

**Michigan Family Independence Agency – Office of Contracts and Rate Setting
Direct Services - No Client Services Grant – Quarterly Advance
Cover Sheet**

Grantee Name:		Grant #: CTFDS-04-	
S.S. # or Fed. I.D. #		Mail Code:	Amount: \$
Index Code: 60750		AOC: 6325	County:
PCA: 57021		Faith Based: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Comm. Code #: 94661		CS-138#: NJ	
Bid Status:	<input checked="" type="checkbox"/> Bid	<input type="checkbox"/> Sole Source	<input type="checkbox"/> Fair Market Rate
Org. Type:	<input type="checkbox"/> Private, Non-profit	<input type="checkbox"/> Private, Proprietary	<input type="checkbox"/> Public
Audit Status:	<input checked="" type="checkbox"/> Subrecipient	<input type="checkbox"/> Vendor	<input type="checkbox"/> No Federal Funds
Grant Administrator Name: Dawn Arwood			Phone No.: 39822
Grantee Fiscal Year	Beginning Month:		Day:
Grantee is a State Employee:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Renewal: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BPO#: 99999	Services: Children's Trust Fund		
Payment Method: Quarterly Advance			

I affirm that:

No changes have been made to the Agreement format obtained and maintained by Office of Contract and Rate Setting.

The Grant budget is on file in the program office.

Contract Administrator's Signature: _____ Date: _____

Grant No: CTFDS-04-
Amount:
County:
Method of Payment: Quarterly Advance
Year of Funding:

**DIRECT SERVICES GRANT AGREEMENT
MICHIGAN CHILDREN'S TRUST FUND
FISCAL YEAR 2004-2006**

State Child Abuse and Neglect Prevention Board (Hereafter referred to as the Children's Trust Fund)

I. **GRANTEE:**

II. **GRANTEE'S AUTHORIZED SIGNATORY**
(CTF must receive written notice of any changes in authorized signatory)

III. **CONTACT PERSONS NAME:**

IV. **GRANTEE'S ADDRESS:**
(CTF must be notified of any address change)

GRANTEE'S PHONE #:

FAX #:

E-MAIL ADDRESS:

V. **TERMS OF GRANT:** This Agreement is for 3 years; the Grantee is eligible for three years of declining funding based on compliance with the terms of the Agreement.

Starting Date: October 1, 2003

Ending Date: September 30, 2006, unless prior termination is executed by the Children's Trust Fund pursuant to Section 19 herein.

VI. SERVICES TO BE PROVIDED BY THE GRANTEE:

- A. Project Summary:
- B. Target Population:
- C. Project Objectives:
- D. Timeline/Workplan:
- E. Evaluation Plan:

VII GRANTEE MANDATES:

The Grantee will:

A. **Submit quarterly reports**

Quarterly reports are due no later than January 20, April 20, July 20, and October 20, of each year of the grant. The **narrative and expenditure forms must include an original signature** of the person responsible for administering the program and has been named as the **Authorized Signatory**.

1. **Narrative:** These reports will give a narrative summary of project activities, evaluation outcomes, progress on grant compliance and any problems the Grantee feels need to be raised. A quarterly report narrative cover sheet provided by the Children's Trust Fund will be used to identify the program and the quarter reported. **This cover sheet must be signed by the Authorized Signatory.**
 - a. **Each quarterly narrative must address the program's evaluation results to date.** This will include the results of a survey of the participants of the program about their satisfaction with program services. The specific questions for this assessment shall be determined by the Grantee. *CTF may supply standardized questions for this survey at a later date.* The data must be summarized and submitted to the CTF in each quarterly report.
2. **Financial:** The quarterly financial report must be completed on the expenditure form provided by the Children's Trust Fund. This report will relate the past quarter expenditures of cash match, in-kind match, and CTF Grant and reflect the year-to-date totals spent for each category.

3. **Program register:** This report will show the number of services offered and number of participants of those services on a form approved by Children's Trust Fund. This report describes the families using services and the number and types of services provided. The register will be sent to Children's Trust Fund with the quarterly narrative and expenditure report at the end of each quarter.

B. Late Reports

Direct Service programs that fail to submit reports required by this Grant Agreement, or do not submit the reports in a timely fashion will be subject to the following penalty:

- If a quarterly report is not received by the due date of the next quarterly report, the quarterly payment will not be released (even if the report is received at a later date).

VIII. **RENUMERATION:** The Children's Trust Fund Board shall pay the Grantee an amount not to exceed the amount showing during that fiscal year. Payment shall be according to the following schedule:

Year 1	Amount	Year 2	Amount	Year 3	Amount
	\$		\$		\$
10/1/02		10/1/03		10/1/04	
1/1/03		1/1/04		1/1/05	
4/1/03		4/1/04		4/1/05	
7/1/03		7/1/04		7/1/05	

Payment is subject to the Grantee's complete compliance with the terms of this Agreement. Payments shall be made in accordance with the attached budget plan.

IX. **COPYRIGHTS:** Where this Grant specifically pays in whole or part for the production of original books, films, or other material, the Grantee may copyright same; however, the Children's Trust Fund Board reserves a royalty-free, non-exclusive and irrevocable license to reproduce, publish and use such materials, and to authorize others to do so. Any grantee who has questions as to whether or not material produced is covered by this section shall make an inquiry to the Children's Trust Fund Board.

X. **ACCOUNTING:** Grantee agrees to maintain specific and appropriate documents, journals, ledgers and statements in accordance with generally accepted accounting principles and practice specific to this Grant, to retain these records for a period of not less than four years from the ending date of the Grant, and to make this accounting available for audit by appropriate agents of the Children's Trust Fund, State, and/or Federal government at any time.

XI. **EVALUATION:** All grantees are required to evaluate their project. The evaluation process must include identification of measurable performance objectives for each time-framed outcome and a description of what means will be used to determine/assess participant satisfaction. The final evaluation design may be amended in collaboration with the CTF Board during the contract negotiation.

In addition, in order to provide the Children's Trust Fund Board with evaluation data it needs, the Grantee must agree to participate in and cooperate with all evaluations and evaluators authorized by the Board. This participation/cooperation shall include access to all grant activities and materials, requests for information, and the collection of data.

Home visitor programs funded by this Grant are required to participate in the Program Information Management System (PIMS) data collection project administered by the Children's Trust Fund.

XII. **SITE VISIT REQUIREMENT:** By statute, the Children's Trust Fund is required to conduct at least one on-site visit review per fiscal year. The purpose of the visit is to ensure compliance with program requirements, including fiscal and evaluation requirements, and to provide technical assistance and support.

XIII. **COMPLIANCE WITH EXECUTIVE ORDER 79-4:** Grantee certifies compliance with Executive Order 79-4, pertinent State-Federal statutes providing equal opportunity for employment, provision of services regardless of race, sex, color, national origin, ancestry or age and equal access for disabled to programs and services.

XIV. **ADJUSTMENTS AND AMENDMENTS:** Upon written evidence submitted by Grantee that Grantee is unable to perform the services agreed to for any reason, the Children's Trust Fund may excuse such services and negotiate an equitable adjustment of payment, unless the Grant is terminated pursuant to Section XIX below. Any amendments and adjustments to this Agreement must be made in writing and approved by CTF. All requests for amendments **must** be received in the Children's Trust Fund office no later than June 30 of each grant year.

XV. **MATCH:** Grantee agrees to clearly demonstrate an ability to match, through money or in-kind services, the required amount of any Children's Trust Fund monies received. The amount and types of in-kind services are subject to the approval of the Children's Trust Fund Board. (See schedule, below). Sources of match must be identified and verifiable.

The following schedule for the matching fund requirement must be followed:

First year:	50% of original award (can be any mix of cash or in-kind)
Second year:	75% of original award (can be any mix of cash or in-kind)
Third year:	100% of original award (cash only)

- XVI. **EXPENDITURE OF FUNDS:** The Grantee shall expend all funds granted by the Children's Trust Fund in a fiscal year; unspent funds shall be returned to the CTF at the end of each fiscal year. Requests for exceptions to this policy must be made in writing as a 'request to carry over the funds' to the next fiscal year. This request will explain why the funds were not spent during the current contract year and what the funds will be used for during the upcoming contract year. Carryover is not automatic and must be approved by CTF. All requests for carryovers **must** be received in the Children's Trust Fund office no later than August 30 of each grant year.
- XVII. **ACT No. 250:** Grantee agrees to comply with all applicable sections of Act No. 250, Public Acts of 1982 "Child Abuse and Neglect Prevention Act."
- XVIII. **SPECIAL CONDITIONS:** None
- XIX. **CANCELLATION OF AGREEMENT:** The Children's Trust Fund reserves the right to cancel this Grant Agreement by giving 30 days written notice to the Grantee. The Grantee may cancel this Grant Agreement upon thirty days written notice to the CTF at any time prior to the completion of the Grant period. Default is defined as the failure of the Grantee to fulfill the obligation of the Grant Agreement. In case of default by the Grantee, the CTF may immediately cancel the Grant Agreement without further liability to the Grantee or its employees.
- XX. **ASSIGNMENT:** This contract may not be assigned by the Grantee without the written consent of the Children's Trust Fund Board.
- XXI. **LIABILITY:** Each party to this Grant Agreement must seek its own legal representative and bear its own costs, including judgements, in any litigation which may arise from performance of this Grant Agreement. It is specifically understood and agreed that neither party will indemnify the other party in such litigation.
- XXII. **PROMOTION OF CHILDREN'S TRUST FUND:** Grantee shall promote the Children's Trust Fund as Grantor in its activities, both written and oral. Camera ready logo and PSA's will be provided. Any project which is funded by the Children's Trust Fund must include the CTF logo. Copies shall be submitted to CTF.
- XXIII. **RENEWAL APPLICATIONS:** Grantee must submit an application for renewal of funding prior to the beginning of the next fiscal year each year during the three year funding period. This application shall indicate any requests for program changes, a revised *Budget Plan*, verification of cash and in-kind match, and continuation funding. The renewal application forms will be mailed by the CTF to the grantee with the appropriate forms and instructions.
- XXIV. **CHILDREN'S TRUST FUND SURVEYS:** Grantee must complete all surveys conducted by the Children's Trust Fund or funding agencies and return them in a timely manner. These surveys are used to assist programs through gauging technical assistance needs and compiling statewide information. If a program had concerns with any information contained

in the survey, they could express that concern in writing and an exception to the policy may be provided.

XXV. **CHILDREN'S TRUST FUND ANNUAL CONFERENCE:** Grantees are required to send at least one representative for both days of the Children's Trust Fund conference, held annually in October.

XXVI. **AUDIT REQUIREMENTS:**

Subrecipient Relationship

This grant constitutes a subrecipient relationship with FIA. The Grantee is required to comply with all federal regulations that relate to the accounting and auditing of the federal award used to fund this grant. This includes, but is not limited to, compliance with OMB Circular A-133.

The Catalog of Federal Domestic Assistance number (CFDA) for the federal award(s), along with the Federal Financial Participation (FFP), and the related federal regulations, laws, and other requirements may be obtained by accessing the FIA, Office of Internal Audit's Web page at the following Web address (URL):

<http://www.mfia.state.mi.us/oia/index.htm>

FIA agrees to participate in audit cost related to the audit as described in other sections of this grant.

Reporting Requirements

If the Grantee is required per OMB Circular A-133 to have a Single Audit performed, the Grantee must submit the Reporting Package and an Audit Transmittal Letter to the address below in accordance with the time frame established in the Circular.

Reporting Package includes:

- A. Financial statements and schedule of expenditures of Federal awards
- B. Summary schedule of prior audit findings
- C. (Auditor's report(s))
- D. Corrective action plan

Audit Transmittal Letter

The Grantee is responsible to identify in the Audit Transmittal Letter all organizations it operates that administer FIA subrecipient programs and the different names the Grantee may use to contract with FIA. The Grantee is responsible for proper

completion and submission of the Audit Transmittal Letter. This letter, to be accurately processed by FIA, must include the following information:

- A. Grantee's name as reported in the FIA contract(s).
- B. Grantee's Federal Identification number as reported on the FIA contract(s).
- C. Grantee's fiscal year end.
- D. Identify other name(s) and other Federal Identification number(s) used by the Grantee.

If a Single Audit is not required per OMB Circular A-133, the Grantee must still submit an Audit Transmittal Letter stating why a Single Audit was not required and the Grantee's fiscal year the letter pertains to. The Audit Transmittal Letter should include items stated in the section, "Audit Transmittal Letter," described below. The letter may be mailed to the address below or FAX to (517) 373-8771.

Mailing address for all information:

Michigan Family Independence Agency
Office of Internal Audit
235 S. Grand Ave. Suite 1112
Lansing, MI 48909
Attention: William Addison, CPA

Audit Cost

No audit costs may be charged to FIA when audits required by this grant have not been performed or have not been performed in accordance with OMB Circular A-133 requirements. Late submission of the Single Audit report is considered non-compliance with this section and may be grounds to impose sanctions.

Sanctions

FIA may impose sanctions if the Grantee fails to adhere to any of the audit requirements in the grant. In cases of continued inability or unwillingness to comply with audit requirements, FIA may impose sanctions such as:

- A. Withholding a percentage of Federal awards until the audit is completed satisfactorily;
- B. Withholding or disallowing overhead costs;

- C. Suspending Federal awards until the audit is conducted; or
- D. Terminating the Federal award.

XXVII. **MISCELLANEOUS:** This grant shall be governed by the laws of the State of Michigan. Any waiver by either party of any term of this grant shall not act as a waiver of any other term of this grant.

BUDGET PLAN FOR THE PERIOD OF October 1, 2003 – September 30, 2004

- I. Name of Fiscal Agent: _____
- II. Name of Service/Project: _____
- III. Total Cost: _____
- IV. Sources of Funding
 - A. Children's Trust Fund
 - B. Local Cash Match Amount
 - C. Local In-Kind Match Amount
 - D. TOTAL COST (Sum of A, B, & C)

- A. _____
- B. _____
- C. _____
- D. _____

Match must be at least 50% of the requested funds and can be any mix of cash or in-kind.

Line Item	CTF Grant	Local Cash Match	Local In-Kind Match	Total Project Cost
A. Salaries (Personnel)				
B. Fringes				
C. Administrative				
D. Contractual				
E. Supplies				
F. Transportation (Travel)				
G. Equipment (Items over \$100)				
H. Occupancy				
I. Training				
J. Evaluation				
K. Miscellaneous				
TOTAL				

Print name _____

Signature of Authorized Signatory _____

Telephone No. _____

IN WITNESS WHEREOF, the Children's Trust Fund and the Grantee have caused this Agreement to be executed by their respective officers duly authorized to do so.

The Undersigned has the lawful authority to bind the Grantee to the terms set forth in this Agreement.

Dated at _____, Michigan _____
(Grantee)

this ____ day of _____, 20 ____ By: _____

Witness: _____

Dated at _____, Michigan _____ CHILDREN'S TRUST FUND

this ____ day of _____, 20 ____ By: _____
Children's Trust Fund Signature

Witness: _____

Grant #: CTFDS-04-



**Children's Trust Fund
2003-2004
Request for Proposal**

Your guide to writing a
CTF grant

**THE CHILDREN'S TRUST FUND'S REQUEST FOR PROPOSAL
FISCAL YEAR 2004
PRIMARY AND SECONDARY CHILD ABUSE AND NEGLECT
PREVENTION PROGRAM GRANTS**

The Michigan Children's Trust Fund (CTF) announces the availability of grants for community-based primary and secondary prevention programs/services designed to promote strong, nurturing families and prevent child abuse and neglect before it occurs. The Michigan Children's Trust Fund Board will award these three-year grants on June 19, 2003. Funding will begin October 1, 2003.

The CTF grant award must be used to support primary and secondary prevention programs that are designed to prevent child abuse and neglect.

Contents

FUNDING REQUIREMENTS AND PRIORITIES	2
CHILDREN'S TRUST FUND DEFINITIONS	3
TIMELINE	4
APPLICATION PROCESS	5-7
GRANT AGREEMENT REQUIREMENTS	8
REPORTING REQUIREMENTS	9
APPLICATION GUIDELINES	10
APPLICATION INSTRUCTIONS	11-13
APPLICATION FORMS	Attachment A
• LOCAL COUNCIL LIST	
• TECHNICAL ASSISTANCE SESSION REGISTRATION	
• MAP TO SITE	
• PIMS INFORMATION	
• INTENT TO APPLY FORM	
• APPLICATION CHECKLIST	Attachment B

Proposals (the original and 4 copies – 5 total), along with the proposal on a disk in Microsoft Word/Excel format, must be received in the CTF office (map in Attachment B) before 5:00 p.m. on Friday, April 4, 2003 to be accepted for consideration. Please send all proposals to:

Michigan Children's Trust Fund
Direct Service RFP
235 S. Grand Ave., Suite 1411
P.O. Box 30037
Lansing, Michigan 48909

DEADLINE: By 5:00 p.m. on APRIL 4, 2003

TIMELINE

- January 10, 2003** Disseminate RFP
- January - March 2002** 1) Immediately upon receipt of the RFP, the applicant MUST contact the CTF local council representing the county that the service will cover (see listing in Attachment B) to determine the councils' schedule for proposal review.
- PLEASE NOTE:** The council's schedule for review may require that your proposal be submitted as much as one month prior to the April 4th due date. The local council's timeline must be followed.
- 2) Proposals must be reviewed and approved by the CTF local council prior to submitting to CTF. The local council review sheet MUST be included with the proposal (form in Attachment A) or the proposal will be DENIED.
- April 4, 2003** Proposals (the original and 4 copies – 5 total) must be received in the CTF office before 5:00 p.m. to be accepted for consideration
- April 9, 2003** Distribute proposals to review teams.
- April 24, 2003** Review of proposals.
- June 19, 2003** CTF Board Meeting -- Approval of grant awards.
- By June 27, 2003** Notification to applicants of approved and denied proposals.
- July 11, 2003** Deadline for grant appeal - all appeals must reach the CTF office by 5 p.m. to be accepted for consideration.

Technical Assistance Session

One technical assistance session will be held regarding the RFP. This session is not mandatory and will provide an overview of the RFP and grant review process, as well as answer applicant questions. Persons interested in attending the session must register by using the registration form contained in Attachment B. Seating is limited. The session will be held:

February 11, 2003 from 1:00 p.m. – 3:00 p.m.
Conference Room 1C (Dempsey Room) – Family Independence Agency Grand Tower Building
Lansing
(map in Attachment B)

Where to Obtain Help

For programmatic, technical assistance, general proposal questions, and other proposal questions please contact your local CTF council (see listing in Attachment B).

If unable to contact your local council or for other questions, please contact Shannon Stotenbur at the Children's Trust Fund; (517) 335-4620; Email: stotenburs@michigan.gov.

APPLICATION PROCESS

General Information

- ◆ Grants will be awarded for three years beginning October 1, 2003.
- ◆ Grants will be awarded on a declining fund basis. The goal of the declining funding plan is that an agency will become self-sufficient during the three years of CTF support and be able to continue in its service provision after CTF involvement. The decrease in CTF funding should not correspond with a decrease in services offered. The amount of funding shall decline each year according to the following schedule:

First Year of CTF Funding:	100% of the original amount granted
Second Year of CTF Funding:	75% of the original amount granted
Third Year of CTF Funding:	50% of the original amount granted

- ◆ Types of projects funded include: new programs/services, enhanced or expanded services, or services coordination (see definitions, page 3).
- ◆ Funding is available to non-profit organizations which meet the requirements of Section 501© 3 of the Internal Revenue Code and local, statewide public or private agencies.
- ◆ The defined **target population and service** must be tied to the local CTF child abuse and neglect prevention council's needs assessment and prevention plan in the county(ies) where the services will take place.
- ◆ Proposals must be reviewed and approved by the local CTF council representing the county(ies) where the service will be provided (see listing in Attachment B). Proposals serving more than one county require the approval of only one council. Approved proposals will then be reviewed for funding at the state level.
- ◆ A single fiscal agent must be identified, however, multiple providers may be involved.
- ◆ The **budget plan for expanding or enhancing existing programs** must only cover the new service(s) (EXAMPLE: *The project, before the expansion, has a total cost of \$40,000 per year to operate at the current service level of 20 families per year. The expansion will serve an additional 10 families with an additional operational expense of \$20,000; this amount should be outlined in the total project cost section of the budget form. The request for CTF funds will be determined by reviewing the total project cost for the expansion (\$20,000). In the first year, 50% matching funds are required to meet the CTF funding requirement. Therefore, the amount requested from CTF is up to 50% of your available matching funds, in this example, \$10,000.*)
- ◆ CTF reserves the right to close any grants awarded due to unavailability of funds or a grantee's non-compliance with the grant agreement, including but not limited to:
 - performance
 - length of time required to complete an evaluation
 - ability to provide matching funds
 - efforts of the project sponsor and council to obtain continuation funding

As directed by the Children's Trust Fund, funded programs will also be required to participate in other evaluation efforts and provide data as requested. Evaluation/outcomes include, but are not limited to, the conducting of studies and analysis to determine the impact and value of a project or program in reducing child abuse and neglect in Michigan; quantitative and qualitative aspects of service, etc.

Responsibilities of the Local CTF Council Related to the Application Process

CTF local child abuse and neglect prevention councils are non-profit organizations authorized by legislation to develop and facilitate collaborative community prevention programming in a specific geographical area. A list of local councils and their representatives is contained in Attachment B. The local CTF child abuse and neglect prevention council has the following responsibilities:

- ◆ Utilize a child abuse and neglect prevention needs assessment in their county and develop an annual prevention plan to address those needs.
- ◆ Review and approve grant proposals prior to submission to CTF.
- ◆ Assist in the monitoring of prevention programs funded by CTF.
- ◆ Provide assistance to prevention projects in developing match and ongoing funding.
- ◆ Local Councils will provide technical assistance to perspective grantees. Applicants are strongly encouraged to contact their local council early in the application process for assistance in preparing their proposal.

Endorsement of the Local Council

- ◆ Interested applicants **must** consult with their CTF local council in the development of their prevention proposal.
- ◆ Prior to submission to the CTF, proposals must be reviewed and approved by the local council. *Applicants must contact the appropriate CTF local council immediately upon receiving the proposal to determine deadlines for submitting an proposal to the local council for review.*
- ◆ Proposals that DO NOT include the CTF local council review sheet, disclosure statements, and approval will be DENIED.

NOTE: Multi-county projects are required to obtain the endorsement of at least one of the local CTF councils affected by their project.

Grant Appeals Process

Any applicant denied funding may contact the Children's Trust Fund to determine why a grant was not awarded. In addition, the applicant may appeal the decision in writing to CTF within **10 business days of receipt of denial**. This appeal must explain why it is believed the program should be funded. The Chairperson of the CTF Board will convene a committee to review the proposal and render a decision. The applicant will be notified in writing of the decision.

REPORTING REQUIREMENTS

If funded, grantees are required to submit quarterly reports to the Children's Trust Fund. Quarterly reports are due January 20th, April 20th, July 20th, and October 20th of each fiscal year. The **narrative and expenditure forms must include an original signature** of the person responsible for administering the program and has been named as the **Authorized Signatory**. Following is an explanation of the quarterly report requirements:

1. **Narrative:** The quarterly narrative report provides a summary of project activities, evaluation outcomes, progress on grant compliance and any problems the grantee feels need to be raised. A quarterly report narrative cover sheet provided by the Children's Trust Fund will be used to identify the program and the quarter reported and outlines the specific narrative components. **This cover sheet must be signed by the Authorized Signatory.**
 - a. **Each quarterly narrative must address the program's evaluation results to date.** This will include the results of a survey of the participants of the program about their satisfaction with program services. The specific questions for this assessment shall be determined by the grantee. The data must be summarized and submitted to the CTF.
2. **Expenditure:** The quarterly expenditure report must be completed on the expenditure form provided by the Children's Trust Fund. This report relates the past quarter expenditures of cash match, in-kind match, and CTF grant and reflects the year-to-date totals spent for each category.
3. **Program register:** The quarterly register details the number of services offered and number of participants of those services on a form provided by the Children's Trust Fund. This report describes the families using services and the number and types of services provided. The register is sent to Children's Trust Fund with the quarterly narrative and expenditure report at the end of each quarter.

APPLICATION INSTRUCTIONS

1. PROPOSAL FACE SHEET

Applicants should refer to the specific form and instructions in Attachment A.

2. CTF LOCAL COUNCIL REVIEW SHEET (Proposal Rating Criteria)

Applicants must attach at least one review sheet completed and approved by the CTF local council representing the county(ies) where the service(s) will be provided. The form will also be used by grant reviewers at the state level to determine which proposals will be recommended for funding. The review sheet is located in Attachment A.

3. DISCLOSURE STATEMENT(S)

Applicants should refer to the specific form in Attachment A. A Disclosure Statement must be signed by each local council reviewer and attached to the proposal.

4. NARRATIVE (10 page limit)

PROJECT SUMMARY:

Clearly and concisely summarize the project using the following criteria. The applicant may wish to develop the summary after completing the Project Description narrative. **The summary must be one page or fewer. DO NOT refer to additional pages.**

- ◆ outline the statement of need (including target population)
- ◆ state the purpose or goal(s) of the project
- ◆ provide a short project description (including the justification, model, and research on which it is based)
- ◆ describe the organization's capacity to administer this project (community support, past background of accomplishments, etc.)

PROJECT DESCRIPTION

A. Statement of Need

- ◆ define the need(s) the proposed project will address
- ◆ define how the identified needs connect to the CTF local council prevention plan

B. Target Population

- ◆ describe the target population to be served
- ◆ describe the plan for identifying, referring, and serving families (*include documented agreements from agencies involved with this process*)
- ◆ provide evidence that the organization has access to the target population
- ◆ define the current barriers that prevent the target population from accessing the proposed service and what will be done to overcome these barriers (examples include, but are not limited to, transportation and child care)

C. Project Objectives and Activities

- ◆ describe the project's objectives (the measurable results this project plans to obtain)
- ◆ describe the activities of the project including the justification, model, or research on which the service design/activities are based (*include documented agreements from agencies integral to this process*)
- ◆ describe how the activities/tasks are related to the objectives
- ◆ demonstrate how this program will *prevent child abuse and neglect* in the target population

8. BUDGET DETAIL

- ◆ outline the budget line items as presented in the Budget Plan Form providing as much specific information as possible
- ◆ outline the sources and amounts of local cash and in-kind match.
- ◆ An example of a Budget Detail is provided in Attachment A (*the format in the example is not the required format*)

9. DOCUMENTED AGREEMENTS

- ◆ Attach signed agreements that include specific tasks, with all agencies that are integral to the success of the project. An example is contained within Attachment A (*the format of the example is not the required format*).

10. MISCELLANEOUS ATTACHMENTS

Attachments may be necessary to expand on the narrative section of the proposal, however attachment information should not be used in place of any section of the narrative description. The following additions will be accepted as *attachments* to this proposal:

- ◆ support letters from participating and/or funding organizations other than your agency (these are different from documented agreements)
- ◆ job descriptions and qualifications
- ◆ resumes of identified key staff (one page each)
- ◆ board of directors list
- ◆ copies of relevant program materials and outlines
- ◆ copy of 501©3

Submit **original and four (4) copies – 5 total** of the completed proposal and an IBM compatible disk in Microsoft Word/Excel to:

Michigan Children's Trust Fund
Direct Service RFP
235 S. Grand Ave., Suite 1411
P.O. Box 30037
Lansing, Michigan 48909

DEADLINE: Before 5:00 p.m. on APRIL 4, 2003

ATTACHMENT A
(Application Forms – All Must be Completed)

- 1. Face Sheet**
- 2. Face Sheet Instructions**
- 3. Budget Plan Form**
- 4. Budget Plan Form Instructions**
- 5. Budget Plan Form Example**
- 6. Budget Detail Example**
- 7. Documented Agreement Example**

**NOTE: All forms are available electronically in Microsoft Word format.
E-mail Shannon Stontenbur at stontenburs@michigan.gov to request them.**

CTF APPLICATION FACE SHEET FOR FY2004 DIRECT SERVICE GRANTS
 (Carefully read the instructions before completing this form)

1. Fiscal Agent Information

- a. _____
Fiscal Agent
- b. _____
Address
- c. _____
City, State, Zip Code
- d. _____
County(ies) where service(s) will be provided
- e. _____
Authorized Signatory (Print and Sign name) Telephone
- f. _____
Federal I.D. Number
- g. _____
Fiscal agents fiscal year (beginning month and day)
- h. Does the fiscal agency annually receive more than \$300,000 in federal funds? yes no
- i. Agency type (please check one): Private, Non-Profit Private, Proprietary Public

2. Service/Program Information

- a. _____
Name of Program
- b. _____
Project Director's Name Signature Telephone
- c. _____
E-mail Address Fax Number
- d. Amount of CTF Funds Requested \$ _____
- e. Total Project Cost \$ _____
- f. Number to be Served: Families _____ Children _____
- g. Check which funding priority the proposal's services most align with (check only one)
 Home visiting Respite Mentoring Grandparent support Family resource center
 Parenting classes/support groups Teen parenting education/support Individual/Family Support
 Other: _____
- h. Target Population: _____
- i. Has your agency ever received CTF funding? _____ When? _____
 Is the program still operating? _____
 If no, why not? _____

Instructions for the Application Face Sheet

Complete the application face sheet in type as indicated:

1. Fiscal Agent Information: Complete this section for the fiscal agent that is applying for Children's Trust Fund grant monies:
 - a. Provide the entire agent's name. Do not abbreviate or use acronyms.
 - b. Provide the agent's address.
 - c. Provide the city, state and zip code in which the agent is located.
 - d. Provide the county(ies) where the proposed service(s) will be provided.
 - e. Print and sign the name and provide the telephone number of the person who is **authorized** to enter into agreements with the Children's Trust Fund/State of Michigan.
 - f. Provide the fiscal agent's Federal I.D. number.
 - g. Provide the fiscal agent's fiscal year by listing the beginning month and day.
 - h. Check whether the fiscal agent annually receives more than \$300,000 in federal funds.
 - i. Check the fiscal agent's agency type.

2. Service/Program Information: Complete this section based on the program for which Children's Trust Fund money is being requested.
 - a. Provide the entire program name. Do not abbreviate or use acronyms.
 - b. Provide the name and telephone number of the project director or contact person. (*Any questions about the application or proposal will be directed to this individual.*)
 - c. Provide the E-mail address and fax number of the project director.
 - d. Provide the amount of Children's Trust Fund monies being requested.
 - e. Provide the total cost of the project including CTF funding, cash match, and in-kind match.
 - f. Provide the projected number to be served by this program: families and/or child(ren).
 - g. Check the appropriate service that the proposed project aligns with. Only check one category.
 - h. State the target population to be served by the project.
 - i. Complete the information requesting whether the agency/program has previously received CTF funding.

BUDGET PLAN FORM INSTRUCTIONS

1. **Agency Name:** List the name of the fiscal agent
2. **Program Name:** List the name of the proposed program (no acronyms)
3. **Total Project Cost:** The Total Project Cost is the cost (CTF funds, cash, and in-kind) for the prevention project during the budget period. Where the prevention project is a part of a larger organization, do not include other parts of the organization's budget. For example, a program may be expanding the geographical region that its service will reach. ***The Total Project Cost is only that which is attributed to the new or expanded portion of the program, not the entire cost of the program.*
2. **Source of Funding:** CTF legislation, (Public Act 250 of 1982), specifies that prevention programs receiving funds from the Children's Trust Fund must demonstrate an ability to match, through money or in-kind services, 50% of the amount of any Children's Trust Fund money received. The amount and types of in-kind services are subject to the approval of the state board." (Sec. 9(1)(1)(ii) and (Sec. 10 (e)).

