Marcia Ota, Kaua‘i’s Foster Care Licensing Worker, shared this heartwarming story of a family that has shared the spirit of Christmas with children in foster care for over 25 years.

**The Christmas Gift Project on Kaua‘i**

Being a counselor at Wilcox Elementary School, Susan Miura worked closely with Georgi Ching, a former DHS Kaua‘i Intake Unit social worker. They “talked story” a lot and during one of their conversations, Susan found out that some children in foster care needed t-shirts. Without hesitation, she went out and purchased t-shirts for them. She also saw this as an opportunity to teach her daughters, Joy and Sara, about sharing. The next year, she encouraged them to save their money. With the money they saved, they each bought gifts for a child in foster care. For several years, Susan and her family continued to purchase gifts on their own. Then, when she began sharing this story with others, they all volunteered to help. As the number of foster children grew, Susan asked more friends and family to participate. In 2013, 26 years after the first t-shirts were gifted, Susan continues to be asked by individuals if they can be “gifters” on this Project.

Today, her daughters, son-in-law (Loren) and grandson (Talen) are ongoing participants in the Gift Project. In 2012, Joy took Talen to Walmart and he selected the gifts that a child requested. Many of the “gifters” are assigned to more than one child and they always get what the child requests. Susan usually assigns children to a “gifter” based on age/gender. For example, if the “gifter” has a 2 year-old, female grandchild, Susan tries to assign a child of the same gender and near the same age. Or, if the “gifter” is/was a high school teacher, she assigns him/her a child in high school. While it doesn’t always work out, she tries to use this system every year.

At the start of the Project, gifts were given to children for whom the gifts may have been the only one that they received. Presently, that may not be the case, but Susan always hopes that they are assigned some of Kaua‘i’s neediest children, especially those who are not able to be placed with relatives. This year, 46 beautifully wrapped gifts were delivered to DHS.

Susan states:

> Coordinating this project, purchasing, wrapping and delivering the gifts makes my Christmas more meaningful. It’s fun and, personally, being able to help foster children and their families makes Christmas even more special each year. I hope all who participate feel the same.

> There are many people who contribute to our community in larger ways. But, in our small way, this is my family’s Christmas story. I am grateful to all my friends and family who participate in this project and to Marcia [Ota] and Georgi [Ching], for making it possible each year. I know it takes extra effort and time to put together the wish list.

> We really don’t need recognition for our gifts. We just hope the child smiles when the gift is received and opened.

> Mahalo to Susan, her family, and friends for their generosity, heart, and compassion for Hawai‘i’s keiki and families.
In the popular musical, “Les Miserables”, Fantine sings:

I dreamed a dream in time gone by, when hope was high and life worth living.

I dreamed that love would never die, I dreamed that God would be forgiving.

But there are dreams that cannot be, and there are storms we cannot weather.

Whatever the circumstances in our lives, at the beginning of a new year we all can admit that, at some moments, this too has been our song. For many of the children and youth we work with, this may well be the only song they have known. Despair and cynicism is a common mood around us, especially among the younger set. But it need not be the only beat that our moods respond to. One alternative is to see life objectively in the context of hope—a very contagious hope—that often has come from others.

What is hope? It is that very human experience, that common value, that expectation concerning the future. It presupposes risk, for hope is not necessary if everything is predictable. A farmer, for example, plants his seeds in the expectation of a harvest. A school builds its classrooms hoping that all students will learn. Parents likewise unite their energies in the expectation that new life might be born. How dependable the expectation is, either lets hope succeed or fail. Hope is required because we live in an imperfect world.

By the age of seven I was well aware of the broken world in which our family lived. The year was 1945 and World War II was ending. But closer to our existence in Ohio was the very real struggle to find a home, “make ends meet”, and put food on our table. Our mother—-we three children knew—was working hard to keep us together, and to satisfy our basic needs. Our father was usually gone, looking for a job, and when he came home, was usually drunk. I, as a second grader, had a paper route, and gladly gave my meager earnings to our mother. Christmastime, I quickly learned, was especially a season of hope, as my customers shared their home-made cookies and candies. Their smiles and encouragement still linger. Their hope for me—a poor neighbor boy without a bicycle—was the best payment I could receive. One dear neighbor, Celeste, gave me a new two-toned wool sweater with leather buttons! Its warmth, now figuratively, still radiates hope. Then in the spring when Eastertime approached, another generous gift appeared at our door. I recognized Opal Jean, the prettiest girl on our school campus; though she was a senior in high school she selected me, a scrawny, poor, second grader, to be the recipient of a cellophane-wrapped Easter basket, complete with candy and clay figurine rabbits. It brought tears to my eyes then, and over these nearly 70 intervening years, provided a bond which will never be broken. H-O-P-E can come in many forms, and amazingly lasts for eternity.

I did not invent hope, nor did the older generation before me. Somehow they too learned its value and creatively, unselfishly packaged it in memorable ways. Their gestures were neither in a vacuum nor isolated, but part of an often unconscious continuity. Was it a grandparent, an auntie, a neighbor, a teacher, a sharer of grace who brightened not only a day or a season but a lifetime? Like ripples on a pond, no amount of time or distance or difficult circumstances could submerge their impact. Hope, well communicated, is like that, containinly, unselfishly packaged it in memorable ways. Their gestures were neither in a vacuum nor isolated, but part of an often unconscious continuity. Was it a grandparent, an auntie, a neighbor, a teacher, a sharer of grace who brightened not only a day or a season but a lifetime? Like ripples on a pond, no amount of time or distance or difficult circumstances could submerge their impact. Hope, well communicated, is like that, containing building blocks laid by others on which I, too, am invited too to stand tall and strong. Others in succession can make their contributions, building even firmer platforms for generations to come.

