

Children's Voice

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CHILD WELFARE LEAGUE OF AMERICA

NOVEMBER/DECEMBER 2006



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- CWLA's Katrina Kids Fund
- Postadoption Services
- Setting Rules
- Wraparound Services



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Children's Voice

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Executive

DIRECTIONS



CHILDREN 2006

of these areas, and must do so in a difficult economic environment, but I believe my time with the League has moved us through the initial changes necessary to modernize how we operate as an organization. The stage is now set for us to accomplish much more on behalf of our children.

In this regard, my tenure at CWLA has been both about transition and moving forward. Having made so many changes, including the infrastructure development noted above, along with a multisystems program focus with child welfare at its core, an increased number of ways to connect with our membership, and more targeted and creative advocacy approaches, CWLA is now ready for a new set of eyes and perspective to further energize our work and build even stronger momentum.

I leave greatly satisfied with the work we have done for children, youth, and families in the child welfare system; our open and forthright acknowledgment and commitment to reconciling our work related to Indian child welfare; our raising the bar and success in focusing the nation's attention on youth transitioning out of foster care; the innovation and leadership we have shown in creating a platform at CWLA for multisystems work, including where child welfare intersects with mental health, substance abuse, and juvenile justice systems of care; the development of a research-to-practice and evidence-based approach to our work; and our relentless commitment to every abused and neglected child in the United States, and their need for safety, well-being, and permanence in their lives.

I reflect with equal appreciation on the opportunities I have had to get to know and work alongside so many wonderful, talented, and committed individuals in our member agencies and the rest of the field. You are a source of inspiration to the rest of us. I have learned so much from so many of you and hope to maintain these relationships in the future.

Finally, I leave CWLA having enjoyed and benefited greatly from the chance to meet and work with our Board members who have demonstrated a deep commitment to this organization's mission and acted on that commitment in an exemplary fashion.

I also must thank George Swan for his leadership and support during his current term as Board Chair, as well as to search committee leaders Rick Fleming and Ray Carpenter, and the Board as a whole, for bringing me to CWLA and giving me the honor and privilege of serving as its President and CEO.

Crafting this last column is just one of the many goodbyes I've made as I leave the League. But in reality, I know my path will cross again with many of my former colleagues and friends in child welfare. As I shut one door, I will simply be opening another in my work toward making the world a safer, kinder place for children.

Shay Bilchik

With this column I am bidding farewell to *Children's Voice* readers as I prepare to leave CWLA and steer my professional life in a new direction. I have enjoyed a remarkable tenure at CWLA and consider myself fortunate to have served in this prestigious and influential position over the future direction of the child and family serving field.

Following in the footsteps of the great child advocates who preceded me at CWLA was a daunting challenge, as was building on the work I had spent seven years putting in place prior at the U.S. Department of Justice. The result has been exhilarating highs and exasperating lows as we have experienced a number of triumphs as well as failures in our advocacy and in making children a higher national priority. A constant, however, has been the absolute pleasure of working with you in serving as a strong "voice" on behalf of the nation's most vulnerable children, youth, and families.

I am proud of the work of CWLA's extraordinarily gifted and committed group of staff. I've been fortunate to both lead and serve alongside them to maintain the League's role as the nation's premier advocacy organization for abused and neglected children. While the last few years have been a very trying time in an increasingly difficult political and fiscal environment, I have proudly witnessed the resilience and resolute commitment that my staff, our membership, and the field have demonstrated to the children, youth, families, and communities we serve.

CWLA staff, Board members, and member agencies have traveled a path over the past six years that has seen the League through significant changes. With the adoption of our first strategic plan in 2000 and the refocusing of our work across a set of goals and strategies, we brought the League's mission to life in a new way. I believe this invigorated our work and presented CWLA in a fresh light to the field.

We also undertook modernizing the League's infrastructure, and creating personnel practices, policies, and operating systems that reflected our needs. We have much left to do in each

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“Angel House” Combines Shelter and Assessment Center Under One Roof



When children are taken from their homes and into protective custody, their suffering often continues. Though out of harm's way, they are suddenly surrounded by unfamiliar faces in strange places. Angel House, a new model temporary emergency shelter and assessment

center in Mason, Michigan, aims to make the protective custody process less upsetting for these children.

“Angel House is so critical because children are so overwhelmed,” says Ingham County Sheriff Gene Wigglesworth. “They’re out of their comfort zone. They may have witnessed abuse or been abused by parents or strangers. Then they see police officers with guns. They’re scared.”

Angel House—a division of Child and Family Services Capital Area, a nonprofit community organization under the Michigan Department of Human Services—was specifically designed to provide child abuse victims with immediate protection and to expedite the investigation and prosecution of child abusers.

These dual functions under one roof make Angel House the first facility of its kind in the nation. The shelter provides a child-friendly safe haven; the assessment center provides evaluation, advocacy, counseling, and prevention services to meet the best interests of children and their families.

“Our community identified these two needs as the most important—the two areas where we were lacking services to children—so we combined them,” says Angel House Director Jerre Cory.

According to Cory and other child protection professionals, the effectiveness of Angel House lies in its team approach and child-centered, noninvasive assessment process. The multidisciplinary team includes specialists from Angel House, Children’s Protective Services, law enforcement, and the prosecuting attorney’s office. When law enforcement or Child and Family Services (CFS) receive a report of suspected child abuse or neglect, the multidisciplinary team is activated. The immediate, coordinated response makes it possible to quickly remove children from danger at any hour, interview and assess the child once, issue arrest warrants without delay, and build a stronger case for prosecution.

Before Angel House, children were interviewed wherever space was available, such as in a police station or empty jail cell. Children not immediately placed in foster care slept in a police car or on a cot in the CFS office. Today, children taken into protective custody—even in the middle of the night—are welcomed into a friendly environment, offered milk and cookies, given pajamas, and tucked into real beds with clean sheets.

“It’s good to know there’s a special place for these children to go that’s child-friendly and beautiful,” says Leann Holland, sexual assault nurse with Sparrow Health System in Lansing. “They just

lost everything—not like they had a whole lot to begin with. Kids don’t understand when they’re so little that they’re in an unsafe situation and that it’s not their fault. To see other kids happy and adjusting helps them realize they’re not alone.”

When a child is interviewed at Angel House, team members view the session from behind a one-way mirror and videotape it for evidence gathering. “Usually [the prosecuting attorney] wants the child to testify,” Holland says. “With the video equipment and some of the advanced [forensic examination] techniques we’re using, we’re hoping it keeps some of the children out of the courtroom, because it’s just so hard for them to face that offender...especially if it’s their parent.”

Angel House is expected to help 1,000 children—more than half age 5 or younger—each year from Clinton, Eaton, and Ingham Counties, an area of nearly 456,000 people. The emergency shelter operates around the clock, housing 16 children at a time, and staffed by qualified employees and trained volunteers. Children can stay in the shelter up to two weeks so workers have sufficient time to place them in the most appropriate environment.

The two-story, 10,000-square-foot building is designed to be cozy. The shelter area has a living room with a fireplace, kitchen, dining room, and patio. The assessment center includes the medical exam room, team conference room, crisis counseling intake area, and two forensic interview rooms. One interview room is designed for children, the other for teens. The second floor has four bedrooms for girls, four for boys, and a nursery. Bedrooms with multiple beds allow sibling groups to stay together. The lower level includes a recreation room and closets full of new clothes in multiple sizes, stuffed animals, and quilts. The backyard accommodates the Angel Train, a 32-foot wooden train activity center built and donated by local businesses.

More than 1,500 individuals and organizations helped plan the Angel House project over five years. Donations included two acres for the facility and 95% of the labor to construct the building. In all, as of December 2005, \$1.8 million of the project’s \$2.1 million price tag was raised through grants, donations, and volunteer labor. Angel House’s annual budget will be approximately \$700,000, most of it covered by state and county contracts, although donations are still being sought.

“We have a place to give children comfort, love, and attention,” Cory said during opening day ceremonies in December 2005. “We cannot change their lives. We can help them, we can refocus them, we can help them find their strength, and we can offer them comfort. And that’s where the words Angel House come from for me—the idea of surrounding, comforting, and holding children safely.”

Angel House was the inspiration of many individuals and organizations, including the Ingham County Family Court, the state Department of Human Services, Community Mental Health, St. Vincent Home/Catholic Social Services, Child and Family Services Capital Area, Ingham County Prosecuting Attorney, and the sheriff and police departments.

For more information, visit Child and Family Services Capital Area’s website at www.childandfamily.org.

—Submitted by Karen Giles-Smith, MS, RD, Mason, Michigan.

Developing Racial and Ethnic Identity Among Youth in Care

In July 2004, Casey Family Programs convened 30 people of varying races, ethnicities, and roles in the child welfare system to identify the knowledge, skills, and supports social workers need to address racial and ethnic identity formation for all youth in care. Issues of disproportionality and disparate outcomes for youth of color, the number of multiracial youth in care, and the proportion of cross-cultural placements added to the discussion's urgency.

"Race matters," says Chiemi Davis, a Child Welfare Administrator for Casey Family Programs. "We can't be afraid to talk about it. We must bring it to the surface."

Child welfare professionals are powerful potential resources and role models for youth in care as they go through the process of developing a healthy sense of racial and ethnic identity. When young people grow up in foster care—and especially when they grow up apart from their birthfamilies—they often lose their connection to their racial and ethnic heritage. They need to learn and practice the skills for developing multicultural competence, gaining pride in their own heritage, and facing racism and discrimination in society—something that applies for all youth, not just youth of color.

Participants in the Casey Family Programs meeting realized that to assist youth, workers must first arrive at some awareness of their own racial and ethnic identities. This realization formed the genesis of Casey Family Programs' Knowing Who You Are project, which embodies a three-part curriculum—a video, e-learning, and in-person learning.

The components of the *Knowing Who You Are* program comprise an open and empathetic experience. The video starts by raising awareness about the formation of racial and ethnic identity among youth in care. The online and in-person components fill in the framework of knowledge and skills child welfare professionals need to help youth achieve a healthy sense of identity.



In a documentary format, the video includes interviews and discussions with youth in care, alumni, birthparents, child welfare professionals, and resource families. Participants share their perspectives on the issue and the need to continually integrate identity development into child welfare practice. The accompanying study guide provides questions to facilitate group discussion.

The self-paced e-learning course lays the groundwork for helping child welfare professionals work with youth in this area. It includes opportunities to explore their own identities, assumptions, and biases while examining the realities of race and ethnicity within institutional systems in our society. The course develops a vocabulary for discussing race and ethnicity as a tool for developing identity and addressing racism and discrimination. It also illustrates ways

of integrating knowledge and skills into day-to-day practice.

Staff, youth in care, alumni, birthparents, and resource families participate in the two-day, in-person *Knowing Who You Are*



learning event. During the interactive training, participants hone the skills they've learned as they identify ways to integrate them into their daily child welfare practice.

Knowing Who You Are gives participants the tools they need to begin courageous conversations and model skills to help youth in care on their journey.

"Young people, social workers, foster families, everybody—we can't be afraid [to address this issue], because that's what is going to make a difference," says Pamela Maxwell, one of the original parent participants in *Knowing Who You Are*. "We have to take it one step at a time, but I know there is strength in everybody."

To order a free copy of the *Knowing Who You Are* video, or to access the e-learning at no charge, visit www.casey.org/ToolsandResources and click on *Knowing Who You Are*. In-person training events are offered on a limited basis; e-mail contactus@casey.org. 

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NEWS ROUNDUP

IDAHO

Insufficient education, low-paying jobs, early parenting roles, and high rates of juvenile incarceration all contribute to a grim outlook for Idaho youth, compared with other states, according to the recently released Idaho KIDS COUNT report.

“While seven out of eight young adults in Idaho were employed recently, many of these adults fail to earn enough to make ends meet, do without health insurance, and carry heavy debt burdens,” the *Bonner County Daily Bee* quoted Judy Brown, Director of the Idaho Center on Budget and Tax Policy and one of the authors of the report, which was compiled in partnership with Partners for Prosperity, an Idaho nonprofit organization.

Brown recommends policies be implemented to improve the earning power of Idaho youth and opportunities for better-paying jobs. In addition to raising the minimum wage, she is calling on a state earned-income tax credit and increasing the availability to education and job-access programs.

“These enhancements and transitions for more of Idaho’s young adults would be to the benefit of the young people themselves and to the rest of the state as well,” she told the *Daily Bee*.

Mining, utilities, and manufacturing are the state’s highest wage sectors for young adults, but these jobs are on the decline, while the lowest paying jobs in the service sector are expanding.

Brown also points out that young adults in Idaho are more likely to be married and to be parents than their counterparts elsewhere in the country.

INDIANA

Poor children in Indiana’s juvenile courts are not adequately represented in court and are more likely their wealthier peers to be incarcerated and on the taxpayers’ bill—\$40,000–\$100,000 annually per incarcerated child, according to the *Indianapolis Star*.

The findings are the result of a comprehensive review conducted by the

National Juvenile Defender Center and the Children’s Law Center in conjunction with the Indiana Juvenile Justice Task Force, which commissioned the study. The study found:

- About half of the 26,000 youth with juvenile cases go without legal representation. The rate is 80% in some counties.
- Courts don’t do a good job of explaining the consequences of not having an attorney.
- Public defenders are appointed too late in the process to adequately prepare a case.
- Many public defenders have excessive caseloads and inadequate resources.
- Schools and child welfare agencies overwhelm the court with children better served through community programs.

“If this was happening in any other country, Amnesty International and our government would be there condemning it, but we do it every day,” Larry A. Landis, Executive Director of the Indiana Public Defender Council, told the *Star*.

The study gathered its information through visits to courts and interviews with juveniles, parents, judges, and attorneys in 11 counties, said Juvenile Justice Task Force Executive Director Bill Glick. The report on the study’s findings, *Indiana—An Assessment of Access to Counsel and Quality of Representation in Delinquency Proceedings*, includes 11 recommendations for the legislature, county officials, judges, and attorneys to improve services for indigent youth.

The money spent to incarcerate juveniles could be put to better use, Glick said. “For \$40,000, you could hire another half-time public defender or send a kid to Harvard. If public defenders had the time and resources, and got involved in cases earlier, we could send more kids to intensive community-based services, get better outcomes, and save money, too.”

Elizabeth Kehoe, an attorney and one of the authors of the report, pointed out that Indiana is not unique. “Money and resources are a problem everywhere,” she said in the *Star*.

IOWA

Iowa is now one of only a handful of states that offers youth in foster care financial assistance when they age out of the system, as well as extended Medicaid coverage until they turn 21.

Last spring, Governor Tom Vilsack (D) signed into law a new state program called Preparation for Adult Living. Effective July 1, 2006, the program pays a stipend of up to \$540 a month for housing, food, transportation, and other living expenses for former foster youth who are in school or working full time. Youth must work with a caseworker to develop a budget plan. They are permitted to continue living with their foster family, but they cannot live with the parents from whom they had been removed.

To be eligible, the youth aging out of care must be 18 and graduate from high school on or after May 1 this year. About 550 youth in foster care turn 18 every year in Iowa.

Gary Stangler, Executive Director of the Jim Casey Youth Opportunities Initiative, told the *Des Moines Register* about 17 states offer financial assistance to kids aging out of foster care, and about a dozen states extend Medicaid coverage until age 21, but few offer both.

According to *USA Today*, Washington State enacted a law similar to Iowa’s early in 2006, as did Texas and Oregon in 2005, and New Jersey in 2004. Illinois, New York, and Washington, DC, also cover kids in foster care up to age 21, and Massachusetts and Connecticut do so until age 23.

OHIO

A new law affecting foster and adoptive families is requiring that children’s services agencies communicate with one another and conduct more thorough assessments when five or more children are placed in a home.

