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A Crash Course in Childhood...For Adults



Helpful adults keep the child's growth on target.

"The best course for parenthood is childhood," according to Dr. Ray Helfer. Dr. Helfer, a pediatrician, professor and author, is one of the country's foremost authorities on child abuse and neglect prevention.

Unfortunately, not every parent has had a safe, secure childhood. For those whose childhood was less than optimal, and who wish to modify themselves before parenthood, Dr. Helfer has created a course called "Childhood Comes First." Already, throughout the United States, 50 trained coaches have helped approximately 300 students complete the course.

Dr. Helfer explained the concepts behind his curriculum at the Virginia Council on Social Welfare (VCSW) spring conference in Richmond. "A pediatrician is most of all interested in child development - with what might be called a child's trajectory," he said. "The purpose of childhood is to ready the person for adulthood. Helpful adults keep the child's growth on target—keep him on course. A child can get off trajectory if he has a serious illness, an alcoholic parent, a deprived environment, or most devastating, an abusive family."

The latter group of children are known

as children of WAR (World of Abnormal Rearing). It is the children of WAR who are targeted for Dr. Helfer's course.

Dr. Helfer feels that it is important to understand child abuse from a developmental point of view. In order to do this, one must determine how children learn skills in general.

According to Helfer, "Infants are sensory giants. They learn through hearing, vision, touch, smell, taste and movement." The parents' task is to augment these sensory experiences and at the same time, make the infant feel good.

Sensory experiences are cumulative. If most messages are positive, then the child can handle periodic negative messages. For example, even a highly traumatic event, like abuse, is not a serious interruption if the event is a single, isolated incident and is discovered, dealt with immediately and handled well. On the other hand, a series of such incidents or chronic conditions are extremely damaging.

"Childhood, like a telephone cable, consists of multiple strands of happenings," Dr. Helfer said. Sometimes abuse uniformly affects all developmental processes; or in other instances, children emerge into adulthood with deficiencies in one strand but not in another. As an example, Dr. Helfer told of a young medical student whose cognitive development was intact (indeed superior) but his emotional development was extremely limited.

Abused children often learn to stifle and suppress certain sights, sounds and sensations. To survive their environment, to mitigate the hurt, to block the pain, these children learn to mute their senses.

The content of Helfer's course is all these missed developmental lessons and experiences, broken down into easy steps. Some areas of difficulty seem universal to children of the WAR, and these are emphasized: sensory experiences, depression and self-image.

The sensory areas, being perhaps the

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Virginia Chapter of the National Committee for the Prevention of Child Abuse



This column is written by Stuart Trinkle
2326 Carolina Ave., Roanoke, VA. 24014

Grant Opportunities for Child Abuse and Neglect Prevention

The 1982 Virginia General Assembly passed legislation, Senate Bill 279, which added a \$7 fee to the purchase of a marriage license.

The Virginia Chapter of the National Committee for Prevention of Child Abuse and the Virginians Against Domestic Violence Organization were active in securing passage of this legislation.

As a result of the legislation, the General Assembly has appropriated \$400,000 each year of the 1982-84 biennium to the Virginia Department of Social Services to be used for developing services for treating spouse abuse and preventing child abuse and neglect.

A plan for making this funding available through the utilization of a grants program was approved by the State Board of Social Services in June. Guidelines for submission of proposals are available from Ann Childress, program specialist in Child Protective Services, Bureau of Child Welfare, Virginia Department of Social Services, 8007 Discovery Drive, Richmond, Virginia, 23288. Telephone (804) 281-9081. Act promptly - the first series of applications must be received no later than September 24, 1982 at 5 p.m.

Child Watch: Looking Out for America's Children

Child Watch is a citizen involvement project designed to assess the impact of budget cuts and policy changes on vulnerable children. Launched by the Children's Defense Fund (CDF) in collaboration with national voluntary organizations Child Watch has been enthusiastically received as a unique opportunity to increase public awareness of children's issues, specifically in the areas of child health, child welfare, AFDC and child care.

