

Resource Parent Handbook

*A guide for
resource parents
and kinship caregivers*



Resource Parent Handbook

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To our valued resource families—

THANK YOU! Your care for our children and support of their parents is invaluable and we deeply appreciate you and your family!

We believe that family includes a community: the youth and children in care, birth families, resource families, service providers and the community. As a resource caregiver, the role you'll be fulfilling may be one of the most rewarding, and at times difficult, experiences you'll ever have. Because of your generosity, children, families, and our communities will be healthier and stronger.

We recognize and celebrate resource parents for the essential role they play in the development, healing, and success of children and youth in care. Resource parents may face their own personal and emotional stress that come as part of the job. We are committed to better supporting resource families by ensuring they receive valuable training and are connected to the necessary resources to best serve the children they welcome into their homes.

This Resource Parent Handbook was the result of a collaborative process between CYFD and members of our resource family community. It is one of several reforms we put in place to help strengthen resource parents' capacity to help children and families thrive.

We appreciate all of you, for the care, love, and support that each of you provide to our children and families in the state of New Mexico. We look forward to partnering with you!

In partnership,

A handwritten signature in black ink that reads "Barbara J. Vigil".

Barbara J. Vigil
Cabinet Secretary
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A handwritten signature in black ink that reads "Emily Martin".

Emily Martin
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Introduction

At any given time in New Mexico, there are thousands of youth in dependent care. Most of whom entered care as a result of abuse or neglect. Resource parents—which include foster and kinship caregivers—open their hearts and their homes to these vulnerable children and youth and provide the love and support that allows them to heal and grow while they are separated from their families. Resource parents are the true heroes of the child welfare system.

At the New Mexico State Children, Youth & Families Department (CYFD), we know that the role of a resource parent can be challenging and even sometimes confusing. That's why we've developed this handbook, which provides important information about all aspects of foster care as well as numerous helpful resources that can provide assistance and support.

We know that child welfare is a community responsibility and that ensuring the safety and well-being of our young people requires a supportive network. In that light, CYFD has developed a strategic plan to better address the needs of our children and families.

We strive to provide resources and services for children and families in their communities. We strive to ensure that the child, the family, and other caring adults, including the resource parents are actively involved in supporting the child's needs.

We believe that by fostering stronger partnerships at the neighborhood level and facilitating the development of culturally relevant resources and services within the community, CYFD will help resource parents become more effective in their roles and provide the best possible environment for the children in their care.

To all the current and potential resource parents reading this book, we at CYFD extend our heartfelt gratitude. Thank you for answering the call of our most vulnerable children, for helping to right the wrongs, for being an advocate for children, and most importantly, for providing New Mexico's foster children with the love, compassion, and respect they deserve.



CYFD's Commitment to Supporting Resource Parents

To ensure that resource families have the support and resources they need, CYFD aims to work in partnership with the resource parents in a collaborative effort based on mutual respect and a constant focus on the needs of the child to strengthen the quality of care provided to children and youth living in foster care. Developing a comprehensive approach to recruiting and retaining high-quality Resource Parents in our community is paramount in improving the quality of care for children in foster care.

Today's resource parents are community members who are respected as an integral part of a team. They are committed to the safety, permanency, and well-being of children and youth.

This working partnership strengthens families by bridging the gap during challenging times so children grow up in safe, healthy environments.

RESOURCE PARENTS:

- Treat children with love, respect, and dignity
 - Respect the culture of the child and the culture of the family
 - Are knowledgeable about child and youth development, trauma, and parenting
 - Are willing to build relationships with the child/youth and their family
 - Advocate for children/youth in their care in all aspects of their lives
 - Support reunification of children and youth with their families.

FREQUENTLY ASKED QUESTIONS

What is Foster Care?

Foster care is a social service that provides a resource family for children placed away from their parents or guardians by CYFD. This includes, but is not limited to, placements in foster family homes and care by relatives, known as kinship care.

The primary goal of all child welfare services is to preserve and strengthen the child's own home whenever possible. However, sometimes birth parents or other caregivers cannot meet a child's basic needs for care, protection, and love. When this occurs, life in a family foster home, such as yours, can come closer to normal family living than any other type of temporary placement.

As a resource parent, you play a central role in helping CYFD keep its commitment to permanency for all children in care.



Permanency means that children and youth grow up in a permanent, loving home, can occur by reunifying children and youth with their birth parents, and establishing permanent legal guardianship. The resource parent is a key member of the permanency planning team.

How do I know if I'm ready to become a Resource Parent?

You are ready to be a resource parent if you are ready to accept a child into your family and give them the love, care, and commitment that you would give your child while respecting the child's history, culture, and family relationships. Resource parenting requires sensitivity, flexibility, and selflessness. If you have these qualifications and you can safely care for a child, you are ready to start the process.

How long does it take to become a licensed Resource Parent?

It can take about four months to complete the required training and investigative home study. A thorough assessment of your family dynamics will take place through interviews, home visits, inspections, and training program participation.

The Journey Chart provides more information about how children and youth come into, move through and leave foster care.

What are the roles and responsibilities of resource parents?

Resource parents provide a child or children with a safe and healthy environment in a family home, temporarily, until the child can achieve permanency. In this way, the resource family meets the extensive day-to-day needs of the children and youth in their care.

Resource parents also participate as full partners in the child's team to plan for and achieve safety and timely permanency. The participation of resource parents in team



meetings can help facilitate reunification with the child's family of origin and ensure more children will end up in a safe and healthy family setting that is permanent.

Sometimes, depending on the child's needs, he or she may be in more than one placement while in the child welfare system. The new placement may include transfer to the home of their birth family, another relative, a different foster home, a residential treatment facility, among others. Resource parents prepare and support children as they transition from one placement to another.

I am getting older/elderly. Is this an issue?

No. The New Mexico Children, Youth, and Families Department (CYFD) do not discriminate based on age, gender, race, ethnicity, or sexual orientation. You will be asked to take a physical exam to assert that you are physically able to care for a child.

I am a single male/female. Is this an issue?

No. As long as you are over the age of 18

you can be single, married, or cohabitating to be considered for resource parenting. All adults who reside within your home must be willing to participate in the full licensing process

I am/we are LGBTQ. Is this an issue?

No. CYFD does not discriminate based on age, gender, race, ethnicity, or sexual orientation. CYFD does not discriminate against individuals and families (married or not) who apply to become resource or adoptive parents.

Do my financial resources play an important role in my becoming a resource parent?

As part of the process, you will be asked to provide a financial statement. You should have sufficient financial resources so that you can provide care for a foster child without being reliant on the monthly reimbursement provided while children are placed in your care.

What if I was convicted of a crime in the past?

Current or past criminal issues are assessed on a case-by-case basis. There are crimes, however, which are deemed as "automatic disqualifiers" which would prevent a person from becoming a licensed resource parent. These crimes include—but are not limited to—murder, rape, child abuse, and having been convicted of a serious felony. Individuals with substantiated allegations of abuse and/or neglect with CYFD or other child protective agencies are also assessed on a case-by-case basis. Some substantiations are automatic disqualifiers that will prevent a person from becoming a licensed resource parent. It is important to be completely honest with your placement worker regarding any past or present issues related to crimes. All adults (over the age of 18) living in the home will be required to undergo a federal background check, as well as a check of local police and sheriff's department records.

We have pets (dogs, cats, birds, etc.). Is this an issue?

No. However, any pets residing at the home should be in good health with documentation of current vaccinations and have a temperament such that they will not be frightening or hazardous to foster children.

I live in an apartment. Is this an issue?

No. It is okay to own or rent housing as long as you can provide ample bedroom space for a child. Foster children can share a bedroom with birth or other foster children of the same gender, as long as they have separate beds to sleep in. There are also minimum physical space requirements that must be met.

I have some health issues. Will that be a problem?

As part of the licensure assessment, you will need to take a physical exam. The physician will be asked their opinion about your physical and emotional health as it pertains to being able to safely provide care for a foster child or foster children.

I have a diagnosed mental health issue (depression, bipolar, etc.) Is this an issue?

If you have a mental health issue or concern, as part of the assessment process, you may be asked to provide statements or reports from your past or current mental health provider stating their professional opinion as to whether or not this would preclude your ability to safely care for a foster child.

Do I get money for being a resource parent?

As a resource parent, you will receive a monthly reimbursement to help provide food, clothing, shelter, and transportation for the foster children placed in your home. The reimbursement is based on the foster child's age and needs level.

What if we can't attend one or more of the available training dates?

If at all possible, you are encouraged to take all classes in your county of origin. If you have a conflict, please consult with your placement worker who will help you come up with an alternative arrangement if necessary.

What types of children are in foster care?

Most children who come into CYFD custody, through no fault of their own, have gone through traumatic situations in their lives. Some of these children may have challenging and difficult behavioral issues. As part of a professional team, you will have the support and help from a variety of professionals and seasoned resource parents that can help you in managing potentially difficult behavioral issues with children.

Will we have to work with or know the children's biological family?

In most cases, yes. Visits between birth parents and children are an essential part of the efforts to reunite families. Visits go a long way in helping the child work through the emotional trauma of being separated from his or her family. Each case is different and will be assessed on a case-by-case basis to determine whether or not it would be appropriate for the foster and



biological family to work together. The child's caseworker has the primary responsibility for planning visits and arranging supervision if required.

As a resource parent, can I still apply for other benefits (WIC, food stamps, etc.)?

Any New Mexican in need of assistance should apply for cash, medical, energy and/or food assistance benefits from the NM Human Services Department (HSD). Eligibility for all programs is based on household income and other factors. You can apply for these programs at www.yes.state.nm.us or at a local HSD Income Support Division (ISD) office. For more information, please call the HSD Consolidated Customer Service Center at 1-800-283-4465. The NM Department of Health (DOH) also has a special supplemental nutrition program for Women Infant and Children (WIC). Visit www.nmwic.org or call 1-866-867-3124 for more information on WIC.

Do all foster children receive Medicaid?

Typically, yes. There are instances where children do not have Medicaid; however, all children will have medical coverage while in foster care.

Can foster children go to church with us?

Yes, but if a child is of a different faith, he or she must be allowed to attend worship in that faith. The child's birth parents still have the right to grant their permission for religious involvement even while their children are in a foster home.

Can foster children travel with their resource parents (vacations, etc.)?

In most cases, yes. It is important to wrap children into the full family experience, but if it involves traveling out of your county of residence or out-of-state travel, there must be proper advance approval by the child's placement worker.



As a resource parent, can I adopt a child I am providing care for?

Yes. However, the first goal is to reunite children in foster care with their biological families whenever possible. If a foster child who has been in your home for some time becomes available for adoption, you can discuss your interest in adopting him or her with the child's caseworker.

Won't it be hard on us when the child is reunited with his or her birth family or is adopted?

Yes. That is, in fact, one of the hardest parts of being a resource parent, but it can also be rewarding to know that a child has a solid home. You will certainly feel sad for a time. It's only natural, just as it is natural for the child to want a family of his own. Many resource parents stay connected to children after they are returned to their biological family, are adopted, and/or even after they become adults. It is important to remember that foster care is a way to build connections and positive experiences that will stay with a child no matter where he or she goes. This topic gets addressed in training to become licensed for foster care.



Permanency for Children and Youth in Foster Care

- You are part of the youth's permanency team
- What does the law say about permanency?
- What are the three permanency goals?
- Resource Parent as part of the permanency planning team
- Resource Parent's role in reunification
- Resource Parent's role in honoring sibling relationship
- Resource Parent's role in alternative permanency plans

CYFD is committed to ensuring that all children and youth have the opportunity to grow up in a safe, permanent family. Research and experience have shown that children and youth from birth through adolescence need to know where they belong. CYFD's approach is rooted in the belief that the entire community must play a role in child welfare.

The first choice for permanency is with one or both parents. When children and youth are removed from their homes, diligent efforts are made to see that they can return home safely and quickly. But when a return home on time is not possible, CYFD has an equally important responsibility to see that they are placed into safe, loving, and permanent homes.

This can happen through adoption or Permanent Legal Guardianship. CYFD has committed that no child or youth should leave foster care without a permanent connection to a family. You, the resource parent, play a central role in helping CYFD keep this commitment.

You are part of the youth's permanency team.

A familiar Hopi proverb says: "One finger cannot lift a pebble." This proverb is especially relevant to children who have experienced abuse or neglect. It takes a community to respond to the needs of these children and it includes many members.

Some of them are:

- The child's parents
- The child's siblings
- The child's relatives and extended family.
- The kinship family
- The resource family
- The child
- CYFD staff
- Foster care and adoption agency staff
- Family court



- Attorneys who represent the child, youth, and parents
- Schools
- Doctors and other medical providers
- Therapists and other community service providers
- The child's, or youth's informal support network, which may include spiritual leaders, mentors, friends, neighbors, employers, coaches, etc.
- Support groups for resource or adoptive parents and/or grandparents and another relative caregiver, and community of faith.

What does the law say about permanency?

A federal law, known as the Adoption and Safe Families Act (ASFA), requires permanency plans for all children and sets timelines for achieving these goals.

ASFA says that if a child has been in foster



care for 15 of the most recent 22 months, CYFD must ask the court to take away ("terminate") parental rights and find a qualified family to provide a permanent home for the child through adoption or legal custody.

While there are some exceptions to this requirement, in most cases, this is the timetable that CYFD must follow. The reason for this timeline is so that each child will have the opportunity for permanence according to appropriate developmental timeframes. Waiting, even a short time, to feel secure and know where you belong can seem like an eternity to a child or youth.

To achieve these goals and meet these timetables, permanency planning for each child in foster care must begin the very first days she comes into care. CYFD will lead the efforts of the entire team to ensure that reunification efforts are vigorously pursued, while at the same time, alternate permanency options are explored.

What are the three permanency goals?

REUNIFICATION: The primary goal is reunification, which refers to a youth returning home to her family. Reunification can also refer to a child's return to a legal custodian or adoptive parent after some time in foster care.

ADOPTION: If a child cannot be returned home safely and on time, the next most permanent plan is for her to be adopted by a qualified and loving family. The adoption process involves the termination of the parents' rights and the creation of parental rights to the new caregiver(s); adoption creates a new legal family. Adoptive families may or may not be related to the child or youth before the adoption. Most children in placement are adopted by their current kinship or resource parent.

PERMANENT LEGAL GUARDIANSHIP: When another person, often a family member, becomes the permanent legal guardian. Guardianship is intended to be a



permanent arrangement, but, unlike adoption, does not involve termination of the parents' rights. Under the Public Law, the parents may retain certain rights, such as visitation, that they would not have under adoption. In most guardianship cases, the current kinship or resource parent becomes the permanent legal guardian.

These three permanency goals are listed in order of priority. Before a child can be adopted, family reunification must be fully explored and ruled out. Before guardianship can be considered, both reunification and adoption must be ruled out.

Adoption and guardianship allow caregivers to make a lifelong commitment to children who cannot live with their parents (birth parents or other parents with whom the child was living when removed). Although there may be some differences between the two commitments, CYFD encourages adoptive parents AND

permanent legal guardians to take these commitments seriously, with the understanding that they are entering into a lifelong relationship with the child. Federal law allows CYFD and the courts to develop other permanency plans for some children that do not fit into any of the above categories. This is known as "another planned permanent living arrangement/ APPLA." However, this never represents the highest level of legal or emotional security or stability for a child, and thus is not an option likely to be considered in most cases, and never for a youth under 16.

Resource parents as part of the permanency planning team

Making decisions that permanently affect the lives of children and youth is hard and emotionally draining work. It requires the best efforts of many people, which is why CYFD uses a team approach. The team approach begins as soon as the youth comes into foster care. A case planning meeting will occur within 20-25 days of the child being placed in a home. Additional meetings will continue every 90 days until the child or youth is successfully settled in a permanent home.

At each team conference, the child's or youth's needs will be discussed and plans will be made for best meeting those needs. As the person who lives with the youth 24 hours a day, seven days a week, you bring important perspectives and information to these meetings.

Resource parent's role in reunification

You can assist in the reunification process in many ways. Some ways you can be most helpful include:

- Being a role model and mentor for the parents
- Supporting the child's or youth's relationship with her parents
- Sharing helpful information with the parents about health care, educational progress, and other issues—examples

might include sharing copies of school report cards, notes from doctor visits, or recent photos

- Remaining positive and supportive in following family visitation plans and telephone contact
- Providing emotional support for youth as they prepare to return home
- Being available to both the youth and her parents after she returns home as a resource and source of support
- Allowing parents and other family members to take part in important holidays, birthdays or other special occasions (such as school plays) with your family or separately.

Resource parent's role in honoring sibling relationships

Nearly three-quarters of all children and youth in foster care have one or more siblings. It is the policy and practice of the foster care system to place siblings together in the same home whenever possible. However, studies demonstrate that as many as 75% of all children and youth in foster care will experience separation from at least some of their siblings for some period of their time in foster care. Yet, these sibling relationships are among the most important connections a youth will ever have, and they often create the best opportunity for permanency. Thus, when siblings in care are separated, it is required that they have at least bi-weekly visits. As a resource parent, you can help honor sibling relationships in several ways, including:

- Let your placement worker know that you are willing to be a resource parent for siblings
- Get to know other resource parents who care for siblings to learn about the dynamics of parenting multiple children from the same family
- Plan individual time with each child or youth



- When siblings are separated, plan activities to bring them together as often as possible—play dates, lunches, attending the other siblings sporting events or musical concerts, etc.
- Set up mechanisms for children and youth to communicate with their siblings by phone, email, or in other ways
- Seek to continue this contact even if the other siblings go into a permanent placement.

Resource parent's role in alternative permanency plans

If it is determined that a child cannot return home, you play an instrumental role in whatever permanent plan is best.

You can consider making a permanent commitment yourself through adoption or guardianship. Ask your placement worker to help you understand the differences between adoption and guardianship so that you can make a wise and informed decision. If you do adopt or assume

guardianship, your subsidy can continue.

If you adopt or are awarded guardianship of a youth 14 or older, it can continue to age 21 provided the youth is still with you and is enrolled in school or treatment, working part-time, learning a trade, or unable to do any of the above for a documented reason. Annually you will have to provide that information to New Mexico CYFD upon request.

If you are not able to make a permanent commitment, you can still assist in permanency planning by:

- Helping the team to identify potential families
- Giving the child “permission” to think about adoption or guardianship with another family and providing emotional support through this process
- Providing transportation and other

supports so the child can participate in recruitment activities

- Being a resource to the child and the adoptive or guardianship family during the transition time
- Ensuring that the child has an up-to-date Lifebook (described on page 7), and other special items to take with her to her new home.

Tips for helping prepare children and youth for a new permanent home can be found in Appendix Three.





Child Welfare System Roles and Responsibilities

- **Resource parent responsibilities**
- **Child/youth responsibilities**
- **Family responsibilities**
- **CYFD responsibilities**
- **Permanency Planning/Placement Worker responsibilities**
- **Other community partners**

All children and youth need to have a voice in the decisions that are made about their lives. Including case planning and decision-making is required by federal law for all youth age 14 and older. It is the role and responsibility of the adults to care for and support the child, inform them about the process and decision points, provide opportunities for their voice to be heard, and listen to their input.

Children also need opportunities to develop trusting relationships with resource parents, case managers, and child advocates, who represent the child or youth in legal matters and court proceedings related to her case, before they are likely to feel comfortable expressing honest feelings, especially when conflicts arise.

