writes, *"For students and adults from poverty, the primary motivation for their success will be in their relationships".* Joan Walsh, concurs, *"Persistent urban poverty is not just about money but also about relationships."*

❖ In May 1998, Oregon State Department of Human Resources announced at a press conference that 91% of Multnomah County teen parents eligible for JOBS had returned to school as mandated. These teens received comprehensive outreach and a continuum of amelioration services while completing their education. The liaisons who work with the teens talk about the importance of personal contact, modeling problem solving behavior and getting to know the teens.

These four strategies could be applicable to any segment of the population and any type of program that seeks to reduce poverty. The table shows a range of such programs.

The National League of Cities printed a list of short ideas for cities to reduce poverty: identify growing jobs target economic development, monitor public subsidies, use job creation, build computer literacy, promote lifelong learning, promote the Earned Income Tax Credit, and build partnerships. They also advise "*targeting job creation and training to city residents most in need.*"[38]

However, this emphasis on work must be provided with the necessary amelioration. In fact, one of the most interesting findings from the National Association of Counties survey on welfare reform was the need for transportation, "*the need for transportation services is tremendous. It was the most common thread that linked all counties and outpaced all other concerns.*"[39]

So, while the focus of welfare reform is "Workfirst" we are finding that barriers like transportation need to be ameliorated. The research update for the National Research Council, new *Findings on Children, Families, and Economic Self-Sufficiency*, found that "*transitions from welfare to work requires child care.*"[40] The Urban Institute studied 8 Welfare-to-Work programs for the types of issues recipients must overcome to become self-sufficient. They found that "the provision of supportive services to families who experience various personal and family challenges "*to reduce the barriers to employment was key to self-sufficiency.*"[41]

Transportation and child care are amelioration type needs and these types of supportive services are required for . Further the 20 proven best practices in the previous subsection prove that services need to be in coordinated manner and linked.

PROMISING PROGRAMS TO REDUCE POVERTY	
Unprepared/poor parenting: teen pregnancy reduction, second child teen motherhood reduction, family strengthening and support (e.g., child care, child nutrition)	**Job/housing mismatch**: enterprise zones, housing mobility, community building and community organizing, eliminate or reduce barriers to work
Family changes: family planning, child support collection, children's health and development, domestic violence reduction, fatherhood responsibility	**Lack of jobs, low wages**: economic development for living wage jobs, wage subsidies, child tax credits, national and state (refundable) Earned Income Tax Credits, wage subsidies, child tax credit
Low skills, no skills: school success, literacy, on-the-job training, vocational training, school-to-work, apprenticeships	**Discrimination**: better schools in poor neighborhoods, micro loans for small businesses, individual development accounts, subsidized housing, housing vouchers
Personal value system: readiness-to-work supports, substance abuse reduction, self-sufficiency oriented amelioration	**Societal trends**: poverty simulations to change beliefs, better program linkage, better program outreach, better inter-agency collaboration

Last, the research reminds us that to reduce future poverty, the success of programs must be measured in terms of their effects on children. A program may be successful at helping a parent find a job, but it also needs to take into account the effect on the children. Aletha Huston and many other researchers propose that we judge family programs in terms of their impact on child well being, no matter what the goal.[42]

Is the program helping or hurting the child? This child-centered strategy may also be a convenient way to improve the coordination of services a family may need.

A family using alcohol and drug programs, work-readiness guidance, and housing assistance and the way we could determine the level of accomplishments of all these programs is keep our eyes on the child. No matter what interventions may do or aim for, a year later, has the child's life improved?

This child-centered strategy is also the way the National Center for Children in Poverty proposes to measure the effectiveness of welfare reform: does it help or hurt children?[43]

This section has summarized a brief review of the literature for best advice, best practices and best ideas for reducing poverty. In general, the lessons from this review include the following:

* Emphasize self-sufficiency activities to build human capital
* Measure effectiveness in terms of self-sufficiency. Employment and earnings are valid and required outcomes of programs claiming to reduce poverty.
* Intensive case management reduces poverty for youths, low-income people, public assistance recipients and the unemployed. Promote linkage at the level of coordinated services for clients rather than at the level of administration.
* Provide services at an adequate intensity.
* Provide enough resources to people who cannot be self-sufficient.

It is obvious that Multnomah County will not be able to apply all of these lessons on its own even if there is interdepartmental consensus. Multnomah County needs continue to coordinate, leverage and collaborate with a variety of other actors.

The programs that have been identified are certainly worthwhile candidates for Multnomah County. However, it may be wiser to find programs that currently work well in Multnomah County to reduce poverty and build those programs up and measure them to see if they can meet the success of interventions in other locales. For example, it would be useful as a follow up to

this paper to find out examples of "local best practices."

The purpose of this section is to describe the range of good thinking about how to help families in poverty. Some of the policy questions that come out of this section include:

1. This Report presents two main strategies for increasing skills or increasing the return on low skills. Are these two strategies applicable to Multnomah County? Are there better strategies that fit with the causes that are particular to our County?

2. This Report has identified four main characteristics of any program that seeks to reduce poverty. Is this a credible description of characteristics of model programs? Is there a better set of characteristics as shown by a different set of programs that successfully build self-sufficiency? Which, if any, programs in Multnomah County that demonstrate these four characteristics?

3. What programs in the Multnomah County region are currently most successful programs in terms of building self-sufficiency? Is there an organization in the region that could regularly identify these programs so that we can all become more informed?

SECTION D: HOW IS MULTNOMAH COUNTY REDUCING POVERTY?

I. INTRODUCTION

Previous sections identified poverty causes, profiles of people in poverty as well as strategies, programs, model characteristics, or programs to reduce poverty. The purpose of this section is to analyze the 1998-1999 Multnomah County budget for patterns in its spending to accomplish the benchmark Reducing the Number of Children Living in Poverty. While it is certainly true that Multnomah County is only one actor in the entire region that assists poor people, it is also true that Multnomah County is the largest actor that has adopted this specific benchmark.

The main concept to be used in this analysis is the distinction between amelioration and self-sufficiency programs. The best practices identified in the previous section provided both amelioration (e.g., housing, childcare, transportation) to assist with clients whose goal was to build personal self-sufficiency (e.g., academic credentials, work experience).

Amelioration programs improve or maintain families' quality of life by providing needed services such as: food, housing, shelter, childcare, substance abuse, and transportation. For the general population (including people with low incomes) there is an equivalent group of programs building social infrastructure for everyone in the community. For example: assessment and taxation, program evaluation, library, and public safety programs.

Self-sufficiency programs focus on building assets that last beyond the client's enrolment in the program: income assistance, education, credentials, skills, child support, and so on.

While one theme of the last section was the need to link these two types of programs, it is also clear that this need arose because the majority of existing programs seem to work on single causes and on a single dimension.

The 1999-1999 Multnomah County Budget contained over 400 programs in ten departments. This analysis sought to identify the users and the purpose of the programs by asking three questions:

1. **Where did the funding come from**? Was funding from Multnomah County General Fund (i. e., County taxes) or other sources (e.g., federal funding, grants).

2. **Who uses the program**? In some programs 60% or more of users were people with low incomes. In many cases, the programs are open to everyone but, by default, only people with low incomes used the services.

3. **What is the main purpose of the program**? The Budget description, Department Staff and the Key Result Measures provided information about the program purpose. Is it self-sufficiency or amelioration oriented?

When possible, we added administrative to program costs since it is not possible to run a program without an infrastructure.

MULTNOMAH COUNTY BUDGET POVERTY PROGRAMMING PATTERN		
	Program users are poor or under 18 years of age, by default or design	*Program users are everyone in Multnomah County regardless of age or income*
Program promises to build self sufficiency to reduce current or future poverty	➤ **$97 M dollars (11% of budget)** ➤ $37 M from General Fund ➤ $60 M from all Other Sources **Quadrant 1**	➤ **$36 M dollars (4% of budget)** ➤ $26 M from General Fund ➤ $10 M from all Other Sources **Quadrant 4**
Program provides support, maintenance, or social infrastructure	**Quadrant 2** ➤ **$143 M dollars (17% of budget)** ➤ $24 M from General Fund ➤ $119 M from all Other Sources	**Quadrant 3** ➤ **$565 M dollars (67% of budget)** ➤ $169 M from General Fund ➤ $396 M from all Other Sources

Based on the three questions on the previous page, we identified the following pattern in Multnomah County's $840 million Budget to answer the question: how are we helping poor people in Multnomah County.

This analysis shows that 28% of the 1998-1999 budget foes to programs that are by default or design used by people with low incomes. 11% of the entire budget is used for programs to build self-sufficiency for low-income people. Appendices C and D shows a list of programs and people who tagged the programs for each quadrant. Of this 11%, a large majority are to build self-sufficiency in children by building the health of poor children (Health Department budget) and assisting juvenile delinquents (Department of Community Justice).

COUNTY DEPARTMENTS, PROGRAM FOCUS						
	General Fund	**All other funds**	**Q 1**	**Q 2**	**Q3**	**Q4**
Adopted 98-99	255,348,130	584,317,041	96,508,048	142,596,358	564,948,110	35,612,655
CFS	29,107,420	98,407,299	28,248,927	86,497,976	11,045,884	1,721,932
HD	39,525,783	41,343,070	23,302,778	28,161,861	27,765,717	1,638,497
DCJ	31,423,927	35,363,848	35,459,910	0	21,469,105	9,858,760
MCSO	63,126,234	24,429,475	7,902,551	0	79,653,158	0
ND	27,896,378	41,184,129	1,593,882	0	50,079,138	17,407,487
ADS[44]	4,886,911	23,049,610		27,936,521	0	0
DLS	17,752,326	21,344,251	0	0	38,146,420	950,157
DSS	10,156,469	52,815,263	0	0	62,971,732	0
DA	12,927,278	4,620,068	0	0	13,511,524	4,035,822
DES	18,545,404	241,760,028	0	0	260,305,432	0

Consequently, the Multnomah County approach can be described as twofold: 1) alleviating child and adult current poverty through amelioration programs and 2) reducing causes of future poverty by building children's assets.

It is also clear from this analysis that poverty is a cross-departmental issue. Seven different departments build self-sufficiency and all ten provide amelioration and infrastructure.

