

Advisor

Spring 2012



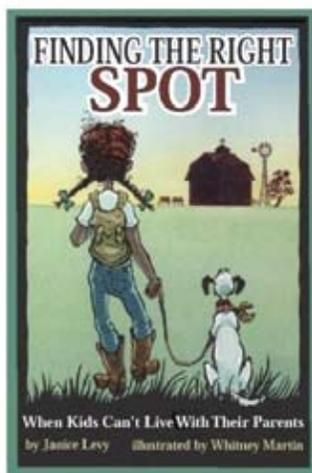
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Finding the Right Spot

by Janice Levy



Magination Press, 2004
ISBN-10: 1591470749
ISBN-13: 978-1591470748

When Kids Can't Live With Their Parents

“**A**unt Dane takes care of kids like me when their real parents can't. Like when your mom loses her job and can't pay the rent and drinks too much and gets sick so you stay home from school to take care of her. That's what happened to me.”

Finding the Right Spot is a story for all kids who can't live with their parents, regardless of the circumstances. It's a story about resilience and loyalty, hope and disappointment, love, sadness, and anger, too. It's about whether life is fair, and wondering what will happen tomorrow, and talking about all of it. And finally, it's about what makes the spot you're in feel right.

A Note to Caregivers by Jennifer Wilgocki, MS, and Marcia Kahn Wright, PhD, discusses the emotional experience of children who are in foster care, kinship care, or otherwise not living with their parents, and the vital support that the adults in their lives can offer.

FFA Local Committee AGMs

AGMs will be taking place across the province in the coming weeks. For more information about meetings taking place in your community, please call the Provincial Office 1.800.276.2880. Tentative dates are as follows:

Estevan/Weyburn—February 16

Melfort—March 1

Regina—March 10

Prince Albert—March 12

Moose Jaw—March 13

North Battleford—March 15

Saskatoon—March 15

Yorkton—March 15

Nipawin—March 23

Pipestone—March 23

Lloydminster—March 29

LaLoche—End of March

LaRonge—End of March

Letter from the Executive Director

On behalf of my family, the Provincial Board of Directors and office staff, I would like to extend best wishes for the New Year to the members of the Saskatchewan Foster Families Association. I look forward to working together with our members and the Ministry of Social Services in 2012 and continuing to build a strong foster family support network as we move forward with many new initiatives.

I am very pleased to share with you some exciting updates. In December, Saskatchewan Government Insurance (SGI) announced the donation of over 2800 books to be distributed to foster children, and the Saskatchewan Foster Families Association will be matching the donations providing books to the biological children of our members.

In the beginning of February, the Ministry of Social Services announced that First Aid and CPR training would be mandatory for all foster families across the province. In partnership with the Saskatchewan Foster Families Association, St. John Ambulance will be providing training in First Aid and CPR (Level B) to all government approved foster homes. The health and safety of everyone in our homes, particularly the most vulnerable children and

youth, is of utmost importance. As an association we are very pleased with the announcement, as our members have put forward over the past number of years resolutions requesting First Aid and CPR training be provided. Please watch your mailbox for further information.

During the month of March, the Provincial Office staff will be attending Foster Families Association Local Committee Annual General Meetings throughout the province

The AGM and conference will be held at the Radisson Hotel and the theme for this year's conference is "Our Children, Our Future".

distributing the books that were donated by SGI. Please plan to attend events that will be co-hosted by your local Foster Families Committee and the Saskatchewan Foster Families Association. If you would like more information on events that are being held in your area, please call the provincial office or your Local Foster Families Association Committee President.

Plans are well under way for this year's Provincial Annual General Meeting (AGM) and Conference that will be held on June 8 & 9, 2012 in Saskatoon. The AGM and conference will be held at the Radisson Hotel and the theme for this year's conference is



"Our Children, Our Future". Please watch for more information, and plan to attend this exciting event.

I would like to thank the Provincial Board of Directors and the staff of our Association for their time, commitment and continued support to foster families across Saskatchewan. Also, let me take this opportunity to thank you, our members, for the continued dedication to the foster care program and to the province's most valuable resource, our children and youth.

Deb Davies

Deb Davies
Executive Director, SFFA

**DID YOU
KNOW**



Your family is your greatest asset. Health related expenses that are not covered by your provincial health plan can result in substantial costs. Now you can take advantage of a range of benefits and services for you and your family. There is an optional plan to suit everyone's health and budget. Dental services, prescription drugs, vision care and registered specialists are a few of the health expenses each of us faces without coverage. For more information, visit our website at www.sffa.sk.ca under the news section to read more about health and dental plans for Saskatchewan foster families.

Discounted Bus Pass Program renewed

The province has allocated nearly \$850,000 in funding to renew the Discounted Bus Pass Program to the end of March 2012.

“This program is a good example of how the province and municipalities are working together to support people with lower incomes to enter or remain in the workforce and participate in community activities,” Social Services Minister June Draude said. “Renewing the Discounted Bus Pass Program means that people with lower incomes in six Saskatchewan cities will continue to have affordable access to public transportation.”

As part of this latest funding renewal, the province will boost its contribution per bus pass to \$24 from \$21, an increase of more than 14 per cent. Cities are permitted to adjust the price of the discounted bus pass, provided the price they charge to clients is kept at least \$24 lower than the price of a regular monthly pass. Cities that participate in the program also help promote the discounted bus pass with the goal of increasing ridership.

