

Children's VOICE

September/October 2008

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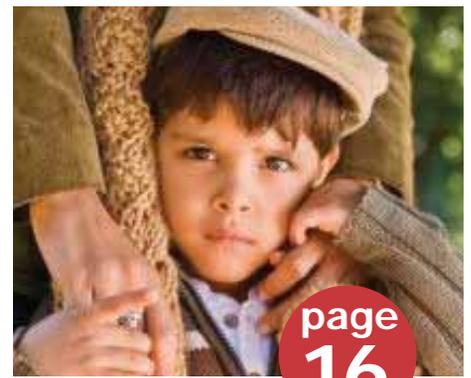
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PHOTO BY TONYA FOWLER

EditorsNote

Last spring, I stepped cautiously into my new role as editor-in-chief of *Children's Voice*, the magazine that former editor Jennifer Michael crafted into a crucial resource in the child welfare field. With most of the summer issues already set, I began planning this September/October issue immediately. It is with much humility that I introduce myself, and my first issue, to you—people working to better the lives of children every day, and people who I greatly admire.

I've already had several conversations with our team about what they'd like to see in the *Voice* and where they see it going. We want to provide you, our members and subscribers, with new information that you can use in your work every day, while continuing to highlight innovative programs being explored around the country to inspire and reenergize you. I see this magazine as a platform for not only the issues of our nation's most vulnerable children, but also for you to share your stories—what's made your agency successful and how you've improved your work with families.

When I joined CWLA in January 2007, we were five weeks away from our national conference in Washington, DC. I found myself in the middle of our busiest time of year here, scrambling to get materials ready for the following month. One of my first assignments was to write about our Kids-to-Kids award winners. As I was researching the accomplishments of one of the winners, Annabeth Barnard, I went to the website of the organization she'd raised money for, the Amani Children's Foundation. I was inspired by Anna, who had raised \$50,000 for orphans in Africa, and also by the foundation. After talking to Anna and her mother at the conference and learning more about Amani and New Life Homes, I decided to find out about the project firsthand. A year later—this past March—I was on a plane to Kenya. I've written about this experience on page 26.

It is this idea of communication—connecting people involved in child welfare all over the country, and seeing how their work ties into that of others—that the *Voice* should promote. I encourage letters to the editor, so please send feedback about this issue and every issue of the magazine to voice@cwla.org. Or, if you have ideas about what the *Voice* should cover in the future, let us know. I want this magazine to be a tool that you use to exchange ideas; and from these ideas, positive changes for children will emerge. ■

Emily Shenk

LeadershipLens

Christine James-Brown



This edition of *Children's Voice* reminds us of the universal nature of our work. People across the world share a concern about the health and well-being of children and the importance of strong families and communities, as demonstrated in the *One on One* interview with CWLA Senior Fellow, David Roth. Roth talks about the significance of the Convention on the Rights of the Child for improving outcomes for the two billion children under 18 throughout the world. This interview—along with the article “Putting Children First” by our exceptional new editor

“People across the world share a concern about the health and well-being of children.”

of the *Voice*—are important reminders of the struggles facing children and families outside of the United States.

The reality is that even CWLA, with its mission to serve the needs of families, children, and youth in the United States, cannot fully carry out this mission without having a major commitment to the billions of children who live outside our formal borders. In “Helping Immigrant Families,” four dedicated social workers talk about the challenge of serving an increasing

number of immigrant children and families. This is just one of many challenges that require us to include all of the world's children in our vision of improved outcomes. We also face the reality of international adoption, and the fact that there are thousands of American children living outside of the United States who could be in need of protection or support.

There are thousands of knowledgeable social workers and community workers around the world who have developed innovative ways to support families and children that could inform our work. Prior to joining CWLA, I worked for an international organization where I traveled to more than 30 countries and saw children and families faced with

overwhelming challenges. I also saw some incredibly creative responses to these challenges.

I believe that CWLA can have a commitment to the children and families in the United States and also to children and families in other countries. This commitment involves adding our voice to that of others around the world who advocate for better outcomes for all children. It also means sharing what we know about what works for us and taking

the time to learn what has worked for our international colleagues.

In a prior issue of the *Voice*, we reported that our child welfare system ranks low on an international United Nations survey. Surely we have as much to learn from other countries as we have to teach. “Supporting the Nation's Future” describes where the presidential candidates stand on the well-being of America's children. Both Senator McCain and Senator Obama have focused on important ways to improve life circumstances for children. But clearly they—and we—need to do more.

CWLA has called for a White House Conference on Children and Youth to be held in 2010. This conference and the hundreds of community meetings that will be held in connection with the conference will set the agenda for how our country can improve outcomes for children and its standing on the international child well-being scale. CWLA will also work with our sister agency, CWLC in Canada, and recommit to its involvement with the International Forum for Child Welfare so that we can realize the full power of an international league of people dedicated to the shared mission of improved child well-being. ■

Christine James-Brown

New Mexico CASA Programs Raise Funds, Awareness at Events

Within an organization composed of advocates, Julie Fallin is the variation on the theme, the advocate for the advocates. As New Mexico Court Appointed Special Advocates' (CASA) program coordinator, she helps local CASA groups—18 programs with 23 offices—fulfill their mission. “My job, in the position I hold, is to just support their needs,” she says.

“Our goal in the state is to have a volunteer for every child, and right now we’re about halfway there,” Fallin continues. To achieve that goal, each CASA must raise both awareness and funds, and several local programs stand out to Fallin as success stories on those two fronts. She likes to see one community’s lessons and experiences benefit another. “We’re a very wide-open network,” she says. “Nobody invents anything if they don’t have to.” Sharing ideas means local groups can experiment to see what brings them success. “Every community has such a different face,” Fallin explains. “You have to try some things to find out what works.”

Doreen Gallegos is the executive director of the Mesilla Valley CASA. For the past few years, her CASA’s fundraisers have brought big city entertainment to Las Cruces. Two years ago they presented a murder mystery dinner theater program, and last year they had an illusionist perform. “We put on a show—whatever it is,” Gallegos says. “People have a lot of fun.”

About 300 people have come to both shows, and because the murder mystery tends to go better with a smaller crowd, they are planning on having the illusionist back for another *Dance of Illusion* in February. The evening includes dinner, music from a local band, giveaways for the audience and a silent

auction. At \$50 a ticket, Gallegos says it’s “a lot of bang for the buck.” But most of the revenue comes from advertising in the program and table sponsorships. “We’ve definitely built relationships, we have several [sponsors] that I know that we can count on every year,” Gallegos says. The funds have allowed the Mesilla Valley CASA to expand its programs; recently they’ve opened a visitation center, which wouldn’t have been possible without the money from the shows.

People look forward to the annual event. “We’ve already sold our first table for next year, and we’re still over six months out,” Gallegos says. Her team has talked about expanding; they’ve considered larger venues and doing shows on two nights. The performances also help raise awareness of the need for advocates. Gallegos says that an evening of

Chaves County CASA's annual Make Time for Children clock auction brings crowds to Roswell.



entertainment lures in people who have never heard of CASA, but the show program comes packed with information about CASA’s mission and activities. Gallegos has seen a boost in the number of volunteers after the shows, and plans a training day to announce during the event.

Further east, in Hobbs, the annual fundraiser for the CASA of Lea County is a parade of homes. CASA partners with Habitat for Humanity for the four-year-old event,

dubbed the *Tour of Habitats and CASAs*. Executive director Anita Braun explained that Sheryl Reid, founding board member for the local organization, wanted the fledgling CASA to have a signature event to raise its profile in the community. A steering committee with board members from CASA and Habitat, along with unaffiliated community members, organize the four-home tour, which takes place in September.

“This has been a wonderful windfall for us, we don’t have to do any other fundraisers,” Braun says. Habitat and CASA evenly split the proceeds from the event, which brings in \$50,000 to \$60,000 yearly. Braun estimates the tour drew 500 participants the first year and has doubled in size since. “But the bigger impact is through the sponsorships,” Braun continues. “People are not telling us ‘no’ anymore; they want to be involved.” Sponsors enjoy perks including a cocktail party, a preview of the homes, and a number of complimentary tickets.

Every ticket is a chance for someone new to learn about the organizations hosting the tour; informational DVDs about CASA play on a loop in the houses. Braun says the tour has prompted people to get involved with the groups. She recalls a man who approached her about being a financial sponsor and volunteer. “The CASA idea really spoke to his heart, because he was adopted as a child,” she explains. Braun highlights two aspects of the Hobbs tour that contribute to its success: partnering with Habitat for Humanity and having a steering committee with community members from outside the two organizations.

Neighboring Chaves County, home to Roswell, also has a fundraiser the community eagerly awaits. Called *Make Time for Children*, the event couldn’t have a more literal name: Area artists make clocks that are auctioned off to benefit CASA. This year’s was the sixth event; they are scheduled around the beginning of Daylight Savings Time when clocks “spring ahead.” Local orthodontist Michael Taylor was the “mastermind” who came up with the idea and approached CASA. It proved so successful that volunteer coordinator Mary Colby says it has been duplicated in other areas of New Mexico.

CASA provides the mechanical parts of the clocks, and the artists create the housing, according to Colby. Common materials include papier mâché, wood, and ceramics, but other media crop up as well. “We’ve had one where they made a sculpture out of pennies ... We actually had someone make one one year out of a commode, which was very interesting,” Colby says. “You can’t even imagine the creativity.”

Two years ago, the event added a raffle for donated items to expand on the *Make Time* theme: a spa package can make time for relaxing, a vacuum helps make time for cleaning, and so on. The clocks can get pricey; the minimum bid is \$25 but clocks have sold for over \$1,000. In the raffle, people get a strand of raffle tickets for \$20, so those who can’t pay for a clock have a way to participate. Corporate sponsorships also add to the event’s revenue.

Last year there were nearly 100 clockmakers, and this year there were a few more than 100. In addition to area artists, clockmakers have been some of the children served by CASA, and creative community members. Colby says that Chaves County

CASA has a steady flow of volunteers year-round and doesn’t see a spike after the *Make Time* event, but wide press attention means it garners awareness for CASA. ■



Pleased with last year’s show, Mesilla Valley CASA will present the Dance of Illusion again in February.

On the Web

Visit the web pages for these Court Appointed Special Advocate programs to learn more about their work.

- Chaves County: www.casakids.org
- Mesilla Valley: www.mesilla-valley-casa.org
- New Mexico: www.newmexicocasa.com
- National: www.nationalcasa.org



National Newswire

Children's Issues in the News

NEBRASKA

Earlier this year, the Lincoln *Journal Star* reviewed a report from Nebraska's Foster Care Review Board that said the state had experienced a 16.4% drop in the number of children in foster care from 2005 to 2006.



Adoptions were up in 2006, growing to 423 from 347 the year before.

"We're heading in the right direction," said Todd Landry, director of the Department of Health and Human Services (HHS) division of children and family services, according to the article.

Still, the report found room for improvement; it recommended reducing workloads and increasing pay for caseworkers, as well as creating an oversight system for contracts HHS makes with outside companies for foster care services. Landry explained that contractors transport children, supervise visits, and provide foster care management, and HHS contracts require background checks, driver's license checks, and periodic audits, but he accepted the board's additional recommendations. "We're always looking to continuously improve the process," the *Journal Star* quoted him.

The board's report also cited high numbers of children with several placements, the *Journal Star* continued. In 2006, more than half the children in foster care were moved more than four times, which included almost 21% with 6–10 placements and another 16% with 11 or more placements. Board member Georgie Scurfield explained the consequences of multiple placements, the *Journal Star* said: It changes relationships between children and caseworkers, delays cases in the judicial system, and breaks down the lines of communication among parents, foster parents, service providers, and therapists.

To read the report, visit www.fcrb.state.ne.us.

NEW YORK

As students head back to class this fall, the new Mott Haven Academy Charter School was slated to open its

doors in the Bronx. The school aims to make improvements in two New York City systems—public education and child welfare. According to New York press reports, two-thirds of the school's population will be children involved in the welfare system. This year, the school planned to open in a temporary facility with approximately 90 students in kindergarten and first grade, adding another grade each year until it serves students K-8.

The New York Foundling, a CWLA member, is sponsoring the school. "We've been frustrated over the years by the failure of the public school system to appropriately serve the population we serve," the *New York Daily News* quoted Foundling executive director William Baccaglini. The *Daily News* report continued that Baccaglini said abuse, neglect, and other physical and emotional problems in the children's past compounded difficulties at



school. "All these issues have been an impediment to these kids

prospering in the public school system," he said, according to the *Daily News*. "Haven Academy is an attempt to remediate those issues."

When construction finishes in two years, Mott Haven Academy will move to its permanent home, a \$30 million facility in the South Bronx, which will have one wing for teachers and another for caseworkers, according to *The New York Sun*. Services for children and their families will literally be under one roof, giving them an opportunity to communicate better with each other while at the same time being able to concentrate on their primary roles; teachers can focus on academics and caseworkers will help with extracurricular issues.

The *Sun* reported Jessica Nauiokas, a former teacher and assistant principal, would be Mott Haven Academy's founding principal. To learn more about the school, visit www.newyorkcharters.org/proMottHaven.html.

VIRGINIA



Gov. Tim Kaine

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Governor Tim Kaine (D) created an Office of Early Childhood Development in an effort to coordinate and expand access to Virginia's development programs for early childhood, birth to age 5. In April, Kaine announced Kathy Glazer would head the new office. According to a press release from the governor's staff, Glazer's back-

ground includes leading the Working Group on Early Childhood Initiatives within the Virginia Department of Education (VDOE), and serving as Early Childhood Initiatives Director at the Department of Social Services (VDSS).

Glazer's responsibilities include coordinating programs for young children, including the Virginia Preschool Initiative, Head State, child care subsidies, provider services, and other state efforts to improve early childhood development and learning. "By focusing on the education and well-being of our youngest citizens, we do much to ensure the continued strength of our communities, workforce, and economy," VDSS Commissioner Anthony Conyers Jr. said in a press release.

The new office, which was beginning work by early July, is an interdepartmental project; Glazer will report to both VDOE and VDSS, and staff from both departments will be part of the Early Childhood Development team, in addition to a liaison to the Virginia Department of Health.

WEST VIRGINIA



Gov. Joe Manchin

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"We have so many people uninsured and we have so many kids with obesity and Type 2 diabetes," West Virginia's Governor Joe Manchin said, according to an Associated Press report in Huntington's *The Herald-Dispatch*. "With all the money we're spending, why are we not doing more for preventive care?"

The state is trying to do more with preventive care starting this school year with Kids First, a new program of health screenings for uninsured children. Approximately

20,000 children enter kindergarten in West Virginia each year, and all are required to pass a minimal health screening before starting school, according to the AP report.

Manchin wants every child to have a full physical exam performed by local physicians or other qualified health care providers. The screenings taking place this fall cover vision, hearing, speech, language, growth, and development, and will be provided to about 1,100 children, at a cost of around \$160,000. The money is



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coming from the nationwide \$43.7 million State Children's Health Insurance Program (SCHIP), which covers about 39,000 children in West Virginia, the AP reported. About \$35.5 million of the SCHIP funding is federal money, and because West Virginia's screening program is the first of its kind, it needed—and received—federal approval.

"This is a good use of those dollars," Manchin said, according to the article. "We're not afraid to get out there and do something different." Federal Medicaid spokeswoman Mary Kahn agreed that Kids First was worth funding. "My guess is other states are waiting to see how this goes," she told the AP. "The merits are obvious.

Doing a good, solid health screening on a child before they enter kindergarten has multiple benefits."

Manchin and his administration hope one of the benefits may be a lesson on living healthy that children can take home with them. "Kindergarten is a point where parents meet up with government," the AP quoted Melanie Purkey, director of student services and health promotion with the West Virginia Office of Healthy Schools. "We can use that coming-together to benefit not just the students but also their families." The AP article said Manchin may look at expanding the program to give health checks to second, fifth, and eighth grade students, so they can catch chronic problems before they begin.