However, despite this overlap in target population and approach and cross-departmental work groups, programs still programs tend to be affiliated with particular departments. For example, the School Attendance Initiative is a Department of Community Justice program; Rockwood Project is a Health Department initiative; and there are 4 domestic violence programs in 4 departments. (We have a Domestic Violence Coordinator to ensure a cross-departmental approach but we do not have an recognized person or position who could do the same for poverty.)

At the program level, programs are mainly one-dimensional by emphasizing either self-sufficiency or amelioration. This means that these programs are potentially poor examples of the best practice identified in the previous section: the need to provide full or seamlessly linked services. A program reducing pregnancy reduction does not necessarily connect with a program developing individual development accounts. Clients to a family therapy program may or may not be receiving assistance for readiness to work. Vocational training program clients may not be advised about the Earned Income (Tax) Credit.

At the client level, County databases are not designed to share client information. Part of the reason is related to database technology, another part may be due to lack of resources, federal and state regulations as well as confidentiality priorities. These factors are some of the reasons why we cannot give an unduplicated count of the number of people who use Multnomah County programs.

In identifying and categorizing the various County programs used by poor people we came to concur with the conclusion of the 1997 Housing Audit, conducted by the Multnomah County Auditor's Office, that there is no County system for coordinating services for low income people.[45] Each program may be acting as a separate service provider. Departments may budget, plan, and deliver services independent of other Departments who may be assisting the same family or population.

This is a common finding in analyses of complex systems. At the federal level, the Government Accounting Office's evaluation of youth-at-risk programs conclude: *"Not only are employment training programs part of a fragmented system but, despite spending billions of dollars a year, many federal agencies operating these programs do not know if their programs are really helping people."*[46] The titles of some recent audits on federal programs suggest a deep cause of our fragmentation as we are the local providers for many of these programs:

- ❖ *Federal Education Funding: Multiple Programs and Lack of Data Raise Efficiency and Effectiveness Concerns, 1997*
- ❖ *Substance Abuse and Violence Prevention: Multiple Programs Raise Questions of Efficiency and Effectiveness, 1997*
- ❖ *At-Risk and Delinquent Youth: Multiple Programs Lack Coordinated Federal Effort, 1997*
- ❖ *Homelessness: Coordination and Evaluation of Programs Are Essential, 1999*

While we may look fragmented in terms of cross-departmental client connections we do have a strong system for measuring program effectiveness at the single program level.

Since 1996, we have had Key Result Measures (KRMs) for most County programs. These KRMs were begun as part of the idea that continuous measurement . allows us to better monitor quality. These are designed to answer the question whether each County program is really helping people. This, in itself is progress of which Multnomah County should be proud and we are known internationally for having this kind of infrastructure.

However, our Key Result Measures may tell us the effectiveness of a particular program but they do not answer the question: how does our set of programs function together for a client? We do not know what happens to a poor person or family as they interact with all the services for which they may be eligible, whether the programs are County funded or provided by another agency or level of government.

Do clients who use our Departments become more self-sufficient? Are we reducing the number of children in poverty? We cannot answer these macro questions because we cannot systematically trace our clients across programs. As a set of indicators, Key Result Measures cannot give a coherent picture on whether child poverty is increasing or decreasing.

One of the key issues related to effectiveness is area of impact. We could hold ourselves accountable for having an impact over the entire Multnomah region or just with the programs that we fund or administer.

If we choose to view "our system" as all Multnomah County residents then, the school meals eligibility trend says that we are doing poorly in reducing child poverty as the rate of student eligibility has increased over the years. Currently, over 40% of elementary school students in Portland Public Schools District receive free and reduced meals as their families are in poverty.[47]

School Meal Eligibility in Portland Public School District 1989-1998
Source: Robert Honson, Portland Public Schools Nutrition Director
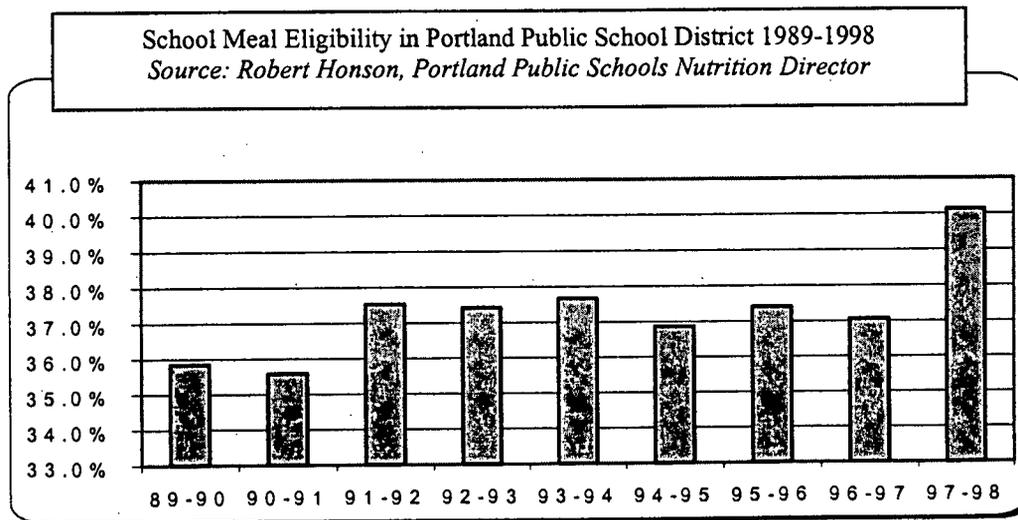
Regardless of how we define our parameters, we need to be able to answer questions about the effectiveness of our work beyond a program-by-program level. To answer macro-questions about how we are doing with regards to reducing child poverty, our next step will need to be studies focused on the individuals and families who are using our service system.

These studies must go beyond the Key Results, and our current databases, which in themselves are fragmented. Of necessity, these studies will rely more on clients and provider focused interviews. To determine whether our combination of programs has any lasting impact we may need to follow a sample of our clients over time. Using this approach we may be able to take the next steps in answering the questions: Are County programs reducing the number of children in poverty? Are there ways to improve our service system to improve our results?[48]

This section analyzed the Multnomah County Budget to draw conclusions about the focus of our programming for people with low incomes. It also pointed out areas where our selection of programs and variety of programs need to be improved as compared against a best practice standard which emphasizes linkage and coordination.

Like the best practices identified in the previous section, the findings in this section regarding fragmentation and need for linkage have application to any segment of the population who is poor. Elderly poor, domestic violence poverty clients, ex-offenders, poor single mothers, AIDS patients who are poor all have quite distinct needs in programming. However, it is also probably true that programs they use can benefit from reduced fragmentation and increased linkage and coordination.

The 1993 Conference on Reducing Poverty in America concluded:

Although numerous programs and initiatives have been instituted to combat these [poverty] problems, they suffer from major weaknesses... First, there is a lack of coordination among programs aimed at improving the life chances in poor communities. Second, only a few of the existing efforts have been systematically evaluated to ensure that the programs are effectively targeting the "hardest to serve"... Third, there is no comprehensive strategy for planning future resources allocations as needs change and as these communities expand in size.[49]

Multnomah County's poverty programming suffers from lack of client coordination among departments and there is currently no interdepartmental strategy for reducing the number of children in poverty.

What we do have is an approach to provide good quality service and programming, through RESULTS, to prevent future poverty. This is very difficult to evaluate, but it is a sound preventative policy. Nicholas Zill writes in the Aspen Institute Quarterly,

We do not yet know how to take a child born into multiple-risk family circumstances and transform him or her into a healthy, happy, productive adult... Therefore, much of our efforts must be directed to preventing the formation of high-risk families and the conception of children in circumstances that bode ill for their health and development.[50]

Policy questions that may be relevant to this section include:

1. This report recommends that we look at the effectiveness of our programs in terms of how individual clients "shop" the system for their multiple needs. Would you agree that we need to look at our system from a client perspective?

2. Who in Multnomah County is currently doing the best job at helping reduce fragmentation for low-income clients?

3. What role should Multnomah County have in helping reduce the fragmented system for low-income program users? System can mean the system made up of Multnomah County Departments or the system including non-County-funded programs.

4. We now know how much the Multnomah County spends on reducing poverty. However, we do not know how

much is spent by other actors. This Report has attempted to track this funding but has been unable to get an unduplicated number of dollars. Is it important to you that we find out? (See Appendix E).

SECTION E: WHAT ELSE CAN WE DO TO REDUCE POVERTY?

This paper sought to answer two questions related to the poverty benchmark:

❖ What is Multnomah County's current approach to reducing child poverty?

We currently spend 28% of the Multnomah County Budget on helping people with low incomes. This 28% divides into 17% towards alleviating consequences of current child poverty; and 11% to reducing causes of future poverty. We are, however, only one player in a complex system of actors to help people with low incomes.

❖ What are necessary elements for a Multnomah County plan to reduce child poverty?

The three needs outlined in this section include also a snapshot of the current picture and suggestions for next steps. This paper points to four types of needs in any coordinated effort to reduce poverty:

There are two ideas this study would not support is an intensive project to document and inventory all existing programs to help low income people. The system to support poor people seems to be so complex and dynamic that a comprehensive inventorying of services for all segments of the poor population would take a great deal of resources.

This working paper is intended as a piece of technical assistance to support cross-departmental and perhaps cross-agency and provider deliberations. These ideas come with a clear caveat that they have been developed based on an analysis of national and local literature rather than direct Departmental consultations. However, the local literature reviewed for this report (e.g. reports by Department of Community and Family Services, Audits by local Auditors) do have local information sources.

1. A coordinated effort to reduce poverty needs to define what we mean by poverty: economic, social or personal poverty. The need to define what we mean by reducing: by how much. The need to phrase the benchmark as a set of goal(s). The need to have a way to check if we are accomplishing the goal(s).

Status Quo: define poverty as financial poverty and use the annual American Community Survey to measure how many poor children there are in Multnomah County.	
Ideas to Actualize a Multnomah County Definition of Poverty	**Relative Difficulty**
An annual report reporting on the poverty benchmark progress.	Low
Make sure new programs claiming to reduce poverty define their specific definitions of poverty and have related Key Result Measures.	Low
Develop a description of what kind of poverty Multnomah County would like to reduce.	Unknown
A goal describing how much poverty we would like to reduce.	Unknown

2. A coordinated effort to reduce poverty needs to increase self-sufficiency opportunities, funding, and outreach for already existing infrastructure.

Status Quo: the State of Oregon, Department of Human Resources, is the main provider of self-sufficiency services for people with low incomes. Multnomah County is focussed on alleviating consequences of current poverty and building children's well being to help reduce future causes of poverty.