By combining the technical expertise of the Children's Defense Fund with the volunteer manpower of the Association of Junior Leagues, Church Women United, National Council of Negro Women, YWCA, Southern Rural Women's Network, National Association for the Education of Young Children, Luthern Church in America, League of United Latin American Citizens, Council of Jewish Federations, and the United Methodist Church, Child Watch participants will become a new source of up-to-date information on the status of children in local communities.

Key to the success of the Child Watch project is the Child Watch manual developed by CDF in collaboration with the Association of Junior Leagues and funded by a grant from the New York Community Trust. This manual provides background information on the four program areas, sample questions and guidelines for interviews, and specific suggestions for a successful public information campaign. Local groups interested in monitoring the effects of government policy changes on children in their communities perform two critical

tasks: first, identify and interview the key community people who are responsible for administering programs for children and, second, develop a public information component to let others know what Child Watch has discovered. The manual's format can be adjusted for use in each participant's particular community or state.

Is Child Watch operating in *your* area? Do you want to assist? Contact Cheryn Durettee, 9849 Marcliff St., Vienna, Va. 22180 for more information.

Prevention Week

The week of June 6-12 was proclaimed by Congress and President Reagan this year as National Child Abuse Prevention Week. The resolution declaring a National Child Abuse Prevention Week will be brought up for review again next year. If the examination shows the impact of the resolution this year was significant, Congress and the President will be asked to declare this a permanent annual observance. Documentation of events and activities that took place in Virginia because of this proclamation can help establish an annual observance of National Child Abuse Prevention Week. Therefore, the State Office of Child Protective Services requests that you send information on activities that occurred in your locality to Mrs. Ann Childress, program specialist, Child Protective Services, Bureau of Child Welfare, Virginia Department of Social Services, 8007 Discovery Drive, Richmond, Va., 23288.



Yes, I want to help stop the hurt!
Please accept my membership in the Virginia Chapter of the
National Committee for Prevention of Child Abuse today.

Name _____ Organization _____

Address _____ City _____ State _____ Zip _____

Contributions and bequests to NCPCA are charitable contributions
which are tax deductible to the extent provided by law.

\$15 Regular	\$100 Donor
\$25 Supporting	\$250 Patron
\$50 Sustaining	\$500 Friend of Abused Children

\$1,000 Corporate Friend of Abused Children

Enclosed is my membership fee of \$_____ I will receive the
National Committee's newsletter *Caring*.



Please return this form
with your check or money
order to the Virginia
Chapter for Prevention of
Child Abuse, Phyllis
Breidenbaugh, 3135 Ash-
king Drive, Mechanicsville,
Virginia 23111.

A Crash Course in Childhood...For Adults

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most basic, are dealt with first.

One issue of concern is listening skills. Fearful of what he or she might hear, a child of the WAR may have learned to filter messages to avoid listening, or may, on the other hand, be hyperalert.

Touching is a second issue. If physical touch has never been warm and friendly, or if a child has been misused physically or sexually, then as an adult, touching, sexual relationships and physical affection may be difficult.

Dr. Helfer's techniques to correct these experiences combine understanding and behavioral restructuring. For example, to work with touch, one starts with objective items. The student learns to feel differences in materials, to appreciate texture. When secure at this level, a nonhuman target is selected. One learns to enjoy stroking a dog or cat, trying to "read" the feedback from the animal, figuring out how it likes to be touched. A nonthreatening human is chosen next. One might begin with a sleeping child. Learning to touch oneself and finally other adults are the culminating experiences.



"Infants are sensory giants"

In all techniques described, timing is vitally important. One must allow sufficient time in the practice sessions to deal with the feelings and memories aroused.

This "feeling content" is extremely important and is emphasized throughout the course. "Many clients," Helfer

explains, "are extremely deficient in separating how they feel from what they do about it."

This mixed-up message—that feeling and doing are similar—leads to several unfortunate consequences. One is associating certain feelings with inevitable reactions. "I got mad and hit my child," says a client. "That's two things," says Helfer. "No," says the client, "It's only one."

