



# 2007 Safe Child Task Force Report



January 2008



# Safe Child Task Force Report and Child Abuse Prevention/Intervention Inventory

*Child safety is non-negotiable.*

September 2007

*Report for the Multnomah County Commission on Children, Families and Community  
and the Local Public Safety Coordinating Council*



# 2007 Safe Child Task Force Report and Inventory

## *Acknowledgements*

*Thank you to all of the survey respondents who took time out of their busy schedules to answer survey questions.*

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# INTRODUCTION

Dear Community Members,

We convened the Safe Child Task Force during the Fall/Winter of 2006-2007 to bring together community leaders and experts to tackle one of the most serious concerns in our community, child abuse and neglect. Far too many children in Multnomah County are in harm's way. We continue to see increasing rates of reported abuse and neglect, and an increase in foster care placement – clear indicators that children's safety is at risk in our community.

Child abuse and neglect are costly. They require thousands upon thousands of dollars to be spent in protective services, foster care and more. Abuse and neglect is particularly costly in the lives of children, children who may require extensive services and support, sometimes throughout their lives.

As regrettable, our community is poorer for the lost potential of so many community members.

Our ad hoc Task Force set out to develop a common vision and create an action plan for advancing the cause of safety for all children in Multnomah County. Many meetings and months of work by the Task Force and its subcommittees are contained in this, the Safe Child Task Force Report.

The Report includes:

- An overview of child abuse and neglect
- Safe Child Task Force findings and recommendations
- An inventory of child abuse prevention and intervention services
- A directory of local child abuse prevention and intervention services

It is our hope that this Report will be the starting point for a continued collaboration that will focus efforts on making certain that all families receive the support they need to create safe and healthy environments for children.

We thank our fellow Task Force members for their service, and extend our thanks to the many committed organizations and individuals in our community that share with us the maxim, "Child safety is non-negotiable".

Sincerely,



LISA NAITO  
Multnomah County  
Commissioner  
Chair, Local Public Safety  
Coordinating Council



CARLA C. PILUSO  
Gresham Police Chief  
Chair, Multnomah County  
Commission on Children,  
Families and Community



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# EXECUTIVE SUMMARY

Escalating child abuse rates in Multnomah County sparked the creation of the Safe Child Task Force. The short-term Task Force group was composed of experts and community leaders from diverse agencies and communities. Members studied the factors involved in child abuse prevention, created an inventory of services, and developed recommendations to ensure the safety of children and strength of families. The work included a comprehensive vision and community plan for preventing child maltreatment and for responding to incidents of child abuse and neglect.

The task force, sponsored by the Local Public Safety Coordinating Council and the Multnomah Commission on Children, Families and Community, was co-chaired by County Commissioner Lisa Naito and Gresham Police Chief Carla C. Piluso.

## **Process**

The Task Force convened monthly from September 2006 through January 2007. Three work groups were created to delve deeper into specific topic areas. The work groups were:

- advocacy and education;
- best practices;
- prevention and intervention.

The Task Force reconvened to review and process the work groups' recommendations.

## **Task Force Recommendation and Next Steps**

The Task Force's report contains an overview of the issue of child abuse and neglect, a review of the work of the Task Force and its recommendations and an inventory of child abuse prevention and intervention services.

The Task Force recommends the following steps to protect Multnomah County children and youth:

1. Make child and family safety a funding and policy priority.
2. Create a universal parent education system locally.
3. Create a supportive community based on healthy attitudes and norms to prevent child abuse.
4. Produce an inventory of child abuse prevention and intervention services.

The group plans to reconvene the Safe Child Task Force in late 2007 for updates on legislation and other activities, review outcomes and discuss next steps.



# SECTION I: Child Abuse and Neglect Overview

## Definition of Child Abuse and Neglect

The Child Abuse Prevention and Treatment Act (CAPTA) is the federal legislation that provides minimum standards that states must incorporate in their statutory definitions of child abuse and neglect. The CAPTA definition of “child abuse and neglect” refers to:

“Any recent act or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm, sexual abuse, or exploitation, or an act or failure to act which presents an imminent risk of serious harm.”

In Oregon, child abuse is defined (ORS 419B.005) as:

- Any assault, as defined in ORS chapter 163, of a child and any physical injury to a child that has been caused by other than accidental means. This includes any injury that appears to be at variance with the explanation of the injury.
- Any mental injury to a child. This includes only observable and substantial impairment of the child’s mental or psychological ability to function caused by cruelty to the child. The child’s culture will be considered.
- Rape of a child includes, but is not limited to, rape, sodomy, unlawful sexual penetration and incest as those acts are defined in ORS chapter 163.

- Sexual abuse as defined in ORS chapter 163.
- Sexual exploitation, including use of children for pornography and prostitution.
- Negligent treatment or maltreatment of a child includes, but is not limited to, failure to provide adequate food, clothing, shelter or medical care. Any child who is under care or treatment solely by spiritual means pursuant to the religious beliefs or practices of the child or the child’s parents or guardians shall not, for this reason alone, be considered a neglected or maltreated child.
- Threatened harm to a child means subjecting a child to substantial risk of harm to the child’s health and welfare.
- Child selling, which includes buying, selling or trading for legal or physical custody of a child. This does not apply to legitimate adoptions or domestic relations planning.
- Permitting a person under 18 years of age to enter or remain in a place where methamphetamine is being manufactured.

## Child Abuse and Neglect Rates

Child maltreatment is a devastating problem affecting too many children in Multnomah County. Statewide, about half of victims of reported abuse/neglect are under age 6.

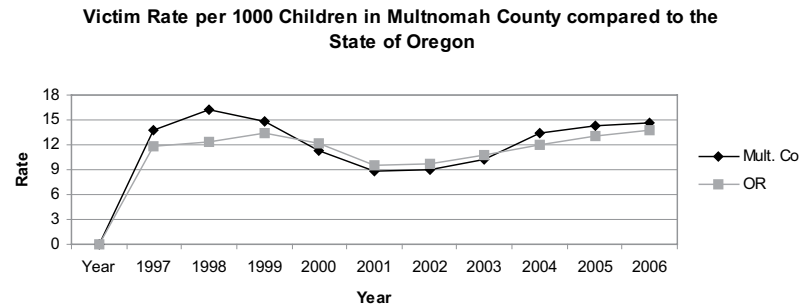
For six of the past 10 years, the rate of child maltreatment has been higher in Multnomah County than the state average. In 2006, records show a rate of 14.6 children per 1,000 were neglected or abused in Multnomah County, while 13.8 per

1,000 were neglected or abused statewide. According to Oregon Department of Human Services abuse and neglect statistics (**The Status of Children in Oregon's Child Protection System**) victim rates in Multnomah County have fluctuated over the past 10 years, ranging from a low of 8.9 (2001) to a high of 16.2 (1998).

### Child Abuse and Neglect in Rates Multnomah County compared to Oregon 1997-2006

	<b>Multnomah County</b>	<b>Oregon</b>
<b>Year</b>	<b>Rate/1000</b>	<b>Rate/1000</b>
<b>1997</b>	<b>13.7</b>	<b>11.8</b>
<b>1998</b>	<b>16.2</b>	<b>12.3</b>
<b>1999</b>	<b>14.9</b>	<b>13.5</b>
<b>2000</b>	<b>11.3</b>	<b>12.2</b>
<b>2001</b>	<b>8.9</b>	<b>9.6</b>
<b>2002</b>	<b>9.0</b>	<b>9.7</b>
<b>2003</b>	<b>10.3</b>	<b>10.8</b>
<b>2004</b>	<b>13.4</b>	<b>12.0</b>
<b>2005</b>	<b>14.3</b>	<b>13.0</b>
<b>2006</b>	<b>14.6</b>	<b>13.8</b>

The following chart shows the annual maltreatment rates for Multnomah County as compared to the state as a whole for the period 1997 through 2006.



### Consequences of Child Abuse and Neglect

Child abuse and neglect is an issue with serious, long-term consequences for individuals, families and communities. Children that are abused suffer effects that often last a lifetime. The human cost is heartbreaking. The monetary cost of intervention in child abuse and neglect cases (conservatively estimated at \$258 million per day in the U.S.; Prevent Child Abuse America, 2001) places an enormous weight on our child protective services, educational, juvenile, and mental health systems.

According to the Adverse Childhood Experiences (ACE) study, conducted by the Kaiser Permanente Medical Care Program in San Diego, the Centers for Disease Control and Prevention (CDC), Emory University in Atlanta, and the University of Arizona Health Sciences Center in Tucson, childhood abuse and household dysfunction lead to increased risk for adverse health effects such as smoking, alcoholism, drug abuse, eating disorders, severe obesity, depression, suicide, sexual promiscuity and chronic diseases. In fact, the more adverse experiences one has as a child, the more likely one will suffer multiple health risk behaviors and organic diseases as

an adult. According to Dr. Vincent Felitti, principal investigator of the ACE study,

“Clearly, we have shown that adverse childhood experiences are common, destructive, and have an effect that often lasts for a lifetime. They are the most important determinant of the health and well-being of our nation.”

While child abuse and neglect almost always occur within the family, the impact does not end there. Society as a whole pays a price for child abuse and neglect, in terms of both direct and indirect costs.

Direct costs include those associated with maintaining a child welfare system to investigate allegations of child abuse and neglect, as well as expenditures by the judicial, law enforcement, health, and mental health systems to respond to and treat abused children and their families. A 2001 report by Prevent Child Abuse America estimates these costs at \$24 billion per year.

Indirect costs represent the long-term economic consequences of child abuse and neglect. These include juvenile and adult criminal activity, mental illness, substance abuse, and domestic violence. They can also include loss of productivity due to unemployment and underemployment, the cost of special education services, and increased use of the health care system. Prevent Child Abuse America recently estimated these costs at more than \$60 billion per year (2001).

## **Why Does Child Abuse and Neglect Occur?**

There is no single known cause of child maltreatment. Nor is there any single description that captures all families in which children are victims of abuse and neglect. Child maltreatment occurs across socio-economic, religious, cultural, racial, and ethnic groups.

While no specific causes definitively have been identified that lead a parent or other caregiver to abuse or neglect a child, research has recognized a number of risk factors or attributes commonly associated with maltreatment. Children within families and environments in which these factors exist have a higher probability of experiencing maltreatment. It must be emphasized, however, that while certain factors often are present among families where maltreatment occurs, this does not mean that the presence of these factors will *always* result in child abuse and neglect. The factors that may contribute to maltreatment in one family may not result in child abuse and neglect in another family. For example, several researchers note the relation between poverty and maltreatment, yet it must be noted that most people living in poverty do not harm their children. Professionals who intervene in cases of child maltreatment must recognize the multiple, complex causes of the problem and must tailor their assessment and treatment of children and families to meet the specific needs and circumstances of the family.

Risk factors associated with child maltreatment can be grouped in four domains:

- Parent or caregiver factors
- Family factors
- Child factors
- Environmental factors (includes community and societal)

It is increasingly recognized that child maltreatment arises from the interaction of multiple factors across these four domains. Available research suggests that different factors may play varying roles in accounting for different forms of child maltreatment (physical abuse, sexual abuse, neglect, and psychological or emotional abuse).

Protective factors are conditions in families and communities that, when present, increase the health and well-being of children and families. These attributes serve as buffers, helping parents to find resources, supports, or coping strategies that allow them to parent effectively, even under stress.

Research has shown that the following protective factors are linked to a lower incidence of child abuse and neglect:

- Nurturing and attachment
- Knowledge of parenting and of child and youth development
- Parental resilience
- Social connections
- Concrete supports for parents

*(excerpt from Child Welfare Information Gateway; A Coordinated Response to Child Abuse and Neglect: The Foundation for Practice User Manual Series; 2003).*

## **Data on Risk and Protective Factors**

Building upon the research related to risk and protective factors, Leila Keltner M.D., from CARES Northwest, developed a Child Maltreatment Risk and Protective Factors chart (see Appendix A). This holistic approach details factors related to the child, parent, family, community/ neighborhood, and cultural/social elements.

In an effort to begin creating baseline data, the Portland/ Multnomah Progress Board assisted the Task Force in identifying current data for a sampling of identified risk and protective factors. The following charts provide a snapshot of local and state conditions, using the most recent data available.

### MULTNOMAH COUNTY & OREGON Risk and Protective Factors Data

<b>ECONOMIC</b>		
<b>Protective Factors</b>		
Indicator	Multnomah	Oregon
Percent of homes that are owner occupied (2004)	59.0%	63.0%
Rate of job growth (2004 – 2005)	1.9%	3.1%
<b>Risk Factors</b>		
Indicator	Multnomah	Oregon
Child poverty rate (2005)	25.0%	18.0%
Percent of population under age five (2005)	6.7%	6.3%

<b>EDUCATION</b>		
<b>Protective Factors</b>		
Indicator	Multnomah	Oregon
Percent of children entering kindergarten 'ready to learn' (2004)	75.8%	79.8%
Graduation rate (2004)	72.0%	n/a%
Percent of adults >25 with at least a HS diploma (2005)	87.1	87.5%
<b>Risk Factors</b>		
Indicator	Multnomah	Oregon
Percent of births to mothers with <HS education	20.0%	20.0%

<b>SOCIO-EMOTIONAL</b>		
<b>Protective Factors</b>		
Indicator	Multnomah	Oregon
Percent of two-parent households (2005)	17.0%	20.0%
<b>Risk Factors</b>		
Indicator	Multnomah	Oregon
Divorce rate per 1,000 county population (2004)	3.4	4.1
Percent of births to unwed mothers (2004)	34.0%	32.5%

<b>HEALTH &amp; SAFETY</b>		
<b>Protective Factors</b>		
Indicator	Multnomah	Oregon
Health insurance rate for children under 19	<i>Data not available</i>	<i>Data not available</i>
<b>Risk Factors</b>		
Indicator	Multnomah	Oregon
Reported incidents of domestic violence per 1,000 population (2004)	6.6	3.7
Child death rate per 1,000 children ages 1-4 (2004)	1.4	1.3
Infant mortality rate per 1,000 live births (2004)	5.8	5.5
Low birth rate per 1,000 births (2004)	64.3	60.5
Teen (15-17) pregnancy rate per 1,000 females (2004)	30.2	23.8
Percent of pregnant women who: Smoked (2004)	11.3%	12.6%
Drank alcohol (2004)	2.6%	1.5%
Used illicit drugs (2004)	2.6%	1.8%
Percent of mothers who received inadequate prenatal care (2004)	6.4%	5.8%
Percent of adults abusing alcohol (2005)	16.7%	13.9%

### ***Risk Factors***

As the table above shows, Multnomah County had a worse record than the state as a whole in 12 of 15 categories of risk factors for child maltreatment.

Of great concern is the child poverty rate for Multnomah County, which is much higher than that of the state as a whole. In 2005, 25 percent of Multnomah County children lived in poverty, as compared to 18 percent of children in all of Oregon. According to the U.S. Department of Health and Human Services, (Third National Incidence Study of Child Abuse and Neglect, 1996) “income level has been linked to child maltreatment. Children from families with incomes less than \$15,000/year, compared to children from families with incomes greater than \$30,000/year are 22 times more likely to experience some form of maltreatment and 44 times more likely to be victims of neglect.” This does not mean that poverty causes child maltreatment. Rather, poverty can severely limit options available to families, such as child care, safe neighborhoods, etc.

