

## Through Their Eyes: Once Participants, Now HFNY Home Visitors

Welcome to our first issue in 2013! We are excited to bring you a fascinating look at our program through the eyes of former Healthy Families New York participants who were later hired by their HFNY program. Through conversations with current HFNY home visitors, we gained a unique perspective on outreach, engagement, retention and other program components. The Milky Way extends the "insider perspective" theme a little further as the Healthy Families Bushwick BrightStart team reflects on the ways in which their own breastfeeding experiences impact their work on this important topic. The Research Corner offers an update on our Early Enrollment study and, as always, we have greetings from Bernadette Johnson, our HFNY Coordinator. The Book Corner selection is particularly wonderful, and of course we have some interesting updates from programs across the state.

We wish you happy reading! Don't hesitate to let us know what you think. Please send your thoughts to [pbalmer@preventchildabuseny.org](mailto:pbalmer@preventchildabuseny.org).

-Pam Balmer, PCANY

### The Research Corner

Susan Dietzel, Research Scientist

#### Healthy Families New York Programs Successful in Increasing Prenatal Enrollment

##### OVERVIEW

From 2000-2007, the Center for Human Services Research (CHSR) and the Office of Children and Family Services (OCFS) conducted a randomized controlled trial (RCT), the gold standard in program evaluation research, to measure the impact of HFNY on children and their families. Findings from the RCT have been used continuously to inform best practice among all HFNY sites.

In response to findings demonstrating greater HFNY program effects on decreasing low weight births and improving parenting practices for participants who enrolled prenatally, the Central Administration Team (Prevent Child Abuse New York, OCFS and CHSR) embarked on a pilot project to increase the proportion of women who entered HFNY before their child was born. Three strategies were introduced:

- Simplify the screening form to reduce the paperwork burden on referring agencies.
- Enhance outreach to agencies likely to refer women prenatally.
- Reduce delays in the intake process that sometimes result in a prenatal referral enrolling postnatally.

##### STUDY DESIGN AND FINDINGS

There were ten sites in the pilot study over two phases. Baseline data were collected from participants screened before early enrollment strategies were introduced, and follow-up data were collected one year after new enrollment strategies were implemented. As

*continued on page 8*

### The Milky Way

Rayza Delacruz-Stitt, RN, MSN  
Program Director, Bushwick Bright Start



#### What Home Visitors Say About the Use of Self in Breastfeeding Support

There is a unique quality to the home visitor - participant relationship that lends itself to creating a safe and effective environment for supporting breastfeeding families. Home visitors often use their personal experiences and worldview about breastfeeding in their work; this can enhance their efforts, and yet it can also impact their ability to maintain neutrality when sharing information about lactation.

I asked a number of Healthy Families New York staff about the ways in which personal breastfeeding experiences have impacted their work with families. Here is what they shared:

RL: "I used to think I had tried breastfeeding, but now I know I did not give it my all. I didn't have the support I needed, like a lactation consultant, when my baby was born. Now I am really conscious about listening closely when families tell me about breastfeeding problems they are encountering. Also, in the back of my mind, I know sometimes I have doubts that it won't work for them because it didn't work for me. Intellectually, I know I have the information and knowledge that will help the family. I think I am at risk for pushing my agenda on the family because I really want it to work for them. I don't want them to fail."

*continued on page 3*

# A Note from OCFS

Healthy Families New York has been pretty busy since the last issue of the Link! First and foremost, I want to express my gratitude for all the staff that reached out to families affected by Superstorm Sandy. Although several HFNY programs and staff were affected, people still came to work and reached out to participants in order to make sure they were alright and to connect them to services. It is compassionate actions like these that make this program great.



Now for some good news! We have completed the first phase of the Healthy Families America accreditation process for New York. Visits have occurred at Central Administration (Prevent Child Abuse New York, the Center for Human Services Research, and the Office of Children and Family Services) and the following 10 programs: Allegany/ Cattaraugus, South Bronx, Broome, Cayuga/Seneca, Chemung, Clinton, Herkimer, Madison, Rensselaer, and Ulster. Overall, we did very well as a state system. The next phase requires a couple of programs to submit responses to HFA on some of the peer reviewers' findings. We are hopeful that we will receive our accreditation sometime in the spring. I know that this was a tremendous undertaking by program managers and staff. Thank you all!