The Discounted Bus Pass Program is available in Saskatoon, Regina, Prince Albert, Swift Current, Yorkton and

Moose Jaw. To qualify for a discounted bus pass, individuals must be receiving benefits through the Saskatchewan Assistance Program, Saskatchewan Assured Income for Disability program, Transitional Employment Allowance, Provincial Training Allowance, or Saskatchewan Employment Supplement. Approximately 67,000 monthly discounted bus passes are sold each year through the program.

For more information, contact:
 Brian Miller
 Social Services, Regina
 Phone: 306-787-0531
 Email: brian.miller3@gov.sk.ca

Leisure Access Program and/or Discounted Bus Pass Program

The Leisure Access Program allows eligible low-income residents within the city to participate in City of Saskatoon leisure facilities and programs. The program includes unlimited admission to drop-in programs at the City of Saskatoon Leisure Centres and one registered program per year.

The Discounted Bus Pass Program allows Saskatoon residents with low income, the opportunity to purchase a monthly bus pass at a reduced rate. This applies to each eligible family member.

Adult Pass \$63.75 Child Pass \$38.25
 High School Pass \$45.90

Qualification: If your total household income (*Before Tax, Line 150 of your most recent Notice(s) of Assessment(s) from Canada Revenue Agency*) is not more than the amounts described, you are eligible for the Leisure Access Program. You are qualified for one year from the date of approval.

NOTE: We do not accept applications by fax or email. There is no application deadline. Applicants will be notified by mail regarding the status of their application within two weeks of applying.

# in the household	1	2	3	4	5	6	7
household income	\$19,496	\$24,269	\$29,836	\$36,226	\$41,086	\$46,339	\$51,591

How to Apply:

1. Leisure Access Card and/or Discounted Bus Pass Program (Low-Income Residents)

- Application forms are available at all City of Saskatoon leisure centres and Saskatoon Transit Services Customer Service Centre.
- Include copies of your last year’s Notice of Assessment(s) from Canada Revenue Agency, and a copy of a utility bill with your current address on it.
- Mail your completed application to:
 Community Development Branch
 3130 Laurier Drive, Saskatoon SK S7L 5J7

2. Leisure Access Card and Bus Pass (Social Service Recipients Only)

- Complete a Bus Pass/Leisure Card application form at the Social Services office at 160 - 2nd Avenue South (933-5960).
- Take the completed application form to Saskatoon Transit, Customer Services Centre, 226 - 23rd Street East (in the Downtown Bus Terminal) to purchase a reduced price bus pass.
- To obtain a Leisure Card, take the completed application form to one of our indoor leisure centres.

If you have any questions about the Leisure Access Program contact the Community Development Branch at 975-3383. For information on the Discounted Bus Pass Program contact Transit Services at 975-3100.

New Deputy Minister of Social Services named

Deputy Minister to the Premier Doug Moen has announced an appointment to the senior leadership of the Saskatchewan Public Service. Kenneth Acton has been appointed Deputy Minister of Social Services effective January 1, 2012. Acton has held numerous senior leadership roles within the Ministry of Justice, most recently serving as Assistant Deputy Minister of the Courts and Civil Justice Division.

“I want to thank Ken for accepting this challenging and important assignment,” Moen said. “Ken will

be critical in leading the ministry executive team with ensuring all citizens, including children, youth and families, are safe, secure and independent.”

After a successful and fulfilling public service career of nearly 35 years, Marian Zerr will be leaving the position of Deputy Minister of Social Services effective December 31, 2011. Marian has held many senior leadership positions both within the provincial and federal governments. “I would like to acknowledge Marian for her leadership and contributions

to the Ministry of Social Services and to the Government of Saskatchewan,” Moen said. “In particular, I would like to thank Marian for her leadership with protecting Saskatchewan’s vulnerable people and supporting their inclusion in the province’s prosperity.”

For more information, contact:

Kathy Young

Executive Council

Regina

Phone: 306-787-0425

Email: kathyyoung@gov.sk.ca

Cell: 306-526-8927



Canadian Foster Family Association Poster Contest 2012

Who can enter:

All children and youth living in foster homes between the ages of 2-19 years of age (including the natural children/youth of foster families).

Categories: 2-6 years 7-12 years 13-19 years
Bursaries will be awarded in all categories (funded by the 2011 IFCCO Conference Committee)

When and where the posters will be judged:

The winning posters from each province/territory MUST be delivered to the CFFA Poster Contest Chairperson at the Annual CFFA Conference in Newfoundland no later than the evening of May 29, 2012. The CFFA Directors will judge the posters during the National Working Group and the winners will be announced at the CFFA Annual General Meeting.

Guidelines for the posters:

The following guidelines MUST be followed in order to qualify for the Contest.

- The poster shall measure approx 57 cm (22.5 inches) by 36 cm (14.5 inches). This is one half of a Bristle Board.

- The printed name, address, phone number, and interpretation shall be on the back of the poster. This information shall also be printed on a separate piece of paper and attached to the back by a paper clip.
- A caption or other words of the child or youth are welcome.
- The first and second place provincial and territorial winners from each category shall be eligible for the CFFA judging.
- The Director from each provincial/territorial office can bring the posters to the conference or they can be mailed to the CFFA Poster Contest Chairperson, no later than May 20, 2012 to:

**Mary Smith, CFFA Poster Conference
Chairperson (902-443-7716)
29 Rosedale Ave, Halifax NS B3N 2J2**

Please Note: Upon receipt of posters they then become the property of the CFFA and may be used for CFFA purposes.