Ideas to Increase Self-Sufficiency Programming Orientation	Relative Difficulty
Develop a tagging system that analyzes Multnomah County programs in terms of their focus for residents: self-sufficiency building, amelioration, both, linked self-sufficiency and amelioration. Promote this system and encourage a policy whereby resources are focussed on the latter two.	Low
Identify groups of clients who are using amelioration programs funded by Multnomah County. Find out if they have opportunities to increase their self-sufficiency. Increase the number of people in these programs who are in self-sufficiency programs.	Moderate
Create an annual contest for the best programs in Multnomah County that has increased self-sufficiency. We need to identify, support and promote local best practices.	Moderate
Ensure that all programs promising to build self-sufficiency for adults use Key Result Measures related to employment and earnings. Give bonuses to programs that set high goals for client gains and achieve them.	Moderate
Ensure that all clients to County-funded programs are receiving the variety of benefits they are entitled to. For example, the Oregon Health Plan, Food Stamps, and Earned Income Credits.	Moderate
Promote, fund and increase opportunities for self-sufficiency activities for people with low incomes in all departments. This could lead to a redefinition of Multnomah County's role compared to other actors in the region.	Unknown
Explore how the Workforce Development Board can serve the welfare population	Unknown
Support any legislative effort to increase the return to people who are working.	Unknown

3. A coordinated effort to reduce poverty needs to link self-sufficiency programs to amelioration programs and use other identified best practices.

Status Quo: Multnomah County's emphasis on children, prevention and results is sound policy. We also have existing and new attempts to link and coordinate services for children.	
Ideas to Increase Coordination and Linkage on a Client basis	**Relative Difficulty**
Evaluate and improve the one-stop type programs being funded by Multnomah County.	Low
Ensure that new County-funded programs have a way to track clients cross-departmentally. Ensure that these programs negotiate feedback loops to share client data between amelioration and self-sufficiency programs.	Moderate
Analyze key self-sufficiency building programs and explore what clients may need beyond the program mandate. Expand current maintenance programs to include self-sufficiency goals. Or, rather than adding goals, maintenance programs could stress inter-program and inter-department linkage so that 100% of their clients are getting exposure to self-sufficiency building options	Moderate
Ask amelioration programs to identify how the populations they serve are becoming more self-sufficient. Ask self-sufficiency programs to identify unavailable amelioration resources that limit the effectiveness of their programs. Programs can use "We don't know" as a response.	Moderate
Assist the Department of Community and Family Services and Health Department to build a cross-departmental client information system.	High
Identify groups of people who are using self-sufficiency programs funded by Multnomah County. Find out if they feel they are receiving a coordinated set of services. Link programs where a majority of people are already trying to link on their own.	Unknown
Encourage all County departments serving low-income people to be a part of the Poverty Advisory Committee.	Unknown

This Report is premised on the idea that we would like to identify and make changes that will allow us to reduce poverty in Multnomah County. There is a body of research that argues the main reason why poverty continues is because it is societal acceptable.[51]

Judith Chafel's research shows that a large majority of Americans think poverty is acceptable.[52] And as we have done with other major social issues like racism, women's rights and the environment, we need to educate ourselves about poverty as an unacceptable problem. Chafel recommends that we start in school as children's beliefs mirror adult beliefs. We may choose to explore as a County what our children think about poverty. We can also explore individually what we think is acceptable levels of poverty.

The individual angle in societal change in terms of poverty is being addressed by a new variety of experiential tools. In Oregon, we have the Walk-a-Mile program organized each year by the Oregon Hunger Task Force.[53] In this program you are asked to pair up with a family on public assistance and live on the same level of income. Nationally, we have the Institute for Educational Leaderships' seminars[54] and the University of Iowa's simulations.[55] Both ask you to take part in a role-play to fill out paperwork on a variety of programs to qualify for financial assistance. All three programs report that participants often experience a change of hearts and minds about poverty and families struggling with low incomes.

It seems that if we are serious about the goal of reducing child poverty or any kind of poverty, we will have to make some changes in our hearts and minds as well as our strategies and programs. Public opinion supports work in helping children. However, there is less support for reducing poverty in general. Jane Knitzer, the Deputy Director of the National Center for Children in Poverty talked on a recent visit about the Center's work to craft the message about poverty reduction in a way that can inform and win public support. This is a path that many non-profits have taken and it is part of a larger strategy to change perceptions about the costs of poverty.

[1] Mollie Orshansky is the famous economist who created the Federal Poverty Line under President Kennedy's administration. This quote starts her article, "Perspectives on Poverty: How Poverty is Measured," *Monthly Labor Review* 92 (February 1969): page 37-41.

[2] Institute for Research on Poverty. 1998. Revising the Poverty Measure. Focus, Volume19, 2.

[3] Ibid.

[4] Center on Hunger and Poverty. 1998. *Are States Improving the Lives of Poor Families? A Scale Measure of State Welfare Policies*. Massachusetts: Tufts University.

[5] Child Trends, Inc. Indicators of Child, Youth, and Family Well-Being: a preliminary inventory of existing projects. Washington, DC: Child Trends, Inc.

[6] US Department of Health and Human Services. 1998. *Indicators of Welfare Dependence: Annual Report to Congress*, October 1998. Washington, DC; Office of Human Services Policy.

[7] The Search Institute is a non-profit research organization supporting children and families.

[8] Search Institute report to the commission, 1999, page 36. Available from the Multnomah Commission on Children, Families & Community.

[9] November 11,1998 US Bureau of Census paper from Kurt Bauman, p1.

[10] School of Rural Planning & Development, University of Guelph. 1998. *Evaluation Plan: Opportunities 2000 Project*. Available from Claire Wasteneys, Project Evaluation staff through personal correspondence.

[11] Galster, G. 1996. *Reality and Research: Social Science and US Urban Policy since 1960*. Washington D.C.: The Urban Institute Press. See also the article by Michael Teiz. Teiz, Michael B. 1998. The Causes of Inner-City Poverty: eight hypothesees in search of reality. *Cityscape: a journal of Policy Development and Research*. Volume 3, 3.

[12] Walsh, J. 1997. *Community Building in Theory and Practice: Three Case Studies*. Washington, D.C.: National Civic Review, page 293.

[13] Center for the Future of Children. 1997. *The Future of Children: Children and Poverty*. California: The David and Lucile Packard Foundation.

[14] Duncan, Greg J. 1997. *Consequences of Growing Up Poor*. Editor. New York: NY: Russell Sage Foundation, 1997.

[15] Refer to reports by Chiquita Rollins and the Division for Community Partnership and Planning for thorough demographics and topical analysis about Multnomah County poverty and Women's poverty.

[16] Ashworth, Karl. 1994. "Patterns of Childhood Poverty: new challenges for policy." *Journal of Policy Analysis and Management*, Volume 13, 4. John Wiley & Sons, Inc., page 658-680

MULTNOMAH COUNTY BENCHMARK APPROACH:

ALLEVIATING CONSEQUENCES OF CURRENT CHILD POVERTY, REDUCING CAUSES OF FUTURE POVERTY

APPENDICES

APPENDIX A: TWO ALTERNATIVES TO MEASURING POVERTY

This is excerpted from the National School-Age Care Alliance Public Policy Paper, *Quality School-Age Care*, 1998, pages 132-133.

Alternative Ways of Measuring Poverty

Many economists question how accurately the official poverty measure, created over 30 years ago, reflects the economic realities of today's families. For example, the official poverty measure disregards the changes that have occurred in family spending patterns over the past 30 years. Further, the official measure uses only pre-tax income to assess family resources. Both of these issues, and several others (see box) have lead economists to propose alternative ways of measuring poverty.

New methods of measuring poverty would change the estimated levels of poverty and the the profile of who is poor. This is important because family poverty determines eligibility for many government programs.

Two alternatives for measuring poverty are considered here:[12]

- Alternative 1 calculates income in the same way as the current method, but raises the poverty line to include those families with income below 185% of the current poverty line.

- Alternative 2 uses after-tax income and includes as family resources the value of "near cash" benefits and money received from the Earned Income Tax Credit (EITC).

Both alternative affects the percentage and profile of families classified as below the poverty line (Figure 4). Alternative 1, adopting a poverty measure that includes the "near poor", would substantially increase the percentage of young families defined as "poor" from the current 23.2% to 43.0%. In contrast, Alternative 2, that include benefits and tax credits as income, diminishes the number of young families in poverty.

> ### Criticisms of the Current Official Poverty Measure
>
> *Poverty Threshold Calculation*
>
> - Not updated to reflect the spending patterns of today's families
>
> - Disregards geographical differences in expenses
>
> *Definition of Family Resources*
>
> - Family resources are defined as pre-tax income
>
> - Excludes in-kind benefits in calculating income (e.g., food stamps, housing assistance)
>
> - Does not permit deductions of work-related expenses (e.g., child care, transportation) in calculating income
>
> - Ignores differences in families' medical costs
>
> Source: "Revising the Poverty Measure". Focus, 19(2) 1998

Figure 4
Percentage of Families with Children Under Age Six (1996) Defined as Poor Under the Current Official Poverty Measure and Two Alternative Measures of Poverty
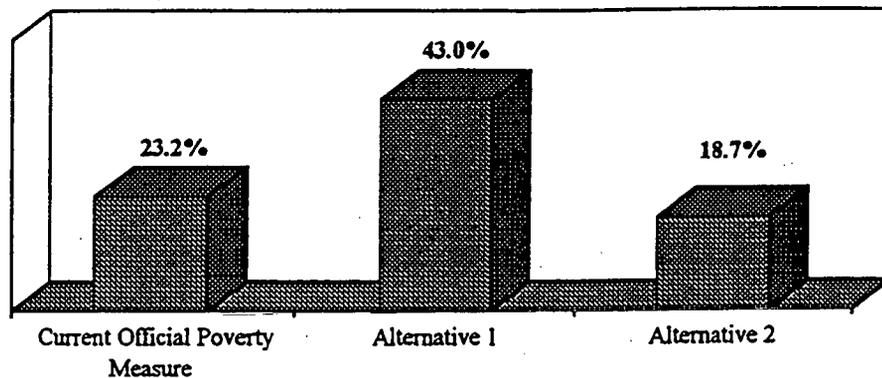
Current: Three times the cost of minimally adequate diet; pre-tax income
Alternative 1: Inclusion of the near poor (i.e. families with incomes below 185 percent of the current poverty line)
Alternative 2: Uses after-tax income, includes the value of food stamps, housing subsidies, and school lunch benefits, as well as the Earned Income Tax Credit (EITC)

Source: National Center for Children in Poverty. "Young Children in Poverty: A Statistical Update, March 1998 Edition."