Healthy Families New York has expanded! Due to the funds made available from the federal government through the Maternal and Infant Early Childhood Home Visiting Grant, we were able to expand programs in the Bronx and Erie County to serve an additional 313 families. There is currently an RFA out from the Department of Health for further expansion. Please see the New York State Department of Health's website for further information. [www.health.ny.gov/funding](http://www.health.ny.gov/funding)

We also had our first Fatherhood Services Summit! Approximately 50 people from HFNY and Family Resource Centers came together for a day to discuss fathers and engaging them in services. Some great ideas were shared, some new information was learned, and we heard from three fathers who have experienced HFNY as participants in the program with their children. They provided us with inspiration for our work and how important it is to get all fathers involved in their children's lives.

Your work is important. You touch families in valuable and life-changing ways everyday. In the last year, you conducted 3,485 assessments, provided 74,278 home visits to 5,800 families and involved fathers in services 2,316 times. Thank you for all you do to help the vulnerable families of New York State.

-Bernadette Johnson, HFNY Program Coordinator

## Table of Contents

In this Issue .....	1
The Research Corner .....	1
The Milky Way .....	1
A Note from OCFS .....	2
Through Their Eyes: Once Participants, Now HFNY Home Visitors .....	4
Spotlight on Otsego County Building Healthy Families .....	6
Program Update: Dutchess County .....	8
Welcome Joanne Passero .....	9
HFNY's First Fatherhood Summit .....	9
The Roving Reporter .....	10
The Book Corner .....	11
In the Next Issue .....	12
Letters to the Editor .....	12

# the Link

EDITOR Pam Balmer  
Director of Training  
& Staff Development  
Prevent Child Abuse NY

MANAGING EDITOR Ellen Butowsky  
Prevent Child Abuse NY

LAYOUT Caitlin Vollmer

PROGRAM COORDINATOR Bernadette Johnson  
NYS Office of Children  
& Family Services

EXECUTIVE DIRECTOR Christine Deyss  
Prevent Child Abuse NY

The Link is published two times yearly as a joint venture of Prevent Child Abuse NY and the New York State Office of Children & Family Services.

SUBMISSIONS  
[ebutowsky@preventchildabuseny.org](mailto:ebutowsky@preventchildabuseny.org)

PCANY  
33 Elk St, 2nd Floor  
Albany, NY 12207  
518.445.1273 1.800.CHILDREN  
[cdeyss@preventchildabuseny.org](mailto:cdeyss@preventchildabuseny.org)

NYSOCFS  
Division of Child Welfare and Community Services (CWCS)  
52 Washington St. 335N  
Rensselaer, NY 12144  
518.402.6770

# The Milky Way

*continued from page 1*

TM: "I don't have children, and have never breastfed. I share information that I've learned at trainings and from other professionals. The nurse CLC (Certified Lactation Consultant) at the clinic has taught me a lot, and I learn from the moms and their experiences. People have different experiences: not every woman is a mom, and not every mom breastfeeds. Respecting these differences makes me open to learning more. Not having breastfed doesn't hinder my work; I think I just have to be knowledgeable and share information. I like to use 'Feel, Felt, Found,' for example, or, "Other moms tell me this helps..." or "Some families say this position worked better..."

MC: "I felt a little cheated and naïve when I nursed my kids, especially with my oldest. I got better, more motivated and empowered with my second. With that child, I had more information. It helps me to bring the moms I work with information on balancing work and breastfeeding. I make sure they have more information than I did. I want them to choose at least some breastfeeding. I am careful to make sure it is ultimately their choice. I use 'Wondering Curiosity' a lot."

BP: "I breastfed my babies for a short time, and was able to see the benefits of breastfeeding. On one occasion I visited the pediatrician, who told me to keep nursing the baby because my husband and older child had an infection, and by nursing, I was protecting the baby through my milk. I do regret I did not breastfeed for longer. When I teach participants about breastfeeding, I am very passionate and have to be careful not to impose my views."

MC: "I nursed for six months. My own mother nursed eight children. We were poor and that gave us the best nutrition and connection with our mom. That type of attachment lasts a lifetime; it feels natural and like 'real parenting' to me. Because I have these strong feelings, I have to be careful to just provide the information and understand that families make their own decisions. This is something important in how we work in HFNY - respecting the family and meeting them where they are at."

AV: "Twenty years ago, I breastfed. It was a satisfying experience. It created better attachment and to this day I look at my child and think, 'that's my baby.' If I had had the information that I have now, I would have nursed longer. In FSW Core, I learned approaches to inform families about breastfeeding without imposing my views on them. I don't think I am at risk of imposing on them because I have learned how to just inform the families and be OK that they will make their own decisions."