“Thank you in advance for your participation in this event.”

Children and vitamins *by Dr. Alan Greene*

Find out what you need to know about filling the gaps in your child's diet with vitamins.

Vitamins for Kids

- Breastfed babies should supplement with 200 IU of vitamin D daily.
- Only 2 percent of children eat the recommended number of daily servings from each of the four food groups.
- Seven out of 10 boys and 9 out of 10 girls don't get sufficient calcium during key times of growth.
- A daily multivitamin is a great way to fill in the nutritional holes in your child's diet.
- Read vitamin labels to avoid additives such as chemical dyes, aspartame and butylated hydroxytoluene.

No matter how hard we try to ensure our kids eat a healthy, balanced diet, the reality is many children aren't getting all the nutrients they need to thrive. Here's how the right vitamin supplements can boost your child's health.

Do infants need supplements?

Breast milk is the perfect food. As long as babies are drinking breast milk, they are filling their complex nutritional needs—except when it comes to vitamin D, which is linked to building strong bones and can also help prevent breast cancer, colon cancer and Parkinson's disease later in life.

Since we get this vitamin from the sun, and not our food supply, babies

should receive 200 IU of vitamin D daily. (Most infants spend a great deal of time indoors and the depleted ozone makes it necessary for us to cover them up when they are outside.) Formula-fed babies don't require additional supplements, however, as formula is already supplemented with all the vitamins your baby needs, including vitamin D.

After age one

When your baby turns one, he'll be eating mostly solids and milk to fill his caloric needs. In a perfect world, he should be able to get all the vitamins and minerals he needs from eating fruits, veggies, whole grains, protein and dairy. But we live in a world where diets often fall short of perfection. It's estimated that only two percent of children eat the recommended daily number of servings from each food group.

There are 13 major micronutrients—I call them the Greene 13—that concern me the most when it comes to children and nutrition. These include: calcium, fiber, folic acid, iron, magnesium, omega-3 fatty acids (especially DHA), phosphorous (except for children who drink carbonated beverages—they get too much phosphorus), potassium, vitamin A, vitamin C, vitamin D, vitamin E and zinc.

Most kids don't get enough of one or more of these important nutrients. For example, seven out of 10 boys and nine out of 10 girls don't get sufficient calcium during key times of growth. The solution? A daily multivitamin is a great way to fill in

the nutritional holes.

I recommend starting to supplement after your child's first birthday (unless he is on a toddler formula that already has the extras added). The body and brain are growing especially fast up to age three, when many kids are notoriously picky eaters. A multivitamin now can pay off later. A June 2001 study published in *Neuroscience and Biobehavioral Reviews* found a boost in non-verbal intelligence in children who ate a daily multivitamin.

What should you look for in a multivitamin?

Avoid gummy or candy vitamins. Daily candy is not a lesson kids need to learn, and it can be a hard habit to break. It's essential that you read labels. Many popular brands contain additives such as: hydrogenated vegetable oil, chemical dyes FD&C Blue #2 Lake, FD&C Red #40 Aluminum Lake, FD&C Yellow #6 Aluminum Lake, artificial flavors, aspartame, sugar, butylated hydroxytoluene (this preservative is a suspected carcinogen banned in all foods in Japan and Australia, and in baby foods in the U.S.), carrageenan, gelatin, and pregelatinized starch.

Start at your local health food store and ask for help selecting the best multivitamin for your child. Make sure the vitamin contains 50 to 100 percent of the daily recommended value of each of the Greene 13. If you can't find everything in one package, you may have to buy an additional supplement for a few of these missing nutrients or just make extra sure they are in your child's diet.

Facts on carbon monoxide

As the colder weather starts to settle in, people use fuel-burning appliances more frequently in order to keep themselves warm. People need to be extremely vigilant when using these appliances to prevent deadly exposure to the serious hazards of carbon monoxide (CO).

Carbon monoxide is often called the “silent killer”—its victims cannot see it, smell it or taste it. It is an invisible, odorless gas that can poison, and even kill you. Breathing in carbon monoxide can make you feel sick, and feel as if you have the flu. You may experience headaches, nausea, dizziness and shortness of breath. People most at risk are infants, small children, pregnant women, elderly people, and people with heart or lung problems.

Carbon monoxide gas is produced by the incomplete burning of fuels. It can be released by gas furnaces, hot water heaters, cars, fireplaces, wood stoves and kerosene heaters. Faulty burners or clogged chimneys are often part of the problem. To avoid the production of CO, you

should have your chimney, furnace and gas-fired appliances checked by professional technicians every year. In Ontario alone, from 2001 to 2007, there have been 74 accidental deaths from asphyxia due to vehicle exhaust and furnace fumes. In 2008, the London Fire Department responded to over 800 calls from people whose CO alarms sounded or who suspected they might have been exposed. In many cases, fire crews found dangerous levels of carbon monoxide.

A carbon monoxide detector is the best way to protect you and your family from this potentially deadly threat. Install CO alarms where they can be easily heard, outside each sleeping area and on every level of the home. When installing a CO alarm, always follow the manufacturer’s instructions. Test CO alarms at least once a month and replace batteries according to manufacturer’s instructions.