On Line A: List the amount of dollars requested from the Children's Trust Fund.

On Line B: List the amount of dollars to be provided by the local Cash Match.

On Line C: List the monetary value of the local In-Kind Match. This match may include the estimated value of contributed space, equipment, volunteer services, etc.

On Line D: Add lines A, B, and C. This is the total Children's Trust Fund Project Cost.

3. **Budget: Complete As Follows (Reminder: for the CTF funded portion of the program only)**
 - A. List line items (list amount to be covered by the Children's Trust Fund grant, by local cash match, and by in-kind match)
 - A. Salaries/Personnel includes salaries and wages
 - B. Fringe benefits for paid staff
 - C. Administrative costs not related to direct service delivery
 - D. Contractual Services related to direct service delivery
 - E. Supplies include telephone, printing, office supplies, training manuals, films, or videotapes, etc.
 - F. Travel includes travel for staff or transportation for participants or volunteers
 - G. Equipment for items over \$100
 - H. Rent and Utilities for space required for staff or services
 - I. Training directly relevant to services and/or ongoing staff development
 - J. Evaluation for staff, equipment, supplies, or other items required to implement the project evaluation.
 - K. Miscellaneous may include those items not covered above such as insurance, membership fees, etc.
 - B. List the Total Project Cost for each line item (CTF grant amount + Cash match + In-kind match)
 - C. Total ALL columns
 - D. **MUST BE SIGNED BY THE AUTHORIZED SIGNATORY**

EXAMPLE

DIRECT SERVICE BUDGET PLAN FOR THE PERIOD OF OCTOBER 1, 2003 - SEPTEMBER 30, 2004

I. Name of Agency: ABC Agency

II. Name of Program: Parenting Education Project

III. Total Project Cost: \$45,000.00

IV. Sources of Funding

A. Children's Trust Fund A. \$30,000.00

B. Local Cash Match Amount B. \$ 9,000.00

C. Local In-Kind Match Amount C. \$ 6,000.00

D. TOTAL PROJECT COST (Sum of A, B, & C) D. \$45,000.00

***Cash & In-kind match must equal at least 50% of CTF award**

V. Budget

Line Item	CTF Grant	Local Cash Match	Local In-Kind Match	Total Project Cost
A. Salaries	\$10,000	\$3,000	\$4,000	\$17,000
B. Fringes	\$1,000			\$1,000
C. Administrative	\$ 500			\$ 500
D. Contractual	\$10,000	\$3,000		\$13,000
E. Supplies	\$2,200		\$1,500	\$3,700
F. Transportation	\$1,100			\$1,100
G. Equipment (over \$100)	\$ 400			\$ 400
H. Occupancy			\$ 500	\$ 500
I. Training	\$1,000	\$2,000		\$3,000
J. Evaluation	\$3,000	\$1,000		\$4,000
K. Miscellaneous	\$ 800			\$ 800
TOTAL	\$30,000	\$9,000	\$6,000	\$45,000

Print name _____ Original Signature of Authorized Signatory Required _____

Telephone No. _____

EXAMPLE

BUDGET DETAIL for the period of October 1, 2003 – September 30, 2004

Name of Fiscal Agent: ABC Agency

Name of Service/Project: Parent Support

Total Project Cost: \$45,000

Detail:

Line Item	Grant Request	Cash Match	In-kind Match
<u>Salaries</u>			
Program Coordinator at 20 hours a week	\$10,000	\$3,000 (ABC Agency - secured)	\$4,000 (ABC Agency – Administrator time-- secured)
<u>Fringes</u>			
FICA	\$600		
Unemployment	300		
Worker's Comp	100		
Health Insurance			
Administrative			
Indirect Costs	\$500		
<u>Contractual</u>			
1 Parent Instructor at 20 hours a week	\$10,000	\$3,000 (Applying for Community Foundation grant in January 2004)	
<u>Supplies</u>			
Curriculum materials for participants	\$2,200		
Office Supplies			\$1,500 (ABC Agency – secured)
<u>Transportation</u>			
Mileage reimbursement for traveling to clients home at \$.30 per mile.	\$1,100		

EXAMPLE

This is an example of a Documented Agreement. This example is not meant to suggest collaborative partners or roles in the CTF grant.

DOCUMENTED AGREEMENT

The following agencies agree to participate in the Parenting Education Project. The following summarizes the responsibilities of each agency:

ABC Agency will provide screening/assessment/referral, data collection, office space for the project coordinator, and program support for home-based weekly intervention services to 15 families that reside within the county. The project coordinator will also attend agency meetings and collaborate with member agencies through monthly coordinating council meetings.

The Children's Hospital will provide referrals to the Parenting Education program from families who are thought to be at risk. Families that have an active case on the Protective Service Caseload will not be referred.

The Child Abuse and Neglect Council will work collaboratively with the program by marketing the services in the community through the distribution of flyers and brochures. The council will also attend site visits conducted by the Children's Trust Fund.

The Health Department will house the parent educator and provide referrals to the program. The Department will also provide cash match (from a secured foundation grant) for a worker to conduct weekly parenting sessions.

The Community Mental Health will refer families to the classes where appropriate.

The XYZ schools will provide day care for parents during the weekly parenting sessions.

ABC University Evaluator, Joe White will attend all agency meetings and provide the outcome evaluation for the project.

The following agencies have agreed to refer families to the _____ program: Catholic Social Services, Lutheran Social Services, MSU Extension, Randolph Community Center, and the Family Resource Center.

_____, Executive Director
ABC Agency

_____, President
Children's Hospital

_____, Superintendent
XYZ Schools

_____, Health Officer
Health Department

_____, Director
Child Abuse & Neglect Council

_____, Evaluator
ABC University

_____, Director
Catholic Social Services

_____, Director
Lutheran Social Services

_____, Director
MSU Extension

_____, Director
Community Mental Health

_____, Director
Randolph Community Center

_____, Coordinator
Family Resource Center

ATTACHMENT B

- 1. Local Council List**
- 2. Technical Assistance Registration Form**
- 3. Map to Site**
- 4. Intent to Apply**
- 5. Application Check-List**

Children's Trust Fund Technical Assistance Session

February 11, 2003

Family Independence Agency
Grand Tower Building
Conference Room 1C (Dempsey Room)
235 S. Grand Avenue
Lansing, Michigan

Registration Form

Complete this form and return it to the address (or fax number) listed at the bottom. Duplicate this form for additional persons who will attend. Please note: Registrations will be taken on a first come, first serve basis. The facility can accommodate 75 individuals. You will be notified only if the session is filled to capacity and your name is placed on a waiting list.

Please Print or Type

Name	
Agency	
County	
Address	
City, Zip	
Telephone	
Fax	
E-Mail	
Special Needs	

Mail or fax or mail this form prior to February 5, 2002 to:

Children's Trust Fund
Direct Service Technical Assistance Session, Attn: Shannon Stotenbur
235 S. Grand Avenue, Suite 1411
PO Box 30037
Lansing, MI 48933
(517) 373-4320
FAX: (517) 241-7038

Directions
to
Children's Trust Fund Office, Lansing

FROM DETROIT/ANN ARBOR

Take I-96 west to US-127 north.

Take I-496 west (left lane exit) to Downtown Lansing Grand Avenue exit.

Turn right on Grand Avenue

FROM FLINT/SAGINAW

Take I-69 west to I-27 south.

Take I-496 west to Downtown Lansing Grand Avenue exit.

Turn right on Grand Avenue.

FROM GRAND RAPIDS

Take I-96 east to I-496 east.

From I-496 east, take the Downtown Lansing Pine/Walnut Street exit (this is a service drive).

Turn left on Walnut Street, crossing over I-496 Allegan Street.

Turn right (east) on Allegan to Grand Avenue.

Turn left on Grand Avenue

FROM JACKSON

Take US-127 north to I-496 west (left lane exit) to the Downtown Lansing Grand Avenue exit.

Turn right on Grand Avenue

FROM KALAMAZOO/BATTLE CREEK

Take I-94 east to I-69 north to I-496 east.

From I-496 east, take the Downtown Lansing Pine/Walnut Street exit (this is a service drive).

Turn left on Walnut Street, crossing over I-496 to Allegan Street.

Turn right (east) on Allegan to Grand Avenue.

Turn left on Grand Avenue.

**PARKING RAMP AVAILABLE ON RIGHT, JUST NORTH OF
GRAND TOWER BLDG.**

Children's Trust Fund
235 S. Grand Avenue, Ste. 1411
Lansing, MI 48909

Children's Trust Fund Request for Proposal

**NOTICE OF INTENT TO APPLY
FOR FY 2004 GRANTS**

Organization: _____

Contact Person: _____

Address: _____

Phone: _____

Fax: _____

E-mail: _____

County(ies) to be Served: _____

Please submit this form if your agency is applying for CTF funds under this RFP. Although applicants are not required to turn in this form, its submission assists in the preparation for the grant review.

Please mail or fax this form to:

**Children's Trust Fund
Attn: Shannon Stotenbur
235 S. Grand Ave., Ste 1411
Lansing, MI 48909
(517) 335-4620
Fax: (517) 241-7038**

CHECK LIST FOR CTF GRANT APPLICANTS

- Is the application double-spaced?
- Did you use at an 11 point and readable font?
- Are the margins no less than one inch?
- Did you complete the Application Face Sheet?
- Is the Application Face Sheet **signed by the authorized signatory?**
- Is the Local Council Review Sheet (Proposal Rating Criteria) attached to the original application and ALL four copies and signed by the local council reviewers?
- Are Disclosure Statements attached to the original application and ALL four copies and signed by the local council reviewers?
- Is the Narrative 10 pages or fewer?
- Is the Budget Plan Form attached and **signed by the authorized signatory?**
- Are the Documented Agreements and Work plan attached?
- Were there any miscellaneous forms that needed to be attached?
- IS THE **ORIGINAL** GRANT PROPOSAL AND ALL FOUR COPIES (FIVE TOTAL) PACKETED IN THE FOLLOWING ORDER?
 1. Application Face Sheet
 2. Local Council Review Sheet(s) (Proposal Rating Criteria)
 3. Disclosure Statement(s)
 4. Narrative (10 pages or fewer)
 5. Work plan
 6. Budget Plan Form
 7. Budget Narrative
 8. Budget Detail
 9. Documented Agreements
 10. Miscellaneous Attachments (not required)

NOTE: The authorized signatory listed on the face sheet must be the same person who signs the budget page.

CHILDREN'S TRUST FUND LOCAL COUNCIL CONTACT LIST

ALLEGAN - Allegan Co. Prevention of
CAN Council
231 Trowbridge Street, Suite 15A
Allegan, MI 49010
Cathy Weirick (269) 673-3791
FAX: (269) 686-9481
I:allegancan@yahoo.com

ALPENA/PRESQUE ISLE - Alpena
CAN
Team Inc.
P.O. Box 516
Alpena, MI 49707
Robin Hart (989) 356-3474 ext 241
FAX: (517)354-7693
I:hartr@nemesa.org

ANTRIM - Antrim Co. CAN Council
P.O. Box 123
Bellaire, MI 49615
Tammy Hickman (231) 587-4365
FAX: (231) 587-5313
I:tammyhickman53@hotmail.com

ARENAC - Bay Women's Center
P.O. Box 1458
3411 E. Midland Road
Bay City, MI 48706
Barbara Rajewski (800) 686-2251
FAX: (989) 686-0906
I:brajewski@hotmail.com

womencen@concentric.net

BARAGA/HOUGHTON/KEWEENAW
Children's Trust - Superior Council
c/o Copper Co. Mental Health Services
Institute
P.O. Box 832
900 W. Sharon Ave.
Houghton, MI 49931
Taryn Mack (906) 482-4880
FAX: (906) 482-7657

BARRY - Child Abuse Council
P.O. Box 304
430 Barfield
Hastings, MI 49058
Karen Jousma (269) 948-3264
FAX: (269) 948-4101
I:jousma@iserv.net
www.barrycounty.org

BAY - Council for CAN
715 N. Euclid
Bay City, MI 48706
Amy Muempfer (989) 671-1355
FAX: (989) 671-2365
I:Atmuempfer@earthlink.net

BENZIE - Benzie Co. CAP Council
C/O MSU Extension
P.O. Box 349
Beulah, MI 49617
Christine Gehring (231) 882-0025
FAX: (231) 882-9605
I:Gehringc@msue.msu.edu

BERRIEN - Council for Children
185 E. Main St. Suite 802A
Benton Harbor, MI 49022
Ellen Russell (269) 934-8630
FAX: (269) 934-8633
I:children@parrett.net

BRANCH - Branch Co. Council for C.A.N.
63 W. Washington St.
P.O. Box 17
Coldwater, MI 49036
Barbara Yesh (517) 278-5683
FAX: (517) 278-5683
I:bccc@cbpu.com

CALHOUN - Calhoun C.A.N. Council
P.O. Box 1216
Battle Creek, MI 49016
Mary Carol Ambrose (269) 962-2562
FAX: (269) 962-2261
I:Bam1655@aol.com

CASS - Cass Co. Youth Council
c/o Friend of the Court
P.O. Box 38
Cassopolis, MI 49031
Kristin Schott (269) 445-4446
FAX: (269) 445-4435
I:schottk@earthlink.net

CHARLEVOIX/EMMET - Child Abuse
Council -Charlevoix/Emmet
Box 414, Petoskey, MI 49770
161 Anderson Rd, Boyne City 49712
Beth Anzell (231) 9224821 Phone/Fax
I:anzell@gtlakes.com

CHEBOYGAN - Child Advocacy Council -
595 O'Brien Dr.
Cheboygan, MI 49721
Debra Turnbull (231) 627-6015 (home)
(231) 597-9421 (work afternoons)

CHIPPEWA - Child Protection Council
P.O. Box 636
620 E. Portage
Sault Ste. Marie, MI 49783
Renee Johnson (906) 635-0566
FAX: (906) 635-2952
I:Eupdvp4@30below.com

CLARE - Clare Co. Youth Council
166 E. Main P.O. Box 990
Harrison, MI 48625
JoAnne Cussans
(989) 539-8894
FAX: (989) 773-5339
I:cussansj@msu.edu

CLINTON - Clinton Co. Council for the
Prevention of Child Abuse and Neglect
1000 E. Sturgis, Suite 3
St. Johns, MI 48879
Ruth Rockwell - I:rockwell@ceicmh.org
(989) 224-5303 FAX: (989) 224-2342

CRAWFORD/ROSCOMMON -
Child Protection Council
P.O. Box 2
Roscommon, MI 48653
Marey Jurkovich (989) 348-3169
FAX: 989-348-1719
I:crpc@yahoo.com

DELTA - Delta Co. Alliance Against
Violence & Abuse
115 South 13th St.
Escanaba, MI 49829
Sandra St. Ours (906) 789-9207
FAX: (906) 789-5640

EATON - Eaton Co. CAN Prevention Council
325 S. Clinton, Lower Level N.E.
P.O. Box 301
Grand Ledge, MI 48837
Cheryl Krapf-Haddock (517) 622-4543 (Phone &
Fax) or (517) 881-9752
I:Cherylhaddock@yahoo.com

GENESEE - Consortium on CAN
726 Church St.
Flint, MI 48502
Mary Vojdik (810) 234-3680
FAX: 810-234-2265
I:ccan@peoplepc.com
www.ccan-flint.org

GLADWIN - Gladwin Co. CAN Council
c/o Strong Families/Safe Children
P.O. Box 426
103 Bowery Ave.
Beaverton, MI 48612
Alison Fegan (989) 426-9431
FAX: (989) 426-6952
I:afegan@cmdhd.localhealth.net

GOGEBIC- Gogebic Co. Child Protection Council
MSU Extension
104 S. Lowell St.
Ironwood, MI 49938
Cara Matrella (906) 932-1420
FAX: (906) 932-9762
matrellc@msue.msu.edu

**GRAND
TRAVERSE/KALKASKA/LEELANAU** -
Tri-Co. Coalition for the Prevention of Child Abuse
& Neglect
520 West Front Street
Grand Traverse, MI 49684
Jennifer Berkey (231) 922-4821
FAX: (231) 922-4633 I:berkeyj@msue.msu.edu

GRATIOT - Gratiot Co. Child Protection Council
150 W. Center St.
Alma, MI 48801-2266
(989) 463-1422 FAX: (989) 466-2140

MONTMORENCY/OSCODA - Child Protection Council
13542 Traverse Lake Trail
Johannesburg, MI 49751
Julie Wells (517) 786-2960

MUSKEGON - Child Abuse Council of Muskegon
1781 Peck St.
Muskegon, MI 49441
Vickie Price (231) 728-6410
FAX: (231) 722-7161

NEWAYGO - Council for the Prev. of CAN
P. O. Box 207
Fremont, MI 49412
Karen Kroll (231) 924-7614
FAX: (231) 924-5391

OAKLAND - Child Abuse & Neglect Council of Oakland Co.
44765 Woodward Ave.
Pontiac, MI 48341
Pat Rosen (248) 332-7173
FAX: (248) 333-1539
I:Director@carehouse.org
www.carehouse.org

OCEANA - Oceana Children's Help Center
302 Hanson St.
Hart, MI 49420-1385
Valerie K. Rabe (231) 873-1707
FAX: (231) 873-1456
I:valerie@oceana.net

OGEMAW - Ogemaw Co. Child Protection
P. O. Box 307
444 W. Houghton Ave.
West Branch, MI 48661
Brenda Stapleton (989) 345-6547
FAX: (989) 345-8590
I:stapletonb@michigan.gov

ONTONAGON CO.
Carol Yakovich
GO ISD
P.O. Box 218
Bergland, MI 49910
(906) 575-3438
Fax: (906) 575-3373
I:Cyako@goid.K12.mi.us

OSCEOLA - Osceola Children's Council
P.O. Box 63
Reed City MI 49677
Bridget Alexander (231) 832-4119
FAX: (231) 832-4117
alexanderb@michigan.gov

OTSEGO - Otsego Co. Child Welfare Alliance
P. O. Box 948
Gaylord, MI 49734
Julie Powers-Gehman
(989) 732-9880 FAX: (517) 732-6029
I:jpowersgelman@netscape.net

OTTAWA - Ottawa Co. 4C/SCAN
710 Chicago Drive, Suite 250 & 260
Holland, MI 49423
Jodi Glass (616) 396-8151 or
(800) 332-5049
FAX: (616) 396-4349
I:Jglass@i2K.com www.crn.nu

SAGINAW - Saginaw Co. CAN Council
1311 N. Michigan
Saginaw, MI 48602
Suzanne Greenberg (989) 752-7226
FAX: (989) 752-2777
I:sgreenberg@cancouncil.org

SANILAC - Sanilac Co. Child Abuse Prevention
P.O. Box 221
Sandusky, MI 48471
Tami Fracassa
(810) 633-9242
FAX: (810) 633-9242
I:babyou1986@hotmail.com

SCHOOLCRAFT CO.
Schoolcraft Co. Child Abuse and Neglect Council
426 Chippewa Ave.
Manistique, MI 49854
Joan Ecclesine
(906) 341-6423 (work)
(906) 341-6637 (h)
Fax: (906) 341-5862
I:manistiqueecc@chartermi.net

SHIAWASSEE - Shiawassee Council for CAN
P.O. Box 426
Owosso, MI 48867
Robin Stechshulte (989) 723-5877
FAX: (989) 723-8230
I:stechsch@msu.edu

ST. CLAIR - St. Clair Co CAN Council, Inc.
P. O. Box 61-1031
Port Huron, MI 48061-1031
Sally E. Strafon (810) 966-9911
FAX: (810) 966-9933
I:sccanco@advnet.net

ST. JOSEPH - Council for Prev. of CAN
17975 Centreville - Constantine Rd.
Constantine, MI 49042
Suzanne Lind (269) 435-7288
I:Lind@beanstalk.net

TUSCOLA - Tuscola Co. CAN Council
PO Box 290
Caro, MI 48732
Emily Turner - President
Deb Wurdock - Coordinator (989) 673-9173 (W)
(989) 674-8413 (H)
I:turnerc2@michigan.gov

VAN BUREN - Council for Prev. of CAN
P.O. Box 23
Paw Paw, MI 49079-0023
A. Jean Dahms (616) 657-5194

WASHTENAW - Council for Children
3075 West Clark Road
Suite 110
Ypsilanti, MI 48197
Elizabeth A. Longley (734) 434-4215
Fax: 734-434-4243
I:wacc@provide.net
<http://community.mlive.com/cc/wacc>

WAYNE (Out) - Child's Hope (Child Abuse Prevention Council of Out-Wayne County)
C/O U of M - Dearborn, School of Education
4901 Evergreen Road
Dearborn, MI. 48128-1491
Penny C. Thomas (313) 583-6401
Fax (313) 583-6402
I:chldhpe@umd.umich.edu

WAYNE - Mayor's Task Force on CAN
c/o Detroit-Wayne 4C
2151 East Jefferson, Suite 250
Detroit, MI 48207
Carol Quarterman Chair. (313) 259-4411
FAX: (313) 259-4415
I:F4CLTQ@AOL.COM

WEXFORD/MISSAUKEE - Child Protection Council
Lake City School
7080 Jamie Dr.
McBain, MI 49657
Holly Dick (231) 839-7596
FAX: (231) 839-6680
I:hdick@lakecity.k12.MI.us
J:\Local Councils\LOC_LIST.FY00.doc
Local Council full address list.doc
Last printed 12/19/02 9:36 AM

Local Council
Quarterly Report
Forms

CTF Local Council Quarterly Activity Report (2003-2004 Grant Period)

Council: _____

County(s): _____

Amount of Allocation: _____

Telephone Number: _____

Quarter: _____ 1st Due 1-20 _____ 2nd Due 4-20

_____ 3rd Due 7-20 _____ 4th Due 10-20

Completed By _____

Date _____

Original Signature of Authorized Signatory _____

Date _____

Note: If your original prevention plan contained more goals than what this form contains, just copy and paste additional sections as needed.

Need:				
Goal:				
Strategy <small>(What activities, services, programs or resources will the council conduct to meet the goal)</small>	Target Audience	Expected Date of Completion	Quarterly Activity Summary	Outcomes/Evaluation Results

If there were any unanticipated benefits or challenges encountered with the above, please describe:

Need:				
Goal:				
Strategy (What activities, services, programs or resources will the council conduct to meet the goal)	Target Audience	Expected Date of Completion	Quarterly Activity Summary	Outcomes/Evaluation Results

If there were any unanticipated benefits or challenges encountered with the above, please describe:

Need:				
Goal:				
Strategy (What activities, services, programs or resources will the council conduct to meet the goal)	Target Audience	Expected Date of Completion	Quarterly Activity Summary	Outcomes/Evaluation Results

If there were any unanticipated benefits or challenges encountered with the above, please describe:

Need:

Goal:

Strategy (What activities, services, programs or resources will the council conduct to meet the goal)	Target Audience	Expected Date of Completion	Quarterly Activity Summary	Outcomes/Evaluation Results

If there were any unanticipated benefits or challenges encountered with the above, please describe:

Need:

Goal:

Strategy (What activities, services, programs or resources will the council conduct to meet the goal)	Target Audience	Expected Date of Completion	Quarterly Activity Summary	Outcomes/Evaluation Results

If there were any unanticipated benefits or challenges encountered with the above, please describe:

Need:				
Goal:				
Strategy (What activities, services, programs or resources will the council conduct to meet the goal)	Target Audience	Expected Date of Completion	Quarterly Activity Summary	Outcomes/Evaluation Results
If there were any unanticipated benefits or challenges encountered with the above, please describe:				

Need:				
Goal:				
Strategy (What activities, services, programs or resources will the council conduct to meet the goal)	Target Audience	Expected Date of Completion	Quarterly Activity Summary	Outcomes/Evaluation Results
If there were any unanticipated benefits or challenges encountered with the above, please describe:				

CTF also wants to hear your success stories! Please let us know about your successful public awareness campaign, press conference, a new program or publication, how your program made a difference in someone's life, etc.

LOCAL COUNCIL REPORT OF EXPENDITURES

(FY 2004 Grant Period)

CTF APPROVAL	
Grant Monitor Approval	

I. Name of Local Council: _____

II. County(s) _____

III. Total CTF Allocation: \$ _____ Total Project Cost: \$ _____

IV. Reporting Period (Please Check) 1st 2nd 3rd 4th

OTE: All figures with the exception of the cumulative year-to-date total should reflect expenditures during the quarter.

- 50% match of the CTF allocation is required (at least 20% cash)

Line Item	CTF Allocation	Local Cash Match	Local In-Kind Match	Quarterly Total
A. Salaries (Personnel)				
B. Fringes				
C. Contractual				
E. Supplies				
F. Transportation (Travel)				
G. Equipment				
H. Occupancy (Rent)				
I. Training				
I. Miscellaneous (please list)				
QUARTERLY TOTAL				
YEAR-TO-DATE TOTAL*				

***Year-to-date totals should reflect expenditures including previous quarters.**

PRINTED OR TYPED NAME

ORIGINAL SIGNATURE REQUIRED

TELEPHONE NUMBER

CHILDREN'S TRUST FUND
Local Council Program Register
Fiscal Year 2003-2004

CTF Grant Monitor Approval _____

Name of Council: _____

County(ies) Served: _____

Council Telephone Number: () _____

Quarter of the Year: _____ 1st _____ 2nd _____ 3rd _____ 4th

Date Forwarded: _____

Completed By: _____
 (Print or Type Name)

Does this Council Provide Direct Service(s) to Children & Families: Yes _____ No _____

		Quarterly Services & Year-To-Date Totals							
		1st	YTD	2nd	YTD	3rd	YTD	4th	YTD
I. Participant Data*									
Number of Families Served (in all programs/services)									
Total Number of Adults									
Total Number of Children (including special needs children)									
Total Number of Special Needs Children Only									
Race of Enrolled Families (Adults & Children)**		1st	YTD	2nd	YTD	3rd	YTD	4th	YTD
Race: White/Caucasian	Adult								
	Child								
Race: Black/African-American	Adult								
	Child								
Race: Hispanic or Latin-American	Adult								
	Child								
Other Race (Please Specify): _____	Adult								
	Child								
II. Activities/Services Data***									
A. Public Awareness/Outreach		1st	YTD	2nd	YTD	3rd	YTD	4th	YTD
Information Booths & Fairs (each event is counted as one)									
Newspaper Articles (each printed article is counted as one)									
Press Releases (each written release is counted as one)									
PSA's (each radio or tv psa produced is counted as one)									
Billboards (e.g. Shaken baby or prevent child abuse) (total number of billboards)									
Newsletter Distributed (every newsletter distributed is counted as one)									
Speaking Engagements (including speeches, interview with TV, Radio & Newspapers):		Specify:							
Number of Engagements									
Number of people attended (estimate)									
Printed Materials Distributed (e.g., Brochure/Inserts-not counting newsletter)									
Other Public Awareness Activities		Specify:							
Publicity Events (e.g. press conferences, other events not listed)									
Number of Engagements									
Number of people attended (estimate)									

E. Direct Services (complete this section using the guidelines provided)		1st	YTD	2nd	YTD	3rd	YTD	4th	YTD
Home Visits									
Parenting Classes									
Support Groups									
Group Counseling									
One on one Counseling									
Screening									
Telephone Contacts									
Child Care Services									
Respite Care Services									
Transportation									
Referrals									
Resource Coordination									
Workshops									
Prenatal Services									
Other Service:(Specify):									
TOTAL DIRECT SERVICES									

* This section represents data on the families and/or children who "participated" in activities or "received" services from your council.

** Use these lines to designate the ethnic/racial groups families/children "participated" in activities or "received" services from your council.

*** This section represents data on type & number of "activities/services" conducted or provided to families/ children who "participated" in activities and/or "received" services from your council during each quarter and year-to-date.

If there are any questions contact your Grant Monitor at the Children's Trust Fund Office (517) 373-4320.

CTF FY 2003 Designated Local Council Application
Due Date: June 3, 2002

Date

To:

Enclosed is the Children's Trust Fund's application for FY 2003 Local Council Designation. Applications are due at the Children's Trust Fund office by June 3, 2002. **Applications received after June 11, 2002 will not be reviewed and this will result in the loss of the CTF allocation for FY 2003.**

The applications will be reviewed Wednesday, June 12, 2002. For each day the application **is late** (due June 3, 2002), up to the date of review, councils will be **assessed a daily late penalty of 5 percent** that will be deducted from the local council's FY 2003 allocation. Prior to June 12, 2002, CTF staff will review all applications for completeness.

All local councils must meet the requirements for Tier 1 and send in all the documentation (indicators) requested on pages 4-5 in order to verify that they meet the Tier 1 requirements. For local councils that are applying for Tiers 2 or 3, CTF has randomly selected two indicators/documentation (see page 2) from these tier levels that must accompany the completed application. All documentation to support the Tiers 2 or 3 criteria should be kept on file at the local council office or at the home of a board member. Please make sure these are readily available in the event that the Children's Trust Fund should request additional documentation for Tiers 2 or 3. On page 2 you will see that CTF has requested that your council send in documentation from Tiers 2 and 3. However, if your council is only applying for Tier 1, you should not send the documentation for those Tiers and if your council is applying for Tier 2, then you should not send in the requested documentation for Tier 3.

Please make sure the application is complete, signed and dated by the authorized signatory and all documentation requested is attached to this application. The completed application and documentation should be mailed to the Children's Trust Fund at:

235 S. Grand Avenue, Suite 1411
Lansing, Michigan 48933

Your council will receive notice of the amount of your CTF allocation, along with the FY 2003 designation agreement and budget plan in July 2001. Please note that local councils will now have to have a 50% match of which a minimum of 20% must be in cash.

If you have any questions regarding this application, please contact your regional coordinator or Janice Long at (517) 373-4321 or via email at longj2@michigan.gov.

APPLICATION INSTRUCTIONS

Application Due Date

Without Late Penalty: Monday, June 3, 2002

With Late Penalty: Tuesday, June 11, 2002

Application Face Sheet

Complete the application face sheet. Make sure the tier level your council is applying for is circled.

Tier 1

To receive any funding from the CTF, **all** local councils must meet the Tier 1 criteria. **All** local councils must complete the application face sheet, pages 4-5 (Tier 1), attach the documentation (indicators) for each criterion listed, and **the authorized signatory** must sign and date where indicated on page 5. If your local council is only applying for Tier 1, you should stop after completing page 5. You do not complete pages 6-10 of the application. **Councils applying for Tier 2 must also have their authorized signatory sign and date page 7.**

Tier 2

If your local council is applying for Tier 2, complete the sections on Tier 1 and continue on to page 6 and follow the directions. Please answer all the questions and check the appropriate boxes. Local councils applying for Tier 2 should not send all the documentation (indicators) listed in Tier 2. Instead the Children's Trust Fund has randomly selected that your local council attach the following document(s) to this application to verify the requirements for Tier 2. **The local council's authorized signatory must sign and date the application where indicated on page 7. Councils who are apply for Tier 3 also must have their authorized signatory sign and date on page 10.**

Tier 3

If your local council is applying for Tier 3, complete the sections on Tier 1 and Tier 2 and continue on to page 8 and follow the directions. Please make sure you answer all questions and check the appropriate boxes. Local councils applying for Tier 3 should not send all the documentation (indicators) listed in Tier 3. Instead the Children's Trust Fund has randomly selected that your local council attach the following documents to this application to verify the requirements for Tier 3: Also, make sure you provide the documentation requested for Tier 2. **The local council's authorized signatory must sign and date where indicated on page 10.**

Additional Documentation

Some time in May your council will receive a letter from CTF requesting that you send one additional piece of documentation to verify one of the required criterion contained in the tier for which you are applying. This piece will be due back in our office by June 3, 2002. Please make sure you are on the lookout for this letter. If your council has a post office, please make sure that the mail is picked up regularly and that it is delivered to the person responsible for completing this application.