The law came in response to the cases of 11 special-needs children adopted or in the process of being adopted by Michael and Sharen Gravelle before authorities

discovered some of the children were forced to sleep in wood and wire cages, according to the *Toledo Blade*. Multiple agencies, working independently inside and outside Ohio, placed children with the Gravelles.

Specifically, the law

- makes it a crime for families to not report past involvement with child welfare agencies;
- requires a special assessment of adoptive homes with five or more children, and monthly follow-up visits until a court finalizes an adoption;
- creates a statewide adoption and child welfare information system into which agencies must report known or suspected abuse; and
- steps up training for caseworkers and potential foster and adoptive parents.

“When people are placing [children] in any particular county, now there will be a central agency keeping track of how many kids are in that home at all times,” State Representative Jeff Wagner (R) told the *Blade*. “When there are two placed from this agency and three from that agency, sometimes you just lose track, and this makes sure that somebody is keeping track.”

UTAH

Teens ages 16 or 17 can now seek emancipation from their parents, thanks to a new law signed by Governor Jon Huntsman Jr. (R). Under such status, the teens will be able to get housing, school, and other services independently, according to the *Salt Lake Tribune*.

The law is designed to benefit so-called Lost Boys—youth who have fled or been kicked out of their homes in a polygamous community in the state. Gay teens who have run away or been told to leave their homes are also likely to benefit, the *Tribune* reports.

“This is not about taking children from their parents,” the *Tribune* quoted State Representative Lori Fowlke (R). “This is about children who do not have parents who care for them.”

With the help of a guardian ad litem or other adult, the new law will allow teens to petition a juvenile court judge for

emancipated status. About a dozen youth a year are expected to take advantage of the law.

Over the past decade, the *Tribune* reports, hundreds of teens have reportedly fled from Fundamental Church of Jesus Christ of Latter Day Saints communities in Utah and Arizona, telling of parents and church leaders’ control over lifestyle decisions.

WASHINGTON

Washington is using semi trucks to advertise large posters of missing children in the hopes they will be seen by thousands of commuters and hopefully recognized by someone, the *Seattle Times* reports.

The initiative is part of the Washington State Patrol’s Homeward Bound program. The first trucks bearing the 90-inch by 90-inch posters hit the roads last spring, traveling nationwide and up and down the West Coast’s Interstate 5.

“This could really make a difference,” the *Times* quoted Trooper Renee Padgett, who developed the idea for the program. “We drive up and down the freeway every day.” Padgett hopes to equip about 200 trucks with posters to help find some of the 1,700 kids who are missing on any given day in the state.

David Shapiro, spokesperson for the National Center for Missing and Exploited Children, added in the *Times*, “Putting pictures of kids on trucks is a great idea. The broader the reach, the more people who actually see this picture, the better the chance that someone will know that child, have seen that child, or know what happened to that child.”

Truckers in other parts of the country have been pulled into efforts to find missing kids, including in Pennsylvania, where posters of missing children are posted in the Pennsylvania Turnpike’s 21 service plazas. Truckers have also been sent child abduction Amber Alerts and asked to watch for certain cars.

WISCONSIN

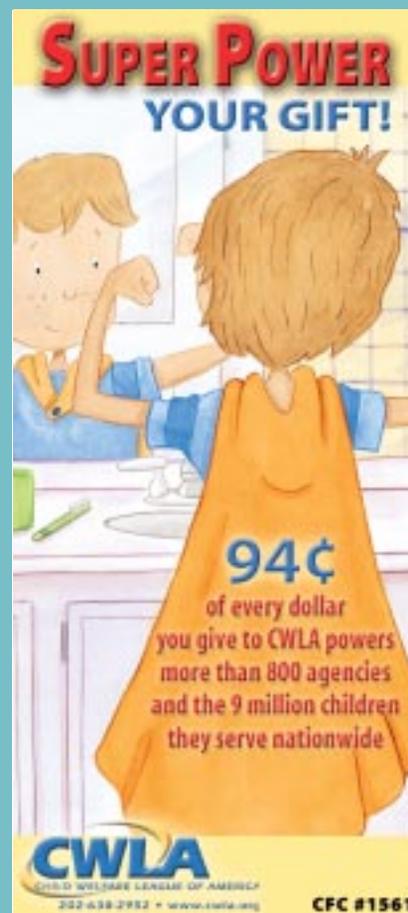
The United Way of Greater Milwaukee has formed a steering committee and is recruiting community members, including business representatives, to find possible solutions to the city’s problem of children having children, according to *The Business Journal of Milwaukee*.

Milwaukee is among the 10 largest cities in the United States with the highest teen birth rate—higher than rates in Atlanta, Chicago, Kansas City, and Los Angeles. Nearly 17% of births in Milwaukee are to teenage mothers. The national average is 12.1%.

According to Tim Sheehy, President of the Metropolitan Milwaukee Association of Commerce, Milwaukee’s high teen birth rate hurts in its competition with other cities to recruit new businesses because business executives consider the teen birth rate an indicator of work force development, social service costs, poverty, and crime.

“It is one of the statistics that challenges our ability to have a good business climate, Sheehy told *The Business Journal*. “We’re engaged in global competition with one arm tied behind our back.”

Other business-related problems cited in *The Business Journal* related to a high teen birth rate include the inability for businesses to expand in the Milwaukee area when there is a depleted work force, teen parents’ job performance can suffer because they cannot balance parenthood and work, and lowered business productivity. ✨



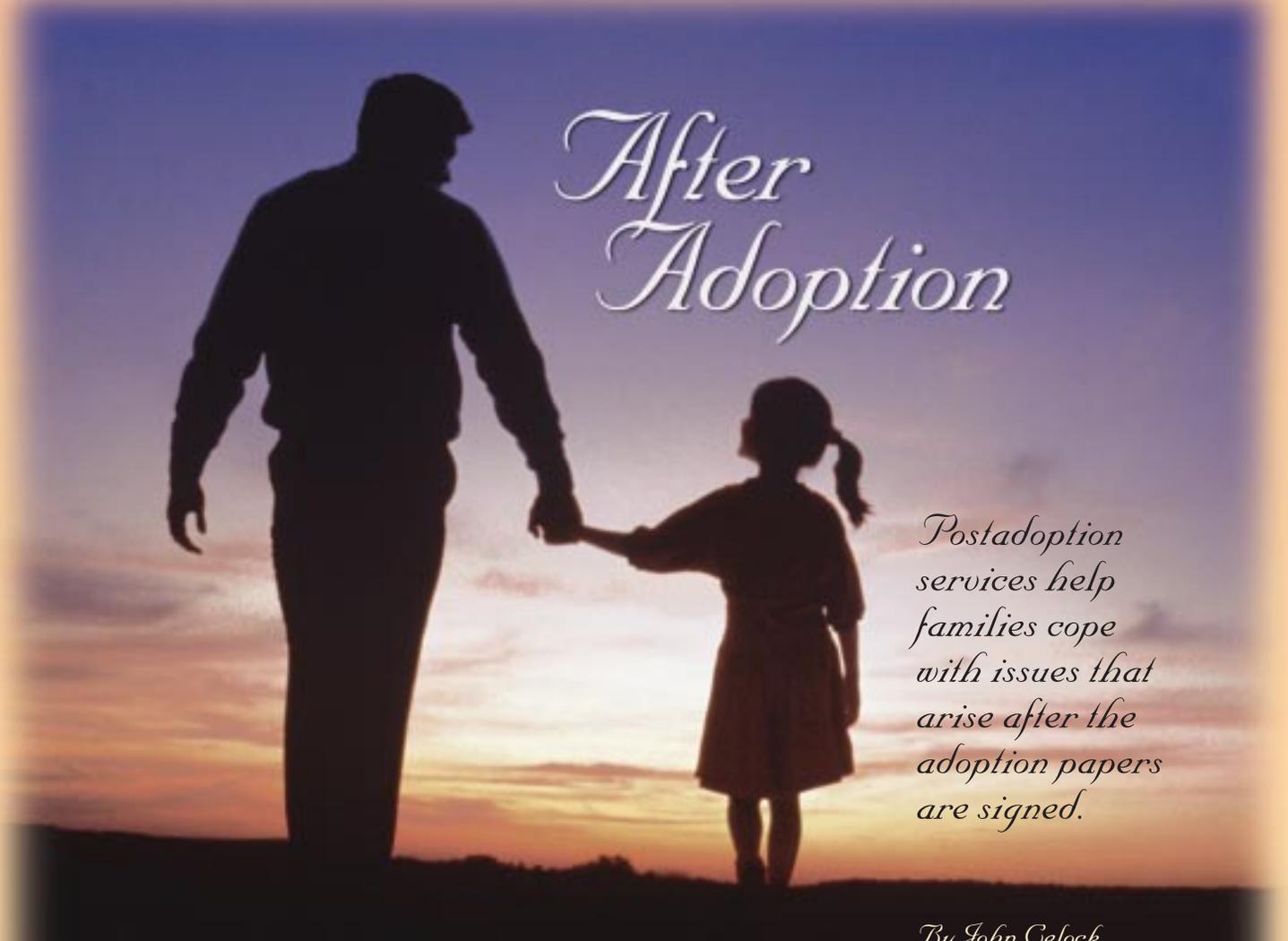
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After Adoption

Postadoption services help families cope with issues that arise after the adoption papers are signed.

By John Celock

After Barbara Dewey adopted three foster children into her Lincoln, Nebraska, home, a local postadoption support group was a lifesaver.

“[With a] history of abuse, and the number of placements, the behavior of the kids was berserk,” she says, noting instances of insomnia, temper tantrums, property damage, sexual acting out, and a 4-year-old with no speech. “Other people had worse weeks than I did. There was a lot of comfort in that. We had one family where the kid tried to burn the house down.”

A social worker referred Dewey to the group after the adoptive mother brought up some of the issues she was facing at home. During regular meetings, Dewey and her fellow support group members would discuss issues they were facing at home, along with how to navigate the Nebraska social services system. During these discussions, they would share common experiences and work on ways to deal with the issues.

In addition to talking and listening to each other for support, members would provide respite assistance, such as babysitting and doing chores, for other parents in the group who had taken ill. And each year the group would sponsor a clothes collection for foster families.

Some of the families had been members for 22 years, and most of their children were now grown, so Dewey’s group recently disbanded. But she still has many memories of the twice-monthly meetings, the pool parties, and the group outings, all designed to help the parents. “It [was] what you did the first and third Friday of the month,” she recalls.

Addressing Issues

Postadoption services are a growing aspect of the adoption profession. Recognizing the issues facing adoptive families are often different from those facing biological families, many adoption agencies and private groups have come together to formulate plans to address these issues.

A recent CWLA survey of private member agencies, found 94% of respondents across 39 states provide postadoption services, including support groups, crisis intervention, child and family advocacy, adoption searches, case management, family therapy, mental health treatment, respite care, and targeted case management. (See “Survey Examines Postadoption Services Among Private Agencies,” page 15.)

“As adoptive and foster parents, all of the challenges do not stop because a child is adopted,” says Judith Ashton, Executive

Director of the New York State Coalition for Children, a postadoption advocacy organization in Ithaca. "Adoption is a lifelong process, and families and children need support throughout the process."

Children adopted from the foster care system—many of whom are adopted later in life and after suffering physical, mental, or sexual abuse—face far more difficult and complex issues. The most common include attachment and adjustment problems, along with explaining the reasons for adoption to the children. For children coming out of foster care, families commonly deal with kids acting out and trust issues because of the children's histories. Many of these issues are common no matter the form of adoption—open, closed, foster care, international, or kinship.

"For some of these kids who are special-needs, they will need counseling on and off the rest of their lives," says Ada White, CWLA's Director of Adoption Services. Working as an adoption manager for Louisiana a decade ago, White recalls families falling apart because they couldn't handle the stress and cost of the mental health issues facing their newly adopted children.

"We didn't know a family was in trouble until they were to the point of filing for bankruptcy or wanting to give the child back to the state," she says. "At that point, there was very little the state could offer, because the family was not only bankrupt and wanting to give the child back, their marriage was in trouble and it's very hard to mend an adoption then. What the family needed should have been provided to them ahead of time."

The largest share of funding for postadoption services, White points out, comes from the federal Adoption Assistance program through Title XIX, which provides not only some financial assistance, but also covers some mental health and most physical health care needs for children adopted from the foster care system.

Many private organizations have formed postadoption support groups to bring parents together. These groups are often peer driven and moderated by their own members. New members are routinely referred to the groups by social workers and adoption counselors.

"Families that have shared experiences can be a lifeline," Ashton says. "You never have to explain why you did such a thing. We don't judge families. Breaking down that sense of isolation can be tremendously affirming."

In addition to the local support groups founded by adoptive parents nationwide, state and national advocacy groups have made postadoption services a hallmark of their work. The Collaboration to AdoptUsKids, for example, has awarded 35 minigrants annually over the past five years to parent groups nationwide and in Puerto Rico to support new and existing adoptive parent organizations. AdoptUsKids is a federally funded initiative of the U.S. Children's Bureau.

Support in Stearns County

With eight birthchildren and 15 adoptive children, Paula Dunham is no stranger to the adoption process. Of Dunham's five adoption experiences, one was international, and the other four were through the foster care system. Throughout her adoptions, she has been involved with, and a moderator of, the Stearns County Adoption Support Group, a private organization in Minnesota.

At least 15 parents attend each monthly meeting. Members represent every type of adoption, but most have adopted through the foster care system. The group allows parents to express their personal issues and share mutual experiences. Attachment issues usually dominate the conversation, but other issues include lying, stealing, oppositional behavior, hoarding food, and smearing feces on walls.

"Often the children have no trust of adults," Dunham says. "Why should they? The adults in their lives have done horrendous things to them."

Members have adopted children ranging toddlers to teenagers. Dunham notes that issues do change based on the age when the child was adopted, although some remain consistent no matter the child's age, and some carry through as a child ages. "Older children often are able to comprehend what's going on," Dunham says. "You can talk things out with the older children easier."

Dunham says her group also brings the children together to learn from each other and to get to know other children who have similar stories. A playgroup has been organized for the children, and parents have formed many friendships through discussing adoption issues. The teenagers also get together to hang out and share adoption experiences.

A Growth Area

Ashton notes the specialty of postadoption issues among social workers has led colleges several to establish postadoption curriculums for social workers. The School of Social Work at Hunter College in Manhattan is the first school in New York to establish a postadoption certificate program.

Geared toward mental health professionals who work in adoption, the noncredit-bearing 12-week program teaches the issues common to adoptive families, focusing on those who have adopted children out of a public foster care system.

The Hunter curriculum includes classes on current trends in adoption and foster care, how to design a treatment plan for families, the effects of abuse and neglect on children, and how to handle adoptive children's questions about their birthfamilies and why they were placed for adoption.

"Working professionals cannot plo p a biological family model on us and expect us to be a part of it," Ashton says. "I would like to see a version of the [Hunter] curriculum available to anyone in social work and where they are getting training."

In New York, a variety of public and private adoption agencies provide postadoption services. Many are funded by the state through its Temporary Assistance for Needy Families (TANF) grant from the federal government, which has been the focus of discussions between Governor George Pataki and the state legislature this year. According to Ashton, the services available in New York are not uniform and can differ from agency to agency across the state's 62 counties. She hopes Hunter's new program will bring uniform training and ideas to postadoption programs.

International Adoptions

Families who adopt children from overseas also encounter a variety of postadoption issues. Philadelphia Children's Hospital has created an International Adoption Health Program.

According to program director Gail Farber, when children arrive from overseas, they bring a variety of mental and physical health problems with them, including nutrition and attachment issues. Following initial examinations, follow-up exams are scheduled to assess each child's progress in the United States and to address postadoption issues in the family.

"When we look at infants and toddlers, often they are developmentally behind their peer group," Farber says. "Even those who come out of foster care have a loss of a caregiver."