To reduce the chances of you or a loved one getting carbon monoxide poisoning, follow these tips:

- Eliminate CO at the source. Make the maintenance of your furnace, fireplace, and all fuel-burning appliances an absolute priority. Have them checked and cleaned each year.
- Install a certified carbon monoxide alarm in your home and check it regularly to make sure the battery is working.
- Know the symptoms of CO poisoning. If they appear, it is important to get everyone, including pets, outside to fresh air immediately.
- Never heat your home with a gas stove.
- Never use a barbeque, charcoal or hibachi grill in the home or in an enclosed area.
- During and after a snowstorm, make sure vents for the dryer, furnace, stove and fireplace are clear of snow.
- Never use a gas-powered generator inside your home.

If your CO alarm sounds, make sure to get out of your home immediately and call 911 from a safe place. (Canadian Safety Council)

2012 Saskatchewan Foster Families PAGM

Friday, June 8

Schedule:

8:30 am – Opening Remarks

8:45 am – Overview on Governance (mandatory for all delegates to attend)

1:00 pm - Annual General Meeting and Elections

2012 Saskatchewan Foster Families Conference & Honouring Banquet

“Our Children, Our Future”

Friday, June 8 and Saturday, June 9

Radisson Hotel
405 20th Street East
Saskatoon, Saskatchewan



What is child traumatic stress?

What is child traumatic stress, how does it develop, and what are the symptoms? To answer these questions, we first have to understand what trauma is.

From a psychological perspective, trauma occurs when a child experiences an intense event that threatens or causes harm to his or her emotional and physical well-being.

more traumas over the course of their lives and develop reactions that persist and affect their daily lives after the traumatic events have ended. Traumatic reactions can include a variety of responses, including intense and ongoing emotional upset, depressive symptoms, anxiety, behavioral changes, difficulties with attention, academic difficulties,

about child traumatic stress, we're talking about the stress of any child who's had a traumatic experience and is having difficulties moving forward with his or her life.

When we talk about PTSD, we're talking about a disorder defined by the American Psychiatric

Association as having specific symptoms: the child continues to re-experience the event through nightmares, flashbacks, or other symptoms for more than a month after the original experience; the child has what we call avoidance or numbing symptoms—he or she won't think about the event, has memory lapses, or maybe feels numb in connection with the events—and the child has feelings of arousal, such as increased irritability, difficulty sleeping, or others. Every child diagnosed with PTSD is experiencing child traumatic stress, but not every child experiencing child traumatic stress has all the symptoms for a PTSD diagnosis.

And not every child who experiences a traumatic event will develop symptoms of child traumatic stress. Whether or not your child does depends on a range of factors. These include his or her history of previous trauma exposure, because children who have experienced prior traumas are more likely to develop symptoms after a recent event. They also include an individual child's mental and emotional strengths and weaknesses and what kind of support he or she has at home and elsewhere. In some instances, when two children encounter the same situation, one will develop ongoing difficulties and the other will not. Children are unique individuals, and it's unwise to make sweeping

Not every child who experiences a traumatic event will develop symptoms of child traumatic stress. Whether or not your child does depends on a range of factors.

Trauma can be the result of exposure to a natural disaster such as a hurricane or flood or to events such as war and terrorism. Witnessing or being the victim of violence, serious injury, or physical or sexual abuse can be traumatic. Accidents or medical procedures can result in trauma, too. Sadly, about one of every four children will experience a traumatic event before the age of 16.

When children have a traumatic experience, they react in both physiological and psychological ways.

Their heart rate may increase, and they may begin to sweat, to feel agitated and hyperalert, to feel "butterflies" in their stomach, and to become emotionally upset. These reactions are distressing, but in fact they're normal — they're our bodies' way of protecting us and preparing us to confront danger.

However, some children who have experienced a traumatic event will have longer lasting reactions that can interfere with their physical and emotional health.

Children who suffer from child traumatic stress are those children who have been exposed to one or

nightmares, physical symptoms such as difficulty sleeping and eating, and aches and pains, among others. Children who suffer from traumatic stress often have these types of symptoms when reminded in some way of the traumatic event.

Although many of us may experience these reactions from time to time, when a child is experiencing child traumatic stress, they interfere with the child's daily life and ability to function and interact with others.

Some of these children may develop ongoing symptoms that are diagnosed as post-traumatic stress disorder (PTSD). When we talk about child traumatic stress, we're talking about the stress of any child who's had a traumatic experience and is having difficulties moving forward with his or her life.

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assumptions about whether they will or will not experience ongoing troubles following a traumatic event.

For children who do experience traumatic stress, there are a wide variety of potential consequences. In addition to causing the symptoms listed earlier, the experience can have a direct impact on the development of children's brains and bodies. Traumatic stress can interfere with children's ability to concentrate, learn, and perform in school. It can change how children view the world and their futures, and can lead to future employment problems. It can

also take a tremendous toll on the entire family.

The way that traumatic stress appears will vary from child to child and will depend on the child's age and developmental level. The good news is that over the past decade the mental health community has developed treatments that can help children suffering from traumatic stress. It's important to seek help from someone who has experience working with children and knows how to access resources in your community.

Although not every child will

experience traumatic stress, it's unlikely that any of us are immune from exposure to trauma. To learn more about child traumatic stress, please visit the National Child Traumatic Stress Network website at www.NCTSN.org.