Visit www.wvkidsfirst.org for more on the program. ■

Supporting the Nation's Future

Where do the presidential candidates stand on the well-being of America's children?

By Laura Weidner

This November 4, Americans all over the country will head to their polling places and cast votes for the 44th President of the United States. Professionals concerned with the well-being of our nation's children may wonder where the presidential candidates stand on such issues. This is especially pertinent considering CWLA's call for the next president to reestablish the White House Conference on Children and Youth in 2010, focusing specifically on child welfare.

What related legislation have the presidential candidates introduced or supported? How have they voted and what public statements have they made? And perhaps most important—where do they see child welfare going? It's necessary to consider how Senators Barack Obama and John McCain would, if elected, improve situations and outcomes for vulnerable children and families, as well as improve the systems themselves, including securing a qualified and supported child welfare workforce.

Senator John McCain

Born to a U.S. Navy officer and his wife in Panama in 1936, McCain's family eventually settled down in Northern Virginia. McCain graduated from the U.S. Naval Academy in 1958 and embarked upon a 22-year career as a naval aviator,

during which he earned the honors of the Silver Star, Bronze Star, Legion of Merit, Purple Heart, and the Distinguished Flying Cross. Senator McCain was a prisoner of war for five and a half years during the Vietnam War, experiencing episodes of torture. He retired from the Navy in 1981 and was first elected to the U.S. House of Representatives to represent Arizona's 1st Congressional District in 1982 and later to the U.S. Senate in 1986. In the 110th Congress, Senator McCain serves as the Ranking Member of the Armed Services Committee and also sits on the Commerce, Science, and Transportation Committee and the Indian Affairs Committee.

Prevention and Intervention of Abuse and Neglect

McCain has said that "America's most precious asset is its children." McCain has taken a particular interest and lead in protecting children from online predators. In the 110th Congress, McCain is a cosponsor of the KIDS Act (S. 431), which would require convicted sex offenders to provide for inclusion in the National Sex Offender Registry and keep current any Internet identifiers, including e-mail addresses and instant message names. In the past, McCain introduced

the Stop the Online Exploitation of Our Children Act of 2006 (S.4089) that would require sex offenders to register and update all Internet identifiers in a national online database, to be used by law enforcement to investigate crimes against children. Use of the Internet, under McCain's legislation, would be considered an aggravating factor in sex crimes against children—adding 10 years to any prison sentence.

Adoption

In 1993, McCain and his wife, Cindy, adopted a young Bangladeshi girl from Mother Teresa's orphanage and they have personally witnessed the benefits of adoption. According to his website, www.johnmccain.com, McCain views adoption as the ideal first option for "women struggling with a crisis pregnancy."

McCain is also a member of the Congressional Coalition on Adoption Caucus, a bicameral, bipartisan caucus of members of Congress dedicated to improving adoption policy and practice and to focusing public attention on the advantages of adoption. He has cosponsored legislation that would prohibit discrimination against families with adopted children, provide adoption education, and permit tax deductions for qualified adoption expenses, as well as remove barriers to interracial and interethnic adoptions. Some controversy was created this summer when in a July 13 interview in the *New York Times*, Senator McCain indicated that he did not believe in gay adoptions. This raised some concerns and in response, his campaign issued a statement that McCain's "position on gay adoption is that it is a state issue, just as he made clear in the interview that marriage is a state issue."

Tribal Child Welfare Issues

As former chairman and current member of the Senate Indian Affairs Committee, McCain has been very active on tribal issues. In 2006, he sponsored legislation reauthorizing the Indian Child Protection and Family Violence Act (S. 1899), which provides funding for child protection programs for tribal communities. The act was first passed in 1990 and is intended to channel child abuse prevention and treatment funding to tribal governments nationwide. Throughout their history, the two grant programs authorized for tribes to prevent or treat victims of child abuse and neglect have not been funded. During a 2006 Senate hearing, both McCain and Senate cosponsor Byron Dorgan (D-ND) noted a lack of accompanying federal funding. The Senate passed the reauthorization, but the House failed to follow through with final action. The Indian Child Protection and Family Violence Prevention Act Amendments of 2007 were reintroduced in the 110th Congress (S. 398) and have McCain's cosponsorship.

McCain also supports granting tribal governments direct access to federal Title IV-E Foster Care and Adoption Assistance funds. Currently, most federal funds—including

Title IV-E—that could address the needs of children from tribes that come into contact with the child welfare and foster care systems are not provided directly to tribal governments. Legislation has been introduced over the last several years to change that and provide equitable access, with the 110th Congress's effort being the Tribal Foster Care and Adoption Access Act (S. 1956)—of which McCain is a cosponsor.

Health

As president, McCain would work to reform the health care system by restoring control to individuals and families to obtain their own insurance. Employer-based coverage would still exist, but families would also have the option to instead receive a direct refundable tax credit to purchase their plans.

During the debate over reauthorization of the State Children's Health Insurance Program (SCHIP) in the 110th Congress, McCain stated that he strongly supports the central purpose of SCHIP, but was concerned that the bills passed by Congress would further erode private health coverage of children. He also wants to ensure that SCHIP covers the lowest income children without other coverage first.

McCain views reauthorizing Indian health care programs as a top priority. During the 110th Congress, McCain stated that he supported the majority



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of the Indian Health Care Improvement Act Amendments of 2007 (S. 1200), particularly those that furthered Indian self-determination, but took issue with certain components of the bill that would impact unborn children of patients to the Indian Health Service.

Education

McCain believes that there is no equal opportunity without equal access to excellent education. McCain thinks that parents should be empowered to choose their child's school, that schools must be held accountable for student progress, and that if a parent is unsatisfied with performance, students should be allowed to change schools. McCain supports the mission of No Child Left Behind and appreciates how the law has uncovered the realities of how students perform against a common standard, but would work to improve the legislation.



Senator Barack Obama

Born on August 4, 1961, Obama spent most of his younger years in Hawaii, but lived for a short period in Indonesia. After receiving a bachelor's degree from Columbia University, Obama worked as a community organizer in Chicago for three years and later graduated from Harvard Law School. Obama thereafter returned to Chicago to practice law and was elected to represent Illinois's 13th District in the Illinois Senate in 1996. After eight years of work at the state level, Obama was elected to the U.S. Senate in 2004. In the 110th Congress, Obama sits on the Senate's Veterans' Affairs, Homeland Security and Government Affairs, and Health, Education, Labor, and Pensions committees.

Prevention and Intervention of Abuse and Neglect

Obama has stated that he is "committed to preventing child abuse and supports proven and effective means to combat the tragedy of child abuse." In April, he signed on as a cosponsor to S. 2771, CWLA-supported authorizing legislation for the new president to reestablish the White House Conference on Children and Youth in 2010. The conference would focus on issues of child welfare and examine a cross section of critical topics that affect the well-being of America's most vulnerable children and families, including permanency, health and mental health care, education, substance abuse, housing, juvenile justice, workforce issues, tribal access and services, and strategies to help families while also preventing abuse.

Along those lines, Senator Obama cosponsored Dru's Law, which created a nationwide sex offender database and required greater monitoring of sex offenders who have been released from prison. This bill passed the Senate in 2005 and was incorporated into the Adam Walsh Child Protection and Safety Act, signed into law in 2006 (P.L. 109-248). In the 110th Congress, Obama is a cosponsor of the KIDS Act (S. 431) that would require convicted sex offenders to provide for inclusion in the National Sex Offender Registry and keep current any Internet identifiers, including e-mail addresses and instant message names.

Obama also cosponsored the Combat Meth Act, which was incorporated into the USA PATRIOT Improvement and Reauthorization Act of 2005 and signed into law in March 2006 (P.L. 109-177). In addition to tightening controls on the sale of ingredients of methamphetamines and enhancing criminal penalties for methamphetamine production and trafficking, this legislation provides money for grants to states that provide comprehensive services to aid children who are living in a home in which methamphetamine or other controlled substances are unlawfully manufactured, dispensed, or used. Competitive grants may also be given to states, territories, and Indian tribes to facilitate or enhance collaboration between the criminal justice, child welfare, and state substance abuse systems in order to carry out programs to address the use of methamphetamine among pregnant and parenting women offenders to promote public safety, public health, family permanence, and well-being.

Obama has also shown commitment to protecting women and children who are victims of domestic violence. He cosponsored the reauthorization of the Violence Against Women Act (VOWA) that was signed by President Bush in early 2006. This most recent reauthorization of VOWA creates new programs directed specifically at children and youth

exposed to such violence and would allow for more funding and a public awareness campaign to combat this social problem. In the 110th Congress, Obama reintroduced, along with Senator Evan Bayh (D-IN), the Responsible Fatherhood and Healthy Families Act of 2007 (S. 1626). This legislation would provide \$25 million a year for partnerships between domestic violence prevention organizations and fatherhood or marriage programs so that staff could be properly trained in domestic violence issues, more services could be offered to families plagued by domestic violence, and best practices could be developed for domestic violence prevention.

Obama is a strong believer in evidence-based home visiting programs such as the Nurse-Family Partnership and is a cosponsor of the broader Education Begins at Home Act (S. 667). Home visitation programs—either stand-alone programs or center-based programs—serve at least 400,000 children annually between ages 0 and 5 in targeted vulnerable or new families. Home visitation services stabilize at-risk families by significantly affecting factors directly linked to future abuse and neglect. Research shows that families who receive at least 15 home visits have less perceived stress and maternal depression, while also expressing higher levels of paternal competence. Home visitation programs may also reduce the disproportionality or overrepresentation of children and families of color, while improving outcomes for these families.

Under S. 667, legislation that Senator Obama has endorsed, the Department of Health and Human Services would collaborate with the Department of Education to make grants available to all 50 states over a three-year period, authorizing \$400 million for states to implement home visiting programs. An additional \$50 million would be authorized over a three-year period for local partnerships that create or implement home visiting programs targeted to English language learning families and another \$50 million would be targeted to reach military families through the Department of Defense. The legislation does not dictate which, or how many, home visiting models may be used.

Foster Care

Obama believes that key components of improving the foster care system are to increase the number of foster homes, support better training for foster parents,



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and increase coordination between law enforcement and child welfare officials so that abuse can be stopped. Obama also views it important to take care of those aging out of the foster care system. To that end, Obama has pledged to invest in innovative job training and development programs so that those leaving foster care will be able and ready to compete in today's competitive workforce.

Child Care and Head Start

Obama hopes to provide more affordable, high-quality child care. Under the Child Care Development Fund, states receive the same amount of mandatory funds each year. In addition, if states spend an additional amount of their own funds to match the federal dollars, states can draw on federal matching funds. States also receive Child Care and Development Block Grant (CCDBG) discretionary funds that do not require a state match. CCDBG funding increased from \$1 billion to

\$2.1 billion between FY 1997 and FY 2002, but has since decreased with the current administration opposed to increases and a lack of Congressional support. Obama, however, wishes to reverse this trend and adequately fund CCDBG.

Obama would also like to help states use their CCDBG quality set-aside funding and federal support in a more effective manner. He would encourage strategic plans that better coordinate 0-to-5 services, quality rating systems with higher standards, better student-teacher ratios, more family support, and more professional development and teacher training.



PHOTO BY TIM LLEWELLYN
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Obama has pledged to quadruple the number of infants and toddlers participating in Early Head Start, an early education program that fosters children's social, emotional, cognitive, and physical development while also supporting parents and caregivers. Congress reauthorized Head Start in 2007 (P.L. 110-134), preserving its role as a comprehensive early childhood program that promotes child development.

Health

If elected, Obama aims to sign universal health legislation by the end of his first term in office. Children would be mandatory beneficiaries under Obama's health care plan and young adults up to age 25 would have more coverage options, such as staying on their parent's health plan. He also plans to expand eligibility for both Medicaid and the State Children's Health Insurance Program (SCHIP). Obama supported efforts in the 110th Congress to reauthorize and encompass millions more low-income children in SCHIP and called President Bush's veto of the legislation "unacceptable." Obama also supports mental health parity and is a cosponsor of the Mental Health Parity Act of 2007 (S. 558).

Education

Obama understands and supports the goal of No Child Left Behind, but believes it is severely flawed in design, has been improperly implemented, and is drastically underfunded. As president, he would significantly reform the law—improving and individually tailoring student assessment and changing accountability mechanisms so that schools are better supported.

To reduce high school dropout rates, Obama finds it critical to start earlier and target and assist middle school students. He has introduced the Success in the Middle Act (S. 2227) that would provide federal support to improve the education of middle school students in low-performing schools. ■

These stances are presented for educational purposes. CWLA does not endorse either candidate.

Laura Weidner is a Government Affairs Associate at CWLA, specializing in health care.

Next Congress: Opportunities to Deal with Child Welfare

More than any Congress in the recent past, the 110th Congress saw the introduction of dozens of bills that dealt in some way with child welfare. In fact, as Congress was about to adjourn they were very close to passing a major reform bill drawn from H.R. 6307 and S. 3038. Depending on the fate of these bills, some or all of the items below could be acted on in the new 111th Congress. With a new administration, perhaps looking for new directions, the legislation of this Congress could shape the child welfare agenda for the next. Important work during the 110th Congress included the following:

- Legislation to restore the White House Conference on Children and Youth was introduced in both the Senate and House and sponsored by more than 65 members.
- Legislation to extend federal support to kinship care families was included in two different bills in the House and two in the Senate and gathered more than 100 supporters.
- Legislation to create a specific funding stream for home visitation programs was introduced in both houses and had the support of more than 80 members of the House and Senate.
- Three bills to extend federal child welfare training funds to private agencies were introduced.
- A bill to create a National Academy of Sciences study on the child welfare workforce was introduced.
- At least five bills to extend federal adoption assistance funding to all special needs adoptions were introduced.
- At least two bills to expand federal funding to all foster children were introduced.
- Legislation was introduced in both the House and Senate that would allow states to extend foster care up to age 21.
- Much of the advocacy community worked diligently to extend and protect children in foster care's access to health care through Medicaid.



Early in the next 111th Congress there will be much debate about the reauthorization of the Child Abuse Prevention and Treatment Act (CAPTA), particularly CAPTA's funding levels and how to strengthen the law. The 111th Congress will also likely focus on related issues such as protecting young people in controversial "boot camp" treatment facilities. In addition to these bills, the new administration will bring their own focus, perhaps borrowing from this legislation or perhaps going in an entirely different direction. The exact route forward will be determined by the choice voters make in November.

—John Sciamanna, Co-Director, Government Affairs, CWLA



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Helping Immigrant Families

Interviews with four California social workers

By Yali Lincroft



Recent shifts in immigration enforcement and the implementation of large-scale workplace raids have created panic in the immigrant community and increased fears of working with any government agency. In response to increased immigration raids, community agencies and advocates have mobilized to develop outreach materials and response plans. The role of child welfare and the courts in assisting children left behind after the raids forces child welfare agencies to become knowledgeable about state and federal policies that affect permanency planning. They must be able to navigate unfamiliar systems to facilitate parent-child reunification or identify alternative permanency arrangements in the best interest of the child.

Social workers throughout the country are often at a loss in working with the immigrant community. There is usually no agency policy about what to do with undocumented children and family, and social workers typically have little experience in placing a child with relatives living abroad. It is challenging to provide culturally and linguistically appropriate services, and paying for services with limited nonfederal funds are problematic.

Additionally, relationships with foreign consulates for initiating transnational collaboration are new or nonexistent for many child welfare agencies. Four California social workers specializing in immigration issues are interviewed in this article. The advice from these seasoned professional can assist others in developing programs and policies to meet the needs of this growing population.



Olga Nassif

**Olga Nassif, Children's Services Supervisor/
International Liaison Unit,
Riverside County Department
of Social Services**

"It's important to begin work immediately with the Mexican consulate and the Mexican child welfare agency (DIF) to apply for dual citizenship when placing a U.S. citizen child with relatives abroad. Similar to the requirements of the Indian Child Welfare Act, all education, health, and vital records should be transferred. You don't want a child to not enroll in school or not get services because of missing records."