Both alternatives not only change the estimated levels of poverty, but also result in a different profile of families considered in poverty. For example, using the current poverty measure, a greater percentage of young children in mother-only families are considered poor compared to two-parent families where the father is employed full-time and the mother does not work (1996 data: 16.8% and 14.2%, respectively).[13] Under Alternative 2 for those same groups the reverse is true. That is 9.3% of mother-only children are poor compared to 11.3% of two-parent for kids with only one employed parent. This reflects the inclusion of the near cash benefits and the EITC as income in the calculation of poverty.

Applied to childhood care, Alternative 1 would almost double the percentage of families eligible for some child care subsidies. In contrast, Alternative 2, which reduces the percentage of families defined as poor, would reduce eligibility for subsidies.

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[13] Young Children in Poverty: A Statistical Update, March 1998. Prepared by Jiali Li and Neil Bennett. The National Center for Children in Poverty.

APPENDIX B: BEST PRACTICES IN REDUCING POVERTY

The following has been summarized from *The Digest of Social Experiments*, Second Edition, 1997 by David Greenberg & Mark Schroder. This is a compendium of evaluations using and experimental design.

BEST PRACTICES IN REDUCING POVERTY					
Group	Evaluation Cost	Study	Intervention	Outcomes	Findings
Homeless	1989-1992, 36-45K	Homeless Employment Partnership Act	E received full case management, employment and intensive services. C received regular services only.	Employment, income and homelessness	80% of E group had employment than compared to 40% of C. E also had more work benefits, higher pay and housing.
Low Income Children and Their Families	1962-1993, 2M	Perry Pre-school program	E received a high quality preschool program. C received no preschool.	Cognitive development, academic achievement, delinquent behaviour, employment, welfare receipt	E had statistically significant gains in all areas except employment.
Low income	1988-1990, 5K+	Emergency Food and Homelessness Intervention Project	E received in-home case management	Employment, earnings, welfare receipt	E gained significantly in wages and reduction in poverty. Program had an excellent cost-benefit.
Low income	1987-1991, 23M	National Job Training Partnership Act	E received three variations of employment and training services. C received no services.	Employment, earnings, welfare receipt, and academic credentials	E gained significantly in all outcomes.
Youth	1989-1993, unknown	Quantum Opportunities Fund	E received a large variety of life, summer, community, and educational services for four years. C received none of the services.	Academic, social competency, graduation, post-secondary attendance, teen pregnancy, employment, involvement in community service.	At the end of the fourth year, E scored higher on outcomes than C. 63% of E graduated from high school, 42% of C graduated. 42% of E went to postsecondary school compared to 16% of C.

Group	Evaluation Cost	Study	Intervention	Outcome	Findings
Youth	1985-1992, 1.3M	JobStart	E received education, vocational training, full services for two summers. C received none of the above.	Educational attainment, employment, welfare receipt	42% of E completed high school compared to 29% of C. No other results were statistically significant.
Unemployed	1991-1994, 12.5K	Minority Male Opportunity and Responsibility Program	E received intensive case management, educational skills development, job search and placement activities, and Job Club; C received limited services and engaged in independent job search	Employment and wages, educational levels, health and family functioning	Significant increase in employment (28% versus 10%), little difference in wages; no difference in educational achievement or health status; increase in family conflicts were reported (contrary to program hypothesis-- no explanation given)
Unemployed	1986-1996, 1.3 M	New Jersey Unemployment Insurance Reemployment Demonstration	E groups received variations of job search assistance, training, and reemployement bonus payment.	UI payments, employment and earnings	E had higher earnings, more employment and more stable employment. All variations to the usual intervention produced net benefits to claimants and society.
Unemployed	1988-1990, 800K	Reemploy Minnesota	E received intensive case management	Duration and amount of UI	Net savings for UI savings of 15M. E was reemployed at a significantly higher rate than C (35% vs. 25%)
Unemployed	1988-1991	Pennsylvania Reemployment Bonus Demonstration	E received a reemployment bonus. C received no bonus	UI receipt, employment and earnings	E had significantly less UI receipt for the year as well as more employment and earnings. Bonus offers were not cost effective.

Group	Evaluation Cost	Study	Intervention	Outcomes	Findings
Unemployed	1989-1991, 2M	Washington and Massachusetts unemployment Insurance Self Employment Work Search Demonstrations	E received business start-up services, financial assistance, counselling, and workshops.	Self-employment, combined self and wage salary, earnings	E had significantly more self-employment (18%) and more earnings. MA generated net gains for E, C and society. WA generated net gains for only E.
Public Assistance Recipients-AFDC	1987-1997, 6.3M	Teenage Parent Demo	E received individual case management and a full complement of educational, job training, employment, transportation, and childcare. C received no services.	Employment, earnings, welfare receipt, school attendance, subsequent childbearing and parenting outcomes	E had significantly higher gains in employment, school graduation, employment, and average monthly earnings than C. Welfare receipt was reduced did.
Public Assistance Recipients-AFDC	1989-1994	Ohio Transitions to Independence Demonstration -JOBS	E received mandatory employment and training, community work service and job search assistance.	Employment, earnings, welfare receipt,	E had significantly higher employment. No significant increases in earnings or welfare receipt.
Public Assistance Recipients-AFDC	1989-1995, 22K	Opportunity Knocks Program	E received intensive case management and assistance with employment related expenses. C received minimal counseling and referral	Employment, earnings, welfare receipt,	E had significantly higher employment (47% vs. 35%), higher earnings ($1600 more). However, E still stayed below federal poverty level.
Public Assistance Recipients-AFDC	1988-1994, unknown	Greater Avenues for Independence	E received basic education, job search, skills training and work experience, C was free to seek services on their own.	Participation in employment related activities, earnings, welfare receipt and employment	E significantly increased earnings.

Group	Evaluation Cost	Study	Intervention	Outcomes	Findings
Public Assistance Recipients-AFDC	1988-1995, 1.2M	Child Assistance Program	E received financial incentives and intensive case management.	Establishment of child support orders, employment and earnings	E had significant increases in earnings. 27% more than C. E also backed more child support orders. There was no significant impact on receipt of welfare benefits. There were sizable savings in government outlays.
Public Assistance Recipients-AFDC	1990-1993, 3.6M	Project Independence-- Florida	E received Project Independence services (job training and search assistance) with mandate; C was not eligible for services, was referred elsewhere and had no mandate	Employment, earnings, AFDC receipts	E resulted in a modest decrease in AFDC and food stamp receipts and achieved a modest increase in earnings; (Project independence had best results while handling fewer number of caseloads; best results for recipients with no pre-school age children
Public Assistance Recipients-AFDC	1990-1992, 350-500K	Paths Toward Self-sufficiency	E received in-home case management coupled with core support services, e.g. Ed/job training, living skills, child care; C received existing AFDC services	Employment, earnings, welfare receipts, other measures of self-sufficiency	Significant increase in salary and significant decrease in AFDC payments; significantly higher percentage of project participants continued education and gained on Goal attainment scale (GAS).

Group	Evaluation Cost	Study	Intervention	Outcomes	Findings
Single/Teen Parent	1987-1990, 50K+	Young Families Can Project	E received intensive case management and cash resources. C received no services.	15 social, educational, family and financial outcomes including high school graduation, employment and money management	For women who were in the program for two years there was significant difference for the E group in education, family planning, housing, and self-esteem. E group had higher employment but it was not statistically significant.
Single/Teen Parent	1988-1991	Single-parent Economic Independence Demonstration	E received unpaid internships with local businesses with mentors. C were referred to other service agencies and given some supportive services.	Employment, earnings, welfare receipt, self-esteem and motivation	Project design and implementation compromises any findings. E group averaged more employment than C. at the end of the project 50% of E were employed compared to 30% of C. E also had higher wages, more medical benefits, and had better attitudes than C.

APPENDIX D: POVERTY TAGGING OF COUNTY PROGRAMS

Revised Budget 1998-1999		840,816,330	97,659,207	142,596,358	564,948,111	35,612,655
% of Revised Budget		100%	12%	17%	67%	4%
Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for low income people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
CFS Total		127,514,719	28,248,927	86,497,976	11,045,884	1,721,932
CFS	Director's office	2,698,160			2,698,160	
CFS	Financial Services	1,782,266			1,782,266	
CFS	Operations Division	4,831,042			4,831,042	
CFS	Staffing, M&S, internal service reimbursements	1,008,716			1,008,716	
CFS	Youth Investment	1,331,536	1,331,536			
CFS	Intervention	2,527,492	2,527,492			
CFS	Community Action Services	2,971,253	2,971,253			
CFS	Family Center System	4,753,663	4,753,663			
CFS	Family Resource Center	707,476		707,476		
CFS	Caring Community	239,678			239,678	
CFS	Domestic Violence	1,721,932				1,721,932
CFS	Weatherization / Energy Assistance	2,906,859	2,906,859			
CFS	Emergency Assistance	1,584,538		1,584,538		
CFS	Facility Based Program	811,592	811,592			
CFS	Flood Grants	811,592	811,592			
CFS	Other-SIIP	231,885	231,885			
CFS	Projects	425,120	425,120			
CFS	Touchstone	1,560,396	1,560,396			
CFS	Prevention	2,222,462	2,222,462			
CFS	Early Childhood Care & Ed.	368,290	368,290			
CFS	Staffing, M&S, internal service reimbursements	1,826,715		1,826,715		
CFS	Vocational Services	9,980,420		9,980,420		
CFS	Residential Services	22,576,313		22,576,313		
CFS	Adult Services Coordination	658,988		658,988		
CFS	Youth Services Coordination	805,368	805,368			
CFS	Protective Services	235,378		235,378		
CFS	Intake and Assessment	101,907		101,907		