Some of the neediest recipients around us are those children and youth whose care not only has been aborted, but whose sense of hope has been shattered. Perhaps their biological conceptions were initially sound, made by well-intentioned parents. Most likely, however, they were not. Even the best that hope might offer could not initially compensate for the circumstances or decisions that made them victims of broken commitments, fractured relationships. Still, while the baby may have been helpless, hope has taught us that it was never hopeless. Sometimes we may be the ones—the only ones—to loan them our hope . . . which may not remove all the scars, but at least heal the broken heart. And we are the first to acknowledge that we borrowed ours from unsuspecting, generously-giving others who preceded us. Happy sharing of your hope!
November ~ National Adoption Month

By Teresa Berg, LSW

November was National Adoption Month, and in sunny Hawai‘i, the adoption celebration was a chilly, thrilling event. Nearly 400 adopted children and their families gathered to enjoy a free evening of ice time at the Ice Palace sponsored by the Hawai‘i Adoption and Permanency Alliance (HAPA). From the youngest toddler to tutu’s on skates, the ice hummed with adoptive families laughing and supporting one another on their spins around the ice. One adoptive grandmother remarked that she hadn’t been ice skating since she and her husband were dating decades ago! Now—many years later—they were back on the ice, with a grandson in tow.

Hot cocoa and yummy snacks, including almost 40 dozen homemade cookies, were provided by a variety of HAPA supporters. Midway through the evening, while the zamboni was busy cleaning the ice, Pamela Witty Oakland, Director of the Department of Community Services for the City and County of Honolulu, presented HAPA President, Chiyomi Chow, with an Official Proclamation naming November 17th as Hawai‘i Adoption Day. This proclamation publicly recognizes adoptive families across the State who provide safe, stable and permanent homes to children. It also honors the agencies which provide adoption services to the community. As an adoptive mother commented, “It’s not often that we can all be together, having fun, and celebrating the uniqueness of our family and our adoption stories.”

Many families specifically attend National Adoption Month celebrations because it allows their adopted child(ren) to see that they are not the only family out there that has been created or enlarged by adoption. Also, adoptive parents enjoy having the chance to visit and talk story with other adults who share a history of adoption. Although the air was chilly inside the building, the sense of a shared community warmed the Ice Palace.

HAPA is a group of individuals and agency/organizations within the adoption community who work to promote, support and maintain permanency for children. HAPA members include: adoptive parents, adoptees, Catholic Charities Hawai‘i, Child & Family Service, Department of Human Services, Family Programs Hawai‘i, Hawai‘i International Child, HOPE INC, Inc., LDS Family Services, and Partners in Development Foundation. HAPA’s main activities consist of providing education and training to the Hawai‘i adoption community, advocating on behalf of individuals touched by adoption, and coordinating inter-agency work among adoption and permanency providers. Present membership is open to anyone within the adoption community. If you would like to become more involved with HAPA, please contact Chiyomi Chow of Family Programs Hawai‘i at 521-9531.

OUTSTANDING DHS WORKER!

DEBORAH YOSHIZUMI, CWS Social Worker

It Takes An ‘Ohana’s Advisory Committee (IAC) would like to thank Deborah Yoshizumi for going out of her way to help families, children and youth — day or night. Deborah was the social worker for former Foster Youth Noy Worachit. Noy reports that when she turned 18, she was not happy that Deborah wanted to extend jurisdiction over her until she reached age 19. Noy had thought she was an adult and ready to transition into the world. But Deborah could see Noy needed more support and made sure she had got it! Deborah has stayed in contact with Noy over the years, supporting Noy and her family. Noy says that what Deborah has done for her has been life-changing! Resource families also sing the praises of Deborah’s work. They say she is easy to talk with and returns calls on time. She makes sure that families have the information on available services that they need and we all know what a difference that can make as you work to help the children in your home. Thus, we send a big Mahalo to Deborah for her dedication and outstanding social work!

Do you know a DHS-CWS worker(s) that you would like to acknowledge for his/her exceptional work? Share their name(s) with us and what makes them so special so we can let others know how wonderful they are!

441-1125 (O‘ahu) ★ 1-888-879-8970 (Toll Free) ★ RAC@pidfoundation.org

Help! Looking For Stories!

Would you like to share some helpful tips? Got an inspirational story to tell? Know of some useful resources in your community? These are just some of the many possibilities that you can contribute to this newsletter. Please send them over so we can all benefit from each other’s wisdom! We would also appreciate any feedback, comments and suggestions on ways that we can improve this newsletter so that it is useful to you. What would you like to see in it? Topics of interest?

We look forward to hearing from you!
‘OHANA CONNECTIONS CORNER

HI H.O.P.E.S. Awards
By Delia Uluma, EPIC ‘Ohana, Inc.

The HI H.O.P.E.S. Youth Leadership Boards were chosen as a recipient of the 2013 “Hawai‘i Outstanding Advocates for Children and Youth” award. This award is given each year by the Governor and the State Legislative Keiki Caucus, with community support from several organizations and companies, to a select group of organizations or individuals who have shown dedication and made great efforts to improve the lives of Hawai‘i’s children and youth. A presentation by Governor Abercrombie was made to HI H.O.P.E.S. representatives from the O‘ahu and East Hawai‘i boards at Washington Place on October 23, 2013. HI H.O.P.E.S. is comprised of current and former foster youth between the ages of 14-26 in Hawai‘i, and is a part of the Hawai‘i Youth Opportunities Initiative and EPIC ‘Ohana, Inc.