LJ: "I had good breastfeeding experiences. I supported my daughter to breastfeed her son. I see the effect on my grandchild and feel good. I passed to her wisdom, pride, feelings of accomplishment, and success. I also passed the benefits of breastfeeding to them. I feel that I have knowledge beyond teaching or reading. I have insight and the good feelings of the experience of breastfeeding. So when someone tells me something that contradicts the truth, I know I have to be careful not to think: 'Come on.... are you serious!' I can get a little turned off when someone tries to contradict something about breastfeeding that I know is right. So I just have to stay aware of my feelings and reactions..."

I heard in each of the home visitors' statements a commitment to remaining objective and an awareness of the risk of being subjective. Each of us has the responsibility to avoid the typical pitfalls all too familiar to home visitors. Breastfeeding supporters have worked hard over the years to promote awareness and information about human lactation and healthy infant feeding. It is important that we continue to bring evidence-based information to families, while providing them family centered, respectful support.

## Avoiding Possible Pitfalls

Below is a list of pitfalls that can threaten family-led, strength-based, empowering work with our breastfeeding participants!

\* Presenting limited options – for example, telling someone they must never bottle-feed and must breastfeed exclusively.

\* Ignoring safety issues – for example, when the baby is losing weight.

\* Feeling guilty about one's own experience – for example, "I did not breastfeed, so I am going to make sure she does."

\* Avoiding difficult issues – for example, when the baby is jaundiced.

\* Failing to recognize limited knowledge or skills and not seeking help – for example, "I am a CLC, I should know this!"

\* Imposing one's own values – for example, thinking, "I breastfed for three years, she can do it at least six months!"

# Through Their Eyes: Once Participants, Now HFNY Home Visitors

Ellen Butowsky, PCANY



From Left to Right: Aaron, Aqua Hawthorne, and Christen

While attending the 2012 Prevent Child Abuse New York Conference, I spotted two home visitors I had met while visiting their programs who I knew had something in common: they had both started out as program participants before they were hired as home visitors. It occurred to me that they would probably have plenty to talk about, so I asked them each separately if they would like to meet someone with a similar experience. Not only did they agree to meet, they talked for the rest of the conference break. It took a tempting afternoon workshop to pull them away from their lively conversation.

This article grew out of that experience and offers a unique perspective on our program. It continues the conversation among these and other program participants turned home visitor. Their time as participants ranges from three months to three years. During an animated conference call and other conversations, four home visitors talked about being “reached out to, engaged and retained” in an HFNY program. We’d like to thank Malissa Cregg, from Healthy Families Cayuga/Seneca; Amy Schenck, from Healthy Families Steuben; Holly Kipp, from Early Advantages Clinton County, and Aqua Hawthorne, from Healthy Families Brookdale, for being open to sharing their experiences with The Link.

## OUTREACH AND INITIAL ENGAGEMENT

“Finding out I was pregnant made me feel kind of scared. As the oldest of five children, I knew how to take care of kids, but when it’s your own, it’s different,” Aqua said. She had heard about the 311 Referral Service, and when she called it, they referred her to Healthy Families New York. She remembers that the Family Assessment Worker (FAW) who called her had a “sweet tone” on the phone, and that was part of what made her say yes to an assessment. Aqua said, “Even on the phone, I could tell she was listening.” Aqua also shared that knowing right from the start that the program was

voluntary helped her to be open to getting involved: “If it had not been voluntary, I wouldn’t have enrolled. Absolutely not.”

Malissa came to her pregnancy as the youngest in her family and without any experience with children. She was given a Healthy Families Cayuga/Seneca survey to complete when she was at the WIC office and received a call from the program about two weeks later. Malissa shared: “I could tell right away the Family Assessment Worker wasn’t a telemarketer. I liked that she would come to my house and that I didn’t need insurance to get the services. I just felt like she was making it all convenient for me.”

For Amy from Healthy Families Steuben, the words “child development” were the words that encouraged her to consider the program. As Amy explained, “When I was pregnant that first time, I felt vulnerable and wanted to know what was going on with my baby every single day.” Amy also remembers being a bit confused during the assessment because, “The FAW asked me lots of questions about my past and it wasn’t congruent with what I heard the program was about. But now I understand why the assessment works that way.”