About Riverside County: With a large influx of Los Angeles commuters moving to Riverside to take advantage of its affordable housing, Riverside is one of the fastest growing counties in Southern California. Hispanics constitute about 40% of the population. There are approximately 5,400 children in care in Riverside County.

Can you describe your International Liaison Unit? There are two service assistants and a supervisor who form this unit and we serve as secondary on cases. All our staff is bilingual, we have a list of all court-certified child welfare staff available to translate in different languages in our agency, and we use a translating agency.

The International Liaison Unit notifies the consulates when their nationals are involved with the juvenile system and processes requests for home studies, birth certificates, parent locator, criminal record clearance, and other related services. Our unit also works on repatriation when it is in the best interest of the child. We have 10 social workers designated to travel for placement of children with relative placements abroad. These social workers prepare the repatriation packet and transport and place children in foreign countries, as well as when children are repatriated back to the U.S. from foreign countries.

Since 90% of our cases involve Mexico, we have formed a close relationship with the Mexican consulate, Mexican child welfare agencies, and the U.S. embassies in Mexico. Since 2003, we served the Consulate of Mexico a total of 1,232

families and repatriated 96 children. We work with the Office of Refugee Resettlement on cases involving refugee youth.

What advice do you have for agencies doing this work?

The Tax Relief and Health Care Act of 2006 requires states verify citizenship or immigration status of any child in foster care under the responsibility of the state. To ensure compliance the social worker must inquire about the resident status of the child and immediately start the documentation searches so that there aren't unnecessary delays for potential immigration relief options that are time-sensitive.



Cecilia Saco

Cecilia Saco, Supervising Children's Social Worker, Los Angeles Department of Children and Family Services

"Like investigative reporters, we contact the consulates, schools, and churches in a foreign country, relatives, and others to help us gather vital documents. We work with our state office

to request delayed registrations of births for foreign-born children never registered in their home country. The process involves a relative taking an affidavit verifying the date and location of birth. A baptism certificate can sometimes be used. Bone scan tests are also used but they are costly and done only when no other information is available."

About Los Angeles: More than one-third of all the immigrants in California live in Los Angeles and 62% of all Los Angeles children have an immigrant parent. Los Angeles has approximately 23,000 children in care.

Can you describe the Special Immigrant Status Unit? The Special Immigrant Status Unit started in 1988. We currently consist of one supervising children's social worker, four children's social workers, four eligibility workers, two intermediate clerks, and one graduate intern. We serve as secondary for most cases—except for one region of the county that has a high concentration of immigrants, where we are the primary. All of us are county-certified translators, thus reducing our reliance on outside translators not familiar with child welfare terms. The unit has our own funds to pay for the Special Immigrant Juvenile Status filing fees

Immigration Relief Options for Undocumented Youth

Some immigrant children in contact with the child welfare system are undocumented, without any lawful immigration status. An undocumented youth at risk of deportation will find it hard to successfully transition to adulthood, without the ability to work legally, obtain a Social Security Card or driver's license, or open a bank account.

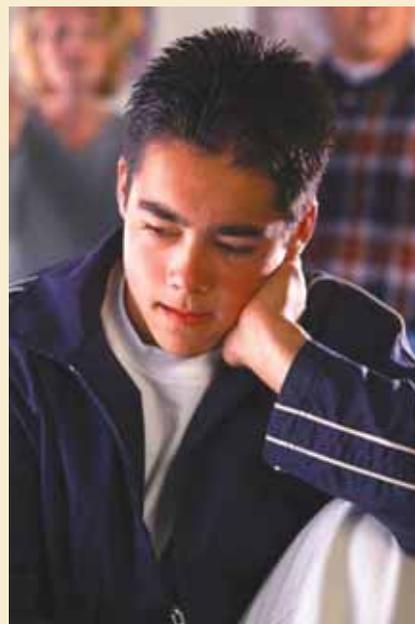
There are special laws available to assist undocumented children who have been abused or neglected in receiving lawful immigration status. County workers may be the first, and only, people a child sees who are able to identify these issues and provide assistance. A youth under the jurisdiction of a juvenile court who will not be returned to her parents due to abuse, neglect, or abandonment may be eligible to obtain a green card as a "special immigrant juvenile." The juvenile court must determine if it is in the youth's best interests to remain in the U.S. rather than returning to her country of origin. An immigrant child who was the victim of abuse by a parent or stepparent (or is the child of a parent being abused) may be able to obtain a green card under the Violence Against Women Act (VAWA), as long as the abuser is a U.S. citizen or permanent resident. This might benefit a child and mother who are receiving services because of abuse by a stepfather or husband who is a citizen. A child who is the victim of a crime such as domestic violence or incest may be able to obtain status with a "U" visa, as long as the child, or an adult helping the child, is willing to cooperate with

authorities in any investigation or prosecution of the crime. The person who committed the crime does not have to be a citizen or permanent resident. For example, this could help a child abused by an undocumented parent or nonrelative.

County agencies can file these applications themselves or work with a local immigration agency or attorney to file them. It is crucial to

identify the child as soon as possible, since starting to work early can be a big factor in success. For more information, visit www.ilrc.org/sijs.php, which has handouts describing different types of immigration applications; a free manual for social workers on how to file special immigrant juvenile applications; a "Benchmark" manual on special considerations for noncitizens involved in adoption, family court, dependency or delinquency proceedings; and *Living in the United States: A Guide for Immigrant Youth*.

— Kathy Brady, Senior Attorney, Immigrant Legal Resource Center



Helping Immigrant Families in Federal Custody

In the July/August 2007 issue of *Children's Voice*, an interview with Julianne Duncan, Associate Director for Children's Services, Office of Refugee Programs, U.S. Conference of Catholic Bishops/Migration and Refugee Services, on families facing federal immigration authorities was published; visit <http://www.cwla.org/voice/0707newamericanscustody.htm>. We asked Duncan for an update on what's happened in the past year.

What new regulations exist regarding the treatment of children and families at the detention centers?

Because of public outcry about the poor conditions at the Texas Hutto facility, the Department of Homeland Security has issued

Family Residential Standards to set the minimum, which such a facility should comply with. Since there is no other realm in which the United States locks up families, there is no body of standards that would otherwise apply to these facilities and the state governments involved did not have licensing procedures in place to use for this purpose.

The Family Residential Standards, for those detained at the two family facilities located at Hutto, Texas, or Berks County, Pennsylvania, can be found at www.ice.gov/pi/familyresidential/index.htm. Unfortunately, these are standards and not regulations, which means they are only enforced if DHS chooses to enforce them. Also see www.womenscommission.org/pdf/famdeten.pdf for more information about the detention of immigrant families.

Are there other regulations and policies that affect children during immigration enforcement actions?

During 2007, Immigration and Customs Enforcement (ICE) developed three policy memoranda that consider the needs of children in immigration enforcement activities.

1. ICE officials must develop comprehensive plans to quickly identify the sole caregivers of children prior to conducting workplace raids that result in the arrest



of more than 150 people. The guidelines also stipulate that ICE should facilitate communication between detainees and their family members by providing detainees with access to a telephone and staffing a toll-free hotline so that relatives seeking information about the location of a family member will have reliable, up-to-date information. The hotline number for finding family members does not seem to be widely available so far. As an alternative to the hotline number, we

recommend contacting the nearest detention center. To find the center and contact information, the Detention Watch Network website (www.detentionwatchnetwork.org/node/124) is helpful. It gives detention center information and provides contact information for possible legal assistance.

2. Nursing mothers should be released and alternative enforcement tools should be used, such as

an electronic monitoring device. When ICE determines that the nursing mother should be kept in custody, the field personnel should consider placement at Berks or Hutto family detention facilities. In general, the practice in recent raids has been to release sole caregivers of small children on electronic monitoring devices. If both parents are arrested in a raid and have minor children, ICE has recently been releasing one of the caregivers on an electronic monitoring device.

3. ICE should not take into custody a legal permanent resident or U.S. citizen minor child. ICE should coordinate the transfer of the minor to the nearest child welfare authority or local law enforcement. When ICE is unable to transfer the child to these government entities, the agency should document the parent's request that the child be transferred to the care of a third party. In practice, this separates families and sometimes places children in out-of-home care.

Unfortunately, these policy guidelines have not been codified and are not regulations, thus are nonbinding for ICE officials. Actual practice varies in different locations in the country although ICE does make an effort to follow these guidelines.

and for transportation to bring the clients to the immigration interviews. Instead of relying on a low-income family to pay for this fee or requesting a fee waiver from immigration, having our own budget has really helped speed up the application process.

What advice do you have for new agencies doing this work? The U.S. Citizenship and Immigration Services (USCIS) local field office staff has a lot of discretion in cases so it's important to build a relationship with your local USCIS agency. We have quarterly meetings with the local USCIS staff to review filings and discuss cases.



Anita Ruiz

Anita Ruiz, Immigration Liaison, Fresno County Department of Children and Family Services

"We have an excellent partnership with the Mexican consulate that will share their immigration legal counsel on child welfare cases, assist us in gathering vital documents, and with placing children with relatives in Mexico."

About Fresno County: Fresno County is a large, primarily agricultural county in central California. The county's racial make-up is approximately 34% white/non-Hispanic, 47% Hispanic, 6% Black, and 9% Asian (mostly Hmong), with approximately 2,500 children in care.

What does your position as the Immigration Liaison for Fresno County entail? This position first began 10 years ago as a contract position with a nonprofit agency and then as an internal part-time/office assistant position. Two years ago, it was changed to a full-time social work position and is considered a secondary on cases. I have monthly in-house meetings with management and front/backend child welfare staff focused on practice and policy issues. I help ensure the Hague Convention notifications are completed in a timely manner. By incorporating my position into the Emergency Response programs, families are referred to community agencies for possible immigration relief options.

What advice do you have for new agencies doing this work? It helps to form partnerships. I work closely with Fresno State University in training child welfare staff on immigration issues. Working with the Mexican Consulate,

we developed a Central Valley Child Welfare Social Work Network as a forum for regional collaboration.



Janet Barragán

Janet Barragán, International Liaison, San Diego County Health and Human Services Agency, Child Welfare Services

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Demographics

Children of immigrants are the fastest growing segment of the U.S. child population—roughly one in five children in the U.S. is an immigrant or a child of an immigrant. In 2007, California had 10 million of the nation's 38 million immigrants. About half of the children in California are children of immigrants. In the 1990s, especially rapid immigrant growth occurred in many of the Rocky Mountain, Midwest, and Southeastern states. The integration issues that California has faced for decades are now confronting these new high-growth states.

"This year, our Child Abduction and Protection Conference had over 400 professionals from the U.S. and Mexico—social workers, judges, attorneys. The San Diego Health and Human Services Agency, District Attorney's office, the California Attorney General's office, and the Mexican Consulate General organized the conference. The conference was translated simultaneously in Spanish and English and helped us share information from both sides of the border."

About San Diego

County: San Diego is the sixth largest county in the U.S. and is roughly the size of the state of Connecticut. San Diego has the world's busiest border, totaling over 70 million crossings per year, and has the highest number of apprehensions of undocumented immigrants anywhere in the country. There are approximately 5,000 children in care in San Diego County.

Can you describe your International Liaison Unit?

The international liaison position has evolved over the years. A senior social worker staffs the position with one support staff. With the workload increasing 37% yearly since 2005, a second support staff was recently allocated. Last year, our unit processed 1,497 international services requests. We assist our agency in all international aspects affecting the safety and the delivery of services to children and families. We identify how to coordinate social services with other agencies worldwide and we cross-report child abuse allegations to other Social Services agencies internationally. We also conduct courtesy home evaluations for Social Services agencies from other countries.

Community-based agencies gathered in Fresno County at a recent training on immigration and child welfare issues.



What assistance is most commonly requested? The most common requests are for parent searches, criminal record checks, vital document searches, home visits coordination, adoption studies, and other essential legal documents. Similar to the U.S., Mexico has numerous state and local municipalities. It is a challenge to work with these multiple jurisdictions. Mexican social workers are dedicated and capable professionals who may have limited resources; together we collaborate and often are successful in the reunification of families.

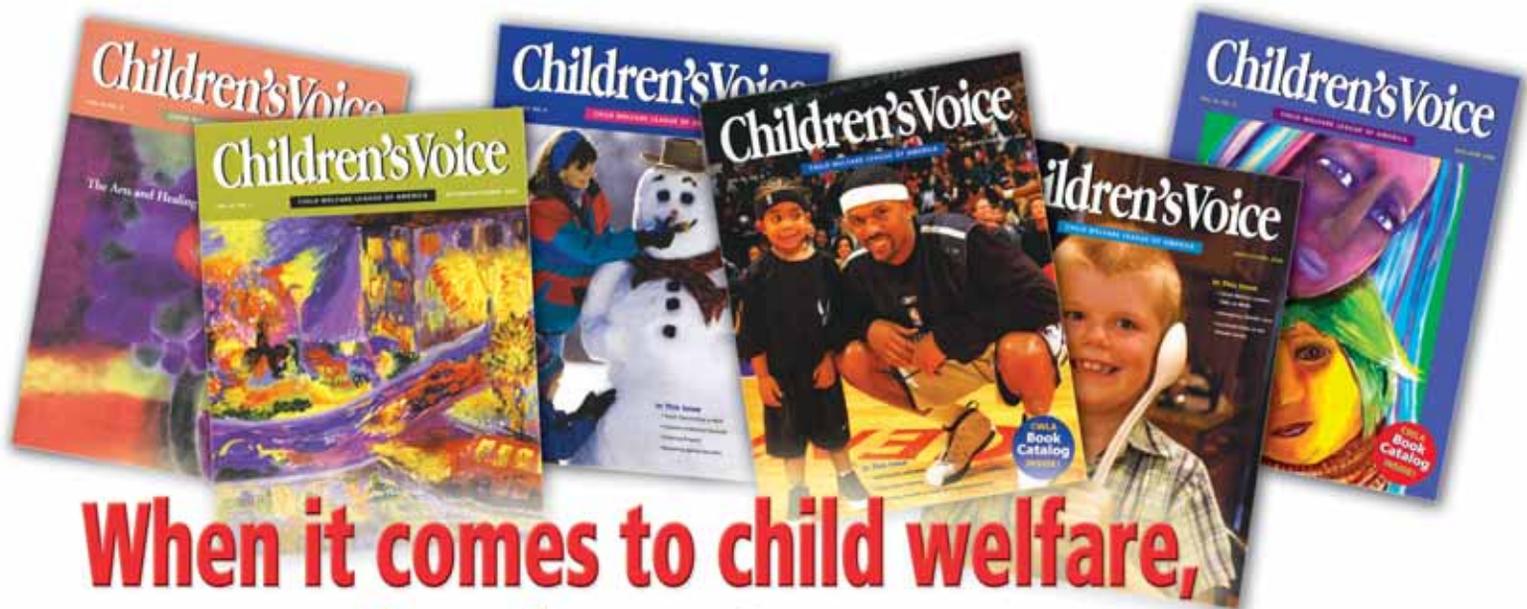
What advice do you have for new agencies doing this work?

The social worker should contact the potential relative placement abroad directly. By connecting with the relatives, the family becomes the liaison between their child welfare services agency and ours and jointly we can expedite a successful placement. ■



Yali Lincroft

Yali Lincroft MBA is a consultant for the Family-to-Family Initiative/Annie E. Casey Foundation. She is on the steering committee of the Migration and Child Welfare National Network, a coalition to improve services for immigrant families in the child welfare system funded by the Annie E. Casey Foundation and the American Humane Association. For more information, visit www.americanhumane.org/site/PageServer?page-name=pc_initiatives_migration.