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for low income people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
CFS	Specialized Services	1,637,953		1,637,953		
CFS	Community Integration Services	424,608		424,608		
CFS	Division management	182,659		182,659		
CFS	Division Administration	2,079,397		2,079,397		
CFS	Local management/ target cities	487,951		487,951		
CFS	Child & Adolescent Treatment Svcs	2,665,001	2,665,001			
CFS	Alcohol and Drug A/R	486,022			486,022	
CFS	Commitment and Care coordination services	1,944,394		1,944,394		
CFS	Central Intake-Target cities	876,382		876,382		
CFS	Quality Improvement & Stakeholder Relations	638,727		638,727		
CFS	A&D Contracts	8,883,020		8,883,020		
CFS	AMH Contracts	9,313,572		9,313,572		
CFS	CMH Contracts	3,501,246	3,501,246			
CFS	RDI	355,172	355,172			
CFS	Managed Care Contracts	19,582,588		19,582,588		
CFS	Managed Care Admin	2,774,990		2,774,990		
ADS Total		27,936,521		27,936,521	0	0
ADS	Central Management and Administration	1,617,699		1,617,699		
ADS	Planning and Special Projects	626,666		626,666		
ADS	Medicaid (branches and nursing facility)	8,762,895		8,762,895		
ADS	Public Guardina	798,145		798,145		
ADS	Adult Care Home Program	1,310,150		1,310,150		
ADS	Community Access Services (Oregon Project)	5,285,593		5,285,593		
ADS	Administration	237,573		237,573		
ADS	Multidisciplinary Team	194,007		194,007		
ADS	Disability Administration	265,498		265,498		
ADS	Disability Branches	7,560,689		7,560,689		
ADS	Accounting Transactions	1,277,606		1,277,606		

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for low income people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
HD Total		80,868,853	23,302,778	28,161,861	27,765,717	1,638,497
HD	OFFICE OF THE DIRECTOR	423,772			423,772	
HD	OFFICE OF ORGANIZATION DEVLPM	64,155			64,155	
HD	ORGANIZATION DEVELOPMENT ADMIN	380,524			380,524	
HD	STAFF TRAINING & DEVELOPMENT	308,759			308,759	
HD	COALITION SUPPORT	102,857			102,857	
HD	VOLUNTEERS PROGRAM	4,117			4,117	
HD	PLANNING & DEVELOPMENT OFFICE	1,050,945			1,050,945	
HD	VIOLENCE PREVENTION	132,188				132,188
HD	TOBACCO PREVENTION	501,506			501,506	
HD	Lead Evaluation	170,281				170,281
HD	Criminal Justice Systems	270,655			270,655	
HD	HEALTH OFFICER/REG HEALTH MGMT	460,105			460,105	
HD	EMS	804,429			804,429	
HD	DISEASE PREV & CONTROL MGMT	129,766			129,766	
HD	COMMUNITY IMMUNIZATIONS UNIT	202,740				202,740
HD	HIV BLOCK GRANT PREVENT	795,281			795,281	
HD	HIV CARE CONSORTIA	202,602				202,602
HD	HIV OUTREACH GEN FUND	224,586			224,586	
HD	HEALTH INSPECTIONS	1,493,025			1,493,025	
HD	VITAL RECORDS	138,547			138,547	
HD	VECTOR CONTROL	366,943			366,943	
HD	CLEAR CORPS	484,309	484,309			
HD	HUD Lead Abatement Program	268,017	268,017			

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for low income people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
HD	STD CLINIC & EPIDEMIOLOGY PROG	1,367,647			1,367,647	
HD	Ryan White Title I	2,908,109			2,908,109	
HD	HIV CLINICS	1,476,192		1,476,192		
HD	HIV TREATMENT CLINIC	57,676		57,676		
HD	SEROPOSITIVE WELLNESS PROGRAM	22,408		22,408		
HD	RYAN WHITE HIV TREAT TITLE 1	213,546		213,546		
HD	RYAN WHITE HIV TREAT TITLE 2	70,568		70,568		
HD	NEIGHBORHOOD HEALTH ADMIN	218,079	218,079			
HD	TB CLINIC	1,525,534			1,525,534	
HD	CD OFFICE	594,542			594,542	
HD	HEPATITIS STUDY	108,210			108,210	
HD	OCCUPATIONAL HEALTH OFFICE	170,904			170,904	
HD	OCCUPATIONAL HEALTH TB GRANT	107,031			107,031	
HD	ROOSEVELT SCHOOL BASED CLINIC	254,484	254,484			
HD	CLEVELAND SCHOOL BASED CLINIC	219,536	219,536			
HD	JEFFERSON SCHOOL BASED CLINIC	238,415	238,415			
HD	MARSHALL SCHOOL BASED CLINIC	231,405	231,405			
HD	PARKROSE SCHOOL BASED CLINIC	309,087	309,087			
HD	MADISON SCHOOL BASED CLINIC	229,652	229,652			
HD	GRANT SCHOOL BASED CLINIC	223,405	223,405			
HD	GEORGE MIDDLE SCHOOL CLINIC	142,363	142,363			
HD	PORTSMOUTH MIDDLE SCHOOL CLIN	146,089	146,089			
HD	LINCOLN PARK ELEM SBC	259,394	259,394			
HD	LANE MIDDLE SCHOOL CLINIC	133,964	133,964			
HD	BINNESMEAD ELEM	240,051	240,051			

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for low income people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
HD	WHITAKER MIDDLE SCHOOL CLINIC	152,877	152,877			
HD	STARS/PSI PROJECT	368,797				368,797
HD	SBC ADMINISTRATION	343,807	343,807			
HD	NEW SCHOOL BASED CLINIC	354,991	354,991			
HD	SOUTHEAST/WESTSIDE FIELD TEAM	1,123,427	1,123,427			
HD	NORTHEAST FIELD TEAM	1,172,798	1,172,798			
HD	EAST COUNTY FIELD TEAM	731,538	731,538			
HD	NORTH PORTLAND FIELD TEAM	1,069,435	1,069,435			
HD	MID COUNTY FIELD TEAM	785,122	785,122			
HD	CONNECTIONS PROG YNG PARENTS	561,889				561,889
HD	BRENTWOOD/DARLINGTON	377,271	377,271			
HD	AFRICAN AMERICAN BIRTH OUTCOME	256,637	256,637			
HD	HEALTHY START INITIATIVE	936,599	936,599			
HD	CULLY NEIGHBORHOOD CLINIC	57,995		57,995		
HD	Roosevelt Community Clinic	232,099		232,099		
HD	Parkrose Community Clinic	209,409		209,409		
HD	FIELD COUNTYWIDE PROG MGMT	780,670	780,670			
HD	FAMILY SUPPORT & PRESERVATION	653,570	653,570			
HD	WIC SERVICES	2,032,383	2,032,383			
HD	BREAST & CERVICAL CANCER GRANT	388,594		388,594		
HD	CAREOREGON SPIN OFF	772,729		772,729		
HD	PRIMARY CARE CLINICS ADMIN	1,041,308	364,458	676,850		
HD	PRE QUAL	272,137	95,248	176,889		
HD	MEDICAL DIRECTOR	839,914	293,970	545,944		
HD	HOMELESS CHILDREN/LA CLINIC	310,876	108,807	202,069		

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for low income people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
HD	CENTRALIZED APPTS	469,615	164,365	305,250		
HD	CENTRALIZED TRIAGE	671,794	235,128	436,666		
HD	PC MENTAL HEALTH	465,540	162,939	302,601		
HD	AFTER HOURS PHONE TRIAGE	243,304	85,156	158,148		
HD	WESTSIDE PRIMARY CARE CLINIC	2,048,065	716,823	1,331,242		
HD	AFTER HRS CLINIC/WESTSIDE	301,965	105,688	196,277		
HD	SOUTHEAST PRIMARY CARE CLINIC	2,071,958	725,185	1,346,773		
HD	EAST COUNTY PRIMARY CARE CLINI	1,903,743	666,310	1,237,433		
HD	NORTHEAST PRIMARY CARE CLINIC	2,769,964	969,487	1,800,477		
HD	NORTH PORTLAND PRIM CARE CLIN	2,004,178	701,462	1,302,716		
HD	MID-COUNTY PRIMARY CARE CLINIC	3,005,118	1,051,791	1,953,327		
HD	CULLY ACCESS SITE	105,361		105,361		
HD	LINKAGE/PCR	27,053		27,053		
HD	DENTAL SERVICES ADMIN	612,426	214,349	398,077		
HD	SCHOOL/COMM DENTAL PROGRAM	481,662	481,662			
HD	SOUTHEAST DENTAL CLINIC	991,658		991,658		
HD	NORTHEAST DENTAL CLINIC	875,065		875,065		
HD	102ND AVE DENTAL CLINIC	923,881		923,881		
HD	MID COUNTY DENTAL CLINIC	1,059,676		1,059,676		
HD	MULTICARE DENTAL	1,052,025		1,052,025		
HD	Dental Access Program	96,817		96,817		
HD	SUPPORT SERVICES ADMIN	451,131		451,131		
HD	SPECIAL ORDERS SECTION	118,276		118,276		
HD	PHARMACY SERVICES	3,243,919		3,243,919		
HD	PHARMACY ADMINISTRATION	128,616		128,616		

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for low income people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
HD	WESTSIDE PHARMACY	205,907		205,907		
HD	SOUTHEAST PHARAMACY	232,993		232,993		
HD	EAST COUNTY PHARMACY	87,592		87,592		
HD	NORTHEAST PHARMACY	134,506		134,506		
HD	NORTH PORTLAND PHARMACY	86,026		86,026		
HD	MID-COUNTY PHARMACY	131,109		131,109		
HD	FAMILY PLANNING DRUG ACCOUNTS	655,562	229,447	426,115		
HD	LABORATORY	999,265	349,743	649,522		
HD	INFORMATION & REFERRAL	329,145	115,201	213,944		
HD	SAFENET	1,096,184	1,096,184			
HD	Teen Preg Prev Media Campaign	0	0	0		
HD	LANGUAGE SERVICES	165,738		165,738		
HD	COMMUNICATIONS UNIT	246,093			246,093	
HD	BUSINESS SERVICES ADMIN	476,517			476,517	
HD	GRANTS MANAGEMENT/ACCOUNTING	332,966			332,966	
HD	MEDICAL ACCTS PAY/REC	754,714			754,714	
HD	HUMAN RESOURCES	399,777			399,777	
HD	HEALTH INFORMATION SYSTEMS	2,154,555			2,154,555	
HD	MEDICAID ENROLLMENT PROJECT	882,976		882,976		
HD	MCDC	4,025,211			4,025,211	
HD	INVERNESS	4,186,391			4,186,391	
HD	CORRECTIONS MENTAL HLTH SVC	887,544			887,544	