Aqua said material that offered information and referrals led her astray at first. She interpreted it to mean that the program could directly help her find housing. “Programs want to be clear about the focus of the program, that your direct service is the parent-child interaction and the child development, right from the start, so you don’t set expectations that you can’t follow through on.”

Holly Kipp enrolled in the Clinton County program when it was brand new in the community. She remembers that the introduction to the program set expectations correctly, including “development, achieving milestones, and school readiness.” Still, from her vantage point, she can see how the program has changed since then. For example, there is much more flexibility for accommodating participants’ schedules. “One of the reasons I left the program was



Holly Kip with daughter Rheanna

## Through Their Eyes continued



Malissa Cregg with son Jacson

that I didn't feel there was enough flexibility with my schedule. Now, if someone says they can't meet until after 4:30, I make sure I am available to do it. And that's the same expectation for everyone who works in our program."

### STAYING IN THE PROGRAM

What was it that made these former participants stay in the program? With the HFNY focus on building nurturing relationships, it was not a surprise when they shared that it was primarily the relationship they each had with their home visitor.

Aqua said it was different to be with a professional who didn't "should" me, but really listened to me. She guided me and didn't tell me what to do."

"Being a new mom, sometimes my gas tank would be empty, and Tammy [my home visitor] would fill me up," said Amy. One of the best things the program did for her was help her to see her child as an individual, free not to be a stereotypical type of girl. One day her home visitor brought out some green finger-paint so they could do a brain development activity. Amy was struck by how uncomfortable her daughter was, "She was really afraid to get messy. Afraid." From that day forward, Amy started exposing her daughter to other activities. She said, "Morgan is now my little artist, and she even picks up worms! I don't know if it would have been that way without this program. It gave me a chance to open my eyes up to so much more than what I thought I wanted her to be."

When we asked Malissa what kept her in the program, she quoted her current supervisor, Kathy Gallinger, who says, "People love people who love their babies." Malissa said, "I always felt that [Shalana] was as excited about what was happening with my baby as I was. And we always had so much fun!"

### USING EXPERIENCE AS A FORMER PARTICIPANT IN CURRENT ROLE AS HOME VISITOR

Aqua can still remember much of what participants might be feeling when they are first contacted by the program. "I've been in their

shoes. I know you feel a bit of fear, not sure if you should trust." Having been a participant helps her remember to be patient. Amy agreed: "Sometimes I have a participant who is not eager like I was, and I have to remember to take myself out of my shoes and realize they are letting me into their homes for a reason. I need to listen to their story." Amy also shared that, as a former participant, she feels more motivated to engage fathers. "My positive feelings [about the program] are projected onto them and it makes dads want to be a part of the program."

Holly remembers sometimes feeling that her home visitor would bring curriculum about things she already knew and go over them without assessing what Holly already knew. This reminds her to acknowledge the expertise participants already have. She makes sure to listen to their stories, to what has happened during the week, and integrate it into the visit. Aqua cautioned home visitors to remember that they're not there to take over because it's not true that "you know everything and they don't."

Amy shared that she is now a big fan of the Individualized Family Support Plan (IFSP) process, but while she was a participant she felt intimidated by the idea of making goals for herself. Over time she learned how "little goals build big confidence and self-esteem." Remembering that, she said, helps her to notice and keep track of goals that come up in her conversations with participants so that she can bring them up at another time.



Amy Schenk, Alison, and Morgan

Malissa says her visits with her home visitor always brought her and her son much enjoyment, and she makes sure to do the same: "A visit without laughter is a wasted visit!"

### DISCLOSING OR NOT DISCLOSING

Holly's experience as a participant was many years ago, so it rarely comes up in her work. Still, she likes that she is an example that "just because someone has gone through a rough time doesn't mean they can't be good parents or good employees."

*continued on page 11*

# Spotlight on Otsego County Building Healthy Families

---



From left to right: Cali Riese (FAW), Kim Bosket (FSW), Clarissa Riker (FSW), and Valerie Rowe (FSW)

Otsego County Building Healthy Families (BHF) is part of Opportunities for Otsego, a Community Action Agency. Our organization's mission is: "To develop innovative solutions that promote healthy lives, thriving families, and caring communities." We started BHF in 2001 and receive funding from New York State Office of Children and Family Services and Otsego County Department of Social Services TANF funds.