Other notable disparities include: domestic violence incident rates (6.6 per 1,000 people in Multnomah County and 3.7 percent in Oregon); teen pregnancy rate (30.2 per 1,000 in Multnomah County and 23.8 per 1,000 in Oregon); and percent of adults abusing alcohol (16.7 percent in Multnomah County and 13.9 percent in the state as a whole).

### ***Protective Factors***

In each of the categories of protective factors, where there was available data, Multnomah County currently lags behind the state.

## **SECTION II: Safe Child Task Force**

### **Safe Child Task Force Members**

#### **Safe Child Task Force Chairs**

*Lisa Naito*, Multnomah County Commissioner

*Carla C. Piluso*, Gresham Police Chief and Chair of Multnomah County Commission on Children, Families and Community

#### **Safe Child Task Force Members**

*Wendy Lebow*, Director, Multnomah County Commission on Children, Families and Community

*Dan Saltzman*, Portland City Commissioner

*Dr. Katharine Cahn*, Executive Director, Portland State University Child Welfare Partnership

*Claudia Black*, Associate Director for Policy, Portland State University

*Kay Toran*, President and CEO, Volunteers of America Oregon

*Kate Brown*, Oregon State Senator

*Mike Schrunk*, Multnomah County District Attorney

*Capt. John Eckhart*, Portland Police Bureau

*Carolyn Graf*, Manager, Multnomah SDA, Department of Human Services, Child Welfare

*Gloria Wiggins*, Latino Services Program Manager, Catholic Charities

*Karl Brimmer*, Director, Multnomah County Office of Mental Health and Addiction Services

*Jan Wallinder*, Program Manager, Multnomah County Health Department

*Dr. Leila Keltner*, Medical Director, CARES Northwest

*Rich Brown*, Senior Vice President, Bank of America

*Lorena Campbell*, Centennial School District

*Jackie Mercer*, Executive Director, Native American Rehabilitation Association of the Northwest

*Nan Waller*, Multnomah County Circuit Court Judge

*Martha Brooks*, State Director, Fight Crime: Invest In Kids Oregon

*Cindy Thompson*, Executive Director, Children's Trust Fund of Oregon

*Mickey Lansing*, Executive Director, Oregon Commission on Children and Families

#### **Safe Child Task Force Staffing**

*Carol Wessinger*, Staff Assistant, Commissioner Naito's Office

*Lisa Hansell*, Program Coordinator, Multnomah County Commission on Children, Families and Community (CCFC)

*Britta Halverson*, MSW Intern, CCFC

*Yvonne Recchia*, MSW Intern, CCFC

## **Task Force Description**

The Safe Child Task Force, comprised of local and state leaders, worked to strengthen Multnomah County's system for preventing and responding to the maltreatment of children through age 18. Escalating child abuse rates in Oregon's most populous county led to the creation of the Task Force by the Local Public Safety Coordinating Council and the Multnomah Commission on Children, Families and Community. Co-chairs were Commissioner Lisa Naito and Gresham Police Chief Carla C. Piluso.

### **Goal**

The Task Force's goal was to develop recommendations to ensure the safety of Multnomah County's children, with a focus on preventing maltreatment.

### **Vision Statement**

Building upon the outlined goal, the Task Force created a vision for all children in the community staying safe.

We envision that:

- Children are nurtured, supported, and protected within safe and stable homes and community environments.
- Families recognize the rewards and responsibilities of raising children and have access to support within their own communities to help them meet those responsibilities.
- Families are able to ask for and receive timely assistance without fear of being punished or blamed.
- Communities are supported in their efforts to meet the diverse needs of families in raising their children.

### **Charge**

The charge of the Safe Child Task Force was to prepare an inventory of services, identify best practices, outline a comprehensive vision and create a set of specific recommendations for preventing child maltreatment and ensuring that appropriate services are available to respond to incidents of child abuse and neglect.

### **Anticipated Outcomes**

The Task Force's anticipated outcomes included creating an action plan for reducing the incidence of child abuse and neglect in Multnomah County through a holistic response to child maltreatment that included public safety and the health and human services sectors.

### **Process**

The Safe Child Task Force convened monthly from September 2006 through January 2007. All members were called upon to decide the focus and outcomes of the task force.

As themes of interest arose, the Task Force created work groups in three focus areas: advocacy and education; best practices; and prevention and intervention indicators. Each of the work groups shared their findings and recommendations with the Task Force (see Appendix B for a summary of each subgroup's work). Building upon the work of each of the subgroups, the Task Force developed findings and recommendations.

## **Task Force Findings**

Based on a review of research, service inventory information and the most current county and state data available, the Task Force found that:

- There is a lack of funding in Multnomah County for universal programs that support healthy families.
- The sustainability of funding across Oregon is problematic. Oregon has a strong reputation for pioneering excellent best practice programs, but these programs survive only a short while due to changes in funding availability. Community commitment to children and families is essential to maintaining and gaining funding for these programs.
- Many organizations and support systems in the community need current, accurate information about available services and eligibility requirements.
- Nationally and statewide, child maltreatment does not receive the attention and funding that go to other public health issues that have less societal impact.
- Incidents of child abuse and adult health problems have a very high correlation (ACE report).
- The community must improve its ability to connect and engage people on a voluntary basis before abuse occurs.

## **Recommendations**

The Safe Child Task Force recommends these actions:

### **1. Make child and family safety a funding and policy priority.**

The state advocacy work desired by the Safe Child Task Force will be part of the Commission on Children, Families and Community's Advocacy Committee. All task force members are encouraged to join the advocacy committee. The Commission on Children, Families and Community will designate a point person to alert members about upcoming legislative policies and ideas.

Safe Child Task Force members will provide advocacy during the county budget process to support and raise awareness of child abuse prevention and intervention services. Point person Lisa Naito will provide budget analyses.

The Safe Child Task Force will reconvene for a meeting after the 2007 legislative session to summarize legislative and other activity, outcomes and next steps.

### **2. Create a universal parent education system locally.**

The Safe Child Task Force recommends that the Commission on Children, Families and Community take the lead on this initiative. The task force recommends that partners in this effort include schools, the pediatric community, the health department, the county mental health department and businesses such as banks.

Possible strategies to pursue when developing a universal parent education system include:

- Incorporate parenting education in public school curricula.
- Provide parenting education for all expectant parents.
- Offer support and education for all new parents.
- Include a financial planning education component in parenting classes for all families.

Continue and expand the Roots & Wings event and other child abuse prevention activities in the month of April and throughout the year. These events provide a potential basis for ongoing parent education opportunities.

### **3. Create a supportive community based on healthy attitudes and norms to prevent child abuse.**

Create a social context in our community that does not tolerate child abuse – one that values the widespread availability and accessibility of child protection and family support resources to prevent child maltreatment. Child maltreatment cannot be eliminated one person at a time. In addition to offering services and supports for individual families, it's imperative to focus on the larger social and community environment. Engaging community members is fundamental to fostering the lasting social change needed to keep families and communities safe and strong. Community attitudes, social norms and public policies need to change to better support the safe and healthy development of children and families.

Create a community-based action plan that honors the strengths and addresses the needs of children and families. Work with members of Multnomah County's diverse communities to assure that a broad spectrum of perspectives and ideas are included.

### **4. Produce an inventory of child abuse prevention and intervention services.**

This inventory, to be completed by Commission on Children, Families and Community staff, should be a comprehensive list of organizations in Multnomah County that provide prevention and intervention services. The inventory can serve as a directory for community providers about available services and as a tool to identify strengths and gaps in services available to the community.

## **SECTION III: Child Abuse Prevention and Intervention Inventory of Services**

The purpose of this inventory is to provide a baseline of child abuse prevention and intervention services in Multnomah County. The information contained in this inventory identifies how services are funded, describes the types of services available, eligibility criteria and waiting list information at a point in time. The intent is that this inventory will provide useful information to policy makers, funders and service providers about gaps and opportunities for improvements in the continuum of child abuse prevention and intervention services.

### **Methodology:**

- The first step in this process was to identify agencies in Multnomah County that were believed to provide services that prevent or intervene in cases of child abuse and neglect. Commission on Children, Families and Community staff created an initial list of service providers. That list was reviewed and amended by Safe Child Task Force members.
- Surveys were sent (via U.S. mail and electronically) to 49 agencies/county departments. Recipients were asked to complete a separate form for each child abuse prevention or intervention program offered by their agency. A single point of contact in the agency received the request and was asked to forward it to others in the organization as appropriate.
- Information requested on the survey (Appendix C): Agency name and contact information, program name, description of services, core service provided, focus population, eligibility requirements, funding sources,

annual program cost, numbers served annually by age, estimates of unmet need for service and where the service fits along the child abuse prevention and intervention continuum.

- Follow-up phone calls were made to all of the organizations that received the surveys. The purpose of the phone calls was to answer questions and remind people to complete and return the surveys.
- 75 percent (n=37) of the agencies (representing 72 programs) completed and returned the survey.
- Data received has been compiled by category, edited for consistency and sent back to each responding agency for review.

### **Challenges, considerations and limitations:**

- The list of agencies created by the CCFC and the Safe Child Task Force may not include all child abuse prevention and intervention services currently offered in Multnomah County.
- Twelve of the agencies identified did not complete a survey. Some agencies determined that the services they provide do not fit within the category of child abuse prevention or intervention services. Some agencies were unresponsive and/or chose not to participate.
- In the broadest sense, many programs could be considered prevention programs (i.e. recreation programs, arts programs, health programs). For this inventory, prevention programs selected are limited to those that have a specific focus on preventing child abuse.

- The time involved in gathering input was much more extensive than originally anticipated. CCFC interns worked on the project for about 10 months, continually following up with agencies in an attempt to provide as complete an inventory as possible. Due to the length of time involved in gathering the input, the data is now somewhat dated (agencies were asked to provide information from FY 2005-2006, July 1, 2005 to June 30, 2006). Three programs that were originally included in the inventory have been removed because they are no longer in operation.
- The means of internal data collection is inconsistent from one agency to another. Alas, in several instances, the annual cost of a program did not equal the total of the funding sources listed. In cases where the annual cost indicated was more than the total of the funding sources listed, the “missing” amount was added to the “other” category.
- CCFC staff was directed to develop the survey prior to the time that the Task Force began meeting. Ultimately, the Task Force recommended different definitions. Given that the surveys had already been distributed and responses had already been received, the original definitions were utilized for this inventory.
- Clients may receive services from multiple agencies and programs, making it impossible to know, from this inventory, the total unduplicated numbers served.
- The data provides information about program costs and numbers served, but it does not measure cost effectiveness or outcomes.

- It was not possible to calculate the amount of the City of Portland’s budget that is spent on police officers responding to crimes involving child abuse and neglect. As a result, the amount of city funds spent on child maltreatment is definitely under-represented.

## Definitions:

Agencies were asked to categorize their program(s) as primary prevention, risk-focused prevention, early intervention or intensive intervention.

**Primary Prevention** – Basic services that are needed by **all** and are broadly available. Programs that support the healthy growth and development of all children and youth.

**Risk-Focused Prevention** – Services focused on specific groups of children, youth and families that are determined to be “at-risk.”

**Early Intervention** – Services that respond to individual children, youth or families who show beginning signs of social, emotional or behavioral difficulties.

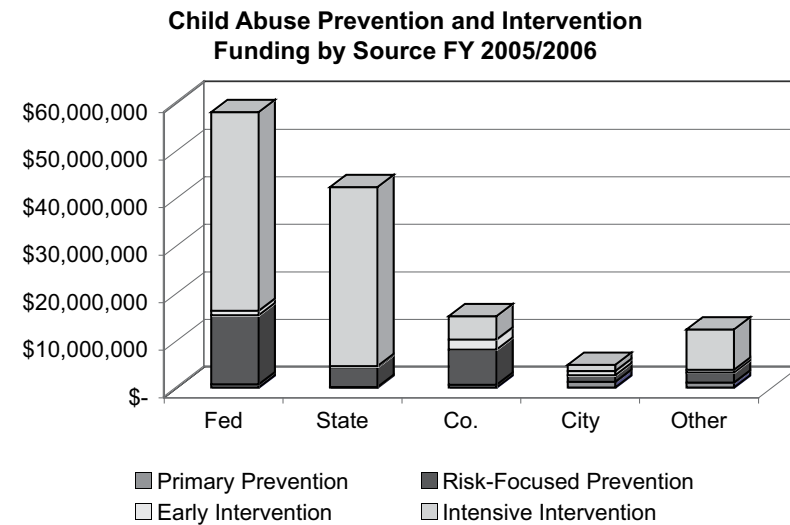
**Intensive Intervention** – Services for specific children, youth or families who are experiencing difficulties, typically requiring multiple interventions.

In addition to these four categories, an additional category titled “System Coordination Efforts” includes multidisciplinary efforts addressing child abuse prevention and intervention.

## Summary of Inventory Findings

- Seventy-two programs are included in the inventory. There are 12 primary prevention programs, 16 risk-focused prevention programs, 16 early intervention programs and 28 intensive intervention programs.
- The total reported annual cost for child abuse prevention and intervention services, in Multnomah County, for fiscal year 2005-2006 was \$132,011,970.
- The combined total of children/families reported to have received services was 106,841 (some families received services from more than one agency).
- The federal government provides the greatest amount of funding (\$57,955,154) for the continuum of prevention and intervention services. The City of Portland provides the greatest amount of funding (\$1,190,951) for primary prevention programs. Table 1 illustrates the total amount of funding, by funding source and by service category.
- In calculating the ratio of program costs to numbers served, intensive intervention services are the most expensive with an average cost of \$2,848 per child/family as compared to primary prevention, which has the smallest average cost of \$209 per child/family.
- Four system coordination efforts were reported and are included in the inventory. Three of the efforts focus on prevention and one on intensive intervention. Note: Due to incomplete financial information for this category, the System Coordination Effort category is not included in the analysis.

Table 1



## Individual Category Findings

**Primary Prevention:** Primary prevention includes community education, mentoring, parenting education and parent support programs. Total annual costs for FY 2005-2006 for primary prevention services in Multnomah County were reported to be \$3,584,856. This represents 2.7 percent of the total amount spent on the continuum of prevention and intervention services. The City of Portland provides the greatest amount of funding, \$1,190,951, for primary prevention.

**Risk-Focused Prevention:** Risk-focused prevention includes home visiting, parent education, parent support, case management, mentoring, child care, domestic violence, nutrition education, health promotion, therapeutic nursery, career guidance and child support services. Total annual costs for FY 2005-2006 for risk-focused prevention services in Multnomah County were reported to be \$29,501,594. This represents 22.3 percent of the total amount spent on the continuum of prevention

and intervention services. The federal government provides the greatest amount of funding, \$14,456,575, for risk-focused prevention.