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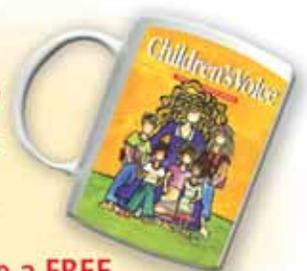
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Ellen Notbohm

Gauging Your Teen's College Readiness

The path from high school graduation often leads to a four-year college, but not all students are ready or willing.

On the day my son accepted his high school diploma, the school newspaper reported that somewhere between 50% and 60% of his fellow graduates were headed to a four-year college. The rest were not. My son was one of them.

The four-year college education isn't for everyone, and for students with learning differences it presents additional challenges. Is your child truly ready for the experience? Here are some areas to consider.

Basic Skills

College placement exams given during the admissions process will determine whether your child has sufficient reading, writing, and math skills to pass college-level coursework. If testing indicates inadequate skills, your child will be required to take pre-college level coursework. These classes will have numbers below 100, such as Math 060 or Writing 080. Their focus is purely on the core skill. In a writing class, the students do nothing but write, as opposed to the more typical English class, which is usually a combination of literature reading, discussion, and analysis with some writing component included. Students earn credit for these classes, but those credits may not be applicable to a four-year degree.

Self-Advocacy

The college that accepts your child wants him or her to succeed; "finish" statistics are part of a school's profile. College campuses are rich in resources to help students, from counseling and student services offices to special needs support groups. But to take advantage of this help, a student must take the initiative to seek out resources. Students challenged by learning disabilities must know how to self-advocate.

David Pontious, assistant director of Thomas A. Edison High School for different learners in Portland, Oregon, says, "We see so many students not doing well in college because

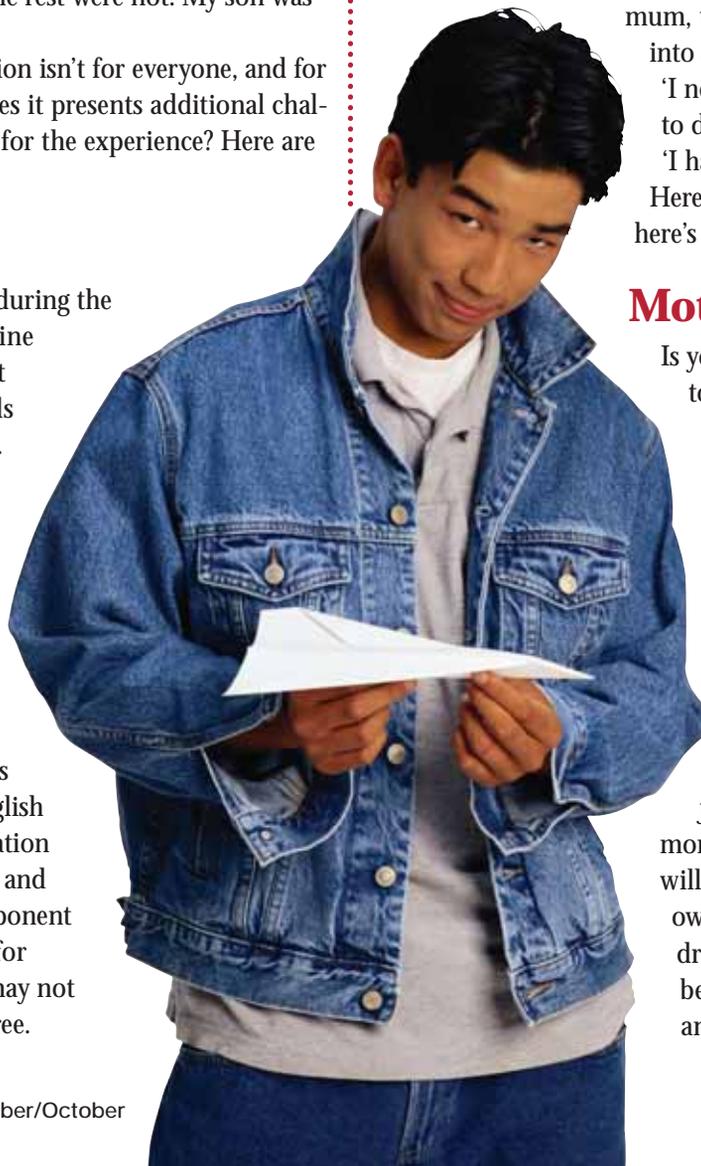
they are not requesting services. At a minimum, they need to be able to walk into a student services office and say, 'I need help and I don't know what to do.' Even better if they can say, 'I have trouble with X, Y, and Z. Here's how it affects my learning and here's what I need to be successful.'"

Motivation

Is your teen's motivation for going to college 1) intrinsic — she's really excited about it, 2) a default position — it's the next thing he's supposed to do, or 3) external — it's what you want her to do? If the internal motivation is not there, rethink your child's readiness.

Self-Sufficiency

Many teens have trouble just getting out of bed in the morning. If living away from home, will he be able to take care of his own hygiene, nutrition, and laundry without supervision? If she becomes ill, will she know when and how to seek a doctor? Is he



able to handle a credit or debit card responsibly? Balance a checkbook?

Executive Skills

Many learning disabilities are characterized by weak executive skills—such as organization and time management—so critical in the goal-oriented college environment. Does your student:

- have sound study skills?
- make use of a planner?
- know how to organize a long-term project and see it through to completion?
- know how to prioritize and strike a balance between academic obligations, organized extracurricular pursuits, and social life?

General Maturity Level

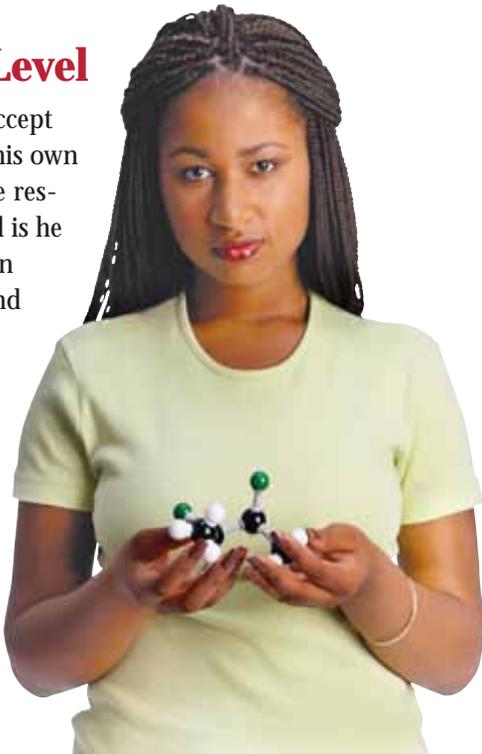
Does your child accept responsibility for his own behavior? Does he respect authority, and is he able to work within prescribed rules and boundaries? Can he problem-solve situations, both academic and interpersonal?

Should you or your child decide that he or she is not ready for the four-year college experience, what then become the options?

Will it be community college, full-time work, military service, marriage, or a combination of options?

“Two words: informed choice,” Pontious says. “We need to say: Here are all the things that are available to you. What are your interests? What are your abilities and strengths? Encourage them to explore their community, looking to see what might be a good fit.”

Pontious adds that allowing young people informed choice includes allowing for some trial and error. A student who professes to want to be an accountant even though he hates math should be allowed to sample the coursework or work in an accounting-related job. “Let him explore,”



Pontious says. “Try it for a year. If it doesn’t work out, that’s okay. That he discovered it on his own is going to be so much more powerful than some test score—or parent—saying ‘you are not good at math.’”

And that is exactly what happened for our son, who chose a combination of community college and work. No one was more stunned than he to discover that the major he had wanted to pursue since middle school was not a good fit. No one was more stunned than we, his parents, when his part-time job revealed impressive gifts we never knew he possessed. The day may yet come when he feels ready for that four-year college. In the meantime, he gets validation that his informed choices have brought growth and opportunity, and the confidence that comes with knowing that he has the power to choose wisely from his life’s menu of options. ■

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Author and columnist Ellen Notbohm is a three-time ForeWord Book of the Year finalist and a contributor to numerous publications and websites around the world. To contact Ellen or explore her work, visit www.ellennotbohm.com.

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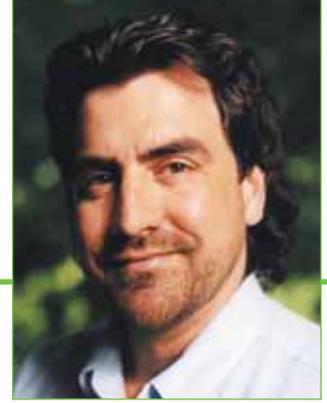
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Patrick Mitchell



A Child Can Change the World... One Dad at a Time

I've interviewed hundreds of dads connected to child- and family-serving programs over the years, and almost every time, they tell me their lives changed dramatically when they became fathers.

"If you have childish things on your mind, you won't grow up and neither will your kids. When you become a parent, everything revolves around the child—no more 'you' anymore," said Willie Toney, a Troy, Alabama, father who is also a police officer. And a father named Jeff Hagan, of Sault Ste. Marie, Michigan, told me this: "I definitely think of my kids first before I think about myself. They're my top priority now. I strive to do what's best for them and put their needs ahead of my own. It's all about sacrifices."

A documentary-in-progress, *The Evolution of Dad*, by Dana H. Glazer, will debut in theaters on Father's Day 2010. The documentary seeks to reveal how men see themselves, and how society perceives them. In a promotional clip, Dr. Kyle Pruett, a fatherhood expert with the Yale Child Study Center notes, "If you want to reduce gang membership, teen pregnancy, dropping out of school, abuse and neglect of children, and substance

abuse, you can do it by engaging fathers early and often in the lives of their children. We know this from the science; we know it makes sense. It's not easy, but it absolutely works. It works on these problems like aspirin on a headache." He continues: "Children who've had involved fathers often can take a bigger slice of the world and not be scared by it."

That's great news for children with involved dads, but it's also good news for the dads themselves, who, when they are improved people, have more to offer their children. "I think men become better people when they are involved and engaged with their children in positive ways," Glen F. Palm PhD, a senior research scientist with the National Center on Fathers and Families, told me recently. Palm teaches courses in child development, parent education, and parent involvement in early education at St. Cloud State University in Minnesota. I asked if there was anything about fathers that surprised his students when they learned it. "I think the biggest surprise is that, even though the men whom they might write off as not being the type to get involved actually have a much deeper sense of caring and responsibility for their kids than they might have imagined," he replied.

"I think that we're getting better at engaging fathers. It is time consuming. It's not always easy work. I think understanding and being committed

to why [father involvement] is really an important thing to do is essential," Palm told me. "It's important, not just for the kids, but for the families. Fathers are an untapped resource.... That's one of the things about men as fathers; we haven't tapped into their capacity," he said.

Charles Ellison, a dad in Leesburg, Florida, seemed to exemplify that capacity when he told me this: "Since becoming a dad, I view the world a lot differently. I understand more clearly now the importance of family values. I never grasped it until I became a father. I now try to instill in my children those same values my parents tried to instill in me when I was growing up." See dozens more of these inspiring Dad Quotes™ at www.downtoearthdad.org/quotes.asp. ■

A regular contributor to *Children's Voice*, Patrick Mitchell publishes a monthly newsletter, *The Down to Earth Dad*, and facilitates the *National Dads Matter!™ Project* for child- and family-serving organizations. He provides keynote addresses and trainings, and conducts *Family Storytelling Night™* events for programs and schools. To reserve Patrick Mitchell for speaking engagements, or to implement the *National Dads Matter!™ Project* for your families and community partners, call him toll-free at 877/282-DADS, or e-mail him at patrick@downtoearthdad.org. Website: www.DownToEarthDad.org.

Putting Children First

By Emily Shenk





Changing cultural attitudes toward adoption in Kenya through best practice care for infants

The day I arrived in Kisumu, a city on the Western edge of Kenya, Wilson pulled me across the living room and sat next to me on the couch, excited to read the children's Bible he'd been carrying around all afternoon. This boy—now a thriving 6-year-old at New Life Homes—was found on the 9 o'clock news. The broadcast showed then 3-year-old Wilson laying in his aunt's arms as she begged for help.

Wilson is just one of 1,000 children who would likely not be here today without the help of New Life Homes. Clive and Mary Beckenham, a British couple who came to Kenya as missionaries, founded the first New Life Home in Nairobi in 1994. They gave priority to infants orphaned as a result of HIV/AIDS, and at the time, the home was only one of two in the country equipped to care for these children. The Beckenhams' goal was to find permanent families through adoption. They have run the home in Nairobi since its inception, with their own home built on the same property. Over the past decade, the Beckenhams have built six more New Life Homes throughout Kenya, each run by an all-Kenyan staff led by a husband-and-wife team from the community.

When the first New Life Home opened, 95% of the adoptions were international, and only 5% of the adoptions were within Kenya. Just 14 years later, that trend has almost completely reversed, with 90% of the adopted children being placed with Kenyan families. "That's really best practice," Ada White, a child welfare consultant, says of adopting within a child's community. "It's really best for the child, and that's what adoption needs to be about." By using best practices in infant and child care, New Life Homes all over Kenya have changed attitudes toward adoption, encouraging hundreds of Kenyan families to create permanent homes for children within their own communities.

To understand the concept of adoption in Kenya, one has to look at its traditional structures. "Today we are still demystifying adoption," says Grace, a social worker at New Life Nairobi. "There are some people for who adoption is a vague concept because they've never heard of it." Although the idea of adoption was practiced in the past, it wasn't done so formally until recently. According to Grace, in the traditional African family system, an orphaned child would be taken care of by relatives. The key here being that the extended family took care of a child they already knew, so it was easily accepted.

In Kenya, adopting outside the family has negative connotations. "It's like taking strange blood into your family," says Prisca Ondeche, who directs the second New Life Home with her husband, John, in Kisumu. "Because you don't know where this child comes from, what kind of family it comes from, you know, behavior, beliefs, and all that." In following these beliefs, polygamy was traditionally used as a solution to build a family. For instance, if a couple wanted a child but was unable to conceive, the man might take another wife in order to have children.

This structure of taking in orphans from the extended family and practicing polygamy in order to bear children is becoming less practical, as the orphan crisis in Africa becomes dire. With the onset of HIV/AIDS during the past several decades, Kenya is facing daunting statistics. According to UNAIDS, Kenya has 2.4 million orphans, half of whom have been orphaned as a direct result of the AIDS epidemic.

While in Kenya last spring, Voice editor Emily Shenk visited New Life Academy, a school run by New Life Home Trust, which provides a range of permanency options for orphans. During the post-election crisis in Kenya last winter, the school nearly doubled its enrollment by taking in students who had been displaced by the violence.

PHOTO BY TONYA FOWLER

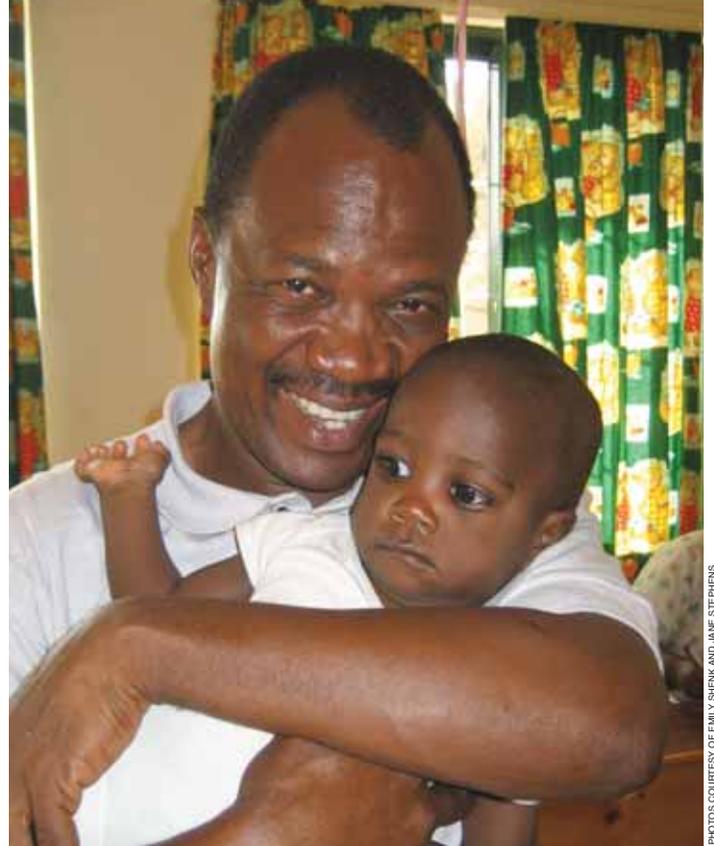
Caring for infants born to HIV-infected mothers is particularly important, because their chances of developing the disease can be greatly improved if given appropriate care. At New Life Nairobi, Dr. Paul Wangai serves as one of several staff doctors and oversees the medical care of the infants and children living at New Life. With new antiretroviral drugs, up to 90% of the babies who test HIV-positive upon admission become HIV-negative after a few months of care.

