THE IMPACT OF CHILDREN'S ADVOCACY CENTERS IN VIRGINIA COMMUNITIES

I am the Executive Director of the statewide Chapter of Virginia's Children's Advocacy Centers and am speaking on behalf of our 17 centers, the members of the Multidisciplinary Teams of each center, and the child abuse victims who have or who will be victims of criminal acts committed against them.

Children's Advocacy Centers (CACs) serve children under age 18 with reported sexual or severe physical abuse. The mission of Children's Advocacy Centers is to ensure that investigations of child abuse are comprehensive and that all services meet the age-appropriate needs of the child victim.

CACs develop community-government partnerships for child abuse investigations, treatment, and prosecutions. The core of the CAC operation is the Multidisciplinary team – without this team there can be no Children's Advocacy Center.

This MDT team in 40 of Virginia's cities and counties served by CACs has 50% composition in the government mandated investigators: police and sheriff's deputies and Child Protective Service workers, and the elected Commonwealth Attorneys whose job is to prosecute those who break the law. Each professional performs their unique job responsibilities working together.

The traditional approach prior to a CAC was that CPS conducts an independent interview, and law enforcement conducts theirs -now there's one interview. The Commonwealth Attorney can craft a more airtight case, offered a prosecutor, with one interview conducted and other investigators able to ask their questions through the forensic interviewer from the observation room. CACs provide (1) the child-friendly place for interviews, (2) a trained forensic interviewer if requested, (3) the audio/videotaping for DSS workers to meet their state requirements and for Law Enforcement to review with the Commonwealth Attorney.

The other 50% of the Multidisciplinary team members are medical – public or private providers; mental health therapists who may be affiliated with Community Services Board agencies; and Victim Witness workers – also in most cases part of the statewide prosecutorial branch of local government. These professionals provide the medical examinations, follow-up care of child victims, and the trauma-focused therapy. Victim Witness arranges referrals for these services. CACs organize this collaboration – it does not happen without ongoing communications, team building, and training – which is the unique, non-duplicative role in communities with Children's Advocacy Centers. These functions are the national standards set by National Children's Alliance, and all CACs must meet full accreditation within 5 years of operation or cannot be called a Children's Advocacy Center.

In fiscal year 2011 Virginia's 17 Children's Advocacy Centers served **3,733 total number of new children's cases** referred. Of this number **74% were sexual abuse outcries** and **16% physical abuse**.

Forty-two percent **(42 %) of these children were 0-6 years old**. Sixty-one percent- 61% - were interviewed on-site at CACs – rather than at the police department, or at the child's school, or even at the child's home where perhaps the abuse occurred and the abuser is in the next room.

Ninety-seven percent (97%) of these cases were reviewed at monthly Case Team Review meetings with all Multidisciplinary team members present (also a standard requirement), a function that the CACs organize and facilitate - and a substantial benefit for the child's needs

A police investigator observed that in contrast to the prior way of handling child abuse cases, "with the MDT there's an opportunity for us to share our cases." The difficult decisions are made by a team with all the facts.

Eliminating funding for Children's Advocacy Centers will result in (1) loss of coordinated and comprehensive services (2) loss of training paid by CACs for these government and public professionals (3) delay for child in receiving or total lack of availability of medical, therapeutic, or support services and (5) the loss of the cost saving amount of $1,318 per case when handled by the "best practices" model through Children's Advocacy Centers compared to the traditional approach – for a savings in Virginia in FY 2011 of nearly $5,000,000.

In Virginia a child dies as a result of abuse or neglect Every 8 Days. 1 in 4 girls and 1 in 6 boys will be sexually abused before their 18th birthday. Our children deserve the right to be safe in their communities and to have their criminal victimization validated by the court system.

Children's Advocacy Centers use "best practices" for collaboration of public-private partnerships to improve outcomes for the child, outcomes for court prosecutions, and outcomes for community safety. I respectfully ask that you consider the full restoration of funding in the amount of $931, 00 for Children's Advocacy Centers.

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