



**MULTNOMAH COUNTY  
AGENDA PLACEMENT REQUEST  
NOTICE OF INTENT**

(revised 08/02/10)

**Board Clerk Use Only**

|                        |                |
|------------------------|----------------|
| <b>Meeting Date:</b>   | <u>6/13/13</u> |
| <b>Agenda Item</b>     | <u>C.4</u>     |
| <b>Est. Start Date</b> | <u>9:30 am</u> |
| <b>Date</b>            | <u>6/7/13</u>  |

**Agenda Title: NOTICE OF INTENT to submit a grant proposal for up to \$15,000 to the Siletz Tribal Charitable Contribution Fund**

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

|  |  |                       |                                  |
|--|--|-----------------------|----------------------------------|
| <b>Requested Meeting</b>                 | <u>6/13/2013</u>                         | <b>Amount of Time</b> | <u>N/A-Consent Agenda</u>        |
| <b>Department:</b>                       | <u>Health</u>                            | <b>Division:</b>      | <u>Community Health Services</u> |
| <b>Contact(s):</b>                       | <u>Heather Heater and Laurel Bentley</u> |                       |                                  |
| <b>Phone:</b>                            | <u>(503) 988-3663</u>                    | <b>Ext.</b>           | <u>28668/29778</u>               |
| <b>Presenter Name(s) &amp; Title(s):</b> | <u>N/A – Consent Agenda</u>              | <b>I/O Address:</b>   | <u>160/8; 160/9</u>              |

**General Information**

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

Authorize the Director of the Health Department to submit a grant proposal for up to \$15,000 to the Siletz Tribal Charitable Contribution Fund

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

The Native Future Generations Collaborative (FGC) is a collaborative that comprises local government and Native agencies and community members working to: repair relationships between Native and non-Native entities, particularly government; facilitate the creation of culturally-specific interventions; and promote healthy pregnancies in American Indian/Alaskan Native (AI/AN) peoples. The FGC does this by using a community-based participatory planning process that acknowledges historic injustices, integrates Native beliefs and culture, and invites leadership, input, and participation from Native community members. The main output of this project is a culturally-relevant community action plan that

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would promote healthy pregnancies among AI/ANs.

The FGC has received numerous awards and recognition, including: successfully obtaining a \$50,000 capacity building grant from the Northwest Health Foundation; acceptance into the National Leadership Academy for the Public's Health; awarded the Honoring Our Children's Unsung Heroes award hosted by the Native American Rehabilitation Association of the Northwest, Inc (NARA); and have presented their work at national conferences.

The project is writing a new story of how local government and urban Native communities collaborate to support health and wellness among urban American Indians/Alaska Natives in Multnomah County, with a focus on recognizing the resilience of the Native community and using a strengths-based approach to solve collective problems. The project emphasizes shared learning and reciprocal dialogue in all phases of the work; integrating public health approaches with traditional knowledge and action – understanding that primary prevention has always been integral to Native societies' approaches to health and wellness. Also emphasized is walking together through difficult conversations such as the role of public health and government in the cultural genocide of Native peoples; and drawing on the wisdom and experience of FGC members and the community to develop culturally-relevant approaches to community engagement, capacity-building and better health for Native people.

To date, the FGC has trained 16 Native community members to serve as Native Elders and Natural Helpers (E/NH) who are community liaisons and change agents. The E/NHs assisted in conducting community forums and surveys to learn more about the Native communities' knowledge, attitudes, and practices around substance use and preconception health; analyzed and interpreted the learnings; and are in process of producing a report on the learnings. During 2013 this information will inform the development of an action plan to implement an intervention that is informed by the community; and disseminate the report and action plan. In 2013, the Collaborative will guide the implementation of an action plan that includes a training module and tool kit which are culturally relevant and can be used by both medical and social service providers. The developed materials will include evidence-based tools and key messages to screen for substance use; convey preconception health and family planning messages; and refer women to appropriate medical and support services.