As a part of its program, Children's Hospital has developed support groups for parents and children so they can learn from each other. In addition, the medical staff works with the children to address issues of attachment, abuse, abandonment, and the effects of living in an orphanage.

Farber says her staff addresses all of the issues the children face, not just a portion, as some programs do. "Few places look at these

kids holistically. We don't want to label the kids. They need services and an array of intervention. It's not all doom and gloom. We have been working with families who have been extremely resilient. International adoption produces families who are advocates. Some are bruised, but others will advocate for their kids."

Dispelling Myths, Building a Culture

"One thing I would like to do is dispel the myths of adoption," says New Jersey State Assemblyman Bill Baroni (R), himself an adoptive child.

Baroni's words ring true with many adoption professionals and adoptive parents. Some have said part of the postadoption process is to eliminate these myths to help children adjust into their circumstances.

Baroni, 34, was born to a young Irish woman who came to Florida to have him and place him for adoption. Adopted at the age of 6 weeks by a New Jersey couple, he has made adoption issues one of his priorities in the legislature.

Growing up, he says he has not faced many of the issues common among adoptive children, such as the desire to search for birthparents. He and his family did not participate in postadoption support groups, but did participate in other adoption related events during his childhood.

"I remember going to adoption events with Catholic Charities," Baroni says. "It was important to my parents in the 1970s. It was something to be proud of, but not talk about. My parents were afraid my birthmother would come back."

Noting he does wish he had his birthfamily's health records, Baroni has been working to create a health registry system for adoptive families in New Jersey, allowing adopted children to access their health records without otherwise tracking down their birthparents. This would address privacy concerns of birthparents who don't wish to be in contact with their children.

In addition, Baroni says he would like to build what he deems a "culture of adoption" in New Jersey. This would include more services for families throughout the entire adoption process, along with support during the process. His proposals are similar to what adoption advocates nationally have tried to implement.

As Ashton explains, "[For] adoptive and foster parents, all of the challenges don't stop because a child is adopted. Adoption is a lifelong process, and families and children need support throughout the process." 

John Celock is a freelance writer in New Jersey.

From CWLA Press



The Postadoption Experience: Adoptive Families' Service Needs and Service Outcomes

Item 10733, \$29.95

Foster care provider Casey Family Services commissioned several studies to examine fundamental postadoption issues, including determining what services are most effective, making services accessible to children and families, funding services, evaluating the services' effectiveness, and determining the direction for future research on postadoption services.



After Adoption: The Needs of Adopted Youth
By Jeanne A. Howard and Susan Livingston Smith

Item 8838, \$28.95

This book examines the experiences of more than 1,000 adoptive families to find out how they are functioning years after the adoption. It analyzes the risk and resiliency factors associated with adjustment and examines differences in adoptions by kin, foster parents, and those matched with children for the purpose of adoption.

To order these books or others on adoption from CWLA Press, visit www.cwla.org/pubs.

Other Resources

Creative Strategies for Financing Post-Adoption Services, A White Paper

Available from Casey Family Services at www.caseyfamilyservices.org/pdfs/casey_pafinancing.pdf.

Survey Examines Postadoption Services Among Private Agencies

—By Kelly Mack

In April 2006, CWLA conducted an Internet-based survey of its private agency members to gauge how many use postadoption services to support families and children who have recently completed the adoption process. Agencies that acknowledged providing postadoption services were also queried about the types of programs they offer—such as counseling, respite care, or emergency assistance—and how they fund these services.

CWLA collected 95 responses, from agencies in 39 states, to seven questions. Ninety-four percent reported providing postadoption services; the most common included support groups, crisis intervention, child and family advocacy, adoption searches, case management, family therapy, mental health treatment, respite care, and targeted case management. Some agencies also provide chemical abuse treatment, day treatment, and intensive in-home supervision, indicating a strong commitment to making adoption placements work.

Although some services are more common than others, agency creativity has also responded to professional experience and family requests. Agencies tend to create programs to meet the specific needs of the children and families they serve, whether the adoptions are domestic or international.

Examples of postadoption services noted by the survey respondents include

- adoption mediation and reunions,
- adoption registry,
- parent retreats,
- child support groups,
- parenting and adoption education,
- crisis counseling,
- information and services referral,
- emergency assistance,
- newsletters,
- lending libraries,
- birth land tours,
- international intermediary services, and
- marriage education.

The survey also notes unique services, such as social skills training, intensive in-home supervision, recreation therapy, and chemical abuse treatment.

Some agencies acknowledged funding postadoption services through state or county contracts. Thirty-five respondents

reported using contract money through the state or county child welfare agency to support these services. For the rest of the agencies, funding appears to be challenging. Thirty-six reported using funding sources other than public agency contracts to pay for their postadoption services. A few agencies have small grants from foundations to provide postadoption programs. Others use government

Postadoption Services Offered by Survey Respondents

Support groups	63	Adoption Resource Centers	28
Crisis Intervention.	58	Flexible Funding for Families.	23
Individual Therapy	54	Social Skills Training.	20
Child and Family Advocacy	53	Special Camps	20
Adoption Search	48	Intensive In Home Supervision	18
Family Therapy	48	Supplies and Equipment	13
Case management	45	Recreation Therapy.	10
Mental Health treatment	35	Day Treatment	9
Respite Care	35	Medical/Physical	
Targeted Case Management	33	Health Services.	9
Group Therapy	30	Chemical Abuse Treatment	7

funding, such as TANF, adoption incentive grants, adoption opportunities grants, Medicaid, state mental health funding, postadoption special service subsidies, and other public agency grants.

Some agencies charge families for postadoption services, using a sliding scale based on family income. Sixty-four agencies support postadoption services independently because they either don't have outside funding, or the funding doesn't cover the total cost of services.

"Albeit informally, this survey hints at the importance of postadoption services to agencies conducting adoptions in the United States," says CWLA Director of Adoption Services Ada White. "The survey results also indicate that funding opportunities are not as readily available as agencies need them to be in order to provide the services. But the agencies show great flexibility and tenacity in finding financial support in multiple arenas."

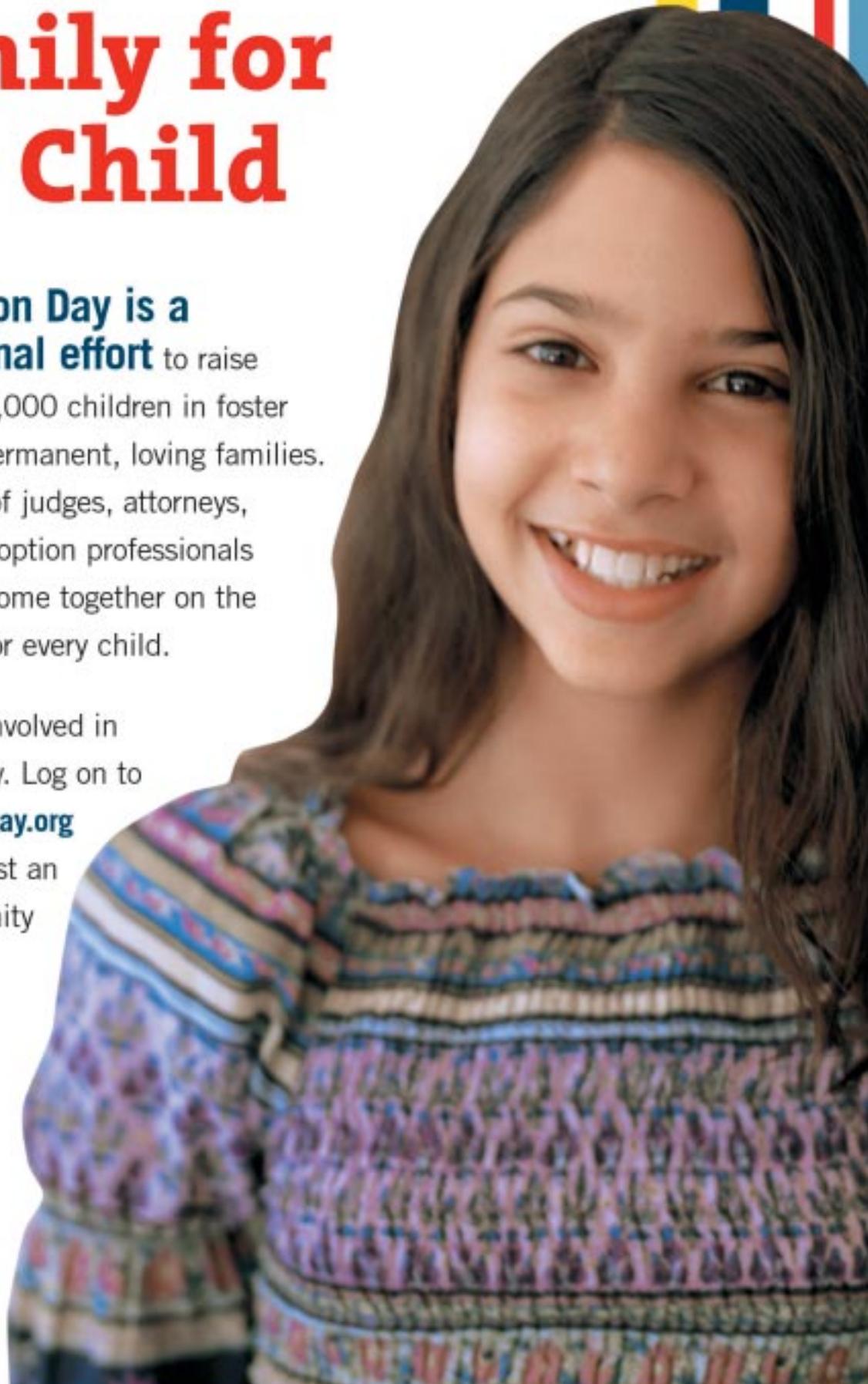
White adds, "Clearly, agencies value these programs in supporting families enough that they invest their own budgets in such services. Finding and increasing forms of financial support for quality postadoption services is something CWLA believes would be a value to all adoptive families and children."

Kelly Mack is Program Manager for Adoption Services and former Associate Editor for CWLA.

A Family for Every Child

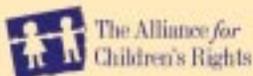
National Adoption Day is a collective national effort to raise awareness of the 119,000 children in foster care waiting to find permanent, loving families. Each year, hundreds of judges, attorneys, adoption agencies, adoption professionals and child advocates come together on the Day to find a family for every child.

We invite you to get involved in National Adoption Day. Log on to www.nationaladoptionday.org to participate in or host an event in your community and be a part of this special day!



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You Want Me to What? Read? Special Challenges for Middle and High School Students

By Sheldon H. Horowitz

The Truth About Reading

Some children seem to learn how to read with little or no effort, and often, to our surprise, with little or no formal instruction. It seems as though they intuitively understand the importance of the core components of reading (phonemic awareness, systematic phonics, fluency, vocabulary, and text comprehension) and are able to practice and apply skills in these areas with ease, becoming better readers as they are exposed to more varied and complex reading material and as they expand their general knowledge and core vocabulary.

For most students, however, reading just doesn't come easily. And more than three decades of careful scientific research has taught us that reading is not a skill (or series of skills) that is simply neurologically hard-wired in humans. We have discovered that specific learning disabilities in reading, such as dyslexia, for example, are influenced by genetic and environmental factors. Both appear to play a role in the development of reading, with one or the other more predominant. The challenge for parents and other care providers, educators, and school personnel is to identify signs of struggle in children as early as possible and ensure

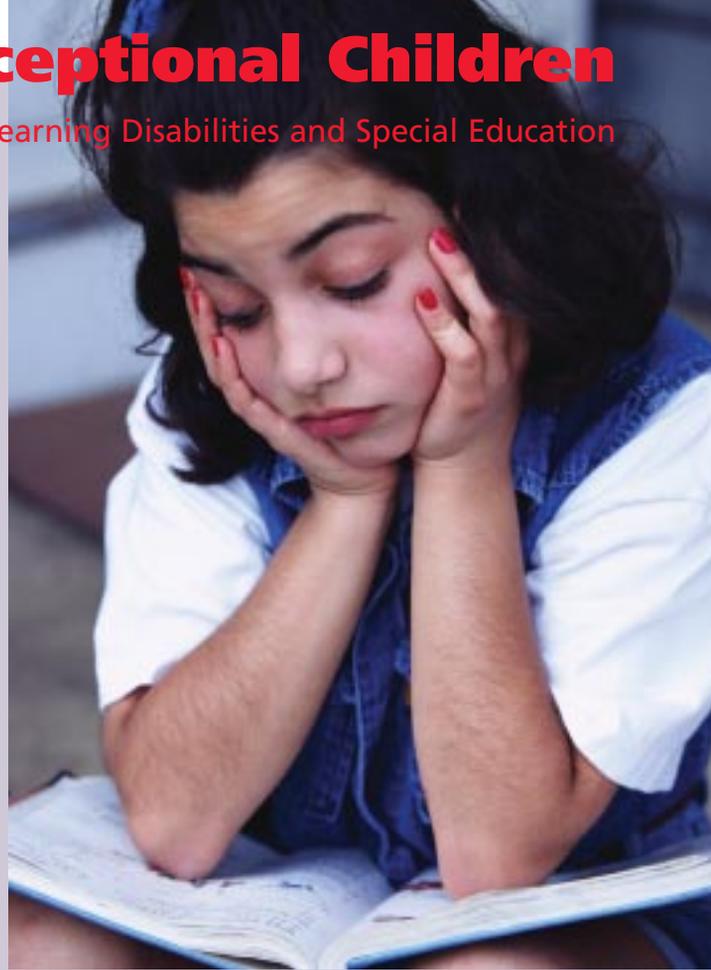
- classroom reading instruction is a skillful balance of teaching focused on word-level skills (phonemic awareness, decoding, etc.) and comprehension-building skills;
- children who struggle with reading, despite good instruction, are not left to fall behind without a plan of support; and
- children at risk for reading failure receive our best instructional firepower. To the greatest extent possible, we must validate tools and research-based strategies that are more intensive, more explicit, and more supportive than what children typically receive in the classroom.

Reading Problems: Here Today, Still Here Tomorrow

Recent years have seen a significant effort to draw attention to the critical importance of effective reading instruction, especially for students in the early school years. In most schools, students "learn to read" in the early grades and are then expected to "read to learn" as they transition into middle and high school.

So what happens when students don't achieve reading mastery during the early grades? The picture is not encouraging.

National Assessment of Educational Progress scores over the past few years suggest almost 40% of fourth graders read below the basic level, defined as "partial mastery of prerequisite knowledge and skills that are fundamental for proficient work at each grade." And if these students do not learn to read at or close to grade level by the end of elementary school, they enter the secondary grades unable to succeed in a challenging high



school curriculum and, unfortunately, rarely catch up by the time they are ready to graduate.

Today's teenagers are entering an adult world where reading and writing are essential skills for independence and success. Most well-paying jobs require high levels of literacy, and being a skilled reader is often a prerequisite for tenure or advancement in the workplace.