On a related note, the President and Vice-President of the O‘ahu HI H.O.P.E.S. board, Gernani Yutob Jr. and Noy Worachit, earned a position as one of Foster Club’s 100 Outstanding Young Leaders out of nearly 350 applicants nationwide. Foster Club is the national network for young people in foster care. This announcement was made on their national website on November 22, 2013. Congratulations to Gernani, Noy and the members of the O‘ahu, Maui, Kaua‘i, West and East Hawai‘i boards for all of their inspiring work and leadership!

Another Layer of Loss
by Wilma Friesema, Gernani Yutob, & Noy Worachit

When children are removed from their homes and taken into foster custody their world changes dramatically. If they are not placed with extended family, they will likely live in a stranger’s house and in an unfamiliar community. Their contact with their family and friends will be limited and controlled, if it happens at all. Well-known landmarks such as the local park or neighbors’ houses -- which often gives children their bearings and a sense of safety -- may no longer be a part of their daily lives. In truth, they have to learn to navigate in a new and different environment -- an environment that is saturated with uncertainty and instability. Children in foster care often don’t know how long they will stay in their foster home, and when -- or even if -- they will be able to live with their parents again. All of this is atop the original trauma that brought them into foster care in the first place.

Outside of home, school is typically the place of greatest stability and continuity for children. School is structured, predictable, and where the children’s relationships are established that can last a lifetime.

Unfortunately, it’s common for children taken into foster care to change school multiple times. For many children, changing schools adds another layer of loss and stress to an already difficult situation. That was the experience of Gernani Yutob and Noy Worachit, the two former foster youth pictured above. In the following interviews, Gernani and Noy highlight some of their experiences and the impact changing schools has had on their lives. They also share what helped them cope with the hardship and stress of it all and how adults can best be supportive.

Wilma Friesema: Gernani, thanks for agreeing to this interview. To start, how many schools did you attend?

Gernani: Since I was first taken into care in the 4th grade I attended six schools: four in grade school and two in high school. Actually, when I was first taken into care I was transferred to Waianae Elementary during the last few weeks of school. I didn’t know anybody and the entire community atmosphere was different. I grew up in Kalihi so going to Waianae was an uncomfortable paradigm shift. It was hard being a new kid and entering a class that had been on-going for almost a year. I was afraid the other kids would see me as different and I felt really weird. No one asked me why I was starting at their school so late, but I felt exposed and was afraid they’d figure out I was in foster care.

Wilma: Was it harder being transferred to a new school when it was already in session?

Gernani: Most definitely. When I was transferred before the beginning of the year it was much easier because I wasn’t the only new kid. Though it was still a lot of adjusting I didn’t feel so exposed, which is always good when you’re in foster care.

Wilma: Was it academically hard to change schools?

Gernani: It wasn’t for me, but I know it can be. Every school has its agenda and assignments. I found I wasn’t up to speed sometimes, while at other times what was being taught was a cakewalk because I had already learned the material in another school. Socially is what was hardest for me. To me school is like home; it’s a place you can feel safe, eat your meals, and turn to adults for help. With each move I had to make new friends, new relationships. Losing the chemistry I had with my old friends, losing the memories we should have been making together -- all that is really different. It’s hard.

Wilma: What helped you the most along the way?

Gernani: My surrogate parent, Elaine Chu, enrolled me into the after school program at Susanna Wesley Community Center. That helped a lot as I got to meet new people when I hung out at the teen center and played basketball. The staff at the center helped me get into school programs too, like the travel academy at Farrington High School. Also, they hooked me up with a mentor. He was like an older brother that I could look up to. He helped me navigate

Continued on pg. 5
Another Layer of Loss (cont.)

one of the most challenging phases of my life.

Another thing that helped was having adults who listened and believed in me. During my last two years of high school I changed my foster placement three times. At one point I was supposed to leave Farrington High School and attend Pearl City High School, but I fought to stay put. My GAL, Terrance Tom, and my social worker, Laura Bailey, heard me and pushed for me to stay at Farrington. In order to do so I had to catch the 5:45 bus from Pacific Palisades every morning, but I did it for a full year. Terrance and Laura knew that staying at Farrington was important to me and they had faith in me. That meant a lot.

Wilma: Is there anything you want people to know about the experience of being in foster care and changing schools?

German: Changing schools is not that easy. There are a lot of steps to readjusting to a new school. Changing schools is a bit traumatizing because it’s reflective of changing foster homes. It adds to the burden of being taken away from home and being placed in a stranger’s home. The less a child in foster care has to change schools, the better.

Wilma: Noy, I appreciate your willingness to talk about your school experience too. How many schools did you attend?

Noy: I repeated 7th grade three times and during that time I went to five schools. I went to three schools in 8th grade. From kindergarten to 6th grade I had attended three schools, but during that time I always won Student of the Quarter awards or World Changer awards. Being in foster care is what hindered me.

Wilma: How so?

Noy: I was preoccupied with other stuff, with my own emotional and mental well-being. There was a lot to navigate in terms of change. I was afraid to start in a new school, plus I had to settle in with a new family. Every school had a new curriculum. I struggled socially, and it was hard to make new friends. Sometimes I got bullied. At every school I was hooked up with the school counselor who I could talk to, but who wants to hang out with a counselor at recess?

Wilma: I can see how that would add to that feeling of being different. Why did you repeat 7th grade so many times?

Noy: Before entering foster care I was homeless. Once in care, I ran away a lot and was shifted to different foster homes. I went for months at a time without going to a traditional school. It was hard, too, because I was repeating 7th grade so many times that I began to feel stupid and inadequate compared to the younger students in my class. It was not an easy situation.

Wilma: What finally helped?

Noy: Being in a stable home. Plus, I was put in a Learning Center class with a female instructor and fewer students. The continuity of being in that class with the same students every day helped; it forced us to become friends. I took all my core classes at the Learning Center, and only left to take my electives with the other middle school students. I was also assigned a mentor at that time and she was very helpful. She really helped me to build my self-esteem by guiding me and believing in me. We’re still in touch today.