*This article first appeared in the fall 2003 issue of *Claiming Children*, the newsletter of the Federation of Families for Children's Mental Health, www.ffcmh.org, which was co-produced by the Federation and the NCTSN.*

Call me your daughter



My Tana is a Southern Belle. At least that's how Tana appeared to me at three years old in a yellow ball gown, feigning heat exhaustion, the kind you might imagine be remedied only by a Mint Julep, in mid-winter Saskatchewan. Tana is now seven and over these past few years as a parent I have gone some way to figuring out how to support, nurture and advocate for my boy who wants to be a girl.

I have only begun my journey towards understanding my gender creative child. My first point was to recognize and acknowledge what was going on for Tana and his sibling Renn. I have researched and discovered much, more about my own attitudes around gender and how it is dictated by society. That is the most important piece I have learned through this whole process, to separate my own issues and prejudices from my gender creative child.

The question I am asked most about is "how do I know". Simply put, I don't know, I am listening to my child. I have seen many children playing dress-up. There is a huge difference here, this is not a faze!!! My child prefers that I introduce him as my daughter and to use female pronouns. I will now refer to Tana as she, as to her wishes. Tana refers to herself as female, she enjoys all what we consider to be feminine. How many of us could or do withstand being squashed into being who we are not?

My best source of information is from queer, lesbian and transgendered people themselves. Who better to help me understand my child than someone who has and is living it. I have been told by all that they know who they were at a very early age. Having parents and society belittle and try to change their identity only served to do irreversible damage. The percentages are high of suicides, homelessness and I cringe to say familyless LGT people. All because they were not accepted and supported mostly by family. I cannot imagine not being part of my child's life. Tana has taught me about courage, acceptance and unconditional love. Now I must educate others.

The First Nations people revered their Two Spirited people. They were thought to be gift from the creator. That is what I consider Tana, a gift.

Questions, support and information on gender creative children can be directed to Fran Forsberg 306-652-5095.

When your child engages in difficult behaviour *by David Pitonyak*

Several years ago I was asked to speak to a group of parents in Vermont. The title of the presentation was “Supporting Children With Special Needs.” Five minutes into my talk, a parent stood up and interrupted me. She insisted that I stop referring to her daughter as someone with “special needs.” I had been using the term a lot. “My daughter does not have special needs” she said. “My daughter has the same needs as anyone else. She has a need to live at home with her family. She has the need for a good education, friends, fun, and a supportive family. Sometimes you professionals — in your efforts to provide special services to people — forget the ordinary, everyday things that people need.”

I learned one of the most important lessons I have ever learned as a professional: sometimes, in our efforts to provide “special” services to people, we often forget the ordinary things people need everyday.

As awkward as I felt about the evening, I felt grateful too. I learned one of the most important lessons I have ever learned as a professional: sometimes, in our efforts to provide “special” services to people, we often forget the ordinary things people need everyday—friends, family, interesting and fun things to do, safety and security, and a chance to make a contribution to the larger community. In short, a chance to belong. What follows are ten things to remember if your child, because he or she exhibits difficult behaviours, is at risk of not belonging. If you don’t have the time or energy to read one more word, remember these two ideas: *Taking care of yourself is one of the most important things you can do. If you don’t, it will be very difficult to take care of anyone else. Remember that your child’s problem behaviours have meaning. Finding out what your child needs is the first step in supporting your child, and the people who love your child, to change.*

1. Be mom and dad first. Your love is the most powerful treatment any of us can imagine. If all the other stuff you have to do first interferes with being a parent, stop. Someone else can do some of the other necessary stuff, but nobody else can be Mom and Dad.

2. Think of challenging behaviours as “messages.” Difficult behaviours result from unmet needs. Through

his or her behaviour your child might be trying to say I’m lonely, I’m bored, I have no power, I don’t feel safe, You don’t value me, I don’t know how to tell you what I need, or even My ears hurt. A single behaviour can “mean” many things. The important point is that difficult behaviours do not occur by accident, or because someone has a disability. Difficult behaviours are expressions of real and legitimate needs. All behaviour, even if it is self destructive, is “meaning-full.”

3. Learn about person-centered planning. Unlike traditional approaches to planning, which ask questions like, “What’s wrong with you?” and “How can we fix you?,” person-centered planning focuses on questions like, “What are your capacities and gifts and what supports do you need to express them?” and “What works well for you and what does not?” and “What are your visions and dreams of a brighter future and who will help you move toward that future?”

4. Don’t assume anything. Don’t underestimate your child’s potential because of his labels or because he has failed to acquire certain skills. You can speak volumes to your child about his self-worth by always including your child in conversations and explaining things as clearly as you can. Even if you doubt your child’s ability to understand your words, know that at the very least your child will understand the tone of your voice; make sure it reflects dignity and respect as often as you can. Never speak about your child as if he was not in the room.

5. Remember that relationships can make all the difference. Loneliness may be the most significant disability your child will ever face. Many people with disabilities, young and old, live lives of extraordinary isolation. Friends are often absent altogether. Encourage, guide, and support your child to make friends, be a friend, and become a part of the community.

6. Help your child to have more fun. Fun is a powerful antidote to problem behaviours. Count the things your child enjoys, the places she likes to go. Compare this to the number of things other children enjoy, the number of places other children go. Ask yourself, “Is my child having fun? Is she experiencing enough joy? Is this an interesting life?” Help your child add to her list of interesting (and really fun) things to do. Spend time in regular community

places where people hang out. Make having fun a goal.