When the Nairobi home was not enough to care for children all over the country, New Life Kisumu was started as an eight-bed rescue center in 2000. It was the first branch of New Life Homes outside of Nairobi, and the initial goal was



to transfer babies to the Nairobi home once they were medically stable. "Starting up this rescue center within Kisumu was very important, because it brought in children from the whole of western Kenya," says John. Located in the Nyanza province, this area is the hardest hit by HIV/AIDS in Kenya, with an infection rate three times higher than the national average, so it was extremely important to establish a home that gave priority to children infected with or affected by the disease. In Wilson's case, his mother had died, and his aunt couldn't afford to take care of him. He was HIV-positive and also a child of incest, bringing shame to the family. At the time, he was so weak he couldn't even sit up. John and Prisca contacted Wilson's aunt and told her they could care for him.

Looking at the Kisumu home now, eight years later, it's hard to believe its modest beginning. During my visit last March, there were 44 children living in the home and 50 staff, about half of whom were working at any given time. Built in 2004, the home has expanded to four units: a wing



PHOTOS COURTESY OF EMILY BHEK AND JANE STEPHENS

(Clockwise, from above) John Ondech, director of New Life Homes Kisumu, picks up Jaiden, an 11-month-old in the home. Clive and Mary Beckenham, founders of New Life Home Trust, stand with Jane Stephens (center), whose Amani Children's Foundation provides half of the operating costs for New Life Homes throughout Kenya. Tonya Fowler, a volunteer from North Carolina, spends time with a boy in the Mombasa home.



for babies and another for toddlers, in addition to two permanent units that serve as family homes. The Simon Newberry Home cares for 10 children who need long-term medical care, often related to HIV/AIDS, and the Amani Cottage cares for 6 children with physical or mental disabilities, often cerebral palsy.

When Prisca and John got involved with the rescue center through friends of the Beckenhams, Prisca was working as a senior nurse and John as a banker. They eventually decided to

give up their careers—and take a 75% pay cut—to run the Kisumu home full time. For John, who grew up as one of 21 children, having such a full house isn't new. But sacrificing financial stability—while caring for his own family of seven—was a heavy decision. He says that the day he resigned at his bank, the path he was supposed to take became clear: “I thought, if one of my children was in a desperate need in a situation like many disadvantaged children are, what would I have wanted somebody to do for that child?” he says. “And the answer was in my heart: I would've wanted somebody to sacrifice for that son of mine. To get him from the streets, give him a home, give him all that he needed, and I would be happy. And that was what I ought to do.”

As the Kisumu home became known in its community, the Ondeches faced difficulty breaking down stereotypes about adoption. Early on, they were accused of trafficking children and taken to court. Officials who brought in abandoned babies would expect to see the same number of children at the home when they returned. But because some of them had been legally adopted, there were fewer children there. “So these are some things we had to deal with and try to sensitize the community so that they were able to see beyond the limitations of the culture and tradition,” says John.

With the frequency of adoptions to Kenyan families shifting from 5% to 90%, a greater understanding and acceptance of adoption among those in contact with New Life is obvious. “[People] are realizing there is no need to live a lonely life if you've never had children, when there are actually children here who need homes, who need families,” Prisca says. Adoption has also been made easier by recent changes in policy. Until a few years ago, there wasn't a set protocol for legal adoptions. Many families were intimidated by the court system and discouraged by the length of time it took for adoptions to be finalized. Things improved substantially with the 2001 Children Act (which also defined standards for children's homes), the 2005 adoption regulations, and the Hague Convention, which went into effect this April. With all of these changes, the adoption process has been streamlined so that it's done most efficiently and effectively and more adoption societies have been formed so that children can be placed in permanent homes quickly.

Along with clearer adoption procedures, John attributes much of the change in Kenyan adoptions to the best practices all New Life Homes follow in caring for babies and toddlers. “I think with the values New Life Homes stands for, we believe in being very good stewards, so whatever we get we invest it fully in the child. And as such, it has helped many parents when they come because they find healthy children, the kids are smiling, they are very active, they eat well,” says John. “In fact, generally the state of the children is better than children in most families. And that has been one catalyst in trying to speed up people accepting the change. So they've

drifted away from the portion of our culture that is not good, and that has brought about more adoptions.”

New Life operates by giving the attentive and specialized care required for infants that traditional group care settings in Kenya cannot. Abandoned or orphaned infants brought to most Kenyan homes or orphanages are sheltered with children of all ages, often with an inadequate number of staff. Jane Stephens, founder of the Amani Foundation, an American-based organization that supports administrative costs for New Life, has seen the difference between state-run homes and New Life over and over again. “The difference with New Life Homes is kind of the difference that a lot of our own federal programs have noticed—that if you get good nutrition and care for children in the first couple months, it changes their lives forever,” says Jane.



New Life requires all prospective employees to work as a volunteer in the homes for at least a year prior to applying for a position. In addition, they welcome other volunteers to help at any time. Having so many volunteers has helped the concept of adoption become less taboo in Kenyan communities where there is a New Life Home. “When a volunteer comes

and they learn that these children can be placed through adoption, they go out and talk to their parents... which means their extended families have had to open their eyes to adoption," says Grace.

Maintaining proper records and having social workers onsite has also contributed to New Life's success in finding permanent families for these children. "You'll find that quite a number of homes, they just get involved in bringing in these kids and feeding them... and much of the legal part was not being well-handled, which becomes a big obstacle when a parent would like to adopt," says John. Having the child's history and legal documents required for adoption has instilled more confidence in Kenyan families that adoption can be a successful option for them. "When a child gets [brought in,] the social workers go back to the hospital and the police and they get the documentation done," says Jane. "So they are really what's making it possible to have family formation."



Children adopted since New Life Homes opened include Bui, Maya, Eva, Robbie, and Joe.

The Amani Children's Foundation

Though most of the children at New Life Homes are adopted within Kenya, a few have been adopted by American families. One family, Jane and Chad Stephens of Winston-Salem, North Carolina, were able to adopt two infants, Joseph and Wambui. Since that time Jane's cousin, Rene Barnard, and her sister, Jean Corey, have adopted children from New Life as well.

All three families had teenagers at the time, and they worked together to found the Amani Children's Foundation in 2004 as a way of expanding the network of homes that have made such a difference for their families. Amani works to develop partnerships of service, creativity, and leadership between Kenyans and Americans to serve the orphaned children at New Life Homes.

Amani groups in North Carolina, Tennessee, Indiana, Pennsylvania, and Georgia work to raise funding and awareness for the homes. They do so through local parties, sports events, lectures, African bead parties, and other creative community events. Because Amani is volunteer-led, 100% of donations go directly to care for the abandoned children at New Life Homes in Kenya. Though Kenyan business families have provided for building and outfitting the homes, Amani provides about 50% of the operating costs. To learn how to become involved, go to www.amanichildren.org or e-mail info@amanichildren.org.

Grace says New Life is happy with the progress they've made in encouraging Kenyan families to adopt. "You certainly cannot compare the year 2008, or even 2007, to 1994 or 1995 when New Life Homes first started," she says. "Mary and Clive's vision, even as they founded the home, I believe is what has really helped New Life Homes place so many of its children through adoptions."

Peter Wasamba, a literature professor at the University of Nairobi, adopted his son, Timothy, five years ago. When he and his wife had trouble conceiving, it was his grandfather—now more than 90 years old—who suggested adoption. This was remarkable, considering the stigma adoption in Kenya faces, particularly among men from his generation. "So he was supposed to oppose it if we proposed it, but in fact he proposed it and even insisted on it," says Peter, who now encourages other couples considering adoption to visit New Life. "The problem is getting people to know that you don't need to be rich to adopt. What you

need is just a heart to accommodate and wholly accept the child you bring home."

Though the majority of New Life babies get adopted, some do stay behind due to medical reasons. In order to create a sense of permanency for these children, family homes—small groups of children, along with a 'mother' and two 'aunties'—are established. "New Life Homes is always working to get [the babies] in a family," says Jane, who adopted two children from New Life in 1999. "That's always their goal. Even if it means they have to make up a family." The children grow up together in these family homes, attending the best schools in their communities and receiving the medical care they require.

At the heart of the New Life's mission is putting the child first



A staff member plays with toddlers at New Life Kisumu during their afternoon break. About 50 staff care for the 40-45 children who live in the home while waiting for permanent placement.

by giving them a nurturing environment with loving caregivers. This is perhaps most evident at the Kisumu home while watching Angela, the head caregiver in the babies' wing. At times when a few of the babies start crying, Angela starts singing, calmly, "Jesus Loves Me" or "If You're Happy and You Know It." Within moments, she has the full attention of all 15 pairs of eyes; some of the babies are even clapping and moving to her voice. For the past five years, she's led her team, and cared for these babies, with the consistent, motherly strength that these children so desperately need.

After a day and a half working at the Kisumu home—with an embarrassingly frequent number of breaks—I was sitting on a clinic bench waiting for Sarah and John's HIV tests to be completed. Sarah and John were both about to be adopted, and a final HIV test was the last step in the adoption process. I was nodding off, exhausted. I told Angela I couldn't believe she works so hard every day. "At the end of the day, it's fulfilling," she says. "I look back and think of a smile John gave me, for example, and it's worth it."

During the post-election violence in Kenya last winter, Angela was one of several staff forced to stay at work overnight. "Employees were like refugees, being hosted by the babies," John Ondече jokes, though it's all too true. At the height of the violence, it was too dangerous for many

staff members to make their commute home. Several stayed at New Life for days, sleeping on mattresses on the floors of the playrooms. During this time, they didn't take the children outside for their typical afternoon playtime. There were sounds of bullets around the clock, and food and milk were in short supply. "We told the children, 'People of the devil are fighting and people of God are not—that's why we're here,'" says Prisca.

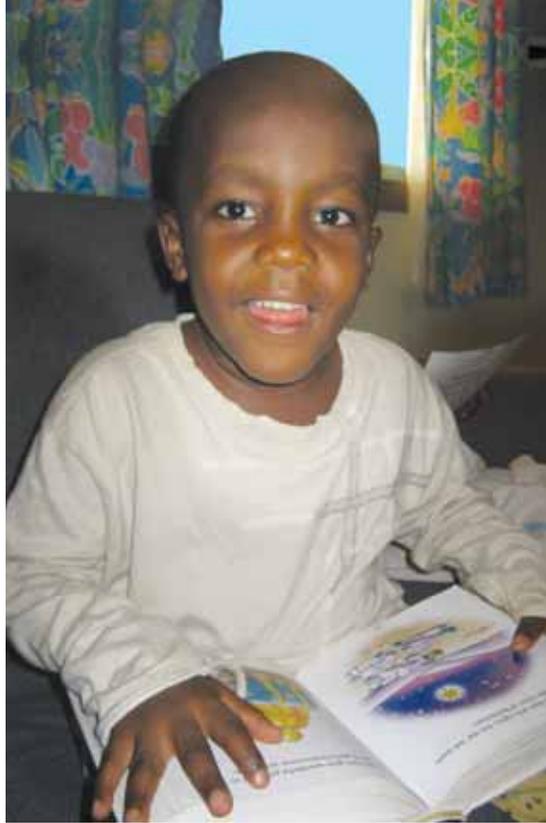
But John is quick to point out that even during this time of crisis, the good in the Kenyan spirit shone through. When a grocery store finally reopened in Kisumu, the owner let John skip the lines and instead come around the back of the store to receive food for the children. "Even during a time of great confusion and personal crisis, this man thought of the children," John says. "They were not part of this, and they should not suffer because of it." Peter Chege, who runs New Life Home Academy, a school and feeding center in the Nairobi suburb of Ruiru, echoes these sentiments: "The community was so involved. This is what the news does not report," he says. "We asked for donations and people brought in clothes and food—even old utensils."

And during that time, even bigger miracles occurred. Despite the violence and chaos many Kenyan families were dealing with, three babies were adopted from the Kisumu

home during January and February. These numbers were down from their average of four adoptions per month, but quite remarkable considering the circumstances. In Nairobi, the news was even better. According to Grace, they had already placed 16 children from the Nairobi home during the first 10 weeks of 2008.

When parents are interested in adopting from New Life, they must go to an adoption society (New Life works with several agencies but is not an adoption agency itself) and go through a formal approval process. Once a couple has been approved as adoptive parents, they spend time getting to know their child during several visiting sessions. Caregivers explain this process every step of the way; the children know they're meeting their new parents and they are told when they'll get to go to their new home. All of the other toddlers know, too, and participate in the adoption ceremony.

In Kisumu, things were getting back to normal in mid-March, just a week after



Six-year-old Wilson, part of the family home at New Life Kisumu, reads a children's Bible after returning from a day at school.

Kenyan leaders signed a peace agreement. On our last day in Kisumu, I witnessed the third adoption ceremony held that month. Brian, a toddler, was going home with his parents that day, and everyone knew it. I expected this to be a hardship—seeing Brian leave all of the children he knew as brothers and sisters—but he was calm, clinging to the parents with whom he'd already bonded.

With the toddlers sitting at a round table with snacks, employees and volunteers gathered into the room. Brian and his parents stood at the front, beaming. John led everyone in a prayer and then congratulated the new family. All of the children

clapped, excited for Brian, and said their goodbyes. There was one goodbye, though, that was particularly hard. As the ceremony ended, Prisca rushed out of the room into a nearby office, tears welling up in her eyes. Just as Brian was about to leave the room, she put a big smile on her face and ran out of the office in time to give him a final hug. After they have raised many of these children since infancy, often nursing them back to health, each adoption is bitter-sweet for the Ondeches.

Because of people like Prisca and John—along with the Beckenham's' guidance, as well as financial support from thousands worldwide—New Life continues to grow and care for more children. They accepted their 1,000th baby at the Nyeri home this July, and have placed more than 70% of these children with adoptive families, the majority of whom come from the same community. Most of the remaining children have either returned to their biological families (who later came forward) or stayed in one of New Life's long-term homes due to medical reasons. New Life Home Trust has also expanded to include two schools and feeding centers, through which they educate and care for orphaned children living with relatives in their own communities. Though still a small operation in comparison with the thousands of orphans needing care in Kenya, New Life is using best practices to change the way the country looks at caring for infants and seeking permanency for them—a life-changing trend for children like Wilson. ■

Emily Shenk is Editor-in-Chief of Children's Voice.



Angela, the head caregiver for babies at New Life Kisumu, sings to several boys just before their nap. Due to cultural beliefs, most of the babies brought to New Life Homes are boys.





