Vote YES HB 3178

All children deserve immediate, expert intervention when there are concerns of abuse

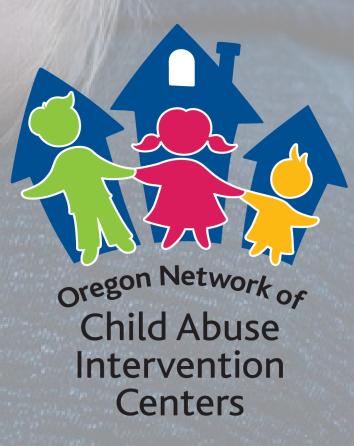
The challenge



The gap and impacts



- Child abuse without intervention leads to poor health and economic outcomes which impact all Oregonians
- Child Abuse Intervention Centers (CAICs) stop abuse, collect sound evidence, and provide immediate trauma-focused therapy and referrals for the child and supportive family members
- Statute requires children have access to CAIC medical assessments, regardless of their family's ability to pay
- Despite improved outcomes for kids when local investigations involve a CAIC, <u>state investment makes up only 17% of CAIC budgets</u>
- Centers employ highly-trained and specialized medical providers and forensic interviewers. When untrained or unpracticed providers assess children, especially young children, we risk further injury and in some cases, even death. Interviews done without specialized training can also jeopardize a successful prosecution.
- In 2017, 32,000 investigations were completed in response to abuse allegations, and less than one in four kids received CAIC services²





• **The risk of lack of investment is too high** and affects children facing similar circumstances as those we are currently serving ----

Here's who we served in 2018

39% or 2,727	37% or 2,610	24% or 1,707
0-6 year olds	7-12 year olds	13-18 year olds

45% served for concerns of sexual abuse, 36% physical abuse, 10% witness to violence, and 9% neglect. 7% also reported drug endangerment.

Reaching more kids



Increasing direct funding to CAICs by only \$6M, will mean that more children each year will receive the medical assessments, forensic interviews, and opportunities for healing they deserve (a 15% increase).

After this investment, 29% of CAICs budgets would be state supported, representing a big step forward

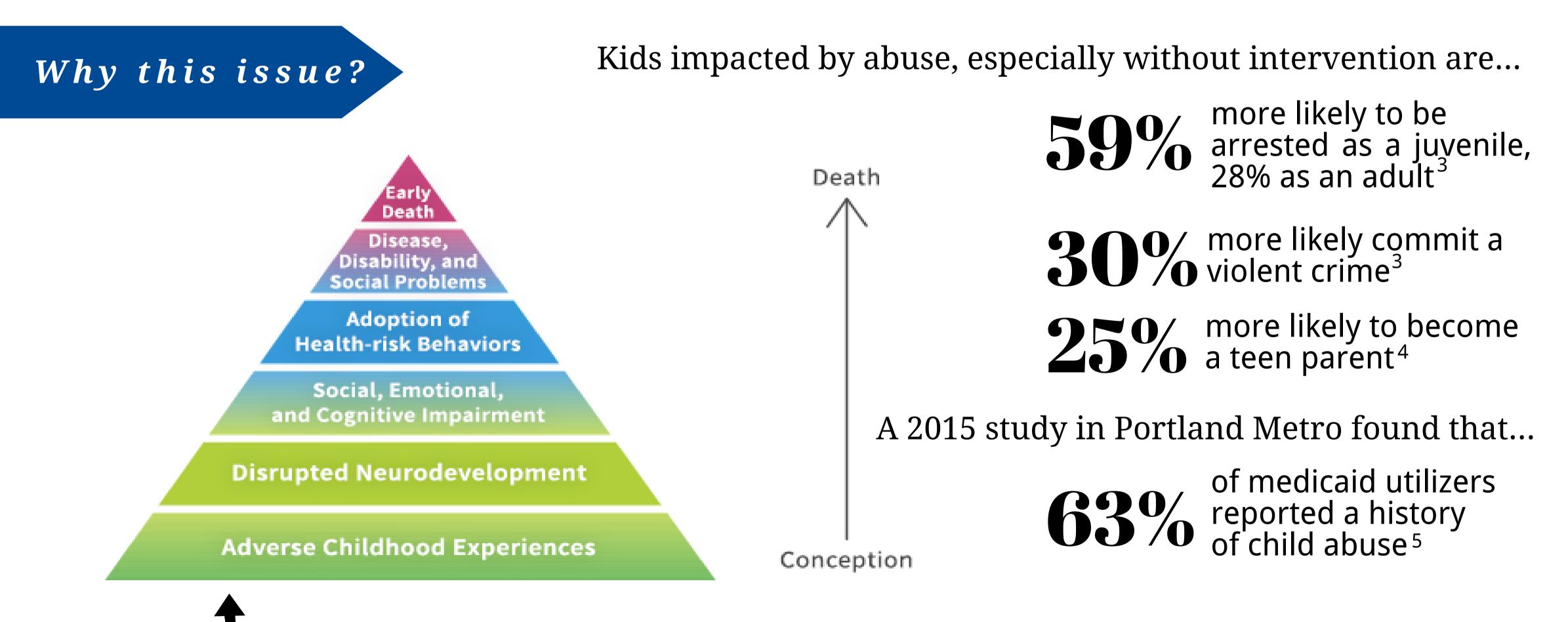
for kids needing these services in Oregon.

Distributed by

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Child abuse concerns make up most adverse childhood experiences, which lead to some of Oregon's most cruel and enduring problems

The most recent estimate of the lifetime cost of child abuse is over \$210,000 per person.⁶ Without intervention, 2017's confirmed victims alone could cost Oregon 2.3B. Helping youth enter adulthood protected, hopeful, and healing should be one of Oregon's top priorities.



Why CAICs?

CAICs intervene and reduce trauma, giving kids a better chance at a happy, healthy adulthood. 24 CAICs serve all 36 counties and require local buy-in to form and lead each community's child abuse response. They have strong partnerships with law enforcement, child welfare, schools, medical providers, and community-based nonprofits. CAICs are poised for increased services and growth, and want to serve more kids. For a stronger future, Oregon needs strong CAICs.

CAICs are also connected to rich resources, like the state chapter, national leader organization, and network of over 880 CAICs nationwide, which means <u>investment</u> is backed with cutting edge best practices. **Research has shown that:**

Involvement with a CAIC increases successful prosecutions, <u>ensuring</u> justice and protecting children from future harm⁷

CAICs have been shown to save up to \$1,000 per case⁸

CAICs use trauma-focused cognitive behavioral therapy which has been shown to reduce symptoms of posttraumatic stress disorder, in less visits than other models ⁹

Partners supporting our 2019 ask

211Info

American Association of University Women of Oregon Catholic Community Services, Mid-Willamette Valley Causa Children First For Oregon Children's Health Alliance Clackamas Women's Services College Possible Foster Homes of Healing Kinship House NARAL Pro-Choice Oregon Neighborhood House New Avenues for Youth Open Adoption & Family Services Oregon Abuse Advocates & Survivors in Service Oregon CASA Network Oregon Primary Care Association Oregon Trial Lawyers Association Oregon Women's Rights Coalition Prevent Child Abuse Oregon Somali American Council of Oregon

(1) ORS 419B.022-024, ORS 418.782 (2) Child Welfare Data Book, 2017 (3) Safe Horizon, 2015 (4) Child Welfare Information Gateway, 2013 (5) Health Share, 2015 (6) Centers for Disease Control and Prevention, 2012 (7) Miller & Rubin, 2009 (8) National Children's Advocacy Center, 2005 (9) Ramirez de Arellano et. al, 2014, meta-analyses