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for low income people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
DCJ Total		66,787,775	35,459,910	0	21,469,105	9,858,760
DCJ	Detention Services	3,171,053			3,171,053	
DCJ	Custody Services Management	4,631,351			4,631,351	
DCJ	Detention Alternatives	740,095				740,095
DCJ	Residential Programs	1,733,095	1,733,095			
DCJ	Counselling Management	2,732,936				2,732,936
DCJ	Court Process Services	1,950,323				1,950,323
DCJ	Child Abuse	219,262	219,262			
DCJ	Diversion Services	398,369				398,369
DCJ	Probation Counseling Services	2,806,329				2,806,329
DCJ	Community Service	606,599				606,599
DCJ	Sex Offender program	624,109				624,109
DCJ	School Attendance Initiative	2,648,320	2,648,320			
DCJ	Turnaround School	879,071	879,071			
DCJ	Family Court Services	776,330			776,330	
DCJ	Management	803,840			803,840	
DCJ	Centralized Intake	1,671,941			1,671,941	
DCJ	Pre-Sentence Investigation	737,012			737,012	
DCJ	Pretrial services	999,012			999,012	
DCJ	Sanctions Tracking	345,384			345,384	
DCJ	Hearings	265,963			265,963	
DCJ	Local Control	2,996,090	2,996,090			
DCJ	East/Southeast District	4,101,077	4,101,077			
DCJ	Centralized Team Supervision	1,473,088	1,473,088			
DCJ	North/Northeast/West	4,331,205	4,331,205			
DCJ	D.U.I.I./Deferred Sentencing	284,417	284,417			
DCJ	Domestic Violence	811,925	811,925			
DCJ	Substance Abuse	9,438,578	9,438,578			
DCJ	Women's Services	884,242	884,242			
DCJ	Mental Health	450,681	450,681			
DCJ	Day Reporting Center	1,069,928	1,069,928			
DCJ	Drug Diversion	1,070,457	1,070,457			
DCJ	Learning Center	480,138	480,138			
DCJ	Alternative Community Service	586,902	586,902			

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for low income people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
DCJ	Forest Project	464,324	464,324			
DCJ	Housing	1,047,092	1,047,092			
DCJ	Alternative Sentence/Sanction Program	490,018	490,018			
DCJ	Adult Information Services	2,459,396			2,459,396	
DCJ	Juvenile Information Services	2,064,750			2,064,750	
DCJ	Resource Mgt Svcs	2,318,070			2,318,070	
DCJ	Director's Office	641,009			641,009	
DCJ	Juvenile Mgt	583,994			583,994	
DA Total		17,547,346	0	0	13,511,524	4,035,822
DA	Administrative Services	2,440,997			2,440,997	
DA	Liquor Control Fund	10,662			10,662	
DA	Medical Examiner	713,721			713,721	
DA	Felony Trial Teams	5,469,539			5,469,539	
DA	Civil Forfeiture Unit	920,953			920,953	
DA	Investigations	143,871			143,871	
DA	Trial Unit	1,679,137			1,679,137	
DA	Neighborhood DA Program	814,369			814,369	
DA	Juvenile Court Trial	896,826			896,826	
DA	Termination Parental rights	552,639				552,639
DA	Victim's Assistance	421,449			421,449	
DA	Domestic Violence	607,069				607,069
DA	Child Abuse Team	1,254,124				1,254,124
DA	Child Support Enforcement	1,621,990				1,621,990
MCSO Total				0	79,653,158	0
MCSO	Executive Office	559,771			559,771	
MCSO	Warrant & Detention Records	3,657,683			3,657,683	
MCSO	Administrative Support Division	7,494,075			7,494,075	
MCSO	Division Management	1,646,556			1,646,556	
MCSO	Investigations Admin	119,284			119,284	
MCSO	Investigations	1,586,420			1,586,420	
MCSO	Special Investigations	1,028,749			1,028,749	
MCSO	Patrol	3,088,463			3,088,463	
MCSO	Traffic Safety	793,240			793,240	
MCSO	Civil Process	1,807,071			1,807,071	

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for poor people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
MCSO	Alarm Program	765,800			765,800	
MCSO	Court Security	1,910,942			1,910,942	
MCSO	Transport	1,621,045			1,621,045	
MCSO	Courthouse jail	1,235,555			1,235,555	
MCSO	Facility Security	2,431,341			2,431,341	
MCSO	Operations Administration	206,067			206,067	
MCSO	Court Services Administration	102,959			102,959	
MCSO	River Patrol	1,612,186			1,612,186	
MCSO	Division Management	2,475,380			2,475,380	
MCSO	Booking & Release	4,811,601			4,811,601	
MCSO	Detention Center (MCDC)	12,839,442			12,839,442	
MCSO	MCCF	2,510,763			2,510,763	
MCSO	Inverness Jail (MCIJ)	17,792,643			17,792,643	
MCSO	Hospital Security Unit	520,417			520,417	
MCSO	Work Crews	1,567,765	1,567,765			
MCSO	Classification	1,752,582			1,752,582	
MCSO	A&D Intervention	191,753	191,753			
MCSO	Administration	772,021	772,021			
MCSO	Restitution Center	1,985,127	1,985,127			
MCSO	Community Supervision	911,700	911,700			
MCSO	Corrections counsellors	2,474,185	2,474,185			
MCSO	Auxiliary Services	5,283,123			5,283,123	
MCSO	Restitution Center (Add package, revised budget)	489342	489342			
MCSO	A&D Intervention (Add package, revised budget)	661817	661817			
DES Total		260,305,432	0	0	260,305,432	0
DES	Department Management	874,143			874,143	
DES	Division Management	1,140,792			1,140,792	
DES	Facilities Maintenance	7,555,109			7,555,109	
DES	Capital Improvement Program	157,067,814			157,067,814	
DES	Facilities Utilities	4,532,943			4,532,943	
DES	Facilities custodial	4,638,326			4,638,326	
DES	Property Management	11,598,497			11,598,497	
DES	Field Services	1,158,302			1,158,302	
DES	Division Management	330,074			330,074	
DES	Animal Care	568,397			568,397	
DES	Pet Licensing	795,433			795,433	
DES	Division Management	250,932			250,932	

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for poor people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
DES	Distribution Services	1,441,059			1,441,059	
DES	Records Management	387,343			387,343	
DES	Electronic Services	655,074			655,074	
DES	Fleet Services	5,263,321			5,263,321	
DES	Division Management	1,954,599			1,954,599	
DES	Program Development & Planning	627,947			627,947	
DES	Right of Way Administration	666,176			666,176	
DES	Water Quality Management	286,874			286,874	
DES	County Surveyor	1,600,118			1,600,118	
DES	Road Maintenance	5,359,598			5,359,598	
DES	Traffic Signs & Signals	2,139,329			2,139,329	
DES	Transportation Engineering	7,011,957			7,011,957	
DES	Bridge Operations & Maintenance	1,966,477			1,966,477	
DES	Bridge Engineering	3,205,539			3,205,539	
DES	Tax Collection/Recording Administration	222,552			222,552	
DES	Records Management	1,101,965			1,101,965	
DES	Tax Collections	1,833,149			1,833,149	
DES	Board of Property Tax Appeals	129,036			129,036	
DES	Document Recording	649,114			649,114	
DES	Marriage Licenses & Passports	96,019			96,019	
DES	Tax Title - A&T	800,000			800,000	
DES	Elections	3,135,662			3,135,662	
DES	Accounting Entities	20,293,921			20,293,921	
DES	Appraisal Section	3,735,118			3,735,118	
DES	A&T Technical Support	3,244,962			3,244,962	
DES	Property Valuation Administration	579,594			579,594	
DES	Land Use Planning	1,408,167			1,408,167	
DES Total		260,305,432	0	0	260,305,432	0
ND	Office of the Chair	1,028,353			1,028,353	
ND	District 1	257,520			257,520	
ND	District 2	126,156			126,156	
ND	District 3	140,156			140,156	
ND	District 3	255,511			255,511	
ND	District 4	256,131			256,131	

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for poor people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
ND	COUNTY AUDITOR	603,662			603,662	
ND	PORTLAND/MULTNOMAH PROGRESS BD	156,453			156,453	
ND	COUNTY COUNSEL	1,670,765			1,670,765	
ND	SIP ADMINISTRATION	162,089	162,089			
ND	SIP COMMUNITY RESOURCES	237,945	237,945			
ND	EDUCATION & TRAINING	300,000	300,000			
ND	SIP COMMUNITY HOUSING PROGRAMS	275,000	275,000			
ND	SIP COMMUNITY SERVICE PROGRAMS	478,536	478,536			
ND	SIP FIRST SOURCE AGREEMENT	75,926	75,926			
ND	POLICY/LEGISLATIVE SUPPORT	535,189			535,189	
ND	CITIZEN INVOLVEMENT	200,039			200,039	
ND	TAX SUPERVISING	230,000			230,000	
ND	COMM ON CHILDREN & FAMILIES	2,334,483			2,334,483	
ND	YOUTH ADVISORY BOARD	24,000				24,000
ND	PUBLIC SAFETY COODINAT COUNCIL	255,008			255,008	
ND	METRO HUMAN RIGHTS COMMISSION	136,951			136,951	
ND	PDX/MULT COMM ON AGING	70,272			70,272	
ND	REGL ARTS AND CULTURE COUNCIL	554,354			554,354	
ND	OSU EXTENSION SERVICE	204,592			204,592	
ND	SOIL & WATER DISTRICT	43,785			43,785	
ND	AFS FOOD STAMP PMT	64,386	64,386			
ND	ASSO OF PORTLAND PROGRESS	123,134			123,134	
ND	PORTLAND AREA BOUNDARY COMM	1,271			1,271	
ND	BUSINESS INCOME TAX	3,800,000			3,800,000	
ND	COUNTY SCHOOL FUND	1,650,000				1,650,000
ND	CONVENTION CENTER FUND	7,750,000			7,750,000	