Another result is that the client feels he or she has been punished both for feelings and for actions. Helfer uses one example from his own family. His son became mad at his brother and hit him. The son was punished for the hitting, but not for getting mad. The distinction is made clear in the Helfer household. For children of the WAR, this is generally not the case.

The end result of this process is that children of the WAR do not believe that their feelings are acceptable—and this belief includes good feelings as well as negative ones. Thus, children of the WAR tend to be chronically depressed with lowered self-images.

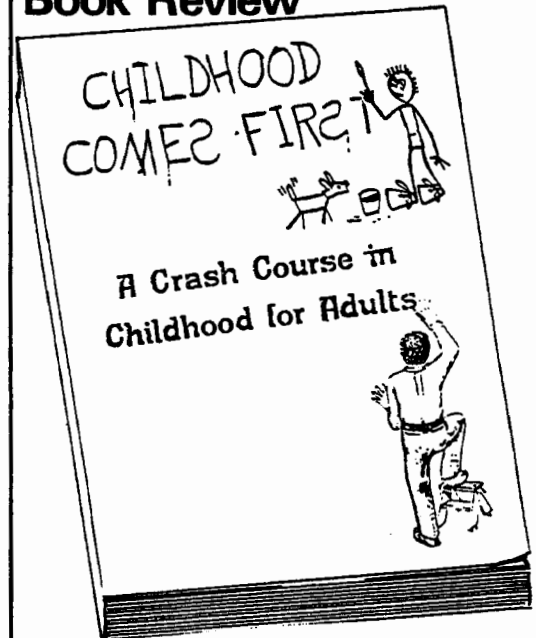
It is important to note that this course is not designed to be a therapy or therapy substitute. Rather, it serves as an adjunct to formal therapy, according to Helfer.

Due to the time commitment (six months to a year or more) and the intensity of the material, Helfer suggests starting with a motivated client. A high level of motivation is also needed to deal with the inevitable stress the course creates. Helfer explains, "When learning a new skill in an area where one is already functioning, the functioning will first worsen." Existing relationships, perhaps built in part on the pathology, are also placed under great stress as changes in one partner necessitate change in the non participating partner. Thus, those embarking on this course must be strong enough to withstand setback.

For those young persons who have not been able to develop fully, this course allows the breaking of maladaptive conditioned reflexes. These people can, despite many developmental insults, try childhood again, correcting their experiences.

The potential for Helfer's work is great. High schools, colleges and community recreation centers could sponsor courses. (Although the course can be done individually with a student and a coach, there are many advantages with working with a group and a coach.) If young people can examine their childhoods and resolve and correct maladaptive experiences prior to having their own children, we may have a truly preventive approach to child abuse and neglect!

Book Review



Childhood Comes First

by Ray E. Helfer, M.D.

"I read about myself on every page! It means so much to me to know that others feel like I do. At least, I'm not the only one."

I had given Helfer's book to a friend of mine with a history of childhood abuse. Her response to the book was gratifying. It has made a difference in her life and has greatly assisted her efforts in therapy.

Helfer writes in a down-to-earth style that is appealing to people ranging from professionals to high school drop-outs. The text is interspersed with examples from Helfer's work and his own family. Described as "a crash course in childhood for adults," Helfer's book asks one primary question, "How was it when you were little?" The course is designed to allow adults to meet needs unmet in childhood and learn the important, missed skills.

The format of *Childhood Comes First* is that of a training manual intended to be used by a "student" and his or her "coach" as a guide for learning interactional skills. It contains factual material, and specific behavioral tasks in six key areas. These six areas are 1) making one's senses work, 2) improving self-image, 3) gaining control over one's life, 4) learning to trust, 5) dealing with depression, and 6) establishing relationships with others.

Professionals will find this book a valuable asset to formal therapy; adults, whose childhood was less than ideal, will find a wealth of insight and many new beginnings.

by Joann Grayson, Ph.D.