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Becoming a Higher Performance Organization

By William Atkinson



Jeff Bormaster

Jeffrey S. Bormaster, a senior consultant of private agency services for CWLA, has been working in this field for over 40 years, helping educational, governmental, and non-profit agencies. During that time, he has become keenly aware of two major challenges that agencies face. “There are a lot of challenges these days for

agencies related to more demand for services, less government funding, and increased challenges in recruiting and retaining a workforce because of pay rates and long hours,” Bormaster says. “I have talked with a lot of agencies that make it clear to me that they need help in getting better. However, when I ask them what they need help with in specific, they have a difficult time specifically defining their needs.”

In response, Bormaster spent time studying the research literature on topics such as workforce management and change management. With this information, he identified specific areas where agencies may need help. He organized this information into a matrix, which he calls “Assessment, Training & Consultation to Help Your Agency Become a High(er) Performance Organization.” Bormaster’s matrix has six elements: workforce, program, accreditation, marketing/fundraising, governance, and senior management.

To help implement his program, Bormaster sits down with agency leaders to identify their challenges. In many cases, agencies struggle with more than one of the six areas, leading leaders to feel overwhelmed by where to begin. Their agencies may need help at several levels: with the board, leadership, programs, human resources, or fundraising. “I explain to them that they can’t tackle everything at once,” he says. “They need to be strategic and select one area to start.” He then begins working with the agency where and when it is ready and able. “If we work long enough in one area and start to see some results, they will often then be willing to start working on some of the other areas,” he adds.

In some cases, an agency will claim that it has neither the time nor the money to start working on any of the areas. Bormaster's response: "Not having the time or money is not a reason, because this is something you can't afford not to do." While each agency needs help with a unique combination of improvement opportunities, Bormaster is finding the problems agencies most often struggle with are personnel (workforce) and money (marketing/fundraising) issues. He points out, however, that the matrix emphasizes everything is linked. "For example, we may find that part of the reason they have money problems is because they have problems with programs," he says.

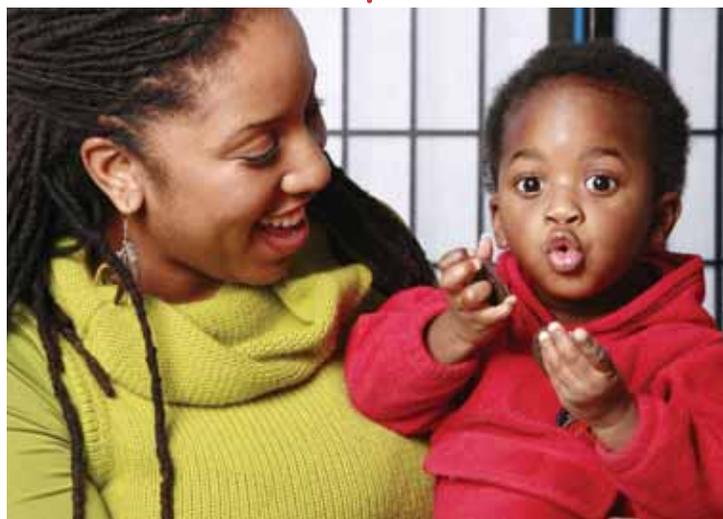
Through training and consultation, Bormaster has found that the organizations committed to change tend to do quite well with his matrix program. Three organizations share how Bormaster helped achieve meaningful improvements.



Parsons, in Albany, New York, is a 27-program agency that provides services in foster parenting and adoption, family support services, educational programs, advocacy, residential care, and recreational services. "We have supervisory training in place because, by the nature of our business, there is a need for clinical supervision," explains Rick Johnson, chief operating officer. "We conduct the supervisory training annually, and it fills a particular need." He adds that the agency realized it also needed training for management supervision. "We were searching for a contextual program—something that would speak to supervision in terms of knowledge, tools, and skills in a generic way, which would provide a context or framework for all supervisors on the management side."

Bormaster had worked with the board at Parsons around governance issues in the past, and some of the staff had attended Bormaster's marketing training programs. As a result, the agency became aware of another one of his programs, Supervision for Success. "I realized this might be what we wanted," Johnson says. "We didn't expect it to be a 'be all and end all,' but we felt it would be a beginning foundation."

From Johnson's perspective, quality supervision relates to retention. "Research shows that people leave employment not just for money, but because the supervision is not adequate, not reinforcing, and not helpful," he explains. This not only relates to



the transfer of knowledge and the development of skills, but also to the support to engage in, and succeed with, complex and challenging work.

Parsons arranged to have Bormaster start by doing training for its middle managers. "We didn't want to start at the top or at the first line," Johnson says. "My goal was to assess the impact of the course and then decide where to take it." It turned out to be a successful experience for the 36 supervisors who participated. "Jeff has an excellent personality for training, and he has great mastery of the content, so he ended up having great credibility with the people," Johnson continues. "He was able to motivate them."

In fact, he motivated them so much that one group of supervisors wanted to revise the policy at Parsons that related to the role of the supervisor. "Through our regular policy development process, they amended existing policy to reflect the new principles and techniques they had learned relative to the role of the supervisor," Johnson says. The supervisors also wanted to get their bosses, who are the directors, involved. Johnson approached their agency council, composed of directors, and explained what their staff had asked for. The result: They just finished this class in March, and it was extremely well received. "Now, the directors can knowledgeably reinforce what their subordinates have learned in the prior class," says Johnson. Parsons is already planning for next year's class, and Bormaster is in the process of training members of the middle management staff to be trainers in this program.

La Familia Inc.

La Familia is a nonprofit social service agency in Albuquerque, New Mexico, licensed to provide adoption, treatment foster care, and outpatient counseling services. It also provides care management services for adults and support services for adolescents who are aging out of the foster care system. Beverly Nomberg, president and CEO, says the agency has come to trust Bormaster. "We have found that, the more he is here, the more we tend to grow and prosper," she says. "As such, we decided to continue to use him in a variety of capacities. He not only helped us create a strategic plan and develop an active strategic planning process, but also helped us shift from a non-active board to an active board."

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As a result of Bormaster's work, the board at La Familia now participates in much of the planning for the agency and is moving into fundraising for the first time. The board is also getting involved in utilization of resources and efforts to acquire a building and develop a building plan for the agency.



Bormaster helped the agency take a hard look at its budgets and deficits; it ended up closing two programs. "We closed one in 2004 and another in 2005," Nomberg says. "It took us a while to come to these conclusions, even though Jeff had said a year or two beforehand that we would have to close them. In other words, he could see it more clearly and objectively than we could." Certainly, she admits, these were not easy decisions to make, and there was some fallout. For example, the agency had to layoff about 20 staff. "This was disruptive to the whole organization, and it was also very demoralizing," she says.

Since then, though, the agency has become much sounder financially, with a very positive cash flow. "This has put us in a very good position to move in the direction of acquiring the building and developing a real long-term asset for the organization," Nomberg continues. "In working on the building, we won't have to use any more financial reserves. We can do industrial revenue bond funding for the building. We can

then use our financial reserves for building programs." Three years ago, the agency never would have imagined that it would be in this kind of positive financial position. "If we hadn't taken a hard look at our programs and decided to close two of them, we would not be in this positive position," Nomberg says. La Familia is now in the habit of looking at every program and potential program with a critical eye for opportunity. "Jeff has always taught us to look at everything, and never arbitrarily say 'no' to anything," Nomberg says. "See what it might have to offer. If it is positive and offers a base for building on it, then we need to see if it makes sense to go for it."

Assessment, Training & Consultation to Help Your Agency Become a High (ER) Performance Organization - 2008

ORGANIZATIONAL OUTCOMES

If your agency wants to

1. Increase staff longevity
2. Improve staff morale
3. Increase staff productivity
4. Increase satisfaction
 - Client -Purchaser
 - Client-Service recipient
5. Improve client outcomes

GUIDING PRINCIPLES

Our Agency will....

1. Be Mission driven
2. Empower staff
3. Use evidence based practices
4. Use Data as the base for making decisions
5. Focus on outcomes achievement
6. Be Transparent
7. Be Accountable and hold all staff accountable

WORKFORCE Becoming an Employer Of Choice

1. Hiring Right/ Gen Y Line Staff
2. Staff Retention: How to Supervise for Success: A Research based Practice Model (3 parts)
3. How to Retain Your Y, X & Boomer Workforce
4. Stop Evaluating/ Start Doing Performance Management for Organizational Success
5. Designing Pay Systems to Support Org Success (follow-up to Workforce workshop 4)
6. Developing the Next of Generation of Leaders
7. Managing a multi-generational work force: Boomers, Gen X and Gen Y
8. Employee Handbooks that Support Retention
9. Designing Your Senior Leadership Succession Plan

Systems Change Decision Making

1. How to Collaborate
2. Systems Coordination/Integration
3. Performance Based Contracting
4. Shared Risk Contracting
5. Do We Acquire and/or Merge?

PROGRAM

1. Implementing Evidenced Based Practice
2. Outcomes: Proving Our Programs Work
3. Are Our Programs Family Centered Enough?
3. Designing A Performance Improvement Process
4. Re-Designing Residential Services
5. Program Assessment & Improvement
6. Designing Surveys That Help Us Improve (and Help Raise New Dollars)

ACCREDITATION

1. Should We Become Accredited?
2. Are We Ready to Be Accredited? Readiness Assessment and any Accreditation topical requests
3. "How to" training & consultation on any COA section

MARKETING/FUNDRAISING

1. Successful Fundraising in Today's World
2. Are We Selling the Right Products?
3. Designing Marketing Materials that Work
4. Annual Reports That Work
5. Designing Program Surveys That Help Raise Money

GOVERNANCE Functioning as a 21st Century Board

1. Our Roles & Responsibilities
2. Guiding Organizational Improvement:
 - Strategic Planning
 - Insuring Org. Accountability
 - Risk Management
 - Role in Fundraising
3. Succession Planning/Facilitation
 - Board
 - CEO
 - Senior Staff
4. Understanding the Future for Child & Family Serving Nonprofits

SENIOR MANAGEMENT

1. Should We Be Managers or Leaders?
2. Leading Successful Organizational Change/ Org. Transformation
3. Building a Powerful Leadership Team:
4. Becoming Mission Driven
5. Building Team Trust
6. Managing Healthy Conflict
7. Creating Organizational Accountability
8. Using Data to Make Decisions

Los Angeles-based **Drew Child Development** operates a child welfare division, an early child education division, and a mental health division. Mike Jackson PhD became president and CEO in early 2002. At the time, he admits, the agency needed to do an “extreme makeover.”

“It had been very prosperous when it first opened in 1987, and it received a lot of grants and private sector donations,” he says. “However, by 2002, a lot of that had eroded.” The agency was also in a stagnant mode in terms of growth. “When I came aboard, we got a major contract, which was an alternative payment contract,” Jackson explains. “One of my first jobs was to put this contract in place. However, we didn’t have the infrastructure to do this.”

Several members of the board didn’t seem to be clear about where the organization should be going strategically. “They spent six months telling me about the problems the agency had, not the direction it should be taking, so I decided to set my own direction,” Jackson says. In addition, he brought in some new board members, so there was a learning curve and a lot of challenges related to helping them learn about the finances of the agency.

In the meantime, the organization was beginning to grow, and Jackson was working on implementing a lot of the new programs. “We grew from a mom-and-pop-sized organization to a medium-sized organization almost overnight,” he says. “Our budget went from about \$4 million to about \$20 million in a short time.” To assist in the transition, Jackson brought Bormaster in to help sort through all of this and to help the organization move ahead, especially in light of the new revenue and resulting growth.

Bormaster met with the board and explained that Jackson needed support and that everyone needed to develop a plan together to ensure the organization could continue to move forward. Bormaster then helped Jackson develop a one-year plan to help him focus on his leadership role. “The board provided me with an executive coach, who had an open and objective attitude about the agency,” Jackson says. “He helped me and other members of the executive leadership team make the transition, especially as it related to personnel issues.”

According to Jackson, the transition was very challenging, and it took a lot out of him personally, especially working through the required organizational and cultural changes. “However, Jeff was very instrumental in helping me, the management team, and the board work through all of the various issues,” Jackson says. “Overall, we are now in a better position for the future because of the work he did.” ■

To contact Jeff Bormaster, e-mail jbormaster@cwla.org.

William Atkinson is a full-time business writer and former regional reporter for TIME, as well as a regular contributor to Children’s Voice.

A Family for Every Child

National Adoption Day

is a collective national effort to raise awareness of the 129,000 children waiting in foster care for permanent, loving families. Each year, hundreds of communities across the country host events to finalize adoptions of children from foster care and celebrate all adoptions. We invite you to get involved and be a part of this special day.

Visit www.nationaladoptionday.org to find an event near you or learn how to host one in your community.

NOVEMBER 15, 2008



Get Involved in an Event
in Your Community



GIFTABLES CLEARANCE

Up to 70% off
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while supplies last!

Shop the CWLA gift store for extraordinary deals on adorable pins, bracelets, earrings, and charms. Selected styles are up to 70% off! But don't delay. Order today. Because once they sell out they are gone.

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(sizes 6-9 available)



Kid Pin —
Boy
~~Was \$12.00~~
Now \$6.95
Item PINKIDDB



Kid Pin —
Patriotic Boy
~~Was \$13.00~~
Now \$6.95
Item PINKIDPB



Kid Pin —
Patriotic Girl
~~Was \$13.00~~
Now \$6.95
Item PINKIDPG



Kid Pin —
Patriotic Infant
~~Was \$13.00~~
Now \$6.95
Item PINKIDPI



Wee Tots
Bracelet
~~Was \$28.00~~
Now \$12.95
Item BRACEWT



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Now \$12.95
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Now \$6.95
Item PINWOMAN



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Now \$14.95
Item SCARF



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Item PENDCK



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WHITE HOUSE CONFERENCE ON CHILDREN & YOUTH

Advancing the CWLA Agenda Success in the 110th Congress

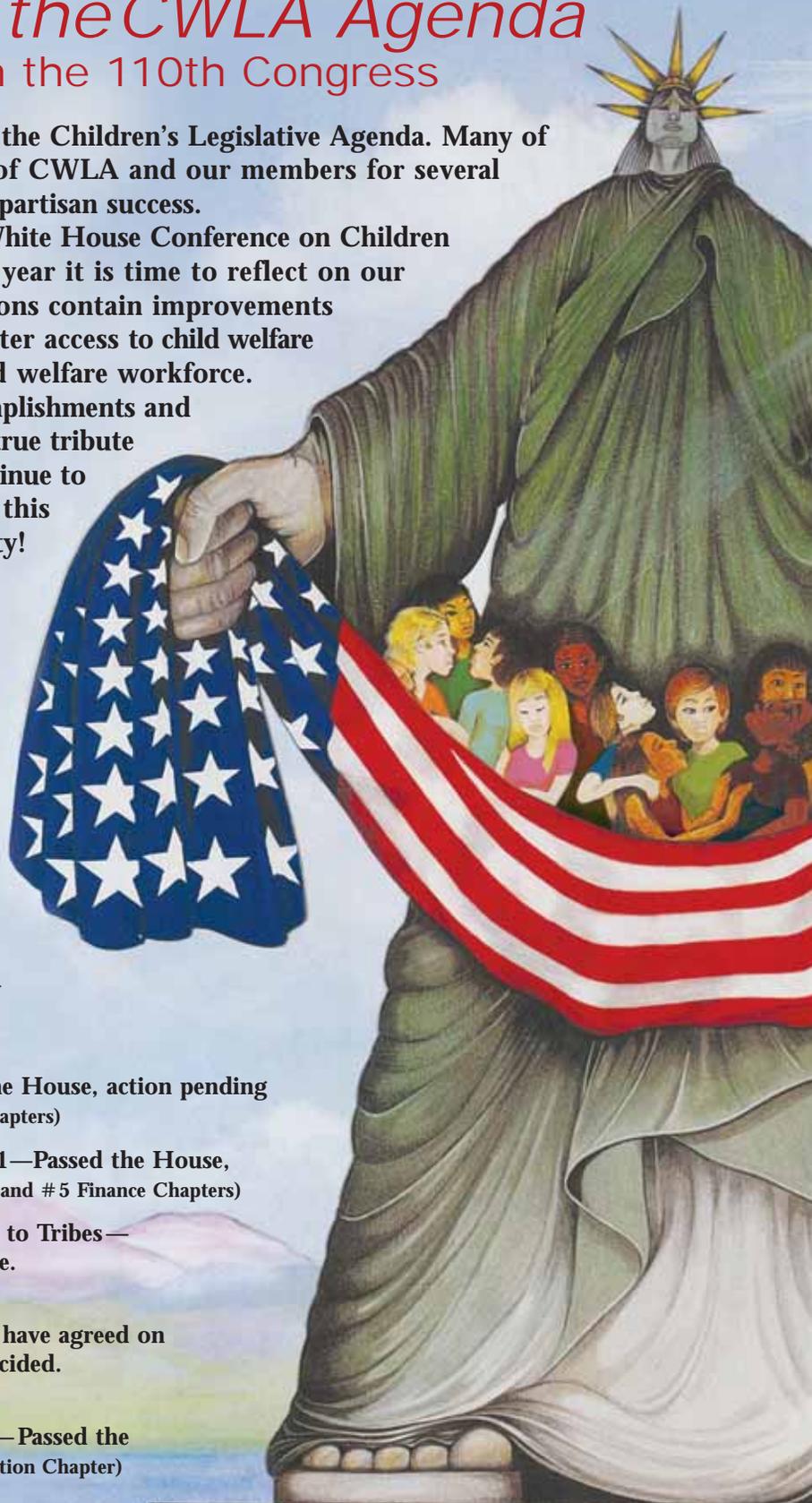
2008 brought a great deal of success for the Children's Legislative Agenda. Many of these agenda items have been a focus of CWLA and our members for several Congresses and 2008 brought us strong bipartisan success.