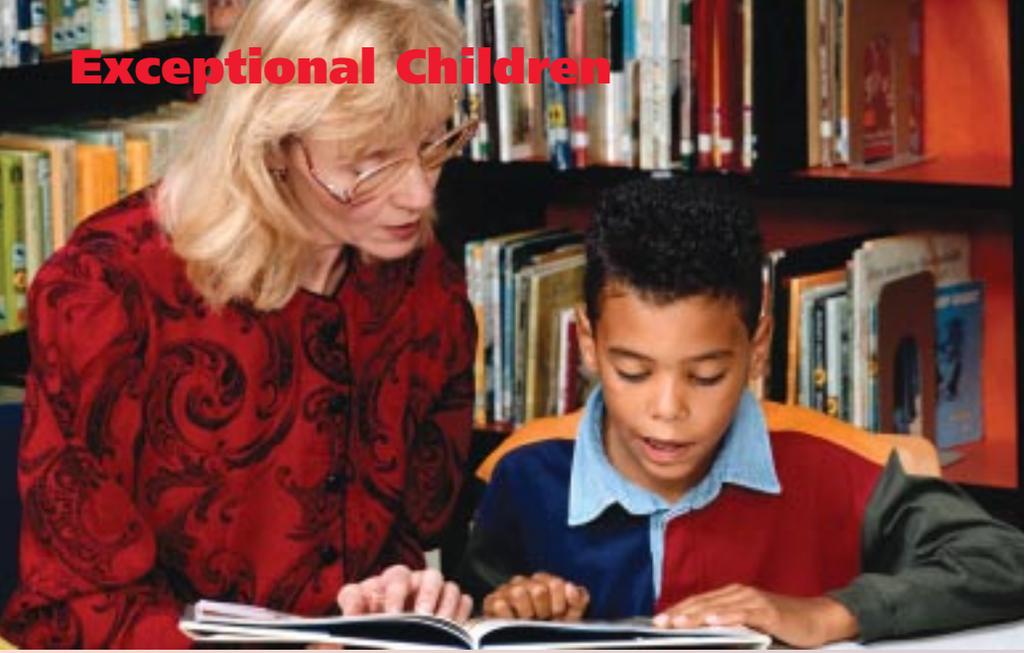
We also know how important reading is to running households, participating in community activities, and, in so many other ways, conducting activities of daily living. In a complex and sometimes dangerous world, the ability to read is crucial. Adolescents with low literacy skills are especially vulnerable for underachievement, underemployment, and threats to personal safety.

Many of these adolescents and young adults are lifelong remedial readers, all too familiar with the cycle of failure that, more often than not, typifies their earlier school years. Some have had been exposed to a number of different instructional programs, perhaps because of multiple transfers from one school or classroom to the next. Some have been labeled as needing to catch up but have had little or no formal instruction since the third or fourth grade, when teaching reading was no longer an educational priority.

The result of many years of frustration and struggle in reading is a student who gains little enjoyment from literacy activities, who more often than not also struggles with writing and spelling, reads slowly and with poor understanding, and does everything possible to avoid tasks that involve reading.

Approaches to Improve Reading for Adolescents

Although many instructional models are available to help students in the high school years to become more efficient, skilled readers,



- **click and clunk**, where students identify parts of a passage that are hard to understand and use four “fix-up” strategies;
- **get the fist**, in which students identify the most important information in a passage; and
- **wrap up**, when students ask and answer questions that demonstrate understanding as a way to review what was learned.

Students are assigned different cooperative group roles, such as Leader, Clunk Expert (the one who reminds the group of the necessary steps and strategies), Gist Expert, Announcer (the one who asks group members to carry out different activities), and Encourager.

research conducted specifically with this age group suggests four factors contribute significantly to building reading proficiency:

- **Students must be motivated to read and improve their skills.** Students often find it difficult for to admit their weaknesses and sustain positive effort, even with support, given ingrained feelings of embarrassment and hopelessness.
- **Students must be able to decode print.** This becomes increasingly difficult for many students, in part due to their having made incorrect assumptions about the alphabetic principle and how letters and sounds work; for others, decoding skills are so slow and labored that the mechanics of decoding interferes with understanding what is being read.
- **Students must be able to comprehend language.** Students whose reading is not “automatic” and fluid often need to focus their efforts on sounding-out or guessing at words, making it all the more difficult to check their understanding of the material as they read.
- **Students must be able to seek information and formulate personal responses to questions.** Efficient readers employ a number of different strategies to validate the assumptions they make about the material they are reading.

Descriptions of two successful models that have incorporated these four features follow. And they aren’t just for educators! Anyone working with students can use these strategies in a variety of instructional or recreational settings.

Collaborative strategic reading (CSR) was designed specifically for students with learning disabilities and those at risk of reading failure. The teacher uses four distinct strategies with the class and introduces and reviews any new vocabulary students will encounter that they might not be able to figure out during group activities and instruction. Once the teacher introduces the material to be read to the entire class, the students take charge and the teacher provides assistance and support as needed, then oversees a brief wrap-up activity at the end of each lesson.

The four strategies used in the CRS model are

- **preview**, in which students brainstorm about the topic and predict what will be learned before starting to read;

The strategic instruction model (SIM) was developed for students who already have basic decoding and word recognition skills. Students who struggle with early reading skills need to learn how to learn, and they benefit from classroom routines and strategies that help ensure they are learning critical content—the course material students need to meet educational standards) in ways that prepare them for class promotion, high school graduation, and success after graduation.

SIM’s focus is to promote effective teaching of this critical content. It helps teachers make decisions about what is of greatest importance and what classroom strategies are effective in helping students learn. SIM also introduces the skills and strategies that will help students succeed in postsecondary settings like college and the workplace.

SIM consists of a menu of components for students with learning disabilities, as well as instructional tools for teachers. Specific strategies related to reading include

- **paraphrasing** (students express main idea and details in their own words);
- **self-questioning** (students develop questions concerning reading passages, and read to find answers);
- **visual imagery** (students visualize scenes in detail); and
- **word identification** (students decode unfamiliar words by using context clues and word analysis).

SIM also offers a number of content enhancement routines to help teachers manage and present classroom content in ways that help all students learn. Some of these routines focus on

- **organization**, which helps students understand how information is organized;
- **understanding**, which helps students identify main ideas and concepts in reading;
- **recall**, which help students remember key information; and
- **application**, which helps students apply what they have learned.

Recommended Reading

This article was adapted from *Don't Give Up on Me! Teaching Reading to Secondary Students with LD*, which can be found, along with other Research Roundup columns, at www.ncl.org/index.php?option=content&task=view&id=878. Visit these online articles for more information about this topic and for a list of web resources, tips for families and educators, and more.

Evidence suggests that when teachers present these strategies in a systematic, intentional, intensive fashion, students demonstrate gains that enable them to perform at or near grade level.

Other Approaches to Help Struggling Readers

Research has identified a number of reading approaches as being helpful for working with secondary-level students who struggle with reading:

- **Fluency strategies.** Fluent readers model oral reading for nonfluent readers, and nonfluent readers repeat readings of text aloud.
- **Vocabulary strategies.** Students or teachers select vocabulary words, and students use the words in sentences or create visual images to help remember them.
- **Study guide strategies.** Teachers develop study guides to help students identify and understand key concepts in content area reading.
- **Literature-based approaches.** Students read stories, poems, and other material, then talk and write about what they read.
- **Reciprocal reading.** Students use specific strategies to help them increase their ability to monitor and improve their own comprehension.
- **Text mapping.** Students and teachers use four separate strategies to identify key concepts and understand relationships between key concepts in passages they read.
- **Vocabulary and concept mapping.** Students learn vocabulary words and concepts by creating a graphic representation of what they read.
- **Word analysis.** Students learn and practice ways to decode unfamiliar multisyllabic words.

No one approach is best—often, a combination of different approaches is necessary to help students acquire essential reading and literacy skills.

Want to know more? Visit the National Center for Learning Disabilities website at www.LD.org. 

Sheldon Horowitz EdD is Director of Professional Services, National Center for Learning Disabilities (NCLD), New York, New York. NCLD provides essential information to parents, professionals, and individuals with LD; promotes research and programs to foster effective learning; and advocates for policies that protect and strengthen education rights and opportunities. For permission to reproduce this article, or to contact Dr. Horowitz, e-mail help@ncl.org. © 2006 National Center for Learning Disabilities. All rights reserved. Used with permission.



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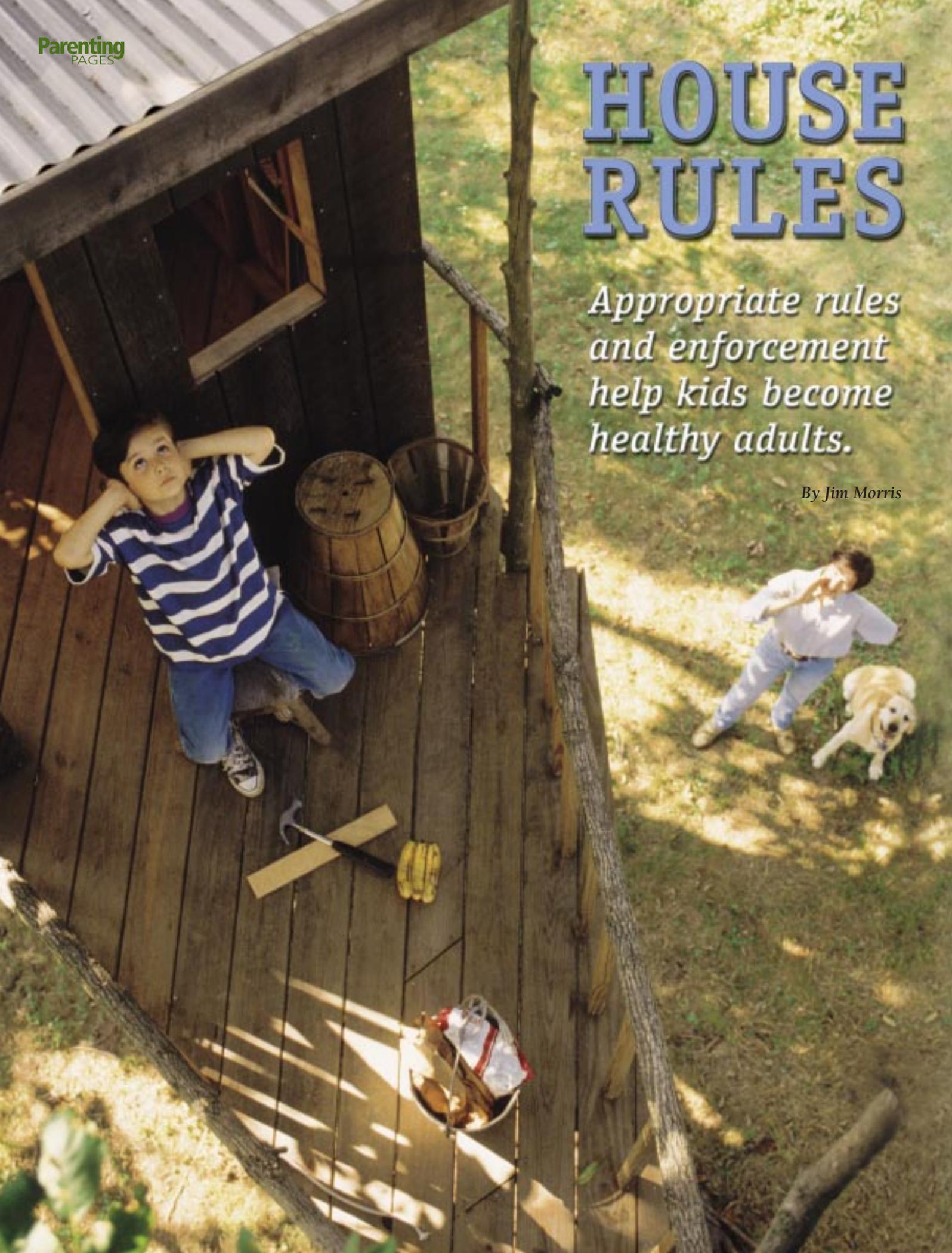
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HOUSE RULES

*Appropriate rules
and enforcement
help kids become
healthy adults.*

By Jim Morris



Parents often feel guilty when their children develop problem behaviors. If a child frequently misbehaves, the parents often feel it means they're not doing their job very well. A common parent complaint is that others—including professionals who deal with children and families on a daily basis—frequently point the finger first at parents for a child's emotional and behavioral problems.

Although parenting is extremely important, and it can be a factor in a child's misbehavior in many situations, the reality is typically far more complicated. In general, parents should probably receive less credit for children who turn out great, and less blame for kids who don't. Understanding the underlying causes of a situation might help people to better address it, but blaming oneself or others serves little constructive purpose.

Genetic and other biological factors influence children's behavior, and parents are not the only people from whom children learn. Friends, other adults, and the media also can influence children's behaviors.

People are born with different strengths and weaknesses. The good news is that what we make out of those strengths and weaknesses is up to us. Children with disorders like attention-deficit/hyperactivity disorder (ADHD) may need added support; on the other hand, having ADHD or another disorder in no way dooms a child to negative outcomes.

Each person has a range of possible outcomes, and this is where parents play a critical role. One way parents can help children make the most of life's opportunities and successfully face its challenges is through setting and enforcing appropriate rules.

With naturally compliant children, establishing rules can seem relatively easy. These children discern what is expected of them and largely try to please. A simple statement of disappointment might be enough to correct misbehaviors. With many youth, however, rule setting needs to be much more systematic.

Rules that are vague, inconsistent, excessively complicated, and open to interpretation can leave everyone in the family frustrated. Rules are easiest to enforce when they are realistic, clearly stated, reasonable, and appropriate to the child's age and development.

Here are some basic steps for effective rulemaking:

- Choose the rules you need. Less is more; generally, fewer rules are better than lots of rules.
- Clarify the purpose of the rule—to maintain safety, help teach responsibility, restrict antisocial behaviors, and so on.
- Choose rules that make sense in terms of the child's developmental status; 4-year-olds, for example, shouldn't be expected to cook the family meals.
- When possible, include the child in the process of creating the rule.
- Write the rule so that it's easy to understand but contains enough information that it's not open to interpretation, otherwise children will be tempted to resort to technical interpretations. ("But you said I had to be home; not in the house. I was standing outside.")

- When possible, write rules in the positive, stating the desired behavior. ("Do your homework before watching TV," instead of "No TV until your homework is done.") Sometimes, however, it may be more honest and direct to state a negative behavior that is to be avoided. ("No smoking!")
- Attach well-chosen privileges or consequences to the targeted behavior. Again, consider the child's developmental level, and, when possible, involve the child in selecting the privilege or negative consequence. A child is the expert when it comes to what motivates her.
- Focus on rewarding positive behaviors ("Do your chores, and you can go to the mall."), although using negative consequences for important behaviors is certainly acceptable. ("No alcohol, or you lose the car keys.")
- Never use basic needs, such as meals or affection, or prosocial growth activities, such as church, athletics, or volunteer work, as privileges or consequences. These should always be available to a child as long as he can safely handle them.
- If you use a negative consequence, try to relate it to the offense in some natural or logical way. ("If you don't put away your toys, you won't be allowed to take them back out for one day.")
- When granting a privilege, combine it with praise. ("Good job on your piano practice! You may have an hour of game time.") Deliver any negative consequences in an unemotional manner, however. Expressions of anger or disappointment aren't necessary—a well-chosen negative consequence speaks for itself.
- Be very consistent with the rules once they are in place.

Well-developed rules can take pressure off the whole family. The child no longer has to guess whether something might be allowed to slide or if it could result in a parental tirade. Parents should firmly but calmly follow through with the established rules.

Raising children is one of life's most important tasks, but it's the one with the least amount of formal training. Most parents learn through on-the-job training or follow what their own parents did.

When necessary, parents should seek additional support. Natural supports are best, such as extended family, the child's school, neighbors, churches, and the like. Sometimes, though, parents may face excessive challenges and need to seek professional support from external resources.

Raising children isn't easy, even in the best of circumstances. Whatever the causes of a behavioral problem, remember that people can change, problem behaviors can improve, and sometimes it just takes enough people providing the right kind of support to make sure it happens. 

Jim Morris PhD is Director of Clinical Services, Eckerd Youth Alternatives (EYA), Clearwater, Florida. EYA is a private not-for-profit organization serving more than 9,500 at-risk and troubled youth annually in 41 community-based and residential programs in eight states. Visit www.eckerd.org, or call toll-free 800/914-3937.

Answering the Call for Help



CWLA's Katrina Kids Fund has helped child welfare agencies get back on their feet again.

