Bureau Name: Children's Bureau  
Grant Number: 90CB0154  
Target Population: Substance exposed newborns  
Fiscal Year: 2005

GRANTEE INFORMATION:

Name: University of Oregon c/o Office of Research Services & Administration  
Address: 5219 University  
City/State/Zip Code: Eugene, OR 97403  
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OTHER GRANT INFORMATION:

Amount of Award: $149,996.00  
Program Name: Abandoned Infant Projects  
Project Period: 9/30/2005-9/30/2010  
ACF Region: 10  
Congressional District Served: 4

Related Links:

ABSTRACT:

Organization Description: The Child Development and Rehabilitation Center (CDRC) of Oregon Health Sciences University is a statewide agency that serves children with special care needs. CDRC's mission is to improve the health, well-being of children and youth with special needs and their families.

Use(s) of ACF Program Grant Funds: The University of Oregon Early Intervention Program and Child Rehabilitation Center, together with protective service, health, drug treatment, early intervention, child development, and mental health/counseling agencies in Lane and Jackson counties are proposing the development and replication of a comprehensive, family centered model for identifying and serving families with children prenatally exposed to illegal drugs. Developing an optimal, effective model of policies and procedures to implement provisions of the CAPTA requirement regarding substance exposed newborns is the purpose of Project Family Early Advocacy and Treatment (FEAT). Currently in Oregon, significant gaps exist in policies and procedures related to identifying and serving these families and children. Inconsistent drug testing, referral, and follow-up services are
common and there is no clear state policy related to prenatal drug exposure and CAPTA provisions. The FEAT model consists of four elements: 1) a state level interagency perinatal working group, focused on developing policies and procedures for the identification, referral, and treatment of prenatally drug exposed infants and their families; 2) a county level interagency perinatal task force working in a parallel process to the state working group to further define policies and procedures at a local level; 3) a full time family advocate utilizing a family-centered, relationship-based home visiting approach. The family advocate will conduct thorough assessments of children and family members, facilitate the relationship between caregiver/children, support families to navigate the complex requirements of the Child Welfare system, monitor access to critical services for children and families (e.g., health and medical services, early intervention services, mental health counseling, drug/alcohol treatment) and, ensure that service delivery is, at all points of contact culturally and linguistically appropriate; and 4) an on-going evaluation process designed to refine the FEAT model throughout the course of the project. Year One will include a planning phase in which all involved agencies in Lane County join to conduct a needs assessment and a series of focus groups in which a comprehensive FEAT model is developed. The FEAT project Liaison will be a participant in state and county perinatal working groups to maintain a focus on this vulnerable population, keep momentum during the planning year, and provide a link to ensure that state and local policies regarding prenatal exposure to drugs are consistent. During Year Two the proposed model will be implemented and extensively evaluated in Lane County. Replication will occur in Jackson County in Year Three. Model evaluation and dissemination as well as evaluation of the feasibility of model replication in additional diverse counties in Oregon will also be completed in Year Three. Based on final evaluations, an additional two years of funds implementation in two rural and two urban counties will be requested."

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