Wilma: Do you think changing schools a lot as a child has impacted you today?

Noy: I’m in college now and I really suffer because of all the school instability I had. I never really learned how to do homework. I struggle with studying, and it’s not because the material is too hard. I just didn’t learn good study habits and perseverance.

Wilma: What do you want people to think about when it comes to school stability and foster care?

Noy: Moving schools should not be a punishment because a youth in foster care is not doing well. It is often used that way – they have to move schools because they aren’t doing well at a certain school or at a certain home.

If you are taking in foster youth, find out what interests him or her and help link them up with those clubs or activities in school. That will help them a lot as they adjust to the new school. Help them build their social capital — those healthy, supportive relationships — as much as possible. I can’t stress that enough. Volleyball really helped me, for example. It gave me something positive to hold onto, and it was fun. I’m still in touch with some friends I made on the volleyball team.

The more a youth can stay in the same school and a stable home the better. If a child doesn’t have a strong foundation in place when they’re young, they’re going to struggle when they don’t have that later on.

Wilma: What you’re pointing out is that more is learned in school than academics. Having stability, continuity, on-going relationships – in other words, a real sense of community and belonging – helps too. It helps build an inner foundation that is so important for later success.

Thank you both for sharing. So often the safety concerns and placement issues over-ride the very real impact and challenges that changing schools creates for foster children and youth. As adults, the more we can lessen the number of school transitions — or be sensitive to the stress of the transitions and adjustments when they do occur — the more helpful we will be. Understanding and support, on everyone’s part, can ease this additional layer of loss for children in foster care.

EPIC ‘Ohana Conferencing is funded through the Department of Human Services
For more information about ‘Ohana Connections work
contact Wilma Friesema at EPIC ‘Ohana Conferencing, Inc. at 748-7921
Happy New Year! Thank you to all of the resource caregivers statewide who called the Warm Line to inquire about trainings, Care to Share, support and referrals. It is always a pleasure to hear from you! Though I may not know you by face, it is great to hear your voices and stories. One of the most asked questions this past quarter was about Care to Share. I would like to tell you what this project is all about.

Q: What is Care to Share?
A: Care to Share is like a Craigslist for resource caregivers. Community members & resource families call the Warm Line to donate items they no longer need to children in foster care. The Warm Line keeps a list of available items and matches them with resource families requesting needed items. Since we do not always have an item being requested, we sometimes look through "for sale" ads for particular items, such as cribs, beds, and other furniture. At times, we will call the seller and inform them of our program that finds needed items for children in care. Often, sellers will discount the price or donate the item. For large furniture items, the donor or seller keeps the item at their home to be picked up since we do not have storage space in the office for large items.

Q: Do I not have a car or vehicle to pick up large items?
A: Unfortunately, we do not have the means to deliver large items to your door. We may be able to work something out where the donor can meet half way, but there is no guarantee this will occur. It is best to have transportation planned when requesting items since the donor or seller wants the item(s) out of their home in a timely manner.

Q: Is the item free?
A: Sometimes. Items that are donated to Care to Share are passed on without a charge. However, there is usually a reasonable charge from the seller for furniture items such as cribs, bunks and mattresses.

Q: Do I contact the donor/seller directly?
A: Yes, you do. I will make sure the donor/seller knows who will be contacting them. Then, I will give the phone number to the resource family requesting the item. The resource family then calls the donor/seller to coordinate the pickup. I ask the resource family picking up the item to call me so I can be sure contact and transfer/purchase of item(s) was made.

Q: How long do I have to wait for the items?
A: It really depends on what the item is. Sometimes furniture items can take time to find and secure. We will try to have the request filled within a month. If for any reason I can not find an item, I will try to touch base with the resource caregiver to ask if they want to continue waiting.

Over the years, Care to Share has helped to match many resource families with items they need to care for the children in their home. The only items we cannot assist in matching are car and booster seats for vehicles and drop-side cribs.

**A Big Mahalo to the following donors:**

- Thank you to Sherry for the crib mattress, crib bedding and the large box of clothes and books.
- Thank you to Yvette for giving a bunk bed.
- Thank you to Crystal for the toddler bed, toys, clothes and high chair.
- Thank you to the Engler family who stopped by our office and donated 6 full boxes of homemade blankets, diapers, clothing, books and toys.

All of your generous donations were given to resource caregivers and our Ho’omalu receiving home.

This program, brought to you by FPH’s Resource Family Support Services (RFSS), is funded by the Department of Human Services
Improving Services and Outcomes to LGBTQ Youth in Care

Dr. Chris Downs
President, The Downs Group LLC, Seattle, WA

As a developmental psychologist specializing in older youth and young adult wellness issues for 35 years, one of my areas of emphasis has been lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth, especially homeless and out-of-home care youth. I’ve seen significant improvements in care for LGBTQ youth over the years: better supports in schools, more educational tools, better parent support. But one thing never seems to change: many well-meaning adults believe that there are no appreciable differences between LGBTQ and heterosexual (or straight) youth.

I’ve heard this statement many times: “I treat all young people alike – my straight kids and my gay kids. There shouldn’t be any difference between them so I treat them all alike.” In an ideal world this might be true. But the fact is that LGBTQ adolescents are and are not like non-LGBTQ (i.e. straight or heterosexual) adolescents.

When it comes to having hope in a personal future, stable adults around for support, high quality friends, and a bright career path, there really are few differences between LGBTQ and straight young people. Most youth want these same things.