By Jennifer Michael

A resource center for foster families, a neighborhood tutoring program, dozens of maintenance projects, and a postadoption services program—these are just a few of the projects made possible through CWLA's Katrina Kids Fund. Since December 2005, CWLA has awarded grants from \$14,000 to \$150,000 to child welfare agencies adversely affected by Hurricanes Katrina and Rita in Louisiana, Mississippi, and Texas.

The Katrina Kids Fund was made possible through donations to CWLA, a financial contribution from the Freddie Mac Foundation, and the proceeds from the uBid for Hurricane Relief live celebrity auction and online auction in October 2005.

"The Katrina Kids fund has made a tangible difference in the lives of children and families affected by last year's hurricanes in the Gulf Region," says Maxine B. Baker, President and CEO of the Freddie Mac Foundation. "The Freddie Mac Foundation is committed to children, and especially in the aftermath of tragedy and disaster, we are proud to work with groups such as the Child Welfare League of America to ensure that our most vulnerable population, our children, are taken care of."

Following are more details about how CWLA's support has helped agencies get their facilities back up and running, pay down debt, revive programs disrupted by the storm, and

ensure a smoother poststorm transition for the families and children they serve.

Lightening the Burden

Never in its 45-year history has Devereux Texas Treatment Network undergone an evacuation of the magnitude caused by Hurricane Rita.

Ninety-five staff at Devereux's League City, Texas, facility evacuated with the 110 severely emotionally disturbed adolescents they serve, many of them having long histories of severe abuse and neglect. The group successfully made the 240-mile trip to their evacuation site, but only after long hours on the road.

What Rita left behind were devastated families and a large financial burden for Devereux—the only local provider of acute care programs for children and adolescents. Its costs included the expense of evacuating, restoring the campus to full operational status, and lost revenue from closing programs for 10 days.

In the months following the storm, donor fatigue set in, and Devereux found it difficult to meet its fundraising goals. Last spring, the agency was approximately \$400,000 behind its normal fundraising totals for that time of the year.

"Our losses are minimal compared to those experienced by many due to Rita and Katrina," Devereux explained in its grant request to CWLA, "but we feel considerable strain on our ability to operate as normal."

To lighten Devereux's burden and enhance its ability to meet the needs of the children it serves, CWLA awarded the agency \$100,000 from the Katrina Kids Fund. This money will help Devereux pay for staff salaries and benefits, repairs and clean-up to its facility, operating expenses, and the travel expenses of the evacuation from and return to its League City campus.

“Our organization will be stronger in several ways as a result of this need being met,” Devereux said in its grant request. “Receiving external recognition of our efforts and financial support from CWLA will be a big boost to both staff morale and our finances. We will be much more likely to meet our financial expectations and ensure the future of these much needed programs.”

Preparing for the Future

With the help of CWLA’s Katrina Kids Fund, Kingsley House is fortifying its New Orleans campus to withstand the furies of hurricanes to come.

Using an \$80,000 gift from CWLA, Kingsley House is embarking on deferred maintenance projects throughout the 63,000 square feet of space it maintains in downtown New Orleans. These projects include exterior painting, replacing and sealing parapets, replacing doors and inadequate security devices, repairing air conditioning, inspecting water drainage, ensuring the campus architectural elements meet historic district requirements, and hiring a project manager to guide the deferred maintenance work.

Executive Director Keith Leiderman says his organization, which has been serving children and families in New Orleans for 110 years, is grateful to receive the funds from CWLA because facility repair monies are hard to come by.

“There are so few funders who recognize that, even with good insurance coverage and some FEMA assistance, there is additional work that neither of those entities will cover that must be done to mitigate future storm-related damages,” Leiderman says. “CWLA’s foresightedness is helping us to do exactly that.”

Kingsley House sustained more than \$1.5 million in damage to its historic facility due to Hurricane Katrina. Nine of its 11 historic buildings sustained minor to significant damage. All of the losses were due to wind or water entering the facility through damaged roofing, dormers, windows, and doors.

All Kingsley House staff were temporarily displaced following the storm, and today, only about 30% of staff have been retained to assist the agency’s recovery.

Leiderman is crossing his fingers another hurricane doesn’t blow through New Orleans this year before Kingsley House has completed all of its repairs, but he notes that, at the very least, “CWLA’s support has brought us the flexibility we need to manage the process well.”

Focusing on Families

As evacuees from areas ravaged by Hurricane Katrina began to stream into Fort Worth, Texas, the American Red Cross and the City of Fort Worth turned to Lena Pope Home to help provide mental health support to displaced individuals living in shelters.

Lena Pope Home was established in 1930 to meet the needs of children and families during the Great Depression and post-war years. Today, the organization serves more than 20,000 children and families each year.

Lena Pope Home put its resources to work immediately as hurricane evacuees began to stream into the area last fall. In addition to the general counseling services the agency provided,

one family received a car through the organization’s car donation program, two received assistance through the home’s Holiday Assistance Program, two received transportation help to and from appointments, and the agency adopted a family by making living arrangements for them and paying their utilities, as well as hiring one of the family members as a behavior interventionist consultant.

A \$14,000 award from CWLA’s Katrina Kids Fund will help Lena Pope Home recover much of the costs it incurred providing these resources outside of its normal duties. Most of the money will cover the costs of food and housing the agency provided evacuees. The other funds will cover regular and overtime salaries, benefits, and transportation costs for about 50 staff who served evacuees staying in shelters and motels. The grant will also cover the cost of a translator who was hired for two young, hearing-impaired evacuees.

“A lot of agencies out there are still struggling, and we’re just very appreciative that our application was granted,” says Associate Director of Development Angie Gofredo. “We will continue to serve the families from Katrina, but having this grant helps us continue to serve them. There’s not a lot of money out there being offered to those organizations that are helping after Katrina. It’s great when you see organizations like CWLA make that commitment and support their member agencies.”

Supporting Foster Parents

The Southern Mississippi Foster Parent Association (SMFPA) created its Family Resource Center in Moss Point, Mississippi—located between Gulfport and Biloxi—to provide foster families with donated items to help them better care for their children. The center gives out such items as clothing, household goods, cribs, and car seats. When Hurricane Katrina hit the state, the center became a rock amid the storm.

Though the center was damaged by the massive storm, then looted, SMFPA members went into the building and made it a distribution center for much needed supplies for families, such as diapers, hygiene products, and clothing during the initial chaotic days of recovery.

SMFPA’s Resource Center has since been condemned, but funding from CWLA’s Katrina Kids Fund will help revive it. In April, CWLA awarded \$43,400 to the National Foster Parent Association (NFPA; SMFPA is an affiliate member) to oversee the Family Resource Center’s restoration. The money will cover one year’s rent for a new center, new equipment and furnishings, support group training, and administrative and operating costs.

SMFPA reopened the center last summer. In addition to once again providing extra resources for area foster families, the center will also resume training classes for families whose foster parent licenses are due to expire.

“As families move back into the area, either into repaired houses or into FEMA-supplied trailers while repairs are under way, their need for the kind of support provided by SMFPA and its resources is even more critical,” NFPA wrote in its grant

See Answering the Call, page 26

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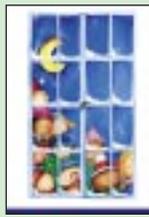
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Item #0133

Snow Angels

Inside reads:
May Happiness
Brighten Your Holidays
and Remain With You
Throughout the
New Year.



Item #0132

Nighttime Window Children

Inside reads:
If You Believe, as
Children Do, the Magic
of the Holidays Will Be
With You.



Item #0069

Holiday Gift Children

Inside reads:
Children Are the Gifts
We Give to the Future.
May All of the Gifts of
the Season Be Yours.



Item #0025

Holiday Children

Inside reads:
May the Holidays Bring
Joy to You and the
Children in Your Life.



Item #0032

Singing Holiday

Inside reads:
May Your Holidays
Be Filled With Joy
and Light!



Item #0026

Holiday Snowman

Inside reads:
Season's Greetings.



Item #0029

Holiday Sledding

Inside reads:
Happy Holidays.

NEW!



Item #0155

Joy on the Hill

Inside reads:
Wishing you Happiness
in a World of Peace.



Item #0156

Bringing in the Tree

Inside reads:
Wishing you Old-
Fashioned Pleasures,
Happy Memories and All
the Joys of the Season.



Item #0158

Snowboarding Delight

Inside reads:
May the Excitement of
the Holiday Season Last
the Whole Year Through.



Item #0130

Peace on Earth

Inside reads:
Peace on Earth.



Item #0068

Holiday Window Children

Inside reads:
Warm Wishes for a
Bright Holiday Season.



Item #0131

Joy

Inside reads:
Wishing You Peace,
Joy and Happiness
Throughout the
New Year.



Item #0096

Holiday Snowy Day

Inside reads:
Wishing You and
the Children of the
World a Bright and
Happy Future.



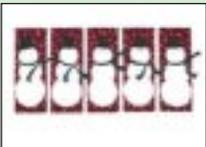
Item #0108

Red Wagon Holiday Children

Inside reads:
Welcome the Holidays
With Joy and Celebration.

opping With ngs Cards

pennies more! See details at right.



Item #0095

Holiday Five Snowmen

Inside reads:

A Wish for a Warm and Wonderful Holiday and a Bright and Beautiful New Year.



Item #0093

Holiday Seasons Greetings

Inside reads:

Best Wishes for the Holiday Season.

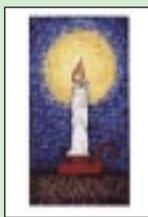


Item #0157

Wreath of Nations

Inside reads:

Wishing you Happiness in a World of Peace.



Item #0094

Holiday Candle

Inside reads:

May Your Holidays be Filled with Goodness and Light.



Item #0027

Falling Star

Inside reads:

May All Your Holiday Wishes Come True.

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application. “This grant will provide them the seed money to get back on their feet...[and] continue to operate as a support for families...This association has been very resourceful in the past, and with a little hand up, they can be again.” NFPA’s hope is for SMFPA’s Family Resource Center to become a model for similar programs in other states.

Southeastern Louisiana will become the next recipient of such a center, thanks to a second CWLA Katrina Kids Fund grant to NFPA. Similar to the Mississippi project, a CWLA grant to NFPA totaling \$42,300 will fund one-year’s rent, equipment and furnishing, training, and administrative and operating costs for a center in Metairie, Louisiana. NFPA will work with the Southeast Foster and Adoptive Parents’ Association (SFAPA) to establish the center to serve the more than 100 foster families in the six-parish region, including New Orleans.

“This is a support group that is anxious to grow,” according to NFPA’s grant application, “and the members are excited about the opportunity to develop a resource center to meet the needs of families. Foster parent support groups are a well-recognized means for these families to help each other in many ways...This is...especially true in this region, where so many have lost so much.”

Filling a Funding Gap

After Hurricane Katrina devastated New Orleans, Raintree Children and Family Services was inundated with calls seeking placement of children in foster care. The storm had interrupted training and recruiting of foster parents, and the number of available foster homes was dwindling.

To make matters worse, Raintree found it was the only foster group home for girls still operating in New Orleans during the months following the storm. In addition to the group home, Raintree also oversees a private family foster care program.

Raintree remained operational after the storm, despite damage to its buildings and a brief evacuation to Houston, but its efforts have been compromised by the storm’s interruption of fundraising. With postal service unavailable throughout the city, and Raintree’s donor base displaced, the nonprofit organization’s annual end-of-year donation appeal and its annual March gala—activities that usually generate more than \$85,000 in proceeds—had to be set aside.

To help make up for this loss, CWLA’s Katrina Kids Fund awarded \$65,882 to Raintree to hire and train foster care case managers; to recruit, screen, and train foster families; and to implement a media campaign to recruit foster families. The grant will also offset utility, and maintenance, repair expenses.



Caption to come...

Supporting Postadoption Services

Adoption is a lifelong commitment for both parents and child, but adoption doesn’t always mean a happy ending. Nationally, 14% of adoptions end up disrupted, and the children are placed back into the child welfare system. Four years ago, Mississippi was facing an adoption disruption rate of 30%.

A new statewide postadoption services program, created through a partnership between the Mississippi Department of Human Services and Southern Christian Services for Children and Youth, has tackled the problem and helped lowered the disruption rate to 7%.

Since Hurricane Katrina made landfall, however, the success of these efforts have been compromised. Southern Christian Services lost equipment and was unable to operate out of its Gulfport office—the organization’s main office is in Jackson.

“Katrina affected our ability to deliver postadoption services to families affected by Katrina,” a grant application from Southern Christian Services explains. “No other agency is delivering these services. As families move into long-term recovery following Katrina, they are experiencing very stressful situations that will undoubtedly impact their parenting capabilities. Families who are at this time still living in tents, trailers, motels, and damaged dwellings are in dire circumstances. Adoptive families with special-needs children are at risk of disruptions and family conflict.”

A \$74,855 grant from CWLA’s Katrina Kids Fund is helping launch the organization’s Partners in Permanency program. Most of the funding is paying the salaries and benefits of four permanency specialists in Gulfport, Indianola, Jackson, and Tupelo. The rest is offsetting the program’s rent and utility expenses.

Adoptive and foster-adoptive families of children with special needs are receiving a comprehensive array of permanency services through Partners in Permanency, including on-call crisis case management, daily and weekly respite in homes of trained respite families, a toll-free hotline for foster and adoptive parents to call if they need help, training classes, support groups, newsletters, a website, and an extensive lending library of resource information on children’s behaviors.



Cleaning Up

Saint Francis Academy’s (SFA) facilities in Mississippi were so damaged by Hurricane Katrina that the staff and 20 children at the nonprofit child welfare agency found themselves in Kansas.

Although far from home, evacuating to SFA’s Midwest headquarters ensured their safety. It also gave them time to instigate a recovery plan

and seek funding to repair \$360,000 in damage to two facilities—Bascot Home for Youth in Pascagoula, Mississippi, and St. Michael's Campus for Youth in Picayune, both of which provide 24-hour residential care for boys ages 10–18 coping with emotional and behavioral issues.

As a CWLA member, SFA immediately looked to CWLA's Katrina Kids Fund for help and received a \$150,000 award. The funding has taken care of many of the \$450,000 in losses not covered by insurance, including fence repair, tree removal, grounds cleanup, a new septic tank, and new flooring at the St. Michael's campus. At the Bascot Home, the grant purchased two industrial freezers and a dishwasher, and repaired fencing and buildings damaged by flooding. The award also covered insurance deductibles and travel expenses from evacuating the children and staff to Kansas and transporting them back to Mississippi.

"In receiving such a grant, we were able to begin cleanup...and get those campuses back to at least being a safe environment," says Vice President of Development Sharon Ringler. "These are kids with extremely high special needs, and we are just so grateful that we are able to continue those programs and not have to close them down."

Filling Needs

Hurricane Katrina drove approximately 20,000 evacuees from New Orleans to [Port Arthur, Texas], overwhelming its thin resources. Shortly thereafter, Hurricane Rita struck...Few organizations in Port Arthur [are] providing needed services to children and families.

Three grocery stores, an entire shopping mall, a pharmacy, and various businesses have closed...Jobs were lost, and many resources that would have been dedicated to assisting children and families are now going to assist hurricane recovery.

Finally, information about disaster relief and planning are limited. This funding request will allow DFPS to move beyond prehurricane levels by restoring social services, enhancing educational programs and job training opportunities, and preventing future problems of this magnitude through disaster preparation.

This description in the Texas Department of Family and Protective Services' (DFPS) grant application summed up the extent of the situation facing the agency's work in Port Arthur, where 25% of the 57,755 residents live in poverty.

CWLA awarded \$41,200 to help support DFPS relief efforts in Port Arthur, including providing residents with evacuation preparedness information and planning, as well as health services, emergency needs, food, and shelter. The award will also support a neighborhood tutoring program projected to conduct 800 tutoring sessions for some 270 children—about 15 sessions per child.