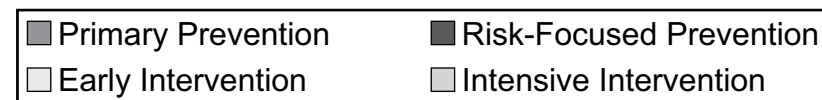
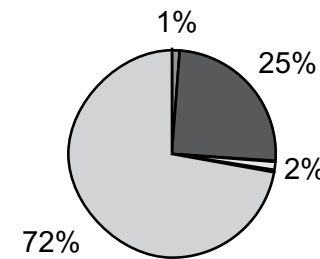
**Early Intervention:** Early intervention includes case management, emergency shelter, domestic violence, housing, teen parenting and mental health programs. Total annual costs for FY 2005-2006 for early intervention services in Multnomah County were reported to be \$4,714,640. This represents 3.6 percent of the total amount spent on the continuum of prevention and intervention services. Multnomah County provides the greatest amount of funding, \$2,149,020, for early intervention services.

**Intensive Intervention:** Intensive intervention includes alcohol and drug treatment, court appointed advocates, case management, police investigations, prosecution and other court services, domestic violence, medical assessment, child welfare, emergency shelter, foster care, in-home, mental health, parent education and parent support programs. Total annual costs for FY 2005-2006 for intensive intervention services in Multnomah County were reported to be \$94,210,880. This represents 71.4 percent of the total amount spent on the continuum of prevention and intervention services. The federal government provides the greatest amount of funding, \$41,814,435, for intensive intervention services.

## Funding Source Findings

**Federal Government:** The federal government provides the largest amount of funding for the continuum of child abuse prevention and intervention services. In FY 2005/2006 agencies reported receiving \$57,955,154 in federal funds to support services in Multnomah County, as outlined in the inventory. The majority of these funds, 72 percent, supports intensive intervention services.

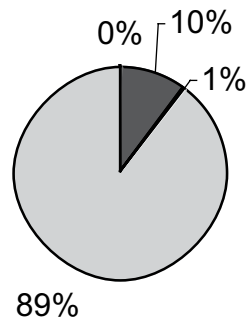
**Child Abuse Prevention and Intervention  
Federal Funding FY 2005/2006  
Total \$57,955,154**



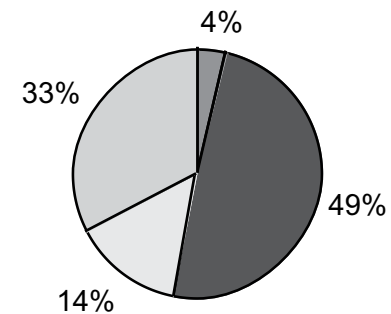
**State Government:** The State of Oregon is the second-largest funder of child abuse prevention and intervention services. In FY 2005/2006 agencies reported receiving \$42,163,285 to support services in Multnomah County. The majority of these funds, 89 percent, support intensive intervention services.

**County Government:** Multnomah County is the third largest funder of child abuse prevention and intervention services. In FY 2005/06 agencies reported receiving \$14,998,899 to support the child abuse prevention and intervention services in Multnomah County. Forty-nine percent of these county funds are directed toward risk-focused prevention and 33 percent supported intensive intervention efforts.

**Child Abuse Prevention and Intervention  
State Funding FY 2005/2006  
Total \$42,163,285**



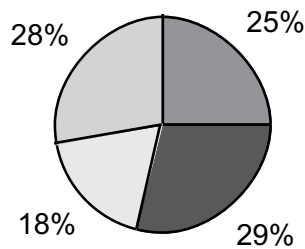
**Child Abuse Prevention and Intervention  
County FY 2005/2006  
Total \$14,998,899**



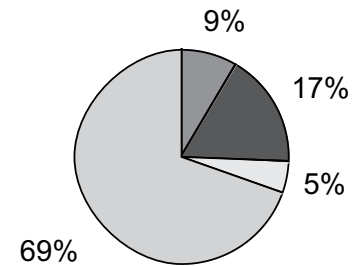
**City Government:** The City of Portland was reported to provide \$4,779,059 in FY 2005-2006 for the services included in the child abuse prevention and intervention inventory. The city provided almost equal support for each category along the continuum of child abuse prevention and intervention services (29 percent risk-focused prevention; 28 percent intensive intervention; 25 percent primary prevention and 18 percent early intervention).

**Other Funding:** In addition to the governmental funding, agencies reported receiving \$12,229,859 (note: \$2,747,808 of this is the difference between the annual program costs and the amount reported to have been provided by identified funding sources) from a variety of other sources, including foundations, private donations and fund raising efforts. Sixty-nine percent of “other” funding supports intensive intervention programs.

**Child Abuse Prevention and Intervention  
City FY 2005/2006  
Total \$4,779,059**



**Child Abuse Prevention and Intervention  
Other Funding FY 2005/2006  
Total = \$12,229,859**



## Analysis

This report does not provide a cost-benefit analysis. However, there is a growing realization that child abuse prevention is cost effective from a public policy perspective. The adage “an ounce of prevention is worth a pound of cure” aptly describes the importance and cost effectiveness of prevention and early intervention. This avoids the “pay later” approach to problems and saves the eventual costs of crime, health care and remedial education. Prevention is recognized as a long-term approach to reducing the demands on overburdened intervention and response systems.

The most cost-effective strategies for addressing child maltreatment in Multnomah County are concentrated on preventing child abuse and neglect before it occurs. Once maltreatment has occurred, the cost per individual client skyrockets. The cost of intensive intervention services for a child/family is more than 10 times the cost of primary prevention services for a child/family. The overall annual cost of intensive intervention services for Multnomah County is almost three times the cost of the two categories of prevention strategies combined (\$94,210,880 for intensive intervention as compared to \$33,086,450 for primary *and* risk-focused prevention combined).

Federal and state resources are primarily invested in intensive-intervention services and provide very little support for primary prevention. Local governments and communities are largely responsible for funding primary prevention efforts. Although the burden of prevention resources falls on local governments, they too are spending more money on intensive intervention services than on prevention.

There is an urgent need to shift the balance of resources and focus “upstream,” so children are better protected and ultimately the need for intervention is reduced. In order to reduce the incidence of child abuse and neglect, we must do all we can to prevent abuse before it ever happens. The majority of child abuse cases stem from situations and conditions that are *entirely preventable* in an engaged and supportive community.

# Child Abuse Prevention and Intervention Inventory

## PRIMARY PREVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<b>Big Brothers Big Sisters Northwest</b>	Professional supported one-on-one mentoring for children in community- or school-based settings. Services are broadly available to the general public and also target children living in foster care, children of incarcerated parents, children with two or more risk factors, children at risk of dropping out of high school, and Latino children.	Big Brothers Big Sisters Northwest	Federal: \$620,000  State: \$12,000  City: \$324,000  Private/other: \$594,000  Not specified: \$50,000	\$1,600,000	Ages 6-18: 1,018  <b>Total: 1,018</b>	Children ages 6-18 who live within Clark, Cowlitz, Multnomah, Clackamas or Washington counties and are attending school.	700
<b>Families and Feelings</b>	Helps stop violence against children and women. The program includes workshops for caregivers, teacher/school staff and children in school. The No Punching Judy® curriculum, a nine-unit domestic violence prevention curriculum, can be used to support and complement the in-class program.	Listen to Kids	State: \$50,058  County: \$7,250  Private/other: \$20,230  <i>Funding reported in excess of annual cost: \$2,774</i>	\$74,764	Ages 6-12: 1,640  <b>Total: 1,640</b>	Children in grades K-6, parents, caregivers and adults who work with children.	None

**PRIMARY PREVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Kids Can</b>	Based on the National Child Assault Prevention Project, the Kids Can™ program is designed to empower children and provide accurate information about child abuse and prevention strategies. Program includes workshops for caregivers, teachers and school staff, and children.	Listen to Kids	State: \$64,671  Private/other: \$15,500  <i>Funding reported in excess of annual cost: \$376</i>	\$79,795	Ages 0-5: 954  6-12: 3,416  <b>Total: 4,370</b>	Children in preschool and grades K-6, parents, caregivers and adults who work with children.	None
<b>Kids Preventing Child Abuse (KPCA)</b>	Gives presentations to babysitting-age youth and young parents. Goal is to increase participants' knowledge about shaken baby syndrome, domestic and dating violence, and the effects of drugs and alcohol on babies. Interactive presentations also emphasize alternative behaviors to protect children and others from harm. Also offers "Shaken Baby Syndrome 101" for medical residents and interns, students in health care careers and other medical providers; and "Train-the-Trainer" programs and materials to teach KPCA or shaken baby syndrome prevention.	CARES Northwest	Private/other: \$38,850  Not specified: \$16,929	\$55,779	Prenatal: 240  Ages 11-18: 1,827  Non-parenting adults: 10  <b>Total: 2,077</b>	The only eligibility criterion is the desire to learn how to better protect children from harm or fatality and/or the desire to teach those skills.	None

**PRIMARY PREVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Listos Para Aprender</b>	Home visit services for parents, case management, and child development and parent education. Home visits, parent group meetings, and parent/baby groups. Developmental screenings and referrals, support services, hearing, vision, health screenings, Parents as Teachers, parent education and support to first-time mothers.	Morrison Child and Family Services	City: \$371,910	\$371,910	Ages 0-5: 200  <b>Total: 200</b>	Spanish-speaking parents  City of Portland resident	None
<b>Make Parenting a Pleasure and Guiding Good Choices</b>	Strengthens families and builds children's success through a research-based approach to parent education and support. MPAP is a 13-week program for families with children from birth to age 8 and includes home visits, parent education classes, connection to community resources and advocacy.  Guiding Good Choices is a five-week course focused on drug prevention and family communication skills for parents of children ages 9-14.	Metropolitan Family Service	County: \$10,000  Private/other: \$71,000  Not specified: \$11,245	\$92,245	Parents: 224  Children: 482  <b>Total: 706</b>	Parents in regions 5 and 6 of the School Age Policy Framework.  Clients in the Community Partners Reinvestment program of VOA (young fathers and their partners).	None
<b>NAYA Middle School Program</b>	Provides case management, family support and educational advocacy within the cultural-specific model representing Native American culture and values.	Native American Youth and Family Center	County: \$305,666	\$305,666	Ages 6-18: 210  <b>Total: 210</b>	Youth ages 11-17 and families at NAYA Family Center	None

**PRIMARY PREVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Neighborhood House Parenting</b>	Provides services for families with children ages pre-natal through third grade, including interactive parent/child playgroups; culturally specific information/support groups on parenting; child development/early brain development; Parents as Teachers home visit program; health and developmental screening; parent resource lending library; toy and book lending library for children; advocacy for children entering school; parent workshops to support children's school readiness and access to community resources and services.	Neighborhood House Parenting	County: \$150,000 City: \$112,000 Private/other: \$85,000	\$347,000	Prenatal: 11 Ages 0-5: 120 <b>Total: 131</b>	Families in west and north Multnomah County with children 0-5.  African immigrants in Multnomah County with children ages 0-5.  SW CCIP network childcare providers.	22 children 14 parents 13 families
<b>Parents Anonymous of Oregon</b>	Offers free weekly parent support groups and children's program for children while parents are in the support group. Parent Support Line, available 9 a.m.-4 p.m. weekdays, provides emotional support and community resources for parents in Multnomah, Washington and Clackamas counties.	Parents Anonymous of Oregon	Federal: \$39,000 Private/other: \$70,016 Funding reported in excess of annual cost: \$16,016	\$93,000	Parents: 380 0-5: 164 6-12: 86 13-18: 6 <b>Total: 636</b>	Anyone in a parenting role is eligible to participate in Parent Support Groups.	N/A
<b>SEEDS (Supporting Early Emerging Developmental Skills)</b>	Focuses on parenting/child development support and education. Clients attend parent/child interactive groups twice monthly and group discussions based around child development and supporting parents. Services include case management through home visits, screenings for children ages birth to 5 to track development, and transportation to and from groups.	Insights Teen Parent Program	City: \$102,815 Not specified: \$14,985	\$117,800	Ages 0-5: 32 13-18 (parents): 11 19-24 (parents): 21 <b>Total: 64</b>	Teen/Young Parents ages 14-22  City of Portland resident  Primary parent of child	Children: 11 Parents: 15

**PRIMARY PREVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Shaken Baby Prevention</b>	“Have a Plan for the Period of PURPLE Crying” is a 20-minute segment of a one-hour discharge class called “Fourth Trimester Survival Skills” taught by a nurse in the Family Birth Center. It teaches parents about the normal newborn “crying curve” and explains the importance of having/sharing a plan for what to do with inconsolable crying and normal parent/caregiver frustration. Discharge class goals: promote parent/infant bonding/attachment, decrease post-partum parent stress.	Legacy Health System	Private/other: \$65,500	\$65,500	5,600 families	Any family that delivers at a Legacy hospital: Emanuel, Good Samaritan, Mt. Hood Medical Center, Meridian Park, or Salmon Creek.	None
<b>Star Shield Family Wellness Parenting and Child Development Program</b>	Parents As Teachers curriculum educates parents on child development and parenting skills. Positive Indian Parenting curriculum teaches traditional parenting skills. Social, mental health and health care services are provided by an interdisciplinary team to teen and other parents, expectant mothers, and children ages 0-6 years.	Native American Rehabilitation Association of the Northwest Inc. (NARA)	County: \$101,171 City: \$280,226	\$381,397	Prenatal: 112 Ages 0-5: 396 <b>Total: 508</b>	American Indians and Alaskan Natives  Pregnant females  Families with children ages 0-6	None

## RISK-FOCUSED PREVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<b>Child Support Enforcement Unit</b>	Provides child support services in cases where there is no current or former public assistance involved. Provides parents of minor children with legal assistance in establishing, modifying and collecting child support, and with assistance in legally establishing paternity. Services include establishment of paternity and child support, enforcement of child support orders, modification of orders, interstate establishment of child support and paternity, and acquisition and enforcement of orders for health insurance.	Multnomah County District Attorney's Office	Federal: \$2,144,730  County: \$426,074	\$2,570,804	Children served in 2005: 10,000 (approx.)  <b>Total: 10,000</b>	Cases are assigned to the program based on where the parties live if there is an existing order and if there is current or prior public assistance. If parent is a minor, a Guardian Ad Litem is established.	None
<b>Children's Relief Nursery</b>	Early intervention, rehabilitation and support services to families and children from birth through age 3 who are at high risk of abuse or neglect. Includes assessment, intake and mental health services; therapeutic classroom; home visits/case management; respite care; parent/infant classroom; Parent Connection/mentoring groups.	Children's Relief Nursery	Federal: \$96,000  State: \$200,000  City: \$249,000  Private/other: \$1,311,550  Funding reported in excess of annual cost: \$93,649	\$1,762,901	Ages 0-5: 141  <b>Total: 141</b>	Voluntary program for families with at least one child under the age of 3 who live west of Interstate 5, east of Willamette River, and south of Columbia Boulevard. Families under significant stress and in need of support, intervention and respite services; often families that live below the poverty line.	None

