



Building a System of Prevention: A Foundation for the Future

Why Prevention

Research has shown that a prevention-oriented approach can have an impact on our quality of life by reducing criminal activity, drug and alcohol abuse, unwanted teen pregnancy, childhood obesity and its related health impacts, drop out rates, bullying and suicide.

Early Childhood Investment

Every \$1 invested in early childhood development programs creates a return on investment of \$7.14. Every \$1 in program cost nets a return of:

\$1.98 from a reduction in crime

\$1.08 from increased tax revenues

\$0.67 from a reduction in special education and grade retention

\$0.12 from reduced child welfare costs

\$3.29 to the program participants realized as increased earnings

= \$7.14 of public and individual benefits.¹

Children left out of quality early childhood programs are five times more likely to commit a crime by age 27 than children who do attend pre-kindergarten.²

For each child who attended pre-kindergarten, school systems could save between \$2,625 and \$4,385 over the child's K-12 education resulting in reduced special education costs, high teacher satisfaction and less teacher turnover, and reduced spending on in-school safety and security.³

Child Abuse Prevention

Youth who experienced maltreatment during childhood are significantly more likely to be involved in serious violent delinquency or drug use and get pregnant as a teen.⁴

They are arrested 4.8 times more often for juvenile crimes.⁵

Brain imaging surveys show that child abuse and neglect can cause permanent damage to the neural structure and functions of the developing brain itself.⁶

Bullying Prevention

Fairfax County Youth who report that they have been bullied are far more likely to report that they:⁷

- Have carried a weapon
- Have used drugs, alcohol, or cigarettes in last 30 days
- Were lonely or depressed
- Have considered suicide

Substance Abuse Prevention

Every \$1 invested in Substance Abuse Prevention can save as much as \$5.60 in costs for health care, law enforcement, and incarceration.⁸

Obesity/Overweight Prevention

24 percent of Virginians are obese and 35 percent are overweight,⁹ and 15 percent of Fairfax County children ages 2 to 18 are overweight.¹⁰

More children are being diagnosed with weight-related diseases such as diabetes and hypertension. These problems are likely to continue into adulthood.¹¹ In 2003, Virginia's direct obesity-attributable health care costs reached over \$1.6 billion.⁹

Beyond the health consequence of childhood obesity, research has shown that children who are overweight are often victimized by their peers and are more vulnerable to depression, anxiety, and low self-esteem.¹² They are also more likely to perform poorly in school.¹³

Teen Pregnancy Prevention

National statistics show that high school students report that 46.8 percent of them have had sexual intercourse. Of the total number surveyed, 67.6 percent of the black teen population has had sexual intercourse.¹⁴

Teen mothers, compared with their peers who do not have children, have lower incomes, are less educated, and are more likely to receive public assistance.¹⁵ Fathers are more likely to abuse drugs and alcohol, and they achieve fewer years of schooling.¹⁶

Children of teen parents, compared to peers with older parents, are less healthy with higher rates of low birth weight, more childhood health problems, and more hospitalizations.¹⁷ The infant mortality rate is significantly higher.¹⁸ Children born to teen mothers are also at greater risk of social behavioral problems and lower intellectual and academic achievement.¹⁹

Suicide Prevention

Suicide and suicide attempts exact enormous tolls in terms of loss of life, physical impairment and medical costs, grief and suffering, and disruption of families and communities. Suicide is the third leading cause of death among young people aged 10-24 in Virginia. On average, two Virginia youths die each week from suicide, 97 in 2004 alone.²⁰ In Fairfax County, 15 percent of surveyed youth report considering suicide.⁷

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