We still need to move legislation for a White House Conference on Children and Youth, but as we near the end of the year it is time to reflect on our success. These reform bills and conversations contain improvements for kinship care, youth in foster care, greater access to child welfare funds by tribal communities, and the child welfare workforce.

CWLA wishes to share this list of accomplishments and advancements with you, as they are each a true tribute of your advocacy. We encourage you to continue to work with us in the remaining months of this year to make all of these agenda items a reality!

ENACTED:

- ✓ **Preserve Medicaid TCM and Rehab Services**— Coverage remains in place as per the supplemental appropriations bill signed into law. (#4 Medicaid & #4 Mental Health Care Service Chapters)
- ✓ **Loan Forgiveness for Social Workers**— Passed the House as part of Higher Education Reauthorization and the bill is being reconciled with the Senate. (#1 Child Welfare Workforce Chapter)
- ✓ **Access to Training Funds for Private Agencies**— Passed the House, pending in the Senate. (#2 Child Welfare Workforce and #8 Finance Chapters)
- ✓ **Title IV-E Funds for Kinship Care**— Passed the House, action pending in the Senate. (#1 Kinship Care and #3 Finance Chapters)
- ✓ **Extend Federal Foster Care Funding to Age 21**— Passed the House, action pending in the Senate. (#1 Youth Services and #5 Finance Chapters)
- ✓ **Extend Access to Federal Child Welfare Funds to Tribes**— Passed the House, action pending in the Senate. (#1 Tribal Chapter and #4 Finance Chapters)
- ✓ **Mental Health Parity**— The House and Senate have agreed on final bill. Covering cost of legislation being decided. (#5 Mental Health Care Service Chapter)
- ✓ **Reauthorize the Adoption Incentive Program**— Passed the House, action pending in the Senate. (#3 Adoption Chapter)
- ✓ **Reject Cuts to Social Services Block Grant**— Included in Budget Resolution. (#2 Social Services Block Grant Chapter)



*We THANK YOU for Your
Continued HELP and SUPPORT!
For more information, visit www.cwla.org*

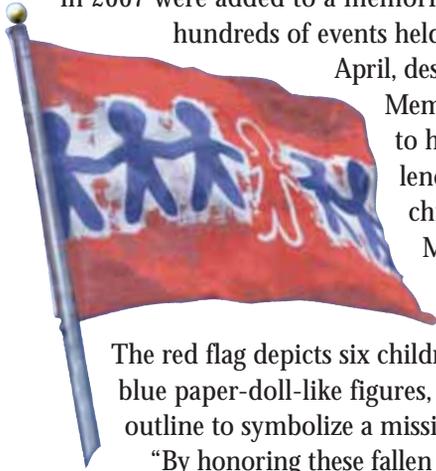
Remembering and Remaining Vigilant

During a ceremony in Oakland on April 25, the names of 26 children and teens who died in Alameda County, California, in 2007 were added to a memorial plaque. It was one of hundreds of events held on the fourth Friday in

April, designated National Children's Memorial Flag Day by CWLA, to honor child victims of violence and raise awareness of child safety. The Children's Memorial Flag was designed by a 16-year-old student from Alameda County.

The red flag depicts six children holding hands; five are blue paper-doll-like figures, the sixth is a white chalk outline to symbolize a missing child.

"By honoring these fallen children, we are renewing our commitment to rid our communities of the senseless violence that steals the precious life of young children," Mike Reagan, supervisor in nearby Solano County, said, according to the *Vacaville Reporter*. Reagan and Partick Duterte, director of Solano's Health and Social Services department, a CWLA



FEBRUARY
23-25, 2009

CWLA National Conference

Children Today... America's Future!

Marriott Wardman Park Hotel, 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 703/412-2439.

UPCOMING
CONFERENCES

member organization, were guest speakers at the county's memorial ceremony.

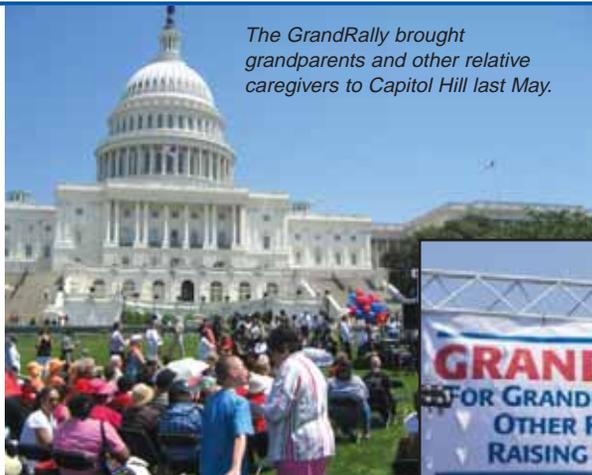
Half a continent away in Ohio, the *Toledo Blade* published an op-ed by Dean Sparks, the executive director of CWLA member Lucas County Child Services. Sparks wrote that in Lucas County, 2007 marked a decrease in the number of investigations, but he wrote it is "our responsibility as a community to remember these innocent victims and not let even one more child experience that kind of pain." Lucas County Child Services planned a walk from the government center to their offices to raise the Children's Memorial Flag on April 25, but Sparks emphasized the need to remain vigilant against child abuse all the time. Read his op-ed at <http://www.toledoblade.com/apps/pbcs.dll/article?AID=/20080412/OPINION04/804120301>. ■

GrandRally Celebrates Caregivers

Grandparents and other relative caregivers, the youth they have raised, members of Congress, and *American Idol* star Kellie Pickler—nearly 1,000 people—gathered on the Capitol lawn in early May

for a celebration designed to garner attention for the needs of children and their families headed by relatives. CWLA sponsored the third National GrandRally with the AARP, Children's Defense Fund, Generations United, Grand-Families of America, and the National Committee of Grandparents for Children's Rights.

Each year, the event is an opportunity to educate Congress about the help these families need for their children. After



The GrandRally brought grandparents and other relative caregivers to Capitol Hill last May.

the rally, many families take the opportunity to visit their senators and representatives to share personal stories and local facts about relatives raising children. Those who cannot attend



are encouraged to contact their members of Congress to show their support.

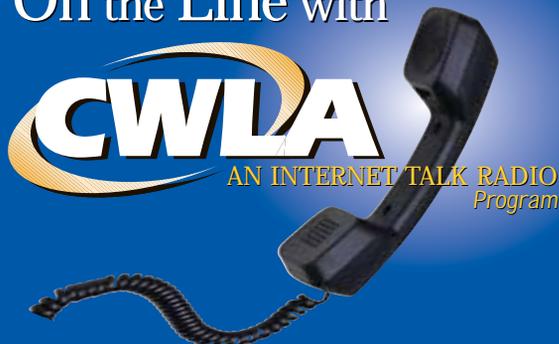
"We should not be asking grandparents raising grandchildren to choose between buying medicine for themselves and putting food on the table for their children," said Christine James-Brown, CWLA president and CEO. "Congress must help assist these caregivers in gaining access to the services and supports they need to take care of their family."

For more on the event, visit www.grandrally.org. ■

Recognizing Outstanding Advocacy

At the annual National Conference, *Children Today... America's Future!* in Washington, DC, February 23–25, CWLA will present several awards to individuals and businesses who are outstanding child advocates. Nominations are being accepted through December 1, 2008, for the Kids-to-Kids National Service Awards, the Anna Quindlen Award for Excellence in Journalism in Behalf of Children and Families, the Corporate Advocate of the Year, and Corporate Friends of Children. For more information and to submit nominations, visit www.cwla.org/awards. ■

On the Line with



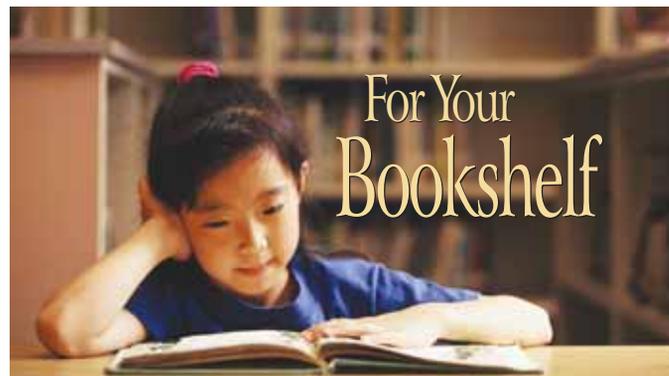
With more than six months of programming behind it, the weekly radio broadcast *On the Line with CWLA* is continuing to provide a forum for child welfare experts, CWLA agency members, and child-focused political figures to share their thoughts on compelling current topics. Programs are broadcast live every Wednesday from 2 to 2:30 p.m. EST at www.blogtalkradio.com/CWLA-Radio.

Visit the page to listen to previous shows, set reminders for the next broadcast, and get programming updates. Currently, the schedule includes:

- October 1: Videos Help Virginia Inmates Stay in Touch with Kids
- October 8: Latina Victims of Domestic Violence and the Impact on Their Children
- October 15: A Conversation with Victor Rivers
- October 22: Web-Based Learning: A New Tool for Training Child Welfare Workers
- October 29: Adapting Adoption: A Look at Gay and Lesbian Adoption Rights
- November 5: The Future of Child Welfare in the New Administration
- November 12: No Home for the Holidays
- November 19: A Conversation with Reverend Darryl Armstrong
- November 26: Adoption



Tune in on the Web
www.blogtalkradio.com/CWLA-Radio



For Your Bookshelf

This spring, *Child Welfare* journal published a special issue on racial disproportionality in the system, with articles examining how to measure and how to solve the problem. CWLA publishes six issues of the journal each year. Purchase a copy of the special issue at <http://www.cwla.org/pubs/pubdetails.asp?PUBID=J872> or subscribe to *Child Welfare* online at <http://www.cwla.org/pubs/periodicals.htm>. Copies of the journal's disproportionality and other special issues will be available at CWLA's National Conference, February 23–25 in Washington, DC. ■

Speaking Out

"It is incumbent on those of us who seek to improve the lives of children and their families to seek empirical evidence to support our practice. With limited resources, we must identify promising and evidence-based practices to serve as a basis for effective assessment, interventions, and policies... [CWLA] supports the goal of this book—to inform child welfare practitioners, researchers, and policymakers about issues related to research in a child welfare-specific context." ■



— CWLA President and CEO Christine James-Brown in a foreword to *Research Methods in Child Welfare* by Amy J.L. Baker with Benjamin J. Charvat, published in June by Columbia University Press.

Data Crunching

In 2002, 366 children were adopted from public agencies in Hawaii—a rate of slightly more than one a day. Three years later, the number had increased by more than a fifth; 452 children were adopted from public agencies in 2005.

Source: National Data Analysis System (NDAS) State Data Trends report. Find trends reports and much more information at <http://ndas.cwla.org>. NDAS is a free online service started in 1999 by CWLA and sponsoring states.

EndNotes

Increasingly, state and local child protective services agencies are employing some form of **differential response**. In these systems, families reported for suspected child abuse or neglect may receive either a traditional investigation or an alternative assessment, depending on the severity of the allegation and other considerations. An issue brief published by the Child Welfare Information Gateway for child welfare administrators and policy-makers provides an overview of differential response systems, highlights the lessons learned through research and experience, and offers some guiding principles for implementation. To read the report, visit www.childwelfare.gov/pubs/issue_briefs/differential_response.

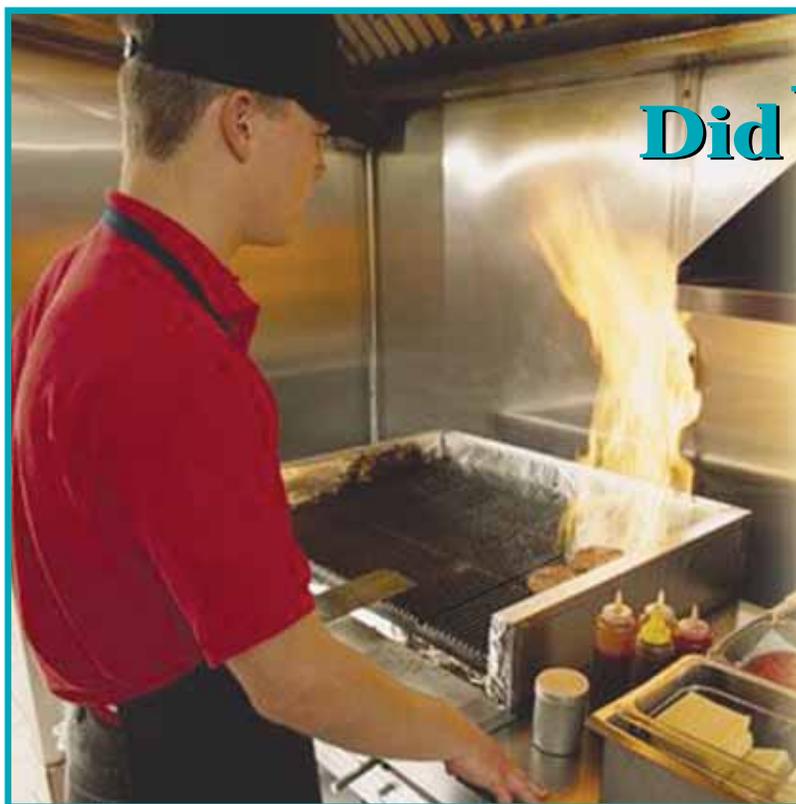
Nationally, foster care programs are working to develop strategies to better support effective **permanency plans** for youth. The Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services, awarded nine grants in 2005 to explore innovative



programs to achieve youth permanency. The grantees have responded to the issues of youth permanency in creative ways. Read about the accomplishments of the grants as they progress, and access some of the products they developed at www.nrcadoption.org/youthpermanencycluster/index.html, a new website supported by the National Child Welfare Resource Center for Adoption, the National Child Welfare Resource Center for Youth Development, the National Resource Center for Family-Centered Practice and Permanency Planning, and the Children's Bureau Youth Permanency Grant Cluster.