Resource parent responsibilities

Assisting children in having a strong, informed voice in decision-making includes:

- Ensuring that the child, particularly an adolescent, is invited to case planning and other related meetings
- Ensuring that the child or youth attends court hearings related to their case
- Requesting that such meetings and court hearings be arranged around the child's schedule to avoid unnecessary school or work absences
- Working with case workers, child advocates, and others to help the child develop the confidence and skills needed to participate in a meaningful way in these meetings and hearings
- When there is a legitimate reason for a child not to be present, arranging for their input to be gathered in advance and shared with the team and/or court
- Providing the child with opportunities to participate in meetings or hearings related to their siblings



Child/youth responsibilities

It is the child's responsibility, with support and guidance, too:

- Adapt to a new environment, including adjusting to feelings of sadness and/or anger
- Speak up and share thoughts, questions, concerns, and needs both in the home and at meetings or hearings
- Participate in meetings, hearings, family visits with family, siblings, and/or potential permanent families, and recruitment activities
- Ask for help or support when needed, to take full advantage of these opportunities for participating in decision-making about her life
- Achieve relevant objectives and activities in the child's case plan
- Go to school, if age-appropriate
- Prepare for independent living

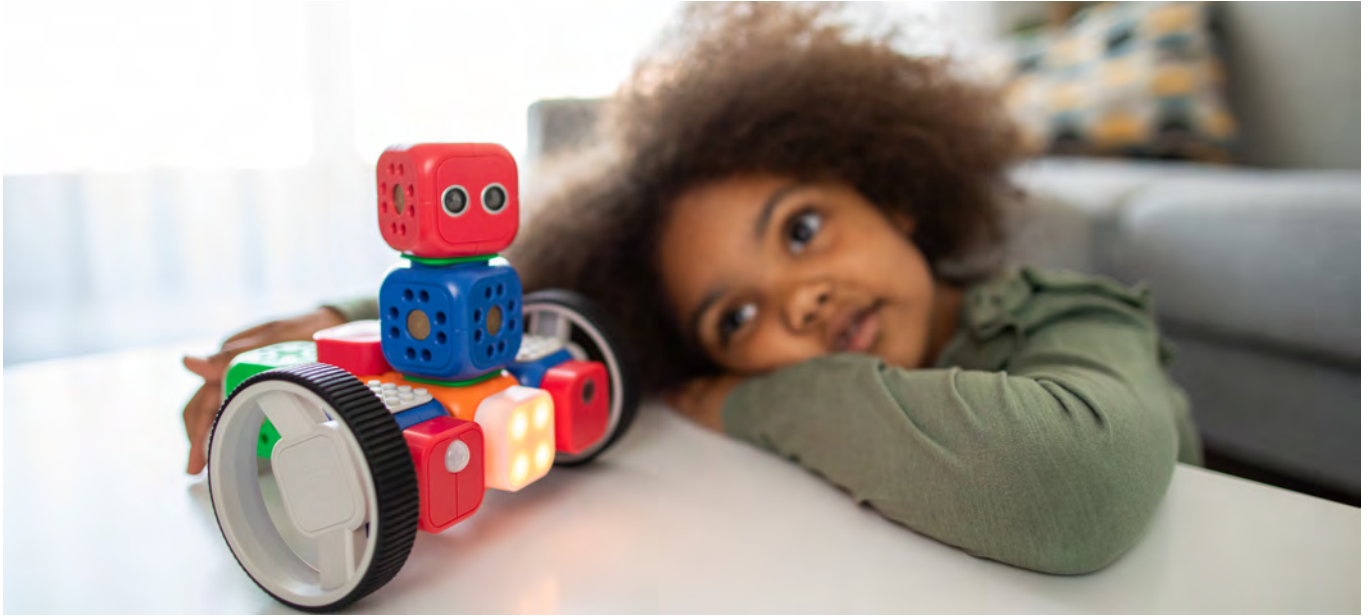


Family responsibilities

- The child's parents have several responsibilities while their child is in foster care. Some of these include:
- Help the child or youth adjust by staying in contact with her as well as the resource family and agency
- Attend all meetings, court hearings, and family team conferences, and participate in case planning
- With the help of their attorney, learn about and exercise their legal rights and responsibilities
- Identify their strengths, needs, and sources of support
- Identify relatives and other people who can be a resource to them and/or their child
- Work toward reunification, by changing the conditions or behaviors that caused the child to be placed in foster care and by meeting the objectives in their case plan
- Provide continuity by visiting regularly
- Showing support for their relationship with the resource family
- Ask for help when it is needed

CYFD responsibilities

The CYFD is responsible for ensuring that all children in CYFD custody remain safe and well cared for while in foster care and that the parents receive the supports and services they need as they work towards reunification. Their responsibilities include developing and implementing a permanency plan for the child or youth and seeing that all legal requirements and timelines are met.



Permanency planning worker responsibilities

- Assess needs of child and family
- Develop a treatment plan for each child or youth in care
- Meet regularly with child, family, and resource family
- Attend all meetings, court hearings, and family team conferences, and participate in case planning
- Schedule, arrange and convene treatment plan meetings
- Invite and encourage everyone's participation in case planning and court hearings
- Monitor everyone's progress towards meeting case planning objectives
- Coordinate the efforts of all IPP (Individualized Planning Process) team members
- Keep records for each child and family served
- Ensure that all medical, behavioral health, and educational needs are met
- Ensure that the child and family, including her siblings, have regular visits
- Ensure that payments for board, clothing and other needs are made
- With the help of the legal advocates, ensure that the family, resource family, and child are prepared for all court hearings. This includes providing, in writing, the name and contact information for the child's Guardian ad Litem (GAL) or youth attorney to both the youth and the resource parents. (Note: If you do not know the name of your GAL/youth attorney, ask the child's permanency planning worker (PPW) or your placement worker.)
- Attend court hearings and recommend permanency plan to Family Court
- Work with all team members to transition the child or youth from foster care to return home, adoption, or Independent Living Plan (ILP)
- Ensure that older youth are equipped with the skills they will need to live as adults— including post-secondary education, job readiness, employment opportunities, health care management, housing, and basic life skills. This also includes discussing independent living services and options directly with the youth.



The Child Welfare System and Family Court

- Understanding children's court
- Attorneys and legal advocates
- Family court judge
- Types of court hearings
- Tips for participating in court

Involvement with the child welfare system can often include the court system, particularly when a child is removed from home or is at risk of removal. When a case requires court involvement, the case will come before a family court. The state child welfare agency (CYFD) and family court are two separate systems that work in sync with one another. While a family is navigating through the child welfare system, they are also navigating through the family court system. The need to understand the court system, the professionals involved, the types of court hearings, and how a resource parent participates in this process is essential.

Understanding children's court

Resource parents and children of all ages are entitled, by law, to receive notice of all court hearings. While judges have the responsibility to make decisions about children, and youth, they can only make good decisions if they receive good information. As a resource parent, the information you can provide about the child in your home is essential for good decisions to be made.

Therefore, you need to stay informed about court hearings and ensure that your voice is heard throughout the process. You can also play an important role in making sure that the children's and youth's voices are heard at every step along the way. If you have questions about the court proceedings or schedule of hearings, you can talk to the child's permanency planning worker, your placement worker, or the child's attorney.

Attorneys and legal advocates

While children and youth are in foster care, they are entitled to an attorney who will ensure that their legal rights are attended to and that their voice is heard in legal proceedings. Parents also have attorneys to represent them throughout the legal process. The CYFD Children's Court Attorney (CCA) will ensure that all court documents and petitions are filed on time and that the case is progressing according to the mandated timelines.



Resource parents do not typically have or need attorneys. They are not considered a legal party to the case and do not have the legal right to the appointment of an attorney. If a resource parent feels a need to talk to an attorney, the New Mexico Bar Association Lawyer Referral Service can assist in locating an attorney in your area. They can be reached at 1-800-876-6227.

All attorneys are bound by rules of ethics to work responsibly with their clients—whether the client is the parent, a child or adolescent, or CYFD. These responsibilities include:

- Keeping their client informed of their rights and the steps of the legal process
- Returning phone calls and responding to questions or concerns
- Meeting with their client regularly
- Preparing their client for all court events
- Coming to court prepared to provide the best representation to their client
- Participating in other case-related activities and meetings
- Ensuring that the case proceeds on time and meets all legal requirements

A resource parent needs to know who each child's attorney is so they can support the child's relationship with the attorney.

If a child does not have an attorney, is not happy or comfortable with her attorney, or has an attorney that is not fulfilling the responsibilities listed above, the resource parent needs to bring these concerns to the permanency planning and/or placement worker, and in some cases, advocate for a new attorney to be provided.



Family court judge

It is the judge's responsibility to make decisions regarding the case according to the facts and the law. To do this, the judge will:

- Maintain an orderly courtroom and treat everyone with respect
- Ensure that all parties—including youth—have been properly notified of all court hearings and that efforts have been made to facilitate their participation—including transportation and other necessary arrangements
- Schedule hearings so that mandated timelines can be met
- Schedule hearings so that youth and family members can attend
- Ensure that all parties entitled to legal representation are appropriately represented
- Learn about the case

- Listen and ask questions
- Ensure that all parties are heard
- Make placement and permanency decisions in accordance with the law
- Issue court orders that make legal decisions clear to all

Types of court hearings

There are five major types of court hearings in dependency cases. Below, each are briefly explained.

CUSTODY HEARING

The hearing at which the court determines whether the emergency placement is necessary and whether to allow the child to remain in out-of-home care until the next hearing. In New Mexico, this hearing must be held within 48 hours of a child's removal from her home.

ADJUDICATORY HEARING

A fact-finding hearing at which the judge reviews the allegations presented in the petition. (The petition is a legal document filed by New Mexico CYFD, which contains the allegations put forward by the Department to prove the necessity of court intervention and out-of-home placement.) The adjudicatory hearing is held within 10 days after the Shelter Care Hearing.

PERMANENCY HEARING

A court hearing to consider a child or youth's need for secure and permanent placement on time. The hearing must be held within six months of a child's placement in foster care and revisited every six months at a minimum thereafter until permanence is achieved. Typically, permanency hearings are where the resource parent can have the greatest opportunity for input.



TERMINATION OF PARENTAL RIGHTS (TPR) HEARING

If family reunification has been ruled out and adoption has been determined the next best option, the Department will petition (request) for termination of parents' rights to the child, which frees the child for adoption. If parental rights are terminated, the parents no longer have legal rights as to the youth.

HEARINGS TO COMPLETE A YOUTH'S LEGAL MOVE to a new, permanent, legal family

- Adoption finalization takes place only after parental rights have been terminated
- Guardianship finalization takes place when a child is placed with a relative and the relative is appointed as permanent guardian.

Tips for participating in court

- Stay informed about court dates and times. Speak up and ask for information if you do not feel you are getting what you need
- Ask the permanency planning and/or placement worker and the attorneys involved with the case to explain the purpose of each hearing to you and to help you understand your role
- Engage the permanency planning and/or placement worker and attorney to help prepare her the child/youth for what to expect and how to participate in court hearings, including who will be present, what the purpose of the hearing is, what will happen and be said during court (so the youth does not feel blindsided) and what will happen afterward. Be available to respond to the child's questions but be sure to have accurate information
- Arrive at least 15-30 minutes early for court hearings to allow time to get through security and find the correct courtroom

- Bring the child or children whose hearing you are attending, but make child care arrangements for other children in your care
- Dress professionally and appropriately
- Bring copies of records with you. This can include notes you have made about the child's progress while in your care, a log of doctor's appointments, school records, and notes related to visits with the family
- Keep in mind that any written materials you bring may be requested and copied by all attorneys for the official record
- When you speak, speak slowly, clearly and use clear and professional language. Give all of your answers out loud, do not simply nod or shake your head. Refer to the judge as "Your Honor"
- Be as clear and complete as possible when responding to questions or offering information about the child so that the judge will have a full picture upon which to make a decision
- Talk to other resource parents about their experiences in court
- Remember that *all* information about the case is confidential!





Roles and Responsibilities of Resource Parents

- **Understanding your responsibilities as resource parents**
- **Kinship care**
- **Visits with family**

Resource families are critical members of the child welfare system with important knowledge, skills, and information. Resource families have some of the most challenging and emotionally draining roles in the entire child welfare system. You must be prepared to welcome a new child into your home, manage a wide array of behaviors she presents, and cope with agency regulations, policies, and paperwork. You are also expected to provide mentoring, support, and aid to families.

In your home, you will serve as a parent, counselor, healer, mentor, role model, and disciplinarian. Beyond your doors, you will be expected to attend meetings and classes at CYFD, school and medical appointments, case reviews, and court hearings.

If you have provided foster care for many years, you may have noticed significant changes in the child welfare system. For example, in the past, it may have been acceptable for children to remain in foster care for long periods—even into adulthood. This is no longer acceptable.

With all foster children, the goal is permanency, and when children cannot be reunited with their families in a timely way, and no other relatives have been identified, resource parents will be the first approached about being a permanent resource for the child.

Understanding your responsibilities as resource parents

As a resource parent, you have three major sets of responsibilities:

- Meet the day-to-day needs of the children and youth in your home
- Participate as a full partner in the child's team to plan for and achieve safety and timely permanency
- Prepare and support children and youth as they transition from your home to another home, whether that is the home of their family, another relative, another foster home, a residential treatment facility, an adoptive home, or a permanent legal guardian.



As you strive to fulfill each of these roles, it is also important that you take care of yourself. Make sure you care for your health and well-being, seeking support along the way from friends, family members, support groups, other professionals, and your community of faith.

Kinship care

When a child's situation requires CYFD to place her outside of her home, it is CYFD policy to first consider relatives or other individuals that have an existing significant relationship with the child and/or her parents, provided they can meet foster home requirements. This first placement option with relatives is called "kinship care."

Children may be placed in the home of a kinship caregiver on an emergency basis after a satisfactory initial assessment is completed of the caregiver and the home. This includes New Mexico Courts and Criminal Records Checks (CRC) clearances and an on-site home evaluation. Within 60 days, the kinship home must be in full compliance with all foster care requirements, or the child(ren) must be moved to a home that does meet these standards. While you are a kinship caregiver, although you are related to the child(ren) in your care, legal custody rests with CYFD and therefore you are still subject to all of the same requirements and regulations that apply to all foster homes. As a kinship caregiver, you will be eligible to receive financial reimbursement and agency support.

A placement worker and permanency planning worker will be assigned to work closely with you, the child or youth, and the child's parents in meeting the needs of the child while in your care.

Kinship care, like all foster care, is intended to be temporary and last only until the family can address the issues that brought the child or youth into CYFD custody. In all cases, the goal is for the child to be reunited with her parents as soon as is safely possible.

The length of time you could care for a child while these issues are being resolved could be as short as a few weeks, or as long as several months. When reunification is not possible, a permanent family must be identified, and the child must be settled into that permanent home as quickly as possible.

As a kinship caregiver, you could be considered as the child's permanent family through either adoption or permanent legal guardianship.



Visits with family

Visits with the child's biological family are important to their sense of stability and well-being while in foster care and are a critical element to their successful reunification. State regulations require that foster children be permitted to visit their parents and/or family frequently. These visits can also be court-ordered. The frequency and other details will be discussed with your placement worker and included in all written plans.

The schedule of visits may become more frequent in preparation for returning a child home. Visits may include the child's parents, other family members, and siblings. A visiting plan is usually decided jointly by the permanency worker, the child or youth's family, the private/provider agency case manager, and other members of the child's team including the resource parent. Sometimes a Family Court judge will order a particular visitation schedule.

As a resource parent, you can play an important role during visits. You will be able to support and nurture the child and family as they work toward restoring their relationship. There may be times when this role is difficult for the resource parent, particularly if the child becomes upset or acts out before or after visits. These are natural reactions for many children, and resource parents may need to seek guidance and support to help a child through these times. One idea might be to work with the child's permanency planning worker to develop a set of guidelines for dealing with difficult situations. However, these challenges are not valid reasons to discourage or discontinue visits. No one has the authority to discontinue visits except the judge.

In rare circumstances, for example, when there are safety concerns about a parent, the court may discontinue visits for some time. Or, if the parent's legal rights to a child or youth have been terminated, they no longer have legal rights to continue to see her.



Even in these circumstances, there may be other family members, such as siblings or grandparents, that the child needs or wants to stay in contact with.

As a resource parent, your role is to help the child maintain the important connections in her life.



Meeting Day-to-Day Needs of Children and Youth in Your Home

- **Starting as a resource parent**
- **Pre-placement checklist**
- **Helping a child adjust to your home**
- **Keeping records**
- **Lifebooks**
- **Financial considerations and resources for resource parents**
- **Discipline**
- **Becoming an advocate**
- **Health care**
- **Educational needs of children and youth in foster care**
- **Preparing other kids in the family for becoming a resource family**
- **Preparing your relatives for your role as a resource parent**
- **What children and youth in foster care want you to know**
- **Your role in helping children and youth make transitions from foster care**

Starting as a Resource Parent

Once you have been approved for foster care and completed the pre-service training, you will be ready to welcome children and youth into your home.

Congratulations!

When CYFD calls and has a child or adolescent to place with you, you will need a lot of information to help you care for her and meet her needs. Resource parents often say that they wish they had asked more questions before accepting a child or youth into their home. While sometimes there are opportunities for the child to visit you before moving in, this is not always possible.

Even if you are providing kinship care to a child or youth that is related to you, you may not know everything you need to know about the child's needs, including medical care and schooling. It is appropriate and important for you to speak up and request the same information that unrelated resource parents would request when providing care for a child.

Remember that many times, children or youth enter foster care as a result of an emergency. In these situations, the agency may not have had the opportunity to obtain all of the information before making a placement. There are times when a small child is found alone (called "abandonment") and the agency may not even know her name or exact age. CYFD and the court will work to obtain this information. You should continue to ask questions until you are confident you have all information you need to effectively care for the child.

Often the children and youth themselves will be able to fill in some of the gaps.

Remember, all information you learn must be kept confidential.

Finally, you always have the right to say "No" to the placement of a particular child or youth in your home. Speak up if you feel concerned about your ability to provide for the child's safety and well-being, as well as ensure the safety and well-being of other children, youth, and family members in your home.

The checklist on the following pages provides some of the questions you may wish to ask about any child coming into your home.



Pre-Placement Checklist

Basic information

- Child/youth's name, age, date of birth, gender
- Child/youth's race, culture, language
- Are there special dietary restrictions?
- Child/youth's religion—will the child need access to special religious programs?
- What will make this child/youth feel most at home (food preferences, music, special blanket, stuffed animal, or routines)?
- What is most likely to comfort the child when upset or stressed?
- Child/youth's talents, hobbies, interests.

Family information

- Does the child/youth have any siblings?
- Where are they and how can this child/youth stay in contact with siblings?
- What are the expectations regarding visits—who will visit, how often, where will visits be?
- Are both parents involved with the child/youth, if not, why not?
- Are there issues between the parents I need to understand?
- Are there other relatives involved with the child/youth?
- Does either of the parents have a history of violence?
- Do parents have any special needs?

Health and development

- Does the child/youth have any allergies?
- Is the child/youth on any medications? If yes, for what and what are the instructions? Do you have an immediate and adequate supply?
- Does the child/youth require any special medical devices?
- Is there special food or dietary needs? Who is the child/youth's doctor and does the child/youth have any additional specialists?
- When was the child/youth's last doctor appointment?
- Are all immunizations current? Are there any health or religious concerns related to receiving immunizations?
- What about dental and eye appointments?
- Does the child/youth wear glasses and are they with her now?
- Is the child/youth developing appropriately for her age? If not, what concerns are there?
- What are the child/youth's eating, sleeping, and toileting habits?
- Has the youth been hospitalized in the past? Did the youth have any surgeries?