Please make sure the application is complete and that it is accompanied by all requested documentation. Incomplete applications cannot be reviewed and will result in the loss of the FY 2003 CTF allocation.

Enclosures:
Application
Funding Formula
Glossary

CTF LOCAL COUNCIL FUNDING FORMULA APPLICATION FACE SHEET

1. Local Council Information

Our Local Council is applying for (circle one): Tier 1 Tier 2 Tier 3

Local Council Name: _____

Local Council Contact Person: _____

Street Address: _____ P. O. Box: _____

City, State, Zip Code: _____

Telephone: _____ Fax: _____

E-mail Address: _____

Authorized Signatory (Print and Sign Name): _____

Telephone: _____ Fax: _____

E-mail Address: _____

Is the Local Council a 501 (c) (3)? Yes No

If Yes, Federal I.D. #: _____

Local Council's Fiscal Year: Beginning: // Ending: //

Does the Local Council Annually receive more than \$300,000 in Federal Funds? Yes No

Please complete the following information only if the local council is a program within another agency and does not hold its own 501 (c) (3).

2. Agency Information

Name of the Agency holding the 501 (c) (3) Status: _____

Name of the Executive Director of the Agency holding the 501 (c) (3) status: _____

Street Address: _____

City, State, Zip Code: _____

Telephone: _____ Fax: _____

E-mail Address: _____

Federal I.D. Number of the Non-Profit or Public Agency holding the 501 (c) (3) Status: _____

Agency Fiscal Year: Beginning: // Ending: //

Does the Agency receive more than \$300,000 in Federal Funds? Yes No

APPLICATIONS ARE DUE AT THE CTF OFFICE ON JUNE 3, 2001.
CTF LOCAL COUNCIL FUNDING FORMULA APPLICATION

Tier 1
Criteria and Indicators

1. All local councils applying for CTF designation must meet the criteria for Tier 1 and attach the documentation listed below to this application.
2. After completing pages 4-5 and attaching the required documentation, local councils applying for Tiers 2 or 3 should proceed to page 6.
3. Local councils who are only applying for Tier 1 should not complete out pages 6-10.

Please check the appropriate boxes to indicate which documentation you are attaching.

1. **501 © (3) status** (If the council has its own 501 (c) (3) complete A. If the council is a program of another agency, complete B)
 - A. **Councils that have been granted 501 © (3) status for their organization** (attach a copy of **one** of the following)
 - IRS notification (exemption letter) granting 501 © (3) status, **or**
 - Form 1023, *Application for Recognition of Exemption Under Section 501 © (3) of the Internal Revenue Code* that was submitted to the IRS if the council has not received their IRS notification letter as of June 2003. (This will only be accepted in FY 2003.) On receipt of Form 1023 a copy of the IRS notification letter must be sent to CTF.
 - B. **Councils, which are a program of another nonprofit organization** (attach a copy of **all** of the following)
 - A copy of the organization's IRS notification (exemption letter), **and**
 - A written statement from the executive director of the 501 © (3) organization that provides verification that the local council is a program of this legal entity, **and**
 - An organizational chart showing the relationship between the council and the legal entity.
2. **Articles of Incorporation** (attach a copy of the following)
 - Article of Incorporation stamped and dated by the Michigan State Attorney General.
3. **Michigan Charitable Solicitation License** (attach a copy of **one** of the following)
 - A current Michigan Charitable Solicitation License, **or**
 - Verification from the Michigan Attorney General's Charitable Trust Section verifying that the council need not apply for a license.
4. **Annual Financial Documentation** (attach a copy of **one** of the following)
 - Audit, **or**
 - Financial review signed by a CPA (who is not a board member), **or**
 - IRS 990 or 990EZ, **or**
 - Year-end certified financial statement (only for councils with budgets under \$25,000).
5. **Bylaws** (attach a copy of **one** of the following)
 - Current bylaws, **or**
 - Agency bylaws (if a council is a program within another agency)

6. **Board of Directors** (on the **form** provided in this packet, attach the following)
- A list of the board of directors and the agency or organization they represent, **and**
 - If unable to secure all the CTF mandated board members**, a written description of steps taken to recruit this representation. (This information may be shared with the directors of the appropriate state agency.)
7. **Prevention Plan** (attach a copy of the following)
- A prevention plan that addresses all counties covered by the local council.
8. **Board Recruitment** (attach a copy of the following)
- A written description of the council's board recruitment process and orientation.

I declare that, to the best of my knowledge and belief, the application information I have provided is accurate.
In addition, the _____ Board of Directors agrees to maintain this level of performance.
Local Council Name

(Signature and Date)

STOP HERE IF YOU ARE APPLYING FOR TIER 1.
PROCEED TO PAGE ___ IF YOUR COUNCIL IS APPLYING FOR TIERS 2 OR 3.

TIER 2
Criteria and Indicators

INSTRUCTIONS

1. Before answering the questions below, make sure your local council meets the criteria in Tier 1 and has attached copies of all the documentation required.
2. Circle **YES** if the council meets the criteria listed below and is able to verify this by providing the documentation (indicator) if requested. Only attach the documentation that CTF requested in the "Application Instructions" on page 2 for Tier 2. However, make sure that your council has all the documentation (indicators) for Tier 2 on file at your office.
3. If your council does not meet all the criteria listed below, it is ineligible for Tier 2 and can not apply for Tier 3.
4. **Make sure you answer all questions and the authorized signatory signs and dates this application where indicated page 7. If you are applying for Tier 3, proceed to page 8 after completing pages 6-7.**

1. **Strengthened Capacity** - Local Councils must have **at least three (3)** of the following:

Please check the categories that your council has in place and circle yes or no for each.

- Part-time paid staff with job description** (10 + hours per week)

Job description for all positions, and	YES	NO
Staff recruitment and screening procedures, and	YES	NO
Staff resumes.	YES	NO

- Use of volunteers**

Volunteer position descriptions, and	YES	NO
Application form, and	YES	NO
Process for reviewing application with applicant, and	YES	NO
System for tracking volunteer hours.	YES	NO

- Fundraising**

List of fundraisers and amount raised in the past year, and	YES	NO
List of proposed fundraisers for coming year with projected net profit.	YES	NO

- Assess insurance needs and purchase**

An annual process for assessing insurance needs and purchase if needed, and	YES	NO
A list of insurance(s) and policy numbers if purchased.	YES	NO

- Committee structure:** Local council board member as chairperson, at least 3 committee members, regular meetings.

A list of committees along with goals/objectives, and	YES	NO
Meeting schedule, and	YES	NO
A list of annual accomplishments.	YES	NO

- Interaction with community groups**

List of committees and initiatives that the local council representative attends as a representative of the council.	YES	NO
--	-----	----

2. **3-5 year strategic plan and annual board review**

A copy of the formal strategic plan, and	YES	NO
Minutes of the meeting indicating the plan was reviewed and/or updated annually.	YES	NO

3. **Financial statement reviewed at each board meeting**

Board meeting minutes that indicate board review and approval of the financial statement or treasurer's report.	YES	NO
---	-----	----

4. **Active leadership**

Criteria and Indicators

Councils applying for Tier 3 must also meet the criteria in Tier 1 and 2

INSTRUCTIONS

1. Before answering the questions below, make sure your local council meets the criteria in Tiers 1 and 2 and has attached copies of all the documentation required for Tier 1 and the documentation requested in the "Application Instructions" (page 2) for Tier 2.
2. Circle **YES** if the council meets the criteria listed below and is able to verify this by providing the documentation (indicator) if requested. Only attach the documentation that CTF requested in the "Application Instructions" (page 2) for Tier 3. However, make sure that your council has all the documentation (indicators) for Tier 3 on file at your office.
3. In order to reach the Tier 3 level, the council must meet the criteria in 1-12 below. If your council does not meet all the requirements, your council is ineligible to apply for Tier 3. There is no need to complete this section of the application.
4. **Make sure all questions are answered and the authorized signatory signs and dates this application where indicated on page 10.**

1. **Strengthened capacity** – local councils must have **at least one (1)** of the following:

Please check the categories that your council has in place and circle yes or no for each.

- | | | |
|---|------------|-----------|
| <input type="checkbox"/> Advisory board | YES | NO |
| List of members, and | YES | NO |
| Description of the purpose of advisory board, and | YES | NO |
| Meeting schedule | YES | NO |
| <input type="checkbox"/> Training budget for staff development | YES | NO |
| Budget line item, and | YES | NO |
| Detailed expenditure report | YES | NO |
| <input type="checkbox"/> Volunteer Management System: A written plan that includes: | YES | NO |
| Review of where volunteers are needed within the organization, and | YES | NO |
| Recruitment plan, and | YES | NO |
| Retention plan, including opportunities for volunteer education and support, and | YES | NO |
| Volunteer recognition plan. | YES | NO |
| <input type="checkbox"/> Board Management System: A written document that includes: | YES | NO |
| Board assessment tool (each board member evaluates the work of the board as a "whole"), and | YES | NO |
| Board member assessment tool (each board member evaluates their individual performance), and | YES | NO |
| Board orientation process, and | YES | NO |
| Board development and training plan, and | YES | NO |
| Board nomination process, and | YES | NO |
| Election policy. | YES | NO |
| <input type="checkbox"/> Defined network of agencies and organizations | YES | NO |
| List of contacts and affiliations with which the council networks, coordinates, or collaborates. | YES | NO |
| <input type="checkbox"/> Other | YES | NO |
| Written description of strengthened capacity (must be approved by CTF). | YES | NO |

2. Part-time paid executive director (20 + hours per week)		
Job description, and	YES	NO
Procedures for recruiting and screening executive director, and	YES	NO
Resume of staff on file.	YES	NO
3. Use of Volunteers		
Volunteer position descriptions for key areas (fundraising, direct service, support staff, etc.), and	YES	NO
Application form, and	YES	NO
Process for reviewing application with applicant, and	YES	NO
System to track volunteer hours, and	YES	NO
Board and staff job descriptions	YES	NO
4. Committee structure – Board member as chair, a minimum of 3 members, and regular meetings.		
List of committees along with goals/objectives, and	YES	NO
Meeting schedule, and	YES	NO
A list of annual accomplishments.	YES	NO
5. 3-5 year strategic plan with fund development plan		
Local councils must have all three of the following:		
A fund development plan that outlines over the 3-5 years the types of funding support that fund the agency budget (government, foundation grant, special event fundraising, annual mail campaign, in-kind, (other) and specific sources of funding amounts targeted by year, and	YES	NO
A formal strategic plan (including prioritized goals and actions steps to achieve the goals), and	YES	NO
A written plan or policy to review the strategic plan and fund development plan annually or minutes that indicate plan was reviewed.	YES	NO
6. Marketing/public awareness		
A plan showing marketing/public awareness objectives.	YES	NO
7. Vision statement with beliefs/value		
A written statement that describes the council's vision and beliefs/values.	YES	NO
8. Printed annual report		
Copy of most recent annual report.	YES	NO
9. Assess insurance needs and purchase – board, liability, etc		
An annual process for assessing insurance needs and purchase if needed, and	YES	NO
A list of insurance(s) and policy numbers if purchased.	YES	NO
10. Provide prevention leadership on community committees		
A list of groups that the executive director and key council staff serve on as the "voice of child abuse prevention".	YES	NO
11. Mentor/provide technical assistance to other councils		
Local councils must have at least one of the following:		
Written description of the work with other local councils, or	YES	NO
Council staff representation on CTF board committees, or	YES	NO
Attended at least one CTF board meeting.	YES	NO

12. Conducts at least three (3) of the following primary & secondary prevention activities:

Please **check** the activities that your council provides.

Note: This can be an enhancement or expansion of a service counted in Tier 2, #6.

- | | |
|--|---|
| <input type="checkbox"/> Community education | <input type="checkbox"/> Advocacy |
| <input type="checkbox"/> Safety programs | <input type="checkbox"/> Coordination/collaboration |
| <input type="checkbox"/> Parent education | <input type="checkbox"/> Convenes/facilitates meeting
around prevention issues |
| <input type="checkbox"/> Professional education (e.g.,
mandatory reporting) | |

Written documentation of the program or activity with supporting materials (e.g., brochures, flyers, support letters, training curriculum, etc.)

YES

NO

I declare that, to the best of my knowledge and belief, the application information I have provided is accurate.
In addition, the _____ Board of Directors agrees to maintain this level of performance.
Local Council Name

(Signature and Date)

Glossary*

Advisory Board

Very simply put, an advisory group is a collection of individuals who bring unique knowledge and skills to complement the knowledge and skills in a more official, or formal, group (for example, a board of directors). These groups are sometimes called advisory committees or advisory boards (don't confuse the term "advisory board" with "board of directors".)

This is not a working committee. The members may be people who do not have the time to commit as board members but are willing to help provide guidance on particular issues for a limited amount of time. An advisory board does not have to be chaired by a council board member.

The advisory group does not have formal authority to govern the organization; that is, the advisory cannot issue directives, which must be followed. Rather, the advisory group serves to make recommendations and/or provide key information and materials to the formal board of directors. The advisory group can be standing (or ongoing) or ad hoc (one-time) in nature.

When Should an Advisory Group Be Formed? Consider establishing an advisory group when it's apparent that a major, current issue/challenge or complex program/product/service is too complex and/or numerous to be handled by the formal board of directors.

Advocacy

Targeted education of decision-makers on prevention-related topics. Documented work in community effort around coordination/collaboration related to primary and secondary prevention activities. (Someone else is providing leadership.)

Annual Report

The most important reason to publish an annual report is for potential and current donors and other funding sources. Potential donors use annual reports to evaluate how effectively the charitable organization is using their funds (e.g., administrative versus programming). It is also a way to provide recognition to current donors. In addition, it is a great educational and marketing tool. An annual report should contain at a minimum: a board chair letter, highlights of the council's activities/accomplishments for the year, a "success story", acknowledgement of all donors, a listing of board and staff, and a simple balance sheet.

Articles of Incorporation

These must be in compliance with federal and state regulations pertaining to Articles of Incorporation for a 501 (c) (3) organization and must be available to the public. See the Michigan Nonprofit Management Manual (MNMM) for federal and state regulations.

Assess Insurance Needs

A nonprofit board is ultimately responsible for the actions of the organization. Therefore, the board should take an active role in managing the organization's risks. Insurance is only one technique for managing risk. Risk management is the process of dealing with the possibility that a future event will cause harm. The process involves four steps:

1. Acknowledge and identify risks;
2. Evaluate and prioritize risks;
3. Implement selected risk management techniques; and
4. Monitor and update the selected techniques and risks.

Risk management techniques include avoidance, modification, retention, and sharing (transfer).

- Avoidance* involves a nonprofit not undertaking or discontinuing an activity it deems too risky.
- Retention* is when the organization decides (consciously or not) to retain the financial consequences of a loss, such as the physical damage deductible on a vehicle, or the decision to not insure the loss resulting from inappropriate sexual contact between a staff member and a client.

* Many of the definitions were derived from Accounting Aid Society. The Michigan Nonprofit Management Manual 3rd ed. 1999

- *Modification* is changing an activity to reduce risk. Examples include the use of organizational policies and procedures to control risk, such as driver screening programs, board orientation sessions, volunteer management programs, etc.
- Lastly, *sharing or transfer* involves the transfer of some portion of risk to another. **Insurance** is an example of risk sharing.

An effective risk management program incorporates all four techniques for managing risk.

The initial step of the risk management process is to assign a person or committee to identify and evaluate the potential risks that their activities create. This evaluation process includes determining how often a specific risk or loss might occur (frequency) and the potential costs of the occurrence (severity). The projected financial impact will affect the organization's selection of risk management technique. An activity that creates a risk with a catastrophic loss potential should either be avoided or the risk should be transferred to an insurance policy.

If a council decides that they need to purchase insurance, the next step is choosing and working with an insurance agent. The MNMM has information on how to choose and work with an insurance agent. If your council does not own one, each regional coordinator has a manual that they can loan to your organization.

There are many types of insurance coverage. The types of insurance utilized by many nonprofits include: liability; commercial general liability, professional liability, automobile, improper sexual conduct, directors and officers, fiduciary liability, property, building, business personal property, crime, health and dental, life insurance, disability, workers compensation, and unemployment insurance. Please see MNMM for definitions of these types of insurance.

Audit

Auditing is the examination of financial statements, accounting systems, and transactions to assess their accuracy and completeness. The two basic purposes of an audit are to ascertain that all material financial transactions affecting the organization have been (1) properly recorded, and (2) properly presented. This testing process enables an independent certified public accountant (CPA) to issue what is referred to as an opinion on how fairly the agency's financial statements represent its financial position and whether they comply with generally accepted accounting principles (GAAP). GAAP is determined by the American Institute of Certified Public Accountants (AICPA). Board members, staff, and their relatives cannot perform audits because their relationship with the organization compromises their independence.

The audit report is addressed to the board of directors as the trustees of the organization. The report usually includes the following:

- A cover letter signed by the auditor, stating the opinion, as described above.
- The financial statements, including the statement of financial position (balance sheet), statement of financial activity (income statement), and statement of cash flows. Health and social service organizations also have a statement of functional expenses. Many audits show comparative information between fiscal years.
- Notes to the financial statements, as required by GAAP, which might include information about functional expenses, a depreciation schedule, further information about contributions, volunteer services, and other significant information not obvious in the financial statements.

In addition to the materials included in the audit report, the auditor often prepares what is called a management letter or report to the board of directors. This report cites areas in the organization's internal accounting control system, which the auditor evaluates as weak.

What an Auditor Does: The auditor will request information from individuals and institutions to confirm bank balances, contribution amounts, conditions and restrictions, contractual obligations, and monies owed to and by your organization. The auditor will review physical assets, journals and ledgers, and board minutes to ensure that all activity with significant financial implications is adequately disclosed in the financial statements. In addition, the auditor will select a sample of financial transactions to determine whether there is proper documentation and whether the transaction was posted correctly into the books. In addition, the auditor will interview key personnel and read the procedures manual, if one exists, to determine whether the organization's internal accounting control system is adequate. The auditor usually spends

several days at the organization's office looking over records and checking for completeness.

Auditors are not expected to guarantee that 100 percent of the transactions are recorded correctly. They are only required to express an opinion as to whether the financial statements, taken as a whole, give a fair representation of the organization's financial picture. In addition, audits are not intended to discover embezzlements or other illegal acts. Therefore, a "clean" or unqualified opinion should not be interpreted as an assurance that such problems do not exist.

An *unqualified opinion* includes wording such as, "In our opinion, the accompanying financial statements present fairly the financial position of ABC Agency at the fiscal year ending June 30, 19XX, ... in conformity with generally accepted accounting principles."

A *qualified opinion* is issued when the accountant believes the financial statements are, in a limited way, not in accordance with generally accepted accounting principles. A qualified opinion might include wording such as, "In our opinion, except for the omission of... the accompanying financial statements present fairly..."

Board Management System

This is a system put in place by the board of directors to ensure the self-perpetuation and continuous development of the board. It is highly recommended that the board have a committee responsible for the recruitment, nomination, election, and orientation process of new board members, training, development, and evaluation of the entire board. The following guidelines are suggested as part of this system:

- Recruitment efforts take into account the needs of the board, demographics of the county and CTF requirements for designated members. (Suggested tools, board composition grid).
- Names of potential board member candidates are solicited from the entire board of directors.
- Board policy and procedures for nominations and elections are established.
- A board member meets with each prospective board member prior to election. Prospective members are given general information on the organization as well as the roles, responsibilities and expectations of board members.
- New board members are elected at meetings of the board of directors. Board members are notified in advance of the election vote (meeting agenda). Board members are elected to terms, which are staggered and set in by-laws or articles of incorporation.
- New board members participate in a comprehensive orientation program that is conducted by board representatives and staff. In addition, each new board member is assigned a mentor from the board. A comprehensive orientation session should include:
 - ✓ Bylaws of the organization
 - ✓ Brief history of the organization
 - ✓ Organization's mission
 - ✓ Organizational chart
 - ✓ Job descriptions of all key staff personnel
 - ✓ List of the board with their addresses and phone numbers
 - ✓ Committee list with assignments of all board and staff
 - ✓ Description of all programs with a clear delineation between ongoing programs and one time programs
 - ✓ Operating policies of the board and strategic plan
 - ✓ Budget and most recent interim financial reports
 - ✓ Fund development plan, along with solicitation materials
 - ✓ Sources of organizational funding
 - ✓ Most recent annual audit
 - ✓ Statement of relationship with other organizations
 - ✓ Summary of insurance coverage
 - ✓ Calendar of meetings and events
- A process for continuous evaluation of the organization and board activities is developed.
- An annual plan for the ongoing training and development of board members, including a board retreat is developed.

Board Retreat

A good retreat site can create a relaxed atmosphere that loosens up relationships, helps equalize feelings of status, allows the time for people to think through possibilities, and brings out the best in the group's imaginative, creative thinkers (who may not be at their best in two-hour meetings.) Retreats or special meetings can help boards refocus on the mission and vision of the organization, conduct a board self-assessment, develop a strategic plan, provide specialized training, and promote personal ties among board members. Working in a different meeting space can provide the relaxing and fun atmosphere that encourages group interaction. Whether you convene around the board chair's family room or at a rented lake house, make sure to plan your retreat for a location that offers not only appropriate meeting spaces, but also social and recreational opportunities.

Board and Staff Job Descriptions

A job description should include roles, responsibilities, expected outcomes (if applicable), and the reporting process for the position.

Bylaws

Bylaws are the functional rules adopted by the council for its governance. They should focus the council's efforts on its purpose and provide automatic channels for handling procedural matters. Bylaws establish the structure of the council and the duties and rights of the members, board, and officers. They also establish the procedure by which the council functions, including when and how elections are to be held and meetings called. They should be simple, clear, and brief.

Committee Structure

Board standing committees are established in the council bylaws. They analyze issues and make recommendations within their jurisdiction. Examples include: Executive Committee, Fund Development Committee, Finance Committee, Program Committee, Personnel Committee, Public Relations Committee, Long Range Planning Committee, and the Nominating Committee. Ad hoc or task force committees may be established to investigate specific problems or areas of inquiry, or to perform well-defined tasks. They dissolve after completing their work. Board members should be required to serve on a minimum of one committee. Committees should:

- ✓ Have a **board member as the chair** and a minimum of two additional members.
- ✓ Have a description detailing its roles and responsibilities.
- ✓ Meet as often as necessary to meet their roles and responsibilities.
- ✓ Provide reports to the board.

Community Education - Primary and Secondary Prevention Activities

Short-term education programs targeted at adults, to help them understand the dynamics of child abuse and neglect and its prevention.

Coordination/collaboration - Primary and Secondary Prevention Activities

Bringing a group of community leaders together on a prevention topic, for the purpose of improving community services.

Financial Review

A review is an analytical procedure that covers the same areas as an audit. However, there are no checking or primary sources as in an audit. For example, in a review there will be no direct contact with the council's creditors to verify balances in the accounts.

Fund Development Plan

A document that outlines over a period of time (often the same as the strategic plan), the types of funding support that the agency will seek or work toward and the specific sources of funding and amounts by year. Typical categories are government, foundations, special events, fundraising like annual mail campaign and donations, United Ways, in-kind, etc. (Example: 2003 Foundations - Goal of \$25,000 Hill Foundation \$5,000, Ketner Foundation, \$15,000, Jacko Foundation, \$17,500).

IRS Form 990 or 990 EZ

Tax exempt organizations are required to file annual information returns with the IRS. Councils that have annual gross receipts less than \$25,000 are exempt from filing a 990. Although a council under \$25,000 is exempt from filing, some may choose to do so. As an alternative to filing Form 990, a council with gross receipts less than \$10,000 and total assets less than \$250,000 may file Form 990EZ. Councils that meet the IRS exemption may want to complete a Form 990EZ if

they are going to apply for a Michigan License to Solicit. The information needed to apply for the license is taken from the Form 990 or Form 990EZ.

Michigan License to Solicit

Under the Charitable Organizations and Solicitation Act, any charity that solicits, receives, or expects to receive contributions from sources in Michigan in excess of \$8,000 or any charity that compensates individuals for fund raising services, must have a charitable solicitation license, unless an exemption applies. Councils may want to apply for this license even though they do not expect to receive over \$8,000 in donations. There have been numerous incidences of charitable organizations including CTF receiving unexpected donations or receiving a significant bequest. A license to solicit is required for organization, which receive contributions exceeding the \$8,000 threshold even if the contributions are not actively solicited. The determination of whether an organization is required to apply for a license to solicit or if it qualifies for an exemption is made by the Michigan Attorney General's Charitable Trust Section. Contact the Attorney General's Charitable Trust Section at 517-373-1152 to apply for the free license. You can also download the application form from their website: www.ag.state.mi.us, although you will need to return it by mail.

Parent Education - Primary and secondary prevention activities

Short-term or long-term education programs targeted at parents to help them improve their knowledge of parenting and parenting skills

Primary Prevention

Interventions provided for the total population to reduce the incidence of an identified problem or disorder which are not focused on specific risk factors. Primary prevention efforts seek to promote wellness and are available to all members of the general population.

Professional Education - Primary and Secondary Prevention Activities

Short-term or long-term education for professionals related to mandated reporting, the dynamics of child abuse and neglect, the child welfare system, or prevention topics.

Strategic Plan

A written document that outlines the:

- Mission** of the organization - The ultimate goal of the organization or what the organization is in light of the vision.
Example: To prevent child abuse and neglect in Shaw County.
- Vision** - A description of what the organization is in the ideal or ten-year future.
- Values** - The beliefs that are related to what the organization is and how it does its work. (Example: Child abuse is a community problem that will only be solved when the entire community works together.)
- Goals** for a given time period - What the Council wants to accomplish in the time period of the plan (often plans are for three years). (Example: To explore the needs for a safety education program for second graders.)
- Action plan** - A description related to each goal, of activities that need to be undertaken to achieve it, with responsibility assigned and a time line. Action plans sometimes indicate resources needed.

Safety Programs - Primary and secondary prevention activities

Short-term or long-term education programs targeted at children to help them protect themselves from child abuse, sexual assault, or other violence.

Secondary Prevention

Interventions provided for the early identification of individuals with risk factors for a specific problem or disorder. While substantiated child abuse or neglect has not taken place, the probability for abuse or neglect is greater than in the general population. The major components of secondary prevention are:

- It is offered to a predefined group of families or individuals.
- It is voluntary.
- Participants do not have an active Family Independence Agency Protective Service case.
- It may be more problem-focused than primary prevention.

Volunteer Management System

The use of volunteers should be well thought out. Volunteers are most effective when a solid volunteer structure is in place. Well-written volunteer position descriptions and reporting structures that are understood by both paid and unpaid staff is critical to a successful program. A comprehensive volunteer management system should include:

- A determination of the council's volunteer needs
- A process for recruitment of volunteers to meet those needs
- An interview and screening process
- An orientation and training program
- A retention plan including a volunteer handbook
- An ongoing volunteer recognition process
- A review process to assess volunteer needs

See the MNMM for more detailed information on a volunteer management system.

Year-end Financial Statement

The end products of the accounting process are the financial statements, summarizing all of the financial transactions of the organization for the period.

- Statement of Financial Position (Balance Sheets)
- Statement of Activities (Income Statement)
- Statement of Cash Flows

In addition, nonprofits must provide information about expenses as reported in their functional classifications (program services and supporting services.) Voluntary health and welfare organizations are also required to present a statement that reports expenses by their natural classification (e.g., salaries, rent, telephone, printing, etc.)

The following briefly describes the information included in each statement.

- Statement of Financial Position:** Reports amounts of the organization's assets, liabilities and net assets (fund balances) at a specified date. This statement was previously known as the Balance Sheet
- Assets are properties and resources the agency owns and can use to achieve its goals.
- Current assets include cash accounts, certificates of deposits and other investments, and items such as receivables that will be converted to cash within one year.
- Fixed assets include land, buildings and equipment.
- Liabilities are debts of the organization, what is owed.
- Current liabilities typically include accounts payable to vendors, short-term loans due, withheld payroll taxes due, etc.
- Long term liabilities include long term debt, mortgages, etc.
- Net Assets (previously called fund balances) represents the net of assets over liabilities. Three classes of net assets must be reported on unrestricted, temporarily restricted, and permanently restricted. Restrictions are determined by the conditions which donors place on their contributions.
- Statement of Activities:** Reports revenues, expenses, and the resulting change in net assets for the year. Charges are reported for each of the three classes of net assets (unrestricted, temporarily restricted, and permanently restricted.) This statement was previously known as the Income Statement or Statement of Revenue, Expenses and Changes in Fund Balances.
- Statement of Cash Flows:** Reports how the organization's cash position changed during the year. Cash flow information is divided among receipts and disbursements from investing, financing, and operating activities. Many nonprofits ask their auditors to prepare this statement.

Sample Statements of Financial Position and Activities

The CTF Local Council: Statement of Financial Position

Statement of Financial Position (Balance Sheet)

CTF Local Council
 Year Ended June 30, 1999

ASSETS	<u>19x8</u>	<u>19x7</u>
Cash and Cash Equivalents	\$11,400	\$6,300
Grants Receivable	2,500	0
Prepaid Expense	950	1,300
Fixed Assets at Cost:		
Office Equipment	15,496	
Less:		
Accumulated Depreciation	<15,496>	
Net Fixed Assets	- 0 -	- 0 -
Total Assets	\$14,850	\$7,600
LIABILITIES		
Accounts Payable	\$1,500	\$4,500
NET ASSETS (Fund Balance)	\$13,350	\$3,100

The CTF Local Council: Statement of Activities

Statement of Activities

CTF Local Council Organization

Year Ended June 30, 19x8

FORMAT A

Functional Expense Classification

REVENUES

Government Grants	\$ 35,000
Other Grants	50,000
Individual Contributions	25,000
Fees for Service	45,000
Interest	<u>2,000</u>
Total Income	\$157,000

EXPENSES

Counseling Program	\$ 52,800
Training Program	62,100
Management and General	21,865
Fundraising	<u>9,985</u>
Increase/<Decrease> in Net Assets	\$ 10,250

The CTF Local Council: Statement of Activities

Statement of Activities

CTF Local Council
 Year Ended June 30, 1999
FORMAT B
Natural Expense Classification
 REVENUES

Government Grants	\$ 35,000
Other Grants	50,000
Individual Contributions	25,000
Fees for Service	45,000
Interest	<u>2,000</u>
Total Income	\$157,000

EXPENSES

Salaries and Fringe:	
Executive Director	\$ 38,000
Program Directors	50,000
Secretary	27,000
Rent	12,000
Supplies	11,000
Telephone	3,300
Postage	2,500
Copying	<u>2,950</u>
Total Expenses	\$146,750
Increase/<Decrease> in Net Assets	\$ 10,250

The CTF Local Council : Statement of Cash Flows

Statement of Cash Flows

CTF Local Council

Year Ended June 30, 1999

Change in Net Assets \$10,250

Adjustments to reconcile change in net assets to net cash <used by> operating activities:

<Increase> in grants receivable	< 2,500>
Decrease in prepaid expenses	350
<Decrease> in accounts payable	< 3,000>
Net cash <used by> operating activities	< 5,150>
Net increase in cash and cash equivalents	5,100
Cash and Cash Equivalents — Beginning of year	6,300
Cash and Cash Equivalents — End of year	\$11,400

The CTF Local Council: Statement of Functional Expenses

Statement of Functional Expenses

CTF Local Council
Year Ended June 30, 19x8

	Counseling Program	Training Program	Total Program	Management and General	Fundraisin g	Total Supporting	Total All Expenses
Salaries and Fringe:							
Executive Director	\$12,500	\$12,500	\$25,000	\$7,000	\$6,000	\$13,000	\$38,000
Program Directors	25,000	25,000	50,000				50,000
Secretary	7,000	10,000	17,000	8,000	2,000	10,000	27,000
Rent	4,000	6,000	10,000	1,565	435	2,000	12,000
Supplies	2,500	4,500	7,000	3,000	1,000	4,000	11,000
Telephone	1,000	1,100	2,100	1,000	200	1,200	3,300
Postage	500	1,000	1,500	800	200	1,000	2,500
Copying	300	2,000	2,300	500	150	650	2,950
Total Expenses	\$52,800	\$62,100	\$114,900	\$21,865	\$9,985	\$31,850	\$146,750

MEMORANDUM

DATE: August 1, 2003

TO: «Local_Council_Name»

FROM: Dawn Arwood, Contract Administrator
Children's Trust Fund

SUBJECT: **FUNDING, REQUIRED REPORTS, & POLICIES FOR FY 2004
(October 1, 2003 - September 30, 2004)**

FUNDING

The Children's Trust Fund Board has allocated \$756,730.00 for funding to local councils in Fiscal Year 2004. These amounts do not include monies paid to councils for their participation in any other fund raising activities.