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for poor people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
ND	COURTROOM SPACE	2,422,664			2,422,664	
ND	LAW LIBRARY SPACE	122,849			122,849	
ND	TAX SUPERVISING SPACE	38,648			38,648	
ND	STATE RECORDS SPACE	34,687			34,687	
ND	STATE COURT RECORDS SPACE	19,169			19,169	
ND	JUDGES PARKING SPACES	48,587			48,587	
ND	GRESHAM DISTRICT COURT SPACE	45,464			45,464	
ND	JUSTICE CENTER COURT SPACE	108,186			108,186	
ND	JUSTICE CENTER COURT PARKING	4,913			4,913	
ND	JUVENILE COURT	427,091			427,091	
ND	SURPLUS PROPERTY/EDGEFIELD	12,891			12,891	
ND	COURTHOUSE PAPER STAND	1,827			1,827	
ND	MULTNOMAH COUNTY SCHOOLS	15,441,487				15,441,487
ND	TAX ANTICIPATION NOTES	580,000			580,000	
ND	CAPITAL LEASE RETIRMENT FUND	1,078,656			1,078,656	
ND	C.O.P.93A & 93B	1,672,844			1,672,844	
ND	LIBRARY LEASE PURCHASE	74,224			74,224	
ND	ENERGY LOAN	119,624			119,624	
ND	1995 LEASED EQUIPMENT	837,439			837,439	
ND	IGA PORTLAND BUILDING	331,890			331,890	
ND	EAST COUNTY FACILITIES	452,500			452,500	
ND	C.O.P PROBATION SVCS BLDG	60,015			60,015	
ND	COP JDH IMPROVEMENTS	5,969,808			5,969,808	
ND	PUBLIC SAFETY DEBT SERVICE	7,543,231			7,543,231	
ND	LIBRARY DEBT SERVICE	7,039,311			7,039,311	
ND	EDGEFIELD CHILDRENS CTR BOND	292,000				292,000
ND	CASH TRANSFERS	298,835			298,835	

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for poor people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
DSS Total		62,971,732	0	0	62,971,732	0
DSS	FINANCE ADMINISTRATION	2,256,369			2,256,369	
DSS	FINANCE - GENERAL LEDGER	558,985			558,985	
DSS	ACCOUNTS PAYABLE	415,531			415,531	
DSS	TREASURY	405,105			405,105	
DSS	PAYROLL	337,033			337,033	
DSS	PURCHASING	824,879			824,879	
DSS	MATERIELS MANAGEMENT	524,642			524,642	
DSS	CONTRACTS	399,846			399,846	
DSS	PERSONNEL-SUMMARY	970,611			970,611	
DSS	UNEMPLOYMENT	432,043			432,043	
DSS	TRAINING	773,746			773,746	
DSS	COMPUTER TRAINING	304,500			304,500	
DSS	INSURANCE RETIREES	929,301			929,301	
DSS	EMPLOYEE WELLNESS	328,291			328,291	
DSS	BENEFITS ADMINISTRATION	536,341			536,341	
DSS	MEDICAL/DENTAL	21,103,802			21,103,802	
DSS	LABOR RELATIONS	397,910			397,910	
DSS	RISK MANAGEMENT ADMIN	471,379			471,379	
DSS	LIABILITY INSURANCE	1,252,000			1,252,000	
DSS	PROPERTY INSURANCE	308,000			308,000	
DSS	WORKER'S COMPENSATION	1,756,705			1,756,705	
DSS	BUDGET	609,257			609,257	
DSS	EVALUATION	500,093			500,093	
DSS	AFFIRMATIVE ACTION	205,167			205,167	
DSS	EMERGENCY MANAGEMENT ADMIN	216,519			216,519	
DSS	EMERGENCY MANAGEMENT BUS & IND	26,064			26,064	
DSS	HAZARDOUS SPILL RESPONSE	29,900			29,900	
DSS	NETWORK MANAGEMENT	140,876			140,876	
DSS	I.S.D. ADMINISTRATION	2,273,040			2,273,040	
DSS	LAN ADMINISTRATOR-ISD	119,971			119,971	
DSS	INFORMATION SYSTEMS	75,672			75,672	

Agcy	Org	98-99 Adopted Budget	Programs building self sufficiency for low income people	Programs providing maintenance and support for poor people	Programs providing social infrastructure for everyone	Programs building self-sufficiency for everyone
DSS	ASSESSMENT & TAXATION	421,239			421,239	
DSS	CRIMINAL JUSTICE SYSTEMS	482,243			482,243	
DSS	FINANCIAL SYSTEMS	481,759			481,759	
DSS	INTRANET	139,438			139,438	
DSS	GRAPHICAL INFORMATION SYSTEM	113,138			113,138	
DSS	ENTERPRISE ARCHITECTURE	155,082			155,082	
DSS	YEAR 2000 PROJECT	1,156,882			1,156,882	
DSS	DATA BASE ADMINSITRATION	221,624			221,624	
DSS	ISD - OPERATIONS	2,375,448			2,375,448	
DSS	TECHNICAL SUPPORT	1,856,084			1,856,084	
DSS	EXCHANGE SERVER	63,007			63,007	
DSS	TELECOMM - DATA	1,684,522			1,684,522	
DSS	Telephone fund	4,865,835			4,865,835	
DSS	INFRASTRUCTURE & SPECIAL PROJ	6,500,000			6,500,000	
DSS	FLAT FEE	2,384,245			2,384,245	
DSS	DSS DEPARTMENT DIRECTOR	335,849			335,849	
DSS	LAN ADMINISTRATION	251,759			251,759	
DLS Total		39,096,577	0	0	38,146,420	950,157
DLS	Director's Office	1,226,423			1,226,423	
DLS	Central Library	8,319,247			8,319,247	
DLS	Community Services	9,545,363			9,545,363	
DLS	Support Services	9,297,792			9,297,792	
DLS	SystemWide Public Services	6,860,240			6,443,348	416,892
DLS	School Corps	301,026				301,026
DLS	Books 2 U	146,384				146,384
DLS	Juvenile Justice	85,855				85,855
DLS	Bond Projects	3,314,247			3,314,247	

APPENDIX E: PEOPLE WHO TAGGED THE PROGRAMS

Dept	People
CFS	Division Managers, Jim Carlson, Van Le and Mike Jaspin
ADS	Sharon Miller, Van Le and Mike Jaspin
HD	Jan Sinclair, Tom Fronk, Van Le and Ching Hay
DCJ	Joanne Fuller, Lore Joplin, Meganne Steele, Van Le and Julie Neburka
DA	Tom Simpson, Van Le
MCSO	Jim Carlson, Van Le and Karyne Dargan
DES	Lance Duncan, Van Le and Ching Hay
ND	Van Le and Mark Campbell
DSS	Van Le
DLS	Jim Carlson, Van Le and Dave Warren

APPENDIX F: MAJOR ACTORS IN MULTNOMAH COUNTY HELPING AMELIORATE AND BUILD SELF-SUFFICIENCY

Who are the major actors helping ameliorate and move families out of poverty? As part of this Report, we asked major actors in Multnomah County to estimate portions of their budget for programs used by low income families, by default or design. Estimates are illustrative and need confirmation before they can be totaled as actors are so intertwined that double, triple counting is very likely[i].

Federal Departments	97	2.6M	Agriculture (received by Multnomah County)
	97	**63 M**	Health and Human Resources (received by Multnomah County)
	97	14 M	Housing and Urban Development (received by Multnomah County)
	97	**2 M**	Federal Emergency Management Agency, Energy, and Education, Corporation for National and Community Service (received by Multnomah County)
	97	3 M	Justice (received by Multnomah County)
State Departments	98	4 M	Housing and Community Services (various sources, self administered and contracted out.)
	97	170 M	Human Resources: SCF and AFS only (various sources, all self administered)
	98	20 M	Judicial (received various sources, self-administered)
	-	N/A	Economic Development
	98	368 M	Education for all children (almost all State General Fund, sent to Multnomah County school districts budgets)

County Departments	98	27 M	Aging and Disability (various sources, self administered and contracted out)
	98	11 M	Community Justice (various sources, self administered and contracted out)
	98	110 M	Community and Family Services (various sources, self administered and contracted out.)
	98	62 M	Health (various sources, self administered)
	98	4 M	Sheriff's Office (various sources, mainly self administered)
City of Portland Bureaus	98	12 M	Housing Authority of Portland (federal funds, self administered)
	98	28 M	Housing and Community Development (various sources, self-administered)
	98	1 M	Parks and Recreation (various sources)
	98	N/A	Portland Development Commission (various sources)
Community Based	98	2 M	Grantmaking organizations: Meyer Memorial Trust, Oregon Community Foundation (programs for children & families only)
	-	-	Select non-profits with expenses above 1 M: Insights Teen Parent Programs, Outside In, Sno Cap, Human Solutions, Portland Impact, Neighborhood House, Self Enhancement, Inc.,
	-	-	Select non-profits with expenses 2-5M: Portland Downtown Services, Inc., Comprehensive Options for Drug Abusers, Inc., Loaves and Fishes Centers, Janus Youth Programs, Inc
	-	-	Select non-profits with expenses 5-10M : Central City Concern, Northeast Community Development Corporation, YMCA
	-	-	Select non-profits with expenses 10M+: Portland Habilitation Center, Workforce Development Board, FamilyCare, Inc. Oregon Food Bank, United Way of Columbia-Willamette

Notes to B.C.C. on Long-Term Benchmark Linkages
Remarks by Jim Carlson to Multnomah County Board of Commissioners
March 16, 1999

Multnomah County is a national leader in applying benchmarks to local government. For the past 6 months the Evaluation/Research Unit of the Budget and Quality Office has focused on our three long-term benchmarks:
1) Reducing Crime
2) Reducing the number of children in poverty
3) Increasing school success.

I would like to briefly review the amount of money being spent during the 98—99 Fiscal Year on each of these areas.

We produced these numbers by going through each of the 416 organizational units in the 98-99 budget and tagging them on this spreadsheet. We tagged all programs that serve 2/3 or more poor people as related to the benchmark of reducing the number of children in poverty. School success includes all County programs located in schools or protecting the physical, emotional, or social health of the county's children. These programs range from library services to children, to health and mental health care, to the school attendance initiative and juvenile justice programs. Programs focused on reducing crime include the entire budgets of the District Attorney, Sheriff, and the Department of Community Justice as well as crime prevention and protective services functions.

Collectively, 50% of the County's total budget is spent in these three areas. This includes 75% of our General Fund. Most of our expenditures for the poor are Other Funds—which are primarily pass through funds from State or Federal sources. These funds come with service mandates so there is not much flexibility in how we spend them. Reducing Crime and Increasing School Success both rely more on the County's General Fund, with Reducing Crime accounting for 51% of General Fund expenditure.