Information specific to infants

- What formula is the infant on? Has she started taking any other foods? What are her preferred feeding routines?
- Was there a positive toxicology screen or other conditions present at birth for this child?

- Were there any problems with the delivery or birth?
- What was the child's birth weight?
- Is the child eligible for WIC?
- Has the child received a developmental assessment and is she developing normally? If not, is she receiving special services to assist in overcoming developmental delays?

Information specific to adolescents

- Does this youth currently have a job?
- If not, is after-school or summer employment a goal or expectation?
- Does the youth have a driver's license? If so, what are the requirements around allowing driving?
- Is she receiving any independent living services?
- Is she sexually active? If so, is she using birth control? Does she understand safe sex practices and understand the difference between birth control and safe sex?
- What is her relationship with her child's other parent?
- Does the youth identify as LGBTQ?
- Is this youth a parent? If so, is she parenting the child, and if not, who is? If the youth is not raising her child, what arrangements exist for visitation and other involvement with the child?
- Does she smoke cigarettes?
- Are there any issues with alcohol or drugs?

Emotional/psychological needs

- Is the child/youth receiving counseling or therapy and will it continue?
- What are the most significant emotional challenges?
- Are there any special concerns about the behavior I need to be aware of?
- Has this child/youth been physically or sexually abused or routinely gone without basic needs (food, clothing, shelter)?
- Does the child/youth have any particular fears (i.e. of the dark, water, dogs, etc.)?
- Does bed-wetting occur?

Educational information

- What grade is the child/youth in?
- What school will the child/youth attend?
- If the child/youth is changing schools, have the records, including immunizations, been transferred?
- Does the child/youth have special education needs? If yes, is an Individual Education Plan (IEP) in place?
- May I have a copy of the IEP? (An IEP is a written plan for children receiving special education services through the schools.
- The plan is developed with the participation of the child or youth, her parents, the school, and others familiar with the child's educational needs. The plan includes specific goals and objectives and must be periodically reviewed and updated.)
- What are the names and contact information for important teachers, guidance counselors, coaches?

- Are there any other educational or school-related issues I need to be aware of?
- Is the child/youth involved in any extracurricular activities and if so, how can we arrange for these to continue?
- If in high school, is this youth preparing for post-secondary education—vocational school, college, etc.?
- Are there pending deadlines related to school applications, SATs or other tests, or financial aid that I need to be aware of?

Permanency planning and/or placement worker Information

- PPW or placement worker name and all contact information.
- How long has this PPW or placement worker known this child/youth?
- Supervisor name and all contact information.
- After hours and crisis contact policy and information.
- Child/youth’s attorney name and contact information.

Placement Information

- Is this the child/youth’s first foster care placement?
- Why is the child/youth coming into foster care?
- If not the first placement, why is the child/youth moving at this time?
- What has the child/youth been told and/or what does she understand about why she is being moved?
- How long and/or how many times has the child/youth been in foster care?
- What has the child/youth’s experience with foster care been like?

- May I speak to the previous resource parents?
- What is the current permanency plan for this child/youth?
- Does this child/youth have any special belongings or items of sentimental value?
- Does this child/youth have a Lifebook?
- Has the child/youth written their own “profile”— information she wants to be shared with my family about herself?
- What information about our family has the child/youth requested?



Helping a child adjust to your Home

When a child or youth comes into your home, she is adjusting to many changes and may also be coping with the effects of trauma-related to abuse, neglect, and separation from her parents and other family members. We will discuss the resource parent's role in helping children and youth with feelings and behaviors related to loss, grief, and anger.

However, when a child or youth first enters your home, they may still be experiencing a shock. They may also be overwhelmed by the sudden changes in their life and frightened at the prospect of coping with so many new people and situations. The better a resource parent understands the various emotional, verbal, and behavioral approaches children and youth may exhibit during this transition, the less likely the child will have to be moved yet again.

Here are some things you can do in the early days of a placement to help ease this adjustment period:

- Try to maintain as many of the routines the child is familiar with as possible. For example, maintain eating, sleeping, and other daily routines, allow them to wear their favorite clothing, or have photographs of loved ones at hand
- Be sure the child or youth has a place to keep personal and private things
- Be sure that the rules and expectations in your home are clear. One approach may be to post written rules in a common area (bulletin board, refrigerator) and to review them from time to time
- Give the child opportunities to talk, without prying
- Speak of the child's family using positive language and support and reinforce her relationship with family members
- Expect and allow for regression in



developmental tasks and behaviors. For example, a toddler that was toilet trained may revert to needing diapers; a preadolescent may begin sucking her thumb

- Show personal interest in each child. Try to draw out and encourage participation in her hobbies, favorite activities, television shows, music, games, books, and provide opportunities to do the things she enjoys and does well
- Be conscious of how your family routines may appear to the child, some behaviors can be misinterpreted by people that are new to your family
- If a child has a history of sexual abuse, be particularly careful about displays of affection, or assistance with personal hygiene. Touching that would be perfectly innocent or normal in most circumstances can be frightening or misinterpreted to a child that has been

sexually abused. Talk to your PPW and/or placement worker about appropriate safeguards for your child. For example, it may not be appropriate to bathe two children together

- Maintain ties to the child's culture, neighborhood, community, religion, friends, peers, and other important linkages in her life through social activities and telephone contact
- Help familiarize the child with your neighborhood and community
- Include the child in family outings and activities and begin to include her photographs with other photo displays in your home
- As soon as possible, demonstrate trust by allowing older, responsible youth to have a key to the house
- Treat your foster child like other children in your home. Do not distinguish
- Start, contribute and keep a Lifebook up to date. (A description of life books can be found in the next section.)

Keeping records/journal

As a resource parent, one of your roles is to keep the parents, the placement worker, and the courts informed about the child's development, progress, needs, activities, and challenges. Keeping clear records will make it easier to provide complete and accurate information when it is needed.

Some of the things you will want to keep records and notes about include:

- Achievements, successes, and celebrations
- School progress, grades, meetings, and behaviors
- Medical appointments, medications, injuries, and illnesses
- Court hearings and what happened at each hearing



- Contacts with the family, including both parents, siblings, and extended family
- Contacts with your permanency planning worker and/or placement worker, and any other service provider
- Unusual, new, or changed behavior patterns or fears
- Any other information you feel may be relevant.

Your time is precious and keeping records may seem like an added burden. Here are a few tips that may help make it easier to keep the information without demanding a lot of extra time:

- Keep a journal with you for jotting things down as they occur rather than waiting until you get a quiet time and space
- Make notes directly into your appointment calendar
- Keep a three-ring binder for each youth in your care, and use pocket-folder inserts to collect papers and forms from schools, doctors, therapists, etc.

Lifebooks

Many people enjoy looking at pictures from their childhood and family experiences through the years. Sharing pictures leads to sharing stories and through this process we gain a sense of connection to our roots. Without these pictures and stories, we might feel disconnected and lost. Children in foster care need links that help them to connect their past, present, and future. A Lifebook is one tool that can help provide these links.

A Lifebook is like an expanded version of a child's photo album and history. It is an account of her life conveyed in words and pictures. It is both a privilege and a responsibility for resource parents to help create or build upon the life books of the foster children in their homes.

A Lifebook gives the child something unique that is part of her and that she can turn to when in need of reassurance or understanding and also serve as an ongoing, continuous record that links the various changes, moves, and people that have been part of her life. The book provides graphic evidence of being cared for and says: "You and what you do are valuable."

A Lifebook can also help a child prepare for the process of moving towards permanence. It provides a tool for open communication and sharing between the resource parent and child or youth, which can also be shared with family and/or adoptive family members in the future.

What to Include in a Lifebook

If your foster child does not already have a Lifebook started, you can begin one for her. While each book will be different, reflecting the unique history of a child's life, most Lifebook's include:

- Birth information
- Child's "family tree" including names, addresses (if known) and physical descriptions of parents, some

descriptions of their personalities, special talents, educational background, information on the child's siblings, aunts, uncles, grandparents, and other relatives

- Placement record including names, addresses, and dates of all foster and other placements the child has experienced
- Educational history: All schools attended including dates and grades
- Medical history including immunizations
- Names and addresses of all social service agencies and case managers involved with the child and/or her family
- Letters, mementos from parents or relatives
- Birthday and holiday cards
- Pictures of the child at various ages. Photos from and of family and/or resource families. Pictures of any other significant people in her life, including resource or extended family members
- Photos of friends, houses lived in and schools attended over the years
- Drawings or schoolwork by the child over the years
- Award certificates or certificates of participation or completion (i.e. Little League, Church Choir, etc.)

Be sure that Lifebook always goes with the child. If the child leaves or moves from your home the Lifebook goes with the child.

Financial Considerations and Resources for Resource Parents

Resource parents are responsible for providing all of the child's daily living needs, including food, shelter, clothing, transportation, and other normal expenses.

Remember, always discuss any questions or concerns you have about your financial needs, as you provide care to children and youth in your home, with your placement worker.

There are many financial resources to help you meet the needs of foster children in your care. Contact information, including phone numbers and websites for all of the agencies mentioned here, are included in the resource directory at the end of this handbook.

FOSTER CARE REIMBURSEMENT

The foster care reimbursement is provided to you for the care of the child. Provider agencies usually issue checks monthly. The amount is based on the child's age and the level of care approved for a particular child or youth.

CLOTHING

An initial clothing allowance for a child or youth can be requested only once. Ask your placement worker about CYFD's reimbursement policy. After that, it is your responsibility to provide seasonal and age-appropriate clothing with the foster care payment you receive.

MEDICAL COVERAGE

All children in New Mexico foster care receive medical coverage through Medical Assistance. You should receive the child's Medical Assistance card and information when they are placed in your home. Be sure to follow up if you do not receive this information immediately when the child is placed in your home.

When possible, maintaining the child in the same HMO and Primary Care Physician is beneficial to the child and family.

BEHAVIORAL HEALTH SERVICES

Services including mental health, mental disability, and drug and alcohol treatment are provided to children and youth in foster care in New Mexico through Community Behavioral Health (CBH) and similar providers in other areas. CBH assists CYFD in accessing appropriate services for children and youth as they enter care, which means a child should already be connected to such services before entering your home unless you are receiving an emergency placement. Resource parents should work with the placement worker to arrange behavioral health evaluations, assessments, treatment options, and medications. The placement worker has primary responsibility for working with youth and resource parents to ensure that the behavioral health needs of children are addressed in a timely and developmentally appropriate manner.

TRANSPORTATION

Routine transportation costs are the responsibility of the resource parent and are factored into the monthly foster care payment. If you expect to incur extraordinary or special transportation costs, seek approval and make arrangements for reimbursement through your placement worker.

CHILD CARE

Foster children should be eligible for state subsidies to assist with child care expenses and in some cases, CYFD provides interim subsidies for foster children. Head Start programs are also available at no cost for young children in foster care. Your placement worker can help you explore these options and ensure you receive subsidies for which you are eligible. Got to smececd.org/child-care-assistance/ for more information.

WIC

Visit www.nmwic.org or call 1-866-867-3124 for more information on WIC. This

program provides supplemental foods, infant formulas, nutrition education, and some types of health care.

SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)

Your household may be eligible for SNAP in addition to your foster care reimbursement. SNAP is provided through the United States Department of Agriculture, and current policy gives resource parents the option of including foster children and foster care payments or not when making eligibility determinations.

Be sure to discuss these provisions with a SNAP case manager when you apply or modify your application, in case your decision has an impact on the benefits you or other family members receive.

SCHOOL LUNCH PROGRAM

All children in foster care are eligible for free or reduced lunch rates. There is a space on the School Lunch Application to indicate that the child is in foster care. Be sure to mark this box when completing the child's school lunch program application.

<https://webnew.ped.state.nm.us/bureaus/student-success-wellness/nutrition/>

EARLY INTERVENTION AND OTHER PROGRAMS FOR CHILDREN WITH DISABILITIES

Foster children age five and younger with developmental delays (i.e. children who are not able to do things, other children of the same age can do) are eligible for early intervention services at no cost. The program provides a range of services to help children overcome delays. Foster children are underrepresented in early intervention programs, despite their greater likelihood of needing them. If you suspect a child has delays, ask your permanency planning or placement worker to refer your child to early childhood intervention programs.

INDEPENDENT LIVING SERVICES

Teenagers in your care may benefit from extra help and support in gaining the skills they will need for living as young adults once they leave foster care. The CYFD Youth Services Bureau can help with

employment, collegiate and Career Technical Education applications, and other needs. Eligible youth must be between 14 and 21 years of age and be in, or have been in, out-of-home placement at the age of 14.

FINANCIAL AID FOR COLLEGE OR CAREER TECHNICAL EDUCATION (CTE)

High school or GED graduates can access a variety of funds for tuition and fees at approved schools and training programs. All youth seeking financial assistance must complete a Free Application for Student Financial Aid (FASFA) and indicate their status as a ward of the court, which the forms use to describe their foster care status. Resource parent financial information should not be reported on the FASFA. Several grants and scholarships are available specifically for youth in out-of-home care. Financial concerns should not be a deterrent for youth wishing to pursue post-high school education or training, particularly if a youth enrolls as a commuter student at a state-funded institution of higher learning.

VOCATIONAL REHABILITATION

Youth with special needs approaching completion of high school are eligible for services through the NM Department of Vocational Rehabilitation (DVR).

This is not an exhaustive list. There are many other resources in the community to support children, youth, and families ranging from after-school programs and summer camps, to respite care or help with heating bills and housing to youth employment or college financial aid.

When you seek out resources, not only will the child benefit while in foster care, but you will begin to create the foundation of support she will need when she returns home or transitions into another permanent family. Talk to other resource parents, check out the resources suggested here, and always be alert and aware of community services and opportunities that may benefit the child in your care.

Discipline

Corporal punishment of foster children is NOT permitted. Corporal and other types of punishment that are NOT allowed can include—but are not limited to—any of the following types of punishments:

- Spanking, slapping, or other forms of hitting with hands or any other instruments
- Any form of punishment that inflicts pain
- Use of restraints or isolating a child in a closet or other inappropriate space
- Denial of meals or other basic needs
- Verbal abuse or ridicule, or threats of removal from the home
- Denial of planned visits, phone calls, or other contacts with family members
- Assignment of excessive or inappropriate chores or work
- Punishment for bed-wetting or actions relating to toilet training
- Allowing children to discipline other children
- Denial of any component of the child's individual case plan.

For helpful strategies around discipline and structure for youth, consult with your permanency worker and/or placement worker.

Becoming an advocate

One of the best ways you can help yourself and the children or youth placed in your home is by developing advocacy skills. You are your own best advocate and you will have a special responsibility to become the child's primary advocate as well. You also have an important role in helping children and youth become effective self-advocates. One way to develop advocacy skills is to join with other resource parents.

- Ask lots of questions and be as informed as possible about the youth in your care, their needs, the process and procedures you must follow, and the services you and they are assessing
- Build positive, professional relationships with the other members of the youth's team. Be respectful; be clear and pleasant when speaking to others. Learn names and communicate often with the other partners in the child's life
- Be organized. Keep good records, keep a log of phone calls, keep copies for yourself of all materials, forms, documents, reports, etc.
- Be available. Always return phone calls, and keep appointments. If you must miss an appointment, call ahead to reschedule. If an emergency prevents this, call as soon afterward as possible
- Avoid an "us" versus "them" way of thinking. Always try to view yourself and others as part of the same team—the team that is working to achieve safety, timely permanency, and stable, healthy life for youth



- Be persistent when seeking services, assessments, or benefits you believe a child in your care needs and is entitled to. Urge, insist, and persist; don't easily settle for "no"
- Learn about policies and procedures related to the youth's care and your rights and responsibilities.

Health care

All children in foster care are eligible for Medicaid, a federal- and state-funded medical and health care assistance program.

As a resource parent, you have an important role in helping children and youth to become healthy and to stay healthy, and ensuring that their health care needs are met. Among your responsibilities:

- Make sure that all available health information is provided to the child's health care providers
- Participate by providing your observations and input about the child/youth's health care issues. This will assist the child/youth herself, her family, and /or potential permanent caregivers
- Make certain that the child/youth gets to all scheduled health care appointments
- Work with bio parents at all medical appointments.

Schedule of health care visits

New Mexico state foster care regulations require that all children and youth in foster care receive a thorough physical exam within 30 days of placement into care. Children must also have a dental exam at that same time. After these initial exams, children must continue to have physical exams once per year and dental exams once every six months. Infants up to 24 months must be seen by a doctor on a more frequent schedule—once every six weeks for the first six months of life, and



once every three months from seven to 24 months. Of course, children in foster care must also be taken to the doctor whenever there is a need for treatment of an illness or injury. Adolescents in foster care should also have access to appropriate gynecological and reproductive health care services. All of these health visits must be documented for the case file.

Also, children in foster care must receive an EPSDT screening (Early, Periodic Screening, Diagnosis, and Treatment), which are screenings for physical and mental development required by Medicaid regularly. Follow-up treatments indicated by any diagnoses resulting from these screenings are also required.

Be sure to talk to both the permanency worker and doctor to ensure that the child is receiving all of these screenings and the appropriate treatment and care that results from the screenings.

Because the youth's parents have important information about her medical history, whenever possible, they should continue to be involved in their child's health care, including attending medical appointments, along with the resource parent. It may also be appropriate and helpful to include prospective adoptive parents or prospective permanent legal guardians in medical appointments, especially as the time approaches to transition a child to their new, permanent family.

Early intervention

It is important to be particularly aware of medical or psycho-social conditions affecting very young children, which may require early intervention services.

Physical/medical conditions include:

- History of admission to a Neonatal Intensive Care Unit (NICU)
- Failure to thrive (FTT)
- Cerebral palsy
- Progressive neurological disorder
- Down or other syndromes typically associated with developmental delays
- Other complex health care needs may have required multiple and/or lengthy hospital stays
- Technology-dependent infants and toddlers.

Social-emotional conditions include:

- Appears to be emotionally withdrawn
- Lethargic
- Flat emotional presentation (never happy or angry)
- Caregivers report toddler has feeding problems; for example, shoves food in their mouths to point of choking, is never full, hoards food



- Has frequent nightmares
- Is fearful
- Often irritable
- Presents with sexualized behaviors.

Early intervention services are provided, in addition to health and social services, to help support children's healthy development and school readiness, and prevent learning and behavioral health problems.

Educational needs of children and youth in foster care

Educating children and youth in foster care is a shared responsibility between the child/youth's family, resource parents, CYFD, and the schools. Studies have shown that children and youth in foster care have many unique challenges as they make their way through the school system, which has resulted in poorer academic outcomes. Besides, between 30-40 percent of all children and youth in foster care receive special education services. Thus, helping the foster children in your home to become successful in school is one of your most important responsibilities.

Resource parent responsibilities related to a child's education

Resource parents are responsible for ensuring that children and youth in foster care attend school every day, arrive on time, dress appropriately, and have arrangements made for lunch.

You are also responsible for regular communication with the school, providing appropriate school and homework supplies, assisting with homework, and encouraging the child to focus and succeed. The child's family retains the right and responsibility to sign all educational documents, including Individualized Educational Plans (IEPs).

Youth, particularly those over the age of 14, are also expected to participate in the development and implementation of their IEPs. If the parents are not available or unwilling to participate, the resource parent becomes the education decision-maker and can sign educational documents.

