

Ebony Clarke, Behavioral Health Director

April 7, 2025

Child and Family Behavioral Health 2020 – 2024 Roadmap – Closing Report

In 2020, OHA's Child and Family Behavioral Health team launched the Child and Family Behavioral Health Roadmap to guide its priorities and work for the next several years. This report summarizes the efforts carried out over the last four years as a part of the Roadmap. Sharing this analysis is in keeping with the origins of the Roadmap – an opportunity to be transparent about our focus and impact and to sustain engagement with community.

We are especially proud of several statewide programs that launched during this period to address youth behavioral health crises in the community, including Intensive In-Home Behavioral Health Treatment (IIBHT) and Mobile Response and Stabilization Services (MRSS). While these programs are still in the early stages of development and have been limited by workforce shortages, they are based on national best practice models.

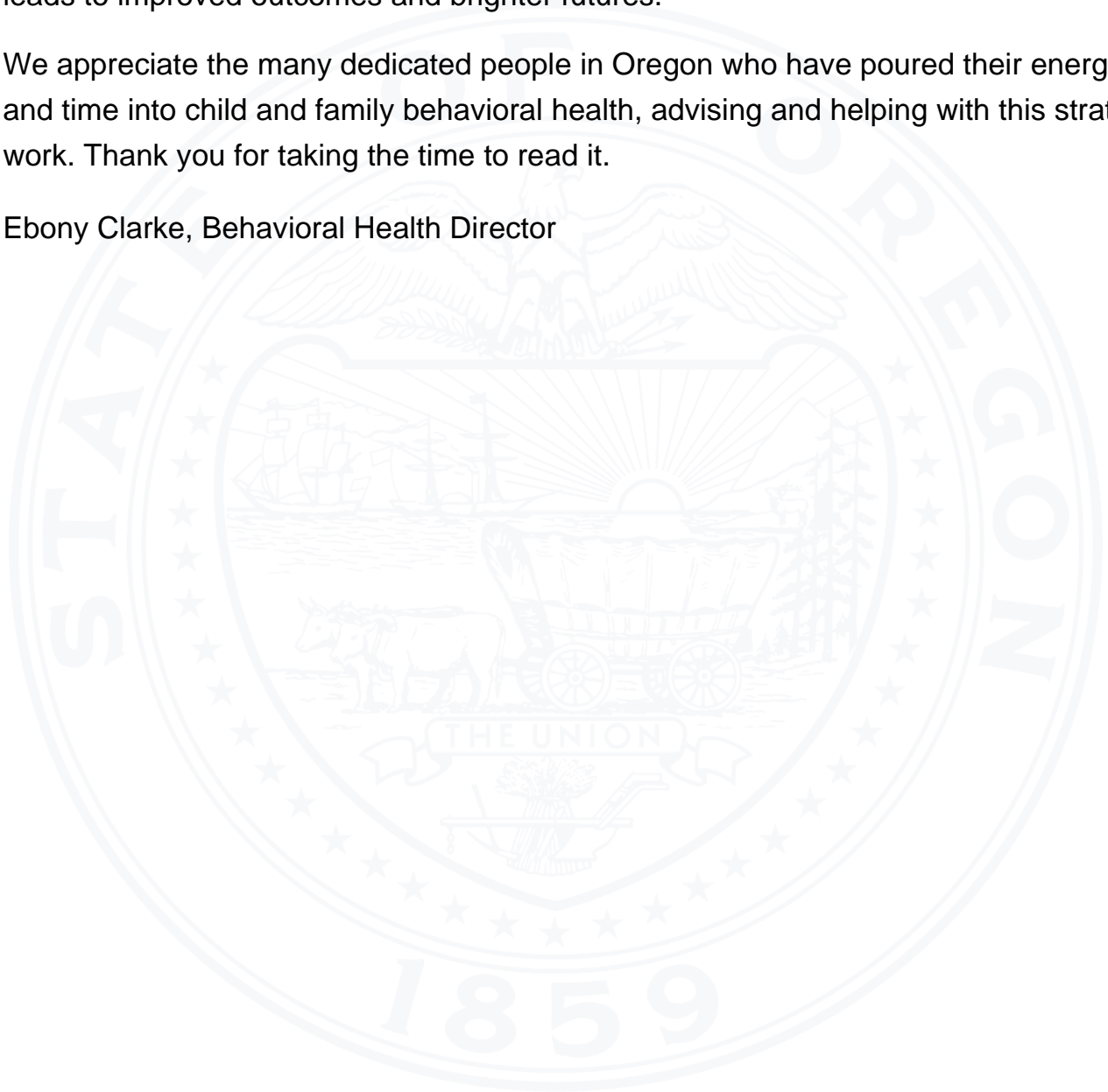
While this report closes out the 2020-2024 plan, our commitment to youth and their families remains firm. As we move forward, our work will continue to evolve to meet the needs of this population with the best available solutions. In late 2024, OHA released an agency-wide [strategic plan](#) that serves as the primary guide for us over the next three years. We will also continue our commitment to support and align with the System of Care Advisory Council's priorities and strategic plan.