ALLOCATION

Your council will receive «m_2003_Allocation». **This allocation may be reduced by the amount of any CTF monies received in FY 2003 that were not spent. Written requests to carry forward unexpended funds to the following fiscal year for a specified purpose will be considered. These requests must be made before the end of the current fiscal year.** The method of payment will be four checks, each paying 25% of your allocation. The first check will be processed as soon as we receive and approve your designation materials, or as early as October 1, 2003.

DESIGNATION MATERIALS

1. **Designation Agreement** -- (4 copies enclosed) Each copy must be signed with an **original signature** by the person authorized and responsible for signing all FY2004 quarterly and year-end reports. **The agency must notify CTF, using the enclosed Notice of Change form, of any changes in the authorized signatory and contact person including his/her telephone number and address.**

Four **signed** copies of the Designation Agreement must be returned to CTF.

2. **Prevention Plan** -- Proposed activities and goals of the council addressing the needs of the local community regarding the prevention of child abuse and neglect. The Plan should be based on a solid needs assessment and provide a clear and measurable plan of action. **The prevention plan must include all the information and components indicated on the enclosed form. Please make sure you read the directions included on the form.**
3. **Board List** -- (form enclosed) A complete list of at least 16 board members, the organizations they represent, their addresses, and their telephone numbers (please see Designation Agreement for specific requirements). The CTF Board of Directors recognizes that there are times that the local council is unable to secure a mandated board member. The Board has approved the policy to consider the degree to which the council has made a good faith effort to secure representation for a mandated position. If the agency has been unable to secure mandated board member(s), a written description of steps taken to recruit this representation must be submitted with the Designation Agreement and be approved by CTF. (This information may be shared with the directors of the appropriate state agency.)
4. **Budget** -- (form enclosed) All local councils must submit a budget plan which indicates how they expect to spend their CTF allocation and their proposed matching funds (please see Designation Agreement for specific requirements). Requests for changes over \$500 to this budget must be approved by the Grant Monitor. **Must be signed with an original signature of the authorized signatory.**
5. **Local Council Demographics** -- (form enclosed) All local councils must complete and return the demographic information requested on the enclosed form.

DESIGNATION AGREEMENT DEADLINES AND PENALTIES:

The complete designation packet must be approved before the first check can be processed. **Return the designation materials by September 12, 2003**, for an October 1, 2003, payment; any designation materials received after that date may cause delays in check issuance.

If your complete designation packet is not postmarked by **October 31, 2003**, your formula funding allocation **will be** reduced by 25%. The allocation will continue to be decreased by 25% **each month thereafter** until the Designation Agreement materials are received. **If the Designation Agreement is not received by January 31, 2004, the agency will lose ALL of their funding allocation for FY 2004.**

OTHER LOCAL COUNCIL REQUIREMENTS:

- **Quarterly Narrative Reports:** Your council will need to submit quarterly reports **on the form provided by CTF**. These reports must include the status of the activities/objectives as outlined in the prevention plan, any additional activities that occurred during the quarter that were not addressed in the prevention plan but are related to the prevention of child abuse and neglect in your county, activities your council has been involved in following your prevention plan outline, and any concerns or problems which need to be addressed. These reports should not include activities outside the realm of the prevention of child abuse and neglect, even if the council is also involved in other areas.
- Use the Quarterly Report Narrative Report sheet to identify which council is reporting, and the quarter that is being reported.
- **Quarterly Expenditure Reports:** Local councils must submit a quarterly report of expenditures of CTF and matching funds.
- Any CTF funds not spent during FY 2004 may be deducted from next year's CTF allocation. Written requests to carry forward unexpended funds to the following fiscal year for a specified purpose, will be considered. These requests must be made by **August 15, 2004**.
- Each quarterly report and the financial statement must be signed with an **original signature**, by the authorized signatory.

QUARTERLY REPORT DUE DATES		
QUARTER	DATES	DUE DATE
1st	October - December	January 20, 2004 OR ON THE FIRST BUSINESS DAY FOLLOWING IF THE DATE FALLS ON A HOLIDAY OR WEEKEND
2nd	January - March	April 20, 2004 OR ON THE FIRST BUSINESS DAY FOLLOWING IF THE DATE FALLS ON A HOLIDAY OR WEEKEND
3rd	April - June	July 20, 2004 OR ON THE FIRST BUSINESS DAY FOLLOWING IF THE DATE FALLS ON A HOLIDAY OR WEEKEND
4th	July - September	October 20, 2004 OR ON THE FIRST BUSINESS DAY FOLLOWING IF THE DATE FALLS ON A HOLIDAY OR WEEKEND

- Quarterly reporting forms will be included with the agency's final copy of the Designation Agreement, once the CTF Executive Director signs the Agreement.

SUMMARY OF IMPORTANT POINTS

- **Designation materials (complete packet) are due by September 12, 2003**, to ensure a payment by October 1, 2003. All Designation materials must be in by October 31, 2003.
- A complete Designation Packet includes the signed Designation Agreement (**4 signed copies with original signatures**), a Budget Plan, a Board List, a Prevention Plan and Local Council Demographics.

If you have any questions or would like further information, please contact Cathy Fitch at (517) 373-4321 or FitchC@michigan.gov .

- Enclosures:
- Local Council Designation Agreement
 - Local Council Budget Plan Form
 - Board List Form
 - Board Meeting Schedule
 - Local Council Demographic Form
 - Notice of Change Form
 - Prevention Plan Form

Grant No: CTFLC 04-00000
Grant Amount: \$10,000
County: Sample Council
Method of Payment: Quarterly Advance
Tier Level: 2

**LOCAL COUNCIL DESIGNATION AGREEMENT
MICHIGAN CHILDREN'S TRUST FUND
FISCAL YEAR 2004**

TO: State Child Abuse and Neglect Prevention Board
(hereinafter referred to as the Children's Trust Fund [CTF])

FROM: Sample Local Council Designation Agreement
(Local Council Name and County)

GEOGRAPHICAL AREA SERVED: _____

MAILING ADDRESS:
(Provide street address as well as P.O. Box)

AUTHORIZED SIGNATORY: _____
(Original Signature)

AGENCY DATA

CONTACTPERSON:

(if different from authorized signatory)

PHONE #: _____

FAX #: _____

E-MAIL ADDRESS (required): _____

WEBSITE:

TERMS OF AGREEMENT: This Agreement is for one year.

Starting Date: October 1, 2003

Ending Date: September 30, 2004, unless prior termination is executed by the Children's Trust Fund pursuant to Section 18 herein.

In applying to be a Children's Trust Fund designated council, we agree to comply with the following requirements as set forth in the CTF enabling legislation:

- I. Have as our primary purpose the development and facilitation of a collaborative community prevention program in a specific geographical area (P.A. 250 of 1982, Sec. 10(a)).
- II. Utilize trained volunteers and existing community resources wherever practicable (P.A. 250 of 1982, Section 10(a)).
- III. Be administered by a board of directors composed of at least sixteen (16) people with an equal number of members from the following two groups:
 - . A representative from each of the following local agencies: the **county Family Independence Agency**, the **Public Health Agency**, the **Mental Health Agency**, the probate court, the office of the prosecuting attorney, a local law enforcement agency, a school district, and a number of local private agencies that provide treatment or prevention services for abused and neglected children and their parents or guardians. The number of private agencies to be represented on the local council shall be designated in the by-laws of the local council by the remaining members (P.A. 250 of 1982, Sec. 10 (b)(i)).
 - . **The CTF Board of Directors recognizes that there are times that the local council is unable to secure a mandated board member. The Board has approved the policy to consider the degree to which the council has made a good faith effort to secure representation for a mandated position. If the agency has been unable to secure mandated board member(s), a written description of steps taken to recruit this representation must be submitted with the Designation Agreement and be approved by CTF. (This information may be shared with the directors of the appropriate state agency.)**
 - . Members of the local council elected by the membership. The elected members shall represent the demographic and **GEOGRAPHIC** composition of the community served, as far as **practicable** (P.A. 250 of 1982, Sec. 10(b)(ii)).
- IV. Not provide direct service (to clients) except on a demonstration project basis, or as a facilitator of interagency projects (P.A. 250 of 1982, Sec. 10(c)).
- V. Demonstrate a willingness and ability to provide prevention program models and consultation to organizations and communities regarding prevention program development and maintenance (P.A. 250 of 1982, Sec. 10(d)).

- VI. Demonstrate an ability to match 50% of the amount of any trust fund money received. **AT LEAST 20% OF THE 50% MATCH MUST BE IN CASH.** The amount and types of in-kind services are subject to the approval of the state board. VII. Other criteria the state board deems appropriate. **If the grantee does not meet the required match, their allocation will be decreased by the amount needed to meet the match requirement.**

We further agree to complete the following tasks and activities:

- I. **MAINTAIN COMPLIANCE WITH ALL THE CRITERIA REQUIRED FOR THE DESIGNATED TIER LEVEL FOR WHICH OUR COUNCIL IS APPROVED.**
- II. Complete and submit to CTF annually a plan for implementing prevention efforts **THAT ADDRESSES ALL COUNTIES COVERED BY OUR LOCAL COUNCIL.** This plan shall include an assessment of community need.
- III. Review and approve direct service proposals prior to submission to CTF.
- IV. Assist in the monitoring and evaluation of prevention programs funded by CTF in our area.
- V. Submit quarterly reports (narrative, expenditure and program register) on the enclosed forms and according to the following schedule **OR ON THE FIRST BUSINESS DAY FOLLOWING IF THE DATE FALLS ON A HOLIDAY OR WEEKEND:**

January 20, 2004

April 20, 2004

July 20, 2004

October 20, 2004

All reports must be signed by the Authorized Signatory.

- VI. Run local education and training programs.
- VII. Foster fundraising to CTF and local councils.
- VIII. Provide input to the CTF Board on establishment of prevention program priorities.
- IX. Provide assistance to prevention projects in our area in developing match and on-going funding.

- X. Provide prevention program models and consultation to organizations and communities regarding prevention program development and maintenance.
- XI. Maintain financial records in accordance with generally accepted accounting practices and allow access by CTF to such records at reasonable times.
- XII. PROVIDE CTF WITH IRS NOTIFICATION OF 501©3 STATUS IF NOT ALREADY ON FILE WITH THE CTF OFFICE OR IF THERE HAS BEEN A CHANGE SINCE THE PREVIOUS FISCAL YEAR.
- XIII. PROVIDE CTF WITH A COPY OF OUR ARTICLES OF INCORPORATION IF THERE HAS BEEN AN AMENDMENT SINCE THE PREVIOUS FISCAL YEAR.
- XIV. PROVIDE CTF WITH A COPY OF OUR CURRENT MICHIGAN CHARITABLE SOLICITATION LICENSE OR VERIFICATION FROM THE MICHIGAN ATTORNEY GENERAL VERIFYING THAT THE COUNCIL DOES NOT HAVE TO APPLY.
- XV. PROVIDE CTF WITH A COPY OF OUR BYLAWS IF THERE HAS BEEN A CHANGE SINCE THE PREVIOUS FISCAL YEAR.
- XVI. PROVIDE CTF WITH A COPY OF OUR AUDIT, OR FINANCIAL REVIEW (SIGNED BY A CPA), OR AN IRS 990 OR 990 EZ.
- XVII. Provide CTF with a current list of board members AND MEETING SCHEDULE.
- XVIII. **Promotion of the Children's Trust Fund:**
 - A. Local councils shall promote the Children's Trust Fund in its activities, both written and oral and include the CTF logo on local stationary and printed materials. Camera ready logo and PSA's will be provided. Local council's shall also promote CTF public awareness activities.
 - B. Local councils shall promote the CTF License Plate and other CTF fundraising activities.
- XIX. Child Abuse Prevention Month (April):
 - A. **Will conduct activities that bring awareness to child abuse prevention during the month of April. These activities can include but are not limited to public awareness, conferences, media events, campaigns, poster contests, etc.**
 - B. **Will report and provide documentation on our April activities with the 3rd quarterly report.**

- XX. **Evaluation:** All local councils are required to annually review and evaluate their local efforts for the prevention of child abuse and neglect. This evaluation process must include identification of measurable performance objectives and results. Local councils must also participate in and assist in all CTF research and evaluation efforts as determined by CTF. Data collected/compiled and reports on such efforts may be available to local councils for their use.
- XXI. **Participation in Surveys:** The council must complete all surveys conducted by the Children's Trust Fund or funding agencies and return them in a timely manner. These surveys are used to assist programs through gauging technical assistance needs and compiling statewide information. If a program had concerns with any information contained in the survey, they could express that concern in writing and an exception to the policy may be provided.
- XXII. **Children's Trust Fund Annual Conference:** A local council representative shall attend both days of the Children's Trust Fund conference, held annually in October.
- XXIII. **Cancellation of Agreement:** The Agency reserves the right to cancel this Contract by giving 30 days written notice to the Contractor. The Contractor may terminate this Contract upon 30 days written notice to the Agency at any time prior to the completion of the Contract period.
- XXIV. **Liability:** Each party to this Grant Agreement must seek its own legal representative and bear its own costs, including judgements, in any litigation which may arise from performance of this Grant Agreement. It is specifically understood and agreed that neither party will indemnify the other party in such litigation.
- XXV. **Audit Requirements:**

Vendor Relationship

This contract constitutes a vendor relationship with FIA. **No audit requirements** are imposed by FIA as a result of this contract. **No audit costs are allowed** to be billed to this contract. In the event the Contractor elects to have a financial audit performed, the submission of the audit report to FIA is not required nor desired.

- XXVI. **Penalties:**

LATE DESIGNATION AGREEMENT:

If your complete designation packet is not postmarked by **October 31, 2003**, your formula funding allocation **will be** reduced by 25%. The allocation will continue to be decreased by 25% **each month thereafter** until the Designation Agreement materials are received. **If the Designation**

Agreement is not received by January 31, 2004, the agency will lose ALL of their funding allocation for FY 2004.

Late Reports

Local Councils that fail to submit reports required by their designation status, or do not submit the reports in a timely fashion will be subject to the following penalties:

- If a quarterly report is not received by the due date, this quarterly payment will not be released. **IF THE QUARTERLY REPORT IS NOT RECEIVED WITHIN 30 DAYS AFTER THE DUE DATE, THE QUARTERLY PAYMENT WILL BE FORFEITED.**

IN WITNESS WHEREOF, the Children's Trust Fund and the Designee have caused this Agreement to be executed by their respective officers duly authorized to do so.

In signing this Agreement I agree to act as contact person between our local council and the Children's Trust Fund. I understand that this means all communication from CTF will be sent to me and I am responsible to share these with my local council. I **also agree to notify CTF, USING THE Notice of Change form, of any changes in my status as a contact person, including the name, address, telephone number of a new contact person, and any change in Agency name or Federal ID number.**

THE Alpena CAN Team (Alpena/Presque Isle) BOARD OF DIRECTORS AGREES TO MAINTAIN ALL CRITERIA REQUIRED FOR THE TIER 1 LEVEL.

I also agree to contact the State of Michigan MAIN System at 888-734-9749 of any change in Agency Name, Address or Federal ID number.

The Undersigned has the lawful authority to bind the Grantee to the terms set forth in this Agreement.

Dated at _____, Michigan _____
(CTF Local Council)

this ____ day of _____, 20 ____ By: _____

Witness: _____

Dated at _____, Michigan _____ CHILDREN'S TRUST FUND

this ____ day of _____, 20 ____ By: _____
Children's Trust Fund Signature

Witness: _____

Grant #: CTFLC 04-00000

FY 2004 Local Council Prevention Plan

Note: Please note that this form has space for 4 goals but do not interpret this to mean that a prevention plan should only contain 4 goals. CTF does not mandate the number of goals contained within a prevention plan.

Need:		
Goal:		
Strategy (What activities, services, programs or resources will the council conduct to meet the goal)	Target Audience	Expected Date of Completion

Need:		
Goal:		
Strategy (What activities, services, programs or resources will the council conduct to meet the goal)	Target Audience	Expected Date of Completion

Need:		
Goal:		
<p style="text-align: center;">Strategy</p> <p>(What activities, services, programs or resources will the council conduct to meet the goal)</p>	<p>Target Audience</p>	<p>Expected Date of Completion</p>

Need:		
Goal:		
<p style="text-align: center;">Strategy</p> <p>(What activities, services, programs or resources will the council conduct to meet the goal)</p>	<p>Target Audience</p>	<p>Expected Date of Completion</p>

LOCAL COUNCIL BUDGET PLAN FOR THE PERIOD OF OCTOBER 1, 2003 - SEPTEMBER 30, 2004

I. Name of Local Council: _____

II. Name of County(s): _____

III. Total CTF Allocation: _____

IV. Sources of Funding

• **Note: CTF requires a 50% match to receive the CTF allocation. At least 20% must be in cash.**

- | | |
|--|----------|
| A. Children's Trust Fund | A. _____ |
| B. Local Cash Match (at least 20%) | B. _____ |
| C. Local In-Kind Match Amount | C. _____ |
| D. TOTAL PROJECT COST (Sum of A, B, + C) | D. _____ |

Line Item	Local Cash Match	Local In-Kind Match	CTF Grant	Total Project Cost
A. Salaries (Personnel)				
B. Fringes				
C. Contractual				
D. Supplies				
E. Transportation (Travel)				
F. Equipment (Each Item over \$100)				
G. Occupancy (Rent)				
H. Training				
I. Miscellaneous				
TOTAL				

Print name

Original Signature of Authorized Signatory Required

Telephone No.

LOCAL COUNCIL DEMOGRAPHIC SURVEY

Local Council

Name _____ County(s) Served _____

Executive Director/Contact Person

Name _____

Address _____ City _____ Zip Code _____

Telephone _____ Fax _____ E-mail _____

Total Annual Budget

CTF funds _____ + Other Funds _____ = _____ Total Budget

Source of Funds and Percentage of the Total Budget

Source: _____ %
Source: _____ %
Source: _____ %
Source: _____ %

Staff

Does the council have paid staff? Yes No If yes, how many? _____

Please list the title/position of each person your council employs and the number of hours they work per week.

Title	Hours
_____	_____
_____	_____
_____	_____

In addition to your board of directors, how many volunteers does your council utilize each year? _____

Does your council have an official office? Yes No

If no, where does your council conduct business? _____

Does your council have a telephone with answering machine dedicated solely for the council? Yes No

If your council has a web site, please list the address _____

Does your council sell kid pins? Yes No

Please list your councils top 3 training needs. _____

How can CTF better serve you? _____

**CHILDREN'S TRUST FUND
BOARD LIST FOR DESIGNATED LOCAL COUNCILS
Fiscal Year 2003/2004**

Name of Council: _____

	Agency or Group Represented	Board Member Name	Address	Telephone No.
1.	County Family Independence Agency			
2.	County Public Health Agency			
3.	County Mental Health Agency			
4.	Probate Court			
5.	Office of the Prosecuting Attorney			
6.	Local Law Enforcement Agency			
7.	School District			
8.	Private Agency			
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				

**Michigan Family Independence Agency – Office of Contracts and Rate Setting
0-3 Secondary Prevention - No Client Services Grant - Quarterly Advance
Cover Sheet**

Grantee Name:		Grant #: CTFPR-04-63001	
S.S. # or Fed. I.D. #	Mail Code: 015	Amount: \$	
Index Code: 60790	AOC: 6325	County: Oakland	
PCA: 72112	Faith Based: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Comm. Code #: 94661	CS-138#: NJ		
Bid Status:	<input checked="" type="checkbox"/> Bid	<input type="checkbox"/> Sole Source	<input type="checkbox"/> Fair Market Rate
Org. Type:	<input checked="" type="checkbox"/> Private, Non-profit	<input type="checkbox"/> Private, Proprietary	<input type="checkbox"/> Public
Audit Status:	<input checked="" type="checkbox"/> Subrecipient	<input type="checkbox"/> Vendor	<input type="checkbox"/> No Federal Funds
Grant Administrator Name: Tricia Headley		Phone No.: 17226	
Grantee Fiscal Year	Beginning Month: October	Day: 1	
Grantee is a State Employee:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Renewal:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BPO#: 99999	Services: Children's Trust Fund		
Payment Method: Quarterly Advance			

I affirm that:

No changes have been made to the Agreement format obtained and maintained by Office of Contract and Rate Setting.

The Grant budget is on file in the program office.

Contract Administrator's Signature: _____ Date: _____

Grant No: CTFPR-04-
County:
Method of Payment: Quarterly Advance

**0-3 SECONDARY PREVENTION GRANT AGREEMENT
MICHIGAN CHILDREN'S TRUST FUND
FISCAL YEAR 2003-2004**

Funding Agencies: Department of Education
Family Independence Agency
Department of Community Health

I. **GRANTEE:**

II. **GRANTEE'S AUTHORIZED SIGNATORY:**
(written notice of any changes in authorized signatory is required)

III. **CONTACT PERSON'S NAME:**

IV. **GRANTEE'S ADDRESS:**

GRANTEE'S PHONE #:

GRANTEE'S FAX #:

E-MAIL ADDRESS:

V. **TERMS OF GRANT:**

Starting Date: October 1, 2003

Ending Date: September 30, 2004, pending legislative appropriation, or unless prior termination is executed by Section XVII herein.

VI. **SERVICES TO BE PROVIDED BY THE GRANTEE:**

A. **Project Summary:**

B. **Target Population:**

C. **Description of Services to be Provided:**

D. **Collaboration**

E. Evaluation:

VII. **GRANTEE MANDATES:**

The grantee will:

A. **Submit quarterly reports:**

Quarterly reports are due no later than January 20, April 20, July 20, and October 20, of each year of the grant. The **narrative and expenditure forms must include an original signature** of the person responsible for administering the program who has been named as the Authorized Signatory. If multiple programs are provided under one grant fiduciary, all reporting information, including data and expenditures, must be consolidated into one report. Quarterly reports must be submitted to the following address:

Children's Trust Fund
Suite 1411, Grand Tower Building
235 S. Grand Ave
Lansing, MI 48933

1. **Narrative:** A quarterly report narrative cover sheet is provided and outlines the information that is required. The cover sheet must include the original signature of the Authorized Signatory.
2. **Expenditure:** The quarterly expenditure report must be completed on the form provided. This report is used to list the quarter's expenditures of the 0-3 Secondary Prevention Grant and cash and in-kind match, and reflects the year-to-date totals spent for each category. The form must include the original signature of the Authorized Signatory.
3. **Data Collection Form:** This report will gather information on the families served as well as the services provided. The form will be provided and must be sent with the quarterly narrative and expenditure reports at the end of each quarter.
4. **Other Evaluation Data:** The name, birth date, beginning and ending dates for services, and the reason for ending services for each child participating. This information will be kept confidential and used to determine the impact of services on child abuse/neglect, this data will be collected at the end of the fiscal year. Form will be provided

VIII. **REMUNERATION:** The grantee shall be paid an amount not to exceed \$162,250 during fiscal year 2004. Payment shall be according to the following schedule:

FY 2004

10/1/03 \$40,562.50

1/1/04 \$40,562.50

4/1/04 \$40,562.50

7/1/04 \$40,562.50

Payment is subject to the grantee's complete compliance with the terms of this Agreement. Payments shall be made in accordance with the attached budget plan.

IX. **COPYRIGHTS:** Where this Grant specifically pays in whole or part for the production of original books, films, or other copyrightable material, the grantee may copyright same; however, the Children's Trust Fund and funding agencies reserve a royalty-free, non-exclusive and irrevocable license to reproduce, publish and use such materials, and to authorize others to do so. Any grantee who has questions as to whether or not material produced is covered by this section shall make an inquiry to the Children's Trust Fund.

X. **ACCOUNTING:** Grantee agrees to maintain specific and appropriate documents, journals, ledgers and statements in accordance with generally accepted accounting principles and practice specific to this Grant, to retain these records for a period of not less than four years from the ending date of the Grant, and to make this accounting available for audit by appropriate agents of the State, and/or Federal government at any time.

XI. **EVALUATION:** All grantees are required to evaluate their project. The evaluation must include quantitative and qualitative performance objectives and other required demographic information including customer satisfaction, customer perceived parental skill change, child immunizations, and child well baby visits. Grantees are also required to document the number of families served, the number of families who drop out of services before completion, and the number of families that completed service each quarter.

Intensive home visitor programs (e.g. Healthy Families and Healthy Start models) funded by this grant are required to participate in the Program Information Management System (PIMS) data collection project administered by the Children's Trust Fund.

All grantees will be required to administer a pre/post family functioning scale to families. This tool will be provided through the Michigan Children's Trust Fund. Results from this will be compiled and data will be used for yearly reporting requirements, and technical assistance needs for individual programs.

In order to provide the funding agencies with evaluation results of this grant, the grantee must agree to participate in and cooperate with evaluations and evaluators authorized by the funding agencies of this grant. This participation/cooperation shall

include access to all grant activities and materials as well as provision of information and the collection of data.

- XII. **COMPLIANCE WITH EXECUTIVE ORDER 79-4:** Grantee certifies compliance with Executive Order 79-4, pertinent State-Federal statutes providing equal opportunity for employment, provision of services regardless of race, sex, color, national origin, ancestry or age and equal access for disabled to programs and services.

- XIII. **ADJUSTMENTS AND AMENDMENTS:** If the grantee is unable to perform the services agreed to in this Grant Agreement for any reason, the funding agencies may excuse such services and negotiate an equitable adjustment of payment, unless the Grant is terminated pursuant to Section XVI below. Requests for budget adjustments must be made for any change over 10% (for more than \$1,000) between line items as projected by the budget plan. **All amendment requests (including budget and service changes) must be submitted in writing to the Children's Trust Fund by June 30th of the grant year.**

The funding agencies reserve the right to amend this Grant Agreement by removing requirements. Grantees will be notified in writing of any adjustments.

- XIV. **MATCH:** There must be a documented local match of 25% of the grant with at least 15% of the match being cash. The amounts and types of match are subject to approval by the Children's Trust Fund. The sources of match must be verifiable.

- XV. **EXPENDITURE OF FUNDS:** The grant funds must be expended in fiscal year 2004; unspent funds shall be returned at the end of the fiscal year.

- XVI. **SPECIAL CONDITIONS:** None

- XVII. **CANCELLATION OF AGREEMENT:** The funding agencies reserve the right to cancel this Grant Agreement by providing 30 days written notice to the grantee. The grantee may cancel this Grant Agreement upon thirty days written notice at any time prior to the completion of the grant period. All unspent funds must be returned at that time. Default is defined as the failure of the grantee to fulfill the obligation of the Grant Agreement. In case of default by the grantee, the funding agencies may immediately cancel the Grant Agreement without further liability to the grantee or its employees.

- XVIII. **ASSIGNMENT:** This Grant Agreement may not be assigned by the grantee without the written consent of the funding agencies.

- XIX. **LIABILITY:** Each party to this Grant Agreement must seek its own legal representative and bear its own costs, including judgements, in any litigation which may arise from performance of this Grant Agreement. It is specifically understood and agreed that neither party will indemnify the other party in such litigation.

XX. SUBRECIPIENT RELATIONSHIP

This contract constitutes a subrecipient relationship with FIA. The Contractor is required to comply with all federal regulations that relate to the accounting and auditing of the federal award used to fund this contract. This includes, but is not limited to, compliance with OMB Cost Circular (either Circular A-122 or Circular A-87) and Circular A-133.

The Catalog of Federal Domestic Assistance number (CFDA) for the federal award(s), along with the Federal Financial Participation (FFP), and the related federal regulations, laws, and other requirements may be obtained by accessing the FIA, Office of Internal Audit's Web page at the following Web address (URL):

<http://www.mfia.state.mi.us/oia/index.htm>

FIA agrees to participate in audit cost related to the audit as described in other sections of this contract.

Reporting Requirements

If the Contractor is required per OMB Circular A-133 to have a Single Audit performed, the Contractor must submit the Reporting Package and an Audit Transmittal Letter to the address below in accordance with the time frame established in the Circular.

Reporting Package includes:

Financial statements and schedule of expenditures of federal awards
Summary schedule of prior audit findings
Auditor's report(s)
Corrective action plan

Audit Transmittal Letter

The Contractor is responsible to identify in the Audit Transmittal Letter all organizations it operates that administer FIA subrecipient programs and the different names the Contractor may use to contract with FIA. The Contractor is responsible for proper completion and submission of the Audit Transmittal Letter. This letter, to be accurately processed by FIA, must include the following information:

Contractor's name as reported in the FIA contract(s).

Contractor's Federal Identification number as reported on the FIA contract(s).

Contractor's fiscal year end.

Identify other name(s) and other Federal Identification number(s) used by the Contractor.

If a Single Audit is not required per OMB Circular A-133, the Contractor must still submit an Audit Transmittal Letter stating why a Single Audit was not required and the Contractor's fiscal year the letter pertains to. The Audit Transmittal Letter should include items stated in the section, "Audit Transmittal Letter," described below. The letter may be mailed to the address below or FAX to (517) 373-8771.

Mailing address for all information:

Michigan Family Independence Agency
Office of Internal Audit
235 S. Grand Ave., Suite 1112
Lansing, MI 48909
Attention: William Addison, CPA

Audit Cost

No audit costs may be charged to FIA when audits required by this contract have not been performed or have not been performed in accordance with OMB Circular A-133 requirements. Late submission of the Single Audit report is considered noncompliance with this section and may be grounds to impose sanctions.

Sanctions

FIA will impose sanctions if the Contractor fails to adhere to any of the audit requirements in the contract. In cases of continued inability or unwillingness to comply with audit requirements, FIA will impose sanctions such as:

Terminate current contracts;

Recoup all funds paid by FIA in the period in which the audit information was not provided.

- XXI. **RENEWAL APPLICATIONS:** Grantee may be asked to submit an application for renewal of funding prior to the beginning of the next fiscal year. Continuation funding is contingent upon legislative appropriation, compliance with the terms of this Grant Agreement, and continuing need for service. The application shall indicate any requests for program changes, a revised *Budget Plan*, and a revised workplan. The renewal application forms will be mailed to the grantee with the appropriate forms and instructions.
- XXII. **PARTICIPATION IN SURVEYS:** Grantee must complete all surveys conducted by the Children's Trust Fund or funding agencies and return them in a timely manner. These surveys are used to assist programs through gauging technical assistance needs and compiling statewide information. If a program had concerns with any information contained in the survey, they could express that concern in writing and an exception to the policy may be provided.

