

Date: 3/11/2025

Subject: Testimony in Support of HB 2502, HB 3321, HB 3375, and HB 2929

Dear Co-Chairs Prozanski and Kropf, Members of the Joint Committee on Addiction and Community Safety Response,

Thank you for the opportunity to submit testimony in support of HB 2502, HB 3321, HB 3375, and HB 2929.

My name is Dr. Kevin Sabet, and I serve as the President and CEO of the Foundation for Drug Policy Solutions (FDPS), a non-partisan non-profit that I co-founded in 2022 with former Congressman Patrick Kennedy. FDPS envisions a world in which children and families thrive, substance use is prevented, and there is rapid access to quality treatment and meaningful pathways to recovery for individuals with substance use disorders. I previously served as a three-time White House drug policy adviser during the Clinton, Bush, and Obama administrations.

I appreciate the Legislature's efforts to develop and implement a primary prevention state strategy (HB 3321), ensure a clear and comprehensive assessment of youth substance use prevention, screening, intervention, and treatment and support invaluable recovery high schools (HB 3375, HB 2502), and strengthen the role of the Alcohol and Drug Policy Commission, requiring distinct and regular youth-focused and primary prevention reporting on plans and outcomes (HB 2502, HB 3321, HB 3375, and ultimately HB 2929).

If these bills merge, I respectfully request that the definition of primary prevention remain strong and that a clear, strategic approach to primary prevention not be weakened. Additionally, I urge the Committee to consider ensuring explicit youth and primary prevention reporting requirements as a distinct pillar within HB 2929.

Thank you for your leadership on these critical issues. By supporting these bills, you will safeguard Oregon's youth, strengthen families, and promote healthier communities across our state. I appreciate your consideration and respectfully request your "Do Pass" and "Yes" vote on these measures.

Background

The drug policy landscape has changed dramatically since I began working in this field as a student advocate in Berkeley, California. Yet, over the decades, one tenant has always remained true: prevention works. A culture of prevention normalizes practices that promote healthy brain and social development and strengthens protective factors that attenuate the risk of substance use.

Preventing substance use, particularly among youth, is not only a laudable goal in the interest of public health, but it is one that is achievable. If a child does not use substances by age 21, they are unlikely ever to do so. Unlike many other disorders, substance use disorders—and the preceding initiation of substance use—are preventable. This underscores the importance of primary prevention and the need for early intervention when a young person initiates substance use. If we reduce the initiation of substance use, we will markedly reduce drug use and its consequences, including addiction.

Prevention saves resources, too. As NIDA Director Dr. Nora Volkow [said](#), “While investment in prevention doesn’t show immediate returns, playing the long game and investing in prevention interventions can save lives and dollars.”

In fact, every \$1 invested in effective school-based substance use prevention programs is estimated to result in savings of [\\$18](#). Extensive analyses of the costs and benefits of these programs indicate that most cost far less than they save in reduced healthcare, criminal justice, mental health, and educational costs, and in increased income among recipients. A [2016 report](#) from the Surgeon General noted, “Interventions that prevent substance use disorders can yield an even greater economic return than the services that treat them.”

It’s also clear that prevention strategies have the added benefits of improved academic performance, reduced bullying and violence, and better emotional and physical health that enhance positive community participation.

A culture of prevention should normalize prevention practices in our daily lives to foster healthy developmental pathways and avoid negative outcomes. There are three basic drivers of normalization. First, increasing knowledge that the science of human development has potential to change attitudes and mindsets. The second driver is that underage substance use greatly risks the normal development of the still-maturing adolescent brain. The third driver is the adoption of the active ingredients of proven programs, which have been shown to influence specific behaviors. Integrating a wide range of these practices and principles into daily interactions has potential to more broadly and sustainably promote health and wellness.

Conclusion

The multiple life-course conditions that influence whether an individual will develop an addiction are alterable and, in many cases, preventable. Protective conditions can be strengthened, while detrimental conditions can be attenuated or eliminated altogether. Implementation of effective policy solutions will, in turn, inform wiser expenditures with potential to make a measurable dent in the drug problem.

Supporting HB 2502, HB 3321, and HB 3375 will bolster these kinds of policy solutions in Oregon, thereby saving lives and resources. I hope that you will stand behind these bills and prioritize prevention in the Beaver State.