As we move forward a dedicated focus on children, youth, young adults, and their family is essential to the long-term well-being of our communities. Nationally, [one in six](#) youth aged 6 to 17 experience a mental health disorder each year. Half of all lifetime

mental illness begins by age 17 and 75% by age 24. Providing strong behavioral health services for young people ensures earlier access to care and support, helping them better understand their needs and how to sustain their well-being. Over time, this leads to improved outcomes and brighter futures.

We appreciate the many dedicated people in Oregon who have poured their energy and time into child and family behavioral health, advising and helping with this strategic work. Thank you for taking the time to read it.

Ebony Clarke, Behavioral Health Director



Child and Family Behavioral Health Roadmap 2020 -2024 – Closing Report

Background

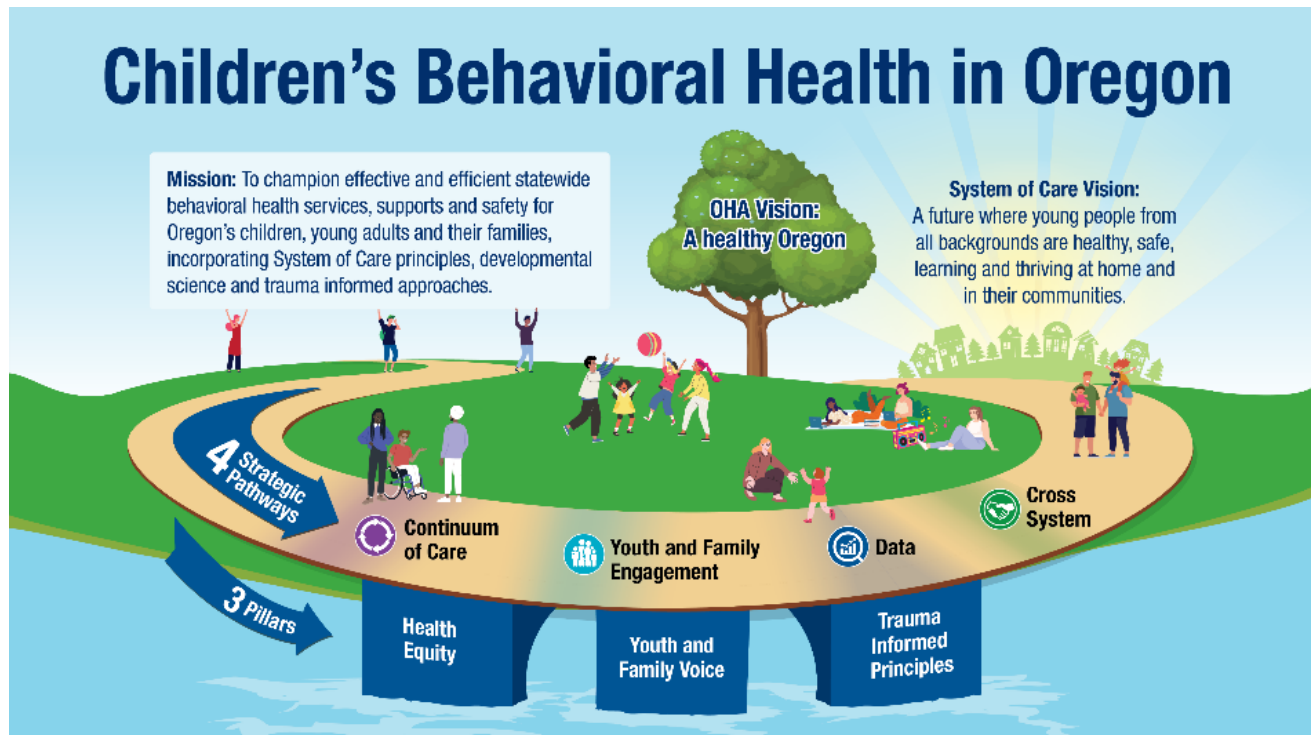
The [Child and Family Behavioral Health Unit](#) (CFBH), within the Oregon Health Authority (OHA) Behavioral Health Division, implements and manages Medicaid and other publicly funded mental health, suicide prevention, and substance use disorder services and supports for children, youth, young adults, and their families. Oregon's children's behavioral health system needs a full spectrum of effective supports from prevention to intensive acute care to be meaningfully responsive to the unique needs of each young person and their family. These services and supports are designed to address the needs of Oregonians from infancy through 25 years of age.