- XXIII. **PARTICIPATION IN TRAINING:** The grantee is required to send a representative to the "Supporting Families with Young Children" conference if offered during the grant period. Grant funds may be used to support participation in these activities. Grantees are encouraged to participate in other trainings sponsored by the funding agencies.
- XXIV. **LOBBYING:** No Federal appropriated funds (including payments made by the funders on this Grant Agreement) will be paid, by or on behalf of the grantee, to any person for influencing or attempting to influence an officer or employee of any Federal agency, a Member of congress or the state legislature, an officer or employee of congress or the state legislature, or any employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- XXV. **MISCELLANEOUS:** This Grant Agreement shall be governed by the laws of the State of Michigan. Any waiver by either party of any term of this contract shall not act as a waiver of any other term of this contract.
- XXVI. **The Children's Trust Fund shall act on behalf of the funding agencies for the administration of the 0-3 Secondary Prevention Grants. All reports, requests, amendments, etc. should be communicated through the Children's Trust Fund.**

IN WITNESS WHEREOF, the Children's Trust Fund and the grantee have caused this Agreement to be executed by their respective officers duly authorized to do so.

The Undersigned has the lawful authority to bind the grantee to the terms set forth in this Agreement.

Dated at _____, Michigan | _____
(Grantee/Agency)

this ____ day of _____, 20 ____ By: _____

Witness: _____

Dated at _____, Michigan CHILDREN'S TRUST FUND

this ____ day of _____, 20 ____ By: _____
Children's Trust Fund Signature

Witness: _____

Grant #: CTFPR-04-

The Michigan Children's Trust Fund
announces the:

**0-3 Secondary Prevention
Grant Application
For FY 2004 Funding**

**Available for Current FY 2003
Grantees ONLY**

Due: July 29, 2003

In collaboration with the Michigan Family Independence Agency,
the Michigan Department of Community Health, and the
Michigan Department of Education.

**SECONDARY PREVENTION FUNDING
FOR
FAMILIES WITH CHILDREN 0-3**

The Family Independence Agency (FIA), Department of Community Health (DCH), and Department of Education (MDE) announce the availability of funds that are anticipated to be appropriated for community based collaborative 0-3 secondary prevention services. The Children's Trust Fund (CTF) is designated as the agency responsible for the application process.

These funds will be used from October 1, 2003 through September 30, 2004. This funding will be available pending appropriation by the legislature, compliance with the terms of the grant agreement, and continuing need for services.

Funding is intended to support existing 0-3 secondary prevention programs designed to promote strong, nurturing families and prevent child abuse and neglect.

CONTENTS

INTRODUCTION.....	3
FUNDING REQUIREMENTS.....	3
ADDITIONAL REVIEW FACTORS.....	3
TIMELINE FOR FY 2004 0-3 SECONDARY PREVENTION APPLICATIONS.....	4
BUDGET FOR FY 2004.....	5
APPLICATION GUIDELINES.....	6
APPLICATION INSTRUCTIONS.....	7
CLOSING DATE & DELIVERY ADDRESS.....	8
PROJECT APPLICATION WITH RUBRICS.....	9-15
ADDITIONAL REVIEW FACTORS.....	15-16
ATTACHMENT A	
ATTACHMENT B	
ATTACHMENT C	

DEADLINE: Tuesday, July 29, 2003. Applications, the **original and four copies (five total)**, must be received in the Children's Trust Fund office before 5:00 p.m. on July 29, 2003* to be accepted for consideration. Please send all applications to:

0-3 Secondary Prevention Applications
Children's Trust Fund
235 S. Grand Ave., Suite 1411
Lansing, MI 48933

*See page 8 for complete delivery instructions.

Introduction

The FY 2004 appropriations for the Family Independence Agency and the State School Aid Act currently have proposed funds for community based collaborative secondary prevention programs to serve families with children from 0-3 years.

This application packet is requesting information and data on the programs currently funded through the 0-3 Secondary Prevention initiative in fiscal year 2004 (see listing in Attachment B). The budget plan, detail, and narrative of this application requests information for fiscal year 2004, beginning October 1, 2003 through September 30, 2004.

Funding is intended to support 0-3 secondary prevention services designed to promote strong, nurturing families and prevent child abuse and neglect by:

- fostering positive parenting skills especially for parents of children ages 0-3
- improving parent/child interaction
- promoting access to needed community services
- increasing local capacity to serve families at risk
- improving school readiness
- supporting healthy family environments that discourage alcohol, tobacco and other drug use

Funding Requirements

- Only programs currently operating with 0-3 Secondary Prevention funds are eligible to apply (see listing in Attachment B).
- Funding must be used to continue currently funded projects.
- The amount requested must be no more than the amount currently allocated.
- If two or more grantees would like to combine programs and apply together under one fiduciary, the total amount requested cannot exceed the sum of the grants awarded or \$250,000 whichever is less.
- The definitions and acronyms from previous 0-3 Secondary Prevention (attached) application are still applicable for this application. Funds can not be expended for services to families in which neglect or abuse has been substantiated (Categories I & II).
- There must be a documented local match of 25% of the requested funds with no more than 10% in-kind goods or services. A larger match is allowed as long as the minimum requirement of cash match is met.
- All applications must obtain the endorsement of the Multi-Purpose Collaborative Body (MPCB) for the county(ies) that the project/service will cover. **The Endorsement and Disclosure Form in Attachment A must be used.** Any application that does not include the endorsement from the local MPCB will be **DENIED.**
- The same fiduciary/fiscal agent that was listed in fiscal year 2003 must be used unless proper justification is provided otherwise.
- Home visitor programs are required to participate in the Program Information Management System (PIMS) data collection project. Information on PIMS is available from the Children's Trust Fund.

Additional Review Factors

In addition to the review criteria found on the Project Application, the funding agencies will examine other factors in making funding decisions, including: (1) duplication of effort; (2) geographical distribution; (3) evidence that an applicant has performed satisfactorily on the current project through examination of quarterly reports, on-site monitoring visits, and Michigan Public Health Institute (MPHI) evaluation reports; and (4) demographic factors that demonstrate need through community profile measures when compared to other areas of the state.

TENTATIVE TIMELINE FOR 0-3 SECONDARY PREVENTION APPLICATIONS

Disseminate Application (Contact your local MPCB to coordinate the review of the application.)	June 16, 2003
Technical Assistance Session*	June 27, 2003
Applications Due	July 29, 2003 (by 5pm)
Review of Applications	August 4, 2003
Announcement/Award Notification to Applicants	August 18, 2003
Effective Date of Grants	October 1, 2003

*A technical assistance session consisting of a question/answer format (not mandatory) will be held on June 27, 2003 from 8:00am to 10:00am utilizing a conference call format. Prior registration is required (use form in Attachment B).

Space is limited to one call per site. Once your site is registered, the call in number will be provided.

All responses to questions addressed at the technical assistance session will be distributed to programs by July 3rd, 2003.

For programmatic, technical assistance, general application questions, and other concerns please contact (e-mail is required):

Shannon Stotenbur
Children's Trust Fund
E-mail: Stotenburs@michigan.gov

If sending questions by e-mail is not possible, a voice mail message can be left at 517/335-4620. Include your address and/or fax number and a response will be sent.

Questions regarding the application will be taken until Friday, July 11, 2003. All questions and answers will be distributed via email to all programs that have completed and returned the *Notice of Intent to Apply form* (see attachment C).

BUDGET FOR FY 2004

Administrative/Evaluation Costs

- As in prior applications, no more than 15% of the requested funds may be used for administrative costs. Administrative costs include, but are not limited to: procurement; payroll processing; personnel functions; management, maintenance and operation of space and property; data processing and computer services; accounting; budgeting; auditing; costs for administrative meetings; or any administrative costs not related to direct service delivery.
- Up to \$10,000 or 10% (whichever is greater) of the requested funds may be budgeted for evaluation of the proposed project. Evaluation costs are not considered administrative.
- Training directly related to the provision of services or the supervision of staff is also not considered an administrative cost.
- A portion of the requested funds may be budgeted for an audit, if required.

Local Match

- The match must be used for the provision of services included in the application. Funding used to support services other than those proposed can not be used as match.
- There must be a documented local match of 25% of the requested funds with no more than 10% in-kind goods or services. A larger match is allowed as long as the minimum requirement of cash match is met.
- Cash match is defined as an expenditure of cash that has been specifically designated for the continued 0-3 secondary prevention service (the sources of cash match may be from the same partners/sources used in fiscal year 2003).
- In-kind contributions may include but are not limited to the value of contributed space and equipment, volunteer services, administrative overhead services, etc.

Example: Applicant A is requesting \$50,000 to fund a proposed project. At least \$12,500 local matching funds are required (with no less than \$7,500 in cash), thus making the entire application budget \$62,500.

Local resources (financial and otherwise) must be contributed to ensure not only that the project is supported, but also that stakeholders have a meaningful commitment to the prevention project.

Funding Amounts/Budget Requirements

- The application must reflect a budget to cover activities conducted October 1, 2003 through September 30, 2004. **Applicants may not request more funds than awarded in fiscal year 2003.**
- If two or more current grantees would like to combine programs and apply together under one fiduciary, the total amount requested cannot exceed the sum of the grants awarded in fiscal year 2003 or \$250,000, whichever is less.
- Budget negotiation may occur for awarded applicants during the creation of the grant agreement.
- The administering agency reserves the right to close any grants awarded due to the unavailability of funds, the grantee's non-compliance with the grant agreement, and the lack of demonstrated need for the service(s).

APPLICATION GUIDELINES

Please submit an original and four copies (five total) of the application. In addition, an IBM compatible disk in MICROSOFT WORD is required (Word Perfect will not be accepted).

Application Format and Submission Requirements (for both original and copies)

Format for Project Application:

- readable font in Times New Roman style in a size no smaller than 11 pt.
- stapled (or clipped) in top, left corner only (no binders, spirals, etc.)
- attachments will not be accepted (other than samples requested)
- 1" margins
- Include numbered questions

Submission (original and each copy MUST BE submitted in the following order):

1. Application Face Sheet – original signature by authorized signatory and project director
2. MPCB Endorsement and Disclosure Form - signed by the Chair of the MPCB
3. Project Application
4. Budget Plan Form – original signature by the authorized signatory
5. Budget Detail

- **To be considered for funding, applications must contain the above components in the order listed.**
- **Applications not meeting the above requirements will be DENIED.**
- **An Application Checklist is included in Attachment B.**

APPLICATION INSTRUCTIONS

1. **APPLICATION FACE SHEET (No Points)**

Applicants should refer to the specific form and instructions in Attachment A.

2. **MPCB ENDORSEMENT AND DISCLOSURE (Mandatory)**

Applicants should refer to the specific form in Attachment A.

3. **PROJECT APPLICATION (100 Total Points)**

This section must be completed using the form on pages 8-11. This form (without the rubrics) can be provided electronically by e-mailing stotenburs@michigan.gov. The total length of the form with the numbered questions included cannot exceed five (5) pages. The application will be scored using the rubrics and other review factors listed on pages 8-12.

4. **BUDGET PLAN FORM**

- This section provides information to demonstrate that the project has an appropriate budget and is cost effective. The budget must be reasonable in relation to the scope of the project.
- The application must reflect a budget to cover activities from October 1, 2003 through September 30, 2004. Applicants may not request more funds than awarded in fiscal year 2003. (Please make sure the budget is calculated correctly).
- If two or more grantees would like to combine programs and apply together under one fiduciary, the total amount requested cannot exceed the sum of the grants awarded in fiscal year 2003 or \$250,000 whichever is less.
- Applicants should refer to the specific forms and instructions in Attachment A.

5. **BUDGET DETAIL**

- Outline budget line items as presented in the Budget Plan Form providing as much specific information as possible.
- Outline the sources, status, and amounts of local cash and in-kind match.
- Projects that incorporate contracts to community partner agencies must provide detail regarding the anticipated expenditures of that portion of the funds

CLOSING DATE AND DELIVERY ADDRESS

Due to current security measures, **THIS GRANT APPLICATION MAY NOT BE HAND-DELIVERED.** The **ORIGINAL** application bearing **ORIGINAL** signatures and (4) copies (FOR A TOTAL OF FIVE) of the completed application must be documented by delivery agent for delivery on or before July 29, 2003.

Submit applications and disk to:

0-3 Secondary Prevention Applications

Children's Trust Fund

235 S. Grand Ave., Suite 1411

Lansing, MI 48933

DEADLINE: July 29 by 5:00 p.m.

No facsimile transmissions will be accepted. Late application, an application submitted by facsimile, or an application submitted, but not in accordance with the application instructions, will not be accepted and will be returned to the applicant *without review*.

**0-3 Secondary Prevention
FY 2004**

Project Application with Rubrics

** All information requested below should be answered only for those services/families funded through the 0-3 funds in FY 2003.

Identifying Information

1. Program Name:
2. County(ies) Served:

Target Population

3. Describe the target population served.
4. Complete the table below. Enter total number of families served in ongoing 0-3 funded services for Fiscal Year 2002 and for the 1st and 2nd quarter combined of FY 2003. These numbers will be used to determine outcomes for families who receive ongoing face to face services. Do not count families who receive one-time-only services or receive information only, e.g., hospital screening, newsletters.
5. Include in the table below the number of children ages 0-3 served in ongoing 0-3 funded services in fiscal year 2002 and combined total for 1st and 2nd quarter of FY 2003.

Fiscal Year	Total number of families served (count each family only once per fiscal year)	Total number of children ages 0-3 served (count each child only once per fiscal year)
FY 2002		
FY 2003 (combined total for 1 st two quarters only)		

6. For the families served with the 0-3 Secondary Prevention funds, what are the five most prevalent risk factors identified:
 -
 -
 -
 -
 -
7. Complete the table below. Report how many families served in Fiscal Year 2002 and the combined 1st and 2nd quarter of Fiscal Year 2003 have multiple risk factors (3 or more). Only report families in ongoing services as described in Question 4.
8. How many families dropped out of 0-3 secondary prevention services in Fiscal Year 2002, i.e., did not complete the individualized family service plan before stopping services, e.g., referred to Protective Services, moved out of county, family said did not want services, etc.?

Number of families (count each family only once in each category below)	Fiscal Year 2002 number of families	% of families in Fiscal Year 2002 <u>For information only. State will compute, using site provided numbers.</u>	Fiscal Year 2003 (first two quarters only) number of families with three or more risk factors	% of families in Fiscal Year 2003 (1 st two quarters only) <u>For information only. State will compute, using site provided numbers.</u>
Multiple risk factors		Number of families with multiple risk factors in previous column divided by number of total families served in Fiscal Year 2002 from Question #2		Number of families with multiple risk factors in previous column divided by number of total families served in partial Fiscal Year 2003 from Question #2
Dropped out of services		Number of families who dropped out of services in previous column divided by number of total families served in Fiscal Year 2002 from Question #2		Number of families who dropped out of services in previous column divided by number of total families served in partial Fiscal Year 2003 from Question #2

9. If known, how many families in fiscal year 2002 and 1st and 2nd quarter of FY 2003 were identified and wanted to participate in the program but were unable to be served (i.e. waiting lists)?

Not recommended for funding	Recommended with revisions	Recommended for funding	Highly recommended for funding	Maximum score per row
The applicant:	The applicant:	The applicant:	The applicant:	
0	1-2	2-3	4-5	
does not identify the five most prevalent risk factors that were addressed in the program.	identifies less than the five most prevalent risk factors. Fewer than 50% of the families served in the project in both fiscal years had multiple risk factors.	identifies the five most prevalent risk factors. Between 51% and 80% of the families served in both fiscal years in the project had multiple risk factors.	identifies the five most prevalent risk factors. Between 81% and 100% of the families served in both fiscal years in the project had three or more risk factors.	5

Description of Services

10. Describe the activities funded by the 0-3 Secondary Prevention grant and the frequency with which they are provided.
11. List the three referring organizations/agencies that provide the largest number of referrals to the program and their percentage of referrals to the program.
 -
 -
 -
12. List the tool(s) used to measure risk for entry into 0-3 Secondary Prevention services (*please attach samples*):
13. Describe in up to two paragraphs the process for contacting families once a referral is received.

Rubrics on next page

Not recommended for funding	Recommended with revisions	Recommended for funding	Highly recommended for funding	Maximum score per row
The proposal:	The proposal includes:	The proposal includes:	The proposal includes:	
0-2	3-7	8-12	13-15	
Includes a list of activities only or does not address this section.	a list of activities, but the frequency that the activities are provided is not sufficient to impact the targeted population.	a description of activities and their frequency for the model of 0-3 Secondary Prevention being provided. The frequency supports some of the principles of the model and provides inconsistent intensity needed to impact the targeted population. The project disseminates information for parents about child development and appropriate expectations for each stage, encourages positive parenting skills; and provides learning opportunities to promote growth in both the parent and the child.	a clear description of activities and their frequency for the model of 0-3 Secondary Prevention being provided. The frequency aligns with the model's evaluated effectiveness and intensity needed to impact the targeted population. The project disseminates information for parents about child development and appropriate expectations for each stage, encourages positive parenting skills, seeks to enhance parent-child interaction, and provides learning opportunities to promote growth in both the parent and the child.	15
0	1-2	3-4	5	
no information about the referral agencies or process for contacting families.	fewer than three referral agencies and minimal information about the process for contacting families.	the names of three organizations that provide referrals to the program but does not provide the percentage of referrals received from each organization. The applicant provides a description of the process for contacting families.	the names of three organizations that provide referrals to the program and lists the percentage of referrals received from each organization. The applicant also provides a clear description of the process for contacting families.	5
0	1-2	3-4	5	
no tool(s) for accessing risk.	the name of the tool(s) used for accessing risk, but they are not appropriate for the program.	the name of the tool(s) for assessing risk is included and some, but not all, are appropriate for the program.	the name of the tool(s) for assessing risk is included and is appropriate for the program.	5

Collaboration

14. List collaborative partners (agencies/organizations/schools) and describe their role.
15. Do you meet face to face with collaborative partners regarding the 0-3 Secondary Prevention services? Yes ___ No ___
 - If yes, how often do you meet to discuss the program?

Rubrics on next page

Not recommended for funding	Recommended with revisions	Recommended for funding	Highly recommended for funding	Maximum score per row
The applicant:	The applicant:	The applicant:	The applicant:	
0	1-2	3-4	5	
does not list the collaborative partners involved with the 0-3 Secondary Prevention program.	lists the collaborative partners involved with the 0-3 Secondary Prevention program but does not include a description of their role.	lists the collaborative partners involved with the 0-3 Secondary Prevention program and includes a description of their role.	lists the collaborative partners involved with the 0-3 Secondary Prevention program and includes a clear description of their role. The listing of partners includes community health agencies, schools, the Family Independence Agency and other community organizations that work with the target population.	5
0	1-4	5-8	8-10	
does not meet face to face with the collaborative partners.	meets face to face with the collaborative partners, but does not discuss the program.	meets face to face with the collaborative partners, but not frequently enough or does not discuss referral process or problem solve implementation of the program.	meets face to face with the collaborative partners regularly (at least monthly) to inform them about the program, discuss referral processes, program implementation and problem solve around issues.	10

Budget for FY 2004

16. Complete the budget plan form and budget detail for FY 2004 based on the amount requested for continuing services. Forms are contained within Attachment A. The amount requested cannot exceed the grant amount awarded in fiscal year 2003. There must be at least a 25% match of the requested amount with at least 15% of the match being cash. Be sure to include a breakdown of the following information in the budget detail:
- The staff positions funded by or contributed to the 0-3 grant and percent of FTE.
 - The amount, source, and status of cash and in-kind match.
17. Summarize the budget for FY 2004 narrative format including sources, status, and amounts of match, and standards for salaries and cost of living in the area:

Not recommended for funding	Recommended with revisions	Recommended for funding	Highly recommended for funding	Maximum score per row
The proposal:	The proposal:	The proposal:	The proposal:	
0	1-2	3-4	5	
consists of the budget plan only.	consists of a budget plan, but does not provide a narrative which discusses the match sources, status, or standards for salary and cost of living information.	consists of a budget plan and budget narrative that discuss the sources of match but does not include information on the status of match or standards for salary and cost of living information.	consists of a budget plan and budget narrative that clearly outline the sources and status of match as well as the standards for salary and cost of living information for the area.	5
0	1-2	3-4	5	
provides a budget detail but does not include the required match or a listing of staff positions.	indicates the match required on the budget detail but does not include the items in the budget summary. The proposal lists the staff positions but does not include the percentage of FTE for each.	includes a budget detail that clearly delineates the source and amount of funding available for the cash and in-kind match. The proposal lists the staff positions and includes the percentage of FTE for each.	includes a budget detail that correctly calculates and clearly delineates the source and amount of funding available for the local match, both cash and in-kind, in each line item. It is clear that the match dollar will be used to support this project only. The proposal lists the staff positions and includes the percentage of FTE for each. The staffing is appropriate for program services.	5

Evaluation

21. Complete the table shown below. Provide the total number of families served who were “satisfied” or “very satisfied” with services provided (as indicated by your satisfaction survey) for FY2002 and the 1st and 2nd quarters of FY2003 (unduplicated count). Clearly identify the time period that the survey covered (i.e. for fiscal year 2002, for the 1st quarter of fiscal year 2003, etc.) and attach a copy of the instrument used. Discuss the suggestions that were made by participants to improve services and any actions that have been taken to respond to those suggestions.

	Number of families offered survey	Number of surveys returned	Number of families indicating satisfaction	Number of families “highly” satisfied
FY2002				
1 st Quarter 2003				
2 nd Quarter 2003				

22. For FY2004, it is expected that 0-3 Secondary Prevention programs ensure parent/consumer involvement in multiple levels (policy, administrative, programmatic, quality improvement, evaluation). Please briefly describe a plan that will be implemented in your local program, integrating parent/family members into the decision-making processes of your organization. Please include those strategies that are currently successful and those that will enhance the engagement of parents/family members.
23. Based on the program's evaluation plan outlined in the current grant agreement (submitted in August 2002), what results has the program achieved to date? Complete or recreate the form appended. In a separate attachment, not counted in the 10-page limit, fully integrate the current evaluation plan into this format and report on the outcomes achieved in FY2002.
24. In a separate attachment, not counted in the 10-page limit, using the FY2004 Preliminary Plan, provide the preliminary evaluation plan for FY2004 that incorporates the impact of the FY2002 outcomes provided for item 23 and knowledge of progress in FY2003 on the service level outcomes, objectives and indicators planned FY2004.

Rubrics on next page

Evaluation rubrics

Not recommended for funding	Recommended with revisions	Recommended for funding	Highly recommended for funding	Maximum score per row
The proposal: Provides no information on client satisfaction.	The proposal: indicates that satisfaction surveys were distributed to less than 50% of families served.	The proposal: indicates that satisfaction surveys were distributed to 51-89% of families served.	The proposal: Indicates that satisfaction surveys were distributed to 90-100% of families served.	5
0	1-2	3-4	5	
Provides no information on client satisfaction.	provides information on client satisfaction that indicates less than 80% of clients were very satisfied or satisfied with services.	provides information on client satisfaction that indicates between 80% and 89% of clients were very satisfied or satisfied with services. Feedback from participant satisfaction survey is discussed.	provides information on client satisfaction that indicates that more than 90% of clients were very satisfied or satisfied with services. Participant feedback serves as a basis for improvements to program services.	15
0	1-5	6-10	11-15	
provides no information on outcomes and no numerical data.	provides only qualitative data to support achievement of program outcomes.	provides some quantitative (numerically measurable) data on outcomes for the program.	provides objective quantitative (numerical) evidence on the outcomes for child and family indicating child and family success.	25
0	1-8	9-18	18-25	

ADDITIONAL REVIEW FACTORS – For information only do not complete

In addition to the review criteria found on the Project Application, the funding agencies will examine other factors in making funding decisions, including: (1) duplication of effort; (2) geographical distribution; (3) evidence that an applicant has performed satisfactorily on the previous project through examination of quarterly reports, on-site monitoring visits, and Michigan Public Health Institute (MPHI) evaluation reports; and (4) demographic factors that demonstrate need through community profile measures when compared to other areas of the state.

1. Is there any evidence provided by state agency partners to indicate duplication of this effort? (i.e., duplication of services to the same target population?)
2. Is the grantee up-to-date in quarterly report submissions? Yes No
3. Were the quarterly reports submitted on time? Yes No
 - If no, was an extension requested/given? Yes No
4. Have the MPHI evaluation reports been submitted on time? Yes No
 - If no, was an extension requested/given? Yes No
5. Was a site visit conducted? Yes No
6. List the evidence of program strengths and challenges provided by the grant monitor's site visit report:
7. Is there any objective evidence provided by state agency partners to indicate concerns with implementation?
8. Utilizing the community profile measures listed below, does the applicant's service area rank higher than average according to state statistics?

- Infant mortality rates
- Poverty rates
- Adult substance abuse rates

- Out-of-wedlock pregnancy rates
- Child abuse and neglect rates
- Teen pregnancy rates

NOTE: Upon review of all applications, those applicants whose overall scores fall in the highly recommended and recommended categories will be plotted on a state of Michigan map to ensure geographic diversity.

ATTACHMENT A

(Application Forms—All must be completed)

1. Face Sheet Instructions
2. Face Sheet Form
3. MPCB Endorsement and Disclosure Form
4. Budget Plan Form Instructions
5. Budget Plan Form

Instructions for the Application Face Sheet

Complete the application face sheet in readable type. (Form is attached):

1. Fiscal Agent Information: Complete this section for the applicant's fiscal agent:
 - a. Give the entire fiscal agent's name. Do not abbreviate or use acronyms.
 - b. Give the fiscal agent's address.
 - c. Give the city, state and zip code for the fiscal agent.
 - d. Give the county(ies) in which the service(s) will be provided.
 - e. Print the name and telephone number of the person who will act as the authorized signatory for the grant application. The authorized signatory must also sign this on this line.
 - f. Give the fiscal agent's Federal I.D. number.
 - g. Provide the fiscal agent's fiscal year by listing the beginning month and day.
 - h. Check whether the fiscal agent annually receives more than \$300,000 in federal funds.
 - i. Check the fiscal agent's agency type.
 - j. Provide the names of the senators/representatives in which the fiscal agent is located along with the district number for each.

2. Service/Project Information: Complete this section based on the service/project for which 0-3 Secondary Prevention money is being requested.
 - a. Provide the entire service/project name. Do not abbreviate or use acronyms.
 - b. Print the name and telephone number of the person who will act as the project director for the grant application. The project director must also sign this on this line. (*Questions about the application will be directed to this individual.*)
 - c. Provide the e-mail and fax number for the project director.
 - d. Provide the amount of 0-3 Secondary Prevention monies being requested.
 - e. Check whether the application being submitted is a combination of two or more previous 0-3 grants.
 - f. If "yes" is checked on letter "e", list the names of the fiduciaries and the counties being combined from the fiscal year 2003 grants into this application.

APPLICATION FACE SHEET FOR FY2004 0-3 SECONDARY PREVENTION GRANTS

(Before completing this form, carefully read the instructions)

1. Fiscal Agent Information

- a. _____
Fiscal Agent
- b. _____
Address
- c. _____
City, State, Zip Code
- d. _____
County(ies) where services will be provided
- e. _____
Authorized Signatory (Print and Sign name) Telephone
- f. _____
Federal I.D. Number
- g. _____
Fiscal agents fiscal year (beginning month and day)
- h. Does the fiscal agency annually receive more than \$300,000 in federal funds? yes no
- i. Agency type (please check one): Private, Non-Profit Private, Proprietary Public
- j. State Senator _____ District No. _____
State Representative _____ District No. _____
Federal Representative _____ District No. _____

2. Service/Project Information

- a. _____
Name of Service/Project
- b. _____
Project Director's Name Signature Telephone
- c. _____
E-mail Address Fax Number
- d. Amount of Funds Requested..... \$ _____
- e. Is this application a combination of two or more separate FY 2003 0-3 grants? yes no
- f. If yes, list the fiduciaries from FY 2003 combined into this application (including the counties):

MPCB Endorsement and Disclosure Form

Conflict of Interest Disclosure

Our MPCB has received a request to review grant applications from the following:

We have polled the membership present at this session with regard to any potential conflict of interest. I certify that

- all members present assert that they have no personal or financial interest in any of the above listed applications (nor do members of their immediate families).
- those members acknowledging a personal or financial interest have excused themselves from the endorsement proceedings.

_____, Chair, _____ County MPCB

Endorsement of Grant Application

In accord with PIT Information Advisory No. 64 (April 1999), our MPCB has reviewed all applications submitted, asked questions regarding the applications, provided feedback regarding the contents of the application to the applicants, and ensured the planned services included in the following application(s) are part of our community's plan for prevention endorsed by our Multi-Purpose Collaborative Body.

List applicant(s):

_____, Chair, _____ County MPCB

INSTRUCTIONS FOR BUDGET PLAN FORMS

- Complete the budget form using the following instructions:
- I. Name of Fiscal Agent - Give the entire fiscal agent's name. Do not abbreviate or use acronyms
 - II. Name of Service/Project - Give the entire service/project name. Do not abbreviate or use acronyms.
 - III. Total Cost. The Total Cost is the cost (requested 0-3 Secondary Prevention funds, cash, and in-kind) for the prevention service/project during the budget period. Where the prevention service/project is a part of a larger organization, do not include other parts of the organization's budget.
 - IV. Source of Funding. There must be a documented local match of 25% of the requested funds with no more than 10% in-kind goods or services. **A larger match is allowed as long as the minimum requirement of cash match is met.**
 - The match must be used for continued services included in the application.
 - Cash match is defined as a new expenditure of cash that has been specifically designated for the proposed service.
 - In-kind contributions may include but are not limited to the value of contributed space and equipment, volunteer services, administrative overhead services, etc.

On Line A: List the amount of dollars requested from the 0-3 secondary prevention funds.

On Line B: List the amount of dollars to be provided by the local cash match.

On Line C: List the monetary value of the in-kind match. This match may include the estimated value of contributed space, equipment, volunteer services, etc.

On Line D: Write the sum of lines A, B, and C. This is the Total Cost.
 - V. Budget: Complete As Follows (For the 0-3 secondary prevention funded portion of the project only)
 - Line items (list amounts covered by the grant in the appropriate column)
 - A. Salaries/Personnel includes salaries and wages
 - B. Fringe benefits for paid staff
 - C. Administrative costs not related to direct service delivery (no more than 15% of the requested funds)
 - D. Contractual Services related to direct service delivery
 - E. Supplies include printing, office supplies, training manuals, films, or videotapes, etc.
 - F. Travel includes travel for staff or transportation for participants or volunteers
 - G. Equipment for items over \$100
 - H. Occupancy rent, utilities, and telephone services for space required for staff or services
 - I. Training directly relevant to services and/or ongoing staff development
 - J. Evaluation and analysis to determine the impact and value of the project
 - K. Miscellaneous may include those items not covered above such as insurance, membership fees, etc.
 - Total Cost for each line item (Requested 0-3 Secondary Prevention funds + Cash match + In-kind match)
 - Total ALL columns (ensure calculations are correct)

THE BUDGET PLAN FORM MUST INCLUDE AN ORIGINAL SIGNATURE OF THE AUTHORIZED SIGNATORY LISTED ON THE FACE SHEET.