"As a result of the CWLA and [other] grant awards, residents in Port Arthur...will receive needed services to address some of the impact caused by Hurricane Katrina and Hurricane Rita," said Joyce James, Assistant Child Protective

Services Commissioner for DFPS. "The services...we will be able to provide due to the grant...will have a profound impact on the lives of the children in this area. In addition, the community will become knowledgeable on hurricane preparedness and will have an evacuation plan in place." 

Jennifer Michael is Managing Editor of Children's Voice.

Kids Donate to Other Kids Through CWLA

Kids are naturally attracted to helping their peers elsewhere in the country whose families have been struck by disaster, or so it would seem from the number of school groups and other youth organizations that organized fundraisers to benefit CWLA's Katrina Kids Fund following Hurricanes Katrina and Rita.

In Winchester, Massachusetts, a girl's soccer team (pictured below) took a break from the field to hold a Juggle-A-Thon and solicit sponsors, raising \$2,035.

"I gave the girls the freedom to choose whatever charity they'd like, and after narrowing it down, they gladly selected CWLA," says Coach Christopher French. "There were 18 girls involved, and they all worked really hard to raise the amount of money they did. I was very proud of them."



At Saint Peter and Paul High School in Easton, Maryland, the students wear uniforms every day, but occasionally hold "tag days" on which they can pay \$2–\$3 to wear regular clothes for a day. The money is donated to a charity chosen by the student club sponsoring the tag day. On Mardi Gras last February, the high school sponsored a tag day that students elected to benefit CWLA. They raised \$520.

The largest gift from children on behalf of the Katrina Kids Fund came from the students at Wyoming Elementary School in Wyoming, Minnesota. They held a month-long, schoolwide penny drive that yielded \$5,000.

Other donations included \$300 from students in Burlingame, California, and \$1,000 from an Ontario, Canada, high school.

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Monday, Feb. 26 continued

6:30 pm – 8:00 pm

*Welcoming Reception
in the Exhibit Hall*

Tuesday, Feb. 27

7:30 am – 10:30 am

*Continental
Breakfast in the
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10:00 am – 10:30 am

*Coffee Break
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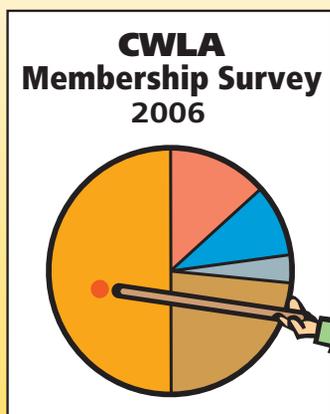


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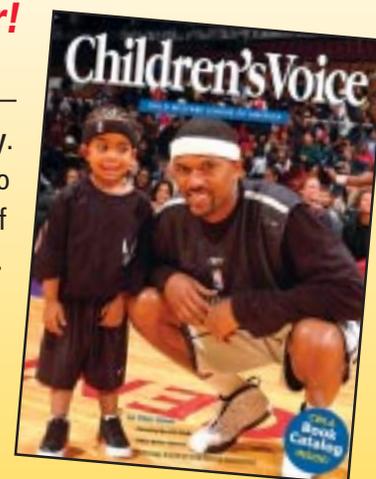
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Growing Up Amid War and Sanctions

By Stephanie Robichaux

Photos courtesy of xxxxxxxxxxxxxxxxxxxx

The images are splashed across the television news every day—bombed buildings, dilapidated villages, and countless dead. But throughout war-torn Iraq, another battle is being waged. Iraqi children are fighting to survive.

Since the United States invaded Iraq in March 2003, malnourishment among children has become rampant in Iraq, where half of the country's 27 million people are under age 18. A United Nations Children's Fund (UNICEF) report released in 2004 details how 25% of all Iraqi children under age 5 are chronically malnourished—a treatable condition. UNICEF also reports that one in eight children die before the age of 5. Seven out of 10 children suffer from various degrees of diarrhea that, left untreated, can lead to severe dehydration and death.

In 2004, the *Washington Post* provided a glimpse of the problem when it interviewed Kasim Said who was visiting his underweight 1-year-old son Abdullah in a Baghdad hospital. Abdullah weighed 11 pounds—10 pounds less than an average 1-year-old boy, according to the World Health Organization's Child Growth Standards. Because of the war, Abdullah's father had not been able to find work, so he and his wife could rarely afford the nutritional supplement Abdullah desperately needed.

The Post described how in the same hot, fly-infested ward, only a few beds away from Abdullah, Suad Ahmed sat with her 4-month-old granddaughter Hiba. The baby suffered from chronic diarrhea and was nothing but skin and bones. She, like so many other children, lacked the proper nutritional supplements and medical care necessary to survive.

According to a 2005 cooperative study by Iraq's Health Ministry, Norway's Institute for Applied International Studies, and the United Nations Development Program, some 400,000 Iraqi children suffer from wasting, a condition in which children experience an unintentional loss of 10% or more of their body weight due to chronic diarrhea and protein deficiencies.

Ironically, Iraqi health officials point out that when these children's parents were children themselves, their biggest health problem was obesity. But a collapsed infrastructure due to decades of war and sanctions has since left Iraqis with a crippled economy and inaccessibility to nutritious food, clean water, and proper medical care. Malnourishment became a serious problem for the country's children in 1991 following the Persian Gulf War, when the United Nations imposed sanctions on Iraq. [See "Between Iraq and a Hard Place," *Children's Voice*, Spring 1999.]

Child malnourishment rates today are now three times higher than they were before the economic sanctions were

imposed on Iraq, and, according to UNICEF, the number of malnourished Iraqi children has doubled to 9% since the U.S.-led invasion three years ago.

Because of poor security in Iraq, very few international aid organizations continue to operate within the country. In 2003, the main UN headquarters in Baghdad was bombed.



The agency is now stationed in neighboring Jordan. In October 2004, CARE International withdrew from Iraq after Margaret Hassan, the agency's local director, was kidnapped and executed. That same fall, Doctors Without Borders also left Iraq.

UNICEF still continues to operate in Iraq, although access to certain areas of the country has been difficult. "Our programs are very low key," UNICEF spokesperson David Singh told the *Los Angeles Times* in May. "In certain areas, it's impossible to get assistance to children because of the security situation." One of UNICEF's main programs has been distributing high-protein biscuits and therapeutic milk to boost nutrition in both children and lactating women.

According to its website, the International Medical Corps (IMC), a nonprofit global humanitarian organization



Captions for all photos here please.



headquartered in Santa Monica, California, continues to provide support to Iraq's vulnerable children. IMC responds to areas struck by natural disasters and war worldwide. By distributing food, providing access to clean water, supplying basic medical supplies, training Iraqi health workers, and improving the conditions of medical centers, IMC hopes to strengthen the Iraqi health care system so it is less dependent on foreign aid.

IMC's website (www.imcworldwide.org) says the organization is also operating more than 700 Community Child Care Units

(CCCU) in Iraqi schools to educate families about proper nutrition. IMC volunteers diagnose children in the schools and teach parents how to avoid malnourishment. Children who are in severe condition are sent to either a Primary Health Care Center, where they receive high-protein biscuits, or to a hospital.

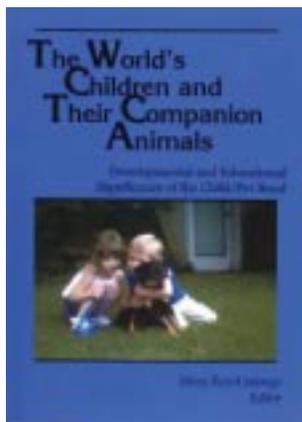
IMC nutritionist Jean Luboya explains in a press release the importance of CCCUs: "Child malnutrition slows brain development and drastically decreases the capacity for learning. CCCUs are teaching nutritional practices such as breastfeeding to avoid the devastating combination of contaminated water and baby formula. CCCU intervention can drastically improve the lives of Iraqi children." 



Stephanie Robichaux is a Contributing Editor for Children's Voice.

The World's Children and Their Companion Animals: Developmental and Educational Significance of the Child/Pet Bond

Mary Renck Jalongo, Editor



Internationally renowned physician Albert Schweitzer once said, "We need a boundless ethic which will include the animals also." It is just such an ethic, an ethic of compassion and generosity, that holds the greatest promise for more responsive parenting, more compassionate teaching, and a more tolerant and just society.

Foreword: Stars in a Child's Universe by Michael J. Rosen

Introduction: The Special Significance of Companion Animals in Children's Lives by Mary Renck Jalongo with Marsha R. Robbins and Reade Paterno

Part One: Children, Families, and Companion Animals

- * Bonding With and Caring for Pets: Companion Animals and Child Development
- * Companion Animals in the Lives of Boys and Girls: Gendered Attitudes, Practices, and Preferences
- * Companion Animals at Home: What Children Learn From Families

Part Two: Companion Animals in Schools and Communities

- * A Friend at School: Classroom Pets and Companion Animals in the Curriculum
- * Animals That Heal: Animal-Assisted Therapy With Children
- * Global Companion Animals: Bonding With and Caring for Animals Across Cultures and Countries
- * Portraying Pets: The Significance of Children's Writings and Drawings About Companion Animals

Part Three: Companion Animals in Print and in the Media

- * Companion Animals in Books: Themes in Children's Literature
- * Companion Animals and Technology: Using the Internet, Software, and Electronic Toys To Learn About Pets

Afterword by Mary Renck Jalongo

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CWLA Speaks Out About Fewer Kids Eligible for Foster Care

Jessica Lindsey, a 21-year-old former youth in care who is now an officer in CWLA's National Foster Youth Advisory Committee, stood before an audience at a Washington, DC, press conference last summer and talked about her teenage years in foster care, bouncing between foster homes and residential care facilities in Wayne County, Michigan.

Few know better than Lindsey about the need for more federal funding for foster care programs. "Though I consider my experience with the foster care system to be short, I endured enough to last a lifetime," she said. "The state steps in to protect and provide for youth. This is their job, yet how can one protect and provide when there is very little funding?"

CWLA organized the July press conference to draw attention to the 10-year anniversary of the decision by Congress to tie eligibility for Title IV-E federal foster care assistance to the former cash assistance program Aid to Families with Dependent Children (AFDC). During the event, CWLA staff introduced *Ten Years of Leaving Foster Children Behind*, a report documenting how the number of children eligible for federal foster care assistance has decreased at an alarming rate.

CWLA conducted a state-by-state examination for a seven-year period, 1998–2004, to determine the average monthly number of claims states filed for each of those years. Eligibility declined 18% over six years, resulting in only 45% of maltreated children being supported by federal IV-E resources.

"This erosion of support is the result of antiquated rules and income requirements," CWLA President and CEO Shay Bilchik said during the conference. "These are children who have suffered abuse and neglect who came into foster care, and then are found not to be eligible for federal assistance. These are children who have been mistreated and removed from their homes and from dangerous situations, only to find that they also have been abandoned and rejected by the very federal program designed to protect and care for them."

Ten Years of Leaving Foster Children Behind also shares the results of a June 2006 CWLA survey of its private, nonprofit member agencies that are direct service providers to better

understand the impact of the budget shortfall. More than 25% confirmed their agencies are experiencing increased pressure to raise millions of dollars annually to make up for diminishing federal support; 65% identified a trend of local private agencies subsidizing out-of-home care.

"We have seen our fundraising demands grow annually as we are now raising \$1.5 million per year to fill the gap of the costs of providing services," Tom Burton, Executive Director of Agape in Nashville, Tennessee, said of his agency during the press event.

In *Ten Years of Leaving Foster Children Behind*, CWLA calls on lawmakers to consider solutions to the problem, and makes three different proposals to modernize and update eligibility:

- Eliminate the entire income eligibility link and provide support to all children abused and neglected.
- Eliminate the link to AFDC by gradually allowing states to cover all children in care. While this eligibility is being expanded to all children in care, the state can also receive a reduced match in funding. This reduced funding would restrain costs while allowing states to extend care to all abused and neglected children.
- Replace the AFDC link with a link to an existing program, such as Temporary Assistance for Needy Families or Medicaid, to eliminate the gradual erosion of federal support that now exists, without committing the federal government to a shared commitment to all abused and neglected children.

Ten Years of Leaving Foster Children Behind is available on CWLA's website at www.cwla.org/advocacy/childreninfostercare.htm.



We're Moving!*

After 21 years, CWLA is leaving its Washington, DC, headquarters for a new location across the Potomac River in the Crystal City area of Arlington, Virginia. Effective December X, CWLA's new contact information is

Child Welfare League of America
2345 Crystal Drive, Suite 250, Arlington VA 22202
123-456-7890, Fax 123-456-7890

*CWLA regional offices will remain the same.

New Medicaid Provisions Enacted, Despite Requests for Delay

CWLA joined other national organizations last June in calling on Congress to order the U.S. Department of Health and Human Services (HHS) to delay implementing Medicaid requirements mandating that all children in foster care prove their identity and citizenship.

At a Capitol Hill press conference, CWLA Vice President for Communications Linda Spears said, "Congress needs to tell the Department of Health and Human Services to stop and rethink what they are doing. Many children in foster care will be denied access to needed health care. It's unconscionable, especially after these children have already suffered from abuse and neglect, to now require impossible new restrictions that will hinder access or, worse, deny them the health care and mental health services they need."

Despite the urging of CWLA, Families USA, the National Association of Community Health Centers, and other groups favoring a delay, the law went into effect July 1. States must now

verify that all Medicaid patients, including children in foster care, are citizens and can prove their identity. A passport is the primary evidence required. If a passport does not exist for the patient, another set of documents must be used to first prove citizenship, and a second set to prove identity.

States must already establish citizenship under Title IV-E foster care, but under the new law, that documentation will not be recognized unless the state Medicaid agency also makes the documentation.

CWLA called on Congress and HHS to exempt foster and adoptive children from these requirements, and urged HHS to accept, as evidence of identification, the fact that such children are wards of the state with a specific identity, because most children in foster care do not have passports or driver's licenses. Collecting birth certificates or church records places an additional burden on states, where staff and resources are already stretched thin, and represents a new, unfunded mandate.

CWLA Joins Campaign for Children's Health Care



Seventy percent of likely voters agree that providing affordable, quality health insurance to all children in the United States should be one of the top priorities of Congress and the President, according to a survey commissioned by the Catholic Health Association of the United States.

To help make this happen, a coalition of children's advocacy organizations—including CWLA—as well as educators, parents, doctors and nurses, and health care providers have launched the Campaign for Children's Health Care. The goal is to raise public awareness about the 9 million uninsured children in the country—a figure that exceeds the population of children in Alaska, Colorado, Hawaii, Idaho, Iowa, Kansas, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, South Dakota, Utah, and Wyoming combined.

On the Campaign for Children's Health Care website—www.childrenshealthcampaign.org—users can sign a petition to Congress and the President calling on legislation that will provide affordable health coverage for all children; listen to a podcast on the issue; visit a tools and resources page for more facts about uninsured children; and learn about town hall meetings and other events around the country demonstrating the importance of health insurance for children.

"This issue is particularly relevant for the children served by CWLA's member agencies," says CWLA President and CEO Shay Bilchik. "Many children who enter foster care arrive with preexisting physical and mental health conditions that have gone unaddressed for a variety of reasons, including a lack of access to health care services. Once in the foster care system, access to health and mental health care plays an essential role in facilitating the potential reunification of these children with their families, or successful adoption.

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JANUARY 29-31, 2007

Women in Leadership

Title???

San Diego Sheraton, San Diego, California

FEBRUARY 26-28, 2007

CWLA National Conference

Children 2007: Raising Our Voices

Marriott Wardman Park, Washington, DC

Dates and locations subject to change. For more information on the CWLA calendar, including conference registration, hotels, programs, and contacts, visit CWLA's website at www.cwla.org/conferences, or contact CWLA's conference registrar at register@cwla.org or 202/942-0286.