Available by writing Ray E. Helfer, Box 1781, East Lansing, Michigan 48823; \$8.50

Prevention Projects... Staffed with \

- Family Crisis Center
- Cornerstone
- Parent Aides

Volunteerism is an essential component of Child Protective Service programmings. New laws protecting children from abuse and neglect have charged protective services with an incredible responsibility: investigate reports, recommend treatment for founded or high risk cases and prevent future cases. Protective services, however, cannot handle the multiple problems of abusive families by themselves.

Fortunately, with increased community awareness and concern has come an

increased willingness to get involved - to volunteer.

The Virginia Child Protection Newsletter (VCPN) staff decided to look at a sampling of Virginia programs using volunteers. We were pleased with our findings. Active and energetic volunteers across the state are putting their concern into action through involvement in child abuse and neglect prevention programs. All expressed enthusiasm and satisfaction.

Volunteer Programs

The winter 1978 issue of VCPN discussed three parent aide programs in the state: Project Cornerstone in Lynchburg, a joint effort of the Junior League and Family Service of Central Virginia; a lay therapy program in Fairfax, coordinated directly from the Department of Social Services (DSS); and the Family Crisis Center in Richmond. Each used trained volunteers and paired them with protective service clients. Each had a unique program with the common goal of combating child abuse and neglect.

We decided to start our investigation by following up these three programs. One is still actively involved with the parent aide program. The other two have developed in new directions and are enthusiastically involved in other prevention programs for children.

Family Crisis Center: Richmond

The parent aide program in Richmond is still functioning in full force. As a matter of fact, they have increased their volunteer aides from 14 in 1978 to 35 at present. Requirements of volunteers are impressive. There is a stringent screening process which weeds out inappropriate candidates. A time commitment of three to five hours a week for up to a year is necessary.

Given the intensive work required, it is a tribute to the program that their volunteers have grown in number. And, surprisingly, the trend of more people entering the work force has had little effect on recruitment. In fact, 85% of their volunteers are employed.

Becoming a parent aide is a four-step process: initial contact with the agency; training in the dynamics of child abuse and neglect, child development and values clarification; personal interviews with Claudine Penick, Family Crisis Center coordinator, and JoAnn Tuohey, coordinator of volunteer services; and being

matched with a client.

"Each volunteer is seen as staff," says Tuohey. "They are not viewed as a threat to the professionals; rather, volunteers are a viable part of the organization."

The center staff places a great deal of value on support and supervision. Each volunteer has weekly contact with a professional at the center in addition to monthly training sessions. "We try to offer an ongoing support system," says Penick. "It's essential to the program."

Claudine Robinson is a volunteer. Claudine has been a parent aide for 1½ years. "This is my time for giving," says Robinson. "I do so much taking. My involvement with the parent aide program is spiritually uplifting." Robinson sees her role as reparenting the client. She believes this is necessary before the client can become a good, nurturing parent to her children.

Lynda White is another volunteer, and has been with the program for over a year. "I worked hard at developing trust with my family," says White. "Now they sometimes won't trust each other, but they will trust me."

Building trust is viewed by White as vital to helping clients. One component of building trust means always being there

when you say you will be. "Families also need to be taught about autonomy," says White. So, teaching the appropriate times for making contact and how to care for themselves in between is also a task of parent aides.

It was particularly touching to hear Lynda White describe the termination. "To my client, I've been a mother, a friend, a sister," she says. "The client feels frightened of losing me, and I feel guilty about leaving her."

Mary (a fictitious name), a client of Family Crisis Center, was referred by the schools to DSS. She was a neglectful mother who was unable to take care of her children and herself. "I wasn't functioning on any level," she remarks.

The services Mary's family received were multidimensional. She had someone come in to teach her about setting goals for getting her house clean ("I felt so overwhelmed by everything that needed to be done that I did nothing," she recalls); she and her husband started marital counseling, and her son and daughter were each assigned volunteers from the local Big Brothers/Big Sisters program. "And, I also got my 'big sister'," says Barbara referring to her parent aide volunteer. "She is my



"She is my friend and my companion. She knows the best of me, the worst of me and the middle. I've never had that before."

nteers!