Guiding Our Work: The Child and Family Behavioral Health Roadmap

With the collaboration of youth, young adults, families, and community partners, we developed the [Child and Family Behavioral Health Roadmap 2020-2024](#) to guide our initiatives. Published in 2022, we have tracked our progress quarterly and shared updates through the CFBH Newsletter, [Holding Hope](#), and the [Roadmap website](#). The final progress report, covering January–June 2024, is now available on the Roadmap website.

Since then, OHA has released a broader strategic plan, aligning the Roadmap's efforts within its core pillars.

Roadmap Summary



OHA's CFBH work aims to center all youth and families and to demonstrate and promote trauma informed principles toward the goal of eliminating inequities in the continuum of care, and in policy formation in all of our current and future work. These pillars are described as:

Health Equity

All people can reach their full potential and well-being and are not disadvantaged by their race, ethnicity, language, disability, gender identity, sexual orientation, social class, intersections among these communities or identities, or other socially determined circumstances.

Center Youth and Family

Center communities of color, indigenous and Tribal communities, LGBTQIA2S+ community and other historically marginalized groups, in all work being done, incorporating meaningful youth and family participation.

Trauma Informed

Recognize that traumatic experiences terrify, overwhelm, and violate the individual. Trauma informed care is a commitment to not repeat these experiences and in whatever way possible, to restore a sense of safety, power, and self-worth. Traumatic experiences include abuse, historical, complex, and medical traumas, community disasters and many others.

These three pillars are the foundation for everything within the four **Strategic Pathways** in our roadmap:

Continuum of Care

OHA's CFBH work addresses gaps and quality in the children's behavioral health continuum of care centering communities that have been disproportionately impacted by health inequity and systemic racism.

Youth and Family

CFBH work continues to incorporate meaningful youth and family participation, with specific focus on centering communities of color, indigenous and tribal communities, LGBTQIA2S+,¹ and other historically marginalized populations.

Data

CFBH work centers health equity by making policy and program decisions based on accurate and timely data and in seeking data that assists in understanding health inequities.

Cross System

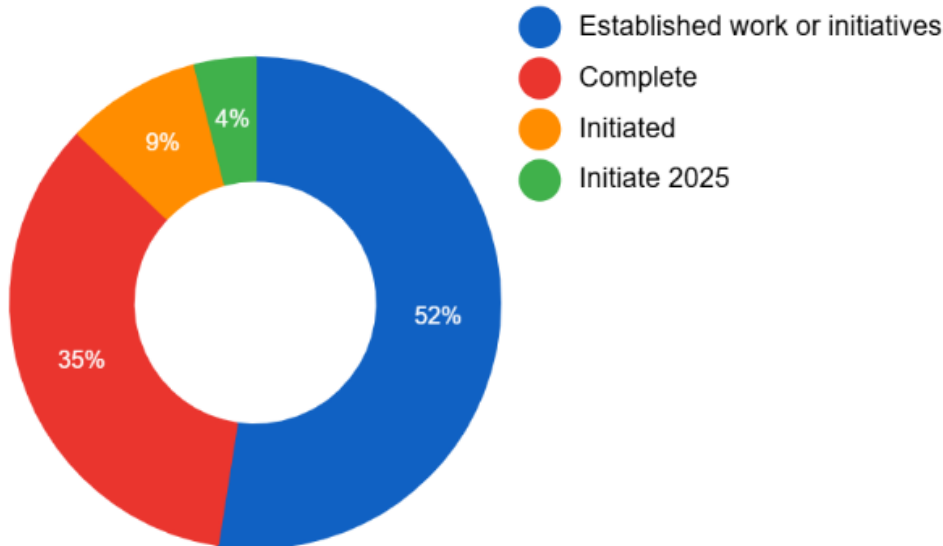
CFBH work supports and prioritizes cross system collaboration to improve the behavioral health continuum of care for youth and families.