The problem is that those hopes, stabilities, and relationships often go on a long detour right around the time an LGBTQ youth comes out (i.e. recognizes their sexual orientation or gender identity and decides to disclose this to others).

A recent survey of 10,030 LGBTQ adolescents ages 13 – 17 published by the Human Rights Campaign (HRC) tells us more about this detour. HRC asked a wide range of questions and looked at the responses in comparison with responses from heterosexual youth of the same ages.

When asked for the one thing they would like to change in their lives at that moment, the most frequent responses from heterosexual youth were pretty standard: money problems, debt, and concerns about weight/appearance.

In contrast, the LGBTQ youth wanted understanding and tolerance about their sexual orientation or gender identity. They also wanted better family support and understanding about being LGBTQ. When asked to describe the #1 problem in their lives right now, heterosexual youth named what we would expect from adolescents: classes, exams, grades, choice of college and career, and wanting more money. The #1 problems in the lives of LGBTQ youth included non-accepting families (26% of youth), bullying at school (21%) and fear of being out (18%).

So, while adults may believe that all young people are the same and should be treated similarly, the realities are quite different. LGBTQ adolescents often grapple with a discrepancy between what their personal world (family, friends, church, neighbors) tells them they are (i.e. heterosexuals with everything that implies) and what they know to be the truth – they are LGBTQ.

The reactions of important people when a youth comes out as LGBTQ can have a huge impact on long term well-being. Dr. Caitlin Ryan discovered that rates of suicides, clinical depression, illegal drug use and STDs were extremely high among LGBTQ youth whose families had not been at all accepting of their sexual orientation or gender identity. However, when families were extremely accepting of their LGBTQ youth, rates of these negative outcomes plummeted and optimism soared. For instance, 92% of LGBTQ youth whose families were extremely accepting of them saw a future as a happy adult. This is compared with 35% of LGBTQ youth whose families were not at all accepting.

Research has documented the risk factors associated with being an LGBTQ youth in America. These include higher rates of drug use, bullying, homelessness, depression, and suicide. Rates of LGBTQ youth attempting suicide range from 22% - 37% depending on the study. Adults in my one-day LGBTQ Youth trainings almost always know of at least one LGBTQ youth who has attempted suicide and they want to know what they can do.

There are some promising ways to help counterbalance the risk factors. One of the most important is a Gay-Straight Alliance (GSA) - http://gsanetwork.org/about-us. GSAs are school-based, adult-sponsored, but youth-led programs that seek to provide education, community and support for LGBTQ youth in schools. A 2011 study in Oregon with over 31,000 high school students found that suicide rates among LGBTQ youth dropped to similar rates as heterosexual students (6%) if the community had visible and available supports for LGBTQ youth. The biggest factor in this study was a GSA in local high schools. Apparently, just having someone to turn to about being LGBTQ and about associated issues (coming out, bullying, etc.) made a huge difference!

Of course, GSAs aren’t the only protective factors for LGBTQ Youth. Research and practice show that promoting family connectedness and acceptance, getting schools to create, implement and enforce anti-bullying policies, and identifying one or more highly caring adult in the youth’s life all serve as important protective factors. Each of these significantly lowers the risk factors, including suicide.

LGBTQ youth are disproportionately represented in child welfare systems. The exact numbers in foster care are elusive since we don’t usually ask or report sexual orientation or gender identity/expression of foster youth. Anecdotally, child welfare leaders report that LGBTQ youth clients represent at least 20% of youth in care. Durso and Gates (2012) reported even higher percentages in host homes (42%), permanent housing programs (39%), and emergency shelter programs (21%).

Some states are taking dramatic steps to improve things for LGBTQ youth in care. In 2012, California passed a new law that requires instruction of administrators, social workers and providers on cultural competency and sensitivity relating to, and best practices for, providing adequate care to LGBTQ youth in out of home care. I believe this should be a requirement everywhere, and that one day it will be a basic requirement for all child service providers.

I was in Honolulu last August to provide a one-day LGBTQ youth training using the curricula of the Human Rights Campaign. If you’d like to learn more about the risks and protective factors for LGBTQ youth and how you can improve the odds for these young people and help them fulfill their dreams contact me at CDowns@DownsConsultingGroup.com or 206-251-5075.
Guidelines for Preventing/Coping with Allegations of Abuse in Foster Family Care*

The following information from The Casey Family Program can help to educate resource caregivers on abuse allegations and provide preventive tips on how to reduce their liability. Please note that although this article mentions “foster family”, in Hawai‘i they are referred to as “resource family.”

BEFORE PLACEMENT

- Understand the agency’s policy and procedures regarding abuse investigations.
- Secure complete and accurate information on each child.
- Develop an individualized care plan for each child based on the child’s specific needs and history.
- Define your specific training/information needs and secure the training.

DURING PLACEMENT

- Observe regulations regarding “discipline.”
- Establish and maintain your own “family house rules” regarding:
  - Privacy (bath, bedroom, etc.)
  - Dress
  - Physical affection (hugging, kissing, etc.)
  - Communication and “secrets”
  - Babysitters/other caregivers
- Maintain family “logs.”
- Maintain detailed child-specific records.
- Provide regular written reports to the agency (put it in writing and keep a copy!).
- Request agency support EARLY when the child’s actions/reactions indicate areas for concern.
- Develop a support system:
  - Group support – Support groups or even a more formal association; participate and urge development of mutual support mechanisms.
  - Personal support – Your minister, professional (non-agency), friend, etc.; develop a one-on-one relationship explaining the potential for allegations and prepare the supporter to “be-there” for your family.
  - Both group and personal support must: listen, not make judgments, support you through the investigation, and maintain confidentiality.