The requested funds from the Siletz Tribal Charitable Contribution Fund will provide honorariums to the E/NH to lead and assist in the above activities.

In the fall of 2011, the Health Department submitted a successful application to become a team within a national Practice Collaborative organized by CityMatCH, a national non-profit agency that supports local and tribal leaders focusing on maternal and child health. The national Collaborative is sponsored by the CDC's National Center on Birth Defects and Developmental Disabilities, and has the aim to reduce the number of pregnancies that are exposed to alcohol and other substances within U.S. urban areas. As part of its participation in the CityMatCH Collaborative, Health Department staff and two community partners attended a three-day training; continue to receive technical assistance; and have convened a local CityMatCH Practice Collaborative. (The only funding provided by the CDC/national CityMatCH to members was for covering the costs of travel to the training).

The local Practice Collaborative convened by the Health Department is focused on addressing substance use before, during, and after pregnancy among women age 15-24 in

Native communities. In addition to the Health Department, the local Collaborative consists of 18 members from local and state agencies, community based organizations, and local Native communities.

To date, the Practice Collaborative has been focusing on building partnerships and trust with local Native groups and members, and state, local, and community health agencies through planning and coordinating with these entities.

The requested funds from Siletz Tribal Charitable Contribution Fund will enhance these planned activities by enabling the Practice Collaborative to better connect with and engage local Native communities in the project. The ultimate goal of the Siletz project is to enable the Collaborative to create a sense of ownership and empowerment in the Native community to help break down historical barriers and reduce the impact of substance use on pregnancies. The Siletz project will enable the Collaborative to cover costs associated with community forums (child care for participants, food, public transit costs, incentives for attending, etc.) and honorariums (small stipends and honorary gifts) for elders and natural helpers (peers and other community members). Elders and natural helpers will help recruit members of Native communities to participate in project surveys and keep Native community members engaged in the project throughout its various stages by sharing and receiving feedback on reports and action plans. Their addition to the Collaborative will entrench project activities and learnings in local Native communities, leading to the long-term sustainability of the project and the successful implementation of the action plan in 2013.

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

This grant will provide the Health Department with up to \$15,000 to provide honorariums to elders and natural helpers and cover costs associated with community forums to ensure that Native communities are fully engaged in the project. All funds will be used by November 2013; there is no ongoing fiscal impact.

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

None.

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

In addition to the Health Department, the local CityMatCH Collaborative, which is in full agreement to the project scope, consists of the following government agencies, universities, and community-based organizations: Native American Rehabilitation Association (NARA); Native American Youth Family Center (NAYA); NW Portland Area Indian Health Board; Multnomah County Department of Human Services; Portland State University; and Oregon Health Authority, Office of Family Planning. In addition, the Collaborative has three members from Native communities.

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## **Grant Application/Notice of Intent**

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

• **Who is the granting agency?**

Siletz Tribal Charitable Contribution Fund

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

There is not matching requirements and a final report is due no later than one year after the award date.

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- **Explain grant funding detail – is this a one time only or long term commitment?**  
The grant will provide the Health Department with a one-time award of up to \$15,000 to be used within one year of award.
- **What are the estimated filing timelines?**  
The grant is due June 12, 2013. If the board does not approve this notice of intent then Multnomah County Health Department will immediately withdraw its application.
- **If a grant, what period does the grant cover?**  
The grant can cover up to a 12 month project period.
- **When the grant expires, what are funding plans?**  
When funds expire this phase of the project will be complete.
- **Is 100% of the central and departmental indirect recovered? If not, please explain why.**  
No, operational expenses, including indirect costs, are not considered for funding by the foundation. The Department's Community Health Services division will cover indirect costs as an in-kind match for the project.

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## Required Signatures

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**Elected Official  
or Department/  
Agency Director:**

**KaRin Johnson for**

**Date: 06-07-13**

*Lillian Shurley*

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**Budget Analyst:**

**Althea Gregory /s/**

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**Date: 06-07-13**

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