CWLA Says Goodbye to Shay Bilchik

CWLA is preparing to enter a new chapter in its history this spring when the organization's leadership changes hands. After six years as CWLA's President and CEO, Shay Bilchik is stepping down from the helm to explore new directions in his career when his contract with CWLA expires in February.

Shortly after joining CWLA, Bilchik spearheaded the League's strategic planning process, culminating in the September 2000 publication of *Making Children a National Priority*, CWLA's strategic plan for 2000-2010. Bilchik's leadership also strengthened CWLA's organizational structure, enhanced communications, and encouraged cross-functional teaming.

To execute the search for Bilchik's replacement, CWLA's Board of Directors hired Spencer Stuart, a leading executive search consulting firm. In recent months, the search firm has interviewed CWLA's senior managers and issued an e-survey to other staff, the Board, and member agencies, to assess the qualities and goals desired of CWLA's next leader.

At press time, the search firm continued to interview finalists for the position. Look for more information in the next issue of *Children's Voice*.

Everything is **NORMAL** Until Proven Otherwise

By Karl W. Dennis and Ira S. Lourie

In Everything Is Normal Until Proven Otherwise, a new book from CWLA Press, author Karl Dennis shares stories from his experiences with the youth and families as director of the Chicago-based agency Kaleidoscope. Coauthor Ira Lourie, a child psychiatrist, offers commentary on these stories and how each illustrates central tenets of the Wraparound approach. Wraparound, or individualized, services are rooted in the principles of individualized, community-based, strength-focused services. In this excerpt adapted from the book, the authors share the story of “Cindy” (not her real name), with whom Kaleidoscope worked to reunite with her child. Following the excerpt, Lourie explains how Cindy’s story is a successful example of Wraparound services working in favor of a mother and child’s needs.

A Story About the Essence of Wraparound

In 1987, the state of Illinois approached Kaleidoscope, expressing a need for services for infants who were born HIV-positive or diagnosed with AIDS. We accepted the challenge to create a more normalized environment, a home life, and a family for these abandoned children.

The state informed Kaleidoscope that most of the parents of children with pediatric AIDS were drug abusers and prostitutes and were not interested in their children. Regardless, we believed strongly in the ties of families, and we knew we needed to look for these children’s parents. In addition, we felt the family was more than just a mother and a father—it also consisted of aunts, uncles, grandparents, and even close friends. Some cultures believe the family includes the whole tribe or neighborhood. We saw these children’s natural parents and families as valuable resources, and we went out to look for them.

Finding the families of abandoned children is not an easy task. Those who have worked in in-home services know every community has what we call “natural informants,” or nosy people. These are the people who know everything going on in the neighborhood. At Kaleidoscope, we tended to identify them when we tried to find someone in the community.

This particular time, we were looking for a woman named Cindy. The natural informant in this case was a man who ran a pawnshop. We left little notes for her there. These notes didn’t clearly explain what we wanted, because of our concern for Cindy’s

confidentiality and our expectation that the nosy informant would most likely open Cindy’s mail. We left notes for three or four weeks. Eventually, Cindy called and asked what we wanted.

“We want to know if you would like to see your baby,” Cindy replied she would, and we sent someone to pick her up.

Now, our office was a pretty relaxed place; clients and staff were always bringing in their children and pets. My office was at the end of a long hall, and on this particular day I smelled this horrendous odor. I went to see what it was—I thought someone had brought in a dog that had not had a bath in several years. As I got to the hall, the first thing I saw was a woman coming toward me. She was ragged. She was dirty. She had no teeth. I could tell she had no teeth because she had this great big smile on her face. As Cindy walked closer to me, I discovered it was she that I had smelled.

I turned to her and said, “Hello.” I have to confess, I was standing as far away from her as I possibly could and was holding my breath. She turned to me and mumbled something. To hear what she said, it was necessary for me to move closer to her, which was a major challenge to my philosophy of unconditional care.

When Cindy spoke again, I realized she was offering to perform sexual favors for me in exchange for money. Now, I believe that one of the quickest ways to break the ice with someone is through humor. So with a smile I said, “Cindy, this is something we can’t even talk about until you’ve had a bath and gotten some teeth in your mouth.”

I didn’t know how she would react, but she began to laugh, and I laughed with her. This was the beginning of a friendship (not an intimate relationship, I assure you), and a learning experience for both of us.

As I talked with Cindy, I decided that, as usual, a direct approach was best. I told her the information we had received suggested she was a prostitute and a cocaine addict. I asked her how this had come about. She said she came from a small town down south and had lived on a farm for many years. She hated farming and had spent a lot of time trying to get away from it. She decided to head north and, after saving some money, got on a bus and for Chicago.

Things began to go wrong soon after she got off the bus. In her hometown, people were very friendly; they shook hands and talked to each other on the street. When she tried this in Chicago, people shied away from her. They thought she was weird and looked at her strangely. Cindy's stomach began to hurt, and she got extremely anxious, so much so that it became difficult for her to talk. She lost her confidence, and as a result it took her a whole day just to find a room to live in.

The next morning, she attempted to find work. But every time she approached someone, she again became anxious and nervous and couldn't talk. When she eventually became hungry and frustrated, she didn't know where to seek help. I asked if she had tried public aid, and she replied emphatically, "No!" Her family values were to not accept charity, so she continued to seek employment. But her job search was unsuccessful, and she got to the point when she had to swallow her pride and seek aid after all.

In Cindy's hometown, only three people worked in the public aid office. They were friendly folks who would say, "Come on in" and "What can I do for you?" In Chicago, when she got to the public aid office early in the morning, she found a line stretching halfway around the block. It took hours for her to get in. By the time she was called, she was so nervous and anxious that, once again, she couldn't talk, and she ran out of the office.

Then, Cindy ran out of money. Hungry and on the verge of being homeless, she sold the last thing she had of value—her body. Because she hated doing this so much, the only way she could continue was to take drugs.

At Kaleidoscope, we began to work with Cindy. We got her a bath, found her an apartment, and helped her get on public aid. We tried to get Cindy into a counseling program around AIDS, but she was in denial and told us she didn't have AIDS.

After she was all set up and cleaned up, she told us she wanted to go into a drug abuse program. This irritated us, because *our* plan had called for us to develop a relationship with her first, before we approached her drug issues. Nothing seems to irritate service providers as much as when consumers get ahead of them. We're not in the habit of people telling us what to do; we're used to telling them. At Kaleidoscope, however, we believed in supporting people's desires to get better, and we arranged for her to enter a drug abuse program. Those of us who were optimistic bet she would complete it; those who weren't bet she wouldn't.

We told Cindy that most people don't kick drugs with their first attempt and that the problem with a lot of substance abuse programs is they would terminate you from the program if you reoffended while receiving services. Now, we don't believe in doing business this way, because this is just the point in time when people need services the most. We told Cindy we hoped she would complete the service. But, in the event she wasn't successful, we assured her we would still be here for her because our commitment to her was unconditional.

Cindy did complete the program successfully. When she returned to Kaleidoscope, she told us the whole time she was away working on her drug issues she thought about how Kaleidoscope had been so helpful to her, and she wondered if there was anything she could do for us. As she struggled to find a way to repay us, she remembered the only thing we had asked her to do that she had refused was to seek counseling for AIDS issues. And even though she "knew" she didn't have AIDS, she said she would go because we asked her to. She taught us that if we did the things people see as a priority, then they may be more willing to do some of the difficult things which we request of them.

A short time later, Cindy came to us and asked us how she was doing. We told her how proud we were of how far she had come. Her response shocked us: "In that case, I want my baby back."

Now, giving Cindy her baby back was not easy. Our first response was to remember that Cindy had been a prostitute and drug abuser, and perhaps she didn't deserve to have her baby back. We seemed to immediately forget about our philosophy, that if you can plug in enough services to support a family, even parents whom most people would consider inadequate could care for their children better than the best substitute system can. Our faith in our beliefs and in Cindy prevailed, however, and we agreed to petition the state for the return of her child.

Not long afterward, Cindy once again challenged our beliefs when she told us she had come to understand she had no resources or family in Chicago other than Kaleidoscope, and that, to progress further, she would need the help of her family. As a result, she wanted to take her child and move back to her home in the South, where she understood the people and their customs.

As you may imagine, this was also a difficult adjustment for some of the staff. Not only was Cindy requesting her child back, she was now expressing her intention to remove the baby from our sphere of influence, beyond our ability to support her. This made it really rough for some of the staff to



help Cindy make plans for moving out-of-state, but we knew it was the right thing for both her and us.

Beyond our fears of loss of control over her, making plans for Cindy's move was difficult for a number of reasons. First, she was white, and the baby was biracial. Second, she wanted to live back on the farm with her sister and brother-in-law, but they had personal safety concerns about her AIDS, a response that, unfortunately, is not at all unusual.

As we worked to overcome these issues, we contacted some agencies from Cindy's home state and asked them to help us. We brought the sister and brother-in-law to Chicago and worked with them in great depth. Although they continued to have some reservations, we reached a compromise in which her sister and brother-in-law would continue to live in the house, and Kaleidoscope would attempt to find the funds to help Cindy purchase a trailer so she and her baby could also live on the farm. The state agreed to offer the necessary services to all members of the family. Under these arrangements, we felt comfortable that, eventually, this family would be able to function as a unit.

One of the planned supports was for Cindy to receive Supplemental Security Income (SSI). The process for this most often requires a great deal of time and a number of appeals. By the time her benefits were approved, she had a lump sum of \$6,000 in back payments coming to her. Once again, Cindy created a philosophical dilemma for the staff. Some believed she would take the money and buy cocaine; others thought she would take the money and do something productive. According to our beliefs, we worked through our feelings about Cindy receiving such a large amount of money.

We told her we hoped she would do something productive with this money, adding, "In the event you spend all of the money on cocaine, and if you are still alive, we will still be here for you. Our commitment to you is unconditional."

When she cashed the check, she kept a small amount for herself and bought her trailer with the rest. Remember, Cindy's values were to not accept charity. The plan was working. We were supporting Cindy's strengths, and she rewarded our faith by not stumbling on her weaknesses.

Two weeks before Cindy was to move, she became sick from AIDS, went into the hospital, and died. I lost a friend, but more than that I also lost a teacher. The most important thing Cindy taught me was that regardless of what you read, hear, or think about people, you shouldn't give up on them. There are a lot of Cindys in this world, and if we can learn to listen to them with open hearts and open minds, then the children and families will get better.

Lessons from Cindy

Cindy's story describes the essence of Wraparound and the individualized service approaches as developed by Karl Dennis and Kaleidoscope. To Karl, Cindy was not a patient, or a reclamation project, or the object of a missionary endeavor. To Karl, Cindy was a friend.

In addition, Karl saw Cindy as his teacher. This occurred on two levels: Karl let Cindy teach him about herself, and he learned from her about how to best help all people.

Cindy taught Karl that the package someone comes in doesn't always reflect what is inside. Instead of a smelly, impudent drug-addicted prostitute, she was really a simple, frustrated, lost country girl, in over her head in the big city. She taught Karl about her sense of humor, strong values, and strength and determination that could only be used after she had the support necessary to survive in her environment.

What did Cindy teach Karl about delivering services to people in need? She taught him the basic elements of Wraparound services: first, that taking a *strengths-based approach* toward her was a better strategy than focusing on her weaknesses. Karl and his staff held a debate each time they faced decisions in which they either had to rely on Cindy to do the right thing or they had to protect her, or themselves, from her potential to mess things up.

When Cindy wanted to go into a drug program "too soon," they let her prove she could do it, rather than focusing on the possibility she would fail. They planned with her to get her baby back when that was what she desired, and they allowed her to spend her \$6,000 as she chose. They learned to accept when Cindy made requests, she did so out of her strengths and, if they supported those strengths, things would work out positively.

She taught Karl about the principle of *unconditional care*, in which he learned the only way to provide services is to never give up. Cindy always met her goals and progressed in her abilities to care for herself and her child, but had she failed at any point, Kaleidoscope would have been there to help her move ahead.

Cindy also taught the need to be *culturally competent*. She came from a background that was alien not only to Chicago but also to Kaleidoscope staff. To help Cindy give up her troubled life, Karl had to understand what it was like to be a poor white girl from the rural South, and for someone from this background to go to the big city and have the experiences she had.

Cindy told us she needed a *community-based* intervention. She had no friends or relatives in Chicago. Kaleidoscope was her only visible support. Karl and the staff worried they couldn't support her if she moved back to the south, but Cindy let them know true independence for her meant living in a place where family, friends, and other people—whose ways she understood—were available to her.

For her to be in her community, Cindy taught us that care must be *family-focused*—that we must reserve a major role for the family to determine their own needs, and that we must focus on the whole family rather than on just one individual. She knew, and we needed to hear, her family would ultimately be the best and most lasting support she could have, and that she was the most important resource for her own child.

In working with Cindy, Karl learned one agency could not be the only help to her—an *interagency approach* was necessary. At a minimum, Cindy needed substance abuse support for her addictions, medical support for her and her child's AIDS, and public assistance and SSI for her financial needs; and she and her

family needed counseling to help the transition home. Each of these forms of help came from different community agencies. Someone—in this case Kaleidoscope—had to make sure all the help worked together and was accessible for Cindy's benefit.

Of course, it was not Kaleidoscope as an agency that brought it all together. Rather, the agency acted to convene a group of people who could work together to help Cindy—a *child and family team approach*. Although Cindy taught Kaleidoscope over and over again that she knew what was best for herself and her baby, she needed the support of Kaleidoscope staff and others in her life and community to make it happen.

The child and family team is the practical mechanism for supporting the strengths and meeting the needs of an individual or family in Wraparound. In Cindy's case, the team was small. Initially, it only included Kaleidoscope staff. Later, it came to include her baby's worker and her family. This team's job was to help the family members elucidate their needs and develop a plan for meeting them.

A lesson the whole service community learned from Cindy's experience was that the best care was also *cost-effective* and *outcome-driven*. They learned how, if Cindy had lived, significant savings would have resulted from Kaleidoscope's approach to Cindy and her baby by avoiding long-term hospitalization as a boarder baby, the normalization of Cindy's life, and her ability to become more self-sufficient and less burdensome to society. These outcomes came from her child and family team constantly monitoring her progress and changing the approach and services, based on outcomes.

Once Karl learned these lessons, Cindy helped him put them together. He learned to best help people, he had to take an *individualized approach*. After they learned who Cindy was inside, Karl and Kaleidoscope worked with her to develop a unique approach based on her strengths and cultural background and aimed at supporting her as a family member within her natural community. Most importantly, Karl and his staff committed themselves unconditionally to provide the help and support Cindy needed.

In the end, Karl and Cindy both found friends. ✨

Executive Director of Kaleidoscope in Chicago for 27 years, Karl Dennis is President of Karl W. Dennis & Associates, Michigan City, Indiana, a training and consulting firm for Wraparound services. Ira Lourie, Hagerstown, Maryland, is a partner in the Human Service Collaborative, which provides consultation, technical assistance, and training in human service policy and service system development; Medical Director of AWARE, an agency for troubled children in Montana; and a psychiatric consultant for Pressely Ridge Maryland and the Catholic Charities Villa Maria Consortium, both of which provide community-based services in Maryland.



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DEVELOPING THE SENIOR MANAGEMENT TEAM THROUGH GROUP LEADERSHIP

By John E. Henley

Developing the whole management corps may be a goal for every organization, but for voluntary agencies, the senior management team (SMT) can represent the key group for managing and leading the organization. A specific approach—development of the team as a high functioning group—is necessary for the SMT to become the primary tool for agency organizational development and change. This premise acknowledges the pivotal role this group approach plays in defining the agency's leadership and operational issues.