Otsego County spans 1,003 square miles through the rolling hills and vast terrain of the Catskill Mountains, and is the northernmost county in the Appalachian Region. It is comprised of 34 municipalities including 24 towns, nine villages, and one city. The community is centrally located around three metropolitan areas, has easy access to Interstate 88, and has beautiful acres of undeveloped land and natural resources. Due to the terrain and rural characteristics of this county, home visitors struggle with inadequate communication infrastructure (e.g., internet and cellular service) and extreme weather conditions. It is not unusual for a home visitor to travel for an hour to see a family. The average combined monthly distance traveled by our home visitors is 2,500 miles! Our team of home visitors works collaboratively to figure

out ways to schedule home visits in clusters so we can economize on travel time and time out of the office. Each staff person has a laptop, and we have relationships with other community agencies so that when we're far from the office, we can still get necessary paperwork done. Home visitors have also taken on outreach duties and put up fliers or distribute brochures while in the more remote parts of our county.

Otsego County, with its 61,869 residents, faces a poverty rate of 17.7%, with 20.3% of its children living in poverty. Otsego County is not rich with services, so the funds that are channeled into this county need to be used creatively. Building Healthy Families has strong collaborations with service providers in the area and the number of unduplicated screens we receive demonstrates this. In 2011, Otsego County had 535 live births and Building Healthy Families screened 514 of those births. The program has 22 referral sources, and at least one person from each referral source is present at our advisory board meetings. These collaborations with community partners have resulted in free trainings and free events for families where they can have fun with their children.

# Spotlight on Otsego County Building Healthy Families

Over the past year, using what she learned from PCANY trainings and site support, the program's Team Leader Treena Halstead provided trainings to Early Head Start, Head Start home visitors, a Public Health nurse, and homeless shelter staff on topics such as the Nature of Nurturing, domestic violence in home visiting, and Motivational Interviewing. These trainings also allow our collaborating programs an opportunity to better understand the Healthy Families New York program and all the great tools that home visitors use with families. Other staff is involved outside the immediate program as well. For example, Cali Riese, Family Assessment Worker, presented at the Prevent Child Abuse America conference in Florida on engaging fathers in home visiting.

Building Healthy Families' Advisory Board meetings include discussion of strengths and barriers regarding the program, but also allow board members to update other providers on their own programs, which strengthens our community connections. With permission of the parents, at one meeting, we showed a videotape of parent-child interaction from a home visit. The board was able to see what a typical home visit looks like. At the most recent meeting, we invited a mother and father to share their experiences in the program. The parents had recently graduated after six years in the program. The mother shared that the program had given her family referrals, compassion and, most importantly, no judgment. As a child of abuse herself, she talked about her determination to break that cycle with her own child. She stated that with the help of the program and her home visitors, she knows she has broken the cycle: "I firmly believe that if my parents had this program or one like it, things would have been different for me growing up. I also believe that because of this program, my son will be an awesome parent and so will his children. BHF has built healthier families for generations to come."



Left: Stacey Smith, Program Manager  
Right: Treena Halstead, Team Leader

## "What Makes Your Program Unique?"

Treena Halstead, Team Leader: "If I were to say what distinguishes us as a program, I would say we work hard to include our families in the design of our service. We have used quality assurance practices and other unique measures to include parents in planning. In addition to letting parents know we value their input and ideas, we are showing our community partners a key component for effective work!"

Cali Riese, FAW: "At Building Healthy Families, I know my co-workers value the families they work with and one another. I feel like the parallel process thrives here. Knowing I have a supportive team back at the office allows me to bring my best out to the families that I work with."

Valerie Rowe, FSW: "I was surprised by how willing people are to invite us into their homes and accept the program. I think our training, Motivational Interviewing, and non-judgmental demeanor are a large part of why people are so open with us. Many families talk to us about concerns they are not comfortable discussing with other service providers and I think it is proof of the time we spend building relationships with the families we serve."

Kim Bosket, FSW: "During the level change discussion I like to ask the families: 'What have you gotten out of the program so far?' It helps me to see where to go with the family and what impact I have made."

Clarissa Riker, FSW: "As a new employee, I was surprised at how the families open up and are receptive to our support. It is refreshing to feel like we are making a difference!"

Stacey Smith, Program Manager: "Coming from working with adjudicated youth for 13 years, it is refreshing to work with this population. Families of newborns have such vision and hope for their family's future. This is the best time for home visitors to be in the home and start working toward healthier outcomes for families."