BUDGET PLAN FOR THE PERIOD OF October 1, 2003 – September 30, 2004

- I. Name of Fiscal Agent: _____
- II. Name of Service/Project: _____
- III. Total Cost: _____
- IV. Sources of Funding
- | | |
|-----------------------------------|----------|
| A. 0-3 Secondary Prevention Funds | A. _____ |
| B. Local Cash Match Amount | B. _____ |
| C. Local In-Kind Match Amount | C. _____ |
| D. TOTAL COST (Sum of A, B, & C) | D. _____ |

- Match must be at least 25% of the requested funds (at least 15% cash match) with no more than 10% in-kind goods or services

Line Item	0-3 Secondary Prevention Grant	Local Cash Match	Local In-Kind Match	Total Project Cost
A. Salaries (Personnel)				
B. Fringes				
C. Administrative				
D. Contractual				
E. Supplies				
F. Transportation (Travel)				
G. Equipment (Items over \$100)				
H. Occupancy				
I. Training				
J. Evaluation				
K. Miscellaneous				
TOTAL				

Print name _____

Original Signature of Authorized Signatory Required _____

Telephone No. _____

ATTACHMENT B

1. Current 0-3 Program List
2. Application Check List
3. List of staff contacts for MPCB
4. Child and Family Outcomes Plan

0-3 Secondary Prevention Grants
FY 2003

Allegan County Intermediate School District
County Served: **Allegan**
Contact: Carl Ill (616) 673-6954
Grant Amount: \$155,018

AuSable Valley Community Mental Health
County Served: **Iosco**
Contact: Peggy Hendrickson (989) 362-8636
Grant Amount: \$93,539

Barry-Eaton District Health Department
County Served: **Barry & Eaton**
Contact: Suzanne Thuma (517) 541-2603
Grant Amount: \$150,000

Berrien County Health Department
County Served: **Berrien**
Contact: John Nelson (616) 927-5603
Grant Amount: \$180,000

BHK Child Development Board
County Served: **Baraga**
Contact: Rod Liimatainen (906) 482-3663
Grant Amount: \$71,719

BHK Child Development Board
County Served: **Houghton-Keweenaw-Ontonagon**
Contact: Rod Liimatainen (906) 482-3663
Grant Amount: \$164,746

Branch-Hillsdale-St. Joseph Community Health Agency
County Served: **Hillsdale**
Contact: Doug McComas (517) 279-9561
Grant Amount: \$100,000

Cadillac Area OASIS (Family Resource Center)
County Served: **Wexford & Missaukee**
Contact: Rhonda Weathers (231) 775-7299
Grant Amount: \$44,400

Calhoun Intermediate School District
County Served: **Calhoun**
Contact: Ruth Kavalhuna (616) 964-9426
Grant Amount: \$125,000

Catholic Social Services
County Served: **Muskegon**
Contact: Pam Cohn (231) 726-4735
Grant Amount: \$199,993

Clinton County Family Resource Center
County Served: **Clinton**
Contact: Howard Comstock (989) 224-1173
Grant Amount: \$145,095

Dickinson/Iron District Health Department
Counties Served: **Dickinson & Iron**
Contact: Joyce Ziegler (906) 265-4156
Grant Amount: \$96,360

District Health Department #2
Counties Served: **Alcona, Iosco, Oscoda & Ogemaw**
Contact: Laura Chapman (989) 343-0703
Grant Amount: \$200,000.00

District Health Department #4
County Served: **Alpena**
Contact: Rosanne Schultz (517) 354-4230
Grant Amount: \$151,242

District Health Department #4
County Served: **Montmorency**
Contact: Rosanne Schultz (517) 354-4230
Grant Amount: \$86,401

District Health Department #10
County Served: **Lake, Mason, & Oceana**
Contact: Marcia Walter (231) 689-7321
Grant Amount: \$200,000

Family and Children Services
County Served: **Calhoun**
Contact: Ella Ryder (616) 965-3247
Grant Amount: \$169,461

Genesee Coalition on Adolescent Pregnancy Parenting and Prevention
County Served: **Genesee**
Contact: Dorothy LaVictoire (810) 235-1491
Grant Amount: \$100,000

Huron County Health Department
County Served: **Huron**
Contact: Becky McCabe (989) 269-3490
Grant Amount: \$55,486

Ingham County Health Department
County Served: **Ingham**
Contact: Stacey Meyer (517) 371-2998
Grant Amount: \$164,000

Ionia County Intermediate School District
County Served: Ionia
Contact: Cheryl Granzo (616) 527-4900, ext. 1410
Grant Amount: \$183,000

Kalamazoo Child Guidance
County Served: Kalamazoo
Contact: Aileen McKenna (616) 343-1651
Grant Amount: \$185,000

Mid-Michigan Community Action Agency
Counties Served: Clare & Mecosta
Contact: Jill Edwards-Sutton (517) 386-3805
Grant Amount: \$112,845

Monroe County Intermediate School District
County Served: Monroe
Contact: Douglas Redding (734) 242-5799, ext. 1912
Grant Amount: \$32,282

MSU Extension – Bay County
County Served: Bay
Contact: Howard Wetters (989) 895-4026
Grant Amount: \$144,617

MSU Extension – Eaton County
County Served: Eaton
Contact: Mona Ellard (517) 543-5594
Grant Amount: \$21,504

MSU Extension – Grand Traverse County
County Served: Grand Traverse
Contact: Jennifer Berkey (231) 922-4620
Grant Amount: \$179,019

MSU Extension – Sanilac County
County Served: Sanilac
Contact: Gail Innis (810) 648-2515
Grant Amount: \$100,000

Newaygo Public Schools
County Served: Newaygo
Contact: Terri Dodson-Garrett (231) 652-3629
Grant Amount: \$200,000

Northwest Michigan Community Health Agency
Counties Served: Charlevoix & Emmet
Contact: Patricia Fralick (231) 347-6014
Grant Amount: \$114,018

Oakland Family Services
County Served: Oakland
Contact: Barbara Hoffman (248) 858-7766
Grant Amount: \$150,000

Saginaw County Child Abuse and Neglect Council
County Served: Saginaw
Contact: Suzanne Greenberg (517) 752-7226
Grant Amount: \$250,000

Salvation Army
County Served: Wayne
Contact: Maureen Northrup (313) 537-2130
Grant Amount: \$90,000

Shiawassee County Health Department
County Served: Shiawassee
Contact: Rose Mary Asman (517) 743-2355
Grant Amount: \$169,368

Spaulding for Children
County Served: Wayne
Contact: Ann Funchess (248) 443-0300
Grant Amount: \$200,000

St. Joseph Mercy Hospital
County Served: Oakland
Contact: Kathleen Strader (248) 335-5638
Grant Amount: \$200,000

Starfish Family Services
County Served: Wayne
Contact: Janet Trost (734) 727-3159
Grant Amount: \$200,000

SW Michigan Exchange Club – Capstone Center
County Served: Berrien
Contact: Pamela Wertanen (616) 926-1979
Grant Amount: \$131,679

Tuscola County Health Department
County Served: Tuscola
Contact: Gretchen Tenbusch (517) 673-8114, ext. 115
Grant Amount: \$164,423

Women's Resource Center
County Served: Livingston
Contact: Pam Carter (517) 548-2200
Grant Amount: \$74,060

APPLICATION CHECK LIST FOR GRANT APPLICANTS

- Are the margins 1"?
- Is the application in a readable font style and at least 11 pt?
- Is the Application 5 pages or less (including the numbered questions)?
- Does the Application Face Sheet contain an original signature from the authorized signatory? *(must be the same person who signs the budget page)*
- Does the Application Face Sheet contain an original signature from the project director?
- Does the Budget Plan Form contain an original signature from the authorized signatory? *(must be the same person who signs the application face sheet)*
- Are the budget line items calculated correctly?
- Is the application complete and **the original and ALL four copies (five total) in the following order?**
 - Application Face Sheet
 - MPCB Endorsement and Disclosure Form
 - Project Application
 - Parent/Family Involvement Plan
 - FY2002 Child and Family Outcomes Form
 - FY2004 Child and Family Outcomes Plan
 - Budget Plan Form
 - Budget Detail
- Is the application stapled (or clipped) in the top, left corner? (Remember no binders, spirals, or folders are accepted.)
- Is an IBM compatible disk in MICROSOFT WORD with the Project Application and Budget information included?

Applications not meeting the above requirements WILL BE DENIED.

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
<p>Alcona County Human Services Council</p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p>	<p>Alcona</p>	<p>Bob White, Consultant (SF/SC Coordinator) Robert D. White & Associates P.O. Box 529 East Tawas, MI 48730 (989) 362-3776</p> <p>(989) 362-3776</p> <p>EMAIL whiter@alpena.cc.mi.us</p>			<p>Ms. Shawn Thornton, Superintendent Alcona Community Schools 51 Barlow Road Lincoln, MI 48742 (989) 736-8685</p> <p>(989)</p> <p>thornos@amaesd.k12.mi.us</p>
<p>Alger-Marquette Human Services Coordinating Body</p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p>	<p>Alger, Marquette</p>	<p>Carol Touchinski Marquette Alger Youth Foundation 309 S. Front Street Marquette, MI 49855</p> <p>(906) 228-8919</p> <p>(906) 228-7712</p> <p>EMAIL ctouchinski@mayf.org</p>	<p>Kate Zell, Strong Families/Safe Children Marquette County FCC Child and Family Services of the UP 1100 S. Front Street Marquette, MI 49855</p> <p>(906) 228-4025</p> <p>cfsprogramspecialist@chartermi.net</p>	<p>Jim Isleib/M. E.. Pond Strong Families/Safe Children Alger County FCC MSU Extension 101 Court St. Munising MI 49862 (906) 387-2530</p> <p>(906) 387-2530</p> <p>isleib@msue.msu.edu</p>	<p>Carol Touchinski Marquette Alger Youth Foundation 309 S. Front Street Marquette, MI 49855</p> <p>(906) 228-8919</p> <p>(906) 228-7712</p> <p>ctouchinski@mayf.org</p>
<p>Allegan County Multi-Agency Collaborative Council</p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p>	<p>Allegan</p>		<p>Gail Nichols Allegan County ISD 2891—116th Ave. Allegan, MI 49101 (269) 686-5079</p> <p>(269) 686-0327</p> <p>Gnichols@alleganisd.org</p>	<p>Sally Beyer Allegan County CMH 516 Linn Street Allegan, MI 49010 (269) 686-8692 x 225</p> <p>(269) 686-9613</p> <p>sally.beyer@accmhs.allegan.mi.us</p>	<p>Jon Campbell 1639 Elm St. Otsego, MI 49078</p> <p>(269) 694-4632</p> <p>(269) 694-2404</p> <p>Jcampbell@allegancounty.org</p>
<p>Alpena County Multi-Purpose Collaborative Body</p>	<p>Alpena</p>	<p>Pamela Lloyd-Gorski MPCB-Strong Families/Safe Children 118 S. Ripley St. Alpena, MI 49707</p>		<p>Doug McCombs Alpena County FIA 711 W. Chisolm Street Alpena, MI 49707</p>	<p>Charles A. White, Director Northeast Michigan CMH 400 Johnson Street Alpena, MI 49707</p>

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson	
		(989) 356-6946		(989) 356-7200	(989) 356-2161	(98)
<i>PHONE (and PHONE EXTENSION)</i>						
<u>FAX</u>		(989) 354-3823		(989) 354-7242	(989) 354-5898	(98)
		EMAIL pamlg@i2k.com			awhite@northland.lib.mi.us	
Antrim County Human Services Director's Council	Antrim	Gary Knapp Mancelona Family Res. Ctr 205 Grove Street Mancelona, MI 49659 (231) 587-5085			Marlene Caszatt MSU Extension P.O. Box 427 Bellaire, MI 49615 (231) 533-8818	
<i>PHONE (and PHONE EXTENSION)</i>						
<u>FAX</u>		(231) 587-5313			(231) 533-8392	
		EMAIL garyknappcrd@hotmail.com			caszatt@msue.msu.edu	
Arenac County Resource Council	Arenac	Joy-Ann Hartman, Council Coordinator Arenac County FIA 3709 Deep River Road Standish, MI 48658 (989) 846-4551			Marc A. Lauria Cory Place Inc. 1006 E. Indiana Street Bay City, MI 48706	
<i>PHONE (and PHONE EXTENSION)</i>					(989) 895-5563	
<u>FAX</u>		(989) 846-4365			(989) 895-7312	
		EMAIL hartmanj2@michigan.gov			monkeebiz@hotmail.com	
Barry Community Resource Network	Barry				Tammy Pennington Barry County COA 120 North Michigan Hastings, MI 49058 (616) 948-4856	
<i>PHONE (and PHONE EXTENSION)</i>					(616) 948-3336	
<u>FAX</u>						
		EMAIL				

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
Bay Area Human Services Collaborative Council	Bay	Kari Gulvas HSCC Coordinator Bay Arenac Behavioral Health 306 Fifth Street, 3 rd Floor Bay City, MI 48708 (989) 895-2248 (989) 895- EMAIL kgulvas#babha.org	Ellen Albrecht Bay-Arenac Bahavioral Health 201 Mulholland Bay City, MI 48708 (989) 895-2300 (989) 895-2390 ealbrecht@babha.org	Scott Gilman (Vice Chair) Riverhaven Sub. Abuse Coordinating Agency 306 Fifth St.- 3 rd Floor Bay City, MI 48708 (989) 895-2251 sgilman@babha.org	Kathy Cholak Jones, Director Bay County FIA 1399 West Center Road Essexville, MI 48732 (989) 895-2550 (989) 895-2494 cholak-jonesk@michigan.gov
		Irene Nugent <u>Benzie Community Resource Center</u> 6051 Frankfort Hwy, Ste 600 Benzonia, MI 49616 (231) 882-2123 (231) 882-2204 EMAIL nugenti@msue.msu.edu			Mark Nelson Manistee/Benzie CMH 395 Third St. Manistee, MI 49660 (231) 723-1600 x122 (231) 723-1735 mnelson@mbcmh.org
Berrien County Human Services Council	Berrien				Rick Pahl The Link 2002 South State Street St. Joseph, MI 49085 (269) (269) rpaul@link4teens.org
Branch County Family Services Network	Branch	Emily Mason, Coordinator 200 Orleans Boulevard Coldwater MI 49036 (517) 278-2129 (517) 279-8172			Robert Redmond Intermediate School District 370 Morse St. Coldwater, MI 49036 (517) 279-5730

PHONE (and PHONE EXTENSION)

FAX

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
		EMAIL emason@pinesbhs.org			Redmondb@branch-isd.org
Calhoun County The Coordinating Council	Calhoun	Jane DeVries, Ph.D. The Coordinating Council (TCC) of Cahlhoun County 140 West Michigan Avenue Battle Creek, MI 49017	Christine Reed TCC Operations Manager TCC of Calhoun County 140 Michigan Avenue Battle Creek, MI 49017	A.J. Jones, Ph. D. (Vic Chair of TCC) President/CEO <u>Family Health Center</u> <u>181 W. Emmett Street</u> <u>Battle Creek, MI</u> <u>49017</u>	Rita Klavinski, Extension Director MSU Extension - Calhoun County The Coordinating Council 315 West Green Street Marshall, MI 49068
		(616) 962-6722	(616) 441-5904	(616) 965-8866	(616) 781-0784
<i>PHONE (and PHONE EXTENSION)</i>		(616) 962-3252	(616) 441-6015	(616) 965-4773	(616) 781-0768
<u>FAX</u>		EMAIL jedevries@ameritech.net	cyr@summitpointe.org	ajjones@hcbc.org	klavinsk@msue.msu.edu
www.tcccalhoun.org					
Cass County Human Services Coordinating Council	Cass	Ruth Andrews Prevention Coordinator Cass County Human Services Coordinaing Council Woodlands BHN 960 M-60 East Cassopolis MI 49031 (269) 445-5019			Chris Kadulski, Director Cass County Family Independence Agency 325 M-62 Cassopolis, MI 49031
		(269) 445-3216			(269) 445-0227
<i>PHONE (and PHONE EXTENSION)</i>		EMAIL ruthand@woodlandsbhn.org			(616) kadulskic@michigan.gov
<u>FAX</u>					
Cheboygan County Human Services Coordinating Body	Cheboygan	Peter Amar Prevention Coordinator Fox Farm Consulting Services P.O. Box 95 Johannesburg, MI 49751 (989) 731-5295			Julie Sproul Cheboygan FIA 827 S. Huron Cheboygan, MI 49721
		(989) 731-5295			(231) 627-8511
<i>PHONE (and PHONE EXTENSION)</i>		EMAIL peteamar@foxfarmconsulting.com			(231) 627-8546 Sproulj@michigan.gov
<u>FAX</u>					

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
<p>Chippewa County</p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p>	<p>Chippewa</p>	<p>Mark Senkus Chippewa County MPCB 904 E. 8th Ave. Sault Ste. Marie, MI 49783 (906) 635-0998</p> <p>(906) 635-0998</p> <p>EMAIL mark@30below.com</p>			<p>Bonnie Southworth Upper Michigan Behavioral Health 546 Ashmun St. Sault Ste. Marie, MI 49783 (906) 632-0008</p> <p>(906) 632-1252</p> <p>bisouthworth@mgh.org</p>
<p>Clare County Human Services Coordinating Body</p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p>	<p>Clare</p>	<p>Jennifer Boyce Prevention Planner CMH for Central Michigan 301 South Crapo, Suite 200 Mt. Pleasant, MI 48858</p> <p>(989) 773-9224</p> <p>(989) 779-2371</p> <p>EMAIL jboyce@cmhcm.org</p>			<p>Joe Phillips <u>Clare County Juvenile Probation/ Family Court</u> Clare County Building 225 West Main, P.O. Box 96 Harrison, MI 48625 (989) 539-7887</p> <p>(989) 539-7229</p> <p>joe44phillips@hotmail.com</p>
<p>Clinton County Building Stronger Community Council</p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p>	<p>Clinton</p>	<p>Debby Kloosterman 13109 Schavey Road, Suite#4 DeWitt, MI 48820</p> <p>(517) 668-0185</p> <p>(517) 668-0446</p> <p>EMAIL debbyK_2000@yahoo.com</p>	<p>Theresa Silm, Vice Chair Clinton MSU Extension 100 E. State Street, Suite G-400 St. Johns, MI 48879 (989) 224-5240</p>		<p>Tim Morris, Chair CCRESA 1013 S. US-27, Suite A St. Johns, MI 48879</p> <p>(989) 224-6831, x 235</p> <p>(989) 224-9574</p> <p>tmorris@edzone.net</p>
<p>Copper Country Human Services Coordinating Body</p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p>	<p>Baraga, Houghton, Keweenaw</p>	<p>Dave Mayo-Kiely Copper Country HSCB 616 Sheldon Ave., Room B-7 Houghton, MI 49931 (906) 483-4722</p> <p>(906) 483-4972</p> <p>EMAIL hscbcoord@chartermi.net</p>			<p>Jim Bogan, Director Portage Health System 500 Campus Drive Hancock, MI 49930 (906) 483-1500</p> <p>(906) 483-1521</p> <p>jsbogan@portagehealth.org</p>

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
Crawford County	Crawford	Melissa Sjogren North Central CMH 527 Cobbs Cadillac, MI 49601 (231) 876-3202			Doug Wilson Youth Services Bureau P. O. Box 331 Grayling, MI 49738
<i>PHONE (and PHONE EXTENSION)</i>		(231) 775-1692			
<u>FAX</u>		EMAIL melissa.sjogren@nccmh.org			
Delta County Family Coordinating Council	Delta	Deb Doyle C/O Six County Employment Alliance 2950 College Ave. Escanaba, MI 49829		Rich Miketinac Delta/ Menominee FIA 2940 College Ave. Escanaba, MI 49829	Julie Moberg MSU Extension 2840 College Ave. Escanaba, MI 49829
<i>PHONE (and PHONE EXTENSION)</i>		(906) 789-0558 x 219		(906) 786-5394	(906) 786-3032
<u>FAX</u>		(906) 789-9952			(906)
EMAIL		ddoyle@jobforce.org			mobergj@msue.msu.edu
Dickinson County Collaborative Board	Dickinson	Bill Reid, Prevention, Coordinator Northpointe Behavioral Healthcare Systems 715 Pyle Drive Kingsford, MI 49802 (906) 779-0637			Trish Christy Dickinson-Iron Community Services Agency 800 Crystal Lake Blvd. Iron Mountain, MI 49801
<i>PHONE (and PHONE EXTENSION)</i>		(906) 779-0645			(906) 774-2256
<u>FAX</u>		(906) 779-0645			(906) 774-2257
EMAIL		breid@nbhs.org			tchristy@chartermi.net
Eaton County Human Services Collaborative Council	Eaton		Linda Lusted Strong Families/Safe Children Coordinator 1050 Independence Blvd. Charlotte, MI 48813	Jon Tomlanovich Vice-Chair Superintendent Eaton ISD 1790 East Packard Hwy Charlotte, MI 48813	Robert W. Johnson 1504 Millerburg Charlotte, MI 48813
<i>PHONE (and PHONE EXTENSION)</i>			(517) 543-2536	(517) 543-5500 x 1120	(517) 543-2453

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
----------------------------------	--------------------	-------------------------------	--------------------	----------------------	-------------

FAX

EMAIL

(517) 543-2125
lunstedl@michigan.gov

(517) 543-6633
jtceaton.k12.mi.us

(517) 543-0857

Emmet and Charlevoix
Counties Human Services
Coordinating Body

Emmet,
Charlevoix

Lorraine Berry
One MacDonald Drive, Ste. B
Petosky, MI 49770

Diane Heinzelman
Char-Em ISD
08568 Mercer Blvd.
Charlevoix, MI 49770
(231) 547-9947

(231) 347-6701, ext HSCB
(4722)

(231) 347-4370

EMAIL

lberry@northlink.net

(231) 547-5621

HeinzeD@sur1.pace.k12.mi.us

PHONE (and PHONE EXTENSION)

FAX

Genesee County
Partnership for Families

Genesee

Phyllis Sykes Coordinator
Strong Families/Safe Children
801 Tuuri Place, Suite 232
Flint, MI 48503
(810) 341-6775

Chris Flores
Insight Recovery Center
1110 Eldon Baker Drive
Flint, MI 48507
(810) 744-3600

James Goodwin President
Whaley Children Center
1201 N. Grand Traverse
Flint, MI 48503
(810)

(810) 341-6779

EMAIL

psykes@umflint.edu

(810)

jgoodwin@whaleychildren.org

PHONE (and PHONE EXTENSION)

FAX

Gladwin County Human
Services Coordinating
Body

Gladwin

Kara Pahl
343 West Cedar
Gladwin, MI 48624

Amy Pratt
NEMCSA Head Start
102 Fifth Street
Gladwin, MI 48624
(989) 426-3973

(989) 426-5471

(989) 426-3385

EMAIL

kmolski@cmhcm.org

(866) 648-7886

pratta@nemcsa.org

PHONE (and PHONE EXTENSION)

FAX

Gogebic and Ontonagon
Human Services
Coordinating Body

Gogebic and
Ontonagon

Betsy Wesselhoft
Prevention Coordinator
Gogebic County CMH
103 West US 2
Wakefield, MI 49968
(906) 229-6104

Judge Joel Massie
Gogebic County Probate Court
200 North Moore Street
Bessemer, MI 49911

(906) 667-0421

PHONE (and PHONE EXTENSION)

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
----------------------------------	--------------------	----------------------------------	--------------------	----------------------	-------------

<p><u>FAX</u></p> <p>Grand Traverse Human Services Coordinating Council</p>	<p>Grand Traverse</p>	<p>(906) 229-6190</p> <p>EMAIL wesselb@gccmh.org</p> <p>Cari Noga P.O. Box 845 Traverse City, MI 49685</p> <p>(231) 929-0182</p>	<p>Mary Merwin, Ph.D. 9601 North Carlson Road Northport, MI 49670</p> <p>(231) 386-7312</p>	<p>(906) 667-4660</p> <p>p27@voyager.net</p>	<p>Fred Keeclar, Director Grand Traverse Health Department 2325 Garfield Road North Traverse City, MI 49686 (231) 922-2758</p>
<p>PHONE (and PHONE EXTENSION)</p> <p><u>FAX</u></p> <p>Gratiot County Collaborative Council</p>	<p>Gratiot</p>	<p>(231) 941-0037</p> <p>EMAIL nogac@michigan.gov</p> <p>William Dilts, Prevention Coordinator Gratiot Collaborative Council 1131 East Center Street P.O. Box 310 Ithaca, MI 48847-0310 (989) 875-5101 x 246</p> <p>(989) 875-2858</p>	<p>(231) 386-7199</p> <p>mmerwin@traverse.com</p>	<p>Julie Pierce, Vice Chairperson Gratiot-Isabella RESD P.O. Box 310 Ithaca, MI 48847</p> <p>(989) 875-5101</p> <p>(989) 875-2858</p> <p>jpierce@edzone.net</p>	<p>(231) 922-4629</p> <p>fkeeslar@co.grand-traverse.mi.us</p> <p>Andrea Tabor, Chairperson Mid-Michigan District Health Department 615 North State Rd, Suite 2 Stanton, MI 48888</p> <p>(989) 831-5237 ex 318</p> <p>(989) 831-5522</p> <p>atabor@mmdhd.org</p>
<p>PHONE (and PHONE EXTENSION)</p> <p><u>FAX</u></p> <p>Hillsdale County Human Services Network</p>	<p>Hillsdale</p>	<p>(989) 875-2858</p> <p>EMAIL bdilts@edzone.net</p> <p>Suzanne Opel HCISD 310 West Bacon Street Hillsdale, MI 49242 (517) 437-0990 x 114</p> <p>(517) 439-4388</p>			<p>Renee Batt Domestic Harmony P.O. Box 231 Hillsdale, MI 49242 (517) 439-1454</p> <p>dharmony@dmci.net</p>
<p>PHONE (and PHONE EXTENSION)</p> <p><u>FAX</u></p> <p>Huron County Human Services Coordinating Body</p>	<p>Huron</p>	<p>(989) 269-9293</p> <p>EMAIL sopel@hillsdale-isd.org</p> <p>J. Craig Colton 1108 South VanDyke Bad Axe, MI 48413</p>			<p>Mike Sutherland Huron County FIA Sand Beach Bad Axe, MI 48413</p>

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
----------------------------------	--------------------	----------------------------------	--------------------	----------------------	-------------

<u>FAX</u>		(989) 269-7544			
Ingham Interagency Human Services Advisory Committee	Ingham	EMAIL craig@huroncmh.org Ron Uken Ingham County Health Department 5303 S. Cedar St., Lansing, MI 48911		Robert Sheehan Co-Chair C-E-I- Community Mental Health 812 E. Jolly Road Lansing, MI 48910 (517) 346-8212	sutherlandm@michigan.gov Bruce Bragg, Co-Chair Ingham County Health Department 5303 South Cedar Street, 2nd Floor Lansing MI 48909 (517) 887-4311
<i>PHONE (and PHONE EXTENSION)</i>		(517) 887-4558			
<u>FAX</u>		(517) 346-8011		(517)	(517) 887-4310
Ionia County Child, Family, and Community Council	Ionia	EMAIL HD_UKEN@ingham.org Krista Hausermann Project Coordinator ICCFCC 2191 Harwood Road Ionia, MI 48846 (616) 522-1408		sheehan@ceicmh.org	ha_bragg@ingham.org Criss Hickey Chairperson ICCFCC Ionia, MI 48846 (616)
<i>PHONE (and PHONE EXTENSION)</i>		(616) 527-8069			(616)
<u>FAX</u>		(616) 527-8069			
Iosco County Human Services Coordinating Services	Iosco	EMAIL khauserm@ionia-isd.k12.mi.us Peggy Hendrickson, Prevention Director AuSable Valley CMH 1199 West Harris Avenue P.O. Box 310 Tawas City, MI 48764 (989) 362-8636			Diana Schafer, Health Officer District Health Dept. #2 630 Progress West Branch, MI 48661 (989) 345-5020 x 146
<i>PHONE (and PHONE EXTENSION)</i>		(989) 362-7800			(989)
<u>FAX</u>		(989) 362-7800			
Iron County Collaborative Board	Iron	EMAIL pjhendrickson@voyager.net Bill Reid The same address, phone, fax, and email is used for Dickinson County.			dschafer@hline.org Tim Peruzzi, Superintendent West Iron Schools 601 Garfield Iron River, MI 49935

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
----------------------------------	--------------------	-------------------------------	--------------------	----------------------	-------------

(906) 265-9218

PHONE (and PHONE EXTENSION)

FAX

(906) 265-9736

EMAIL

tperuzzi@up.net

Isabella County Health and Human Services Collaborative Council

Isabella

Jennifer Boyce
The same address, phone, fax, and email is used for Clare County.

