

## HB 2297: A Task Force to Improve Oregon's Investments in Prevention and Treatment

### Testimony by Anthony Biglan, Ph.D.

In 2003 the Oregon legislature passed SB 267 to require the use of evidence based programs for the more prudent use of tax dollars for prevention and treatment. Since that time, enormous evidence has accumulated about the efficacy of prevention and treatment. HB 2297 creates a task force to review and update Oregon's standards and procedures for ensuring that the most efficient and effective prevention and treatment programs are being used.

### Significant Progress in Implementing Effective Prevention and Treatment

Thanks to numerous randomized trials, a variety of effective family and school interventions have been identified that can prevent the development of multiple child and adolescent problems and nurture successful development. Oregon has begun to implement many of them. For example:

- **The Nurse Family Partnership (NFP).** Nurses help high risk pregnant women through their pregnancy and the first two years of the baby's life. A recent independent evaluation of NFP showed that its cost of \$10,155 per mother had a return of more than \$56,000 in reduced costs of Medicaid, local, state, and federal government costs, and increases in children's earnings as adults and improvements in their quality of life.
- **The Family Check-Up (FCU)** provides brief, strengths-based support to families who have concerns about their children. A randomized trial of the program conducted in Portland with middle school students found that, by the time those students reached age 18, 38% fewer arrests occurred among those receiving the FCU.
- **The Good Behavior Game (GBG)** is a simple positive approach that rewards elementary school students for working and playing together cooperatively. An independent analysis of the economic benefit of this intervention indicated that \$1.00 spent on the Good Behavior Game could save about \$84 through reduced special education and victim, healthcare, and criminal justice costs according to an independent analysis by the Washington State Institute for Public Policy. Based on results obtained in existing studies, we estimate that if Oregon provided GBG to every first grade in Oregon, among the 46,000 first graders there would be
  - a. **4,029** fewer young people needing special education services
  - b. **6,764** more students graduating from high school
  - c. **6,378** more students attending college
  - d. **4,503** fewer young people developing serious drug addictions
- **Positive Behavioral Intervention and Support (PBIS).** This program is being implemented in 41% of the schools in Oregon. It has been shown to reduce discipline problems and the development of antisocial behavior, while at the same time improving students' academic success.

## Improving the Efficiency of Oregon's Efforts

The efficiency of our efforts could be improved so that existing funds are increasingly spent on the interventions that are most likely to produce results that save money and improve lives. Although SB 267 specified that an increasing percentage of funds be spent on evidence-based programs, leveling off at 75% by 2009, at that time, the criteria for identifying evidence-based programs were not as clear as they have become and there was much less evidence than there is now.

For example, 199 practices were recognized as being evidence based for prevention and treatment in mental health and addiction. According to latest criteria articulated by the Society for Prevention Research not nearly that many interventions would be judged to be effective.

**HB 2297** creates a task force to increase the efficiency and effectiveness of current state efforts to treat or prevent the most common and costly problems. It does two things:

- Examines current criteria and practices to determine whether we are funding truly effective programs.
  - The question is, “Are we using our funds as wisely as we might?”
  - The task force will review the criteria for designating programs as evidence-based and make recommendations to the Legislative Assembly and the Governor for legislation that will increase the availability and successful implementation of evidence-based family, school and preschool interventions.
  - At the same time, it will review all state expenditures for treatment and prevention to ensure that Oregon is making as efficient use of its resources by funding the most effective and efficient practices.
- The Task Force will examine how well we are succeeding in getting evidence-based practices effectively implemented at the local level.
  - Are we reaching everyone who would benefit?
  - Is the State providing effective guidance and support at the local level?
  - Are at least 75% of funds going for evidence-based interventions?
  - Are the reports counties make to the state providing the information needed to determine whether evidence-based interventions are being implemented, are reaching those who would benefit, and are having their expected benefit?

Based on an analysis conducted at the Center for Advanced Studies in the Behavioral Sciences, each year the adolescent problem behaviors we fail to prevent cost the state about \$6.58 billion. Yet, there is ample evidence that a huge proportion of these costs-- and the harm to human wellbeing that these costs reflect—could be reduced if we can strengthen Oregon system for identifying and implementing evidence-based treatment and prevention.

The potential payoff from HB2297 is enormous, not only in terms of better use of funds and improved results but also in terms of government accountability and transparency.