BACKGROUND
Multnomah County is home to over 400 represented Native tribes and more than 28 Native-serving organizations. Roughly 49,000 American Indian and Alaska Native (AI/AN) people live in the urban region, representing the fastest growing population in the county. One in three AI/AN people are <18 years. Across multiple health and social indicators, AI/AN people in Multnomah County experience significant health inequities, such as:

- High school graduation are 23% lower than Non-Hispanic Whites (NH-Whites)
- The rate of alcohol-related deaths is 3 times higher than the rate of NH-Whites
- Child Welfare removal rate is 25 times higher than the rate among NH-Whites
- AI/AN women are 3 to 4 times more likely to smoke during pregnancy than non-AI/AN women
- The proportion of AI/AN women who reported drinking alcohol during pregnancy is 2 times that of the lowest rate

TRAUMA-INFORMED PROCESSES AND ACTIONS
A trauma-informed collaborative utilizes a relational world view to guide development of processes and outcomes. The relational world view is a cultural model of wellness and healing. The four directions in the model represent interdependent domains, all of which need to be in balance to find health and healing. There are many ways to describe the domains. In the Future Generations Collaborative (FGC) we understand the domains to represent social, mind, body and spirit.

CONCLUSION
Collaboration between public health departments and AI/AN communities is complicated by the role of public health in the cultural genocide of Native peoples. Trauma-informed collaboration requires public health organizations to closely examine and acknowledge the present-day effects of historical trauma on community-based approaches to intervention planning. Trauma-informed collaboration is a rich and often challenging process that bridges cultural paradigms and address root causes of mistrust between people and organizations.