7. Take care of yourself, take care of your partner, and join with other parents to support each other.

Before you became a parent—or a foster parent—many of you were a partner in a relationship that had enough love, nurturing, and respect to want children in your home. Don't lose sight of that relationship. Before you were in that relationship, you were a person that someone found attractive, vital, and loving. Don't lose sight of that person. Get connected with parents of children with and without disabilities. Speak up whenever your child's future is at stake.

8. Help your child make a contribution to others.

We all need to be needed. Help your child find a way to make a contribution to others. Help your child learn to support friends (e.g., an invitation to a sleep over, learning to ask "How are you doing?" or "What's new?"). Things as simple as helping with household chores or helping out at church can teach your child that she can make a contribution.

9. Instead of ultimatums, give choices.

If your child's behaviour challenges you, help him or her find more desirable ways to express the needs underlying his or her behaviours. Instead of ultimatums, give choices. Don't assume that helping your child to have more choices means letting him do whatever he wishes. Limit-setting is an important and fair part of any relationship.

The real question is who is setting the limits and why. If limits are imposed upon children without their input, and if the limits are part and parcel of a life in which your child is powerless, even your best advice may be interpreted as one more statement of "do it my way or else."

Expect a general disregard for advice when the person receiving the advice is never heard.

10. Establish a working relationship with a good primary health care professional.

When we are sick, we are not ourselves. Many people who exhibit difficult behaviours do so because they don't feel well. The sudden appearance of behaviour problems may be a signal that your child does not feel well. Illnesses as common as a cold or earache can result in behaviours as inconsequential as grumpiness or as serious as head banging. It is important to establish a working relationship with a good primary health care physician. Don't be afraid of telling your child's doctor that you don't understand a recommendation or finding. It is important to get a clear and straightforward answer to all of your questions. Remember too that it is important to go beyond a concept of health as the absence of a disease or illness. "Feeling well" and "being healthy" involves everything from a balanced diet to a good night's sleep. Help your child to learn about "wellness."

Adapted from the essay entitled "Notes for Parents." To read the complete essay, visit <http://www.dimage.com/Parents.pdf>. David Pitonyak, Ph.D. can be reached through the website www.dimage.com.

Generous book donation helps foster children



On behalf of the Saskatchewan Foster Families Association, I would like to thank Saskatchewan Government Insurance (SGI) and its employees for the generous gift of more than 2,700 books for children

living in foster care throughout the province.

SGI's commitment to helping the children and youth that require out-of-home care in our community is sincerely appreciated.

Each year the Saskatchewan Foster Families Association continues to advance its mission of improving the quality of care for all children and youth requiring provincial services in Saskatchewan by encouraging, promoting, and assisting the

development of healthy foster homes. Through our programs and support to our members, we have seen many lives changed for the better.

The goal of the Saskatchewan Foster Families Association is to continue to make a difference in the lives of children and youth requiring out of home care and in supporting families in reunification.

Thanks again to SGI and its employees for their generous support of our organization.

Healthy grocery shopping strategies for families *by Kerry McLeod*

Just when you thought you were making healthy food choices for your family, it turns out there's a lot more to food labels than meets the eye. Here's how to decode nutrition claims on your next trip to the grocery store.



- The front label on foods is a manufacturer's prime real estate where they entice shoppers to buy their products—much of the wording (especially things like “fortified” and “sugar-free”) is pure advertising jargon.
- Labels with “zero trans fat” imply a product contains no trans fats, but labeling loopholes allow foods that contain less than 0.5 g of trans fat per serving to say they contain none at all.
- When comparing foods, the ingredient list is a good place to start. Manufacturers list ingredients in order from most to least—so if the first ingredient listed is sugar, you know you're off to a bad start.
- “Light” or “reduced calorie” juices are usually watered down, contain less juice, and have artificial sweeteners and chemical additives. It's better to give your kids 100% fruit juice and add a few ounces of water to reduce calories and sugar.
- Labels that read “made with wheat, rye, or multi-grains” don't actually tell you how much whole grain is really in the product. Look for the word “whole” before the grain to ensure you're getting a 100% whole-grain.

When you're trying to shop for healthy foods for your family, it's easy to fall for products emblazoned with marketing buzzwords such as “fortified” and “sugar-free.” But many foods that appear to be good for you are actually the opposite. Here's how to decode product labels to help you select the healthiest foods on store shelves.

Words to watch out for...

Fortified, enriched, added, extra, plus – usually mean the food has been altered or processed in some way.

Zero trans fat – implies that a product has no trans fats, but labeling loopholes allow foods that contain less than 0.5 g per serving to declare they contain none at all. (Code words for trans fats also include hydrogenated or partially hydrogenated oils.) Meanwhile, “low fat” means a product contains 3 g or less while “low in saturated fat” means it contains 2 g or less of saturated and trans fat combined.

Light, or reduced calorie – “light” refers to foods that are either reduced in fat or reduced in calories. If a product is labeled “reduced in calories,” it means it contains at least 25% fewer calories than the food to which it is compared.

When it comes to “light” or “reduced

calorie” juices, they're usually watered down, contain far less juice, and have artificial sweeteners and chemical additives. Your best bet is to buy your kids 100% fruit juice and simply cut the serving in half or add a few ounces of water to reduce calories and sugar.