Tips for your involvement in the child's education

- Become active in the school by participating in the Parent Teacher or Home-School Association, attending parent nights and other events, getting to know all of the teachers and other school personnel
- Provide positive encouragement for school accomplishments. Post papers, offer praise, share progress with parents

- Provide a comfortable, well-supplied, and well-lit space for children and youth to complete homework assignments
- Observe efforts to complete school assignments, and if you suspect special educational needs that are not being met, alert the Permanency Planning Worker and work together to develop a plan to address these issues. Such a plan may include assessments, special education planning, tutoring, after school or summer educational programs
- If adoption or permanent legal guardianship is the permanency plan, include these potential parents in school activities during the period of transition to a new home
- Become knowledgeable about post-secondary education options for older youth including college, vocational schools, and school-to-work programs. Stay abreast of application and financial aid deadlines and help arrange campus tours, interviews, and other important steps in this process. CYFD's Fostering Connections Bureau can provide an array of services to help foster youth transition to post-secondary school and independence
- Provide accurate and relevant information to the parent and teachers as it relates to school progress and educational needs.



Preparing other kids in the home for becoming a resource family

Here are a few tips on preparing children already in the family for the arrival of new foster children into the home.

- Start reading books together about foster care
- Find out what fears your child may have about the new children coming into the home. For example, children may worry that you will place them into foster care, that they will lose their special time with you, or that they will have to give up their room. These are real issues that you must address with each child individually
- Respect each child's need for some private space. If they cannot each have their room, then make sure they each get some special private space such as a footlocker that locks or a shelf in a closet
- Let them create their own version of a Lifebook.



Preparing relatives for your role as a resource parent

- Be honest about your plans, your motivations, and your expectations
- Although it may be hard to do, consider asking for, and genuinely listening to, the advice of extended family members
- Include extended family members, if possible, in your preparation for resource parenting
- Sometimes problems occur within families when grandparents and other extended family members do not have time to process their feelings and are suddenly thrust into a new role as grandparents of a child not biologically related to them. Just as you need time to prepare, so do they. Don't assume a first reaction is a final one. Reading about the issues and looking at pictures of real resource families can help ease them into their new role
- Encourage grandparents and others to attend resource parent support group meetings and conferences, picnics, or other gatherings where they will be able to see and interact with (or just sit back and quietly observe) other resource families
- If you are part of a support group, consider sponsoring a "Grandparents' Night"
- Discuss foster care terminology and confidentiality
- Remember, the child has an extended family too. Include grandparents and other relatives in your extended family circle.



Your role in helping children and youth make transitions from foster care

Resource parents can contribute to the successful transitions of children and youth from foster care. Moving from a foster home is often emotionally difficult for the child or youth and they will need support to get through it. It can also be a difficult time for resource parents, their families, and their friends. When a child is moving you can help by:

- Talking with the child or youth about all the plans and specific steps involved in the move
- Involving the child and her parents, prospective adoptive parents, kin, or other caregivers in planning how the move will occur
- Explaining the details of any court appearances during the transition time
- Communicating with the placement worker, parents, and caregivers about how the child or youth is handling the upcoming move
- Planning a special way to celebrate the time the child was with the resource family.
- Updating the Lifebook to include information and pictures of your home
- Preparing for grieving behaviors in the child or youth, as well as in other members of your family
- Speaking positively about the family or placement to which the child is moving
- Sharing educational information such as any issues or concerns, progress, milestones, and concrete transition plans for educational stability and continuity.

What children and youth in foster care want you to know

Foster youth who have been interviewed about their experiences expressed the following:

There is a lack of stability in our lives.

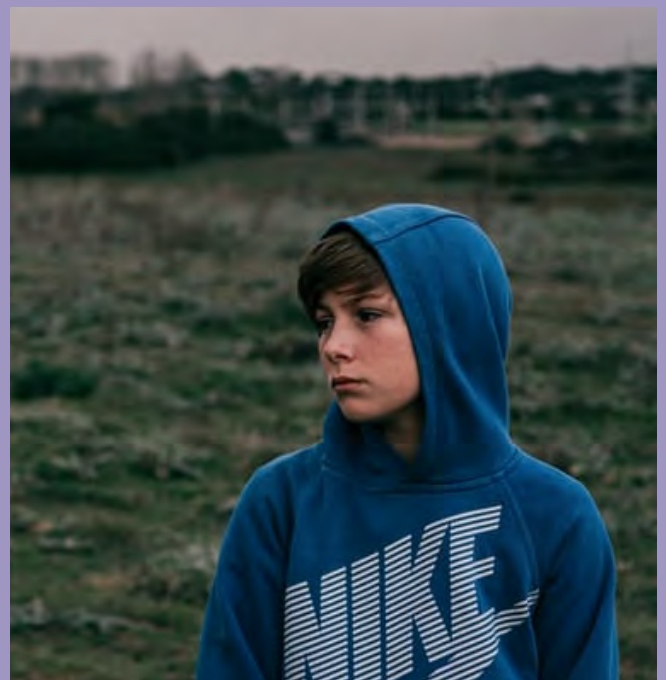
Some of our experiences are:

- Changing foster homes unexpectedly
- Changing schools constantly.
- Always losing friends and needing to make new ones
- Having to adapt to new communities
- Having to adapt to new environments.
- Always getting new caseworkers
- Always getting new therapists.

Here is what we ask:

- If we have to move, tell us why
- Don't let resource parents pack our stuff without our permission
- Resource parents need better training including listening to other foster youth. Foster youth could help train resource parents
- Don't let resource families tell other people, even relatives, about our background or the things they read in our file
- Don't read our files and think you know us
- We need to be more involved in all the decisions affecting our lives
- Inform us of our rights; about our case; of our court dates and the purpose of each hearing; who our attorney is and how to reach them

- Communicate with us. There needs to be better communication between foster youth, resource parents, and case managers
- Train teachers and counselors about foster care
- Let me practice my religion, no matter what it is
- Help us stay in touch with our family and siblings
- Help us with our problems; don't just medicate us
- Give us more positive encouragement; stress what can be done and help us do it
- Treat us like you'd treat your children
- Treat us with respect, like we are of importance
- Respect our cultural and family values
- Don't expect us to be perfect
- Encourage our goals, no matter how idealistic they may seem
- Don't assume anything is unrealistic
- **Foster our dreams.**



Fostering Connections (Extended Foster Care)

Beginning in 2020, CYFD implemented the Fostering Connections program. This program provides ongoing support to youth and young adults in foster care as they transition to adulthood.

The Fostering Connections program strives to eliminate homelessness among youth aging out of foster care by connecting them to safe and stable housing, as well as behavioral health services so they may continue to heal from trauma. This ongoing support provides young adults more time to grow up and “fail safely” by surrounding them with supportive adults who can help them build the knowledge, awareness, and skills needed for a successful transition to adulthood.

One of the key components of the Fostering Connections program is the Voluntary Services and Support Agreement, or VSSA. In order to receive a monthly foster care maintenance payment and access other program supports, the young adult must be eligible and agree to opt in to the program. Although some young people choose to live with a resource family or adoptive family after turning 18, many others elect to live somewhat independently in their own home or apartment while still benefiting from ongoing supports to reach their goals. Because the program is voluntary, the young adult may choose to terminate their participation at any time.

The Fostering Connections program ends on a young person’s 21st birthday, at which time a discharge hearing is heard by the court, and a final transition plan is required.

Prospective participation in Fostering Connections is considered long before a youth turns 18. Beginning at age 14, youth start working with the Fostering Connections Bureau to develop a Life Skills Plan and start thinking about their future. There must be a legal finding by age 16 ½ that a youth has been notified about



the Fostering Connections program. At age 17, planning for participation in the program continues, as goals for the youth across all life domains are drafted and reviewed in collaboration with the youth. The VSSA is created about 6 months before the youth turns 18.

As a resource parent to an older youth in foster care, you can be an essential part of the planning team along with the Fostering Connections staff and the youth herself. Maintaining relationships with young adults who go on to more independent living situations is a wonderful way to support their growth, self-confidence, and success.



Your Role as a Resource Parent in Special Situations

- **Parenting a youth with special medical needs or disabilities**
- **Parenting a youth with special emotional or behavioral health needs**
- **Parenting a youth who is racially or ethnically different from you**
- **Parenting a youth with issues related to sexual orientation/ gender identity**
- **Parenting youth as they prepare for adulthood**

It is always the goal to ensure foster youth are able to lead healthy, happy lives and go on to be successful, productive adults. However, many youth in substitute care are unable to meet these goals easily. A vast body of research indicates that foster care children and youth are more likely than youth in the general population to live with mental, developmental, emotional, learning, and physical disabilities.

For example, it is estimated that 30-40 percent of foster youth are in the special education system, and one California study found that almost one in ten children and youth in substitute care had some type of physical impairment.

It is important to work with your foster child's caseworker, attorney, teachers, medical providers, and family members in the event that the child has special needs. CYFD is committed to providing necessary training or support to resource parents who are caring for children with these needs.

Parenting a youth with special medical needs or disabilities

This will include youth with a variety of actual or potentially disabling conditions. A recent study indicates that there are about 10 million children in the United States with chronic health care conditions and about 4 million of them have a health condition that interferes with normal childhood activity.

In becoming a resource parent, the agency may ask you if you are willing to take a child with special health care needs or disabilities. Before responding, here are some things to think about:

- There are special needs that each one of us can easily handle, some that we can learn to handle, and some that we are not suited to handle. The key is figuring out which is which
- The special needs you may be suited to handling are conditions you are familiar with or have experienced in your own home or family or workplace. For example, you may have had a relative who had asthma as a child, or who needed a leg brace to walk. You may know



individuals who are deaf or learning disabled. Make a list of all the medical conditions and disabilities you have some experience with. You might be surprised how long your list is!

- Read about some of the conditions you think you could learn to cope with and to incorporate into your family routine. Can your home, for example, be made wheelchair accessible? Your bathroom?

Common conditions children in foster care may present

Workers use different medical and psychological terms as they discuss the needs of specific children and youth in your care. Look them up, read about them, and ask your family doctor and other resource parents about them. The more you learn, the less intimidating the condition may sound.

A short list of the most common conditions and/or disabilities among children and youth in foster care include:

- Developmental delays or lags
- Fetal alcohol exposure
- Pre-natal drug exposure
- Down's Syndrome
- Cerebral Palsy
- Speech delays and disabilities
- Hearing and vision problems
- Allergies, asthma, and related difficulties
- Birth defects correctable with surgery
- Enuresis (bed-wetting) or encopresis (soiling)

It is important to be comfortable dealing with the medical community, as well as learning to care for a child in the home setting when you have a child with special health needs or disabilities in your home. Your role may also include teaching the



child's parents how to care for these special needs in preparation for reunification. If the child is to be adopted by a family other than yours or moved to the home of a permanent legal custodian, you may play a similar role, teaching and mentoring the new family in caring for this child's unique needs. Finally, as children grow older, they will need help learning how to manage their own health care needs.

Working with the medical community

When a child with special physical or medical needs comes into your home, you will want to ask some basic questions, including:

- How are current health needs being met?
- Are all health needs identified?
- Who are the current providers, and will the child have to change providers?
- Is the medical coverage in place and activated?

- To what extent is the child or youth active in caring for her own health needs?
- What services related to the special needs are already in place? Are there other services needed?
- Does the child or youth receive services through the New Mexico Department of Health (DOH) Developmental Disabilities Supports Division (DDSD) or disability benefits through Supplemental Security Income (SSI)? Will she be eligible for these services or supports when returning home or moving into a permanent family?

Advocating for the child

Know how to find providers and access services in your community and make a list of resources that help parents of children with special needs. Consider parent-to-parent organizations (organizations run by parents which provide support,

information, and mentoring), as well as any that are disability-specific, or those that are offered by the city, county, or state agencies, churches, schools, hospitals, etc.

On the Internet: There are many resources for parents of children with special needs on the Internet. A good place to start is the helpful site, www.newmexicokids.org/home/special-needsdisabilities

In addition to locating resources, you will need to develop your advocacy skills. Some of the steps include:

- Build relationships and develop professionalism. You want to build partnering relationships and communicate as peers with professional service providers. These relationships will be of great value over time.
- Be organized and accessible. Many resource parents keep logs or journals



or notebooks with all of the medical and educational information related to the child and the providers involved. Several organizations, including New Mexico Kids Matter (www.nmkidsmatter.org), have examples of these notebooks and may be able to help you develop your own.

Caring for the child in your home

There are several special considerations when caring for a child or adolescent with special physical or medical needs in your home.

- Be sure you know how to use any special equipment she has and whom to call in case of a malfunction or other equipment problems
- Learn how to administer any medications she receives, and learn who is allowed to administer them. For example, in most cases, you will not be able to allow another child, even a responsible older teenager, to give medications to a child



- Be aware of how the medical condition affects nighttime care and sleep routines. Will someone need to check on the child during the night?
- Be aware of any food or dietary restrictions the child has and be sure that anyone who may offer meals or snacks to her understands these issues
- Discuss the child's special needs with her and other members of the family and help them develop responses to questions they might receive at school, church, or in the community.

Supporting a youth living with special needs

Children and youth with special needs may be fearful of or have concerns or questions about doctors or hospitals and may need preparation and support for coping with medical appointments and procedures. You can work with the placement worker, parents, and/or therapists to help prepare youth for each doctor or hospital visit.

Some of the more common fears children experience are:

- Separation from parents, siblings, and home environment while receiving medical care
- Pain
- The doctor's mannerisms may be scary
- The unknown
- Guilt ("*I caused my illness*")

Also, adolescents may have some of the following concerns:

- Being talked down to or treated disrespectfully by medical professionals
- Loss of privacy
- Missing school, work, or extracurricular activities for medical reasons
- Impact of medical challenges on developing sexuality and relationships



- Managing medical needs when on a job, traveling away from home, or at college.

There are many ways resource parents can help youth through these fears, including:

- Explain the purpose of all visits and/or interventions
- Address any guilty feelings the child may have. Let them know that what they are experiencing is not caused by anything they did or forgot to do
- Acquaint the youth with others who have the same or similar conditions
- Tell the child what to expect. If age-appropriate and helpful, considering using role-play, doll play, or books
- Involve the youth in the process ahead of time by gathering information to bring to a doctor, writing out questions to ask doctor, taking a tour of medical facilities, etc.

- Teach the youth specific self-care and health care management skills so she can have confidence when away from home
- Include the youth respectfully in all conversations and decision-making when meeting with doctors and other medical providers
- Teach the youth in your care how to access health insurance, make appointments, locate specialists and obtain prescriptions.

Older youth with special needs

When a youth with special needs approaches his or her late teens, there are services within the adult world that may become available. If you are caring for a youth with special needs who is 14 or older, there are some special things to be aware of:

- The child's IEP (Individual Education Plan) must address "transitional" needs; that is, the special preparation this youth may need for becoming independent and self-sufficient in the future
- The NM Department of Vocational Rehabilitation Services can become a resource for the youth in planning for college, vocational school, or work
- The youth should begin to take an active role in caring for her own health care needs, including knowing how to administer her medications, care for equipment, and even schedule appointments

Parenting a youth with special emotional or behavioral health needs

Many of the same issues, questions, and challenges related to caring for a youth with special medical or physical needs also apply to caring for a child or youth with special emotional or behavioral health care needs. Some common emotional or behavioral challenges that youth in foster

care may have include:

- Attention Deficit Hyperactivity Disorder (ADHD)
- Attachment Disorder (AD)
- Oppositional-Defiant Disorder (ODD)
- Depression or other mood disorders
- Anxiety disorders
- Post-Traumatic Stress Disorder (PTSD)
- Acting out associated with previous sexual abuse
- Chronic lying, stealing, or violence
- Risk factors for other mental illnesses

Youth with these special needs will not “look” different than other children and youth—they are not in wheelchairs, nor do they use tubes for feeding. Visible cues that they have any special needs at all may be subtle or non-existent.

Factors that can cause or contribute to emotional or behavioral health needs include:

- A history of abuse—physical, sexual, or verbal/psychological
- Attachment disorders
- Severe grief reactions to the separation from or loss of family
- Psychiatric/chemical disorders
- A history of neglect—routinely or consistently being deprived of basic needs
- Emotional deprivation

Every youth comes into a “new” family with a certain amount of baggage: rejection, loss, grief, identity issues, etc. As she “settles” into the foster family, some of these issues will be best worked through within the family over time, while others will require additional, outside help.

How can you know when such help is needed? While some children and youth may come into your home with previously identified special emotional or behavioral needs, in other cases, the resource parent may be the first person to become aware of and identify these issues and the need for help or therapeutic intervention.

With intervention, many problems can be worked through and resolved healthily. Without such help, children and youth grow up under the burden of this “baggage” and may be subject to a higher risk status of developing lifelong problems such as substance abuse, severe emotional challenges, or even criminal behavior. The preventive steps we take now can reap significant benefits for their future.



Red flags

Following is a list of possible “red flags” that may indicate a need for outside resources.

Please keep in mind that all youth are likely to display some of these indicators at various times. The need for intervention is more likely if the child or youth displays several at once, or some over longer periods.

Things that happened to the child/youth:

- Severe illness or forced separation from primary caregivers in the first three years of life
- Neglect of physical needs, especially during the first two years of life
- Physical abuse at any time, but especially during the first two years
- Sexual encounters of any kind during childhood
- A child witnessed traumatic events, domestic violence, alcoholic or drug-addicted parents, a parental death, a sibling death, a destructive fire, etc.
- The child was forced to participate in a church or group that practices frightening rituals, animal sacrifices, etc.
- The child was left alone for long periods
- The child was locked up.

Behaviors a youth may exhibit:

- Indiscriminately (physically) affectionate
- Refusal or fear of appropriate affection with parents
- Excessive clinging on, need for physical affection or attention
- Preoccupation with bodily functions, especially vomit, bleeding, urination, and defecation or sexual functions



- Exhibiting sexually aggressive behaviors, coercing others into sexual activity
- Destructive to self, others, animals, material things
- Lack of impulse controls, short attention span, hyperactivity
- Difficulty and/or obsession with food, overeating, bingeing, refusal to eat, abnormal eating patterns, etc.
- Preoccupation with images of death, violence, and gory, graphic details
- Inability to discriminate between lies and realities and/or telling of crazy, obvious, or outrageous lies
- Experiencing hallucinations, delusions, hearing voices, or other bizarre behaviors
- Extreme difficulty with forming peer friendships
- Frequent bursts of seemingly unexplained anger.
- Expressing thoughts, feelings, or behaviors related to suicide
- Expressing thoughts, feelings, or behaviors related to causing serious injury or death to others.

Contact your placement worker if you notice any of these red flags.

Parenting a youth who is racially or ethnically different From you

As a resource parent, you may be called upon to parent a child or youth who is racially or ethnically different from you. While in many ways, day to day life with this youth will be no different than with any other, we live in a society that is often deeply divided by issues of race, and we need to be aware of the impact of these social messages on our views and on the children and youth we care for. As a resource parent, you will want to help each youth in your home feel comfortable with and proud of her heritage, while also being tolerant and accepting of others.

How will trans-racial or trans-ethnic parenting change your family?

