

Testimony in Support of HB 2726
House Committee on Early Childhood and Human Services
The Honorable Representative Lisa Reynolds, Chair

John A. Kitzhaber, M.D.
February 27, 2023

Madam Chair, members of the Committee — for the record, my name is John Kitzhaber. I am a former Oregon state legislator and Governor. I am here on my own behalf, to speak in support of HB 2726.

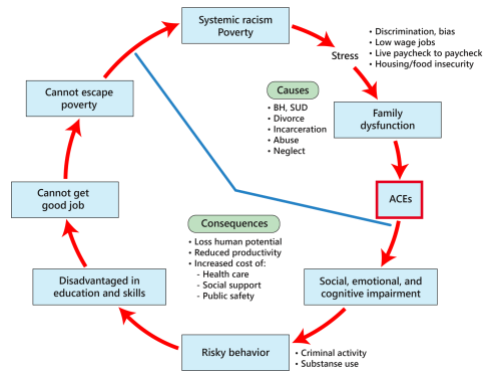
I would like to take a few minutes this afternoon to summarize the problem that this legislation seeks to address. In my view, one of the most threats to Oregon’s future is that nearly sixty percent of our children are exposed, at a very early age, to one or more risk factors that can profoundly compromise their ability to succeed.

The seeds that undermine successful children are planted very early in life, even before birth, and lead to the health disparities and socioeconomic inequality that continue to plague our state.

We are all familiar with the social determinants of health and that Zip Code is a far more important predictor of lifetime health status than genetics. We know that one of the most powerful social determinants that can dramatically undermine the opportunity for a child to succeed, is growing up in a family under stress—and that two of the most significant factors that lead to stress and family instability are systemic racism and poverty.

We are all familiar with the 1997 study on Adverse Childhood Experiences (ACEs) that showed the correlation between the level of traumatic stress in childhood and poor physical, mental and behavioral outcomes later in life. We also know that chronic stress and malnutrition, both before and during pregnancy, can alter genetic expression in the unborn child—increasing the risk of emotional problems, behavioral disorders and learning disabilities—thus passing the factors that can undermine childhood success from generation to generation.

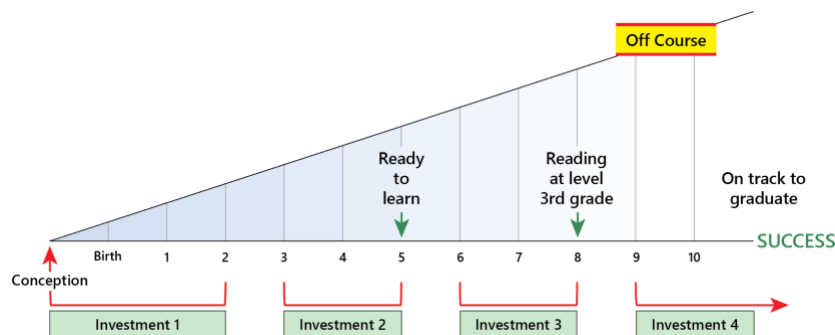
Generational Cycle of ACEs



Ensuring that every child has an equitable opportunity to succeed means breaking this generational cycle of ACEs by striking at its root causes in the first 1000 days of life — from conception to age 2. This requires a holistic approach that recognizes children exist in an ecosystem that includes their family and their community—and that the earlier we can intervene, the more successful we will be.

It is not unlike an airplane on a long trip that is constantly being taken off course by cross winds, weather and other factors. That is why on any long flight there are a series of “way points” to guide the necessary course corrections required to ensure that the plane arrives at its destination.

Success Investments



Children also have “way points” which indicate whether they are on a course to success. These include certain physical, social and emotional developmental way points in the early years of life, then Kindergarten readiness, reading at level in third grade, on track to graduate in the ninth grade, etc.

These way points represent a continuum of child development and *the earlier we intervene* in the life arc of a child who is heading off course, the more successful that child will be in achieving their full health potential—and the less costly it will be, both in terms of the initial investment and the avoided cost later on.

This brings to mind the parable of two fishermen who see a baby floating by in the river and rush in to rescue it. Then two more babies float by, and then third, and the fishermen rescue them as well. But the babies keep coming and coming. The fishermen are growing weary. Finally, one fisherman turns and starts running upstream. “Wait,” yells his companion, “where are you going? You must stay here and help me rescue the babies.” To which the first fisherman replies “I am going upstream to see who is throwing them in the river.”

It is in the first 1000 days of life where the babies are falling into the river. Most of what we do after that is, by and large, try to rescue them. That is incredibly important work, but unless we can address root causes and reduce the number of babies falling in, we will get further and further behind.

The challenge of turning this around requires not only enough resources to make sustained investments in the first 1000 days of life, but —just as importantly—a new community-based delivery system intentionally designed to address the root causes of childhood trauma rather than its consequences.

We know that the range of specific treatments, supports and interventions that may be required for a given child and his or her family could be extensive and will certainly include things like good nutrition, affordable housing, child care, transportation, treatment for behavioral health/substance use disorders, job training and employment.

We also know, that in any given community, there are often dozens of agencies, programs, institutions and organizations involved in providing these services. In many cases, however, they are not aligned or coordinated. Often, they operate in silos. There may or may not be coordination in the hand-offs between programs and organizations.

Children wander through this fragmented landscape seeking help, rather than having the needed supports and services follow the child and their family over time and across the community. While we can show positive results from various *individual* programs, we are not narrowing the opportunity gap across the population as a whole. In a very real sense, we are “program rich and system poor,” we are “failing the community one success at a time.”

We don’t need a new program or organization. What need is some kind of new community-based governance or coordinating entity that can reach far upstream into the first 1000 days of life, identify the factors that threaten the success of a child and their family, aggregate the various supports, services, interventions and protective factors necessary to mitigate those risks, then ensure that they follow the child and their family over time and across the community, in a way that is ethnically, culturally, and linguistically appropriate.

This kind of Delivery Model does not currently exist. Which means we are going to have to imagine it by having courage ask: “If anything were possible” — that is, if our imagination was not constrained by lack of resources, current structures, laws or regulations— what would it take to ensure that every child has an equitable opportunity to succeed?”

Over the past year, Southern Oregon Success—a collective impact initiative for Jackson and Josephine counties—asked and answered this question. The result is HB 2726 which will fund the Southern Oregon Early Childhood Support Network—a prototype for the kind of Child Success Delivery System we need if we are to ensure that every child—regardless of ZIP Code, ethnicity, race or language—has an equitable opportunity to succeed.

I urge you to support this important landmark legislation.