Prevention Means Strengthening the Family Unit

friend and my companion. She knows the best of me, the worst of me and the middle. I've never had that before." She went on to describe how she had been afraid of the power of her social worker. "I just couldn't talk to her, but I talk to my volunteer."

In three years Mary has grown from a nonfunctioning person into a more competent one. She lost 110 pounds, organizes community action groups, and sells Avon. It was a slow process and it took great patience. "I have developed self-esteem and I feel good," she says. "I owe a great deal to my volunteer."

Sally, (also a fictitious name) another client, echoed many of Mary's feelings about her volunteer. Her volunteer is her friend. "When JoAnn (Tuohey) asked me to talk today about my volunteer, I thought she was crazy. I didn't know I had a 'volunteer,' I simply have a friend."

Cornerstone: Lynchburg

Cornerstone, a parent aide program, sponsored by Lynchburg's Junior League and a local mental health center, started out to be a three-year project. It lasted four. But when it ended, it ended.

"The club decided that doing this kind of intervention was very difficult for volunteers. We wanted to take on a different kind of prevention role," says Betsy Garrard, a spokeswoman for the league. "Being a parent aide required a time commitment that few of the women had, and it was frustrating work because progress was measured in such minuscule steps. Eventually, it became difficult to recruit volunteers." So, the league decided to discontinue their activity with the parent aide program which had provided one-on-one match and parenting classes to clients of DSS.

That did not, however, end the league's concerns and activities. They are presently involved in three different prevention projects.

Puppet Shows

"We believe one of the reasons child abuse repeats itself is low self-esteem. We decided to address that issue in the schools," says Garrard. One way of doing that was to develop a puppet show for grades K-2 which would deal with several esteem issues.

"We wanted to deal with self-esteem and drug related issues," says Ginny Lewis who, along with Judy Lee, wrote the script for the four, 40-minute one acts. "Each play has a topic. The first is an introduction of the characters and to the idea of liking themselves; the second discusses taking care of oneself when well and when sick; the third focuses on illness and the appropriate uses of medicine; and the fourth discusses decision making—when to say yes and when to say no, and why it's okay to say no."

The woman started working on the presentation in January 1979, and had all four topics presented in one school by June. Since then, Judy Lee has refined the script, written a manual for puppeteers and developed follow-up materials to leave with teachers. "We now have a team of several volunteers visiting all city elementary schools putting on the puppet show for grades K-2," says Lewis.

Middleschool Project:

The concern for self-esteem related issues also carried over to the middle school.

"We also wanted to address teachers' effectiveness in using techniques addressing the emotional as well as cognitive needs of their classroom children," says Garrard. "I approached the school board about offering training to teachers in Dr. William Perkey's (Invitation Education) program. They were very receptive."

Dr. Perkey's program trains teachers to create a more inviting atmosphere: how to plan methods to address specific needs of

individual children, and how to be innovative and creative in order to help children develop confidence.

"Back to basics," says Garrard, "starts with the real basics: being self-confident. Teachers need to address this issue before they can teach anything else. If students feel good, their minds are open to learning."

In 1981, two teachers and the principal of each of the three city middle schools, along with five league members, attended a training session given by Dr. Perkey at Western Carolina University.

"He trained us in ways to invite people to reach their potential. In fact, we learned that we need to develop our own potential, and then we can better give to the children," says Garrard.

Upon their return, they began training interested city middle school teachers. Dr. Perkey came for the kickoff program.

"It worked quite well," remarked Garrard. "Teachers are now beginning to think more in feeling terms."

In 1982, the focus changed from teachers to students. Each middle school was asked to identify 30 leaders—negative (such as gang leaders and class clowns) and positive. Each group will soon be going to a local camp to spend several days with league members who have been trained in the Ropes and Initiative Course, an obstacle course designed to teach cooperation and team building skills to those trying to complete it.

"There are several activities, none of which can be successfully completed unless the group works together as a team," according to Garrard.