RISK-FOCUSED PREVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<b>Court Care</b>	Provides drop-in childcare for families using the Multnomah County Court System. Children served are ages 6 weeks to 5 years. This service protects children from the court setting and supports families through resources and referrals.	Volunteers of America Oregon	State: \$25,000 County: \$25,000 Private/other: \$110,000 Not specified: \$2,451	\$162,451	Parents: 711 Ages 0-5: 1,026 <b>Total: 1,737</b>	Families using the Multnomah County Court system for any reason other than jury duty.	None
<b>Dream Builders</b>	Provides career based information and support for teen parents. Provides guidance, resources in the community, and mentoring/training opportunities in a desired field. Panels allow parents to hear community members tell about their experiences as teen parents and how they accomplished their dreams.	Insights Teen Parent Program	Private/other: \$17,500	\$17,500	Ages 13-22: 12 <b>Total: 12</b>	Multnomah County residents.  Designed for teen parents, ages 13-22, who have already received case management and are no longer in emergency situations.	None
<b>Early Childhood Consultation and The Incredible Years</b>	Provides early childhood mental health consultation, Incredible Years parent groups and child social skills group. Evidence-based practice implementation at 10 childcare sites and three family home provider networks.	Morrison Child and Family Services	City: \$410,000	\$410,000	0-5: 700 6-18: 50 <b>Total: 750</b>	Children enrolled in participating centers.	None

## RISK-FOCUSED PREVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<b>Early Childhood Services</b>	Promote healthy pregnancy in populations at risk of not having a healthy pregnancy. Promote healthy infant/child development in populations at risk of not achieving healthy development. Community health nurses and community health workers provide home based services and classes. Services include case management, health education, developmental screening and referral.	Multnomah County Health Department	Federal: \$3,328,421  State: \$83,943  County: \$4,262,856  Private/other: \$196,243	\$7,871,463	Parents: 2,536  Ages 0-2: 2,330  Ages 3-5: 341  Ages 6-13: 191  <b>Total: 5,398</b>	Pregnant women at risk of poor pregnancy outcomes; pregnant teens; high-risk infants, children and parents. Recent immigrants who are pregnant or parenting and non-English speaking.	None
<b>Family Relief Nursery</b>	Therapeutic nursery provides respite care two days a week for children 6 weeks through 5 years; developmentally appropriate classrooms; nutritious meals and snacks; developmental screenings; home visits; transportation; and referrals to community services.  Families Together provides a 20-week interactive parenting class that covers behavior management, self-care/self-esteem, child development, and anger management; home visits; meals and snacks for children and parents while attending classes.	Volunteers of America Oregon	Federal: \$7,000  State: \$195,584  City: \$201,000  Private/other: \$57,220	\$460,804	Ages 0-5: 89  Parents: 93  <b>Total: 182</b>	Voluntary programs for families that demonstrate need via intake process and identification of factors that may increase the likelihood of abuse/neglect.	Children: 29  Parents: 21  Families: 21  Children waiting for transportation: 27

**RISK-FOCUSED PREVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Head Start/ Early Head Start</b>	Offers child development and family support services for pregnant women and families of children ages birth-5. Provides comprehensive preschool program including health screenings, child and parent activities, transportation, family style meals, opportunities to volunteer, and parent involvement activities.	Mt. Hood Community College Child Development and Family Support Programs	Federal: \$4,800,000  State: \$1,750,000  County: \$204,600  City: \$265,027	\$7,019,627	Pregnant: 26  Ages 0-5: 871  <b>Total: 897</b>	Pregnant women and children ages birth to 5 who live in mid or east Multnomah County outside the Portland Public School District. Income at or below the federal poverty guidelines or receiving Temporary Assistance for Needy Families (TANF), Social Security Insurance (SSI) or Employee Related Day Care (ERDC).	Children: 1,100
<b>Healthy Birth Initiative</b>	Addresses significant disparities in perinatal health among African American women in northeast Portland. Offers outreach and client recruitment; case management; health education; screening, counseling and referral for perinatal depression; interconceptional care and continuity of care for all participants; enabling services, including transportation and childcare. For the community, the program improves local health systems action plan for comprehensive perinatal care; maintains a community-based consortium and collaboration with state Title V and with other agencies to ensure sustainability.	Multnomah County Health Department	Federal: \$850,000  County: \$16,558  Private/other: \$240,534	\$1,107,092	Prenatal: 120  Ages 0-5: 120  <b>Total: 240</b>	Pregnant African American women and their children in North and Northeast Portland.	None

**RISK-FOCUSED PREVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Healthy Start</b>	Implements state commission's Healthy Start program. Welcome-baby visits by community health nurse and community health workers at the hospital to assess first-time parent needs. Families with needs are referred for Healthy Start home visit parent educator/case management services such as parenting education, child development, developmental screenings, home visits, referrals and support. Services provided by family support workers at community-based agencies such as IRCO and Morrison Child and Family Services.	Multnomah County Health Department  Home Visiting Services  Morrison Child and Family Services  IRCO (Immigrant and Refugee Community Organization)  Insights Teen Parenting Program	Federal: \$377,420  State: \$1,662,428  County: \$646,000	\$2,685,848	Families receiving intensive home visitation services: 776  Families screened at hospital: 1,757  <b>Total: 2,533</b>	First-time parents who meet risk criteria based on new baby questionnaire. Must enroll before child is 4 months old.	Spanish-speaking families
<b>Mentor Portland</b>	Establishes and supports meaningful mentor relationships between responsible adults and youth with multiple risk factors. Risk factors include having a parent who is incarcerated or involved with the criminal justice system, being in the foster care system, and coming from neighborhoods with high poverty and crime rates.	Boys and Girls Aid	Federal: \$150,000  City: \$108,000  Private/other: \$30,000  Not specified: \$2,000	\$290,000	Ages 6-12: 65  Ages 13-18: 35  <b>Total: 100</b>	Ages 10-14; children of prisoners; children in the foster care system; children with multiple risk factors.	None

RISK-FOCUSED PREVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<b>Nurse Family Partnership</b>	Helps women engage in good preventive health practices, including obtaining prenatal care from their healthcare providers, improving their diets, and reducing their use of cigarettes, alcohol and illegal substances. Helps parents provide responsible and competent care for their children. Helps parents develop a vision for their own futures, plan future pregnancies, continue their educations and find work.	Multnomah County Health Department	Federal: \$454,884  County: \$719,129	\$1,174,013	Prenatal: 160  Ages 0-5: 160  <b>Total: 320</b>	First-time pregnant women, before 28 weeks gestation. Low income – below 185 percent Federal Poverty Level (same as WIC guidelines).	None
<b>Passages</b>	Helps teen parents to attend and complete high school or obtain a GED. Services include case management and participation in parenting education and support groups. Works in conjunction with Steps to Success at Portland Community College.	Insights Teen Parent Program	Federal: \$236,000  Not specified: \$7,000	\$243,000	Ages 6-18: 300  <b>Total: 300</b>	Multnomah County residents ages 20 and younger; DHS client receiving TANF services.	None
<b>Portland Impact Parent Child Development Services</b>	Offers Parents as Teachers personal visits, parent-child playgroups, developmental screenings and family support services for families with children prenatal to 5 years old.	Portland Impact	County: \$210,000  City: \$148,000  Private/other: \$144,971	\$502,971	Prenatal: 5  Ages 0-5: 237  <b>Total: 242</b>	Southeast or Northeast Portland families with children prenatal to 5 years with one or more risk factors such as poverty, mental health concerns and family drug and alcohol recovery issues.	50 families

## RISK-FOCUSED PREVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<b>Safety Matters Supervised Visitation Program</b>	Provides safe, supervised child visitation and safe custodial exchange in cases where there is domestic violence. The focus is on the safety of the victim. Allows children to safely visit non-custodial parents in a child-friendly environment.	Safety Matters Supervised Visitation Program	Federal: \$105,120	\$105,120	Ages 0-6: 96 Ages 7-12: 63 Ages 13-18: 12 <b>Total: 171</b>	Domestic violence between the parents and a court order stating that they need to use the program's services. Parents must participate in mandatory intake.	25 families
<b>Women, Infants' and Children's Supplemental Nutrition Program (WIC)</b>	Builds healthier families through nutrition education, supplemental foods and community networking. Provides health and nutrition screening and education, vouchers for specific supplemental foods, and referral to health care services.	Multnomah County Health Department	Federal: \$2,250,000  County: \$868,000	\$3,118,000	Women: 9,386  Infants & Children: 21,114 <b>Total: 30,500</b>	Pregnant women, infants, and children under 5. Family income must be less than 185 percent of federal poverty level. Applicant must have a medical or nutritional concern.	None

**EARLY INTERVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Center For Family Success/ Parenting Inside Out Program</b>	Works with families involved in the criminal justice system, offering stabilization services for re-entry into the community. Provides advocacy on behalf of the children and their parents. Program includes 12-week parenting classes; coached parenting; home visits; GED Prep/Adult Basic Ed; anger management; Narcotics Anonymous; clothing closet; emergency food; employment support; cognitive re-thinking courses; Parents Anonymous support groups; referrals to mentoring programs.	Children's Justice Alliance	Federal: \$225,000  Private/other: \$320,000	\$545,000	Prenatal: 7  Ages 0-5: 75  Ages 6-12: 65  Ages 13-18: 25  Parents over 18: 297  <b>Total: 469</b>	Any parent or guardian with involvement in the criminal justice system.	Children: 108  Families: 73
<b>Domestic Violence Unit</b>	Provides prosecution and advocacy services for victims of domestic violence. A large percentage of the cases involve families with children. If the children witness domestic violence, the assault charge may be elevated to a felony. Referrals to treatment and counseling.	Multnomah County District Attorney's Office	Federal: \$35,200  County: \$1,085,390	\$1,120,590	Children served in 2005: 242 cases  <b>Total: 242</b>	Any child who is part of a family involved in a domestic violence situation.	None
<b>Early Childhood Mental Health Consultation</b>	Mental health consultation to Head Start programs and direct services to children and families. Bilingual consultant dedicated to serving Spanish-speaking families.	Morrison Child and Family Services	County: \$125,000	\$125,000	Ages 0-5: 350  <b>Total: 350</b>	Children living in poverty who are enrolled in Albina or MHCC Head Start systems.	None
<b>Early Childhood Mental Health Outpatient Services</b>	Provide outpatient mental services for young children. Services include mental health assessments, observation and consultation, home-based parenting, case management, family therapy, and skills building for families. Psychiatric evaluation and consultation are available.	Morrison Child and Family Services	Federal: \$108,000  Private/other: \$12,000	\$120,000	Ages 0-5: 42  <b>Total: 42</b>	Children ages birth-5 with a mental health diagnosis and OHP eligibility.	None

## EARLY INTERVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<b>El Programa Hispano Gang Prevention Program</b>	Provides gang prevention services by working with an intensive case management model that includes individual case management services, educational advocacy, information and referral to mental health and substance abuse treatment, employment services, mentoring and mediation services for youth engaged in conflict with and/or activities surrounding gang association and membership.	Catholic Charities, El Program Hispano	County: \$307,000 Private/other: \$76,750	\$383,750	Ages 11-18: 160  <b>Total: 160</b>	Latino youth engaged in conflict in and/or activities surrounding gang affiliation association and membership.	40
<b>Evening Breeze</b>	Parenting education and support group includes both parents and provides childcare, snacks and transportation.	Insights Teen Parent Program	Private/other: \$12,500	\$12,500	Pregnant: 10 0-5: 20 <b>Total: 30</b>	Multnomah County residents who are ages 22 and younger; pregnant or parenting teens.	None
<b>Family &amp; Community Alliance</b>	A short-term program that works as a bridge to help families connect to community resources and assist families in achieving goals they identify. Provides home-based child abuse prevention services for families at risk of abuse based on DHS Child Welfare Hotline or TANF referral. Services include: Home Visits, Skill Building, Advocacy, Information and Referral, Parenting Support, Case Management.	LifeWorks NW	Federal: \$130,000 State: \$66,250 Other: \$135,000 Not specified: \$17,815	\$349,065	Prenatal: 10 0-5: 30 6-12: 50 13-18: 40 Parents: 150 <b>Total: 280</b>	Families at risk for child abuse based on DHS referral from Child Welfare Hotline or Self-Sufficiency (TANF); must have children living in the home; must live in Multnomah County.	None

## EARLY INTERVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<b>HAPPY (Housing Assistance for Pregnant and Parenting Youth)</b>	Provides short-term housing assistance for teen parents. Serves couples and single parents who are only in need of temporary, stabilizing housing assistance. Participants find their own housing and are financially assisted to establish themselves. Turnaround and enrollment are short.	Insights Teen Parent Program	City: \$48,500	\$48,500	Ages 17-22: 30  <b>Total: 30</b>	Parenting or pregnant between ages of 17-22 who are homeless or at risk of homelessness, do not currently live in permanent assisted housing and plan to reside in Portland. Income at or below 20 percent of area median income.	None
<b>Harry's Mother</b>	Provides short-term emergency shelter for children and youth who have run away or are at risk of becoming homeless. Operates the 24-hour Youth and Family Help Line, designed to provide immediate access to emergency services and shelter. Provides cost-free case management, family counseling, referral/service linkage, emergency shelter, crisis counseling and client transportation.	Janus Youth Programs	Federal: \$98,704  State: \$28,800  County: \$422,877	\$550,381	Ages 6-12: 12  Ages 13-17: 416  Families: 45  <b>Total: 473</b>	Voluntary program for ages 9-17; parental permission needed for shelter services. Youths may not have a warrant for their arrests; runaway reports are OK.	None
<b>HomeSafe</b>	Offers housing, case management, and other support services to homeless pregnant or parenting teens to obtain long-term, safe housing and achieve self-sufficiency. Locates apartments for participants and provides partial rent subsidies for an average of one year (maximum two years). Participants contribute a portion of the rent and meet with case manager weekly to receive assistance obtaining services to enhance self-sufficiency.	Insights Teen Parent Program	Federal: \$285,000  Not specified: \$12,000	\$297,000	Families: 40  <b>Total: 40</b>	Pregnant or parenting Multnomah County residents ages 16-19 who are homeless or living in temporary shelter care and are enrolled in school or employed.	None

**EARLY INTERVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>NAYA Gang Prevention Program</b>	Provides gang prevention services by working with an intensive case management model that includes individual case management services, educational advocacy, information and referral to mental health and substance abuse treatment, employment services, mentoring and mediation services for youth engaged in conflict with and/or activities surrounding gang association and membership.	Native American Youth and Family Center	County: \$69,453	\$69,453	Ages 6-18: 40  <b>Total: 40</b>	Native American youth engaged in conflict in and/or activities surrounding gang affiliation association and membership.	20
<b>Portland Children Intervention Project (PChIP)</b>	Works to reduce the risk of child abuse in families leaving domestic violence situations. Individual, in-home family work concerning parenting and related issues for the caregiver and children regarding the impact of the abuse; parent education and support groups for non-residential program participants, domestic violence emergency shelters and transitional housing residents; groups for children exposed to domestic violence; assessment of basic needs with information and referral; consultation and training for community partners regarding the impact of domestic violence on children and their mothers.	Catholic Charities-El Programa Hispano  Partners: Listen to Kids and Salvation Army West Women's and Children's Shelter	City: \$52,624  Private/other: \$37,376	\$90,000	Ages 0-5: 37  Ages 6-12: 20  Ages 13-18: 3  <b>Total: 60</b>	Services free to caregivers and children ages 0-12 who are Portland residents or referred by Gresham DHS Child Welfare. May be homeless, in domestic violence shelter, transitional housing program, or private residence. Abuser must not be living in current residence of family receiving services.	None