# Program Update Dutchess County Healthy Families

## Engaging Parents at the Local Jail

In the past year, Dutchess County Healthy Families has received six referrals from the local county jail for pregnant inmates. The program was able to serve two of these women, providing home visiting services in the facility with great success. Over the past couple of years, DCHF has worked hard to establish a cooperative working relationship with jail staff, and the Correctional Officers (COs) are now accustomed to seeing our friendly faces come through the lock-down gates with large pregnancy flipcharts and baby dolls for swaddling practice. Through this connection, one of the COs reached out to our program to provide services to the inmates in the men's ward as well.

After some preliminary discussions, our Family Assessment Worker, Yolanda Spooner, went to the jail and presented the Healthy Families program to 50 male inmates and four male COs. In addition to talking about the program and how any of the inmates' pregnant partners could enroll, she also presented some of the fatherhood curriculum. Yolanda spoke to the men about the research findings

showing the importance of fathers in relation to child development, and asked them for their own feedback and experiences. Many of the men expressed their frustrations and difficulties navigating systems on "the outside," and had a lot of questions about how to interface – as fathers – with various institutions, particularly their children's schools and Early Intervention.

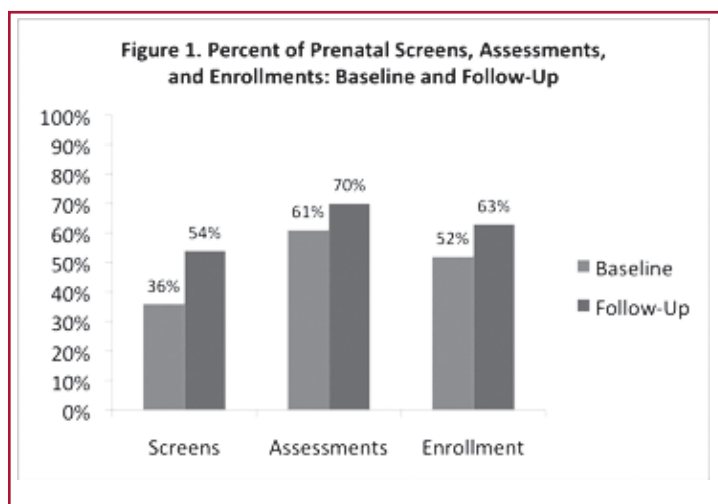
The fathers in the group expressed a deep interest in further information, so the program has agreed to do an 8-12 week program starting in January. The FAW and Fatherhood Advocate will be collaborating with one of the COs to present the 24/7 Fatherhood curriculum at weekly group sessions for interested inmates. DCHF is very excited about this joint effort with the jail, particularly since services available for incarcerated and transitioning parents in our community are scarce.

- Laina Mason, LMSW, Associate Director, DCHF

## The Research Corner

*continued from page 1*

displayed in Figure 1, the findings from phases one and two showed increases in the proportion of prenatal women who were screened, assessed, and enrolled from the baseline to the follow-up periods.



While improvements in the proportion of prenatal women screened, assessed, and enrolled were seen in the immediate follow-up period, improvements in the number of days that elapsed from screen to enrollment generally did not reveal themselves right away. For

example, subsequent analysis of phase one data showed decreases in the number of days between screen and enrollment that were not seen during the initial one-year follow-up period. These findings suggest that it may take time for the fruits of new outreach efforts and practices to grow.

### CONCLUSIONS

The study revealed that the feedback loop between researchers and practitioners was crucial to the project. Reviewing baseline data and discussing program practices at each of the participating sites with program managers, family assessment workers, and home visitors was an important component that contributed to project success. Some pieces of the puzzle were not apparent until everyone was in the same room talking about their practices. The sites were able to identify the best prenatal referral sources as well as roadblocks in the screen-assessment-intake process. Some practices that improved prenatal enrollment included enhancing partnerships with WIC and re-examining ways to address participant attrition, such as by assessing and enrolling women during the same visit.

### NEXT STEPS

As we continue to examine follow-up data, our conversations with the sites will resume in order to best understand what the data means and how program practices can be maintained or improved to enroll mothers prenatally. Thus, HFNY programs, you will be hearing from us, because we want to hear from you!



## Welcome Joanne Passero



Joanne Passero

Happy 2013 to my new HFNY colleagues and to those I met during my journey through the Office of Children and Family Services. I began my OCFS career in the early 1990s at Tyron Secure Residential Center for Girls in my hometown of Johnstown. I worked there until 2006 when I joined the OCFS Home Office in Renssealer. In my time at the home office, I've worn several hats: member of the Title IV-E Foster Care Eligibility Review team, the Child and Family Services Review team, and in March 2011, the Healthy Families New York program.