Vera Wiltse
MSU Extension
200 N. Main
Mt. Pleasant, MI 48858
(989) 772-0911, Ext 302

PHONE (and PHONE EXTENSION)

FAX

(989) 773-1622

EMAIL

wiltse@msue.msu.edu

Jackson County's Human Services Coordinating Alliance

Jackson

Jan Bellamy
P.O. Box 1426
Jackson, MI 49204

Scott Menzel
Executive Director, South Central Michigan Works!
2075 W. Bacon Road
Hillsdale, MI 49242
(888) 649-6757

(517) 784-2353

PHONE (and PHONE EXTENSION)

FAX

(517) 784-2353

EMAIL

cjanbellamy@aol.com

(517) 439-4388

smenzel@scmw.org

Kalamazoo County Multi-Purpose Collaborative Body (KCMPCB)

Kalamazoo

Janet M. Jones, Collaboration Coordinator
Greater Kalamazoo United Way
709 South Westnedge Ave.
Kalamazoo, MI 49007-5099
(269) 343-2524 x 221

Dr. Craig Misner,
Superintendent
Kalamazoo RESA
1819 East Milham Road
Portage, MI 49002
(269) 385-1510

Dr. Jeff Patton, Executive Director
Kalamazoo County Community Mental Health Services
P. O. Box 63
Nazareth, MI 49074-0063
(269) 553-8000

PHONE (and PHONE EXTENSION)

FAX

(269) 344-7250

EMAIL

Janetj@gkuw.org

(269) 381-3523

cmisne@kresanet.org

(269) 553-8035

jpatton@kazocmh.org

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
<p>Kalkaska County Multipurpose Collaborative Body</p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p>	<p>Kalkaska</p>	<p>Ranae McCauley, Coordinator, SF/SC Kalkaska County Governmental Center, MSU Extension 605 North Birch Street P.O. Box 780 Kalkaska, MI 49646 (231) 258-3320</p> <p>(231) 258-4678</p> <p>EMAIL mccauler@msue.msu.edu</p>			<p>Holly Blomquist 207 Cherry Street Kalkaska, MI 49646</p>
<p>Kent County Board of Commissioners/Kent County Family and Children's Coordinating Council</p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p> <p>www.accesskent.com/kcfccc</p>	<p>Kent</p>	<p>Bethanie Archbold, Program Coordinator Kent County Administration Building 300 Monroe Avenue, N.W. Grand Rapids, MI 49503 (616) 336-2593</p> <p>(616) 336-2523</p> <p>EMAIL bethanie.archbold@kentcounty.org</p>			<p>Diana Sieger Grand Rapids Community Foundation 161 Ottawa Ave, NW 209-C Waters Bldg. Grand Rapids, MI 49503 (616) 454-1751</p> <p>(616) 454-6455</p> <p>dsieger@grfoundation.org</p>
<p>Lapeer County MPCB</p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p>	<p>Lapeer</p>	<p>Michael J. Regin Lapeer ISD 1996 West Oregon Lapeer, MI 48446</p> <p>(810) 245-3980</p> <p>(810) 664-1011</p> <p>EMAIL m_regin@yahoo.com</p>			<p>Ken Deighton, Director Behavioral Health, Vail Center Mclaren Regional Hospital <u>1375 N. Main St.</u> Lapeer, MI 48446 (810) 667-5500</p> <p>(810) 664-1659</p> <p>kend@mclaren.org</p>

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
Leelanau County Family Coordinating Council <i>PHONE (and PHONE EXTENSION)</i> <u>FAX</u>	Leelanau	Laura Miller, Collaboration Coordinator Leelanau County FCC 7401 East Duck Lake Road, Suite 300 Lake Leelanau, MI 49653 (231) 256-0227 (231) 256-0226 EMAIL lcfcc@chartermi.net			Gary Aschim, Services Supervisor Leelanau County FIA 7322 E. Duck Lake Road Lake Leelanau, MI 49653 (231) 256-6108 (231) 256-2312 aschimg2@michigan.gov
Lenawee County Multi-Purpose Collaborative Body <i>PHONE (and PHONE EXTENSION)</i> <u>FAX</u>	Lenawee	Gratia L. Karmes Lenawee County CMHSP 1040 South Winter Street Suite 1022 Adrian, MI 49221 (517) 264-0189 (517) 265-8237 EMAIL gkarmes@lcmha.org	Jackie Johnson, Prevention Coordinator Lenawee County CMHSP 1040 South Winter Street, Suite 1022 Adrian, MI 49221 (517) 264-0136 (517) 265-8237 jjohnson@lcmha.org		Joe Satterelli, Director Family Independence Agency 1040 South Winter Adrian, MI 49221 (517) 264-6402 (517) 264-6357 Satterellij@michigan.gov
Livingston County Human Services Collaborative Body <i>PHONE (and PHONE EXTENSION)</i> <u>FAX</u>	Livingston	Alissa Parks Livingston County CMH 3760 Cleary College Drive Howell, MI 48843 (517) 548-0081 (517) 548-0498 EMAIL livhscb@cmhliv.org			Marilyn Hysen 5115 Brady Road Howell, MI 48843 (734) 878-6792 (734) 878-6792 Thysen@provide.net
Mackinac County Human Services Collaborative Body <i>PHONE (and PHONE EXTENSION)</i> <u>FAX</u>	Mackinac	Geraldine Stelmaszek C/O MSU Extension 100 Marley St. Ignace, MI 49781 (906) 643-7308 (906) 643-0353 EMAIL stelmasg@msue.msu.edu			Terri Bush, Chairperson Mackinac County FIA 199 Ferry Lane St. Ignace, MI 49781 (906) 643-6109 (906) 643-7467 busht@michigan.gov

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
----------------------------------	--------------------	----------------------------------	--------------------	----------------------	-------------

Macomb County Human Services Coordinating Body

Macomb

Madeline Nantais, Prevention Coordinator
Macomb County CMH Services
10 North Main, 5th Floor
Mt. Clemens, MI 48043
(586) 466-7903

Donald I. Habkirk, Jr.
Macomb County CMH
10 North Main, 5th Floor
Mt. Clemens, MI 48043

(586) 469-5779

PHONE (and PHONE EXTENSION)

FAX

(586) 469-7958

(586) 469-7674

EMAIL madeline.nantais@mccmh.net

don.habkirk@mccmh.net

Manistee Human Services Collaborating Body

Manistee

Sonia Dygert
DHD #10
385 Third Street
Manistee, MI 49660
(231) 723-3595

Cheryl Gore Follette
Family Court
Manistee, MI 49660

PHONE (and PHONE EXTENSION)

FAX

(231) 723-1477

EMAIL Manisteehscb@hotmail.com

cgfollette@manisteecounty.net

Mecosta County Human Services Coordinating Body

Mecosta

Cindy Bay-Barron
Prevention Planner
Community Mental Health Services for Central Michigan
301 South Crapo, Suite 200
Mt. Pleasant, MI 48858
(989) 773-9224 x 1374

Wayne O'Neil
Mecosta County Commissioners
400 Elm Street, Room 202
Big Rapids, MI 49307

(231) 796-2505

PHONE (and PHONE EXTENSION)

FAX

(989) 779-2371

(231) 592-0121

EMAIL cbaybarron@cmhcm.org

woneil@tucher-usa.com

Menominee County Collaborative Board

Menominee

Bill Reid
The same address, phone, fax, and email is used for Dickinson County.

Mary Bradley
Menominee County F.I.A.
1301 7th Street
Menominee, MI 49858
(906) 863-7832

(906)

PHONE (and PHONE EXTENSION)

FAX

EMAIL

bradcrew@new.rr.com

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
----------------------------------	--------------------	----------------------------------	--------------------	----------------------	-------------

Midland County Human Services Council	Midland	Joel Strasz United Way of Midland County 220 West Main Street, #100 Midland, MI 48640 (989) 631-3670			Karen Langeland, Deputy Director CMH for Central Michigan 220 W. Ellsworth Midland, MI 48640-2647 (989) 837-0705
---------------------------------------	---------	--	--	--	--

PHONE (and PHONE EXTENSION)

FAX

(989) 832-5524

(989) 839-6401

EMAIL jstrasz@unitedwaymidland.org

Klangeland@cmhcm.org

Monroe County Human Services Collaborative Network	Monroe	Doug Redding Monroe ISD 1101 South Raisinville Road Monroe, MI 48161	Sandi Pierce Monroe County Human Services Collaborative Network P.O. Box 726 Monroe, MI 48161 (734) 243-7340		Don Spencer, Superintendent Monroe ISD 1101 South Raisinville Road Monroe, MI 48161
--	--------	---	--	--	--

PHONE (and PHONE EXTENSION)

FAX

(734) 242-5799 x 1912

(734) 242-5799 x 1000

(734) 242-5807

(734) 243-5564

(734) 242-0567

EMAIL redding@misd.k12.mi.us

smargaret@hotmail.com

spencer@misd.k12.mi.us

Montcalm Human Services Coalition	Montcalm	Lisa M. Lund, CSW Montcalm Human Services Coalition 621 New Street P.O. Box 367 Stanton, MI 48888 (989) 831-5261 x 449		Franz Mogdis, Vice Chair P.O. Box 805 Stanton, MI 48888	Denise Hubbard, Chair 1220 N. Lafayette P.O. Box 128 Greenville, MI 48838
-----------------------------------	----------	---	--	---	--

PHONE (and PHONE EXTENSION)

FAX

(989) 831-8727

(989) 831-5261

(616) 225-1082

(989) 831-8727

(616) 225-1315

EMAIL llund@maisd.com

fmogdis@montcalm.cc.mi.us

dhubbard@mconvolunteerconnections.org

Montmorency County Family Coordinating Council	Montmorency				Dennis McClure MSU Extension P.O. Box 789 Atlanta, MI 49709 (989) 785-4117
--	-------------	--	--	--	--

PHONE (and PHONE EXTENSION)

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
----------------------------------	--------------------	-------------------------------	--------------------	----------------------	-------------

(989) 785-4183

mcclure@msue.msu.edu

Perry Lopucki, Director
Muskegon/Oceana Head Start
630 Harvey Street
Muskegon, MI 49440

(231) 767-7272

(231) 767-7275

plopucki@remc4.k12.mi.us

Kay Cummings
MSU Extension
817 South Stewart
Fremont, Mi 49412
(231) 924-0500

(231)

cummings@msue.msu.edu

Charles A. White, Director
Northeast Michigan CMH
400 Johnson Street
Alpena, MI 49707
(989) 356-2161

(989) 354-5898

awhite@northland.lib.mi.us

Ron Boingesser, CEO
OLHSA
P.O. Box 430598
196 Cesar Chavez Blvd
Pontiac, MI 48343

Elizabeth Boyce
VP for Business Development and
Marketing
Easter Seals
22150 W. NineMile Rd.
Southfield, MI 48034

FAX

EMAIL

Muskegon Family
Planning Coordinating
Council

Muskegon

Mary McDonald
C/O Muskegon County
Community Foundation
425 West Western Avenue,
Suite 200
Muskegon, MI 49440
(231) 722-4538

PHONE (and PHONE EXTENSION)

FAX

(231) 722-4616

EMAIL

mmcdonald@cffmc.org

Newaygo County Human
Services Coordinating
Body

Newaygo

PHONE (and PHONE EXTENSION)

FAX

EMAIL

Northeast Human
Services Coordinating
Body

Alpena, Alcona,
Montmorency,
Presque Isle

PHONE (and PHONE EXTENSION)

FAX

EMAIL

Oakland County Human
Services Coordinating
Council

Oakland

Lynda Ferro, MSW
Oakland County HSCC
50 Wayne Street, 4th Floor
Pontiac, MI 48342

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
----------------------------------	--------------------	-------------------------------	--------------------	----------------------	-------------

<i>PHONE (and PHONE EXTENSION)</i>		(248) 874-1614		(248) 209-2605	(248) 386-9600 x 2018
<u>FAX</u>		(248) 456-8809			
	EMAIL	lferro@uwcs.org		ronb@olhsa.org	eboyce@essmichigan.org
Ogemaw County Human Services Council	Ogenaw	Bob White Strong Families/Safe Children Coordinator The same address, phone, fax and email is used for Alcona County.	Peggy Hendrickson Prevention Director The same address, phone, fax, and email is used for Iosco County.		Fred Hinkley, Director Ogemaw County MSU Extension 205 S. Eighth Street West Branch, MI 48661

<i>PHONE (and PHONE EXTENSION)</i>					(989) 345-0692
<u>FAX</u>					(989) 345-1284
	EMAIL				hinkleyf@msue.msu.edu
Osceola Human Services Coordinating Council	Osceola	Cindy Bay-Barron Prevention Planner The same address, phone, fax, and email are used for Mecosta County.		Pam Forbes, Vice Chair Women's Information Service (WISE) P.O. Box 1249\ Big Rapids, MI 49307 (231) 796-6692	Shannon Lindquist MSU Extension 301 W. Upton St., Courthouse Reed City, MI 49677

<i>PHONE (and PHONE EXTENSION)</i>				(231) 796-0358	(231) 832-6149
<u>FAX</u>					
	EMAIL				lindwush@msue.msu.edu
Oscoda County Human Services Coordinating Council	Oscoda	Peggy Hendrickson Prevention Director The same address, phone, fax, and email is used for Iosco County.			Judy Olsen, Juvenile Officer Oscoda County Family Court P. O. Box 399 Mio, MI 48647

<i>PHONE (and PHONE EXTENSION)</i>					(989) 826-1108
<u>FAX</u>					(989) 826-1124
	EMAIL				

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
<p>Otsego Human Services Netork</p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p>	<p>Otsego</p>	<p>Peter Amar Prevention Coordinator The same address/email is used for Cheboygan County.</p>	<p>Linda Barnes. SF/SC Coordinator LNB Consulting Services 2665 W. Cherry Creek Rd. Mio, MI 48647 (989) 826-5489</p> <p>(989) 826-5367</p> <p>lbarnes@i2k.com</p>	<p>Bill Marshall Crossroads Industries, Inc. P. O. Box 553 Gaylord, MI 49734</p> <p>(989) 732-1233</p> <p>(989) 732-6793</p> <p>wmarshall@crossroadsindustries.com</p>	
<p>Ottawa County Human Services Coordinating Council</p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p>	<p>Ottawa</p>	<p>Fred Leaske Ottawa ISD 13565 Port Sheldon Road Holland, MI 49424 (616) 738-8940 x 4069</p> <p>(616) 738-8947</p> <p>kwatjer@oaisd.org</p>	<p>Deanna DePree 11172 Adams Street Holland, MI 49423</p> <p>(616) 396-7566 x 116</p> <p>(616) 396-6893</p> <p>ddepree@lifeservicessystem.org</p>	<p>Vito Palazzolo, Health Officer Ottawa County Health Department 12251 James Street, Suite 400 Holland, MI 49424</p> <p>(616) 393-5643</p> <p>vpalazz@co.ottawa.mi.us</p>	
<p><u>Presque Isle Human Services Coordinating Council</u></p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p>	<p>Presque Isle</p>	<p>Mary Schalk, Coordinator 5067 Klee Road Rogers City, MI 49779</p> <p>(989) 734-2877</p> <p>(989) 734-3397</p> <p>schalkaero@lhi.net</p>		<p>David Glenn, Chair MSU Extension 151 East Huron Avenue P.O. Box 110 Rogers City, MI 49779</p> <p>(989) 734-2168</p> <p>(989) 734-4116</p> <p>glenn@pilot.msu.edu</p>	
<p>Roscommon Multi-Purpose Collaborative Body</p> <p><i>PHONE (and PHONE EXTENSION)</i></p> <p><u>FAX</u></p>	<p>Roscommon</p>	<p>Melissa Sjogren Same address/phone/ email is used for Crawford County.</p>	<p>Mark Berdan, Strong Families/Safe Children Coordinator</p>	<p>Robert Jones, C.O.O.R. Intermediate School District 11051 North Cut Road Roscommon, MI 48653 (989) 275-9520</p> <p>(989) 275-5881</p>	

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
		EMAIL	mberdan@michworks4u.org		
Saginaw County Human Services Coordinating Body	Saginaw	Trischa Zumbach, SCHSCB Coordinator Saginaw Valley Regional 4C 5560 Gratiot, Suite B Saginaw, MI 48603			Commissioner Connie Smith Saginaw Co. Board of Commissioners 111 S. Michigan Ave. Saginaw, MI 48602
					PHONE (and PHONE EXTENSION)
					FAX
					EMAIL
		(989) 497-0680			(989) 790-3561
		(989) 497-0685			(989) 790-5569
		EMAIL tzumbach@svr4C.org			EMAIL csmith@chartermi.net csmith@saginawcounty.com
Sanilac County Human Services Coordinating Body	Sanilac	Sharon Brittich Sanilac County HSCB 171 Dawson Sandusky, MI 48471 (810) 648-0112 x 3			Marvin Pichla Michigan Works 3270 Wilson Street Marlette, MI 48453 (989) 635-3561
					PHONE (and PHONE EXTENSION)
					FAX
					EMAIL
		(810) 648-3699			(989) 635-2230
		EMAIL packman@greatlakes.net			pichlam@thumbworks.org
Schoolcraft County Family Coordinating Council	Schoolcraft	Bonnie Groh Hiawatha Behavioral Health 125 North Lake Street Manistique, MI 49854			Joan Ecclesine Early Head Start Services Coordinator 426 Chippewa Avenue Manistique, MI 49854 (906) 341-6423
					PHONE (and PHONE EXTENSION)
					FAX
					EMAIL
		(906) 341-2144			(906) 341-5862
		(906) 341-5793			manistiqueecc@chartermi.net
		EMAIL bgroh@chartermi.net			
Shiawassee County Health and Human Services Council	Shiawassee	Gregory Love Shiawassee County CMH 1975 West M-21 P. O. Box 428 Owosso, MI 48867			Don Trapp, Asst. Superintendent for Special Education Shiawassee RESD 1025 N Shiawassee Corunna, MI 48817

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
		(989) 723-6791, x 713			(989) 743-3471 x 208
<i>PHONE (and PHONE EXTENSION)</i> <u>FAX</u>		(989) 723-0763			
	EMAIL	glove@Shiacmh.org			trap@sresd.k12.mi.us
St. Clair County Community Services Coordinating Body	St. Clair	Amy Smith Community Planning Office St. Clair County CMH 1011 Military Street Port Huron, MI 48060-5416 (810) 985-8900			Michael McCartan St. Clair County CMH 1011 Military Street Port Huron, MI 48060 (810) 985-8900
<i>PHONE (and PHONE EXTENSION)</i> <u>FAX</u>		(810) 985-7620			(810) 985-7620
	EMAIL	asmith@scccmh.org			mmccartan@scccmh.org
St. Joseph County Human Services Commission	St. Joseph	Elizabeth O'Dell St. Joseph County HSC 629 East Main Centreville, MI 49032 (269) 467-1298			Dr. Jay Newman St. Joseph County ISD Shimmel Rd Centreville, MI 49032 (269) 467-5400
<i>PHONE (and PHONE EXTENSION)</i> <u>FAX</u>		(269) 467-4012			
	EMAIL	eodell@net-link.net			jayn@stjcid.org
Tahquamenon Area Human Service Collaborative Body	Luce	Penny Dounn Director of Nursing Helen Newberry Joy Hospital 502 W. Harrie Newberry, MI 49868 (906) 293-9200		Rose Ann Welty Strong Families/Safe Children 200 Hamilton P.O. Box 73 Newberry, MI 49868 (906) 293-8145 (906) 293-8199	Penny Dounn Director of Nursing Helen Newberry Joy Hospital 502 W. Harrie Newberry, MI 49868 (906) 293-9200
<i>PHONE (and PHONE EXTENSION)</i> <u>FAX</u>		(906) 293-9200			
	EMAIL	pmccocon@hnjh.org		roseann@up.net	pmccocon@hnjh.org

Childrens Trust Fund

Direct Service Grant Recipients

Fiscal Year 2003 Continuing Programs

Boys & Girls Club of Greater Holland

Address: 435 Van Raalte Ave.
Holland, MI 49423

County: Ottawa
Phone: (616) 392-4102

Contact Person: Brian Manderfield

Project: Services will be expanded to serve more youth and families in the areas of Character and Leadership Development, Education, Health and Life Skills, The Arts, and Sports Fitness and Recreation.

CHIP Counseling Center

Address: 6777 U.S. 31 South
Charlevoix, MI 49720

County: Emmet
Phone: (231) 347-3928

Contact Person: Susan Pulaski

Project: Expand the "CLUB PRIDE" collaborative project to educate youth and adults about abuse and neglect.

District Health Department #10

Address: 14485 Northland Drive
Big Rapids, MI 49307

County: Mecosta
Phone: (616) 689-5021

Contact Person: Brenda Kailing

Project: Offers home support to families with children from birth to age five focusing on positive parenting and development.

Clinton Co. Family Resource Center

Address: 101 West Cass St., Ste. D
"Wilson Center"
St. Johns, MI 48879

County: Clinton
Phone: (517) 224-1173

Contact Person: Howard M. Comstock

Project: The MELD for Young Dads program provides long-term parent education and support to young men separated from their child's mother.

Family & Children's Services of Midland

Address: 1714 Eastman Ave
P.O. Box 2877
Midland, MI 48641-2877

County: Midland
Phone: (989) 631-5390

Contact Person: Terri Budek

Project: The Prepared Parents program is a collaborative, center-based program designed to identify individuals early in their pregnancies and connect them with Family Support Specialists. Home visitation, parent education classes, mentoring, and counseling services will be provided.

Capstone Center, The

Address: 185 E. Main, #802B
Benton Harbor, MI 49022

County: Berrien
Phone: (616) 926-1979

Contact Person: Pamela Wertanen

Project: The Family Support Program will be expanded to serve families with four or more risk factors through home visits, information/referral, and life skill activities. The program is based on the Healthy Families America Model.

Community Respite Center

Address: P.O. Box 507
Jackson, MI 49204-0507

County: Jackson
Phone: (517) 788-7533

Contact Person: Douglas Cunningham

Project: Funds will support weekend respite care for families with children with special needs. The respite care will be housed at Joey's Junction, a 24-hour center based respite program that incorporates childcare, latchkey services and intensive training programs for staff.

The Farm: Where Living Things Grow

Address: 1130 S. 42nd Ave.
Shelby, MI 49455

County: Oceana
Phone: (231) 861-2817

Contact Person: Donna LeMar

Project: The Farm provides wellness and asset building services using the modalities of plants and animals as well as more traditional modalities to strengthen family relationships. Services will be expanded to the community in the areas of ecology/conservation, outdoor family recreation, counseling, after school programs, and individual/family/community gardening.

Center for Women in Transition

Address: 304 Garden Avenue
Holland, MI 49424

County: Ottawa
Phone: (616) 355-9752

Contact Person: Teresa Schraudt

Project: The "People, Problems, and Protection" program provides self-protection and safety skills to children in homeless and battered women's shelters.

Cristo Rey Community Center

Address: 1717 North High Street
Lansing, MI 48906

County: Ingham
Phone: (517) 372-4700

Contact Person: Pat McKinley

Project: Expansion of the "Family Circle" program and creation of "Roots and Wings", a program that offers classes to improve parents' attitudes and behaviors.

Gratiot Co. Community Mental Health Services

Address: P.O. Box 69
Alma, MI 48801

County: Gratiot
Phone: (989) 466-4164

Contact Person: Jason Jent

Project: The Respite Care Program will be expanded to hire additional Family Support Workers, provide transportation services, and provide activities during respite care visits. Services are targeted at families with children with severe emotional disturbances.

Child Abuse Prevention Services

Address: 119 Pere Marquette, Suite 3A
Lansing, MI 48912

County: Ingham
Phone: (517) 484-8444

Contact Person: Jean Brisbo

Project: Current parent education and support group classes will be expanded using the Nurturing Program that includes both parent and child classes. Classes will be target to any families with children birth through age eleven and will offer childcare and transportation.

Delta-Schoolcraft Intermediate School District

Address: 2525 Third Avenue South
Escanaba, MI 49829

County: Delta
Phone: (906) 786-9300

Contact Person: Sally Harris Smith

Project: The Teen Parent Program develops family plans with pregnant and parenting teens in grades 9-12.

Childrens Trust Fund

Direct Service Grant Recipients

Fiscal Year 2003 Continuing Programs

HelpSource

Address: 3879 Packard Rd.
Ann Arbor, MI 48108
County: Washtenaw
Phone: (734) 973-1900
Contact Person: Krista Girty
Project: The Pregnancy & Parenting Resources & Referral program will be enhanced and expanded by adding a mentoring component modeled after the Doula program. The program will target adolescent parents with children under three years of age. Home visiting and group support services will be provided.

Ionia County Literacy Council

Address: P.O. Box 288
Ionia, MI 48846
County: Ionia
Phone: (616) 527-1360
Contact Person: Mary Ann Hagemeyer
Project: "Fathers Who Care, READ" is a program designed to teach parenting skills to incarcerated men in three of the county's five state penitentiaries.

The Kalamazoo Child Guidance Clinic

Address: 2615 Stadium Drive
Kalamazoo, MI 49008
County: Kalamazoo
Phone: (616) 343-1651
Contact Person: Aileen C. McKenna
Project: A collaborative program targeted at biological fathers with minimal involvement in their child's lives and non-biological fathers living in a home with children.

Michigan Public Health Institute

Address: 2436 Woodlake Circle
Suite 300
Okemos, MI 48864
County: Ingham
Phone: (517) 324-8330
Contact Person: Theresa Covington
Project: Develops/implements a young fathers support group in Ingham County.

Women's Information Services (WISE)

Address: 1141 North McEwan
Clare, MI 48617
County: Osceola
Phone: (989) 386-3805
Contact Person: Meredith A. Robbins
Project: Increase the ability of community members to access information and referrals within the county through a toll-free help line.

Community Mental Health For Central MI

Address: 655 East Cedar Ave.
Gladwin, MI 48624
County: Gladwin
Phone: (989) 426-9295
Contact: Dan Reed
Project: Parenting education classes will be enhanced by adding additional curriculum, transportation, and certification services. Classes will be held twice a week and are open to parents of infants and toddlers, children in elementary school, and teenagers.

Monroe Intermediate School District

Address: 1101 S. Raisinville Rd
Monroe, MI 48161
County: Monroe
Phone: (734) 242-5799 Ext. 1912
Contact Person: Douglas Redding
Project: Expands the "Great Expectation" program by an additional 30 teen parents and adds pre-natal home visiting and educational services.

Neighborhood Service Org.

Address: 220 Bagley, Suite 1200
Detroit, MI 48226
County: Wayne
Phone: (313) 961-4890
Contact Person: Sheilah Clay
Project: Offers parenting education to individuals who have been identified as having a substance abuse disorder.

Poverty & Social Reform Institute

Address: 8200 W. Outer Drive, Box 124
Detroit, MI 48219
County: Wayne
Phone: (313) 541-1710
Contact Person: Denise Dorsz
Project: The Leaps and Bounds Child/Parent Center will be enhanced by developing parent-child activity packs, expanding parent education programs to additional families, increasing the frequency of home visits, and developing six in-home education/study modules for parents unable to attend monthly parent education seminars.

Relief After Violent Encounter, Inc.

Address: 323 ½ N. Clinton
St. Johns, MI 48879
County: Clinton
Phone: (989) 224-4662
Contact Person: Beth Morrison
Project: The Parent Child Well Program offers home visits and MELD for Growing Families group meetings targeting families with children older than three years of age. Services will be expanded into Clinton County from Shiawassee County.

Saginaw Valley Regional 4C

Address: 5560 Gratiot, Suite B
Saginaw, MI 48603
County: Saginaw
Phone: (517) 497-0680
Contact Person: Annette Siegel
Project: "Time Out" provides respite care to struggling families to reduce stress and support positive changes for their families.

Southwest Counseling & Development Services

Address: 1700 Waterman Street
Detroit, MI 48209-2095
County: Wayne
Phone: (313) 841-8905 Ext. 409
Contact Person: Graciela Villalobos
Project: Expands "Learning and Experiencing Effective Parenting", a program to provide skills training and support to parents and caregivers.

St. Joseph Mercy Oakland

Address: 44405 Woodward Ave
MB: H-19
Pontiac, MI 48341
County: Oakland
Phone: (248) 335-5638
Contact Person: Kathleen Strader
Project: Facilitates the MELD for Young Moms and Young Dads program targeted at teen parents.
Grant Amount: \$45,000.00
Project: The Healthy Start program will be expanded to hire an additional bilingual family support worker to target Hispanic families. Home visits, information/referral, and developmental assessment will be provided.

Childrens Trust Fund

Direct Service Grant Recipients

Fiscal Year 2003 Continuing Programs

Women and Children's Center

Address: 580 West College Ave.
Marquette, MI 49855

County: Marquette

Phone: (906) 225-3800

Contact Person: Candice Weber

Project: Teaches basic parenting skills to at-risk families in the hospital setting and provides additional support upon leaving the hospital.

Women's Resource Center

Address: 2980 Dorr Road
Brighton, MI 48116

County: Livingston

Phone: (810) 227-9960

Contact Person: Pam Carter

Project: Addition of an annual, 12-week Bavolek Nurturing Parenting Program designed to intervene before a parent has established negative and harmful parenting patterns.

Project: The Healthy Families Program will be enhanced by offering family support groups throughout the county and updating the parent-child curriculum to include "Growing Great Kids" and "Parents as Teachers Working with Teen Parents" program.

Young Adults Health Care Center

Address: 47 North Huron
Ypsilanti, MI 48197

County: Washtenaw

Phone: (734) 484-3600 Ext. 240

Contact Person: Eleanor Eley Anasar

Project: Creates and distributes a third booklet in the "You and Your Baby" series, makes the booklets more culturally sensitive to the Latino community, and translates the booklets into Spanish.

YWCA of Western Wayne County

Address: 26279 Michigan Avenue
Inkster, MI 48141

County: Out-Wayne

Phone: (313) 561-4110 Ext. 13

Contact Person: Corinne Vincent

Project: Expands the current "Baby Smart" program designed to increase safety of children prenatal to age four.

**Children's Trust Fund
New Direct Service Grants
2002 - 2003**

Berrien County Health Department

Address: 769 Pipestone Rd.
P.O. Box 706
Benton Harbor, MI 49022

County: Berrien

Contact: Carol Klukas (616) 927-5650

Project: Berrien County Health Dept proposes to expand the Nurse-Family Partnership in Berrien County. The program serves at-risk, first time, low-income mothers and their children that are not an active FIA Protective Services case. Nurses provide support for the development of health, as well as parenting and social skills.

Child & Family Services of Northeast MI, Inc.

Address: 1044 US 23 North, P.O. Box 516
Alpena, MI 49707

County: Alcona, Alpena, Montmorency,
Oscoda, and Presque Isle

Contact: Jessica Glomski (989) 354-8089

Project: HAPPY is an early childhood prevention program designed to support children under the age of five who are experiencing behavioral and emotional challenges that put them at risk for expulsion from their child care setting.

Child & Family Services UP, Inc.

Address: 1100 S. Front Street
Marquette, MI 48955

County: Marquette

Contact: Norma Semashko (906) 226-7946

Project: The Better Future mentoring program will expand to offer the Strengthening Families Program for Marquette youth who are experiencing neglect due to parental use of alcohol, tobacco, and other drugs, or are choosing to "look the other way" when they suspect their children are using.

DeVos Children's Hospital Foundation

Address: 100 Michigan St. NE-MC178
Grand Rapids, MI 49503

County: Ottawa

Contact: Lisa Blystra (616) 399-5184

Project: Funds will support increased accessibility of car seats and education. This program will intentionally serve clients in outlying clinics and hospitals, low-income day care centers and migrant communities.

District Health Department #10

Address: 14485 Northland Drive
Big Rapids, MI 49307

County: Mecosta

Contact: Brenda Kailing (231) 592-9476

Project: Growing Healthy Families will target all pregnant women in Mecosta County not involved with an open FIA CPS case. Families are provided with two home visits where they will receive screening, assessment of basic needs and risk for child maltreatment, referral and coordination of community resources, and information to promote a healthy pregnancy and effective parenting once a child is born.

Eaton Intermediate School District

Address: 1790 E. Packard Highway
Charlotte, MI 48813

County: Ingham

Contact: Charlotte Koger, (517) 484-2929

Project: The Family Peace Backpack Project provides backpacks containing a video, book, popcorn, and written materials into the homes of elementary school children for family time and activities. This material is directed at the family interactions of parent to child and sib to sib.

0-3 Secondary Prevention Grants FY 2003

Allegan County Intermediate School District

County Served: Allegan

Contact: Carl Ill (616) 673-6954

Grant Amount: \$155,018

The 0-3 Prevention project will provide early identification and referrals, home visits, parenting education classes, and bilingual parenting services. The Parents as Teacher curriculum is utilized to strengthen parent's ability to understand their child's development and prepare them for school.

AuSable Valley Community Mental Health

County Served: Iosco

Contact: Peggy Hendrickson (989) 362-8636

Grant Amount: \$93,539

The Infant Mental Health and Early Head Start programs will be enhanced to provide more intensive services for at risk families. Services provided include home visiting (emphasizing teen parents), playgroups, and case management.

Barry-Eaton District Health Department

County Served: Barry & Eaton

Contact: Suzanne Thuma (517) 541-2603

Grant Amount: \$150,000

Healthy Families Barry Eaton is a home visiting program that provides screening, assessment, parenting education, information/referral, and linkages with community services. Several curricula are utilized depending on the needs of the family.

Berrien County Health Department

County Served: Berrien

Contact: John Nelson (616) 927-5603

Grant Amount: \$180,000

The Prenatal and Early Childhood Nurse Home Visitation program will provide parenting education and assessment through home visiting services to low-income, first-time mothers and their families.

BHK Child Development Board

County Served: Houghton-Keweenaw-Ontonagon

Contact: Rod Liimatainen (906) 482-3663

Grant Amount: \$164,746

Services include: In-home Infant Mental Health services, increased access to Public Health Infant Support Services, extension of home visitor services to Ontonagon County, respite care, emergency and sick-child care, and coordination of services by a newly consolidated 0-3 advisory council.

BHK Child Development Board

County Served: Baraga

Contact: Rod Liimatainen (906) 482-3663

Grant Amount: \$71,719

The goals of the Zero to Three Project are to foster positive parenting skills and improve parent/child interaction, reduce family stress, strengthen the support system for families of children with special needs, and promote access to support services. Services provided include parenting education, play groups, Super Saturday programs, respite care, and linkages to health and other community services.

Branch-Hillsdale-St. Joseph Community Health Agency

County Served: Hillsdale

Contact: Doug McComas (517) 279-9561

Grant Amount: \$100,000

The Healthy Beginnings program is based on the Healthy Families model and promotes positive parent/child interaction, assesses families, and promotes health childhood growth and development. Services provided include screening, assessment, home visits, team planning, and referral to community services.