Here are some questions to consider:

- What does becoming a trans-racial or trans-ethnic family mean to you?
- How does your extended family feel about people of different races?
- Describe your current personal inks and connections with specific communities, racial, ethnic, or religious communities, Include your network of friends, neighbors in your workplace, social life, church, etc.
- How will you expand upon these links and connections to meet the needs of children and youth in your care?
- What do you anticipate being the greatest challenge a youth who is racially or ethnically different from you will face in your home? In your neighborhood? How can you help them cope with these challenges?
- What resources do you anticipate needing to be better equipped to parent a youth, not of your race or ethnicity? What provisions have you made to locate and obtain these resources?
- What benefits and advantages do you



enjoy in your community due to your race or culture that a child or youth of a different race or culture may not enjoy?

- What stereotypes or prejudices are you aware of that you struggle with? How did these come about? What have you done to “check out” the basis for these stereotypes? How do these prejudices affect your life and decision-making?
- Would you have dated a person outside of your race or culture? Would you have married a person outside of your race or culture? Why or why not?

Development of identity and self-esteem in children and youth

Parenting a child or youth whose racial and/or ethnic background is different from one or both resource parents presents a variety of issues at different stages of development. Here we discuss some of the issues that might arise at various developmental stages as they relate to racial identity and building of self-esteem.

Pre-school years

- The people that the child looks up to and spends the most time with look different from her. It will be natural for her to want to resemble those people she loves. Comments such as “When I grow up, I will have blond hair like yours” are not uncommon
- Think about ways that you and the child can look alike perhaps by some special item of clothing, purse, shoes, or even hairstyles
- Provide toys and books that represent

people from diverse backgrounds or their birth background.

School-age years

- The child will need help understanding her heritage and background
- She needs to be able to begin to develop a response to the question “Who Am I?”
- Celebrate all cultures within the family
- Point out ways that your backgrounds are similar as well as different
- Acknowledge the prejudices the child faces. Share in the feelings prejudice produces. Do not brush these feelings aside
- Teach problem-solving skills and techniques
- Provide regular opportunities for the child to be among people who do look like, or talk like she does—consider school, church, recreational activities, etc.



Adolescence

- This is an intense time of figuring out “Who Am I?” Curiosity about racial identity and background may become stronger, particularly if she has not had the opportunity to know one parent (often the father) or the extended family representing one side of their heritage
- Dating issues arise. Look at your community and circle of friends—how many of the people you associate with would wholeheartedly accept your son or daughter dating theirs?
- Teens may develop a new or renewed interest in their native land, language, or become involved with a very culturally specific group, change the way they dress, the name they wish to be called, etc.
- It is especially critical to provide adolescents with mentors, role models, and other opportunities to be among people with the same racial or ethnic background as their own. Ask your placement worker how this might be best accomplished



Parenting a youth with issues related to sexual/gender orientation

No one knows precisely how many lesbian, gay, bisexual, transgender, or questioning (LGBTQ) youth are in the foster care system, although studies indicate that these youth may make up approximately 10 percent of all youth in foster care in urban areas in New Mexico. Many of these youth endure further harassment or abuse related to their sexual orientation or gender identity after being placed in foster care. As a result, they are at high risk for serious emotional challenges as well as for running away.

While many LGBTQ youths enter foster care for reasons of neglect or abuse similar to other youth in foster care, others enter care specifically because of their sexual orientation or gender identity issues. They may have been forced to leave their homes as a result of conflict over identity or behavior. Or, they may enter the system as a result of problems in school stemming from harassment and discrimination faced there.

As a resource parent, it is important to ensure that all children and youth in your home are both physically and emotionally safe and protected from harassment and discrimination.

Understanding sexual orientation

Sexual orientation refers to a person's sense of self-identity and sexual attraction to members of other, the same or both sexes. Research indicates that there is a continuum of sexual orientation, with some individuals exclusively attracted to members of the opposite sex, some exclusively attracted to members of the same sex, and some in between, attracted to members of both sexes.

Learning about, exploring, and awakening to sexual feelings are all a normal part of adolescent development.



It is also normal for youth to question their own sexual identity and orientation during this period of development and perhaps to experiment with different sexual behaviors. Besides, youth who have experienced abuse or neglect may have specific sexual questions, confusion, or fears. It is important to be supportive and understanding of youth who are going through this often scary developmental stage. Youth who are questioning their sexual identity, or beginning to recognize feelings of attraction to members of the same sex, may need to be provided with caring and competent therapists who can help them to feel safe and protected as they seek answers and explore issues related to their sexuality.

Understanding gender identity and gender expression

Gender identity is, simply, a personal conception of oneself as male or female (or both, or neither). Gender expression is how an individual chooses to present themselves to others in accordance with society's expectations of "male" and "female." A *cisgender* person is one whose gender identity and gender expression align with the sex they were assigned at birth; a *transgender* person is one whose gender identity and/or gender expression does not conform to the sex they were assigned at birth. Transgender children and youth may express discomfort or anxiety about identifying as their sex assigned at birth and insist they be called by a different name, adopt different pronouns ("she/her" vs. "he/him"), or express their gender identity through their hairstyles, clothing, and accessories.

It may be helpful to understand that many children go through periods of being "gender-expansive"—for example, a pre-school boy who shows interest in toys or clothing that are traditionally associated with girls—but this does not necessarily mean that the child is transgender.

If a child in your care is expressing themselves in ways that indicate they may be transgender, encourage them to talk to their caseworker so that the child can get the support they need to feel safe and accepted. You may also offer to help seek out supportive resources in your community for them.

It is important to know that neither sexual orientation nor gender identity are "contagious." They are not learned or imposed upon youth by exposure, nor are LGBTQ youth any more likely than heterosexual or cisgender youth to "prey upon" or act out inappropriately with other children. Neither can sexual orientation and gender identity be "unlearned," and attempts to do so can be damaging to youth. See the LGBTQ Resources in the Resource Directory.

Providing the support LGBTQ youth need

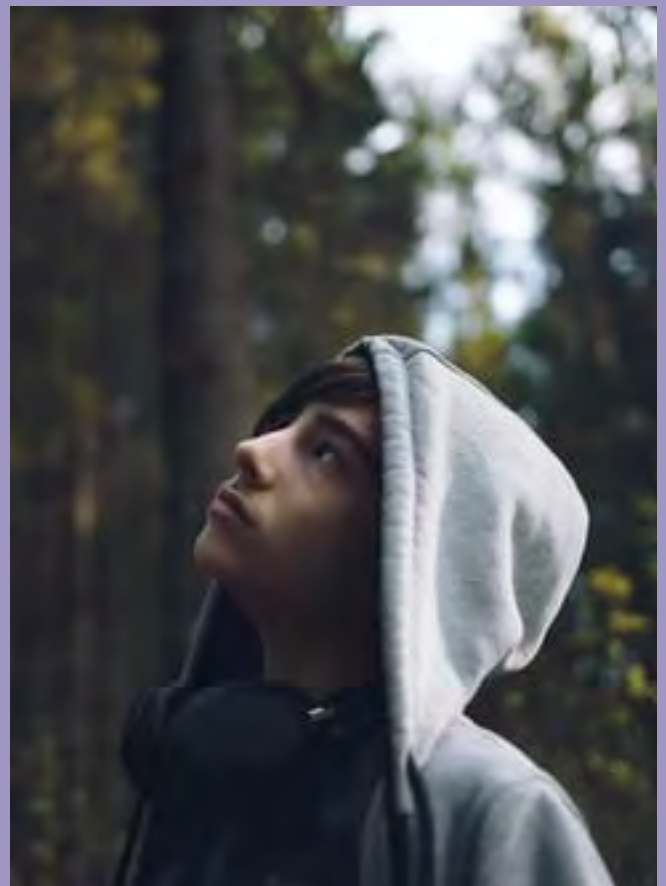
There are several things you can do as a resource parent to ensure that these youth receive the understanding and support they need for healthy and positive development. Some of these include:

- Recognize that you may be already parenting LGBTQ youth
- Be aware of your personal feelings or beliefs that might conflict with your responsibilities to LGBTQ youth in your home
- Educate yourself and others about LGBTQ youth
- Let the youth in your home know that you are comfortable with people who are LGBTQ
- Display visible signs such as posters, stickers, or books that demonstrate an acceptance of LGBTQ people
- Eliminate anti-LGBTQ slurs. Use gender-neutral language when talking to youth. For example, instead of asking a teenaged boy whether he has a “girlfriend,” ask if he has “someone special in his life”
- If a youth is letting you know that he or she is LGBTQ, don’t ignore it. Talk to them about it
- Protect LGBTQ youth from bias and harassment
- Ensure that all youth in your home, including LGBTQ youth, have access to appropriate reproductive and sexual health care services and caring professionals who can answer questions about a range of sexual health issues, such as sexually transmitted diseases, living with HIV/AIDS, and reporting and coping with sexual harassment, attacks or rape
- Help LGBTQ youth find resources and support in the community

- Consider joining a support group for parents of LGBTQ youth like New Mexico PFLAG so that you will be supported in your efforts to parent the youth in your home.

Parenting youth as they prepare for adulthood

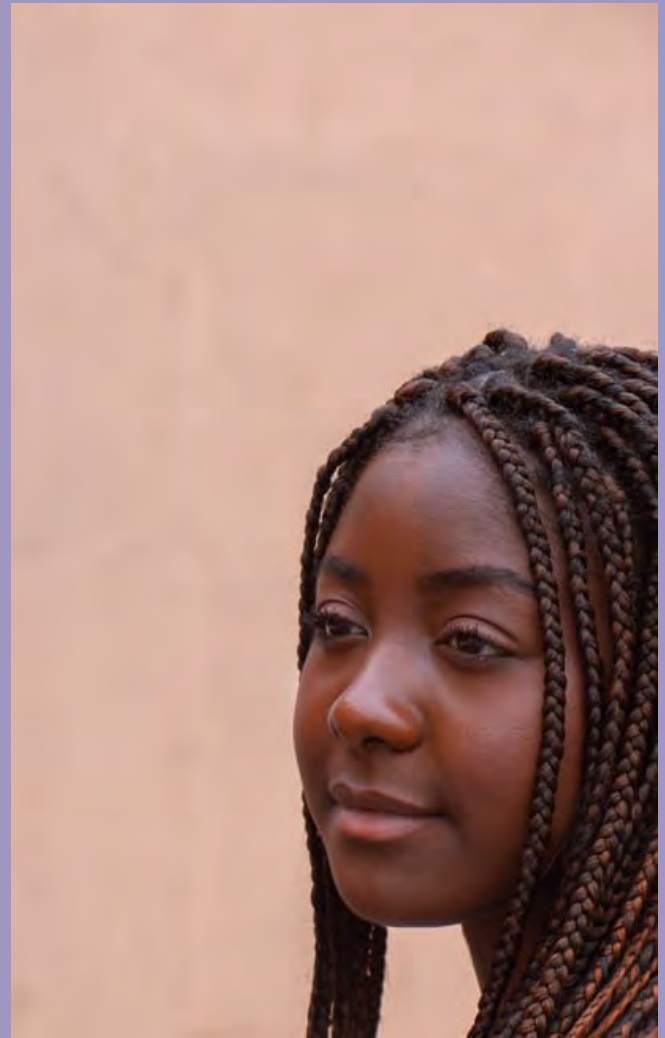
For most parents, preparing their children for independence and adulthood is a life-long task, beginning in very early childhood. Each time a parent teaches a child to master a life skill, such as tying shoes, or toilet training, that child is a step closer to a successful life as an independent adult one day. As children grow into adolescents, this preparation for adulthood takes on a new sense of importance. Parents begin to teach their teens about managing a checkbook, getting and keeping a job, planning a menu and shopping for groceries, etc. Even when youth move away from their parents’ home for college, the military, marriage, or their first independent apartment, in most cases, they still have access to their parents and other family members for advice, help, and even financial support when needed.



Yet, for children and youth in foster care, the acquisition of life skills in this “normal” sequence does not always happen, and when they leave care at the age of 18 or 21, they often do not have access to the safety net of a supportive and financially stable family to assist them in these ways. Therefore, resource parents of adolescents should pay particular attention to their need to learn and master the skills that will help them manage their lives as independent adults.

Some of the skills a resource parent should encourage youth to develop and provide opportunities within the home to practice include:

- Budgeting and money management, including handling their own money, establishing credit, and learning to save for future needs
- Menu and nutrition planning, grocery shopping, and food preparation
- Seeking, obtaining, and holding onto a job
- Managing their health care, including making appointments, locating services, taking medications
- Preventing unintended pregnancies and preparing for healthy sexual relationships
- Seeking and obtaining an apartment
- Care of clothing and personal items
- Managing their own transportation needs, including using public transportation, driver’s education, and exploration of obtaining a driver’s license (discuss legal and insurance issues with the youth’s case manager)
- Planning for post-secondary education, including meeting pre-entry requirements, testing, application deadlines, campus visits and interviews, and financial aid
- Managing adult relationships, including



knowledge of safety, personal boundaries, and other related issues

- Crisis management—knowing how to seek resources and whom to call in an emergency.

Some youth may have additional special needs during this transitional time in their life. For example, you may be asked to provide a foster home to an adolescent who is already parenting a young child. In such instances, your role may include assisting in childcare and modeling parenting skills. Or you may be the resource parent of an adolescent with significant developmental disabilities, in which case, the NM Dept. of Vocational Rehabilitation can provide support.

In all of these instances, the most important element is to engage and involve the youth in the development of skills and the utilization of available resources.



Navigating Specific Challenges as a Resource Family

- **Individualized Retention Planning**
- **Incident reporting**
- **Investigation of abuse/neglect reports involving resource families**
- **Resource family grievance process**

While the role of resource parent is mostly rewarding, it is not without its challenges. CYFD understands that resource parents are asked to handle difficult behaviors; navigate a confusing system; and be extraordinarily generous with their time and effort in order to provide safety and stability to the children who need them.

CYFD strives to partner with you and your family in an open, honest, and meaningful way in order to lessen the burden on our valued resource families. Below, we'll describe the practice of Individualized Retention Planning, as well as what to expect if you must report an incident involving a child in your home or are subject to an investigation of suspected abuse or neglect while caring for a foster child.

Individualized Retention Plans

The Individualized Retention Plan is a collaborative tool to be completed jointly by CYFD placement staff and the resource family. It was designed to ensure the family's individualized retention needs are met by improving communication, as well as building stronger working relationships between resource parents and their assigned placement workers. The following areas are covered throughout the retention planning process:

- Resiliency
- System navigation
- Access to resources
- Role fulfillment
- Support systems
- Cultural considerations
- Preferred methods of communication.

The Individualized Retention Plan should be reviewed and updated as needed, and it's required to do so at least once per year. Other times to consider reviewing or updating these plans are at monthly home visits, annual reviews, licensure renewals, anytime the family is assigned a new caseworker, and anytime the family expresses a concern or reason to revisit the plan.



Incident reporting

Incidents that occur while a child is in foster care can refer to a broad spectrum of events which need to be reported to CYFD for informational purposes or for follow-up. These may include:

- Alleged policy or procedure violations by resource parents, including failure or difficulty following the child's case plan
- Alleged violations of the New Mexico foster child and youth bill of rights
- Illness or accidental injury of a foster child
- Resource parent reporting concerns related to parent-child or sibling visitation.

As previously mentioned, this is not a comprehensive list of what CYFD or the resource parent might consider an incident. Your best bet is to err on the side of caution and when in doubt, report your concern to your placement worker or the child's permanency worker.



While non-emergencies can be reported using phone or email during regular business hours, other incidents must be reported immediately by contacting Statewide Central Intake (1-855-333-7233). These types of incidents may include:

- A foster child running away
- Serious injuries or illness involving urgent medical care
- Any incident that involves contacting emergency services or police
- Urgent need for respite care due to a safety issue in the home (such as a child interacting unsafely with other children or pets)
- Other incidents of a serious nature
- Death.

Depending on the nature of the incident, your placement worker, the child's permanency worker, or both may follow up with you to ensure the incident is resolved. The situation will be assessed by talking with you, the child, and any relevant collateral contacts. Your placement worker may explore ways to better support the placement of the child in your home going forward. This is not meant to assign blame for an incident, but rather, to be proactive in ensuring the child's needs—and you and your family's needs—are being met.

For non-urgent incidents, resource parents are asked to notify their placement worker and/or email the county office to report the incident or concern. The table on the following page has email contact information for each county. It is helpful to include:

- Your name and the child's first name
- The child's caseworker, if known
- Date and time of the incident
- Description of the incident
- Any action taken to address the incident.

County Office	Email
Bernalillo 1	BernOne.Incident@state.nm.us
Bernalillo 2	BernTwo.Incident@state.nm.us
Bernalillo 3	BernThree.Incident@state.nm.us
Bernalillo 4	BernFourIncident@state.nm.us
Bernalillo 5	BernFive.Incident@state.nm.us
Chaves	Chaves.Incident@state.nm.us
Cibola	Cibola.Incident@state.nm.us
Colfax & Union	ColfaxUnion.Inciden@state.nm.us
Curry	Curry.Incident@state.nm.us
Dona Ana	DonaAna.Incident@state.nm.us
Eddy (Artesia)	Artesia.Incident@state.nm.us
Eddy (Carlsbad)	Carlsbad.Incident@state.nm.us
Grant/S. Catron	GrantSCat.Incident@state.nm.us
Lea	Lea.Incident@state.nm.us
Lincoln	Lincoln.Incident@state.nm.us
Luna & Hidalgo	LunaHidalgo.Incident@state.nm.us
McKinley	McKinley.Incident@state.nm.us
Otero	Otero.Incident@state.nm.us
Quay, De Baca & Harding	Quay.Incident@state.nm.us
Rio Arriba & Los Alamos	RioArribaLA.Inciden@state.nm.us
Roosevelt	Roosevelt.Incident@state.nm.us
Sandoval	Sandoval.Incident@state.nm.us
San Juan	SanJuan.Incident@state.nm.us
San Miguel, Guadalupe, & Mora	SanMiguel.Incident@state.nm.us
Santa Fe	SantaFe.Incident@state.nm.us
Sierra	Sierra.Incident@state.nm.us
Socorro/N. Catron	SocorroNCat.Inciden@state.nm.us
Taos	Taos.Incident@state.nm.us
Torrance	Torrance.County@state.nm.us
Valencia	Valencia.Incident@state.nm.us

Note: Due to restrictions on email address length, some county addresses are abbreviated and the word "incident" is not completely spelled out. This is correct and not a typo.

Investigation of abuse/neglect reports involving resource families

Supporting children in care as a resource caregiver can be very rewarding with many benefits for both the resource family and the child in care. Children who enter foster care have been abused or neglected, and caring for children who have had these experiences can put resource families at risk for allegations of abuse and neglect.

Regardless of the alleged perpetrator, when allegations that someone has caused harm to a child are made known, CYFD has a legal duty to carry out a thorough investigation to ensure the child's safety and that she receives the appropriate response and support, regardless of whether these allegations are founded. Anyone in the resource home could potentially be accused of abuse or neglect, including adult children in the home or extended family members. Allegations may be made by the child, or someone acting on behalf of the child, such as a teacher, counselor, or relative.

CYFD has a legal and ethical obligation to investigate all allegations of physical, sexual, or emotional harm—as well as allegations of poor standards of care or neglect—involving children in care.

Although this is a necessary process, it can put the accused resource caregiver and their family under considerable emotional strain. Your placement worker will not be the one conducting an investigation, so they can assist a family experiencing an abuse/neglect investigation in accessing support and services when requested or recommended.

If a report involving a foster child is screened in for investigation, CYFD must make contact with the alleged victim(s) within 24 hours to assess the child's safety—as well as the safety of other children in the home—and make a decision about whether or not to maintain the placement pending the outcome of the investigation. New placements of other children will not be



made if a resource family has an open investigation.