GENERAL LIST OF DO’S

- Keep a daily diary/log.
- Keep child specific records/files – document all significant happenings/episodes.
- Keep the agency informed in writing!
- Develop your family’s “policies” to prevent and/or reduce your exposure to allegations of abuse.
- Participate in TRAINING, TRAINING, and TRAINING!!!
- Develop/maintain a relationship with a local attorney.

DON’T

- Think it won’t happen to my family.
- Think the agency KNOWS we would never abuse or neglect.
- Set your family up by poor observations and poor record-keeping.
- Isolate yourself, post allegation.
- Panic.

Parenting a Drug or Alcohol Exposed Child

By Children’s Research Triangle’s Ira J. Chasnoff, MD & Sharon Williams, RN

Resource caregivers who bring into their home an infant or child who was exposed to alcohol or other drugs during pregnancy often have difficulty knowing how to care for the child and how to meet his or her needs. Although many of the children have significant problems that require assessment and treatment by a trained professional, resource caregivers are on the front line in managing the child’s behaviors on a day to day basis. This brief article reviews some basic steps that can be taken in the home that will guide the child onto the road of managing his or her own behavior rather than relying on external controls.

Infants

Infants whose mothers used alcohol or drugs during pregnancy can be very fussy and will cry for a long time with a high-pitched cry. Others will fall into deep sleep and become irritable when you try to wake them. They may be difficult to feed and appear not to like to be held or touched. Eye contact is very disturbing to some of the babies.

For some, they are hypersensitive to loud sounds. This can be very upsetting to a new parent. Will this baby love me? Will we be able to bond? These are natural questions. Here are some ways to help comfort your infant.

Don’t let your baby get over-upset and frantic

Watch for early signs that your baby is getting upset: yawning, sneezing, hiccupping, coughing, jitteriness, skin color changes, refusing to look at you. When your baby sends out these distress signals, stop what you are doing and give him some time out to recover.

Do not follow your baby’s face when she averts her eyes and turns her head. The human face is a very powerful stimulus and can be overwhelming to your baby. This does not mean your baby is rejecting you, just that she cannot handle so much stimulation at that time.

If your baby keeps crying and isn’t able to stop, quietly and gently soothe her.

Wrap her snugly in a light blanket with her arms across her chest or at her sides. Hold your baby wrapped in the blanket and rock back and forth. Be sure to hold the baby securely, one hand on the buttocks and the other on the back. Move the baby gently up and down. Sometimes it helps to have the baby face away from you. Avoid high intensity fluorescent lighting. Some older infants calm down with heavier, more weighted blankets.

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Adoptive Families Needed Through Wendy’s Wonderful Kids

Hannah is a 15-year-old girl in need of a Forever Family that will love and support her growth and development. Hannah is a high school sophomore who has enjoyed cheerleading and softball in the past. She is enrolled in diploma track courses and finds school work easy for the most part, but may need support to recover high school class credits that she has missed during previous semesters when her living circumstances did not support her attending school regularly.

Hannah describes herself as smart and athletic. She feels that she is more patient than many others and maintains a respectful attitude towards people in general. Across the board, professionals and caregivers alike who have worked with Hannah describe her as “personable,” “very social” and “highly likeable.”

Hannah deeply values relationships and hopes to find a family that will talk to her about her day and who will be interested in knowing what is going on in her life. She admits that she likes attention from others. Unfortunately, in the past, Hannah’s desire for love and attention has led her to engage in unhealthy relationships with other adults and youth who have taken advantage of her. Parents who can provide Hannah with consistent, warm regard and model healthy parent-child boundaries will be an asset for her.

Hannah is a youth who has experienced many losses and traumas in her short life. She has responded to these challenges with great strength and resourcefulness, but will benefit from ongoing mental health services to allow her to process these events and develop healthy, functional coping skills. Likewise, Hannah cherishes her relationship with an older sister who lives on O‘ahu; an adoptive family must be open to maintaining and supporting connection between the two sisters.

Hannah is open to either a single parent or two-parent family, with or without other children. She’d prefer her Forever Family to be fun and active, the type of family that likes to get out of the house and do things together. She also thinks a family that values “bonding time” will be one where she’ll be most comfortable.

It Takes An ‘Ohana (ITAO) Survey Results

By Judith Wilhoite, Family Programs Hawai‘i—ITAO

Family Program Hawai‘i’s ITAO Advisory Committee 2013 survey results are in! Seventy one caregivers responded to the survey with a strong majority expressing the belief that an organization of resource families would be helpful (61%). An even higher number, (80%) said they would like to become involved in advocating for issues at the legislature. Our results also show that families have a strong desire for a forum to “voice concerns, support continuance of what is working, to be linked with community resources, and to receiving benefits such as discounts to stores, museums, etc.” (ITAO is searching for benefits such as these. There may be times when the discounts we receive are limited to a certain number of families. Families who opt into ITAO on a Participatory Level will be given first chance at these offers.)

If you are interested in becoming actively involved with ITAO on a Participatory Level as we continue to grow and develop services such as the ones below, let us know by providing your contact information as well as what activities you would like to be involved in. We will then contact you with more information and enter your name into a drawing for a one year membership to the Honolulu Zoo! Or, if your name is drawn for the Zoo Membership and you live on a Neighbor Island, we will work to find a suitable prize for you, if that is what you desire.

Name: __________________________________________________________
Mailing Address: ________________________________________________
Phone: ___________________________________ Email: __________________

I am interested in: (check all that apply)
☐ Advocating at the Legislature
☐ Being linked with community resources
☐ Participating in small group activities (family game nights/book clubs/etc.)
☐ Providing feedback on both current concerns & on what is working well
☐ Other _______________________

Please send me ____________ Sealife Park VIP passes. (This is our first special discount we are able to provide. VIP Sealife Passes allows each person to enter the park for $10 per person. This is 50% of the Kama‘aina fee. Passes have a 3/31/14 expiration date.)