EARLY INTERVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<b>Parent-Child Involvement Project (PChIP)</b>	Works to reduce the risk of child abuse in families leaving domestic violence situations. Individual, in-home family work concerning parenting and related issues for the caregiver and children regarding the impact of the abuse; parent education and support groups, domestic violence emergency shelters and transitional housing residents; groups for children exposed to domestic violence; assessment of basic needs with information and referral; consultation and training for community partners regarding the impact of domestic violence on children and their mothers.	Listen to Kids  Partners: Catholic Charities – El Programa Hispano and Salvation Army West Women’s and Children’s Shelter	Federal: \$8,330  State: \$3,020  City: \$68,642  Private/other: \$22,000  Funding reported in excess of annual cost: \$1,471	\$100,521	Ages 0-5: 84  Ages 6-12: 38  <b>Total: 122</b>	Services free to caregivers and children ages 0-12 who are Portland residents or referred by Gresham DHS Child Welfare. May be homeless, in domestic violence shelter, transitional housing program, or private residence. Abuser must not be living in current residence of family receiving services.	None
<b>Parent-Child Involvement Project (PChIP)</b>	Facilitates parent education groups for domestic violence emergency shelters and transitional housing residents where the agency is one of the partnering agencies; assesses basic needs and provides information and referral; provides individual, in-home family work concerning parenting and related issues for the mother and children; co-advocates with partnering agencies for the family in dimensions such as housing, TANF benefits and school; co-facilitates culturally specific group for children exposed to domestic violence; consults with and trains staff of partnering agencies by request regarding services to children and mothers exposed to domestic violence.	Salvation Army West Women’s and Children’s Shelter  Partners: Catholic Charities – El Programa Hispano and Listen to Kids	City: \$93,654	\$93,654	Prenatal-5: 137  Ages 6-12: 83  Ages 13-18: 22  Primary caregivers: 139  <b>Total: 381</b>	Families with at least one child 0-12 who have been exposed to domestic violence and are associated with a partnering agency, including Bradley-Angle House, YWCA Yolanda House, Salvation Army West Women’s and Children’s Shelter, Volunteers of America Home Free, IRCO, ROSS, NAYA, and Raphael House.	None

## EARLY INTERVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<b>Teen Parent Services</b>	Enables teen parents to stay in or return to school to get a diploma or GED and helps them develop parenting and other life skills. Provides onsite childcare at two high schools and two offsite centers, transportation, parenting education, case management, home instruction, counseling, advocacy, community service referral, outreach and triage.	Portland Public Schools	State: \$20,000 County: \$87,000 City: \$474,000	\$581,000	Pregnant: 170  Ages 0-5: 30  <b>Total: 200</b>	Pregnant and parenting teen mothers and fathers.	None
<b>VOA Home Free Children's Services</b>	Provides individual and group information, safety planning and emotional support for children exposed to batterers. Information is developmentally appropriate for infants through teens. Parenting and domestic violence support group for women and access to a full range of survivors' advocacy services. Presentations to agencies and community groups regarding the effects of domestic violence on children.	Volunteers of America of Oregon	Federal: \$27,910  State: \$101,223  County: \$52,300  Private/other: \$46,793	\$228,226	Ages 0-5: 66  Ages 6-12: 49  Ages 13-18: 50  <b>Total: 165</b>	Survivors of domestic violence referred by agencies or self-referred.	None

INTENSIVE INTERVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<p><b>CARES Northwest</b></p>	<p>Collaborative, community-based non-profit medical program is dedicated to the assessment, treatment and prevention of child abuse. As the only child abuse medical program serving Multnomah and Washington counties, CARES Northwest pairs physicians and nurse practitioners with child interviewers in a medical setting to provide child abuse evaluations. Coordinates experts in medicine, mental health, child protective services and law enforcement agencies to ensure that children obtain professional services in one child-friendly location. In addition to services provided at the medical clinic, CARES Northwest physicians and social workers also respond to child abuse cases admitted to Emanuel Children's Hospital and presenting at Emanuel Emergency Department.</p>	<p>CARES Northwest</p>	<p>Federal: \$0  State: \$648,761  Private/other: \$1,758,150</p>	<p>\$2,406,911</p>	<p>Evaluated at CARES: Ages 0-5: 478 6-12: 663 13-18: 234 18+: 8  Triage and referral services: 1,295  In-patient consults at Emanuel Hospital: 75  Emanuel Emergency Department: 206  <b>Total: 2,959</b></p>	<p>Children birth to age 18 in Multnomah and Washington counties for whom there are concerns of child abuse or neglect.</p>	<p>None</p>
<p><b>CARES Family Support Program</b></p>	<p>Provides crisis intervention to help stabilize families, refers to mental health providers, assists families in accessing community resources, provides parent support and family education and individual counseling for the child victim. Large network of counseling resources is available based on the family's financial resources, age of the child, and therapeutic needs of the child and family.</p>	<p>Mental Health and Addiction Services Division</p>	<p>County: \$490,619</p>	<p>\$490,619</p>	<p>Children and families: 1,000  <b>Total: 1,000</b></p>	<p>Children ages 0-18 who are victims of abuse.</p>	<p>None</p>

INTENSIVE INTERVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<p><b>CAT Team</b></p>	<p>Investigates serious child abuse cases. The team is supervised by two Portland police sergeants and consists of 10 Portland detectives, two Gresham detectives, and one MCSO detective. PPB officer works investigations at the CARES facility. The team also assists outside agencies with child abuse investigations if assistance is requested.</p>	<p>Multnomah County Child Abuse Team</p>	<p>City: \$1,334,661</p> <p>Private/other: \$335,000</p> <p>Funding reported in excess of annual cost: \$69,661</p>	<p>\$1,600,000</p>	<p>Approximately 600 felony cases</p> <p><b>Total: about 600</b></p>	<p>All parties involved in child abuse incidents and cases still under the statute of limitations (reports of child abuse prior to the victim turning 30 years old).</p>	<p>None</p>
<p><b>Court Appointed Special Advocates (CASA)</b></p>	<p>Trains and recruits citizen volunteers to advocate for children who have been abused and neglected. The purpose is to secure a safe and permanent family for each child as quickly as possible.</p>	<p>CASA</p>	<p>State: \$173,321</p> <p>Private/other: \$959,908</p> <p>Funding reported in excess of annual cost: \$90,759</p>	<p>\$1,042,470</p>	<p>Ages 0-18: 777</p> <p><b>Total: 777</b></p>	<p>Abused and neglected children under the protection of Juvenile Dependency Courts.</p>	<p>80 children  40 families</p>

INTENSIVE INTERVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<b>Child Welfare</b>	Child abuse prevention, child protective services, family assessments, family decision meetings, mental health assessments referral, information and referral, foster care, respite care, contracted services in-home.	Department of Human Services	Federal: \$40,900,191 State: \$29,527,966 Other: \$ 2,332,316 Not specified: \$1,984,243	\$74,744,716	Total calls to the Child Welfare Hotline: 15,728  Referrals assigned for assessment: 6,599  Average <u>daily</u> population (children in foster care): 1,595  <b>Total: 23,922</b>	Clients with abuse and neglect concerns or safety threats.	None
<b>Christie School (formerly the Multnomah County Children's Receiving Center)</b>	Short-term emergency shelter for up to 18 children removed from their homes due to abuse or neglect. Children receive shelter, food, clothing, care and other professional services. Children in need of placement planning after disruption of their prior foster or relative care receive assessment/ evaluation and placement planning.	Department of County Human Services	State: \$93,322_	\$93,322	Ages 0-4: 78  Ages 5-11: 206  Ages 12-17: 36  <b>Total: 320</b>	Children 4-11 (and often their siblings) in legal custody of Oregon DHS due to suspected or founded child abuse, neglect, or other reasons requiring state custody.	None

**INTENSIVE INTERVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Christina Project</b>	Provides support and resources to teen parents and their children currently in a relationship they do not feel safe in, due to physical and/or emotional abuse. Case management is provided to teen mothers to find services creating self-sufficiency in a safer living environment. A weekly support group with childcare and transportation is available.	Insights Teen Parent Program	Federal: \$40,000  Private/other: \$12,500	\$52,500	Pregnant: 5  Ages 0-5: 35  <b>Total: 40</b>	Self-referred Multnomah County residents ages 12-19.	None
<b>Early Childhood Mental Health Outpatient Services</b>	Provides specialized outpatient mental services for young children, including mental health assessments, observation and consultation, home-based parenting, case management, family therapy, and skills building for families. Psychiatric evaluation and consultation are available.	Morrison Child and Family Services	Federal: \$72,000  Private/other: \$8,000	\$80,000	Ages 0-5: 28  <b>Total: 28</b>	Children ages 0-5 with a mental health diagnosis and OHP eligibility.	None
<b>Enhanced Case Management</b>	Provides intensive, therapeutic case management to young parents who have been identified as at risk of abusing their children or have survived abuse or violence themselves. Aims to strengthen family systems to create safe and stable home environments, prevent future violence and reduce the risk of child abuse. Services are typically received for up to 18 months. Spanish-speaking services are available.	Insights Teen Parent Program	Private/other: \$12,000	\$12,000	Families: 8  <b>Total: 8</b>	Multnomah County residents who are ages 24 and younger. "At risk" teen parents.	None

**INTENSIVE INTERVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Family Involvement Team (FIT)</b>	Multi-disciplinary team provides alcohol and drug treatment services to parents involved in dependency (child abuse and neglect) cases. FIT helps parents get to treatment quickly so they may be reunified with their children.	Multnomah County Family Court, DHS Child Welfare, VOA, NARA, CODA, Letty Owings Center, Project Network, Lifeworks NW, and Cascadia.	Federal and state: \$311,418	\$311,418	Parents screened: 214  <b>Total: 214</b>	Court-involved child welfare clients who present at the initial hearing with a substance abuse issue.	None
<b>Hand in Hand Day Treatment</b>	Serves preschool- age children who are experiencing severe emotional and behavioral problems due to abuse and neglect. Offers daily classroom academic and behavioral support, provides psychiatric medication management, and family, individual and group therapy. Academic services are provided by PPS teachers.	Morrison Child and Family Services	Federal: \$466,026  State: \$310,684	\$776,710	Ages 3-6: 26  Ages 6-7: 6  <b>Total: 32</b>	3- to 6-year-old severely abused children and their families.	None

**INTENSIVE INTERVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Intensive Home Services and Family Builders</b>	Intensive Home Services provides a two-to three-month in-home intervention that focuses on the safety of families and children. Forty hours of face-to-face or phone contact with the family. Family Builders teaches parenting skills, emotional management, daily living skills and skills building, child development, domestic violence, child abuse and neglect issues. Master-level mental health professionals help with family dynamic issues through counseling and by making referrals, finding resources, helping navigate through systems and advocating for clients.	Options Counseling	State: \$296,820	\$296,820	Families: 150  <b>Total: 150</b>	Voluntary or court-mandated for clients who have come to the attention of the state for child abuse and neglect. Must have an open case with DHS-Child Welfare and have at least one child age 0-17 in the home or returning to the home within one week of services starting.	Families: 23
<b>Intensive Treatment Program</b>	Provides stabilization, adaptive skills development, individual and group therapy, and transitional placement services for dually diagnosed, mildly mentally handicapped and severely emotionally disturbed boys.	Kerr Youth and Family Services	State: Medicaid OHP \$1,018,955  Not specified: \$92,346	\$1,111,301	Ages 13-18: 17  <b>Total: 17</b>	Males between the ages of 12-17 with a DSM-IV axis diagnosis identified as developmentally disabled as defined by the current ODDS Administrative Rule and with an IQ of 50 or above.	Children: 8
<b>Juvenile Dependency</b>	Unit litigates child protection cases not otherwise handled by the MDT unit (and also works on juvenile delinquency cases). Collaborates with DHS, law enforcement and the county juvenile department, among others.	Multnomah County District Attorney's Office	County: \$617,000	\$617,000	Children: 882  <b>Total: 882</b>	Children under 18 who come to the attention of the court as being in need of protection.	None

INTENSIVE INTERVENTION

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	NUMBER SERVED	ELIGIBILITY CRITERIA	WAITING LIST
<b>Kinship House</b>	Provides comprehensive mental health services including individual, group and family therapy for children awaiting a permanent home. Provides specialized education and training for professionals who work with children awaiting a permanent home.	Kinship House Inc.	Federal: \$64,800 State: \$20,558 Private/other: \$17,980 Not specified: \$305,362	\$408,700	Ages 0-5: 85 Ages 6-12: 153 Ages 13-18: 41 Age 19: 3 <b>Total: 282</b>	Infants to age 18	None
<b>Mental Health/ Developmental Disabilities Group Homes</b>	Provide living skills training, mental health services as clinically indicated, and stable, community-based placements for children dually diagnosed with developmental and mental health challenges.	Kerr Youth and Family Services	State: \$1,532,201 Not specified: \$23,719	\$1,555,920	Ages 13-16: 16 <b>Total: 16</b>	Ages 12-17 referred by Community Mental Health Program and determined developmentally disabled by the Oregon Mental Health and Developmental Disability Services Division.	Children: 2
<b>Mental Health/ Developmental Disabilities Proctor Care</b>	Provides longer-term placement for developmentally challenged children less likely to be reunified with their birth families. Offers case management, skills training, and extensive foster parent support to serve clients dually diagnosed with serious developmental and mental health challenges.	Kerr Youth and Family Services	State: \$1,011,845 Funding reported in excess of annual cost: \$156,848	\$844,997	Ages 0-5: 3 Ages 6-18: 21 <b>Total: 24</b>	Children ages birth to 18 who do not meet the criteria for admission to an acute care medical facility. Proctor Care is the least restrictive environment in which child can be maintained.	Children: 6

**INTENSIVE INTERVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Multi-Disciplinary Team Prosecution Unit</b>	Provides prosecution services in felony child abuse cases. Dependency cases associated with the criminal cases are handled by this unit. Dependency cases are child protection cases filed in the juvenile court where the child is in need of protection from the court due to abuse or neglect. Unit D in the District Attorney's office also handles non-familial child sex abuse cases as a small portion of its overall caseload. Misdemeanor cases are handled either at the misdemeanor trial unit or the domestic violence unit.	Multnomah County District Attorney's Office	County: \$743,804	\$743,804	Dependency: 384 Criminal cases: 129  <b>Total: 513</b>	Child abuse cases involving children under age 18.	None
<b>Multi-systemic Therapy (MST)</b>	Intensive family- and community-based treatment addresses the multiple factors known to be related to teenage delinquency. Promotes behavior change in the youth's natural environment, using the strengths of family, peers, school and neighborhood to facilitate change.	Options Counseling	County: \$360,000	\$360,000	Families: 18  <b>Total: 18</b>	Children ages 10-17 with Axis I or Axis II disorders who are returning home or at risk for residential placement or hospitalization. Referred by county.	None
<b>NAYA Foster Care Program</b>	Provides individual outreach to DHS and tribal social workers, information and referral, individual advocacy for foster youth, foster families and birth family members. Diligent work surrounding the Indian Child Welfare Act involves connecting with extended family members and tribal communities. Provides monthly foster parent network meetings.	NAYA Family Center	Private/other: \$11,000	\$11,000	Ages 0-5: 15 Ages 6-12: 60 Ages 13-18: 25  <b>Total: 100</b>	Native American youth in foster care system, and foster families caring for Native American youth in foster care.	60 children