The investigation worker will talk to all household members, including resource parents, other children in the home, and the foster child(ren). The investigator will also talk with collateral contacts and collect any other information relevant to the allegations.

Based on the outcome of the investigation of the abuse/neglect referral, one or more of the following actions will occur:

- Continue the placement, implementing a safety plan, supportive services, or a professional development plan if determined appropriate;
- End the child's placement in the home;
- Determine if the family should discontinue licensure as a resource family, either temporarily or permanently.

CYFD will notify the resource parent in writing, by return of receipt mail, of the investigation results as well as any other agency actions.

Resource family grievance process

The rights of resource parents to submit grievances regarding their interactions with CYFD are included in Department procedures. The Department has a zero-tolerance policy regarding retaliation against resource parents who share concerns about children in their care; the handling of cases by CYFD; or allegations that CYFD has violated the Resource Parents' Bill of Rights (the Resource Parent Bill of Rights can be found in its entirety on page 76 Of this guide).

If a resource family feels at any point during their licensure that they had their rights violated or they feel retaliated against, they have the right to file a grievance with the Department and have it reviewed in a timely manner.

If a resource parent is unable to resolve a grievance at the county level, they may choose to file a formal grievance with the

CYFD Office of Constituent Affairs. This Office must review the complaint and provide a response within 15 days of receiving the complaint.

If the grievance is not resolved satisfactorily, the resource parent may request a review by the Office of the Inspector General (OIG) under the Office of the Secretary. This request must be filed within 10 days of the response from the Office of Constituent Affairs.

While the findings from the OIG are final, nothing in the grievance process shall prevent a resource family from seeking legal remedy, where appropriate, if the grievance process did not resolve the dispute.

The "Request to File Grievance" form is located on the Internet (cyfd.org). If you are unable to access the form online, you may request one from your placement worker or the County Office Manager in your county.





Appendices

- **Appendix One: Safety Checklist**
- **Appendix Two: Medicaid and EPSDT Fact Sheet**
- **Appendix Three: Supporting children in the recruitment process for a new permanent home**
- **Appendix Four: Bill of Rights for Children in Foster Care**
- **Appendix Five: Bill of Rights for Resource Families**
- **Glossary of Terms**
- **Resource Directory**

Appendix One: Safety Checklist

- The home has working smoke detectors
- The family practices fire drills
- There are no fire hazards, all electrical cords are in good condition, electrical outlets are plugged with safety caps
- Matches are not accessible to children
- A fire extinguisher is working and easily accessible
- Radiators, hot water pipes, stovetops, and fireplaces have covers or barriers that prevent children from getting burned
- Toilets flush and plumbing is in working order. A first aid kit is accessible and well-stocked
- Emergency phone numbers are visibly posted. All exits are accessible and free of clutter
- Stairways have guards or railings, are sturdy and well-lit
- Windows, including screens, are fastened securely to prevent children from falling out
- All medication is clearly labeled and stored in a locked facility
- Knives, scissors, and other sharp objects are kept out of children's reach
- All firearms are equipped with a trigger lock and stored, un-cocked, unloaded, in a locked place that is inaccessible to any youth in the home. Keys to the locked container are also stored in a place that is inaccessible to children and youth in the home. Firearms should not be stored with valuables
- TVs, VCRs, computers, and other equipment are secured on stands to prevent tipping or collapse.
- Cleaning agents are stored in original containers and kept out of reach of children
- Infant cribs, playpens, and changing tables meet current safety standards
- There are no poisonous plants in the house
- The yard is fenced or otherwise safe for small children
- Equipment and garden tools such as lawnmowers are inaccessible to small children
- All pets are not aggressive and are current with their vaccinations to include the rabies vaccine
- The play area is free of sharp or otherwise dangerous objects.
- If the yard includes a trampoline or swimming pool, some barriers prevent access to unsupervised children
- All play equipment including swings, slides, climbing toys is rust-free and in good repair
- Car seats meet current safety standards and weight and age requirements
- Tools, especially power tools, are stored safely and are not accessible to children.

Appendix Two: Medicaid Fact Sheet

Medicaid is no cost health care coverage that is provided to eligible individuals through state and federal dollars. In NM, the NM Human Services Department's (HSD) Medical Assistance Division (MAD) administers the Medicaid program, while HSD's Income Support Division (ISD) determines Medicaid eligibility.

There are over 40 categories of Medicaid in NM that cover children, families, pregnant women, adults, individuals with long term care needs, and individuals who are eligible for both Medicare and Medicaid. Each category has its own eligibility requirements and benefit package. Eligibility for Medicaid programs is based on income, citizenship/immigration status, residency, and other factors.

Medicaid covers a full range of services, including doctor's visits, hospital visits, regular check-ups, prescriptions, behavioral health services, laboratory services and for some, vision and dental services.

Centennial Care

Most individuals who have Medicaid in NM will be enrolled in Centennial Care, the state's Medicaid Managed Care program. Centennial Care uses insurance companies, called managed care organizations (MCOs), to provide services to their members. When someone is enrolled with an MCO, they get their medical services from doctors, pharmacies or service providers that are in that MCO's network. When someone is enrolled with an MCO, they get an insurance card from their MCO.

Centennial Care MCOs

The MCOs that currently provide services for Centennial Care are:

- Blue Cross Blue Shield of NM
www.bcbsnm.com/community-centennial 1-866-689-1523
- Presbyterian Health Plan
www.phs.org/Pages/default.aspx
1-888-977-2333
- Western Sky Community Care
www.westernskycommunitycare.com/
1-844-543-8996

Fee-for-Service Medicaid

Some Native Americans can choose to get their Medicaid services through Centennial Care or Fee-for-Service (FFS) Medicaid. Those who get services through FFS utilize doctors that are contracted directly with the state to provide services. FFS clients have a Medicaid identification card that is issued by HSD.

Early and Periodic Screening, Diagnostic and Treatment

Early and Periodic Screening, Diagnostic and Treatment (EPSDT) is a benefit available to children under 21 years of age who are enrolled in Medicaid. EPSDT benefit covers a comprehensive range of preventative and treatment services to ensure that individual children receive the health care they need when they need it.

New Mexico's EPSDT screening is known as the Tot-to-Teen Health Check and the services are available through a child's regular providers at the following scheduled intervals:

- **Under Age One** include screenings at birth, 3-5 days, and months 1 ,2, 4, 6 & 9
- **Ages One to Two** include screenings at 12, 15, 18, 24 and 30 months
- **Ages Three to Twenty** include screening intervals every year.

Tot-to-Teen Health Checks can help identify health problems early. Early identification and treatment of health problems can help prevent long-term issues and result in children growing to be healthy adults. A complete medical screening includes the following components:

- A comprehensive health and developmental history, including an assessment of both physical and behavioral health or social emotional development;
- A comprehensive, unclothed physical exam;
- Appropriate immunizations;
- Laboratory tests, including blood lead level assessment;
- Health education;
- Vision, hearing, and dental screenings;

According to federal guidelines, health care must be made available for treatment or other measures to address any physical or mental conditions discovered by the screening services.

For more information about federal Medicaid legislation, go to:
www.cms.hhs.gov/medicaid/epsdt



Appendix Three:

Supporting children in the recruitment process for a new permanent home

When a resource family is unable to make a permanent commitment to a child in its care, the foster care agency will begin special efforts to find another permanent home for the child. As part of these efforts, the child might be photographed for a photo listing book, newspaper feature, or website; participate in a televised recruitment feature; or attend a permanency event, at which children in need of adoption meet prospective adoptive parents in a fun, social setting. Below are some tips for helping to support the child through this process. You can also discuss this with your placement worker so that you feel confident about your role and the support you can provide.

Before a permanency event

- Describe and explain the event to the child
- Tell her who will be present
- Tell her whom to expect to be watching if it is on TV or the Internet
- Go over the plans—who, what, when, and where
- Don't forget "why." Explain that this is not only an opportunity to meet a family that might become her new family, but it is also a chance to help recruit families for other children who are waiting for a family
- Enlist the child as a partner in the project. Through her participation, she is helping herself and other children by educating others about children in foster care who need families
- Talk about how it might feel if friends or schoolmates see the event, offer to come to visit their school and talk to

classmates or teachers if this would be helpful

- Bring an item to the event that will help the child talk about herself. A favorite book or sports item, a trophy or certificate, a homemade craft item, a photo album, or something that represents a hobby or talent
- Talk about being polite, yet being yourself
- Let her know she does not have to answer every question
- Remind her not to share information that is too personal—such as her last name, address, or school name
- Role-play some of the possible questions that she might be asked—let the youth have a chance to play the role of reporter
- Work together to make a list of special topics the youth would like to talk about—hobbies, awards, likes and dislikes, favorite subject in school, pets, etc.

After an event

- Provide a "de-briefing" opportunity for the child or youth
- Follow up with the child's permanency planning worker and find out what the next steps are so you can keep the child informed

Keep the child posted about the process, the responses the agency is getting, etc. If there are not a lot of (or any) responses, be reassuring to the child, remind her that it often takes time to find the right family, and provide opportunities for her to express her feelings.



Appendix Four:

New Mexico Bill of Rights for Children in Foster Care

- To be informed of your rights in foster care by your caseworker and to receive a list of those rights in written form;
- To have your privacy protected and your right to confidentiality adhered to, as outlined in the New Mexico Children's Code;
- To be explained why you came into foster care and why you are still in foster care by a representative of CYFD;
- To be free from physical, sexual, emotional, or other abuse, including corporal punishment;
- To stay safe and avoid exploitation;
- To advocate for yourself and to speak to persons involved with your case without negative repercussions;
- To make a report to Statewide Central Intake (1-800-797-3260) if you feel you are being abused and/or neglected;
- To be represented by a guardian ad litem or youth attorney in all judicial matters (hearings and mandatory meetings) conducted in your abuse/neglect case so that your interests are shared and safeguarded; to attend and participate in all court hearings as coordinated through your attorney;
- The right to agree to medical and mental health treatment, including medication;
- The right to be placed with your kin and relatives, if possible;
- To maintain regular contact with your siblings, whether or not they are in custody unless it is contrary to your safety and/or well-being;
- To be informed of how to contact your caseworker and other professionals involved in your case;
- To contact your attorney, caseworker, and CASA when you want;
- To have a minimum of at least monthly visitation with your caseworker, which includes the private time between yourself and the caseworker;
- To refuse medical and behavioral health services and medications, unless court ordered, after age 14;
- To live in a safe, healthy, and comfortable home where you are treated with respect;
- To have resource parents who are screened, trained and licensed, and who receive adequate support and supervision from CYFD and/or private agencies;
- To receive adequate and healthy food, adequate clothing, and appropriate personal hygiene products;
- To have a permanent plan for placement, to participate in developing this plan, and to have a choice in placement or the right to request a placement change;
- To be placed in a home with your siblings who are in custody unless it is contrary to your safety and/or wellbeing;
- To have regular and ongoing contact (by phone, through letters, and in-person) as soon as possible after entering custody with biological parents, relatives, and other important

people in your life, unless it is contrary to your safety and/or wellbeing and prohibited by a court order or you choose not to;

- The right to exercise parental and decision-making authority for your child (if you are a parent);
- To be informed by a CYFD representative when contact with important people in your life is being monitored or prohibited, and the reasons it is being monitored or prohibited;
- To remain in the same school you were enrolled in before entering into custody and to remain in the same school throughout your stay in custody; to be provided with transportation arrangements to ensure continued enrollment in the same school;
- To attend and participate in school meetings, including parent/teacher conferences, Individual Education Planning (IEP) meetings, and Next Step Planning meetings;
- To participate in extracurricular, cultural, spiritual, and personal enrichment activities;
- To be involved in the development of your treatment plan, life skills plan, transition plan, and visitation plan; to receive factual information about the treatment decisions made by the agency that affect your life;
- To have a plan for your future, including life skills plan and transition plan; to be offered services to help you prepare to become a successful adult;
- To an annual credit check from age 14 to 18;
- To initiate a review of any prudent parenting decision made by your resource parents, at 14 and older.



Appendix Five:

New Mexico Bill of Rights for Resource Families

- To be treated with dignity, respect, and consideration as integral members of the child welfare team;
- To be notified of scheduled meetings concerning a child in their care to actively participate in the care planning and treatment process unless the child is 14 or older, at which point, they may make their own decision on who attends and participates in their care plan as described in the Youth Bill of Rights;
- To provide input concerning the plan of services for the children in their care and to have that input given full consideration, in the same manner as information presented by any other member of the team, without fear of retaliation;
- To communicate about the child/ren in their care with professionals who work with the child/ren including, but not limited to, their Guardian Ad Litem/ Youth Attorney, therapists, physicians, and school personnel, without fear of accusation of violating the Confidentiality Code or retaliation;
- To receive a written copy of the child's treatment and service plans and any subsequent revisions on a timely basis;
- To receive the completed Child Specific Placement Agreement within 24 hours of the time the child in care is placed in their home;
- To be given pre-service training and appropriate ongoing training, including upon request training relevant to the needs of the child in their care;
- To be informed of and have access to, all agency policies and procedures related to their role as resource families and related to any child for whom they provide substitute care;
- To a fair, timely, and impartial investigation concerning referrals filed against them, and access to a fair and impartial appeal process free from retaliation, according to CYFD policy and procedure. The result of any referral or investigation will be provided to the resource family in writing and within 15 days of its conclusion;
- To be free from acts of harassment and retaliation by CYFD staff;
- To emergency access to CYFD staff on a twenty-four-hour, seven days per week basis. These CYFD staffs have access to individual children's records and are specifically trained to support resource families in emergencies;
- To report misconduct by CYFD employees, service providers, or contractors and to have such reports initiated and investigated within 10 days of the report. CYFD shall take immediate action to remedy any action taken against a resource parent in retaliation for exercising their rights under this section;
- To expect and rely upon the fact that CYFD's decisions regarding them and the children placed in their care will comply with state and federal law;

- To be notified when a child in their care has a case scheduled to be reviewed by the Substitute Care Advisory Council (SCAC). Resource families have the right to participate when a child in their care has a case reviewed by the Substitute Care Advisory Council (SCAC);
- To receive adequate prior written notice of, and an opportunity to be heard at, court hearings regarding a child in their care, as provided by law;
- To submit factually based written statements to the court, as provided by law;
- To be informed of and receive available support services for a child in their care, as provided by CYFD policy and procedure;
- To be notified and considered as a placement option when a child formerly in their home reenters the foster care system;
- To receive full and timely financial reimbursement commensurate with the care and needs of the child, as provided by CYFD policy and procedure. Time is defined as within 30 days of the resource family's request for reimbursement;
- To reasonable assistance from CYFD in dealing with loss and separation when a child in their care leaves their home;
- Resource Families of children with a plan of adoption placed in their home have the right to priority consideration as adoptive parents of those children if relatives have not been identified or are not viable placements;
- To confidentiality regarding personal issues, as provided by law;



- To full disclosure of all medical, psychological, and behavioral issues of children in their care, as provided by CYFD policy and procedure, and nothing in the Confidentiality Code shall be understood to require otherwise;
- In matters concerning licensing, Resource Families have the right to be free from discrimination based on religion, race, color, creed, sexual orientation, national origin, age, marital status, or physical disabilities [03-19-21].

Glossary of Terms

While not all-inclusive, this glossary provides definitions of many of the terms used in this handbook and many common terms resource parents may encounter.

Abuse, or Child Abuse “Abused child” as defined in the Children’s Code, Subsection B of Section 32A-4-2 NMSA 1978, means a child:

- (1) who has suffered or who is at risk of suffering serious harm because of the action or inaction of the child's parent, guardian or custodian;
- (2) who has suffered physical abuse, emotional abuse or psychological abuse inflicted or caused by the child's parent, guardian or custodian;
- (3) who has suffered sexual abuse or sexual exploitation inflicted by the child's parent, guardian or custodian;
- (4) whose parent, guardian or custodian has knowingly, intentionally or negligently placed the child in a situation that may endanger the child's life or health; or
- (5) whose parent, guardian or custodian has knowingly or intentionally tortured, cruelly confined or cruelly punished the child

Adjudication or Adjudicatory Hearing

A hearing to determine if the allegations in a petition presented to the court are true

Adoption The creation of a new, permanent legal family for a child or youth. The adoption process involves the termination of the parents’ rights and the creation of parental rights to a new caregiver(s). Adoptive families may or may not be related to the child or youth before the adoption

Adoption Assistance or Subsidy

Financial assistance available to families who adopt children from foster care. This assistance is designed to help the family meet the regular and special needs of the young person. Discuss this with your agency case manager if adoption is being considered as a child’s permanency plan

Adoption and Safe Families Act (ASFA)

A federal law, passed in 1997, which has many provisions related to the safety, permanence, and well-being of children in foster care, including timelines states must follow, with some exceptions, related to the termination of the parents’ rights and securing permanent homes for children

Advocate, or Child Advocate In this handbook, this term is used to describe the attorney assigned to represent the child or youth in all legal matters and court proceedings related to her case

Aging Out When a youth leaves foster care because they have reached a certain age (18 in most cases in New Mexico) without obtaining permanence through returning home, adoption

Appeal Someone asks for a hearing to change the court’s decision. Any court decision is subject to an appeal

Biological Parents or Birth Parents The child/youth’s family of origin: the person(s) who gave birth or fathered the child

Caretaker A person responsible for the day-to-day care of a child or youth

Child “Child,” “children,” or “youth” refers to a person who is under the age of 18 years of age; or up to 21 years of age and participating in the extended foster care program

Child Protective Services (CPS) The portion of CYFD charged with investigating abuse or neglect allegations and providing ongoing social services to families where abuse and neglect of youth have been reported

Concurrent Planning A process that allows for CYFD and the child's permanency planning team to work on two or more permanency plans at the same time. For example, while primarily focusing on reunifying a child with her parents, the team may also begin to consider and plan for adoption if reunification is not successful within desired and/or legally required time frames

Confidentiality Protection of information related to a child's identity, life and circumstances, and that of her family, from inappropriate disclosure to other parties. A release of information may be signed to permit professionals and others to have access to that information if appropriate

Continuance When a court hearing is not completed on the same day it started, it can be "continued" to another date. A continuance may occur when someone whose presence is needed does not come to court, or when the judge does not have sufficient information to act on the case

Court Appointed Special Advocate (CASA) An adult volunteer, assigned by the court to serve as an arm of the court to independently investigate the best interests of the child and act as a liaison in court proceedings. The CASA and the youth should talk on an ongoing basis

Custodian A person or agency designated by the court with the rights and duties to provide for all of the child or youth's needs for protection, food, clothing, housing, education, and medical care

CYFD Abbreviation for the Children Youth and Families Department—the agency that oversees foster care in New Mexico

Disposition This is the decision about where a child or youth should live (such as placement in state custody), as well as what the parents, CYFD, and the youth must do to address the problems that brought the youth into care

Early Intervention (EI) A program that provides a range of services to young children (up to age 5) to help them overcome developmental delays. Children in foster care are eligible for early intervention services when needed. If you suspect a child has delays, talk to your Permanency and/or Placement worker

Educational Decision-Maker An individual appointed by the children's court to attend school meetings and to make decisions about the child's education that a parent could make under law, including decisions about the child's educational setting, and the development and implementation of an individual education plan for the child. For a child in foster care, the child's birth parents may remain education decision-makers unless otherwise appointed by the court; for example, an educational decision-maker may be a resource parent, other relative of the child, or a CASA (Court Appointed Special Advocate)

Emancipation A youth who is legally declared an adult (by a court) before age 18. A youth in foster care who emancipates is no longer a ward of the court (or in foster care)

EPSDT The Medicaid Early, Periodic Screening, Diagnosis, and Treatment Program. This program requires regular check-ups and screenings for physical and mental development. Services related to the diagnosis and treatment of any abnormalities, delays, or diseases discovered must also be provided

Family Court In New Mexico, this is the court that hears most cases related to children and youth in foster care. The Family Division, also referred to as Family Court, is one of the three major divisions of the New Mexico Court of Common Pleas. The Family Division is made up of two branches, the Juvenile Division and the Domestic Relations Division. Most of the court hearings related to children and youth in foster care take place in the Juvenile Division and are referred to as dependency cases

Family Centered Meeting (FCM)

A meeting that brings together a team of people, including the child or youth, her family, resource family, relatives, agency caseworkers, legal advocates, and others who care about and/or have information about the child, to develop permanency plans for the child or youth

Foster Care Temporary care provided to children or youth who are removed from their family's custody and are placed in state custody. Foster care is 24-hour care with a person or agency that is approved by the state to provide this care and includes placement with relatives, foster families, group homes, shelters, and other placements for children under the age of 18

Fostering Connections This program provides ongoing support for foster youth turning 18 through the age of 21. Youth opt in to the program voluntarily in order to receive monthly maintenance payments and other supports intended to assist the youth in achieving educational goals, housing, employment, successful parenting, and other milestones

GED General Equivalency Diploma, a diploma that is equivalent to a high school diploma, which demonstrates that a person has shown satisfactory competence through testing in a variety of subjects including literacy, math, social and natural sciences

Group Home A home that cares for several foster youths, often using case managers for supervision instead of resource parents

Guardian ad Litem (GAL) A person appointed by the court to represent the best interests of a child under the age of 14 in any legal proceedings involving the child. The GAL and the child should talk on an ongoing basis

Guardian, or Guardianship A person who is not the parent of the child or youth, but has been appointed by the court to have responsibility for the youth including certain legal rights and duties

Indian Child Welfare Act (ICWA) This federal law is intended to protect and preserve the rights, culture, and tribal connections of Native American children in foster care. While there are many aspects of the law, its core functions include designation of Tribal sovereignty and jurisdiction over children and families on tribal land; clear processes to transfer cases to Tribal courts; and establishment of placement preferences for American Indian and Alaska Native children.