HFNY is a very different place than anywhere else I have been; this is the first time I have worked full time in a purely preventive program. I believe education and support can help people improve their lives, so it is exciting for me to be here. I was a single parent with two sons when I decided to return to school at age 29. I attended Russell Sage College, earning a Bachelor of Science degree in management, with minors in economics and psychology. That accomplishment vastly improved my situation and continues to enhance my experiences.

I still live in Johnstown, as most of my family and friends live in that area. They occupy a great deal of my time – especially my 10-year-old grandson. The great outdoors is my favorite place. Weekends are spent hiking, snowmobiling, cross-country skiing and doing water activities as often as possible. My grandson is often right there with me. I spend what little leisure time I have reading, doing yard chores and watching football. And I love to travel!

So far, HFNY has been a rewarding challenge. I hope I can make positive and proactive contributions to the program in my time here. I think that will happen; I work with a lot of experienced and knowledgeable people.

## HFNY's First Fatherhood Summit

On October 25, after months of planning, 50 eager attendees from across the Healthy Families New York state system met at OCFS for what we hope will be the first of many HFNY Fatherhood Summits. The event was well received; it provided the opportunity to gain practical knowledge to utilize in the field, discuss and share lessons learned and give input on this important component to HFNY.

Developing the summit was a collaborative process. Ideas were generated from the Fatherhood Conference Calls and a planning committee comprised of programs and Central Administration representatives. While the agenda ensured that everyone was active and engaged throughout the day, if you surveyed the crowd, the majority would agree that a highlight was being in the company of the three program participants – fathers from Albany County Healthy Families. They provided thought-provoking commentary on their experiences as fathers within HFNY and actively participated in group discussions; they lent a real-life perspective to the conversations and ideas that were generated.

We heard from attendees that they enjoyed the day, felt invigorated by it, and would be bringing back to their programs a renewed enthusiasm for their work with fathers.

Healthy Families New York programs and Central Administration are committed to engaging fathers in all aspects of program services. If you would like to learn from the experiences of your colleagues about what has worked for them, a great place to start is to attend the Fatherhood Conference Calls. If you would like to participate, speak to your program manager to see how your program can be involved!

For more information, contact Thomas Dwyer at 518-473-3673

# The Roving Reporter

What do you think gets in the way of mothers and fathers parenting with joy and confidence?



There are times when the demands and hassles of daily living cause stress. Fathers experiencing financial stress are less receptive to their children's needs, less nurturing, less consistent in their parenting, and less consistent in the discipline of their children. Work and chores are important, but so are recreation and play. Sometimes mothers and fathers forget how to make time every day for a little 'daddy or mommy time' with the children.

*Ricardo Rhymaun, Fatherhood Advocate, Healthy Families Albany County*

Life... money... jobs... and worry about all those things. Many parents have a lot going on in their lives, even mental illness. Many are young and have a lack of maturity and life experiences.

*Grace Fargas, FSW, Healthy Families of Oneida County*



I think that the judgments made by others about our parenting decisions can sometimes get in the way of parenting with joy and confidence. We so often get caught up by what other people think we should be doing, or by what this or that celebrity says we should be doing, that we forget to trust our instincts as parents and as the ones who have the best view of who our children are and what their needs might be.

*Kristen Kirkland, Researcher, OCFS*

Some mothers tend not to include fathers in the process of taking care of the baby physically, so fathers tend to be less confident in their ability to care for their children. Also, some mothers may be less confident in taking care of an infant because they lack experience, or are unaware of the child's developmental abilities.

*Marie Desrameaux, FSW, Healthy Families Successful Start*



Unexpected obstacles can lead to stressors that take the focus off the baby and direct parents to the family's current unstable situation. When others question their abilities, the parents too may wonder if they are capable of raising their children in an unstable environment. Parents learn to adapt and understand that life has its obstacles and the 'perfect parent' is just a title that is impossible to achieve.

