



February 8, 2021

Dear Chair Williams, Vice Chairs Leif and Ruiz, and Members of the House Committee on Human Services

Wally's House is the Child Advocacy Center for Curry County. Our county is rural and isolated. If we did not exist the nearest CAC is one and a half to two hours North, and our Regional CAC is 2 and a half to 3 hours the East. For a child to have the services, support and advocacy a Child Advocacy Center provides, it would mean a great inconvenience to the child's family should they have to travel out of the county to get what their child needs. In some cases it might not even happen.

We have only been a stand alone non-profit since July of 2019. Prior to that our forensic interviewing services were offered in the courthouse basement, and a satellite interview room in one of our police stations; with medical services being scheduled wherever the Public Health's Nurse Practitioner was working in the county. We have been steadily building to what a full service center should be. Karly's Law exams and DHS screenings health, dental and mental health screenings are now conducted at our building in addition to the forensic interviews Since 2015 we have served, on average, 40 children a year, inhouse. Our goal for 2021 is to add a mental health therapist to our staff and offer therapy to our clients as well as provide consistent, reliable therapy for children in DHS custody. Increased funding would make sure these services were better implemented and sustained.

Wally's House urges support for HB 2826 and increasing funding for Children's Advocacy Centers by \$6M over the biennium. There are over 20 Centers across the state, serving all 36 counties by providing services like medical exams and forensic interviews—as well as prevention services and follow up family services and mental health treatment for children who have concerns of abuse. Centers work in close collaboration with law enforcement, DHS, district attorneys, schools and other community partners during child abuse investigations, both to be cost-effective and because this model has shown improved outcomes for children.

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Our Mission: To provide compassionate intervention, assessment, and advocacy for victims and their families, while supporting a child-focused, community-based system of prevention and healing.

Most often, Centers receive referrals from law enforcement and DHS. By providing specialized child abuse expertise, Centers are a necessary resource for DHS caseworkers and law enforcement officers. Highly specialized medical providers at Centers serve to “rule in” or “rule out” child abuse, and forensic interviewers are trained to ask neutral, non-leading and developmentally-appropriate questions. While not all children who visit Centers have experienced abuse, or will disclose abuse, Centers are a necessary community resource that must remain accessible. When children cannot access a Center, the likelihood of misdiagnoses is higher, which can result in children remaining in unsafe situations or children being removed from their homes unnecessarily. When children don’t have access they may also experience more trauma, due to receiving service in police stations and emergency rooms, rather than a child-friendly setting designed specifically for them.

In recent years, the Legislature has made great strides in improving Oregon’s child welfare system— but, we must acknowledge that the success of DHS caseworkers is not possible without strong community partners providing them with the tools and expertise they need to be successful—including Centers. COVID-19 has added significant stressors. The closure of schools has impacted our ability to intervene early, which means that by the time a report is made and the child is seen at their local Children’s Advocacy Center, their abuse experiences may be more complex, repeated, and/or severe. It is also much more expensive for CACs to provide care in a manner that is COVID-19 safe. To add additional challenges for Centers, community fundraising has decreased —and now federal Victims of Crime Act funding is slated to decrease over the next biennium as well.

Even though Centers provide statutorily mandated services, engage in unmatched community collaboration, and are widely recognized as “best practice” for identifying and treating abuse, state funding for Centers makes up only 18% of budgets. A modest increase of just \$6M will increase state funding to 28%, and will directly increase access to these critical services. And, access is needed now---for the Centers that track referrals, during January – November 2020 only 55% of children referred to a Center were able to be seen in person.

Advocates working in the field of child abuse have agreed that the risk for abuse is much higher during periods of economic instability, stress, and isolation. Oregon’s Children’s Advocacy Centers must be prepared to address, assess, and treat children who have been victimized during this pandemic and the gap in services is unacceptable. We must ensure that child welfare has what it needs to intervene and keep kids safe and that our system of justice does not falter during a time period when those who prey on children have ample opportunity and even more secrecy. Investing 6M in Children’s Advocacy Centers

is urgent and necessary to accomplish both of these critical community needs, for this reason we urge your "YES!" vote on HB 2826.

Respectfully,

A handwritten signature in blue ink, reading "Jackalene J. Antunes". The signature is fluid and cursive, with a large initial "J" and a long, sweeping underline.

Jackalene J. Antunes

Executive Director