Individual Education Plan (IEP) A written plan for children receiving special education services through the schools. The plan is developed with the participation of the child or youth, her parents, the school, and others familiar with the child's educational needs. The plan must be periodically reviewed, updated, and must include specific goals and objective

Interstate Compact on Adoption and Medical Assistance (ICAMA) An agreement between states to ensure that children who are placed across state lines for adoption can receive medical care and medical coverage through Medicaid

Interstate Compact on the Placement of Children (ICPC) An agreement among states to ensure protection and services to children and youth when they are placed across state lines for foster care, adoption, or living with a relative. Both states (“sending state”—the state the child currently lives in, and “receiving state”—the state the child is going to) must complete the required paperwork to demonstrate that the legal protections and requirements of the ICPC have been met before a child can be moved across state lines

Judge The judge decides what is best for the youth. The judge issues court orders, reads reports, hears arguments, and decides whether the youth should be placed or continued in the custody of the State. The judge also makes final decisions on permanency plans for the child

Kinship or Kinship Care 24-hour care for children and youth provided by relatives such as grandparents, aunts, uncles, or even older (adult) siblings. This may also be called relative care. In New Mexico, kinship caregivers and non-relative providers are both required to be approved and licensed to provide care for a child in CYFD custody

Lifebook A scrapbook that records pictures and special events to help a child or youth develop a sense of identity and history. It typically includes pictures and stories about people, events, and places that are important to the child’s history and life

Mandated Reporter A person who is designated by law to report suspected abuse or neglect of a minor child. Resource parents, doctors, teachers, and case managers are just a few of the designated mandatory reporters

Medicaid A federal and state-funded medical and health care assistance program for which children in foster care are eligible

Neglect The failure of the person responsible for the care of a child to provide adequate food, shelter, clothing, medical care, or supervision necessary for the child’s health and welfare

Notice of Hearings Everyone involved in a youth’s case must be served with a notice telling them when and where court hearings will take place. People required to receive such notice include the youth, parents, resource parents, the agency with custody, and legal advocates assigned to all parties. A resource parent has a right to notice but is not considered a “party” to the case and therefore, does not have an assigned legal advocate

Permanency Hearing A court hearing to consider a child or youth’s need for secure and permanent placement on time. The hearing must be held within 12 months of a child’s placement in foster care and revisited thereafter until permanence is achieved

Permanency Planning Planning for a child or youth to have a permanent legal home and family. The preferred permanency options are reunification, adoption, and guardianship. Other legally available permanence options include placement with a fit and willing relative

Reasonable and Prudent Parenting A provision in CYFD policy intended to normalize the lives of children in foster care and empower caregivers to approve certain activities for the child without advance permission from the agency

Reimbursement The monthly payment issued to resource parents for the child’s care and covers basic costs such as food, clothing, shelter, school supplies, grooming, and transportation

Resource Family A person or persons, to including relatives of the child, who are licensed or certified by the Department or a child placement agency to provide care for children in the custody of the Department or agency

Resource Home A temporary home where a child and/or youth may live while in the custody of the state

Respite Care Temporary care for a child or youth, intended to give either the youth or caregiver (or both) a break

Reunification Services that can bring youth back to the family from which they were removed by working on the problems that caused the separation of the child or youth from the family. Most often, reunification involves the child's birth family, but in cases where a child was removed from an adoptive family or other legal guardians, reunification can also occur

Sibling or Sibling Group A sibling is the brother or sister of a youth. A sibling group is a group of two or more siblings. CYFD's policy is to keep siblings together when in foster care, and to consider sibling relationships in permanency planning

Single Case Plan A family-driven plan for the child and family developed in collaboration with all stakeholders. The plan describes the family's strengths, needs, goals, and services, which will help the family address the problems that brought the child into foster care and move towards creating safe permanence for the child on time

Special Needs Child Within foster care, this term usually refers to a child who is over the age of five, a member of a minority racial group, a member of a sibling group, and/or a child with a physical, mental or emotional disability. Children with special needs are generally eligible for special services and also for adoption assistance if they are adopted from foster care

Supplemental Security Income (SSI) Funding provided through the Social Security Administration (SSA) to eligible children and adults with disabilities

Termination of Parental Rights (TPR) If family reunification has been ruled out and adoption is a possibility for the child, the Department may petition (request) for termination of the parent's rights to the child. If the court terminates parental rights, it means the child is free for adoption. It also means that the parents have no legal rights to the youth

Youth Attorney A person appointed by the court to represent the expressed interests of a youth aged 14 and older in any legal proceedings involving the youth. The youth attorney and the youth should talk on an ongoing basis

Youth Services Specialized supports and services provided by CYFD to youth and young adults to support a successful transition to adulthood. These services and supports are designed to ensure the development of knowledge, awareness, and skills needed for successful adulthood in the areas of education, housing, finances and employment, physical and mental well-being, supportive relationships and community connections, cultural and personal identity, daily living skills and transportation, and parenting/parenthood. For those under 18, this support begins with Fostering Connections Specialists working in partnership with youth and their support network to develop developmentally appropriate, identity-affirming transition plans. For those over the age of 18, monthly maintenance payments are provided for young adults aged 18 to 21 to support housing stability and other expenses related to adulthood who chose to voluntarily enroll in extended foster care. For those that qualify, services and supports also include access to federal funding through Education and Training Vouchers (ETV) and Start-Up funds, Tuition and Fee Waiver letters, and ongoing case management support. For more information, the Fostering Connections Bureau can be reached at Info.youthservices@state.nm.us

Resource Directory

Adoption and Foster Care

Adoption & Foster Care Alliance of New Mexico

<http://www.adoptfostercarealliancencm.org/>

Comprised of professional individuals, agencies, and organization members, including adoption and foster care service providers and attorneys, who are committed to promoting superior services for children, parents who may need to find an adoptive home for their infant or child, adoptive parents, and resource families, through outreach, direct services, education, and advocacy.

Adopt US Kids

605 Global Way, Suite 100

Linthicum, MD 21090

1-888-200-4005

www.adoptuskids.org

National photo listing of children awaiting adoption in the US, plus adoption information.

Building Futures and Foundations

625 Silver Ave. SW, Ste 345

Albuquerque, NM 87102

(505) 217-0220

This program serves youth in foster care (ages 14 and up) in Bernalillo County, Sandoval County, and Valencia County, and services such as the Opportunity Passport, mentorship, training in life skills, and leadership opportunities. Youth Services/CYFD can work with youth in connecting and accessing the Building Futures and Foundations Services. They can also provide updates on how these services may be expanding to serve other counties.

Children, Youth and Families Department (CYFD)

www.cyfd.org/foster-care

The CYFD website houses information about the Department's mission and programs, including information on becoming a resource parent and adoptive parent.

NM Friends of Foster Children

(505) 480-0482

info@nmffc.org

www.nmffc.org

Through private donations, New Mexico Friends of Foster Children helps provide the things that help foster kids be kids. How do we help foster kids be kids? By paying for sports or camp fees, buying a bike or an instrument for band, paying for tutoring or helping a child go on a school trip. Think of what is important for a child to grow and flourish and our donors help make that a reality for children in foster care in New Mexico. A foster parent, social worker or other advocate for a foster child may submit an application for funding to address the child's interest.

New Mexico Friends of Foster Children (NMFFC) also awards scholarships annually to young people between the ages of 17 and 25 who have been in the child welfare system in New Mexico for six months or more at any time in their lives.

NM Fiesta Project

(505) 271-0329

www.allfaiths.org/nm-fiasta-project-events/

"FIESTA" is an acronym for Family Activities, Information, Education, Support, and Training.

The NM Fiesta Project supports and trains adoptive families across the state with free classes, groups, and family activities. The agency has experienced adoptive parents,

called “Family Contacts,” in each region of the state. Check the calendar and blog for current information.

Fostering Family

Serving Bernalillo County, Rio Arriba County, and Doña Ana County
(505) 830-1871 ext. 402
fosteringfamily@swfamily.com
www.fosteringfamily.com

This program provides support services to New Mexico kinship caregivers.

Fostering Families Today

1-888-924-6736
www.fosteringfamiliestoday.com

A quarterly magazine for foster families and professionals.

Heart Gallery of New Mexico

13170-B Central Ave SE
Albuquerque, NM 87123
(800) 432-2075
www.heartgallerynm.org

The Heart Gallery of New Mexico provides a gallery of photographs of CYFD’s children who are awaiting “forever families” through the adoption process. The website and activities promote permanent, loving, stable families.

National Foster Parent Association

14508 Owen-Tech Blvd, #129
Austin, Texas 78728
1-800-557-5238
www.nfpaonline.org

A national organization that provides support for resource parents, and local resource parent organizations, as well as national advocacy on behalf of children and families.

New Mexico State Adoption Assistance

Jason DeHerrera
Children, Youth & Families Department
Adoption Subsidy Supervisor
P.O. Drawer 5160
Santa Fe, NM 87502
505-827-8413
jason.deherrera1@state.nm.us

Information about the adoption assistance benefits that may be available to families who adopt children from foster care in New Mexico.

North American Council on Adoptable Children

970 Raymond Avenue
Suite 106
St. Paul, MN 55114
(651)-644-3036
www.nacac.org

Through advocacy, adoption support, leadership development, and education the North American Council on Adoptable Children (NACAC) works to ensure all children in foster care have permanent, loving families and adoptive families have the support they need.

Southwest Family Guidance Center and Institute

Locations in Albuquerque, Corrales, Los Lunas, Las Cruces, and Santa Fe
www.swfamily.com

Offers personalized behavioral health services, Thriving Kids Parenting Curriculum and Life Skills Coaching, individual therapy, family therapy

Advocacy

Child Welfare League of America (CWLA)

www.cwla.org
1726 M. St N.W., Suite 500
Washington, DC 20036
(202)-688-4200

Information on all aspects of child welfare, including many excellent books and materials related to foster care.

Child Care

The following resources are available by county and are listed by county alphabetically. For eligibility guidelines and to apply for child care assistance online, visit newmexicokids.org or call (800) 691-9067.

BERNALILLO COUNTY

3401 Pan American Freeway NE
Albuquerque, NM 87107
(505) 841-4801
or
(505) 841-4802

CHAVES COUNTY

#4 Grand Ave. Plaza Ste. A
Roswell, NM 88202
(575) 625-1078

CIBOLA COUNTY

1019 East Roosevelt
Grants, NM 87020
(505) 285-6673 ext. 1116

COLFAX COUNTY

See San Miguel County.

CURRY COUNTY

221 W. Llano Estacado Blvd.
Clovis, NM 88101
(575) 742-3950

DOÑA ANA COUNTY

2805 Roadrunner Parkway
Las Cruces, NM 88011
(575) 373-6640

945 Anthony Dr.
Anthony, NM 88021
(575) 882-7871

EDDY COUNTY

901 De Baca St.
Carlsbad, NM 88220
(575) 628-6141

GRANT COUNTY

3082 32nd Bypass Rd. Ste. A
Silver City, NM 88061
(575) 538-0259

GUADALUPE COUNTY

See San Miguel County or Curry County.

HIDALGO COUNTY

See Grant County.

LEA COUNTY

907 West Calle Sur
Hobbs, NM 88240
(575) 391-3500

LINCOLN COUNTY

See Otero County.

LOS ALAMOS COUNTY

See Rio Arriba County.

LUNA COUNTY

918 E. Pear
Deming, NM 88030
(575) 546-6557 ext. 1107

MCKINLEY COUNTY

1720 E. Aztec
Gallup, NM 87301
(505) 726-8449

MORA COUNTY

See San Miguel County.

OTERO COUNTY

2200 Indian Wells Rd.
Alamogordo, NM 88310
(575) 439-1730

QUAY COUNTY

See Curry County.

RIO ARRIBA COUNTY

912 N. Railroad Ave.
Española, NM 87532
(505) 753-0222

ROOSEVELT COUNTY

See Lea County.

SANDOVAL COUNTY

4359 Jager Dr. NE Ste. A
Rio Rancho, NM 87144
(505) 771-5900

SAN JUAN COUNTY

2800 Farmington Ave.
Farmington, NM 87401
(505) 325-0820

SAN MIGUEL COUNTY

2518 Ridgerunner Rd.
Las Vegas, NM 87701
(505) 425-2832 ext. 1301

SANTA FE COUNTY

1920 Fifth St.
Santa Fe, NM 87505
(505) 476-5440

SIERRA COUNTY

See Doña Ana County.

SOCORRO COUNTY

104 S. 6th St.
Socorro, NM 87801
(505) 866-2314

TAOS COUNTY

1308 Gusdorf Rd.
Taos, NM 87571
(575) 751-9631

TORRANCE COUNTY

See Santa Fe County.

UNION COUNTY

See Colfax County.

VALENCIA COUNTY

750 Morris Rd.
Los Lunas, NM 87031
(505) 866-2314
or
(505)866-2315

Concerns/Complaints

CYFD Constituent Affairs

(505) 681-2486

<https://cyfd.org/about-cyfd/constituent-affairs>

The New Mexico Children, Youth and Families Department's (CYFD) Office of Constituent Affairs is currently designated as a Discrimination Complaint Coordinator (DCC). As a DCC, the Office of Constituent Affairs is responsible for processing discrimination complaints that we receive from constituents, which includes parents of children and youth involved with CYFD, resource families, children and youth who are or have received services through CYFD and the general public.

New Mexico State Ethics Commission

800 Bradbury St. NE
Albuquerque, NM 87106
(505) 827-7800

The State Ethics Commission is an independent state agency created to promote full compliance with the state laws that require our state government to be democratic, responsive to the public's interest, and ethical.

Peer-to-Peer Warmline

1-855-466-7100

The Peer-to-Peer Warmline partners with the New Mexico Crisis and Access Line to provide Resource Foster Parent Peer Support Services (FPPSS) to New Mexico resource families and assists them in providing care to foster children and youth as well as navigating child and youth serving systems. Calls can be made from 7 am to 11:30 pm every day, and text messaging is available from 6 am to 11 pm daily.

Youth Grievances

(505) 228-6797 (call or text)

CYFD.YouthGrievance@state.nm.us

Youth in foster care who feel their rights have been violated have the right to file a grievance with CYFD. The Youth Bill of Rights can be found at cyfd.org or on page 74 Of this guide.

Court and Legal Resources

Family Services (Supervised Visitation)

(505) 994-0161

Grandparents Are Indeed Necessary (GAIN)

(505) 296-3589

Assists grandparents in getting visitation rights. Holds regular meetings at the Bear Canyon Senior Center in Albuquerque.

Grandparents' Rights Hotline

(800) 432-2080

Counselors discuss grandparents' visitation rights and guardianship issues involving grandchildren.

Guardianship Legal Helpline

(505) 217-1660 or (800) 980-1165

The Guardianship Legal Helpline provides legal services to grandparents raising grandchildren and other kinship caregivers of children whose parents are unwilling or unable to take care of them. Types of legal services include information and advice about kinship guardianship, help for people representing themselves, and representation by a lawyer. This helpline is provided by Law Access New Mexico and Pegasus Legal Services for Children.

Law Access New Mexico

(505) 998-4529 or (800) 340-9771

A legal helpline providing legal advice in civil, landlord/tenant, and domestic cases for low-income people as well as referrals to appropriate services/agencies.

National Center for Youth Law

(510) 835-8098

info@youthlaw.org

www.youthlaw.org

Provides information on both juvenile justice and child welfare issues.

New Mexico CASA (Court Appointed Special Advocates)

(505) 977-3432

<https://newmexicocasa.org>

2340 Alamo Ave SE, Ste 112

Albuquerque, NM 87106

The New Mexico CASA Association develops and supports local programs throughout New Mexico that provide quality volunteer advocacy in court for children who are abused and neglected.

New Mexico Family Advocacy Program

(505) 827-4800

nmfap.nmcourts.gov

The New Mexico Family Advocacy Program provides parents in child welfare cases an interdisciplinary team of lawyers, social workers, and parent mentors so that families are given the proper advocacy and support for reunification or other preferred outcomes.

Data on Child Safety, Permanency, and Well-Being

CYFD Protective Services 360 Reports

cyfd.org/about-cyfd/publications-reports

These quarterly reports, produced by CYFD's Research, Assessment, and Data Bureau, provide data on children in care broken down by state, CYFD regions, and county.

Kids Count

www.aecf.org/work/kids-count

Providing state legislators, public officials, and child advocates with the reliable data, policy recommendations, and tools needed to advance sound policies that benefit children and families.

NM Community Data Collaborative (NMCDC)

New Mexico Community Data Collaborative (arcgis.com)

A network of public health analysts and advocates from state agencies and non-government organizations in NM focusing on community health assessment. Gathers and disseminates neighborhood-level data through maps using ArcGIS Online.

YRRS (Youth Risk and Resiliency Survey)

www.youthrisk.org

This survey, funded by the Centers for Disease Control and Prevention and administered by NM Dept. of Health and NM Public Education Dept., offers data on New Mexico middle and high school students' reporting of safety, health, and risk and resiliency factors.

Domestic Violence

The following resources are available by county and are listed by county alphabetically. Note that for the safety of clients, most domestic violence resources do not publish a physical address; please call or visit the website for more information.