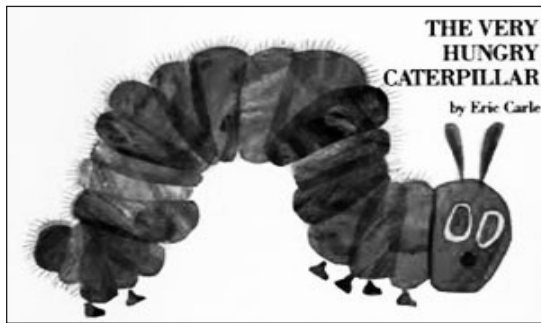
*Sarah Sabino, FSW, Healthy Families, Successful Start*

A lack of confidence could be directly related to a lack of joy. With the many stresses of parenting, I would say that joy and confidence are inexorably linked. Parenting for both mothers and fathers comes with a plethora of conflicting advice. The first thing most new parents learn is not usually about the general health and wellness of their child, but instead that everyone they encounter will have a strong opinion as to what parenting means. The suggestions are common but the reassurances are not always as common.

*Matt Maher, Fatherhood Coordinator, Ulster County Healthy Start*



## The Book Corner



*The Very Hungry Caterpillar*  
By Eric Carle

One of the books my children used to ask me to read over and over (and over!) again was entitled *The Very Hungry Caterpillar* by Eric Carle. I think one of the reasons one of my daughters loved the book so much was because whenever I would read it to her, it would make her think about food. She'd say she was hungry and then we would have something to eat!

Submitted by Aida Ruiz, Supervisor, Bushwick Brightstart Healthy Families

## Through Their Eyes

*continued from page 5*

The other three tell families about their personal experience when it makes sense and usually only after talking about self-disclosure with their supervisor. Amy said, “[Sharing my experience] normalizes it for the community that everyone needs support, even people who work in this program.” Aqua said, “It takes away any stigma participants might think there is around being in a program.” Malissa has found that sharing her experience can be a key to building rapport, especially with younger moms. Amy agreed: “I remember a ‘tough as nails’ mom who looked at me like, ‘Who are you coming here and you want me to do what?’ I knew about maintaining my boundaries like I learned in Core Training, but once I told her I had been a participant, she saw me differently. So I disclose selectively, and when there is a reason.”

### WHAT COULD HAVE BEEN DIFFERENT?

Most of the home visitors were hard pressed to come up with something they wished had been different when they were participants. Aqua had to leave the program when she got housing in another zip code and that was really hard for her: “I appreciated that my home visitor came to my new home to see me and didn’t just drop me right away, but I wish there could be a program in every zip code.”

While the relationship with their own home visitor was central to their experience in the program, all of the home visitors stressed the importance of making sure participants get to know everyone in the program. Malissa made connections with more than just her home visitor: “I had met and talked with everyone, including the Program Manager. I had met other participants and staff at groups. I felt that I was part of a community. So much growth can come from working together as a community, like we do in Healthy Families.”

These “once participants, now home visitors” all come from different communities, yet their positive experiences demonstrate the value of the HFNY model for families all over New York. Each of them expressed appreciation for the strengths-based, positive support they received while learning about child development, parenting, accessing resources and having fun with their children. They reinforced for us the importance of acknowledging what families already know at each home visit, of remembering that no one knows their baby like the parents, of connecting families with many different staff members in the program, and of making sure that program expectations are clearly set right from the start.

We are grateful to Aqua, Holly, Amy and Malissa for sharing their reflections, and these photos of their beautiful children!

# theLink

## Winter 2013



New York State  
Office of  
Children &  
Family Services  
Andrew M. Cuomo, Governor  
Gladys Carrión, Esq., Commissioner



Prevent Child Abuse  
New York, Inc.  
33 Elk Street, 2nd Floor  
Albany, NY 12207

Non Profit Org.  
U.S. Postage  
**PAID**  
Albany NY  
Permit No. 785

## In the Next Issue School Readiness

Healthy Families New York helps participant children to be more ready to start school than children who were not enrolled in our services. What is it about our home visiting work that has produced these positive outcomes for children? How does enhancing early parenting result in better school performance? We will look at the effect our program has had on school retention and academic success, and how programs can enhance their effectiveness in this area. See you next time!

## Letters to the Editor

We want to know what you think! What thought or question or idea did the Link spark for you? Help the Link editors satisfy their curiosity, and perhaps start an interesting conversation while you're at it. You can send your Letters to the Editor to Pam Balmer at [pbalmer@preventchildabuseny.org](mailto:pbalmer@preventchildabuseny.org). Thanks!

*"When things get too complicated, it sometimes makes sense to stop and wonder:  
Have I asked the right question?"*  
□ Enrico Bombieri