

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 was 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.

Sincerely,



Marvin J. Bermudez
Director



THE LIGHTHOUSE
For Kids

The Lighthouse for Kids

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The Lighthouse for kids 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.

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 do not 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.

“We make a living by what
we get, but we make a life
by
what we give.”

Winston Churchill