Ginny Lewis (left) and Anne Lewis (right) share a quiet moment with puppets

These team building exercises are designed to build self-confidence, teach the importance of effective communication skills and provide a positive means for handling frustration.

"The heavy focus is 'You are a leader. Exercise that power constructively—for yourself and your school,'" says Garrard.

The camp meetings will be held at various times in July. It sounds like an exciting adventure with positive prospects!

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Editorial Comment...

Prevention is Cost - Effective

"I don't have time to work with prevention—my caseload is already staggering." "We simply can't afford it—all our dollars are tied up in treatment."

These comments are typical replies to the query, "What is your prevention program?" Yet, we know that prevention is cost-effective. We can't really afford to be without it.

A local example can be found at York County Department of Social Services. Over a period of three years, they have cut foster care expenses by two-thirds. They attribute this decrease to a prevention program.

"We were experiencing frustration—a feeling that we just weren't doing anything for our clients," says Nell Whittle, CPS coordinator for the York County DSS. So, the staff started looking for alternatives. The search led them to the Child Guidance Clinic in Philadelphia, which had a very successful program in structural family therapy. The DSS staff first received a workshop introduction to the therapy, then three staff members enrolled in more intensive training. Structural family therapy began to be offered to all clients who would accept it.

The statistics are impressive (see table below). While CPS clients increased from 1977 (when the York structured family therapy program began) to 1980, the number of children placed in foster care declined significantly. The cost of foster care dropped from approximately \$180,000 in 1977 to \$59,000 in 1980—a clear statement about the potential cost-effectiveness of prevention.

The York County program is a good example of an effective secondary

prevention program. Secondary prevention is defined as intervention with a population known to be high-risk or a group who has had a prior episode of the disorder (in this case child abuse or neglect). Early detection programs and identification of high risk families are two secondary prevention methods. Primary prevention, on the other hand, is intervention, usually directed towards the general population, which inhibits the problem or disorder from ever occurring. Examples of primary prevention programs include fluoridation of water supplies to prevent tooth decay, and vaccination for prevention of polio and whooping cough. In the area of child abuse and neglect, examples of primary prevention programs include prenatal education, parenting classes and community resources such as after school day care to avoid "latch-key" children.

Why, then, does prevention get "put on the back burner?" Why is it scheduled last, instead of first? We believe there are several reasons. First, it is hard to see the effects of prevention immediately. Like good car maintenance, its effects are "things that are not"—breakdowns and repair bills that do not occur. Unless one does careful tracking and monitoring, the positive "maintenance" effects of prevention programs "get lost." The worker slowly becomes overwhelmed with crucial crisis work, and then the cycle of "no time for prevention" begins anew.

Part of the reason that prevention is neglected is staff turnover. Social workers and psychologists are highly mobile and often do not stay in one job long enough to experience the positive effects of

prevention projects. This mobility has a second effect—it discourages the kind of planning and initiative prevention projects require. After all, why work hard to set up a long range program if one is not planning on doing the job long?

Finally, the very real and pressing needs of protective service clients tend to distract workers from prevention activities. The old adage, "oil the wheel that squeaks," is at work here.

One source of help on the horizon is the monies that will be generated by the Virginia Family Violence Prevention Program. We support the concept that this fund should be utilized for primary prevention services. In the long run, our success in combating child abuse and neglect lies not in identification and treatment of individual cases but in creating a supportive society that minimizes the risk of occurrence of child abuse in the first place. We encourage agencies to get "back to basics" with prevention. Remember—prevention does not cost—it pays!

Joann Grayson
Charlotte McNulty

Prevention Projects

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CARE: A Women's Shelter

The league's newest project is the local shelter for abused women: CARE. Though the shelter has been operating since 1978, the league just voted to give their time and energy last May.

"We are really excited and enthusiastic," says Ellen Morrison, one of the cochairwomen of the committee sponsoring the project.

"We all are," adds Susan Mayo, the other chairwoman. "At first I was very skeptical of this project. I did not see it as a league priority. But, I changed my mind when I came here, met the clients, the staff and saw the facilities."