The need to both manage and lead not-for-profits is particularly arduous and demanding, given the increasing rate of change human service agencies experience, both externally and internally. Service and business environments have evolved to the point that they are almost unrecognizable compared with what most of us operated in 10 years ago. Today's environment—characterized by a high degree of competition among providers, limited government resources, an increasing demand for demonstrating effectiveness, and a constantly changing public policy landscape—demands an exceedingly high degree of adaptability.

Internally, the challenge of developing a quality work force has never been more difficult. Turnover is typically reported at rates of 30%–50% annually. Correspondingly, the challenge to maintain a skilled and competent workforce capable of delivering increasingly sophisticated services is progressively daunting. Many practitioners believe this issue is the predominant organizational challenge for this generation of not-for-profits.

Whether we like it or not, all organizations are experiencing the dual challenges of external and internal change that generate a heightened demand for leadership and managerial acumen.

To respond to this climate of change, most provider agencies need a key group of leaders or managers, the SMT, to provide three key functions:

- Mold the change—making decisions.
- Operationalize the change—making it happen.
- Evaluate the change.



MOLDING CHANGE

As with all organizations, not-for-profit agencies faced a constant barrage of key business decisions. This reality is further complicated by the tension, inherent in voluntary agencies, between business objectives and mission-driven objectives. This tension has existed, presumably, since the inception of the modern, not-for-profit institution.

What has changed, however, is the frequency and variety of the choices that organizations must make today.

Proliferation of service delivery models, seminal changes in public policy, and a fundamental change in society's attitudes toward charities and the people we serve, all contribute to the need to continually address key organizational decisions.

The need to consider choices that could make or break an agency is now almost commonplace. Should we abandon our core service or business based on changes in government funding? Do we need to make a huge investment in infrastructure? Should the agency invest substantial portions of its invested reserves on initiatives that may or may not prove to be the wave of the future? The issues can be dizzying.

The point is that the proliferation of key issues demanding effective decisions has become almost overwhelming. To mold the change into positive results for the agency demands, on the executive level, a process that can assess external and internal consequences of decisions on a regular basis. That process can be best realized through a highly functioning executive team.



OPERATIONALIZING CHANGE

The gap between what is intended and what actually happens within an organization—making it happen—is probably the key issue of management. In the context of a high-functioning management team, the advantage lies in a constant forum for focus and feedback. Once a decision is made to initiate a change in the organization—whether a new service area or a new policy—the group directs its focus on the best way to implement the change. What needs to be done to implement the change? Who needs to be involved? What outcomes are anticipated? What unanticipated consequences may result?

Once the change has been initiated, the group provides the arena to receive feedback and evaluate the effects of the change. If two heads are better than one, several heads have the potential to be the best—or at least the best most typical organizations can achieve.

EVALUATING CHANGE

Perhaps the most important advantage of a highly functioning SMT is in the process of *evaluating* management decisions and changes—referring in this context to a process that includes the review of outcome data, but certainly goes far beyond that activity.

Has the initiative or change been implemented as planned? Does it work? Are we furthering the mission of the organization? What unanticipated effects has the change brought about?

It is in the willingness to engage in ongoing, candid, and honest dialogue about the health of the organization—people, programs, and resources—that a highly functioning, core group of managers can best demonstrate the effectiveness of this model.

Autocratic styles of management, where the CEO plays the predominate role in deciding key strategic and tactical decisions for the organization, are unrealistic and doomed to ineffectiveness. The need for external as well as internal sensitivity and accuracy in reading environmental factors is too much for any one person to fulfill on a regular basis.

Highly democratic and inclusive models, which attempt to include broad participation of middle managers, supervisors, and even direct line workers, have many attractive features, but may ultimately prove too unwieldy and inwardly focused to be affective. Focusing on the established senior management group—paying attention both to its structure and function—can therefore be the key to successfully navigating the increasingly treacherous landscape of service provision in the not-for-profit arena.

In developing a highly functioning team, a series of structural and functional questions, if successfully resolved, can

lead to the difference between a mediocre group and a highly effective one.

- Who should sit on the team? Is the choice predicated on position, such as the chief financial officer (CFO), the human resources director, or the operations directors, or specific individuals whose personal skills or talents might transcend the issue of job description? A manager with high entrepreneurial instinct or someone who is particularly sensitive to the organization's culture, for example, might provide invaluable contributions to the group not offered by incumbents in traditional senior management positions.
- To what degree does the CEO empower the group to engage in key decision-making and to share in his or her authority?
- What structural elements comprise the team's operation? How often do they meet as a group? Who sets the agenda, and how is discussion monitored and recorded? These questions might seem pedestrian, but in this regard, the devil is in the details.

Most teams meet too infrequently to respond to the constant internal and external issues that emerge on a continual basis in most agencies. Discussions and decisions can be lost, forgotten, or diluted due to lack of documentation, such as minutes or action points, and simply too much time can be lost between meetings.



EMPLOYING GROUP PROCESS

Central to any discussion of developing a highly functioning team is the question of the CEO's competence and skill in leading and facilitating the group—in short, understanding group process.

This issue goes beyond the typical focus on running a good meeting. In fact, one could argue that one of the most effective skills a CEO can possess, in the context of leading and managing an SMT, is excellent group facilitation skills. Through the chemistry of meaningful group interaction, the whole really does become more than the sum of its parts. Not surprisingly, the same set of skills is equally applicable to affectively working with boards.

In working with the SMT in a group context, several considerations merit particular attention:

- How open is the discussion within the context of typical meetings?

- What is the tolerance for conflict within the group?
- What is the tolerance of the individual members for abandoning assigned roles and job descriptions for the greater good of the group? Are they willing to accept criticism from other members of the group? Can they tolerate a high degree of transparency for their department, or themselves, to serve a larger goal? Conversely, are members willing to venture outside their own orbits of expertise to offer an observation or opinion in an area typically not their own?



In a highly functioning team meeting of senior managers, it should not be unusual, for instance, to have the CFO question the validity and relevance of

a new program approach, or to have the physical plant director raise an issue about organizational morale. Traditional turf gets blurred when all members of the leadership team have been empowered and encouraged to own all the issues the agency needs to address on a regular basis.

THE CEO'S ROLE

In the context of a highly functioning SMT model, the CEO has to have the style and flexibility to assume multiple roles and exhibit varying styles. Three primary roles he or she must master, however, include:

Teacher. All leaders are to some degree teachers. But in the context of developing a highly functioning team, the role becomes particularly relevant. In this context, we refer not so much to the teaching of new knowledge, or even skills, but the process of helping managers accurately interpret and make sense of their own experience.

As business writer and consultant Peter Drucker has said, "Leadership is lifting a person's vision to higher sights."

Facilitator. Particularly in the context of working with the SMT in groups, the CEO must assume a facilitating role that fosters discussion, encourages constructive conflict, helps the group reach decisions, and encourages all members to grow, not only individually, but as members of a team.

Arbitrator. All CEO's have to be arbitrators. But in a functional team model, where frequent interaction among the members is expected and encouraged, and friction often arises and conflicts erupt, the leader must successfully negotiate these tensions into positive results. When dealt with effectively, this arbitration can represent one of the strongest assets of a vibrant SMT model. As senior managers evolve past role-playing and become more authentically involved, they learn to successfully deal with workplace conflict.

They not only become more effective personally, but they transfer the skill of successful arbitration downward to their subordinates and ultimately help create a significantly more healthy organization.

This transfer of skill, developed at the senior management level, can cascade downward to become the norm for the management and leadership of the entire organization. Ideally, development of a highly functional SMT, far from creating an exclusive club, should result in the replication of this phenomenon with all teams and groups within the agency.

Effective group leadership is, to a degree, a natural talent for some, but also a skill that can be acquired. CEOs and other managers should strongly consider taking an inventory of their own skills in this regard and, if lacking, consider availing themselves of training or other learning opportunities. Additionally, agency leaders can benefit greatly from reviewing the level of functioning of the key groups with whom they work. Commitment toward developing highly functioning teams through effective group process offers the promise of healthier organizations and better results overall. 

John E. Henley is Executive Director of Elmcrest Children's Center, Syracuse, New York. This article is based on a workshop presentation at CWLA's 2006 National Conference.

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States Increasingly Calling Teens' Violent Plots "Terrorism"

New state laws are increasingly allowing prosecutors to charge teens who plot violent attacks against schoolmates as terrorists, according to an article in *USA Today*. Usually, students arrested under such allegations are charged with conspiracy, attempted assault, or making bomb threats.

In the wake of the 1999 Columbine High School shootings, which left 15 people dead, and the September 11, 2001, terrorist attacks, state laws are allowing prosecutors to get tough, though overall school safety has actually improved in the United States. Today, fewer than 1% of violent incidents involving teens takes place on campus, *USA Today* reports.

Several high profile cases in the past year, however, have prompted prosecutors to exercise their option to charge teens with terrorism, including the case against four New Jersey students who planned an assault at Winslow Township High School last April. Prosecutors charged the boys with first-degree terrorism, making terrorist threats, conspiracy to make terrorist threats, and conspiracy to commit murder.

Jurors in Macomb County, Michigan, found 18-year-old Andrew Osantowski guilty earlier this year of terrorism for making online threats to kill classmates at his suburban Detroit high school, and after authorities discovered an AK-47 assault rifle, pipe bombs, a schematic diagram of the school, and Nazi paraphernalia in the teen's home.

Macomb County prosecutor Eric Smith said people would understand why such a charge was made if they saw "the sheer fear of the parents and others" in Osantowski's community.

Michael Greenberger, a law professor who directs the University of Maryland Center for Health and Homeland Security, told *USA Today*, "I don't know what they achieve except [that] it looks like a prosecutor is doing a wonderful job. In the end of the year, when they tote up what they've done for terrorism, they include these kinds of cases."

CDF Report Puts Children and Gun Violence in Perspective

A new report from the Children's Defense Fund (CDF), *Protect Children, Not Guns*, sheds light on the latest data from the U.S. Centers for Disease Control and Prevention (CDC) about children and gun violence.

According to national data, 2,827 children and teens died from gunfire in the United States in 2003. CDF's report calls this "a morally obscene statistic for the world's most powerful country, which has more resources to address its social ills than any other nation."

To put the statistic in perspective, CDF makes the following points:

- "The number of children and teens killed by gun violence in 2003 alone exceeds the number of American fighting men and women killed in hostile action in Iraq from 2003 to April 2006."
- "In 2003, 56 preschoolers were killed by firearms. In the same year, 52 law enforcement officers were killed in the line of duty."
- "The number of children and teens in America killed by guns in 2003 would fill 113 public school classrooms of 25 students each."
- "More 10- to 19-year-olds die from gunshot wounds than from any other cause except motor vehicle accidents."
- "Almost 90 percent of the children and teens killed by firearms in 2003 were boys."

In its analysis of the CDC data, CDF also notes the seven states with the most firearm deaths of children and teens in 2003—California, Florida, Illinois, New York, North Carolina, Pennsylvania, and Texas—and the seven states with the fewest firearm deaths of children and teens in 2003—Hawaii, Maine, New Hampshire, North Dakota, Rhode Island, South Dakota, and Vermont.

Download *Protect Children, Not Guns* online at www.childrensdefense.org/gunrpt_revised06.pdf.

Capital Punishment Favored for Sex Offenders of Children

More states are making the death penalty an option for anyone convicted of a second or subsequent conviction for rape, sodomy, or lewd molestation involving a child.

Last June, Oklahoma became the fifth state to allow the death penalty for sex crimes against children under age 14, a day after South Carolina enacted a law allowing the death penalty for multiple offenses against children under 11, according to the *Wichita Eagle*.

In May in Kansas, Governor Kathleen Sebelius (D) signed a new law calling on a sentence of life in prison without parole for sex offenders found guilty of at least three offenses of preying on children.

Florida, Louisiana, and Montana have similar laws. In 2003, Patrick O. Kennedy of Louisiana, was sentenced to death following his 2003 conviction for raping an 8-year-old girl, the *Wichita Eagle* reports.

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KIDS COUNT Data Book Finds More Kids Living in Poverty

National trends in child well-being are no longer improving in the steady way they did in the late 1990s, according to the Annie E. Casey Foundation's 17th annual *KIDS COUNT Data Book*. Each year, the *Data Book* reports on the needs and conditions of America's most disadvantaged children and families, as well as statistical trends.

According to the 2006 *Data Book*, 3 out of 10 child well-being indicators have worsened since 2000. More than 13 million children were living in poverty in 2004—an increase of 1 million over four years. The percentage of low-birthweight babies also increased between 2000 and 2003, as well as the number of children living in families where no parent has full-time, year-round employment.

"*KIDS COUNT* does contain good news in four areas: the child death rate and the teen death rate have fallen, the teen birth rate has continued to go down, and the high school dropout rate has improved," says William O'Hare, senior fellow at the Casey Foundation and author of the 2006 report. Looking across all well-being indicators, New Hampshire, Vermont, and Connecticut rank highest, and New Mexico, Louisiana, and Mississippi rank the lowest.

This year's *KIDS COUNT Data Book* includes an essay, "Family, Friend, and Neighbor Care: Strengthening a Critical Resource to Help Young Children Succeed," which zeroes in on a form of child care that has existed for decades, but has largely been overlooked. Within the *Data Book*, the Casey Foundation defines friend, family, and neighbor care as a form of child care offered in a home- or family-based setting, outside of the child's own home, by regulated or unregulated providers. The definition of home- and family-based care differs among states, organizations, and advocates, which shows the need for greater attention and clarity in the field.

The *Data Book* is accessible online at www.aecf.org/kidscount/sld/databook.jsp.

Urban Institute Brief Analyzes Kinship Care Surveys

The standard of living among children in kinship care improved significantly between 1997 and 2002, according to an issue brief published by the Urban Institute that analyzes three rounds of the National Survey of America's Families (NSAF). For nearly a decade, researchers have used the NSAF, a nationally representative survey of households, to gain insight into the health and well-being of children in kinship care.

The Urban Institute found in the data collected by NSAF in 1997, 1999, and 2002 that the portion of children in kinship care living in poverty steadily declined. The number of children in kinship care who do not have any health insurance is on a downward trend as well. Both trends occur more often for children in public kinship care than for children in private kinship care, although both groups' improvements were more pronounced than the gains made by kids living with their parents.

Over the past decade, public interest in kinship care has grown, and the use of kin as foster care parents increased substantially in the 1990s. In 2002, 2.3 million children lived with relatives without a parent present in the home.

The Urban Institute brief is available online at www.urban.org/publications/311310.html.

Lawsuit Claims MySpace.com Not Concerned with Child Safety

A 14-year-old Texas teen filed a \$30 million lawsuit last June against the popular social networking website MySpace.com, claiming it fails to protect minors from adult sexual predators.

The lawsuit calls the site's security efforts "utterly ineffective." MySpace advises parents on a "tips" page that users must be 14 or older, but the site does nothing to verify the age of the user, such as requiring a driver's license or credit card number. All a user must do is provide his or her name, e-mail address, gender, country, and date of birth to open an account.

"MySpace is more concerned about making money than protecting children online," the Austin *American-Statesman* quoted Adam Loewy, the attorney representing the girl and her mother in the lawsuit against MySpace parent company News Corp., and Pete Solis, the 19-year-old accused of sexually assaulting the girl in an apartment complex parking lot after picking her up from school and taking her to dinner and a movie.

According to the lawsuit, attorneys general in five states, including Texas, have asked MySpace.com to provide more security.

Lauren Gelman, Associate Director of the Center for Internet and Society at Stanford Law School, told the *American-Statesman* she does not think MySpace is legally responsible for its user's actions off the site.

"If you interact on MySpace, you are safe, but if a 13-year-old or 14-year-old goes out in person and meets someone she doesn't know, that is always an unsafe endeavor. We need to teach our kids to be wary of strangers."

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