There are a number of programs that have potential impacts on more than one long-term benchmark. Early Childhood Development can increase school success and there is increasing evidence that it is also effective as a long term delinquency prevention strategy. A case can also be made that by strengthening children's assets they have a better chance to succeed in life, which reduces their chances of living in poverty. A similar case for potentially influencing all three long-term benchmarks can be made for

Family Centers, Teen Pregnancy programs, Homeless Youth programs, and juvenile justice programs which serve the poor.

Other programs, such as delinquency prevention, domestic violence programs, and the School Attendance Initiative do not primarily serve poor people, but a case can be made that they potentially improve the chances of school success and in the long-term help promote the assets needed for a productive law-abiding life style. So these programs influence both the School Success and Reducing Crime benchmarks.

The fact that a program potentially influences more than one benchmark does not necessarily give you guidance to spend funds there, rather than on a program which influences only one benchmark, or no benchmark. But the ability to influence more than one benchmark is one indication of a potentially high impact on key areas of importance to this Board. It is interesting that many of the key programs supported by this Board fall into these overlap areas.

With that, I would like to turn to today's focus on County programs that primarily serve the poor. Van Le, in the Dept. of Support Services Evaluation/Research Unit has read much of the literature on poverty, reviewed evaluations of programs that seem to give the best results, and examined some implications of the County's poverty programs.

Funding the Benchmarks

A Presentation to the Multnomah
County Board of Commissioners

prepared by Budget & Quality Office,

Department of Support Services

March 16, 1999

Long-Term Benchmark Funding
FY98-99

Reduce Children in Poverty $240.2 million

Reduce Crime $224.5 million

Increase School Success $96.1 million

50% of the total budget is spent in these 3 areas;
75% of the general fund is spent in these 3 areas

Programs Not Directly Linked to Long-Term Benchmarks

Disease control

Restaurant inspection

Animal control

Transportation

Tax collection & recording

Elections

Reduce Children in Poverty

Reduce Crime

Increase School Success

Adult library services

Facilities

County Commissioners

General Administration

Support Services

Reducing Children in Poverty

Programs which primarily
serve the poor
$240.2 million total funds;
$61.6 million general fund;
24% of the GF

Family Centers

Community Action programs

Mental health

Most County provided
   alcohol & drug treatment

Developmental Disability Services

Aging & Disability Services

Health care

Teen pregnancy

Programs which supervise criminal
   justice offenders & teach job skills

Strategic Investment Program--
   workforce development

Reducing Crime

District Attorney

Dept. of Community Justice

Sheriff's Office

Protective services functions

Most County provided alcohol
  & drug treatment

Domestic violence programs

Prevention programs including early
  childhood development & youth
  intervention programs

Reduce Crime

$224.5 million total funds;
$131.5 million general funds;
51% of the GF

Increasing School Success

Early childhood development

Youth investment programs

Library programs for children

Delinquency prevention

Health care for children

Mental health care for children

Juvenile Justice programs

School Attendance Initiative

Caring Community

Domestic violence programs

Take the Time Campaign (youth asset survey, mini-grants and collaboration grants)

Increase School Success

$96.1 million total funds;
$59.1 million general fund;
23% of the GF

Overlap-- Potential High Leverage Points
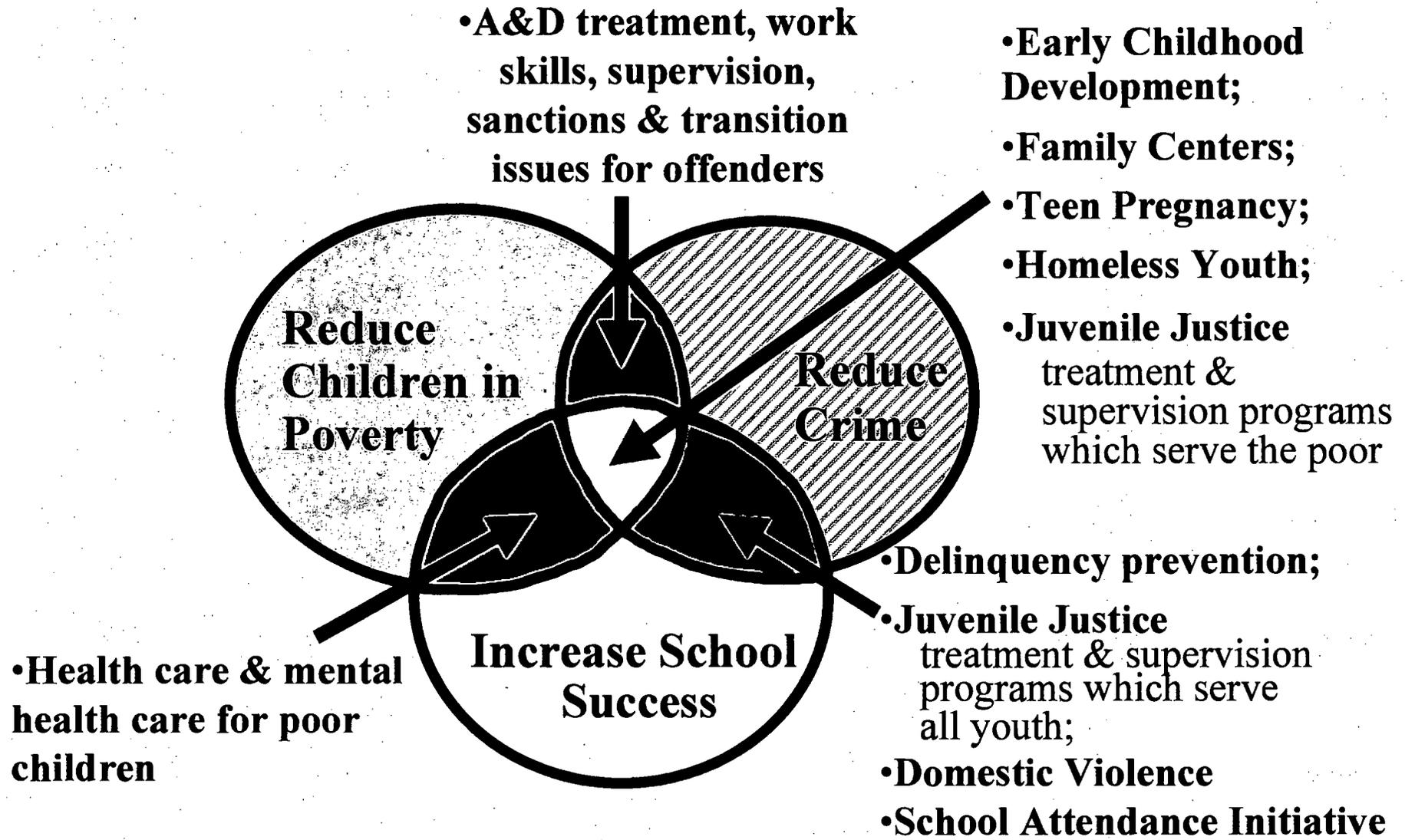
•A&D treatment, work skills, supervision, sanctions & transition issues for offenders

•Early Childhood Development;

•Family Centers;

•Teen Pregnancy;

•Homeless Youth;

•Juvenile Justice treatment & supervision programs which serve the poor

Reduce Children in Poverty

Reduce Crime

Increase School Success

•Health care & mental health care for poor children

•Delinquency prevention;

•Juvenile Justice treatment & supervision programs which serve all youth;

•Domestic Violence

•School Attendance Initiative

Challenges

- Better understanding of community trends and their inter-relationships

- Better understanding of our service system

- Better focus and coordination of existing services

- Limited high-leverage investments in an era of funding restraint

- Improving system accountability

MULNOMAH COUNTY POVERTY BENCHMARK APPROACH

1. How project began
   - ❖ Existing studies about demographics and needs assessment
   - ❖ Cross departmental benchmark focus; Multnomah County focus

2. Best thinking findings
   - ❖ Poverty is due to both personal and place (structural) factors
   - ❖ Child poverty is caused by adult poverty
   - ❖ Poverty is transitional for 2/3

   - ❖ Programs to reduce poverty must be have both amelioration and self-sufficiency elements
   - ❖ If amelioration and self-sufficiency programs are independent then they must be linked
   - ❖ Case management allows linkage at the client level so that clients do not have to fend for themselves
   - ❖ The 20 programs proven to increase employment and earnings have a combination of amelioration, self sufficiency and total linkage.
   - ❖ Public perception about acceptable poverty needs to be changed

   - ❖ Measure results in terms of child well being.
   - ❖ Measure linkage in terms of client well being
   - ❖ Measure poverty in terms of employment and earnings.
   - ❖ Measure success in terms of a target

2. Multnomah current practices finding
   - ❖ 7 departments provide amelioration and self-sufficiency. 6 departments have programs that serve people with low incomes
   - ❖ Programs in these six departments cost $240 million
   - ❖ $143 millions focus on alleviating consequences of current poverty
   - ❖ $97 million focus on reducing causes of future poverty

   - ❖ Programs need more coordination and linkage for clients
   - ❖ Programs cannot give an unduplicated count of clients across departments
   - ❖ Clients do not know about the variety of benefits available

3. Potential changes
   - ❖ Import, incorporate, and improve

(Above Space for Board Clerk's Use ONLY)

AGENDA PLACEMENT FORM

SUBJECT: *Public Ethics and Public Meetings Laws*

BOARD BRIEFING: DATE REQUESTED: *March 16, 1999*
                           REQUESTED BY: *Thomas Sponsler*
                           AMOUNT OF TIME NEEDED: *1 hour*

REGULAR MEETING: DATE REQUESTED:

                           AMOUNT OF TIME NEEDED:

DEPARTMENT: *ND*   DIVISION: *County Counsel*

CONTACT: *Thomas Sponsler*   TELEPHONE #: *x22834*
                                    BLDG/ROOM #: *106/1530*

PERSON(S) MAKING PRESENTATION: *Thomas Sponsler*

ACTION REQUESTED:

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

SUGGESTED AGENDA TITLE:

Public Ethics Law for Elected Officials, and Legal Issues Relating to Public Meetings Executive Sessions

SIGNATURES REQUIRED:

ELECTED OFFICIAL:
(OR)
DEPARTMENT
MANAGER: *Thomas Sponsler*

ALL ACCOMPANYING DOCUMENTS MUST HAVE REQUIRED SIGNATURES

Any Questions: Call the Board Clerk @ 248-3277