The Promising Practice Network keeps an updated **Research in Brief** page on their website. Visit www.promisingpractices.net/research.asp for monthly updates on research by topic and outcome area. Recent additions include *Kids'*

Share 2008: How Children Fare in the Federal Budget from the Urban Institute, *Early Childhood Experiences: Laying the Foundation for Health Across a Lifetime* by the Robert Wood Johnson Foundation, and a Pediatrics study on *School Food Environments and Policies in U.S. Public Schools*. ■



Did YOU Know?

Average monthly earnings for youth who age out of foster care remain low at age 24 in all three states (\$690 in California, \$575 in Minnesota, and \$450 in North Carolina). These earnings are substantially lower than earnings for youth nationally, who earn \$1,535 a month. ■

Source: *The Urban Institute*

Mental health and substance abuse problems affect every local community throughout America — but in unique and sometimes surprising ways, according to a report by the Substance Abuse and Mental Health Services Administration.

For example, one of the substate areas in the survey — Utah's Salt Lake and Weber-Morgan Counties — has among the nation's highest levels of people age 12 or older using painkillers for non-



HealthBeat

medical reasons, reaching 7.92%. In contrast, areas of

the District of Columbia had some of the nation's lowest levels of this

type of substance abuse, as low as 2.48% in parts of the city. Yet the same communities in Utah had among the nation's lowest levels of underage binge alcohol use in the past month, as low as 8.72%. The District of Columbia had equally low levels in some parts of the city, but other parts had some of the nation's highest levels, reaching 39.01%.

The report, *Substate Estimates from the 2004-2006 National Surveys on Drug Use and Health*, measures and analyzes 23 substance abuse and mental health-related behavior levels in 345 substate regions representing all 50 states and the District of Columbia. In most states, the substate regions are defined in terms of counties or groups of counties. In a few states, these areas are defined in terms of census tracts. The results were based on the combined data from the 2004 to 2006 National Surveys on Drug Use and Health and involved responses from 203,870 people age 12 or older throughout the United States. The full report is available at [http://oas.samhsa.gov/substate 2k8/toc.cfm](http://oas.samhsa.gov/substate%20k8/toc.cfm), as is *Nonmedical Use of Pain Relievers in Substate Regions: 2004 to 2006*, a short report from SAMHSA that focuses on this particular problem. For related publications and information, visit www.samhsa.gov.

More children over 12 are being diagnosed with attention deficit hyperactivity disorder (ADHD) while the numbers have not grown for younger children, according to a July report issued by the Centers for Disease Control and Prevention (CDC). An article by the Associated Press said the study covers a series of annual door-to-door surveys from 1997 to 2006, and could not determine the reason for the upsurge, which accounts for 4.4% annual increases in the number of older children diagnosed with ADHD. The condition is usually discovered at school by age 7, and generally, children are diagnosed by age 11. For the length of the study, the number of diagnosed children ages 6 through 11 stayed around 7%, while the diagnoses in children ages 12 to 17 went from nearly 7% to nearly 10%. The CDC estimates that this translated into more than 4.4 million children in the United States who have been diagnosed with ADHD by a medical professional. ■

PolicyWatch



On June 23, the Government Accountability Office (GAO) released a report on the needs of young adults with serious mental illness, the current barriers they face when attempting to access services (particularly as they transition to adulthood), and what certain states and federal programs are doing to better the situation. The GAO report is in response to a request by Representative Pete Stark (D-CA) and Senator Gordon Smith (R-OR), both who have long been champions on children's issues and mental health.



Pete Stark

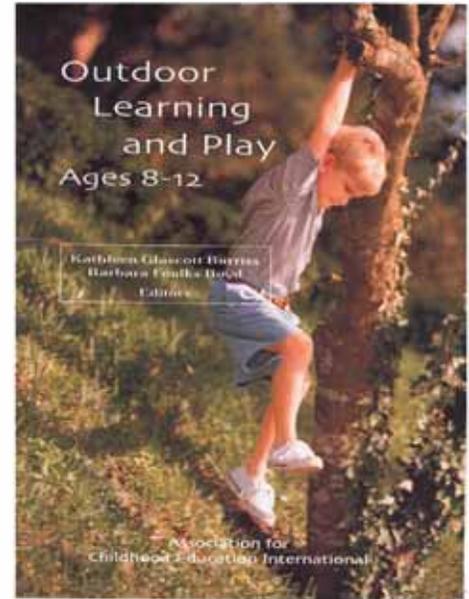
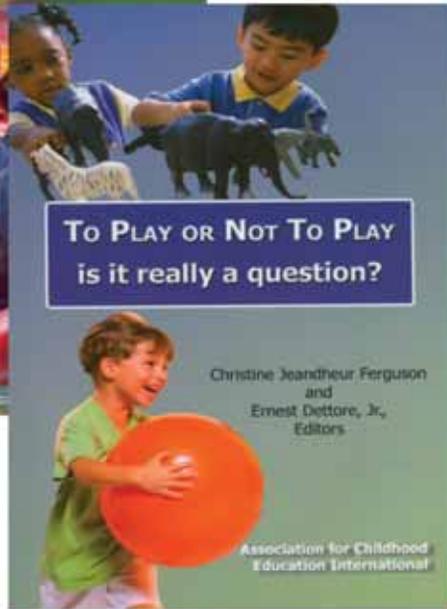
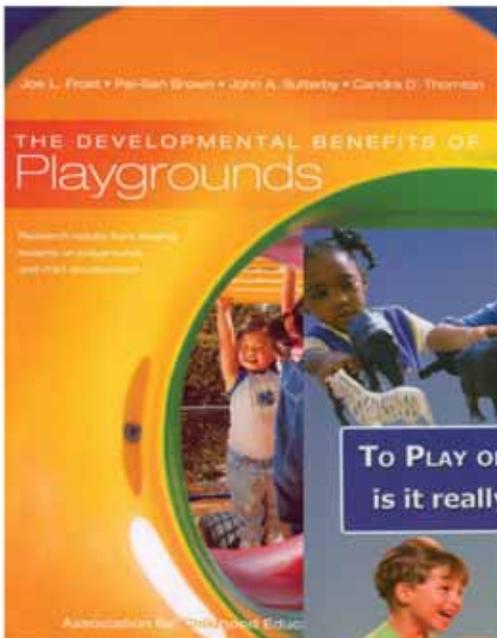


Gordon Smith

GAO estimates that in 2006, at least 2.4 million young adults ages 18–26 had serious mental illnesses, but acknowledged this is likely a low estimate due to GAO's inability to comprehensively track those who are homeless, institutionalized, or incarcerated. Difficulties discussed in the report include services often not being appropriately tailored to this age group's needs, drastically different eligibility criteria between child and adult systems, and the very complex and overwhelming nature of navigating through various support systems. GAO conducted site visits and reviewed existing structures in Connecticut, Maryland, Massachusetts, and Mississippi to help young adults with serious mental illness and reviewed federal supports such as SAMHSA and Education's previous Partnerships for Youth in Transition program.

In response to the report, Stark and Smith, along with Representative George Miller (D-CA) and Senator Chris Dodd (D-CT), introduced the Healthy Transition Act of 2008 (H.R. 6375 and S. 3195), to help young adults ages 18 to 26 with serious mental illness receive needed services and successfully transition to adulthood. This legislation would provide planning and implementation grants to states to develop statewide coordination plans to help adolescents and young adults with serious mental illness. States would be urged to target specific populations, including but not limited to those involved with the child protection and juvenile justice systems. The legislation would establish a federal committee to coordinate service programs helping young adults with mental illness and provide technical assistance to states.

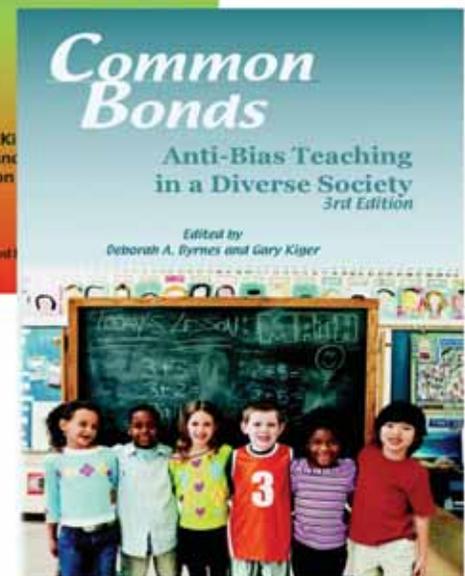
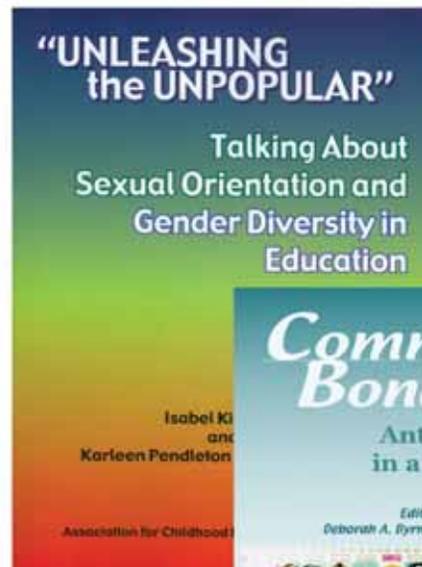
The GAO report is number 08-678; for an abstract and to download the report, visit www.gao.gov/docsearch/abstract.php?rptno=GAO-08-678. ■



“Play needs to be cherished and encouraged, for in their free play children reveal their future minds.”
 ~ Friedrich Froebel (1887)

“Anti-bias educators play a crucial role in the formation of nonprejudicial attitudes and in supporting respectful behaviors among school children.” J. Barta and C. Mount Pleasant-Jetté, 2005.

—*Common Bonds: Anti-Bias Teaching in a Diverse Society, 3rd Edition*



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OneOnOne

Questions and Answers with CWLA Staff

David Roth, Senior Fellow, Mid-Atlantic Region

What is the origin and what are the goals of the United Nations?

As a consequence of World War II, 50 countries met in San Francisco in 1945 to draft and sign the UN Charter as a binding treaty, which came into force in October 1945. UN membership has expanded to the current 193 nations in the world.

The United Nations has six main bodies: General Assembly, Security Council, Economic and Social Council, Trusteeship Council, International Court of Justice, and Secretariat. In addition, there are an important group of specialized inter-governmental agencies such as the UN Children's Fund (UNICEF), the UN Education Scientific and Cultural Organization (UNESCO), and the World Health Organization (WHO).

The goals of the UN, as delineated in the charter, are to maintain international peace and security; to achieve international cooperation in solving development and humanitarian problems; to promote respect for human rights and fundamental freedoms; and to be a center for helping nations achieve these goals. The UN is funded by assessments and dues from each member as determined by the General Assembly. The United States pays for 22% of the basic UN budget—the largest portion. In addition, the members make voluntary contributions to the substantial budgets of the specialized agencies.

What role and responsibilities does CWLA have at the UN?

As a major child-centered national organization, CWLA applied for and

was granted accreditation to the UN Department of Public Information (DPI) and the Economic and Social Council (ECOSOC) more than 10 years ago. More specifically, at that time CWLA had a functioning International Affairs Committee with membership drawn from its member agencies. These agencies operated in international adoption or had a significant minority immigrant (some refugee) clientele. In being accredited, CWLA joined 3,000 other civil society organizations as a non-governmental organization (NGO) with interest in the broad worldwide operations of the UN. With CWLA's concerns for children and families, our focus has been

in serving on several NGO committees on the family, youth, and child rights.

Since I serve CWLA as a senior fellow in the mid-Atlantic region and was already a member of the International Federation of Social Workers team at the UN for many years, I was designated as the main representative for CWLA at the UN. As a member and officer of the NGO Committee on Child Rights and in accord with CWLA's board endorsement of the Convention on the Rights of the Child, I have advocated for the long-overdue U.S. ratification of this basic children's treaty.

Since the family is the basic unit in all societies, the NGO Committee on the Family has worked to strengthen

the protection of children, whether that be by reducing poverty, providing adequate housing, accessing health and sanitation services, offering educational opportunities, or eliminating any form of discrimination. For the NGO Committee on Youth, emphasis has been on free secondary and college education and promoting the voice of youth in all matters and decisions affecting youth. In addition, I have added CWLA's interest in many subjects of Weekly Briefings by DPI.

Also, as permitted by ECOSOC status, CWLA has been a frequent cosponsor of statements of social significance submitted to the annual meetings of the Commission on Social Develop-

ment and the Commission on the Status of Women. Even as a national—rather than international—body, CWLA has been a positive active force in the NGO community of the UN.

What is the significance of the Convention on the Rights of the Child?

The Convention on the Rights of the Child is the most significant and far-reaching international human rights treaty concerning the 2 billion children under 18 throughout the world. Adopted by the General Assembly of the UN in 1989, it has been ratified by a record 191 nationals and commits each country to ensure that each child

“Goal 1 is to eradicate extreme poverty and hunger by cutting in half the proportion of 1.2 billion people whose income is less than \$1 a day.”

enjoy the rights of survival, health, and education; to have a caring family environment, play, and culture; to have protection from exploitation and abuse; and to have his or her voice heard on significant issues. Two World Summits for Children in 1990 and 2000 have reaffirmed Plans of Action and taken note of progress to better the lives of children, especially those in the developing nations wracked by extreme poverty, armed conflict, inadequate health care, HIV/AIDS, poor sanitation, and gender discrimination.

The 54 Articles of the Convention is unique in that it is *comprehensive*, the only one to ensure children their civil, political, economic, and social rights; it is *universal*, applying to all children in all situations; it is *unconditional*, requiring even governments with scarce resources to take action to protect children; and it is *holistic*,

asserting that all rights are essential, interdependent, and equal. Implementation of this convention is advanced by a two-year report of progress after ratification by each nation and then reports after each five years. Such reports are made to the UN Secretariat and to the General Assembly. In addition to government accountability, many active NGOs in each nation may monitor progress and submit their own reports.

What are the Millennium Development Goals and their current central role in the UN?

In 2000, all UN members adopted the Millennium Development Goals (MDG), which have become a universal framework for developing countries and the developed countries to work together in pursuit of eight significant goals by 2015.

Goal 1 is to eradicate extreme poverty and hunger by cutting in half the proportion of 1.2 billion people whose income is less than \$1 a day, especially in Sub-Saharan Africa. By 2004, the number fell to 980 million living on less than \$1 a day. *Goal 2* is to achieve universal primary education for boys and girls equally. But in 2005, more than 70 million children of primary school age were not in school, especially girls from poorer or rural families. *Goal 3* is to promote gender

equality and empower women. The target is to eliminate gender disparity in all levels of education, wage and labor employment, and in the political arena. *Goal 4* is to reduce by two-thirds the mortality of children under the age of 5. Though rehydration therapy and vaccinations for measles and polio have saved many children, estimates for 2005 indicate that 10 million children under age 5 died from preventable diseases. *Goal 5* is to reduce by three-quarters the maternal mortality rate and improve general maternal health. Half a million women continue to die each year during pregnancy and childbirth, almost all of them in Africa and Asia. Prenatal care at least four times during pregnancy is the key to saving most women. *Goal 6* is to combat HIV/AIDS, malaria, and other diseases. The goal is to halt the spread of HIV/AIDS by 2015 and reverse the infection and death rate. By the beginning of 2007, 40 million people were living with HIV/AIDS worldwide, with 2.9 million deaths and 15 million children orphaned by this pandemic. *Goal 7* is to ensure environmental sustainability by integrating the principles and programs of sustainable development into each country's policies. Despite increased awareness and efforts, deforestation continues and biodiversity continues to decline. *Goal 8* is to develop a global partnership for development. The target is to greatly increase development aid by the richer Western and European countries for the special needs of the least-developed nations and to promote open, rule-based, nondiscriminatory trading and financial systems.

Finally, as the current Secretary General Ban Ki-moon has stated: "The MDGs are a blueprint to ensure that in a technology-rich and prosperous 21st Century, no human being should be dying of malnutrition or preventable diseases, or be deprived of education or access to basic health care." ■

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