

HB4086

CECSB Presentation|2025

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Opening & Purpose

HB 4086 mandate and the CECSB Committee's work.

Gratitude for the families, youth, and community voices included in the process.



Our North Star

“Prevent harm and promote healing through a coordinated, trauma-informed response—so all children grow up with safety, dignity, and belonging.”

Why This Matters

Scope of the Issue



- 1/3–1/2 of child sexual abuse cases are child-initiated
- ~30% by children under 12

Human Impact



Families face stigma, delays, and inconsistent services (include quotes from caregivers)

Equity Concerns



Disproportionate impacts on children of color and youth in child welfare / juvenile justice systems

Fiscal Implications



- Foster care: \$30–36k/year per child
- Juvenile justice: \$100k+ per child
- Evidence-based treatment: \$6–10k/year, with better long-term outcomes

Methodology



Policy & System Review

- Initial policy analysis by Bipartisan Policy Center
- Supplemental literature review by CECSB facilitators



Committee Formation

- Inter-agency steering group convened
- Members selected for diversity of roles & lived experience



Facilitation & Process

- Independent facilitators procured
- Public meetings, workgroups, and system mapping



Evidence & Input

- Expert testimony (clinicians, law enforcement, survivor advocates)
- Stakeholder consultations across communities



Deliverables

- Interim literature review (programs, gaps, best practices)
- Final recommendations to Legislature (Sept 2025)

Our Key Findings



Current responses are **fragmented** and inconsistent across counties.



Mandated reporting laws **lack clarity**, leading to over- or under-reporting.



Families and providers report **barriers**, confusion, and re-traumatization.



Workforce **shortages**, especially in rural areas.



Lack of **standardized** assessment and communication protocols.



Prevention efforts are **limited**; responses are primarily reactive.

Lessons from Other Sites



Minnesota

MDT model cut repeat incidents by 30%.



Texas

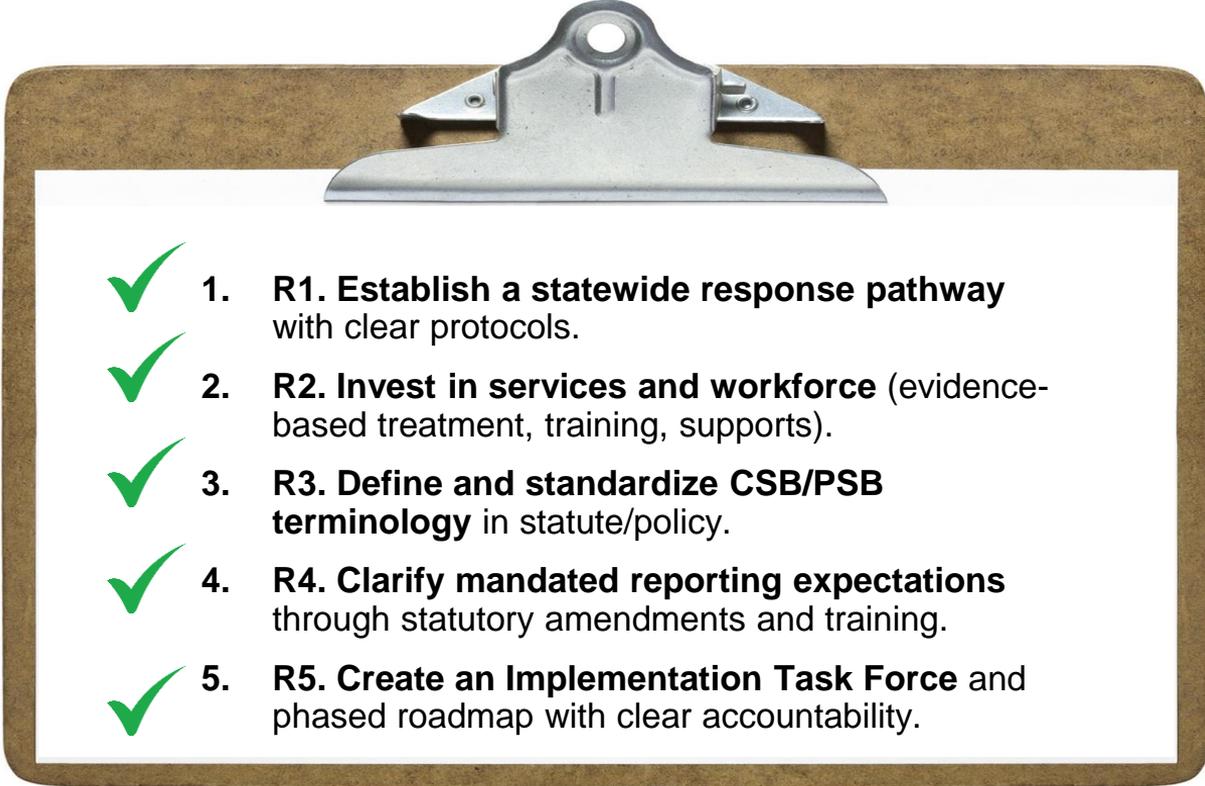
MST-PSB pilot halved recidivism, saving >\$1M annually.



New Jersey

40% reduction in juvenile court referrals by shifting to clinical-first approach.

Oregon's Top 5 Recommendations

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- ✓ 1. **R1. Establish a statewide response pathway** with clear protocols.
 - ✓ 2. **R2. Invest in services and workforce** (evidence-based treatment, training, supports).
 - ✓ 3. **R3. Define and standardize CSB/PSB terminology** in statute/policy.
 - ✓ 4. **R4. Clarify mandated reporting expectations** through statutory amendments and training.
 - ✓ 5. **R5. Create an Implementation Task Force** and phased roadmap with clear accountability.

Implementation Roadmap

Phase 1: 0–12 Months

- Establish Task Force (housed at OHA).
- Launch community training pilots.
- Compensate community members for participation.

Phase 2: 1-2 Years

- Pilot intake protocols in select counties.
- Expand clinical certification pathways.
- Strengthen MDTs regionally.

Phase 3: 2-3 Years

- Full statewide rollout of response pathway.
- Annual evaluation & reporting.
- Institutionalize trauma-informed practices.

Funding & Sustainability



Current funding is fragmented and fragile (grants/pilots).



Long-term savings by investing in treatment / prevention now

Recommended Mix

Dedicated state budget line item

Medicaid reimbursement alignment (1115 waiver)

Federal & philanthropic start-up support

Workforce development incentives

Legislative Ask

Support **funding for system-building**.

Endorse creation of a **permanent statewide Task Force** led by OHA.

Mandate **standardized statewide protocols** for assessment, reporting, and service provision.

Secure **sustainable funding streams** (budget + Medicaid alignment).



Closing

1

Since prevention is key, CSB/PSB should be treated as a public health and safety issue.

2

In doing so, it is critical to honor partner values: safety, dignity, healing, and belonging.

3

Oregon can lead the nation with a coordinated, trauma-informed model that keeps children out of the justice system and in pathways of healing.