BERNALILLO COUNTY

Domestic Violence Resource Center
www.dvrcnm.org
(505) 248-3165

Domestic Violence Resource Center {DVRC} offers individual advocacy and support, legal advocacy, individual counseling by licensed counselors, case management, and financial empowerment classes. DVRC has advocates embedded at the District Attorney's Office and Second District Courts and provides critical education and community outreach programs.

Enlace Comunitario
www.enlacenm.org
(505) 246-8972

Enlace Comunitario focuses on services

and support for survivors in the Latino Immigrant Community. They offer individual support and advocacy, enhanced legal advocacy (with an attorney on staff), support groups, individual

counseling with licensed counselors, access to transitional housing, and life-skills classes for children and teens.

SAFE House
www.safehousenm.org
(800) 773-3645

SAFE House offers immediate shelter, individual advocacy, support groups, licensed counselors, transitional housing, and programs for children and teens.

CHAVES COUNTY

Roswell Refuge for Battered Adults
www.roswellrefuge.org
(575) 627-8361

Roswell Refuge offers immediate shelter, individual advocacy, support groups, and specialized programming for children in shelter. Roswell Refuge houses a Sexual Assault Nurse Examiner {SANE} and provides shelter and services to victims of human trafficking.

CIBOLA COUNTY

Roberta's Place
www.robertasplace.net
(505) 287-7724

Roberta's place offers immediate shelter, individual advocacy, support groups, individual counseling, a licensed counselor, substance use counseling, and specialized programming for children who have experienced trauma. Roberta's provides a client-directed and judgment-free atmosphere.

COLFAX COUNTY

Alternatives to Violence
(575) 447-5778

Alternatives to Violence offers individual advocacy and support, legal advocacy, and individual counseling.

CURRY COUNTY

Hartley House
www.nmsvdv.org
(575) 769-0305

Hartley House offers immediate shelter, individual advocacy and support, legal advocacy, and support groups.

DOÑA ANA COUNTY

La Casa
www.lacasainc.org
(800) 376-2272

La Casa offers immediate shelter, individual advocacy, legal advocacy, support groups, licensed counselors, transitional housing, financial literacy and career programs, and specialized programming for children and teens who have experienced trauma.

EDDY COUNTY

Carlsbad

Carlsbad Battered Families Shelter
carlsbadshelter.com
(575) 885-4615

Carlsbad Battered Families Shelter offers immediate shelter, kennels for companion animals, individual advocacy, counseling with licensed counselors, and a substance use counselor. This program provides specialized support for children who have been molested or sexually assaulted.

Artesia

Grammy's House
grammyshouse.org
(575) 365-5144

Grammy's House offers immediate shelter, individual advocacy and support, legal advocacy, support groups, individual counseling with licensed counselors, and specialized programs for children and teens.

GRANT COUNTY

El Refugio
www.eridv.org
(888) 538-2125

El Refugio offers immediate shelter, individual advocacy and support, legal advocacy, support groups, individual

counseling, and transitional housing. They have a Children's Coordinator that works with the children and expertise to help battered immigrants.

GUADALUPE COUNTY

See San Miguel County.

HIDALGO COUNTY

See Grant County.

LEA COUNTY

Option Inc.
www.optioninc.org
(575) 397-1576

Option Inc. offers immediate shelter, individual advocacy, safety planning, and connection to needed resources. Option Inc. also provides an educational outreach program that focuses on teen dating violence.

LINCOLN COUNTY

Help End Abuse for Life - The Nest Shelter
helpendabuseforlife.org
(866) 378-6378

HEAL offers immediate shelter with kennels for companion animals. HEAL provides individual advocacy, legal advocacy, support groups, licensed counselors, substance use counseling, and specialized programs for children who have experienced trauma. HEAL works with the Mescalero Apache Tribe VAWA program to provide culturally inclusive services.

Center of Protective Environment (COPE)
www.copedv.com
(575) 437-2673

COPE offers survivors immediate shelter, individual advocacy and support, support group, legal advocacy, support groups, and individual counseling. They have licensed counselors and an attorney on staff. Specially-trained advocates focus on child trauma and restoring their bond with a non-offending parent.

LOS ALAMOS COUNTY

See *Rio Arriba County, Santa Fe County.*

LUNA COUNTY

Luna County Healing House
(575) 546-6539

The Healing House offers immediate shelter, individual advocacy and support, legal advocacy, and support groups.

MCKINLEY COUNTY

Battered Families Services
batteredfamilies.com
(800) 634-4508

Battered Families Services offers immediate shelter, individual advocacy, and support, support groups for adult survivors and their children, and offers one-on-one counseling with a licensed counselor.

MORA COUNTY

See *San Miguel County.*

OTERO COUNTY

Center of Protective Environment (COPE)
www.copedv.com
(575) 437-2673

COPE offers survivors immediate shelter, individual advocacy and support, support group, legal advocacy, support groups, and individual counseling. They have licensed counselors and an attorney on staff. Specially-trained advocates focus on child trauma and restoring their bond with

a non-offending parent.

QUAY COUNTY

See *Curry County.*

RIO ARRIBA COUNTY

Crisis Center of Northern New Mexico
crisis-centers.org
(505) 575-3165

Crisis Center of Northern New Mexico offers survivors immediate shelter, individual advocacy and support, support groups, individual counseling by a licensed counselor, transitional housing, supervised visitation and safe exchange, and therapy for children experiencing attachment issues toward the non-battering parent.

ROOSEVELT COUNTY

See *Curry County.*

SANDOVAL COUNTY

Haven House
www.havenhouseinc.org
(800) 526-7157

Haven House offers immediate shelter with on-site kennels for companion animals. They provide individual advocacy and support, legal advocacy, support groups, individual counseling with licensed counselors, and specialized programs for children who have experienced trauma.

SAN JUAN COUNTY

Family Crisis Center
familycrisiscenternm.org/
(505) 564-9192

The Family Crisis Center offers immediate shelter with an on-site kennel for companion animals. FCC provides individualized safety planning, legal advocacy, support groups, individual counseling with licensed counselors, and counseling for children ages five and up. They also have specialized programming and support for those over the age of 60 who have been abused or are victims of

exploitation.

Navajo United Methodist Center New Beginnings Program
navajoumc.org/
(505)325-7578

Navajo United Methodist Center New Beginnings Program offers a longer-term transitional housing program for survivors of domestic violence, with on-site kennels for companion animals. They provide individual advocacy and support, support groups, and specialized programming for children who have experienced trauma.

SAN MIGUEL COUNTY

Tri-County Family Justice Center
(505) 425-1048

Tri-County Family Justice Center offers individual advocacy, legal advocacy, support groups, licensed counselors, access to substance use counseling, and a range of programs including Dress for Success, massage, and wellness programs.

SANTA FE COUNTY

Esperanza Shelter for Battered Families
esperanzashelter.org
(505) 473-5200 or (800) 473-5200

Esperanza Shelter offers immediate shelter, individual advocacy, legal advocacy, support groups, individual counseling with licensed counselors, substance-use counseling, and programs for children and teens. Esperanza's staff participate in the "Legacy of Hope" project to respond effectively to the trauma that survivors and their dependents have faced.

SIERRA COUNTY

Domestic Abuse Intervention Center
(575) 894-3557

Domestic Abuse Intervention Center offers immediate shelter, individual advocacy and support, legal advocacy, and referrals to additional resources.

SOCORRO COUNTY

El Puente del Socorro
(575) 835-0928

El Puente offers immediate shelter, on-site kennels for companion animals, individual advocacy and support, extensive legal advocacy, transitional housing, and support groups for survivors.

TAOS COUNTY

Community Against Violence
taoscav.org
(575) 758-9888

Community Against Violence offers survivors immediate shelter, kennels for companion animals, individual advocacy and support, transitional housing programs, legal advocacy with an attorney on staff, support groups, individual counseling, dog group, transportation, and child care. A family advocate works with child trauma and restoring their bond with a non-offending parent. Community Against Violence houses one of the state's Child Advocacy Centers.

TORRANCE COUNTY

Torrance County Project Office
(505) 705-0925

Torrance County Domestic Violence Program offers individual advocacy and support, including connecting survivors to critical community resources.

UNION COUNTY

See Colfax County.

VALENCIA COUNTY

Valencia Shelter for Victims of DV
www.valenciashelterservices.org
(505) 864-1383

Valencia Shelter offers immediate shelter, individual advocacy, support groups, and specialized programs for children, including counseling and play-therapy.

Early Intervention

Abrazos Family Support Services

www.abrazosnm.org

PO Box 788, Bernalillo, NM 87004
(505) 867-3396
info@abrazosnm.org

Provides: Family Infant Toddler (FIT) Program

CHI St. Joseph's Children

www.stjosephnm.org

Albuquerque Office
1516 5th St. NW, Albuquerque, NM 87102
(505) 924-8000

Deming Office
201 East Pine St., Deming, NM
(575) 543-5900

Las Cruces Office
151 S. Walnut St., Suite C-1
Las Cruces, NM 88001
(575) 640-1818

Roswell Office
323 N. Main St., Roswell, NM 88201
(575) 755-2229

San Fidel (Cibola) Office
26 School Rd., San Fidel, NM 87049 (505)
552-1023

Provides: Home Visiting and Case Management Services, First Born Program

New Mexico Early Childhood Education & Care Department (ECECD) Family Infant Toddler (FIT) Program

(800) 832-1321

www.nmececd.org/fit-families

Life Roots

www.liferootsnm.org

1009 Golf Course Road, Suites 105 & 106
Rio Rancho, NM 87124
(505) -962-0270

Provides: Family Infant Toddler (FIT) Program, Love and Logic Early Childhood Parenting Made Fun, and a toddler Educational Play Group.

Native American Professional Parent

Resource (NAPPR)

www.nappr.org

2201 San Pedro NE, Bldg. 3
Albuquerque, NM 87110
(505) 345-6289

Tribal Home Visiting Program, Early Intervention, Early Head Start, Dental Support Center

PB & J Family Services

(505) 867-2356

www.pbjfamilyservices.org

255 A Camino Del Pueblo
Bernalillo, NM 87004

Provides: Therapeutic Parenting Program, FIT/Early Intervention, Pre-K Extended Day Program, NM Home visiting, TLR Family Support Services.

Southwest Pueblo Consultants and Counseling Services (SWPCC)

(505) 888-9769

www.swpccs.com

southwestpuebloccs@hotmail.com

Partners for Healthy Baby Program

Education

NM Public Education Department (NM PED)

[New Mexico Public Education Department](http://www.nmpe.org)

Provides important information and quick links for parents, families, and educators on all public education programs, initiatives, resources, and supports.

Wright's Law

www.wrightslaw.com

Information about special education law and advocacy for children with disabilities.

Employment Assistance

NM Department of Workforce Solutions

www.dws.state.nm.us/en-us

Locations statewide

NM Division of Vocational Rehabilitation

(DVR)

www.dvr.state.nm.us

Locations statewide

Division of Vocational Rehabilitation provides short-term employment assistance: job development, placement, & coaching

Families and Communities

Children, Youth and Families Department (CYFD)

cyfd.org

The CYFD website houses information about the department's mission and programs serving and supporting children, youth, and families across the state of New Mexico.

Pull Together

www.pulltogether.org

Pull Together is about enlisting parents, families, community members, and young people in the fight to make sure our children are safe, cared for, and ready to succeed. The website provides links to parent support, child care, home visiting, community events and ways to get involved locally.

Income Support

Human Services Department of New Mexico (HSD)

Locations Statewide

Consolidated Customer Service Center:
(800) 283-4465

<https://www.hsd.state.nm.us/>

HSD designs and delivers innovative, high-quality health and human services that improve security and promote independence for New Mexicans in their communities.

Income Support Division

(505) 827-7263

www.hsd.state.us/isd

The mission of the Income Support

Division is to relieve, minimize or eliminate poverty and to make available certain services for eligible low-income individuals and families through statewide programs of financial assistance, food assistance, employment assistance, and training services.

SHARE New Mexico

www.sharenm.org

SHARE New Mexico manages New Mexico's largest, most up-to-date and comprehensive resource directory. Share NM was created to help organizations, non-profits and individuals working to improve the quality of life in New Mexico. Built by and for New Mexicans, Share NM provides convenient access to reliable data on New Mexico community health resources, social services, initiatives and counties. Share NM also simplifies the process of offering, finding and applying for grants and funding.

Supplemental Nutrition Assistance Program (SNAP)

(800) 221-5689

www.fns.usda.gov/snap

This website provides information about eligibility for food stamps, how and where to apply, and more.

Supplemental Security Income (SSI)

(800) 772-1213

www.ssa.gov/disabilityssi

A federal program providing financial assistance to people with disabilities.

Women, Infants & Children (WIC)

(866) 867-3124

www.nmhealth.org/about/phd/fhb/wic/

Supplemental food for pregnant women, infants, and young children.

Lesbian, Gay, Bisexual, Transgendered, and Questioning Youth

It Gets Better

itgetsbetter.org

The It Gets Better Project's mission is to uplift, empower, and connect lesbian, gay, bisexual, transgender, and queer (LGBTQ+) youth around the globe.

PFLAG Albuquerque

(505) 873-7373

pflag.org

Promotes the health and well-being of gay, lesbian, bisexual and transgendered persons, their families, and friends through support, to cope with an adverse society, education, to enlighten an ill-informed public, and advocacy, to end discrimination, and to secure equal civil rights.

NM Genders and Sexualities Alliance Network

(505) 983-6158

The NMGSA Network serves and empowers LGBTQ+ and allied youth, ages 13-24, to create safer, more inclusive, and welcoming schools while also building stronger, more resilient young leaders and activists.

Transgender Resource Center of New Mexico

Business: (505) 200-9086

Hotline: (505) 440-3402

lgbtcenters.org

120 Morningside Dr. NE

Albuquerque, NM

Offers a wide range of services and programs including community outreach and education, mental health services, legal support, and civic engagement for trans people across the lifespan.

Mental Health

NAMI (National Alliance for the Mentally Ill) of New Mexico

(800) 950-6264

naminewmexico.org

3900 Osuna Rd NE

Albuquerque, NM 87109

Serves residents across the state with free mental health support, online groups, resources, and education.

National Child Traumatic Stress Network

www.nctsn.org

The NCTSN works with established systems of care in the health, mental health, education, law enforcement, child welfare, juvenile justice, and military family service systems to raise the standard of care and improve access to services for traumatized children, their families, and communities throughout the United States.

Medical Services

Amplified Therapy

(575) 535-2499

amplifiedtherapy.com/

94 Box Canyon Road Cliff, NM 88028

A family-owned business that specializes in providing premier pediatric healthcare services to southwest New Mexico and eastern Arizona. ATI is an NM FIT provider in Catron, Grant, Hidalgo, and Luna Counties. ATI also provides services to rural school districts throughout the southwest region.

Ben Archer Health Centers

bahcnm.org

Multiple Locations

The mission of Ben Archer Health Center, Inc. is to significantly improve the health status of served populations through the prevention of illness, the promotion of health education, the provision of a quality primary care home, access to the underserved, and a strong commitment to chronic disease management.

Planned Parenthood of New Mexico

(800) 230-7526

www.plannedparenthood.org/planned-parenthood-rocky-mountains

Multiple Locations

Planned Parenthood's purpose is to build a world in which every person—regardless of race, income, insurance, gender identity, sexual orientation, abilities, or immigration status—can receive expert, compassionate health care, education, and information without shame or judgment.

Native American Resources

Indian Country Child Trauma Center (ICCTC)

(405) 271-8858

(405) 271-2931

www.icctc.org

ICCTC was established to develop trauma-related treatment protocols, outreach materials, and service delivery guidelines specifically designed for American Indian and Alaska Native (AI/AN) children and their families. It is housed at the University of Oklahoma Health Sciences Center in the Center on Child Abuse and Neglect.

New Mexico State ICWA

www.nmstateicwa.org

This resource provides information about state efforts to codify ICWA into state law, led by a diverse coalition of stakeholders who understand the needs of Indian children and families.

New Mexico Organizations

Center for Health Innovation (CHI)

(575) 534-0101

chi-phi.org Multiple Locations

A nonprofit organization focused on developing and implementing strategies, models, and policies to improve community health for underserved populations at local, state, and national levels. Programs primarily focus on New Mexico.

Four Corners Telehealth Consortium

fourcornerstelehealth.org

Four Corners Telehealth serves as the health information technology (HIT) regional extension center (REC) for New Mexico, Arizona, Utah, and Colorado. Helps healthcare providers become meaningful users of electronic health records (EHR) by providing information and technical assistance.

NM Area Health Education Center (AHEC)

(505) 272-9761

hsc.unm.edu/about/administrative-departments/community-health/programs/ahec/

Works to improve access to quality healthcare for the people of NM through education and community partnerships.

Other Community Resources

NM Association of Community Partners (NMACP)

(505) 321-1292

nmacp.org

Supports Community Action Agencies (CAAs) in NM, which serves the most vulnerable population in the state. Provides technical assistance, training, and supports community-based partnerships.

Suicide Prevention

New Mexico Crisis and Access Line

Call toll-free anytime 24/7/365

1-855-NMCRISIS (662-7474)

nmcrisisline.com

If you or a loved one is experiencing any kind of emotional crisis, mental health, or substance use concern, you can find help 24 hours a day, seven days a week, by calling the New Mexico Crisis and Access Line or Peer-to-Peer Warmline.

Suicide Prevention Resource Center (SPRC)

www.sprc.org

The Center's website promotes a public health approach to suicide prevention. SPRC is the nation's only federally supported resource center devoted to advancing the National Strategy for Suicide Prevention. They provide technical assistance, training, and materials to increase the knowledge and expertise of suicide prevention practitioners and other professionals serving people at risk for suicide.

Suicide Risk and Prevention for Lesbian, Gay, Bisexual, and Transgender Youth

<https://www.lgbtqiahealtheducation.org/wp-content/uploads/2018/10/Suicide-Risk-and-Prevention-for-LGBTQ-Patients-Brief.pdf>

This paper, published by the Suicide Prevention Center, highlights the higher risk of suicidal behavior among lesbian, gay, and bisexual (LGB) youth. This higher risk may well extend to transgender youth. Additionally, the paper provides recommendations to reduce this risk by addressing stigma and prejudice at the institutional and individual levels.

Trauma

Child Trauma Academy

www.childtrauma.org

CTA is a not-for-profit organization based in Houston, Texas working to improve the lives of high-risk children through direct service, research, and education. The Academy recognizes the crucial importance of childhood experience in shaping the health of the individual, and ultimately, society. CTA seeks to help maltreated and traumatized children.

National Child Traumatic Stress Network

www.nctsn.org

The NCTSN's mission is to raise the standard of care and improve access to services for traumatized children, their families, and communities throughout the United States. The Network works with established systems of care the health, mental health, education, law enforcement, child welfare, juvenile justice, and military family service systems to ensure that there is a comprehensive trauma-informed continuum of accessible care.

Indian Country Child Trauma Center (ICCTC)

www.icctc.org

ICCTC was established to develop trauma-related treatment protocols, outreach materials, and service delivery guidelines specifically designed for American Indian and Alaska Native (AI/AN) children and their families. The Indian Country Child Trauma Center is part of the National Child Traumatic Stress Network funded by the Substance Abuse Mental Health Services Administration (SAMHSA) under the National Child Traumatic Stress Initiative. It is housed at the University of Oklahoma Health Sciences Center in the Center on Child Abuse and Neglect.

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