

CASA Seeks More Advocates for Foster Children

Last year in Columbia County, 182 children spent time in foster care. Fewer than one in five had an advocate to give them a voice in court.

"The system is full of compassionate lawyers, judges, social workers and foster families, but this intense need can strain the system to the point where they are simply unable to protect the rights of each child," said CASA executive director Kathryn Bourn. "This isn't just a problem. It is nothing short of a violation of their basic human rights, in a country where we aren't supposed to fear such things."

CASA for Kids, which serves foster children in Columbia County, is recruiting new volunteer advocates. A new training class for CASA advocates starts Oct. 20 in St. Helens. Volunteers receive 30 hours of training before getting assigned the child or siblings for whom they will advocate.

Volunteers come from all walks of life: teachers, business people, retirees, stay-at-home parents, millworkers, grandparents, college students, nurses, and other extraordinary men and women.

Columbia County currently has 15 volunteer

court appointed special advocates (CASAs) who work with 31 children. They make sure that the abuse and neglect that the children originally suffered at home does not continue as abuse and neglect at the hands of the system. Low caseloads for CASA volunteers mean the courts can make better decisions for children. They handle just one or two cases at a time so that they can give each child's case the sustained, personal attention he or she deserves.

"Our current CASA volunteers are doing a great job of serving the 20% of children with a CASA, but our community is failing the other 80% still waiting for an advocate," Bourn said. Bourn believes that serving every child in the foster care system is possible within the next three years with enough community support.

The National CASA Association recently awarded CASA for Kids a \$41,000 new program development grant to support its efforts to sustain and expand the program in Columbia County. "The grant is a key part, but we also need people to come forward and advocate for the best interests of our foster children," Bourn said.

"For people who cannot commit the volunteer hours necessary to be CASA advocate, we also need volunteers to help out the organization in many other ways," Bourn said. CASA for Kids also needs non-advocate volunteers to serve on its board, help with fundraising, and assist in the office.

The local nonprofit organization is part of a national movement to protect the rights of foster children. In 1977, a family court judge in Seattle created CASA to train and support volunteers from all walks of life to speak out and act as advocates for the best interests of abused and neglected children.

Judges, attorneys, child welfare workers and parents overwhelmingly report that volunteers make a difference with the children they serve. CASA volunteers are highly effective in getting their recommendations accepted in court, and their reports lead to a higher number of services being ordered for children and families.

A child with a CASA advocate is:

More likely to be adopted and find a safe,

continued on page 11

Providence Clinic Leaving Vernonia *continued from front page*

Astoria.

But in August 2011 the VHCB received notice that they would not be a recipient of that FQHC grant funding.

In the wake of the failure to receive FQHC status, and with Providence intending to leave Vernonia, the VHCB is now exploring other options of how to service the citizens in the Vernonia community.

When asked why Providence is going ahead with plans to discontinue medical service in Vernonia, even though they have been invited by the VHCB to stay, Walker provided the following response:

"The board came to the decision

to pursue FQHC status, and Providence has been supportive of that decision. That process created some uncertainties for Providence as we continued to operate the clinic while the board went through the FQHC process. We were unable to recruit a full-time physician, given the open question about the future operation. Filling other staff positions was also a concern. Providence had to take some extraordinary steps, including bringing in staff from other areas, to keep the clinic open. Those steps are not sustainable in the future. As the board continued to pursue other options for operating the clinic, it became apparent to Providence that providing services

beyond this year simply was not possible."

The statement from Providence continues, "We also know that the clinic location itself is not sustainable. It operates in a building that continues to face the danger of floods. Providence spent significant dollars in protecting the building during the big flood – and again during another major flood warning. Providence also spent significant dollars to move the clinic to a temporary location to continue providing services during the flood. It would not make sound financial sense to protect this building again in the case of another flood or flood warning."

Heather Lewis, who has been

assisting the VHCB in an advisory capacity in their attempts to move the clinic out of the flood zone, says the VHCB is currently having conversations on several fronts to figure out what will happen when Providence leaves Vernonia on December 31, 2011. "We're not sure what that model will look like and it is premature for us to name who those partners might be at this time," said Lewis.

The flyer Providence is handing out to patients in Vernonia states that they will be sending a letter to their patients by October 1st to outline the changes taking place.

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