And extraordinary facilities they are! The shelter is housed in the old Phyllis Wheatley YMCA, a large and beautiful three floor building located in the center of Lynchburg. One of the league's goals is to refurbish a portion of the premises to make it more homey and cheery. "We think that is important," says Mayo.

However, the league's contributions will be far greater. The 14 volunteers will be providing some direct services to clients.

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York County Department of Social Services

Cost Estimate Figures

	1977 - 1978	1978 - 1979	1979 - 1980
Child Protection Service clients (reports)	227	203	294
Preventative clients (self referrals, court referrals)	57	98	120
Total CPS caseload	284	301	414
Foster care placements	73	61	30
Cost of foster care program	\$180,115.68	\$69,775.00	\$59,431.17
Cost of structural family therapy training for DSS staff	1,742.82	7,928.62	8,132.72
Total expenditures for the two programs	\$181,858.50	\$77,703.62	\$67,563.89

Statistics comparing recidivism rate of CPS clients receiving family therapy and those refusing may be available in the near future. We will publish those when received.



Joan Jones (left), Ellen Morrison (near door), Susan Mayo (far right)...discuss refurbishing the shelter.

CARE continued from page 6

"We hope league members will conduct intakes and telephone counseling, as well as refurbishing," says Joan Jones, who, along with Winifred Schenkel is codirector of the shelter.

In fact, the league has several goals for assisting CARE: run a speaker's bureau, compile a job bank (a list of employers who will employ shelter clients), man telephone hotlines (24 hour phones available to clients for crisis counseling and referral services), maintain a clothes closet, and the refurbishing project.

"We've gotten started on the refurbishing," exclaimed Mayo. "The furniture is ordered and should be here anytime. We've already gotten a swing set for the children."

The children are very important to CARE staff. "Many of the children have been abused," says Jones. "All have witnessed it. They need intervention too."

Presently, there are 11 children and five adults at the shelter. The children's ages range from one and a half to 12 years. While the VCPN staff was at the shelter, all the children were attending a local day camp.

"We would like to have a part time children's specialist. We plan to apply for a grant under the Family Trust Fund in order to get such a professional," Jones states. "Presently, we have a Lynchburg College student engaging the children in play therapy for the summer. And, we have a summer Community Action Youth worker providing 32 hours a week in child care."

In addition, there are some volunteers who spend time with the children. "They are not trained, but they are a tremendous help. We would like to train some volunteers in how to handle the children's low self-esteem and violent acting out," says Jones. "That is a future goal."

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Other Prevention Programs

Our investigation led us to many more prevention programs in Virginia, and these are listed below. However, we are aware that this list is not exhaustive. We would like to obtain information about other child abuse and neglect prevention programs. If you know of any programs in your community, please write. Tell us the name and address of the agency or group

Programs

Albemarle County Dept. of Social Services
P.O. Box 297
Charlottesville, Va. 22902
1-804-977-6510
Kathy Ralston, administrative asst.
Karen Morris, director

Trained volunteers go into the homes of CPS clients to allow the parents time out from child care.

Appomatox Dept. of Social Services
P.O. Box 517
Appomatox, VA. 24522
1-804-352-7125
Virginia Fratrack, volunteer coordinator
(a volunteer!)

Volunteers have established a Christmas program, emergency clothing and food services, transportation services, and training seminars for DSS staff.

Charlottesville Dept. of Social Services
610 E. Market St.
Charlottesville, VA. 22901
1-804-971-3400
Kim Grosner, volunteer coordinator

Trained volunteers go into the homes of CPS clients to act as supportive companions and role models, and to help establish helping networks in the community. Program is presently undergoing evaluation.

Gloucester County Dept. of Social Services
P.O. Box 186
Gloucester, VA. 23061
1-804-693-2671
Louise Morman, volunteer services coordinator
Jeri Baker, CPS worker

Respite care:
Union Baptist Church (Achilles, Va.) provides a volunteer nursery one day a week for time out from child care. Fifteen children of CPS clients are enrolled, and transportation is provided.