Below these strategic pathways the work is further defined by associated strategies and milestones.

¹ Lesbian, gay, bisexual, transgender and/or gender expansive, queer, intersex, asexual, and two-spirit and the many other ways people identify

Implementation and progress tracking

Final Status of Projects, July 2024



Roadmap has served as a blueprint for CFBH's efforts, with progress tracked quarterly and posted to the Roadmap website. As of now:

- 35% of strategies or sub-steps have been fully implemented.
- 52% are now established work or initiatives.
- 31 different OHA departments have collaborated internally to advance these initiatives.

Key Achievements

Many system improvements have been generated through the work of Roadmap. Strategies have been both completed or become established work or initiatives with continuing activities.

Highlights include:

1. Strengthening the Continuum of Care

Our goal is to build and sustain a well-resourced system of behavioral health services that is accessible and equitably distributed across the state.

New programs have been established and are in the implementation phase

- [Intensive In-home Behavioral Health Treatment](#), providing community-based high intensity services.
- [Mobile Response and Stabilization Services](#), providing immediate help in a crisis and/or up to 72 days of stabilization services, is available across Oregon and linked to the 988 crisis line.
- [Expedited Assessment Services for Youth](#) (EASY), offering quick and complete psychological and assessment services, expanding from two demonstration sites to state-wide coverage by mid-2025.

Expanded access and services

- [Young adult in transition residential treatment homes](#) capacity will be doubled to 69 beds in 8 locations by end 2025.
- New psychiatric residential treatment service (PRTS) beds have been added, including specialized capacity for restorative services with Nexus and combined substance use disorder and mental health treatment at Madrona. A new 14-bed facility for ages 6 through 12 is set to open quarter 3, 2025 in eastern Oregon.
- A new referral capacity management system is now operational and provides ongoing [tracking](#) of Substance Use Disorder (SUD) and PRTS Residential Treatment.
- Suicide prevention investments increased availability of culturally specific suicide prevention trainings, programs, and Youth Suicide Intervention and Prevention Plan (YSIPP) initiatives. A full summary can be found on page 14 of the 2023 [YSIPP Annual Report](#).

Workforce

Through HB 2949 (2021) and HB 4071 (2022) historic investments were made in the Behavioral Health Workforce and more information can be found [here](#).

In 2023 OHA received funds for Oregon fellowship programs to increase the number of child and adolescent psychiatrists and developmental pediatricians. These opportunities will increase over the next few years, bringing more expertise and access to the field.

Educational opportunity highlights:

- Established the Annual Youth Substance Use Disorder Symposia – Specialized training to improve intervention skills.
- Annual Intellectual and developmental disability/mental health [conferences](#) - Promoting cooperation and connection between the mental health and disability communities.
- [Training Series on Eating Disorders](#) – Enhancing expertise in assessment and treatment for both providers and community.

Elevating Youth and Family Voices

CFBH remains committed to engaging youth and families in decision-making.

- Time for Families – A weekly listening session running since 2021.
- Families Leading Children’s Behavioral Health Systems – A monthly advisory group established in 2023.
- [Children’s System Advisory Council](#) (CSAC) – Undergoing restructuring to improve effectiveness.

Transparency of information and communication for children’s behavioral health has been enhanced with

- [Holding Hope](#) - A twice-monthly CFBH newsletter providing regular updates.
- [Roadmap Website & Reports](#) – Publicly available progress updates.
- Data Reports – Regularly shared with providers, families, and advisory councils.