Sugar-free, sugarless, or no added sugar – tell you nothing about sugar derivatives or sugar substitutes, which can yield just as many calories as table sugar and may be more harmful for you than sugar itself. Check the ingredient list for sugar substitutes, such as aspartame, neotame, erythritol, acesulfame-potassium, sorbitol and lactitol.

Made with wheat, rye, or multi-grains – implies the food is a good source of whole grains, but doesn't actually tell you how much whole grain is really in it. Look for the word “whole” before the grain to ensure you're actually getting a 100% whole-grain product. (To be a source of fibre, a product must contain at least 2 grams of fibre.)

Natural, or made from “natural” ingredients – simply means the manufacturer started with a natural source. Once processed, the food may not resemble anything “natural”.

Organically grown, organic, pesticide-free and no artificial ingredients – say very little about the nutritional value or safety of the product. Trust only those labels that say “certified organically grown”.

Healthy shopping strategies

Follow these three easy steps to avoid being fooled by misleading label claims:

1. Speed read the front label.

Remember, manufacturers use this prime real estate to entice shoppers to buy their products. Translation: Much of the wording is pure advertising jargon.

2. Go to the ingredients list.

This is where you find out what's actually in the food. Manufacturers

list ingredients in order from most to least (so if "sugar" is the first ingredient, you're off to a bad start). Look for words you can't pronounce or terms that sound like something from your ninth-grade chemistry textbook, which is a clue that there are chemical additives that might be harmful to your health.

3. Quick-scan the Nutrition Facts label.

This is where you'll find the amounts of nutrients you're getting based on the ingredients list. If you're not sure how to read the label, check out Health Canada's Interactive Nutrition Label for a handy crash course in how to determine the true nutritional content of the food you're buying.

Discount program expands; over 40 businesses participate in discounts for foster families

We are pleased to be able to offer new discounts for our foster families thanks to the generosity of the local businesses listed below. In order to receive the following discounts, foster families must show their membership card and one piece of identification. If you know of a local business to request discounts from, please call Pam Kostyk at 1-306-975-1580. For complete details on the Saskatchewan Foster Families Discount Program, visit our website at: www.sffa.sk.ca

Best Western Seven Oaks—Regina - *discounted room rates*

Buttons and Bows – Saskatoon - *10% off*

Cheesetoast – Saskatoon (22nd Street only) - *10% off*

Costco – Regina - *\$10 off new membership*

Costco – Saskatoon - *\$10 off new membership*

Cozy Cradles – Regina - *10% off*

Dawgs Footwear – Saskatoon - *40% off all in-store merchandise (Centre Mall)*

Days Inn – Prince Albert - *discounted room rates*

End of the Roll – Saskatoon - *10% off*

Family Pizza – Prince Albert - *15% off*

FDE Flooring – Saskatoon - *15% off all regular or retail priced carpet, lino, tile & laminate, 10% discount off all regular priced hardwood and cork*

Forza Contracting - *10% off*

Heartland Motor Inn – Moose Jaw - *10 to 15% off of commercial pricing*

Humpty's – Prince Albert - *kids eat free every Friday*

ICI Paints – Saskatoon - *30% off paints and 20% off rollers/brushes*

Jet Steam – Saskatoon - *10-15% off depending on area*

Kart Track Raceway – Saskatoon - *2 for 1 coupons*

Katz N Jammers – Melville - *15% off*

Kid's Trading Company – Regina - *10% off*

Lil Sprouts – Saskatoon - *10% off*

Lookin' Good Family Hair Styling – Moose Jaw - *1/2 price haircuts*

Once Upon a Child – Saskatoon – *10% off*

Payless Shoes – Saskatoon - *15% off*

Picture Perfect – Saskatoon - *\$8 per sheet, for all foster children school photos. For in-studio portraits, there will be a 20% discount on printed products and services*

Rak's Bowling House – Saskatoon - *2 for 1, call ahead for availability*

Ramada – Prince Albert - *discounted room rates*

Ramada – Regina – *discounted room rates*

Regina Inn and Conference Center – Regina - *discounted room rates*

Sports Excellence – Prince Albert - *20% off all regular priced items in-store*

Super 8 – Prince Albert - *discounted room rates*

Second Time Around – Prince Albert - *15% off any regular merchandise*

Temple Gardens Mineral Spa – Moose Jaw - *guestroom specials*

The Brick – Saskatoon - *call for discount*

The Brick – Regina - *call for discount*

The Brick – Prince Albert - *call for discount*

The Brick – North Battleford - *call for discount*

The Brick – Moose Jaw - *call for discount*

The Fun Factory – Saskatoon - *\$2.00 off of admission*

The Giggle Factory – Saskatoon - *10% off*

Tomas the Cook – Saskatoon - *10% off*

Travelodge – Regina - *discounted room rates*

Travelodge – Saskatoon - *discounted room rates*

Uncle Ed's Furniture – Saskatoon - *call for discount*

Carbon monoxide alarms

Last year, the Ministry of Social Services began providing carbon monoxide alarms to all foster homes in the province. The alarms, along with information regarding their use, were delivered to foster homes by Ministry caseworkers.



I have an existing smoke alarm system. Can I integrate the carbon monoxide alarms being provided with this system?

The alarms being provided are plug-in type alarms that are independent of hardwired alarms systems. Many hardwired systems do allow for the use of an integrated smoke/carbon monoxide alarm. For more information, contact your local plumbing/electrical contractor.

Costs associated with installing hardwired or integrated systems are the responsibility of the home operator.