**INTENSIVE INTERVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Parent Mentor Project</b>	Supports parents in engaging in treatment, visiting them while in treatment, transporting them for visits with their children and ensuring they complete all treatment requirements, develop relapse prevention plans and are reunited with their children. Goal is to reduce the length of time children spend in foster care.	Parents Anonymous	State: \$134,000	\$134,000	Parents: 40 <b>Total: 40</b>	Women identified through Juvenile Court and DHS involvement because of addiction issues and who have had their children placed in protective custody.	
<b>Parenting Program</b>	Provides a combination of group and individual services to improve the capabilities of parents to provide safe, nurturing and developmentally appropriate environments for their children. Parents attend the parenting group once a week for two hours for 20 weeks. Goals are to increase the safety of children in their homes; prevent children at risk of placement from being removed from their parental homes; facilitate children's safe returns to their homes after an out-of-home placement.	Volunteers of America Oregon	State: \$343,836  Not specified: \$6,859	\$350,695	Parents: 491 <b>Total: 491</b>	DHS child welfare clients referred by their DHS child welfare caseworkers.	Parents: 18
<b>Pathways –Independent Living Program</b>	Culturally specific independent living provider for the state of Oregon–DHS/ Child Welfare. Serves 20 Native American youth in both the DHS foster care and tribal foster care systems. Provides case management services for individuals between the ages of 14-21 years. Provides information, referrals, activities and interventions with youth, foster families, birth family members, case workers and the tribal communities.	NAYA Family Center	State: \$47,817	\$47,817	Ages 13-18: 20  Ages 19-21: 3 <b>Total: 23</b>	Native Americans between the ages of 14-21 in the DHS or tribal foster care systems.	30 children

**INTENSIVE INTERVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Psychiatric Day Treatment</b>	Provides evaluation, treatment and care coordination integrated into home and community systems to support reintegration with local school districts.	Kerr Youth and Family Services	State: \$23,491  County: \$272,209  Private/other: \$175,149  Not specified: \$139,086	\$609,935	Ages 6-18: 43  <b>Total: 43</b>	Youth between 6 and 17 with a DSM-IV Axis I diagnosis. Families must live in the greater Portland metro area.	Children: 3
<b>Psychiatric Residential Treatment</b>	Provides intensive individual, family group and milieu therapy to promote the emotional stability, new behaviors and social skills needed to function successfully in the community.	Kerr Youth and Family Services	State: \$407,521  County: \$774,371  Private/other: \$79,330  Not specified: \$61,768	\$1,322,990	Ages 6-18: 46  <b>Total: 46</b>	Youths between the ages of 6-17 with a DSM-IV Axis I diagnosis and who require residential treatment.	Children: 2
<b>Subacute Services</b>	Provides secure alternative to hospitalization and step-down services for children and youth requiring 24-hour supervision, psychiatric evaluation and stabilization.	Kerr Youth and Family Services	State: \$476,255  County: \$1,634,943  Private/other: \$522,261	\$2,633,459	Ages 0-5: 5  Ages 6-18: 363  <b>Total: 368</b>	Children between the ages of 5-7 with a DSM-IV Axis I diagnosis and who require a secure sub-acute setting.	None

**INTENSIVE INTERVENTION**

<b>PROGRAM</b>	<b>DESCRIPTION</b>	<b>AGENCY PROVIDING SERVICE</b>	<b>FUNDING SOURCES</b>	<b>ANNUAL COST</b>	<b>NUMBER SERVED</b>	<b>ELIGIBILITY CRITERIA</b>	<b>WAITING LIST</b>
<b>Termination of Parental Rights</b>	Staffing and consulting on cases with the state Department of Human Services, filing petitions seeking termination and appearing in court on all matters related to the case. Attorneys may also handle dependencies upon special request by the agency.	Multnomah County District Attorney's Office	State: \$928,292  County: \$4,629	\$932,921	Children: 130  <b>Total: 130</b>	Children under age 18.	None
<b>Treatment Foster Care</b>	Provides case management, behavioral skills training, and individual and family therapy as clinically indicated to meet the short-term needs of clients awaiting family reunification, residential placement or other permanent relocation.	Kerr Youth and Family Services	State: \$638,663  Funding reported in excess of annual cost: \$19,808	\$618,855	Ages 6-18: 31  <b>Total: 31</b>	Youth ages 5-18 for whom BRS level foster care is the least restrictive setting in which they can be maintained. Clients do not meet criteria for admission to an acute or sub acute psychiatric care facility.	Children: 6

**SYSTEM COORDINATION EFFORTS**

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	FOCUS
<b>Children's Justice Alliance</b>	CJA is the organizing entity for a variety of partner programs providing services for children of individuals involved in the criminal justice system, and their families and caregivers. In addition to coordinating comprehensive services for children and family members, CJA provides policy leadership, makes research-based programming recommendations, offers technical assistance and training for partners, and raises funds to provide financial support for services and research. CJA does not offer direct services.	Children's Justice Alliance			Risk-focused Prevention
<b>Children's Relief Nursery 0-3 SAMHSA Trauma Grant</b>	Implements an early childhood community treatment center for children ages 0 through 3 years. Goals are to bring together community leaders, service providers and child advocates to work collaboratively to promote effective trauma practices, and share resources for identifying and reaching children who may have been exposed to traumatic events.	Children's Relief Nursery	Federal: \$315,000	\$315,000	Risk-focused Prevention
<b>Child, Youth and Family Network (CYFN)</b>	<p>The CYFN is a committee of the Multnomah Commission on Children, Families and Community. The CCFC provides staff support for the Network.</p> <p>The CYFN works to promote comprehensive, collaborative and coordinated prevention and intervention services and supports to improve the health and well-being of children, youth and families, particularly those at risk of abuse or neglect.</p>	<p>Parents</p> <p>Community-based and government agencies</p> <p>Commission on Children, Families and Community</p>			Primary Prevention and Risk-focused Prevention

**SYSTEM COORDINATION EFFORTS**

PROGRAM	DESCRIPTION	AGENCY PROVIDING SERVICE	FUNDING SOURCES	ANNUAL COST	FOCUS
<p><b>Multnomah County Multi-disciplinary Child Abuse Team (MDT)</b></p>	<p>The District Attorney chairs and manages the statutorily mandated MDT, which develops protocols that set forth each member agency’s responsibilities and the process by which the team will collaborate to intervene in child abuse and neglect cases.</p> <p>The team receives Child Abuse Multidisciplinary Intervention funds from the state biennially to further its intervention plan.</p>	<p>District Attorney’s office</p> <p>All police agencies in the county</p> <p>Oregon State Department of Human Services</p> <p>County Health Department</p> <p>Multnomah ESD</p> <p>CARES NW,</p> <p>County Juvenile Department (DCJ – Juvenile)</p> <p>Department of County Human Services</p>	<p>State: \$642,000</p>	<p>\$642,000</p>	<p>Intensive Intervention</p>

# Child Abuse Prevention and Intervention Directory of Services & Contacts

## PRIMARY PREVENTION PROGRAMS *(Listed alphabetically)*

### **Big Brothers Big Sisters Northwest**

Patricia Edge, LCSW  
1827 NE 44<sup>th</sup>, Suite 100  
Portland, OR 97213  
503-249-4859  
[patricia.edge@bbbs.org](mailto:patricia.edge@bbbs.org)

### **Families & Feelings™**

Tasha Miniszewski  
Listen To Kids  
5135 NW St. Helens Rd.  
Portland, OR 97210  
503-280-1388  
[tminiszewski@listentokids.org](mailto:tminiszewski@listentokids.org)

### **Kids Can™**

Tasha Miniszewski  
Listen To Kids  
5135 NW St. Helens Rd.  
Portland, OR 97210  
503-280-1388  
[tminiszewski@listentokids.org](mailto:tminiszewski@listentokids.org)

### **Kids Preventing Child Abuse (KPCA)**

Debby Kernan  
CARES Northwest  
2800 N. Vancouver Ave., Suite 201  
Portland, OR 97227  
503-276-9000  
[dkernan@lhs.org](mailto:dkernan@lhs.org) or [kdowling@lhs.org](mailto:kdowling@lhs.org)

### **Listos Para Aprender**

Monica Ford  
Morrison Child and Family Services  
11456 NE Knott, Portland, OR 97220  
503-256-3040  
[monica.ford@morrisonkids.org](mailto:monica.ford@morrisonkids.org)

### **Make Parenting a Pleasure and Guiding Good Choices**

Amy Corbett, Metropolitan Family Service  
1808 SE Belmont St.  
Portland, OR 97214  
503-232-0007x160  
[amyc@metfamily.org](mailto:amyc@metfamily.org)

### **NAYA Middle School Program**

Korinna Wolfe  
NAYA Family Center  
5135 NE Columbia Blvd.  
Portland OR 97218  
503-288-8177  
[korinnaw@nayapdx.org](mailto:korinnaw@nayapdx.org)

### **Neighborhood House Parenting**

Meera Batra  
Neighborhood House  
10531 SW Capitol Hwy., Markham School  
Room 226, Portland, OR  
971-244-0148  
[mbatra@nhweb.org](mailto:mbatra@nhweb.org)

### **Parents Anonymous of Oregon**

Ruth Taylor  
Morrison Child and Family Services  
1818 SE Division St.  
Portland, OR 97202  
[ruth.taylor@morrisonkids.org](mailto:ruth.taylor@morrisonkids.org)

### **SEEDS (Supporting Early Emerging Developmental Skills)**

Aurora Cleary-Lachik  
Insights Teen Program  
2020 SE Powell Blvd., Portland, OR 97202  
503-239-6996x234  
[auroracl@insightstpp.org](mailto:auroracl@insightstpp.org)

### **Shaken Baby Prevention**

Sandy Nipper, Legacy Health System  
Legacy Emanuel Children's Hospital  
2801 N Gantenbein Ave., Room 2077  
Portland, OR 97227  
503-413-4443  
[snipper@lhs.org](mailto:snipper@lhs.org)

### **Star Shield Family Wellness**

Joan Bacchus, Native American  
Rehabilitation Association  
1776 SW Madison St.  
Portland, OR 97205  
503-224-1044x255  
[jbacchus@naranorthwest.org](mailto:jbacchus@naranorthwest.org)

## RISK-FOCUSED PREVENTION PROGRAMS

*(Listed alphabetically)*

### **Child Support Enforcement Unit**

Betty Yada, Multnomah County District  
Attorney's Office  
600 County Courthouse, 1021 SW 4<sup>th</sup> Ave.  
Portland, OR 97204  
503-988-3150  
[betty.yada@mcda.us](mailto:betty.yada@mcda.us)

### **Children's Relief Nursery**

Leslie Brown  
8425 N Lombard St.  
Portland, OR 97203  
503-595-4507  
[lesliebrown@crn4kids.org](mailto:lesliebrown@crn4kids.org)

### **Court Care**

Melissa Gritz, Volunteers of America  
3910 SE Start St.  
Portland, OR 97214  
503-988-4334  
[mgritz@voaor.org](mailto:mgritz@voaor.org)

### **Dream Builders**

Elizabeth Oates  
Insights Teen Program  
2020 SE Powell Blvd.  
Portland, OR 97202  
503-239-6996x230  
[eoates@insightstpp.org](mailto:eoates@insightstpp.org)

### **Early Childhood Consultation & The Incredible Years**

Kathryn Falkenstern  
Morrison Child & Family Services  
4790 N. Lombard, Portland, OR 97203  
503-286-3871  
[Kathryn.falkenstern@morrisonkids.org](mailto:Kathryn.falkenstern@morrisonkids.org)

### **Early Childhood Services**

For referral, contact Referral Intake at  
503-988-3520  
Jan Wallinder  
Multnomah County Health Department  
426 SW Stark St, 8<sup>th</sup> Fl,  
Portland, OR 97204  
503-988-3674 x28844  
[janet.l.wallinder@co.multnomah.or.us](mailto:janet.l.wallinder@co.multnomah.or.us)

### **Family Relief Nursery**

Lorraine Barton  
Volunteers of America, OR  
3910 SE Stark St., Portland, OR 97214  
503-235-8655  
[lbarton@voaor.org](mailto:lbarton@voaor.org)

### **Head Start/Early Head Start**

Shelley Yoder  
Mt. Hood Community College  
10100 NE Prescott Ave.  
Portland, OR 97220  
503-491-6120  
[shelley.yoder@mhcc.edu](mailto:shelley.yoder@mhcc.edu)

### **Healthy Birth Initiative**

Tameka Brazile  
Multnomah Co. Health Dept.  
5329 NE MLK Jr. Blvd.  
Portland, OR 97211  
503-988-3387 x22242  
[Tameka.brazile@co.multnomah.or.us](mailto:Tameka.brazile@co.multnomah.or.us)

### **Healthy Start**

Diane Ruminski  
Multnomah County Health Department  
5329 NE MLK Jr. Blvd.  
Portland, OR 97211  
503-988-5055 x29770  
[diane.t.ruminski@co.multnomah.or.us](mailto:diane.t.ruminski@co.multnomah.or.us)

### **Mentor Portland**

Sue Wallace, The Boys and Girls Aid  
018 SW Boundary Court  
Portland, OR 97239  
503-542-2703  
[swallace@boysandgirlsaid.org](mailto:swallace@boysandgirlsaid.org)

### **Nurse Family Partnership**

For referral, contact Referral Intake at  
503-988-3520  
Jan Wallinder  
Multnomah County Health Department  
426 SW Stark St, 8<sup>th</sup> Fl,  
Portland, OR 97204  
503-988-3674 x28844  
[janet.l.wallinder@co.multnomah.or.us](mailto:janet.l.wallinder@co.multnomah.or.us)

## **RISK-FOCUSED PREVENTION PROGRAMS** *(continued)*

### **Passages**

Heather Martinez  
Insights Teen Program  
2020 SE Powell Blvd.  
Portland, OR 97202  
971-673-2651

### **Portland Impact Parent Child Development Services**

Cheryl Trosper  
Portland Impact  
7211 SE 62<sup>nd</sup> Ave.  
Portland, OR 97206  
503-988-6127 x234  
[ctrosper@portlandimpact.org](mailto:ctrosper@portlandimpact.org)

### **Safety Matters Visitation Program**

Sara Clark  
Multnomah County  
10317 E. Burnside, Portland, OR 97216  
503-988-4763  
[safety.matters@co.multnomah.or.us](mailto:safety.matters@co.multnomah.or.us)