Data-driven decision making

In April 2023 CFBH released a [compilation](#) of current data sources and performance indicators for most of the continuum of youth behavioral health services. A new report is planned for 2025. This includes a comparison of key national and Oregon data.

Dedicated CFBH capacity for data work has been established within OHA Health Policy and Analytics, along with a shared plan of work.

Reports have been publicly shared on topics that include the Youth Suicide Intervention Prevention Program, emergency department utilization, top diagnoses, for individuals and costs.

Data transparency has been provided through community conversations, webinars and feedback.

Cross System

CFBH leadership is working closely with leadership from Oregon Department of Education (ODE) and Public Health to create consistent planning and language for student mental health, build trauma-informed practices in schools, and collaborate across agencies to provide supports for students.

There is monthly coordination between ODE and OHA suicide prevention teams. ODE submits and tracks youth suicide prevention initiatives on the YSIPP. In fall 2024, a [joint Call to Action](#) was released around suicide prevention.

OHA and Oregon Department of Human Services (ODHS) partners meet regularly to collaborate on issues including foster youth in temporary lodging and PRTS residential treatment service capacity and expansion projects. One output of this is the 2024 annual [update on children's psychiatric residential facility capacity](#).

OHA and ODHS Office of Developmental Disability Services (ODDS) are partnering to better implement Home and Community Based Services for adults and children, address recommendations in the [SB 5529 Report](#) and collaborate on SB 1557 (2024) implementation. OHA will continue to build out the cross-agency collaboration and initiatives for children experiencing intellectual or developmental disabilities and more clearly map this out in 2024-2028.

OHA is working with the Alcohol and Drug Policy Council (ADPC) and the Oregon Council for Behavioral Health. OHA meets quarterly with both these entities and continues collaborating to help improve the Youth SUD System of Care.

Lessons learned

Among the many lessons learned during this process there are four key takeaways:

- The [Secretary of State Audit](#) was a catalyst for this Roadmap and the Roadmap plan was developed during the pandemic. Moving forward during crisis conditions slowed outreach and communication activities. It influenced priorities to focus on emergencies, especially around the availability of workforce.

- Feedback loops that connect back to contributors create transparency, completeness and grow trust.
- Community feedback, especially from minoritized populations, needs to be encouraged and increased to ensure the voice is carried into policy making. Learning how to listen to and center youth and families, engage our advisories and system partners is an ongoing challenge.
- Children's behavioral health extends beyond the CFBH Unit, requiring cross-division and cross-agency collaboration.

Next steps

The Roadmap organized and prioritized CFBH's activities. Over half of the strategies and steps are now established work or initiatives. CFBH is committed to ongoing implementation, monitoring and continuous system improvement.

We have started collecting feedback and collaborative planning for a new plan for children's behavioral health. This will be a part of the strategic planning frameworks of both OHA and the Behavioral Health Division. The work will fall into the five OHA pillars of

- Transforming behavioral health
- Strengthening access to affordable care for all
- Fostering healthy families and environments
- Achieving healthy Tribal communities
- Building OHA's internal capacity and commitment to eliminate health inequities

Our Thanks

A **huge** amount of gratitude is extended to all those that supported the development and implementation of this Roadmap and work to improve the lives of youth and families in Oregon. We would especially like to express deep gratitude and appreciation to:

- Children's System Advisory Council, System of Care Advisory Council, Alcohol and Drug Policy Commission, Families Leading Children's Behavioral Health Systems, Alliance to Prevent Suicide and other advisory groups;

- Peer contributors, including Youth and Youth Adult Engagement Advisory (YYEA) and Think Tank participants, Time for Family participants and Oregon Family Support Network;
- Community partners, including behavioral health providers, Coordinated Care Organizations, Community Mental Health Programs, local Systems of Care, the Oregon Alliance, and Oregon Health Sciences University;
- Child serving state agencies;
- The Uprise Collective, and Trauma Informed Oregon

Please continue to share feedback with OHA, follow our work in our monthly newsletter Holding Hope, and look for our ongoing strategic planning and reporting. We appreciate all the many people who make up the children's behavioral health system, inclusive of children, youth, young adults, their families, our providers, CMHPs, CCOs, legislators, and concerned citizens.

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact the Child and Family Behavioral Health unit at kids.team@oha.oregon.gov.

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