Return this form to Judith Wilhoite, ITAO Family Advocate, via e-mail, fax or US Postal Service:

Judith Wilhoite Fax: (808) 533-1018
Family Programs Hawai‘i E-mail: jwilhoite@familyprogramshi.org
250 Vineyard Street
Honolulu, HI 96813
Bake Sale Fundraiser

On October 29, 2013, the Glue Committee had another successful Bake Sale fundraiser. All money raised goes towards supporting statewide events for Hawai’i’s resource families and youth in foster care.

The day was filled with so many delicious goodies! There was an abundance of tantalizing homemade treats such as cookies, brownies, cupcakes, and cinnamon rolls as well as a delicious chili frank and rice plate for lunch, all of which drew in the crowds. In addition to baked goods, there was a white elephant sale where amazing deals could be found and a silent auction with an array of wonderful items to bid on. The success of this event wouldn’t have been possible without the help, support and donations of many individuals, organizations, and companies.

A BIG MAHALO to the following donors for their generous contributions:

Aloha Pacific Federal Credit Union  Jan Dill
Big City Diner  Longs Drugs
Bistro Blends of Hawai‘i  Mardee Richardson
Catholic Charities Hawai‘i  McDonald’s
Child and Family Service  Mountain Apple Company
Costco  Oceanic Time Warner Cable
Department of Human Services  Padovani Chocolates
EPIC Foundation  Partners in Development Foundation
EPIC ‘Ohana Inc.  Pizza Hut
Family Programs Hawai‘i  Queen Lili‘uokalani Children’s Center
FCTC Committee  Starbucks
Frito Lay  Subway
Glue Committee  Tamura’s Fine Wine & Liquors
HAPA Committee  The Modern Honolulu
Honolulu Cookie Company  Times Supermarket
Jamba Juice  Eric ~ Aloha Pacific FCU Volunteer

The Glue Committee consists of representatives from the Department of Human Services, Partners in Development Foundation, Catholic Charities Hawai‘i and Family Programs Hawai‘i. This committee holds various fundraising events throughout the year. If you are interested in receiving updates on our upcoming fundraisers, would like to help and/or make a donation, please contact Carol Morimoto at 441-1125.

Family Program Hawai‘i’s 15th Annual Holiday Party

By Eva Chau, FPH RFSS Program Manager

What a grand party it was! It was so nice to see all the families and smiling faces of the children at our 2013 Annual Holiday Party on O‘ahu! No bad weather or storm was going to stop the families from all the food, fun, entertainment, Santa, and gifts that engulfed them upon walking through the doors! Mahalo to all our volunteers and donors who put in countless hours of time and donations for making it a very special event for families. Mele Kalikimaka to all the O‘ahu families who open their loving homes to keiki in care, not just for the holidays, but every day of the year! Have a wonderful and joyous holiday season!
Building Connections
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Parenting a Drug or Alcohol Exposed Child (cont.)

Sometimes a frantically crying baby will not be able to suck on a pacifier until she has calmed down a bit. When she begins to calm down, offer a pacifier. It is helpful to offer the pacifier at times throughout the day to help decrease stress hormone levels and meet the baby’s oral sensory needs. It is better to meet these needs now, for it could help lessen the child’s irritability as she grows older.

Be careful to calm your baby in ways that he can tolerate.

Babies need stimulation. When the baby is awake and calm you can work on getting him used to your face and voice by smiling, making eye contact, and talking softly. But, just use one kind of stimulation at a time. Be sure to watch for any signals that your baby is getting upset. Play with your baby when he is ready – not just when you want to. It is important for parents to understand and follow the baby’s behavioral cues.

As your baby gets use to you, increase the amount of stimulation you give her.

Talk, sing, smile, rock or move your baby’s arms and legs very gently. Her cues will tell you what she likes or doesn’t like. When the baby is calm, unwrap her to allow her to move her arms and legs freely. Wrap her up again if she starts showing any signs of distress. It is important to encourage your baby to spend time on her tummy several periods each day.

Toddlers & older children

As a child who was exposed to alcohol or other drugs during pregnancy gets older, behavior problems may begin to show up. In general, alcohol and drug exposed children have problems with organizing themselves and may become frustrated very easily if things don’t go their way. You may notice that your child:

♦ Has trouble paying attention.
♦ Is bothered by other noises or objects in a room so that he can’t concentrate.
♦ Is impulsive and lashes out at others, often for seemingly no reason.
♦ Can’t follow a whole series of instructions.

These kinds of problems can affect the way a child learns in school and may result in poor reports from the teacher and trouble in getting along with other children. There are some things you can do to help your child organize his behavior and his response to assigned school work.

Give your child a “comfort corner” at home to go to when he needs it.

Find a place in your home that he can set up as his own area. Have a favorite blanket or toy there so that when he starts to feel overwhelmed he can get away from the cause of frustration or anxiety.

Keep to a set schedule as much as possible.

Start the day at the same time each day and establish routines in getting ready for school, coming home from school, having dinner, doing homework. Prepare your child well in advance for any changes from that routine.

Pay special attention to transition times.

Children with problems organizing their behavior often will have difficulty moving from one activity to another. Give your child a warning at least ten minutes ahead of time when it is time to stop playing and come to dinner.

Avoid the rush of last minute pressures.

Let your child pick out the next day’s clothes the night before, and lay them out ready for the morning. Get up early enough each morning so that she doesn’t have to rush to get ready for school.

Set up a certain area for homework, free of distractions.

Give your child a desk or table to work on his homework. Make sure the area is free of clutter, radios, and television. Use a source of “white noise” such as a vacuum cleaner, fan or air conditioner to block out other noises around the house.