### **WIC**

Joy McNeal  
Multnomah County Health Department  
12710 SE Division  
Portland, OR 97236  
503-988-3674x24647  
[joy.k.mcneal@co.multnomah.or.us](mailto:joy.k.mcneal@co.multnomah.or.us)

## **EARLY INTERVENTION PROGRAMS**

*(Listed alphabetically)*

### **Center for Family Success/ Parenting Inside Out**

Glenna Hayes  
Children's Justice Alliance  
8010 N Charleston Ave.  
Portland, OR 97203  
503-286-0600  
[glennahayes@childrensjusticealliance.org](mailto:glennahayes@childrensjusticealliance.org)

### **Domestic Violence Unit**

Amy Holmes-Hehn  
Multnomah Co. District Attorney's Office  
600 County Courthouse, 1021 SW 4<sup>th</sup> Ave.  
Portland, OR 97204  
503-988-3941  
[amy.hehn@mcda.us](mailto:amy.hehn@mcda.us)

### **Early Childhood Mental Health Consultation**

Margie MacLeod  
Morrison Child and Family Services  
4945 Ne 7<sup>th</sup>, Portland, OR 97211  
503-493-2656  
[Margaret.macleod@morrisonkids.org](mailto:Margaret.macleod@morrisonkids.org)

### **Early Childhood Mental Health Outpatient Services**

Kathryn Falkenstern  
Morrison Child and Family Services  
4790 N Lombard, Portland, OR 97203  
503-286-3871  
[Kathryn.falkenstern@morrisonkids.org](mailto:Kathryn.falkenstern@morrisonkids.org)

### **El Programa Hispano Gang Prevention Program**

Gloria Wiggins  
Catholic Charities  
451 NW First St.  
Gresham OR 97030  
503-669-8350 x 228  
[gwiggins@catholiccharitiesoregon.org](mailto:gwiggins@catholiccharitiesoregon.org)

### **In Portland:**

Gloria Wiggins  
Catholic Charities  
901 SE Oak St Suite 106  
Portland OR 97214  
503-236-9670

### **Evening Breeze**

Elizabeth Oates  
Insights Teen Parent Program  
2020 SE Powell Blvd.  
Portland, OR 97202  
503-239-6996x230  
[eoates@insightstpp.org](mailto:eoates@insightstpp.org)

### **Family and Community Alliance**

Rose Baker  
LifeWorks Northwest  
4531 SE Belmont, Ste 300  
Portland, OR 97215  
503-234-3400  
[roseb@lifeworksnw.org](mailto:roseb@lifeworksnw.org)

## EARLY INTERVENTION PROGRAMS

(continued)

### **HAPPY (Housing Assistance for Pregnant and Parenting Youth)**

Tiffany Tucker  
Insights Teen Parent Program  
2020 SE Powell Blvd  
Portland, OR 97202  
503-239-6996 x231  
[ttucker@insightstpp.org](mailto:ttucker@insightstpp.org)

### **Harry's Mother Runaway Youth Services**

Leslie Jones  
Janus Youth Programs  
738 NE Davis, Portland, OR 97232  
503-542-4551  
[ljones@janusyouth.org](mailto:ljones@janusyouth.org)

### **Home Safe**

Tiffany Tucker  
Insights Teen Parent Program  
2020 SE Powell Blvd.  
Portland, OR 97202  
503-239-6996 x231  
[ttucker@insightstpp.org](mailto:ttucker@insightstpp.org)

### **NAYA Gang Prevention Program**

Korinna Wolfe  
NAYA Family Center  
5135 NE Columbia Blvd.  
Portland OR 97218  
503-288-8177  
[korinnaw@nayapdx.org](mailto:korinnaw@nayapdx.org)

### **Portland Children Intervention Project (PChIP)**

Gloria Wiggins  
Catholic Charities – El Programa Hispano  
451 NW First St.  
Gresham, OR 97030  
503-669-8350 x228  
[gwiggins@catholiccharitiesoregon.org](mailto:gwiggins@catholiccharitiesoregon.org)

### **Parent-Child Involvement Project (PChIP)**

Tasha Miniszewski, Listen To Kids  
5135 NW St. Helens Rd  
Portland, OR 97210  
503-280-1388  
[tminiszewski@listentokids.org](mailto:tminiszewski@listentokids.org)

### **Parent Child Involvement Project (PChIP)**

Anita Vinsou, Salvation Army West  
Women's and Children's Shelter  
2050 NW Kearney, Portland, OR 97209  
503-422-8865  
[anita\\_vinson@usw.salvationarmy.org](mailto:anita_vinson@usw.salvationarmy.org)

### **Teen Parent Services**

Suzanne Cash-Phelps  
Portland Public Schools  
4039 NE Alberta Ct.  
Portland, OR 97211  
503-916-5260  
[scash@pps.k12.or.us](mailto:scash@pps.k12.or.us)

### **Volunteers of America Home Free Children Services**

Linda Arata  
Volunteers of America Home Free  
3910 SE Stark, Portland, OR 97214  
503-771-5347  
[larata@voa.or.org](mailto:larata@voa.or.org)

## INTENSIVE INTERVENTION PROGRAMS

*(Listed alphabetically)*

### **CARES Northwest**

Kevin Dowling  
2800 N Vancouver Ave., Suite 201,  
Portland, OR 97227  
503-276-9000  
[kdowling@lhs.org](mailto:kdowling@lhs.org)

### **CARES NW Family Support Program**

Bruce Spilde  
Multnomah County Mental Health and  
Addictions Services Division  
421 SW Oak St., Suite 520  
Portland, OR 97204  
503-988-3999 x28605  
[bruce.m.spilde@co.multnomah.or.us](mailto:bruce.m.spilde@co.multnomah.or.us)

### **Multnomah County Child Abuse Team (CAT)**

Sergeant Pat Kelly  
10225 E. Burnside St.  
Portland, OR 97216  
503-823-0158  
[JPKelly@portlandpolice.org](mailto:JPKelly@portlandpolice.org)

### **Court Appointed Special Advocates (CASA)**

Colleen Rogers  
1401 NE 68<sup>th</sup> Ave.  
Portland, OR 97214  
503-988-4179  
[colleen.rogers@co.multnomah.or.us](mailto:colleen.rogers@co.multnomah.or.us)

### **Child Welfare**

Jennifer Bren  
Oregon Department of Human Services  
2446 SE Ladd Ave.  
Portland, OR 97214  
503-731-3111  
[jennifer.l.bren@state.or.us](mailto:jennifer.l.bren@state.or.us)

### **Christie School (Formerly Multnomah County Children's Receiving Center)**

Rex Surface  
Department of County Human Services  
421 SW Oak St.  
Portland, OR 97204  
503-988-3658  
[rex.b.surface@co.multnomah.or.us](mailto:rex.b.surface@co.multnomah.or.us)

### **Christina Project**

Elizabeth Oates  
Insights Teen Parent Program  
2020 SE Powell Blvd.  
Portland, OR 97202  
503-239-6996x230  
[eoates@insightstpp.org](mailto:eoates@insightstpp.org)

### **Early Childhood Mental Health Outpatient Services**

Kathryn Falkenstern  
Morrison Child and Family Services  
4790 N Lombard, Portland, OR 97203  
503-258-4526  
[Kathryn.falkenstern@morrisonkids.org](mailto:Kathryn.falkenstern@morrisonkids.org)

### **Enhanced Case Management**

Elizabeth Oates  
Insights Teen Parent Program  
2020 SE Powell Blvd.  
Portland, OR 97202  
503-239-6996 x230  
[eoates@insightstpp.org](mailto:eoates@insightstpp.org)

### **Family Involvement Team**

Samantha Byers  
Multnomah County  
1401 NE 68<sup>th</sup> Ave.  
Portland, OR 97213  
503-988-3460x26693  
[samantha.j.byers@co.multnomah.or.us](mailto:samantha.j.byers@co.multnomah.or.us)

### **Hand in Hand Day Treatment**

Monica Ford  
Morrison Child and Family Services  
11456 NE Knott  
Portland, OR 97220  
503-256-3040  
[monica.ford@morrisonkids.org](mailto:monica.ford@morrisonkids.org)

### **Intensive Home Services and Family Builders**

Vee Sloan, Options Counseling  
2410 SE 121<sup>st</sup> Ave., #216  
Portland, OR 97216  
503-942-2400  
[vees@options.org](mailto:vees@options.org)

## INTENSIVE INTERVENTION PROGRAMS

(continued)

### **Intensive Treatment Program**

Stephen Brock  
Kerr Youth and Family Services  
722 NE 162<sup>nd</sup> Ave.  
Portland, OR 97230  
503-408-5066  
[stephenb@albertinakerr.org](mailto:stephenb@albertinakerr.org)

### **Juvenile Dependency**

Tom Cleary, Multnomah County District  
Attorney's Office  
600 County Courthouse  
1021 SW 4<sup>th</sup> Ave.  
Portland, OR 97204  
503-988-3875  
[tom.cleary@mcda.us](mailto:tom.cleary@mcda.us)

### **Kinship House, Inc.**

Melissa Smith-Hohnstein  
1823 NE 8<sup>th</sup> Ave.  
Portland, OR 97212  
503-460-2796  
[khhouse1@qwest.net](mailto:khhouse1@qwest.net)

### **Mental Health/Developmental Disabilities Group Homes**

Stephen Brock  
Kerr Youth and Family Services  
722 NE 162<sup>nd</sup> Ave.  
Portland, OR 97230  
503-408-5066  
[stephenb@albertinakerr.org](mailto:stephenb@albertinakerr.org)

### **Mental Health/Developmental Disabilities Proctor Care**

Stephen Brock  
Kerr Youth & Family Services  
722 NE 162<sup>nd</sup> Ave., Portland, OR 97230  
503-408-5066  
[stephenb@albertinakerr.org](mailto:stephenb@albertinakerr.org)

### **Multi-Disciplinary Team**

**Prosecution Unit**  
Charlene Woods, Multnomah Co. District  
Attorney's Office  
600 County Courthouse  
1021 SW 4<sup>th</sup> Ave., Portland, OR 97204  
503-988-5344  
[Charlene.woods@mcda.us](mailto:Charlene.woods@mcda.us)

### **Multi-systemic Therapy (MST)**

Vee Sloan  
Options Counseling  
2410 SE 121<sup>st</sup> Ave., #216  
Portland, OR 97216  
503-942-2400  
[vees@options.org](mailto:vees@options.org)

### **NAYA Foster Care Program**

Korinna Wolfe  
NAYA Family Center  
5135 NE Columbia Blvd.  
Portland, OR 97218  
503-288-8177  
[korinnaw@nayapdx.org](mailto:korinnaw@nayapdx.org)

### **The Parent Mentor Project**

Ruth Taylor  
Parents Anonymous of Oregon  
1818 SE Division St.  
Portland, OR 97202  
[ruth.taylor@morrisonkids.org](mailto:ruth.taylor@morrisonkids.org)

### **Parenting Program**

Julie Granger  
Volunteers of America  
217 SE 8<sup>th</sup> Ave.  
Portland, OR 97214  
503-236-3033  
[jgranger@voaor.org](mailto:jgranger@voaor.org)

### **Pathways-Independent Living Program**

Korinna Wolfe  
NAYA Family Center  
5135 NE Columbia Blvd.  
Portland, OR 97218  
503-288-8177  
[korinnaw@nayapdx.org](mailto:korinnaw@nayapdx.org)

### **Psychiatric Day Treatment**

Stephen Brock  
Kerr Youth and Family Services  
722 NE 162<sup>nd</sup> Ave.  
Portland, OR 97230  
503-408-5066  
[stephenb@albertinakerr.org](mailto:stephenb@albertinakerr.org)

## INTENSIVE INTERVENTION PROGRAMS

*(continued)*

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### **Psychiatric Residential Treatment**

Stephen Brock  
Kerr Youth and Family Services  
722 NE 162<sup>nd</sup> Ave.  
Portland, OR 97230  
503-408-5066  
[stephenb@albertinakerr.org](mailto:stephenb@albertinakerr.org)

### **Sub-acute Services**

Stephen Brock  
Kerr Youth and Family Services  
722 NE 162<sup>nd</sup> Ave.  
Portland, OR 97230  
503-408-5066  
[stephenb@albertinakerr.org](mailto:stephenb@albertinakerr.org)

### **Termination of Parental Rights**

Tom Cleary, Multnomah County District  
Attorney's Office  
600 County Courthouse  
1021 SW 4<sup>th</sup> Ave., Portland, OR 97204  
503-988-3875  
[tom.cleary@mcdca.us](mailto:tom.cleary@mcdca.us)

### **Treatment Foster Care**

Stephen Brock  
Kerr Youth and Family Services  
722 NE 162<sup>nd</sup> Ave.  
Portland, OR 97230  
503-408-5066  
[stephenb@albertinakerr.org](mailto:stephenb@albertinakerr.org)

## SYSTEMS COORDINATION EFFORTS

*(Listed alphabetically)*

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### **Children's Justice Alliance**

Claudia Black  
7800 SW Barbur Blvd. Suite II  
Portland, OR 97219  
503-892-5396  
[claudia@theoma.org](mailto:claudia@theoma.org)

### **Children's Relief Nursery**

Leslie Brown  
8245 N Lombard  
Portland, OR 97203  
503-595-4507  
[lesliebrown@crn4kids.org](mailto:lesliebrown@crn4kids.org)

### **Child, Youth and Family Network**

Lisa Hansell, Multnomah Commission on  
Children, Families and Community  
421 SW Oak, Suite 200  
Portland, OR 97204  
503-988-4008  
[lisa.m.hansell@co.multnomah.or.us](mailto:lisa.m.hansell@co.multnomah.or.us)

### **Multnomah County Multidisciplinary Child Abuse Team (MDT)**

Rod Underhill, Multnomah County  
District Attorney's Office  
1021 SW Fourth Ave., Room 600  
Portland, OR 97204  
503-988-3876  
[rod.underhill@mcdca.us](mailto:rod.underhill@mcdca.us)

# APPENDIX A: Child Maltreatment – Risk Factors and Protective Factors



	Risk Factors	Protective Factors
Child	<ul style="list-style-type: none"> <li>• Under 36 months of age (highest risk for physical maltreatment, neglect, homicide)</li> <li>• Pubescent (highest risk for sexual abuse reporting)</li> <li>• Female (higher risk for sexual abuse)</li> <li>• Conduct problems</li> <li>• Difficult temperament</li> <li>• Disabilities (physical handicaps, developmental disabilities, birth complications)</li> </ul>	<ul style="list-style-type: none"> <li>• Easy temperament</li> <li>• High cognitive ability</li> <li>• Competence in normative roles</li> </ul>
Parental	<ul style="list-style-type: none"> <li>• Single parenting</li> <li>• Low education levels</li> <li>• Teen parenting</li> <li>• Low-income, low socioeconomic status</li> <li>• Past perpetrators of maltreatment</li> <li>• History of maltreatment as a child</li> <li>• Inadequate knowledge of child development</li> <li>• Inappropriate beliefs about child rearing</li> <li>• Negative affect in parent-child relationship</li> <li>• Alcohol or substance abuse problems</li> <li>• Depression</li> <li>• Loneliness</li> <li>• Cognitive distortions</li> <li>• Lack of empathy</li> <li>• Poor social skills</li> <li>• Deviant sexual interests</li> </ul>	<ul style="list-style-type: none"> <li>• Psychological health and maturity</li> <li>• Social competence</li> <li>• Good self-esteem and self-efficacy</li> <li>• Childhood experiences</li> <li>• Family history of nurturing, stimulation, and appropriate care</li> </ul>