How do I install the plug-in carbon monoxide alarms?

Each alarm comes with an instruction manual. By following the instructions, you will ensure a proper installation. The alarm also comes with a tamper resistant feature which goes into constant alarm mode if it has been unplugged or has come loose from the outlet.

How many alarms do I need?

You should be supplied with enough alarms to each residence to ensure that one is located within five meters of every sleeping area.

Who is responsible for on-going maintenance of the alarm?

Carbon monoxide alarms should be tested at least once a month, following the manufacturer's instructions. Batteries should also be replaced as needed according to manufacturer's recommendations. You should keep a 9 volt battery on hand for battery replacement. The units provided have a 7-year product life at which time a new unit needs to be purchased.

What happens if my unit is defective?

Units were to be tested by Ministry Staff when they were first delivered. In the event that it failed to work, the unit should have been replaced at that time. If a warranty issue occurs

with the alarms after installation, the home operator should contact Kidde Canada (1-800-880-688) directly to arrange for replacement.

A South Service Area office received a thank-you from a foster home in the area, crediting the carbon monoxide detector with saving their lives and the lives of the five foster children in their home. On December 26th, the carbon monoxide detectors placed in their home went off and as it turned out, the carbon monoxide in the home was at a dangerous level. The family ended up having to get a new furnace, but they are very thankful that they have the detectors in their home. This is an otherwise positive ending to a situation that could have been tragic.

St. Patrick's Day Word Search

S S T P A T T R I C K S D A Y
 E I S C E N L S E B R A P T E
 K D L O G I R E L A N D R D E
 A A A C H A Y V E A R O A N M
 N Y A R R S C E M A E W Y N H
 S A N S A E V N E N T E E E N
 T D H E C P A T R I C K R O M
 M I E M E O R E A T I N S G T
 H L E T A R B E L E C H E D E
 A O T R H O G N F I A R E L A
 N H S I R I D T S M P A T M R
 O N S N A I C H R I S T I A N
 N T H I I C L O V E R S G R I
 V E N T N K C U L A M E I C S
 M A E Y W K B I S H O P Y H N

- | | | | |
|-----------|---------|-------------|----------|
| BISHOP | PARADE | GOLD | SHAMROCK |
| MAEWYN | CLOVER | SAINT | IRISH |
| CELEBRATE | PATRICK | HOLIDAY | SNAKES |
| MARCH | GREEN | SEVENTEENTH | LUCK |
| CHRISTIAN | PRAYERS | IRELAND | TRINITY |

HOT Cocoa

INGREDIENTS:

1 1/2 cup sugar
1 1/4 cup cocoa powder
1 1/4 teaspoon salt
3/4 cup hot water
1 gallon milk
1 teaspoon vanilla extract
1/4 teaspoon cinnamon

PREPARATION:

In large saucepan, combine sugar, cocoa and salt. Add hot water slowly, mixing well. Cook over medium heat, stirring constantly, until mixture boils. Boil and stir 2 minutes. Add milk; heat to serving temperature, stirring occasionally. DO NOT boil. Remove from heat; add vanilla, cinnamon, and whip with a whisk. Serve hot, with whipped cream or marshmallows if desired. This recipe can be doubled and kept in crockpot for easier serving to large groups

Irish Trivia

What is out on the lawn all summer and is Irish?

Paddy O'Furniture

What do you call a fake stone in Ireland?

Shamrock

When is an Irish Potato not an Irish Potato?

When it's a French Fry!

What does it mean when you find a horseshoe?

Some poor horse is going barefoot.

Why is a river rich?

Because it has two banks.



Chocolate Mint Brownies

INGREDIENTS:

1/2 cup butter
4 ounces unsweetened chocolate
1 1/2 cups sugar
3 eggs
1 1/2 teaspoons vanilla extract
1 cup all-purpose flour
1/2 teaspoon salt

MINT FROSTING:

1/4 cup softened butter
2 1/2 cups confectioners' sugar
1 1/2 to 3 tablespoons milk
1/2 teaspoon peppermint extract
Green food coloring

CHOCOLATE TOPPING:

3/4 cup semisweet chocolate chips

PREPARATION:

Heat the oven to 350° and grease a 9-inch square baking pan. For the brownies, place the butter and chocolate in a microwave-safe bowl. Microwave on high for 1 minute, stir, and microwave for 1 minute more. Stir until smooth. In a separate bowl, whisk together the sugar and eggs. Stir in the chocolate and the vanilla extract. Finally, stir in the flour and salt until thoroughly combined. Pour into the prepared pan, then bake for 25 minutes or until a knife inserted in the middle comes out clean. Cool for at least 1 hour.

To make the mint frosting, cream the butter and confectioners' sugar. Add the milk 1 tablespoon at a time, beating until it is smooth and spreadable. Beat in the peppermint extract and tint to the desired shade with green food coloring. Frost the cooled brownies, cover, and chill for 1 hour.

To make the chocolate topping, pour the chips into a microwave-safe bowl, add the butter, and microwave on high for 1 1/2 minutes or until the chocolate melts. Stir until smooth. Pour the chocolate over the brownies and smooth it with a knife. Refrigerate for 45 minutes or until the coating hardens.

Bring the brownies to room temperature, then cut into 16 to 32 pieces. Layer them on a piece of cellophane (place waxed paper between the layers to prevent sticking), wrap up the brownie package, and tie with a red ribbon. Makes 16 to 32 brownies.



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