Not all alcohol or drug exposed children show these kinds of problems. But when they do, you can make a big difference in how everything works out. Parents who take care of a difficult child get a special satisfaction when the child begins to learn and succeed, because they know for certain that their caring made a big difference to a child.

Dr. Chasnoff is President of the Children’s Research Triangle (CRT) and a Professor of Clinical Pediatrics at the University of Illinois College of Medicine in Chicago. He is one of the nation’s leading researchers in the field of maternal drug use during pregnancy and the effects on the newborn infant and child. Sharon Williams is a registered nurse who has worked extensively with Dr. Chasnoff.
**STATEWIDE**

Jan 24 (Fri): **Web Based Video Conference on Legislative Advocacy:** Join us to learn how to be an effective advocate at the state level. Locations and time TBA. Check the calendar on the home page of [www.ittakesanohana.org](http://www.ittakesanohana.org) or call Judith at (808) 540-2543 for more information. This training will be available statewide.

**O’AHU**

Jan 17 (Fri): **Waianae Resource Families Support Group:** 5:30pm-8pm. ‘Ohanalani O Kahumana. RSVP to FPH at 521-9531 ext. 245 by 1/10/14.

Feb 14 (Fri): **Windward Resource Families Support Group:** 6pm-8:30pm. QLCC Kāne‘ohe. RSVP to FP at 521-9531 est. 245 by 2/7/14.

Feb 28 (Fri): **Central O‘ahu Resource Families Support Group:** 5:30pm-8pm. O‘ahu Veterans Center. RSVP to FP at 521-9531 ext. 245 by 2/21/14.

Mar 21 (Fri): **Waianae Resource Families Support Group:** 5:30pm-8pm. ‘Ohanalani O Kahumana. RSVP to FPH at 521-9531 ext. 245 by 3/14/14.

**MAUI COUNTY**

Feb 20 (Thurs): **Maui Resource Families Support Group:** 5:30pm-8pm. Queen Lili‘uokalani Children’s Center. RSVP to the Warm Line at 1-866-545-0882 or email: warmline@familyprogramshhi.org by 2/6/14.

**EAST HAWAI‘I**

Jan 11 (Sat): **Hilo Resource Families Support Group:** 12pm-2:30pm. Haili Congregational Church, Hilo. RSVP to Michele Carvalho at 987-5988 by 12/28/13.

Mar 8 (Sat): **Hilo Resource Families Support Group:** 12pm-2:30pm. Haili Congregational Church, Hilo. RSVP to Michele Carvalho at 987-5988 by 2/22/14.

**Please check [www.FamilyProgramsHawaii.org](http://www.FamilyProgramsHawaii.org) for an updated calendar of events.**

Funding for FPH support groups, trainings, and annual conferences is provided by the Department of Human Services.

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**2nd Quarter Training Updates**

For the 2nd quarter statewide trainings, FPH welcomed back Tia Roberts and Crystal Brown of Project Kealahou to present, “A Follow Up To...Pathways to Healing: Understanding the Trauma Behind the Behavior.” Participants were given a review on trauma informed care; information that was shared earlier at the 2013 Annual Conferences. Participants were given an opportunity to participate in a role play activity to test their trauma-informed care skills alongside other caregivers with feedback from the presenters. It was challenging for many participants and a great way to learn about how to respond to youth in your care who are withdrawn, anxious, or angry. One caregiver commented, “the role playing was the best; it got you thinking on your toes.” Many of the caregivers liked the role play activity and commented that they will use the skills they’ve learned with their youth in their care.

Stay tuned for information on the upcoming Annual Conference for Resource Caregivers to be mailed to you! Also for more information on other trainings, please call our Warm Line at 545-1130 on O‘ahu and 1-866-545-0882 on the Neighbor Islands. You will also find upcoming trainings on our calendar on our webpage at [www.FamilyProgramsHawaii.org/calendar](http://www.FamilyProgramsHawaii.org/calendar). Also check out our Facebook page at [www.facebook.com/FPH.RFSS](http://www.facebook.com/FPH.RFSS).

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**EMPLOYMENT OPPORTUNITY**

Part-time/On-call Co-trainer and childcare provider wanted to assist PIDF with HANAI trainings. Trainings generally done on weekday evenings and Saturdays, approximately 11 hours for the full training. Current and previous resource caregivers or former foster youth may apply.

**HUI HO‘OMALU**

*A Program of Partners in Development Foundation*

See [www.pidfoundation.org/about/careers](http://www.pidfoundation.org/about/careers)

Email resume & application w/cover letter to:

HR@pidfoundation.org

or fax to 440-6619

PIDF is an Equal Employment Opportunity Employer
The concept for the Statewide Resource Advisory Committee (RAC) was created by the Department of Human Services (DHS) as a means to support the resource family community. Hui Ho'omalu facilitates this committee comprised of adoptive parents, resource caregivers and various community agencies, all dedicated to providing services and support to Hawai'i’s keiki and the resource families who care for them. The purpose of the RAC is to identify ongoing needs, facilitate communication, share resources, provide information through a statewide calendar of events and a quarterly newsletter and report on local projects and other topics of interest to benefit Hawai'i’s resource families.

This committee, the newsletter and many of the represented agencies are supported and funded by Department of Human Services contracts.

RAC Committee Members:
Catholic Charities Hawai'i—Hui Ho'omalu
Department of Human Services
EPIC, Inc. ‘Ohana Conferencing
Family Court
Family Programs Hawai'i—Hui Ho'omalu & It Takes An ‘Obana
Resource Caregivers
Adoptive Parents
Hawai'i Foster Youth Coalition
Partners in Development Foundation—Hui Ho'omalu