	<b>Risk Factors</b>	<b>Protective Factors</b>
<b>Family</b>	<ul style="list-style-type: none"> <li>• Lack of resources</li> <li>• Four or more children</li> <li>• Closely spaced pregnancies</li> <li>• Current stressors (financial, job, health, loss of loved ones)</li> <li>• Marital conflict or violence</li> <li>• Social Isolation</li> <li>• History of maltreatment in family members</li> <li>• Inadequate monitoring by other family members</li> <li>• Disruption, separation and divorce</li> <li>• Children living with mother and non-biological father</li> </ul>	<ul style="list-style-type: none"> <li>• Supportive relationships with family, friends, neighbors</li> <li>• Regular, consistent household routines</li> <li>• Shared parent-child activities</li> <li>• Respectful and trusting communication</li> <li>• Appropriate monitoring, supervision and involvement</li> <li>• Parent-child warmth and supportiveness</li> <li>• Good quality relationship between parents</li> <li>• Extracurricular school activities</li> <li>• Involvement in religious and volunteer activities</li> </ul>
<b>Community/ Neighborhood</b>	<ul style="list-style-type: none"> <li>• High mobility</li> <li>• Unemployment</li> <li>• Poverty</li> <li>• Lack of monitoring and connectedness</li> <li>• Military presence in community</li> <li>• Natural disasters/crises</li> <li>• Inadequate financing or coordination of human services</li> </ul>	<ul style="list-style-type: none"> <li>• Access to adequate healthcare</li> <li>• Quality education</li> <li>• Employment services</li> <li>• Friendship among neighbors</li> <li>• Watchfulness for other families</li> <li>• Physical safety</li> <li>• Common knowledge of community resources</li> <li>• Sense of “belonging”</li> </ul>
<b>Cultural/Societal</b>	<ul style="list-style-type: none"> <li>• Corporal punishment legally allowed</li> <li>• Norm to spank or victimize children</li> <li>• Poor legal status of children/viewed as possessions</li> <li>• Weak understanding of child development</li> <li>• Media portrayal of violence common</li> </ul>	<ul style="list-style-type: none"> <li>• Violence discouraged</li> <li>• Basic family needs supported</li> <li>• Physical punishment discouraged</li> </ul>

Source Material:

Florida Resiliency Mapping Project, CEED, The Lawton and Rhea Chiles Center for Healthy Mothers and Babies, June 2004.

# APPENDIX B: Work Group Reports

## Advocacy and Education

This work group was charged with identifying policy and legislation on the local, state and national level that affected the goals of the Safe Child Task Force and developing an action plan to advocate for policy and legislation that aligned with those goals.

Facilitator: Katharine Cahn

Staff: Britta Halverson and Wendy Lebow

Participants: Sen. Kate Brown, Hans Bernard (for Sen. Kate Brown), Commissioner Lisa Naito, Martha Brooks, Mickey Lansing and Gloria Wiggins

Four areas of action were identified:

1. *Policy and legislation.* The group focused on legislation that would affect child abuse prevention and intervention. Bills and policies that merit support include:
  - a. Education Begins At Home Act (S.503). Federal legislation that would provide \$500 million in federal funds over three years to establish additional early childhood education services.
  - b. One hundred percent access to Head Start and early intervention.
    - i. Support the “Ready for School Public Awareness Campaign” at the state and county level.
    - ii. Support other important programs for ages 0 to 3, including Healthy Start.

- c. Four legislators’ package of bills to combat methamphetamine, which includes protection of children, the “tiniest victims of meth”.
  - d. HB 3075-A: Promoting Educational Stability for Children in Foster Care.
  - e. Zero to Five to Thrive, a message based on Washington’s strategy, that identifies groups that are focusing on laws and policies for the prevention of child maltreatment, support of healthy families and promotion of programs that prepare children for school.
2. *Community Education.* The group looked at strategies for educating the community about topics that directly affect the well being of children.

Those include:

    - a. Changing community attitudes to increase the level of support for investing in kids. The Multnomah County Commission on Children, Families and Community and Robin Karr Morse can share information on how to frame the message of support for early intervention and prevention.
    - b. Changing community norms around corporal punishment and sharing research collected by this committee.
      - i. Have commission staff research model programs that change attitudes about corporal punishment.
      - ii. Attend to the needs and opportunities of specific cultural groups that have a tradition of discipline that includes corporal punishment.

3. *Sustainable Funding.* The group examined programs that require sustainable funding and recommends looking for opportunities to increase funding and establish or tap into sustainable funding at the local, state and federal level.

- a. For what programs do we want funding?
  - i. Healthy Start.
  - ii. Head Start.
  - iii. Wraparound Oregon.
  - iv. Kinship strategy. We need more development and definition of the issue of subsidized care by relatives, a big-picture topic that touches on the goal of services following a child, Temporary Assistance for Needy Families, food stamps and the Interstate Compact for the Placement of Children.
- b. Possible funding sources.
  - i. Oregon's corporate kicker. Increase the corporate contribution, and put some of the proceeds into the programs listed in 3a, above.
  - ii. Beer and wine tax increase to support drug and alcohol treatment, possibly with priority for parents.

4. *Parenting Education.* The group supports universal availability of parenting education, focusing first on universal, non-stigmatized training for new parents. The location of such education was not settled. One curriculum to consider, called *Make Parenting A Pleasure*, is already used in Eugene.

- a. Commission on children and families should take the lead on working with the health care community to provide universal parenting education.

- b. The Governor's Healthy Kids Agenda or the county legislative agenda could include parenting education initiatives.

## **Prevention and Intervention**

The task of this work group was to provide recommendations about program and service priorities to prevent child abuse. The group met twice and studied and analyzed data, examined definitions and collected information about protective and risk factors for child abuse. The group also defined the resiliency and risk factors that need to be examined.

Facilitator: Cindy Thompson

Staff: Yvonne Recchia

Participants: Leila Keltner, Mike Schrunck, Jan Wallinder, Carole Wessinger and Kate Newhall for Sen. Kate Brown

There were five major findings:

1. Number of child abuse victims who need services. It is difficult to determine the numbers of children who are not being served, but we can surmise from other efforts to gather this type of data that there are large numbers of children who are in need and not receiving services. Estimates range from one in 10 adults reporting being victims of abuse before the ages of 18 to one in four.
2. Child abuse rates. In reviewing local data, it is clear that child abuse rates are increasing at an alarming rate.
3. Prevention programs. In reviewing the results of the inventory, there is a clear lack of universal programs for child abuse prevention.

4. Community systems. The national trend is toward thinking in terms of “systems” rather than “programs” to have a greater effect on child abuse rates. In Multnomah County, this means addressing the needs of not only individuals but of the community at large and society as a whole.
5. Universal need. The group concluded there is a universal need for abuse prevention programs in our community. The group recognizes that supporting the healthy and safe development of children in our community means that all families should feel supported and safe in asking for help.

Four areas of action were identified:

1. *Develop common set of working definitions.* Recommend that the Safe Child Task Force utilize the definitions, developed in North Carolina, that relate to systems rather than specific programs or interventions:

“Child maltreatment prevention efforts include activities, strategies, or programs to reduce risk factors and increase protective factors associated with child maltreatment. These efforts are designed to increase the capacity of parents, caretakers, and communities to protect, nurture, and promote the healthy development of children.”

While a number of activities can comprise child maltreatment prevention, activities are typically placed into three categories:

**Universal strategies** target activities to the general population with the goal of preventing child maltreatment from ever occurring.

**Selective strategies** target activities to a group with specific risk factors with the goal of preventing child maltreatment from occurring in that group.

**Indicated strategies** target activities to a group that has experienced maltreatment with the goal of preventing its reoccurrence.”

2. *Monitor child abuse and neglect risk and protective data.* Dr. Leila Keltner developed the Child Maltreatment: Risk Factors and Protective Factors chart (Appendix B). Establish a data group to gather baseline data and monitor changes in risk and protective factors as they relate to child maltreatment.
3. *Increase the number of universal strategies to prevent abuse and neglect.* Effective child maltreatment prevention efforts must focus not just on individual parent-child relationships, but also on the larger social environment in which children are raised. This requires activities along each level of the spectrum of prevention.

### Best Practices

This work group was charged with examining best practice efforts in our community and ways to support existing efforts, identifying the gaps in service and recommending a community plan to address those gaps.

Facilitator: Judge Nan Waller

Staff: Lisa Hansell

Participants: Lorena Campbell, Carolyn Graf, Glenna Hayes, Jackie Mercer

Four areas of action were identified for this group:

1. *Develop a multi-faceted approach to building social capital.*
2. *Build protective factors for children within their homes and communities.* Request that the Commission on Children, Families and Community assure that all of its work includes the promotion of evidence-based protective factors. Use the Search Institute as a resource.
3. *Recruit the involvement of “unlikely alliances.”* This could include neighborhood associations, child care facilities, parent and teacher organizations, libraries, businesses, faith-based organizations and philanthropic organizations.
4. *Revise the county budget process.* Require that all county programs linked to the maltreatment of children are reviewed and ranked based on best practices, are integrated with other county departments or community organizations, and include protective factors for children and families. Support community engagement around the budget process.

Five areas of action were identified for the Task Force:

1. Identify environmental changes that contribute to the increased child abuse rates.
2. Develop a plan to reinstate child abuse/re-abuse prevention services and resources that previously were lost.
3. Gather information about what each organization is doing and how we can work together to be more efficient and more effective.
4. Develop a set of practices and principles regarding children and families and the prevention of child maltreatment.

5. Secure commitments from each organization represented on the task force to implement the principles.

Work group members identified potential Task Force outcomes:

1. Identification of environmental changes that contribute to the increased child abuse rates;
2. Develop a plan to reinstate services/resources previously lost that prevent abuse/re-abuse;
3. Information about what each organization is doing and how we can work together, in unison, to do things better (more efficiently & more effectively);
4. Develop a set of practices and principles regarding children and families and the prevention of child maltreatment;
5. Get commitments from each organization represented on the task force to implement the principles.

This work group was charged with identifying best practices.

**Discussion:** In order to identify best practices, the work group believes it would be most effective to understand what has led to the increase in child abuse rates. Once there is an understanding of causes, best practices to address specific issues can be identified.

**Recommendation:** Secure the resources (pool funding from task force agencies and/or seek grant funds) necessary to conduct in-depth research regarding the factors leading to the rise in child abuse rates.

**Discussion:** Even without an in-depth study at the local level, research indicates that children and families experience better outcomes when they have a social support network. By decreasing

isolation, increasing community support and developing sustainable relationships, children, families and the community all benefit.

***Handouts Distributed:***

- a. Social Capital and Our Community – University of Minnesota Extension Service
- b. Creating Parenting-Rich Communities – Child Welfare League of America
- c. Strengthening Families Through Early Care & Education – Center for the Study of Social Policy

***Recommendations:***

- a. Develop a multi-prong approach to building social capital.
- b. Build protective factors for children within their homes and communities. (i.e. request that the CCFC assure that all of its work includes the promotion of evidence-based protective factors). Utilize the Search Institute as a resource.
- c. Recruit the involvement of “unlikely alliances” (i.e. neighborhood associations, child care facilities, parent and teacher organizations, libraries, businesses, faith-based organizations, philanthropic organizations).
- d. All county program offers linked to the maltreatment of children are reviewed and ranked based on best practices, integration with other county departments or community organizations, and builds protective factors for children and families. Support community engagement around the budget process.

# APPENDIX C: Inventory Survey Form

## Child Abuse Prevention and Intervention Multnomah County Inventory of Services Survey August 2006

Organization _____
Contact Person _____ Phone _____
Maining Address _____ Zip _____
Email _____

PLEASE PROVIDE THE INFORMATION BELOW FOR **EACH** CHILD ABUSE PREVENTION AND/OR INTERVENTION PROGRAM OPERATED BY YOUR AGENCY.

Name of Program: \_\_\_\_\_

The core service provided by this program is: (Check **only** the primary service area)

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Assessment Services | <input type="checkbox"/> Case Management            | <input type="checkbox"/> Child Welfare               |
| <input type="checkbox"/> Community Education | <input type="checkbox"/> Domestic Violence Services | <input type="checkbox"/> Early Childhood Education   |
| <input type="checkbox"/> Foster Care         | <input type="checkbox"/> Mediation                  | <input type="checkbox"/> Medical/Health Care         |
| <input type="checkbox"/> Mental Health       | <input type="checkbox"/> Mentoring                  | <input type="checkbox"/> Parenting Education/Support |
| <input type="checkbox"/> Respite Care        | <input type="checkbox"/> Substance Abuse Treatment  |  |
| <input type="checkbox"/> Other _____         |   |  |

**1. Program description and types of services provided (attach additional pages as needed):**

**2. Focus population and eligibility criteria:**

**3. Primary funding sources for this program (Identify source and current fiscal year amount; i.e. Federal – Safe and Stable Families; \$135,000 State – General Fund; \$24,000):**

Federal \_\_\_\_\_ \$ \_\_\_\_\_

State \_\_\_\_\_ \$ \_\_\_\_\_

County \_\_\_\_\_ \$ \_\_\_\_\_

City \_\_\_\_\_ \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

4. Annual cost of program: \$ \_\_\_\_\_

5. Numbers served annually, by age:

	# Served; Year _____
Prenatal (parents)	
0-5	
6-12	
13-18	
6-18 (school age)	
Other _____	

6. Estimates of the service need:

❖ If you have a waiting list, what is the current number on the list?

\_\_\_\_\_ number of children on waiting list

\_\_\_\_\_ number of parents on waiting list

\_\_\_\_\_ number of families on waiting list

7. Where does this program fit on the continuum of child abuse prevention services? (check only one)

- Primary Prevention** – Basic services that are needed by all and are broadly available. Programs that support the healthy growth and development of all children and youth.
- Risk-Focused Prevention** – Services focused on specific groups of children, youth and families that are determined to be “at-risk”.
- Early Intervention** – Services that respond to individual children, youth or families who show beginning signs of social, emotional or behavioral difficulties.
- Intensive Intervention** – Services for specific children, youth or families who are experiencing difficulties, typically requiring multiple interventions.

**THANK YOU!!!**

**We appreciate your time in completing this survey.**

Please return this survey by AUGUST 21, 2008

Attn: Lisa Hansell  
Commission on Children, Families & Community of Multnomah County  
421 SE Oak., 2<sup>nd</sup> Floor  
Portland, Oregon 97204

If you have any questions concerning this survey, please contact Lisa Hansell, at  
503-988-4008 or by email [lisa.m.hansell@co.multnomah.or.us](mailto:lisa.m.hansell@co.multnomah.or.us)

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