Ware Episcopal Church (Ware, Va.) is developing a respite day care similar to Union Baptist. Plans to enroll 12 children of CPS clients.

sponsoring the program, the name of a contact person and what the program is designed to do. We'll be looking forward to hearing from you! Send your response to Charlotte McNulty, Center for Child Abuse Education, Psychology Dept., James Madison University, Harrisonburg, VA., 22807.

Union Baptist Church (Achilles Va.) provides respite foster care in parishioner's homes for periods of 48 hours to two weeks. CPS workers make arrangements without court intervention.

Summer camp:
The local communities have raised funds yearly to send children of CPS clients to summer camp for a week. Thirty children were sent this year.

Psychology Department
James Madison University
Harrisonburg, VA. 22807
1-703-433-6482
Joann Grayson, Ph.D.

This program trains students as parent aides for short-term intervention.

James City Dept. of Social Services
P.O. Box 528
Williamsburg, VA. 23187
1-804-229-5201
Carolyn Rhodes, volunteer coordinator

Adolescent Parent Education and Prevention Program:
Teaches young women expecting their first child about child rearing. Covers topics such as child development, proper child care, and various mental health issues. Transportation provided.

Family Consultants Program:
Trains volunteers to assist CPS families in achieving goals set by CPS workers. Provides support and companionship.

Virginia Beach Dept. of Social Services
3432 Virginia Beach Blvd.
Virginia Beach, VA. 23452
1-804-486-7223
Dot Davis, volunteer services coordinator

Employment Services:
Trained volunteers teach job seeking and job maintenance skills, and provide assistance in job placement.

Parent Aides: Fairfax

In 1978 the Fairfax parent aide program was considered to be one of the most established of the three parent aide projects. At that time they had 17 very active volunteers, most of whom has been working with clients for as long as a year. The coordinator of the program at that time, Marsha Salus, attributed the success to several factors: strict screening methods, painstaking match-up, support from DSS workers and group supervision. Since then, however, things have changed. "The lack of consistency in coordinators over the last few years may explain many of our problems with the parent aide program," says Susan Untermeyer Stemetzki, volunteer coordinator in the Fairfax DSS since November (they've had three directors over the last four years). "And, I may have made an error in my first recruitment."

It seems that Stemetzki decided to recruit for all three of her volunteer programs—respite care, befriend-a-child and parent aide—at one time. "We got several responses for the befriend-a-child and very few for the others," she says. "I plan to recruit separately in the future."

Regardless, the Fairfax DDS has three promising ideas for prevention services. The parent aide program still has a very stringent training and screening process.

"We have 10 sessions - approximately one and a half hours for each session - meeting two times a week. That and the need for volunteers during the day when so many potential volunteers are employed probably keeps our recruitment responses low," says Stemetzki. "We are in the process of evaluating the program and assessing the possibility of making the focus and the requirements a little less intense in hopes of attracting more people."

Despite the desire for more volunteers, Stemetzki is pleased that she has six who are matched and actively involved in the parent aide program.

"Respite care is another prevention program we want to develop. Right now we have no volunteers for this program."

Respite care is a two dimensional concept. One dimension makes homes available for people who need a time-out from their children. They may feel a crisis coming - a time which may lead to abusing

children. When this happens, they can call and ask for a volunteer to take the children into their home for a while.

Respite care can also be in the form of a crisis nursery during the day—a place where a parent can drop children in order to get some time off. The Fairfax DSS hopes to develop both programs for their clients.

Befriend-a-child seems to be the most attractive of the programs to volunteers. It is modeled after Big Brothers/Big Sisters except that volunteers are more sensitized to the problems of child abuse and neglect during their training. The volunteers are matched with the children of clients of CPS, and the volunteers have very little contact with the parents. This is primarily a service for the children. "We were very happy to get eight volunteers in our last recruitment effort," says Stemetzki.

Stemetzki, however, is looking for more volunteers for her three programs. Any of our Fairfax readers interested in knowing more, should call 358-8883 and ask for Susan Stemetzki. She'll be happy to hear from you.



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