Cadillac Area OASIS (Family Resource Center)

County Served: Wexford & Missaukee

Contact: Rhonda Weathers (231) 775-7299

Grant Amount: \$44,400

The Family Links Program provides home visiting services to families experiencing family, marital or partner conflict. Services include support services, parenting education, assisting the family in meeting medical, housing and childcare needs and helping to decrease family conflict and improve parent/child interaction.

Calhoun Intermediate School District

County Served: Calhoun

Contact: Ruth Kavalhuna (616) 964-9426

Grant Amount: \$125,000

The Early On program will be enhanced by providing home visiting services to at-risk families currently enrolled. Information/referral, service coordination, and parenting education will also be provided.

Catholic Social Services

County Served: Muskegon

Contact: Pam Cohn (231)726-4735

Grant Amount: \$199,993

The Healthy Families program is designed to promote healthy child and family development by reducing risk factors, promoting healthy habits, strengthening parent/child bonds, and empowering the family. Services include home visiting, parenting support and education, case management, support groups, and assistance in accessing community resources.

Clinton County Family Resource Center

County Served: Clinton

Contact: Howard Comstock (989) 224-1173

Grant Amount: \$145,095

The Healthy Start program will provide universal screening of all births in Clinton County, service coordination and referrals, home visiting services focusing on child development and parent-child interactions, and long-term parenting education and support. The MELD model will also be utilized.

Dickinson/Iron District Health Department

Counties Served: Dickinson & Iron

Contact: Joyce Ziegler (906) 265-4156

Grant Amount: \$96,360

The I.M.P.E.T.U.S. project provides home visiting services focused on improving outcomes for the family. Services include parenting education, Welcome Newborn Resource Guide, parenting newsletters, and information/referral.

District Health Department #2

County Served: Alcona, Iosco, Oscoda, & Ogemaw

Contact: Laura Chapman (989) 343-0703

Grant Amount: \$200,000

The Family Matters program will provide in-home services to at-risk families in the four-county area who are not eligible for other support services. Services will also include: parenting classes, monthly newsletters, and information and referral.

District Health Department #4

County Served: Alpena

Contact: Rosanne Schultz (989) 354-4230

FY 2001 Grant Amount: \$151,242

The Day One program will be expanded by hiring two additional family support workers to serve all families identified as being at risk for child abuse and neglect. The program is modeled after the Healthy Families program and provides home visiting services, a parent support group, and information and referral.

0-3 Secondary Prevention Grants FY 2003

District Health Department #4

County Served: Montmorency

Contact: Rosanne Schultz (989) 354-4230

Grant Amount: \$86,401

The Day One program will provide enhanced parenting education and support through home visiting services. The Healthy Start model is being used with the Building Strong Families curriculum and will focus on child development, discipline techniques, and positive parent-child interaction.

District Health Department #10

County Served: Lake, Mason, & Oceana

Contact: Marcia Walter (231) 689-7321

Grant Amount: \$200,000

The Parents as Teachers model will be used to provide parent education support, information/referral, male parent involvement advocacy services, and in-home nurse visitation. Priority will be given to parenting teens or pregnant families.

Family and Children Services

County Served: Calhoun

Contact: Ella Ryder (616) 965-3247

Grant Amount: \$169,461

Healthy Families Calhoun provides home visiting services to families with children between the ages of 0-3 years who have been identified to have risk factors for child abuse and neglect. Services provided include assessment, parenting education, linkages to health care services, and case management.

Genesee Coalition on Adolescent Pregnancy Parenting and Prevention

County Served: Genesee

Contact: Dorothy LaVictoire (810) 235-1491

Grant Amount: \$100,000

The Parents in Process Project is targeted to teen parents 12-19 years with children aged 0-3. The project will provide support and services to increase appropriate developmental milestones for children, access to and utilization of health care services, and positive parenting skills.

Huron County Health Department

County Served: Huron

Contact: Becky McCabe (989) 269-3490

Grant Amount: \$55,486

Various services will be provided with the 0-3 grant including a 0-3 Family Mentor, playgroups, expansion of the Maternal Support Services/Infant Support Services using the Building Strong Families model, and a Parenting the Second and Third Year Newsletters.

Ingham County Health Department

County Served: Ingham

Contact: Stacey Meyer (517) 371-2998

Grant Amount: \$164,000

The Jump Start Family Outreach Program provides voluntary, intensive, long-term support and education to families through home visiting services using the Healthy Families America model.

Ionia County Intermediate School District

County Served: Ionia

Contact: Cheryl Granzo (616) 527-4900, ext. 1410

Grant Amount: \$183,000

The Begin with Babies project targets families that are low income and have three or more identified risk factors. The Parents As Teachers curriculum is used to assist families to increase their parenting knowledge and skills. Playgroups and home visiting services are also provided.

Kalamazoo Child Guidance

County Served: Kalamazoo

Contact: Aileen McKenna (616) 343-1651

Grant Amount: \$185,000

The Parents as Partners/Healthy Families program provides a variety of services including regularly scheduled home visits, parent support groups, and a monthly newsletter. The program uses a variety of curriculums to work with families on developing basic parenting skills and an understanding of child development.

Mid-Michigan Community Action Agency

Counties Served: Clare & Mecosta

Contact: Jill Edwards-Sutton (517) 386-3805

Grant Amount: \$112,845

Home-based Infant Mental Health services are provided to families with children 0-3 years old. Individual and family therapy is given as well as developmental assessments and guidance, resource identification and acquisition, emotional support, bonding and attachment guidance, crisis planning, advocacy, and parenting education mentoring.

Monroe County Intermediate School District

County Served: Monroe

Contact: Douglas Redding (734) 242-5799, ext. 1912

Grant Amount: \$32,282

The Healthy Start program will be expanded to serve at-risk pregnant teens and teen parents in Monroe County. Program enhancements will also allow for prenatal services and pre and postnatal classes to be provided.

MSU Extension – Bay County

County Served: Bay

Contact: Howard Wetters (989) 895-4026

Grant Amount: \$144,617

Expanded home visiting services, hospital screenings, a central intake and referral system that includes a 1-800 number, and educational and developmental mailings for enrolled families, will be provided for at-risk families in Bay County.

MSU Extension – Eaton County

County Served: Eaton

Contact: Mona Ellard (517) 372-5594

Grant Amount: \$21,504

A parenting instructor will be added to provide in-home services based on the Building Strong Families program. A monthly parent support group will also be provided for parents.

MSU Extension – Grand Traverse County

County Served: Grand Traverse

Contact: Jennifer Berkey (231) 922-4620

Grant Amount: \$179,019

The Healthy Futures program will be expanded by hiring one public health nurse to provide service coordination and home visits to at-risk families. Training on the Parents as Teachers Curriculum will also be available to county service providers.

MSU Extension – Sanilac County

County Served: Sanilac

Contact: Gail Innis (810) 648-2515

Grant Amount: \$100,000

Healthy Families Sanilac is modeled after the Healthy Start program and provides home visiting services to new parents. Through the program families learn about child development, nutrition and infant feeding, appropriate guidance and discipline, infant and toddler health care, and life skills.

0-3 Secondary Prevention Grants FY 2003

Newaygo Public Schools

County Served: Newaygo

Contact: Terri Dodson-Garrett (231) 652-3629

Grant Amount: \$200,000

The Parents as Teachers curriculum will be integrated with direct services in the county by training 16 current staff. Home visits, a packet of health information, parenting groups, and parenting education opportunities will also be provided to at-risk families.

Northwest Michigan Community Health Agency

Counties Served: Charlevoix & Emmet

Contact: Patricia Fralick (231) 347-6014

Grant Amount: \$114,018

The Teen Parent Program serves pregnant or parenting teens with parenting education, information and referral, home visits, and access to substance abuse services and medical care.

Oakland Family Services

County Served: Oakland

Contact: Barbara Hoffman (248) 858-7766

Grant Amount: \$150,000

The Fussy Baby Program is targeted at families with infants and toddlers from birth to three years who are evidencing regulatory or behavioral difficulties that place them at high risk for abuse and neglect. The program offers assessment, service planning, coordination, and intervention in a strength-based, family friendly prevention service model.

Saginaw County Child Abuse and Neglect Council

County Served: Saginaw

Contact: Suzanne Greenberg (517) 752-7226

Grant Amount: \$250,000

The Birth Through Three Educational Program is based on the Healthy Families America model and utilizes the Parents as teacher, Building Strong Families, and SKI*HI Parent/Infant curriculums. The programs provides comprehensive assessment, weekly home visiting, and parent support services.

Salvation Army

County Served: Wayne

Contact: Maureen Northrup (313) 537-2130

Grant Amount: \$90,000

The Next Step program targets pregnant and parenting teenage mothers with 0-3 year old children. The grant will expand the program to serve more families and will also provide intensive services in the areas of home visits, case management, and group services.

Shiawassee County Health Department

County Served: Shiawassee

Contact: Rose Mary Asman (989) 743-2355

Grant Amount: \$169,368

The Healthy Families program will be expanded to provide home visiting services to at-risk families in Shiawassee County. Case management and linkages to other needed services will be provided by a multi-disciplinary team.

Spaulding for Children

County Served: Wayne

Contact: Ann Funchess (248) 443-0300

Grant Amount: \$200,000

The Parenting Consortium program targets low income families who live in Detroit, Highland Park, and Hamtramck who are pregnant or have at least one child between birth and age three. Services include parenting education, child assessment, health and economic support services, and linkages with community resources.

St. Joseph Mercy Hospital

County Served: Oakland

Contact: Kathleen Strader (248) 335-5638

Grant Amount: \$200,000

Healthy Start/Healthy Families Oakland works with St. Joseph Mercy Hospital and Providence Hospital to screen all newborn families. At risk families will receive home visiting services to promote health child growth and development, improved parent-child relationships, and enhanced family functioning.

Starfish Family Services

County Served: Wayne

Contact: Janet Trost - (734) 727-3159

Grant Amount: \$200,000

The After Baby Comes project serves families in the City of Detroit, western Wayne County, and the Downriver areas. Based on the Healthy Start Model, the project provides initial assessment, parent support, home visiting, supportive phone calls, infant massage, and educational and play group opportunities.

SW Michigan Exchange Club – Capstone Center

County Served: Berrien

Contact: Pamela Wertanen (616) 926-1979

Grant Amount: \$131,679

The Zero to Three program is based on the Healthy Families America model and provides Berrien County with a coordinated secondary prevention service effort that identifies families at-risk during the prenatal and newborn stage and provides appropriate early intervention services in a cohesive manner.

Tuscola County Health Department

County Served: Tuscola

Contact: Gretchen Tenbusch (989) 673-8114, ext. 115

Grant Amount: \$164,423

Home visiting services will be expanded and support groups will be created for at-risk families in Tuscola County. Services will be coordinated through a central intake, assessment, and database tracking of families.

Women's Resource Center

County Served: Livingston

Contact: Pam Carter (517) 548-2200

Grant Amount: \$74,060

The Healthy Families Livingston program serves at-risk families with home visiting services. By nurturing the parent or other caregiver, the Family Support Workers model appropriate behavior, encourages goal setting and health maintenance, teaches problem solving skills, and assists the family with health parent-child interaction and child development.

CHILDREN'S TRUST FUND LOCAL COUNCIL CONTACT LIST

ALLEGAN - Allegan Co. Prevention of
CAN Council
231 Trowbridge Street, Suite 15A
Allegan, MI 49010
Cathy Weirick (269) 673-3791
FAX: (269) 686-9481
I:allegancan@yahoo.com

ALPENA/PRESQUE ISLE - Alpena
CAN
Team Inc.
P.O. Box 516
Alpena, MI 49707
Robin Hart (989) 356-3474 ext 241
FAX: (517)354-7693
I:hartr@nemesa.org

ANTRIM - Antrim Co. CAN Council
P.O. Box 123
Bellaire, MI 49615
Tammy Hickman (231) 587-4365
FAX: (231) 587-5313
I:tammyhickman53@hotmail.com

ARENAC - Bay Women's Center
P.O. Box 1458
3411 E. Midland Road
Bay City, MI 48706
Barbara Rajewski (800) 686-2251
FAX: (989) 686-0906
I:brajewski@hotmail.com

womencen@concentric.net

**BARAGA/HOUGHTON/KEWEENA
W**
Children's Trust - Superior Council
c/o Copper Co. Mental Health Services
Institute
P.O. Box 832
900 W. Sharon Ave.
Houghton, MI 49931
Taryn Mack (906) 482-4880
FAX: (906) 482-7657

BARRY - Child Abuse Council
P.O. Box 304
430 Barfield
Hastings, MI 49058
Karen Jousma (269) 948-3264
FAX: (269) 948-4101
I:jousma@iserv.net
www.barrycounty.org

BAY - Council for CAN
715 N. Euclid
Bay City, MI 48706
Amy Muempfer (989) 671-1355
FAX: (989) 671-2365
I:Atmuempfer@earthlink.net

BENZIE - Benzie Co. CAP Council
C/O MSU Extension
P.O. Box 349
Beulah, MI 49617
Christine Gehring (231) 882-0025
FAX: (231) 882-9605
I:Gehringc@msue.msu.edu

BERRIEN - Council for Children
4938 Niles Rd.
St. Joseph, MI 49085
Ellen Russell (269) 556-9640
I:children@parrett.net

BRANCH - Branch Co. Council for C.A.N.
63 W. Washington St.
P.O. Box 17
Coldwater, MI 49036
Barbara Yesh (517) 278-5683
FAX: (517) 278-5683
I:bbcc@cbpu.com

CALHOUN - Calhoun C.A.N. Council
P.O. Box 1216
Battle Creek, MI 49016
Mary Carol Ambrose (269) 962-2562
FAX: (269) 962-2261
I:Bam1655@aol.com

CASS - Cass Co. Youth Council
c/o Friend of the Court
P.O. Box 38
Cassopolis, MI 49031
Kristin Schott (269) 445-4446
FAX: (269) 445-4435
I:schottk@earthlink.net

CHARLEVOIX/EMMET - Child Abuse
Council -Charlevoix/Emmet
Box 414, Petoskey, MI 49770
161 Anderson Rd, Boyne City 49712
Beth Anzell (231) 9224821 Phone/Fax
I:anzell@gtlakes.com
CHEBOYGAN - Child Advocacy Council -
595 O'Brien Dr.
Cheboygan, MI 49721
Debra Turnbull (231) 627-6015 (home)
(231) 597-9421 (work afternoons)

CHIPPEWA - Child Protection Council
P.O. Box 636
620 E. Portage
Sault Ste. Marie, MI 49783
Renee Johnson (906) 635-0566
FAX: (906) 635-2952
I:Eupdyp4@30below.com

CLARE - Clare Co. Youth Council
166 E. Main P.O. Box 990
Harrison, MI 48625
JoAnne Cussans
(989) 539-8894
FAX: (989) 773-5339
I:cussansj@msu.edu
CLINTON - Clinton Co. Council for the

Prevention of Child Abuse and Neglect
1000 E. Sturgis, Suite 3
St. Johns, MI 48879
Ruth Rockwell - I:rockwell@ceicmh.org
(989) 224-5303 FAX: (989) 224-2342

CRAWFORD/ROSCOMMON -
Child Protection Council
P.O. Box 2
Roscommon, MI 48653
Marey Jurkovich (989) 348-3169
FAX: 989-348-1719
I:crpc@yahoo.com

DELTA - Delta Co. Alliance Against
Violence & Abuse
115 South 13th St.
Escanaba, MI 49829
Sandra St. Ours (906) 789-9207
FAX: (906) 789-5640

EATON - Eaton Co. CAN Prevention Council
325 S. Clinton, Lower Level N.E.
P.O. Box 301
Grand Ledge, MI 48837
Cheryl Krapf-Haddock (517) 622-4543 (Phone &
Fax) or (517) 881-9752
I:Cherylhaddock@yahoo.com

GENESEE - Consortium on CAN
726 Church St.
Flint, MI 48502
Mary Vojdik (810) 234-3680
FAX: 810-234-2265
I:ccan@peoplepc.com
www.ccan-flint.org

GLADWIN - Gladwin Co. CAN Council
c/o Strong Families/Safe Children
P.O. Box 426
103 Bowery Ave.
Beaverton, MI 48612
Alison Fegan (989) 426-9431
FAX: (989) 426-6952
I:afegan@cmdhdh.localhealth.net

GOGEBIC - Dove Inc., - Gogebic Co. Child
Protection Council
P.O. Box 366
Ironwood, MI 49938
Cara Matrella (906) 932-1420
FAX: (906) 932-9762
matrelle@msue.msu.edu

**GRAND
TRAVERSE/KALKASKA/LEELANAU** -
Tri-Co. Coalition for the Prevention of Child
Abuse & Neglect
520 West Front Street
Grand Traverse, MI 49684
Jennifer Berkey (231) 922-4821
FAX: (231) 922-4633 I:berkeyj@msue.msu.edu

GRATIOT - Gratiot Co. Child Protection
Council

150 W. Center St.
Alma, MI 48801-2266
(989) 463-1422 FAX: (989) 466-2140

HILLSDALE - Child Abuse Prevention
& Awareness - Hillsdale
P.O. Box 236
20 Care Dr.
Hillsdale, MI 49242
Jerie Artz (517) 437-3100
FAX: (517) 437-3163
I:CAPA@QCNET.net
www.capahillsdale.org

HURON - Huron Co. CAN Council
P.O. Box 492
Elkton, MI 48731
Elizabeth Weisenbach (989) 269-9255
FAX: (775) 248-8148
I:weisenbe@co.huron.mi.us

INGHAM - Ingham Co. CTF Council
119 Pere Marquette, Ste. 3A
Lansing, MI 48912
Gail Kleine (517) 484-8444 ext 15
FAX (517) 484-8446
g.kleine@capslansing.org

IONIA - Ionia CO. Council for Prev. of
CAN
P.O. Box 358
Ionia, MI 48846
Kristin Yalacki (616) 527-5332 (Phone)
FAX: (616) 527-5353
I:Kyalacki@ioniacounty.org

IOSCO - Iosco Co. Child Protection
Council
P.O. Box 642
6122 F-41
Oscoda, MI 48750
Carol Schmidt (989) 739-4149
FAX: (517) 739-9901
I:cschmidt@triton.net

IRON/DICKINSON - Iron-Dickinson
Children's Advocacy Network
601 Washington Ave.
Iron River, MI 49935
Vicki West (906) 265-4185
FAX: (906) 265-2950
I:vwest@hline.org

ISABELLA
Child & Family Enrichment Council
P.O. Box 3046
Mt. Pleasant, MI 48858
Dee Obrecht (989) 773-6444
FAX: (989) 772-9663
I:Cafedee@hotmail.com

JACKSON - Council for the Prevention
of CAN

606 Greenwood Place
Jackson, MI 49203
Betty Wright (517) 788-4239
FAX: (517) 788-4685
I:bwright@dmci.net

KALAMAZOO - Kalamazoo Co. CAN
Council
P.O. Box 275, 3299 Gull Road
Nazareth, MI 49074-0275
Jan Middlemas (269) 552-4430
FAX: (269) 552-4855
I:jankcan@yahoo.com
www.kcan.org

KENT -Child and Family Resource Council
118 Commerce SW, Suite 220
Grand Rapids, MI 49503-4106
Deva Wolf (616) 454-4673
FAX: (616) 454-2059
I:Childfrc@aol.net

LAKE
William C. Melcher, Lake County
4459 S M 37
Baldwin, Michigan 49304
231-745-8119 FAX: 231-745-2930
I:melcherw@michigan.gov

LAPEER - Council for Children
P. O. Box 221
220 W. Nepessing St. Ste. 204
Lapeer, MI 48446
Cindy McCann (810) 245-8518
FAX: (810) 664-2016
I:momscenter@hotmail.com

LENAWEE - C.A.N. Council of Lenawee
P.O. Box 131
Adrian, MI 49221
Maureen Huston (517) 264-2744
FAX: (517)264-5315
I:cancouncil@yahoo.com

LIVINGSTON - Child Abuse Prevention
Council of Livingston Co.
3471 E. Grand River
Howell, MI 48843
Carolina De Luca (810) 227-9960
FAX: (810) 227-9718
I:cap@wrc-livingston.org
www.wrc-livingston.org

LUCE - Luce Co. Child Protection Council
407 W. Harrie St.
Newberry, MI 49868
JoAnne Martin (906) 293-6005
(906) 293-3857
I:jamartin@lighthouse.net

MACKINAC - Mackinac Co. Child Protection
Roundtable

P.O. Box 56
St. Ignace, MI 49781
Kathryn Mizzi (906) 643-7942
FAX: (906) 643-7467
I:heartsspeak@lighthouse.net

MACOMB - Care House/Macomb Co. Child
Advocacy Center
131 Market St.
Mt. Clemens, MI 49043
Nancy R. Skula (586) 463-0123
FAX: (586) 783-3515
I:mccarehouse@Ameritech.net
MANISTEE - Manistee Co. Family Advocates
P.O. Box 594
Manistee, MI 49660
Sonia Dygert 231-723-3595
(231) 723-3010
FAX: (231) 723-6532
I:mcf49660@yahoo.com

MARQUETTE/ALGER - Children's Trust
300 W. Baraga
Marquette, MI 49855
Traci Phillips

MASON - Mason Co. Council for the
Prevention of Child Abuse and Neglect
c/o Staircase Youth Services
5880 W. U.S. 10
Ludington, MI 49431
Cynthia Anderson (231) 843-3200

MECOSTA Mecosta Co Childrens Council
400 Elm St., Room 134
Big Rapids, MI 49307
Jerilyn Scheid (231)592-0128
FAX: (231)592-0193

MENOMINEE - Menominee Child Protection
2612 10th Street
Attn: Paul Theis (906) 863-1438
FAX: (906) 863-7426
I:TheisP@michigan.gov

MIDLAND - Midland Co. Child Protection
5103 Eastman Ave., Suite 175
Midland, MI 48640
Karen Adams (989) 835-9922
FAX: (989) 835-8446
I:kladams@tm.net
www.mccpc.net

MONROE - Child Advocacy Network
1101 S. Raisinville Rd.
Monroe, MI 48161
Michelle Howard-Brahaney (734) 242-5799
FAX: (734) 242-5807
I:brahaney@misd.k12.MI.us

MONTCALM - We Care For Kids Council
P.O. Box 70

Stanton, MI 48888
Terry King (989) 831-8552
FAX: (989) 831-8496
King2@michigan.gov

MUSKEGON - Child Abuse Council of
Muskegon
1781 Peck St.
Muskegon, MI 49441
Vickie Price (231) 728-6140
FAX: (231) 722-7161

NEWAYGO - Council for the Prev.
of CAN
P. O. Box 207
Fremont, MI 49412
Karen Kroll (231) 924-7614
FAX: (231) 924-5391

OAKLAND - Child Abuse & Neglect
Council of Oakland Co.
44765 Woodward Ave.
Pontiac, MI 48341
Pat Rosen (248) 332-7173
FAX: (248) 333-1539
I:Director@carehouse.org
www.carehouse.org

OCEANA - Oceana Children's Help
Center
302 Hanson St.
Hart, MI 49420-1385
Valerie K. Rabe (231) 873-1707
FAX: (231) 873-1456
I:valerie@oceana.net

OGEMAW - Ogemaw Co. Child
Protection
P. O. Box 307
444 W. Houghton Ave.
West Branch, MI 48661
Brenda Stapleton (989) 345-6547
FAX: (989) 345-8590
I:stapletonb@michigan.gov

ONTONAGON CO. Resource Board
Carol Yakovich
P.O. Box 313
Ewen, MI 49925
(906) 575-3438
Fax: (906) 575-3373
I:Cyako@goisd.K12.mi.us

OSCEOLA - Osceola Children's Council
P.O. Box 63
Reed City MI 49677
Mary Margaret Winkelmann (231) 832-
2311
FAX: (231) 832-4117
resandref@net-pert.com

OTSEGO - Otsego Co. Child Welfare
Alliance
P. O. Box 948
Gaylord, MI 49734
Julie Powers-Gehman
(989) 732-9880 FAX: (517)732-6029
I:jpowersgelman@netscape.net

OTTAWA - Ottawa Co. 4C/SCAN
710 Chicago Drive, Suite 250 & 260
Holland, MI 49423
Jodi Glass (616) 396-8151 or
(800) 332-5049
FAX: (616)396-4349
I:Jglass@i2K.com www.crn.nu

SAGINAW - Saginaw Co. CAN Council
1311 N. Michigan
Saginaw, MI 48602
Suzanne Greenberg (989) 752-7226
FAX: (989) 752-2777
I:sgreenberg@cancouncil.org

SANILAC - Sanilac Co. Child Abuse
Prevention
P.O. Box 221
Sandusky, MI 48471
Tami Fracassa
(810) 633-9242
FAX: (810) 633-9242
I:babylou1986@hotmail.com

SCHOOLCRAFT CO.
Schoolcraft Co. Child Abuse and Neglect
Council
426 Chippewa Ave.
Manistique, MI 49854
Joan Ecclesine
(906) 341-6423 (work)
(906) 341-6637 (h)
Fax: (906) 341-5862
I:manistiqueecc@chartermi.net

SHIAWASSEE - Shiawassee Council for
CAN
P.O. Box 426
Owosso, MI 48867
Robin Stechshulte (989) 723-5877
FAX: (989) 723-8230
I:stechsch@msu.edu

ST. CLAIR - St. Clair Co CAN Council, Inc.
P. O. Box 61-1031
Port Huron, MI 48061-1031
Sally E. Strafon (810) 966-9911
FAX: (810) 966-9933
I:sccanco@advnet.net

ST. JOSEPH - Council for Prev. of CAN
17975 Centreville - Constantine Rd.
Constantine, MI 49042
Suzanne Lind (269) 435-7288
I:Lind@beanstalk.net

TUSCOLA - Tuscola Co. CAN Council

PO Box 290
Caro, MI 48732
Emily Turner – President
Deb Wurdock - Coordinator (989) 673-9173 (W)
(989) 674-8413 (H)
I:turnere2@michigan.gov

VAN BUREN - Council for Prev. of CAN
P.O. Box 23
Paw Paw, MI 49079-0023
A. Jean Dahms (616) 657-5194

WASHTENAW - Council for Children
3075 West Clark Road
Suite 110
Ypsilanti, MI 48197
Elizabeth A. Longley (734) 434-4215
Fax: 734-434-4243
I:wacc@provide.net
<http://community.mlive.com/cc/wacc>

WAYNE (Out) – Child's Hope (Child Abuse
Prevention Council of Out-Wayne County)
C/O U of M – Dearborn, School of Education
4901 Evergreen Road
Dearborn, MI. 48128-1491
Penny C. Thomas (313) 583-6401
Fax (313) 583-6402
I:chldhpe@umd.umich.edu

WAYNE - Mayor's Task Force on CAN
c/o Detroit-Wayne 4C
2151 East Jefferson, Suite 250
Detroit, MI 48207
Carol Quarterman Chair. (313) 259-4411
FAX: (313) 259-4415
I:F4CLTQ@AOL.COM

WEXFORD/MISSAUKEE – Child Protection
Council
Lake City School
7080 Jamie Dr.
McBain, MI 49657
Holly Dick (231) 839-7596
FAX: (231)839-6680
I:hdick@lakecity.k12.MI.us
J:\Local Councils\LOC_LIST.FY00.doc
Local Council full address list.doc
Last printed 06/02/03 3:20 PM

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
Tuscola County Human Services Coordinating Council <i>PHONE (and PHONE EXTENSION)</i> <u>FAX</u>	Tuscola	Susan Andrus, Coordinator Tuscola County HSCC 1104 East Kinney Road Munger, MI 48747-9772 (989) 659-2805			Gretchen Tenbusch, Director Tuscola County Health Dept 1309 Cleaver Road Caro, MI 48723 (989) 673-8114 x 115
		(989) 659-2358 EMAIL TESEAndrus@speednetllc.com			(989) 673-7490 gtenbusch@tchd.us
Van Buren County Human Services Collaborative Council <i>PHONE (and PHONE EXTENSION)</i> <u>FAX</u>	VanBuren	Claren Schweitzer VanBuren CMH P.O. Box 249 Paw Paw, MI. 49079			Jeff Elliott VanBuren Public Health 57418 CR681 Hartford, MI 49057
		(269) 657-7702 x 3131 (269) 657-3474 EMAIL cschweitzer@vbcmh.com			(269) 621-3143 jeffe@vbcassdhd.org
Washtenaw Human Services Collaborative Council <i>PHONE (and PHONE EXTENSION)</i> <u>FAX</u>	Washtenaw	Monica Tijerina Washtenaw County Public Health Administration 555 Towner P.O. Box 915 Ypsilanti, MI 48197-0915 (734) 544-6856			Frank Cambria Washtenaw County Administration 220 North Main Ann Arbor, MI 48104
		(734) 481-2457 EMAIL tijerinam@ewashtenaw.org			(734) 222-6850 cambriaf@ewashtenaw.org
Wayne County Human Services Coordinating Body <i>PHONE (and PHONE EXTENSION)</i>	Wayne	Billie Jean Edwards, SF/SC Manager Wayne County FIA Cadillac Place, Suite #5-600 3040 West Grand Blvd. Detroit, MI 48202 (313) 456-1232			Jerome Rutland, Chair Wayne County FIA, Director Cadillac Place, Suite #5-650 3040 West Grand Blvd. Detroit, MI 48202
					(313) 456-1025

Multi-Purpose Collaborative Body	County Represented	Staff to MPCB/ Contact Person	Other Staff Person	Other Contact Person	Chairperson
----------------------------------	--------------------	-------------------------------	--------------------	----------------------	-------------

<u>FAX</u> West Michigan Child and Family Leadership Council	Lake, Mason, Oceana	(313) 456-1239 EMAIL edwardsb2@michigan.gov Kathy Kovalchik-Lacko West Michigan CMH 920 Diana Street Ludington, MI 49431 (231) 843-5476			(313) 456-1218 rutlandj@michigan.gov Nancy Sterk, Director Oceana/Mason FIA 4081 W. Polk Road P.O. Box 70 Hart, MI 49420 (231) 873-7201
PHONE (and PHONE EXTENSION) <u>FAX</u>		(231) 845-7095 EMAIL kathyko@wmcms.org			(231) 873-7152 sterkn@michigan.gov
Wexford-Missaukee Human Service Coordinating Body PHONE (and PHONE EXTENSION) <u>FAX</u>	Wexford, Missaukee	Shari Spoelman North Central CMH 527 Cobbs Street Cadillac, MI 49601 (231) 876-3280 (231) 775-1692 EMAIL Shari.spoelman@nccmh.org			Lynn Bollman, Chair Wexford-Missaukee ISD 9905 E. Thirteenth Street Cadillac, MI 49601 (231) 876-2260 (231) 876-2272 lbollman@wmisd.k12.mi.us

For additions/corrections, please contact Mary Ludtke at 517/335-9061 or email: ludtkem@michigan.gov

A: Outcomes: What do you expect will happen <u>for children and families</u> as a result of the services provided? What did happen <u>for children and families</u>	B: Objectives What specific, numerical target was set to demonstrate progress or achievement of the outcome within what time frame? What numerical target was reached during the specified time frame.	C: Indicators What data or tools will be used to measure progress towards or achievement of the objective? What data or tools were used?
3. Outcome expected What happened.	<u>Target Set:</u> What happened	Expected data or tool: Actually used:
	<u>Target Set:</u> <i>What happened</i>	Expected data or tool: Actually used:
4. Outcome expected: What happened:	<u>Target Set:</u> <i>What happened</i>	Expected data or tool: Actually used:
5. Outcome expected What happened:	<u>Target Set:</u> <u>What happened</u>	Expected data or tool: Actually used:

Fiscal Year 2004 Preliminary Plan

A: Outcomes: What do you expect will happen for <u>children and families</u> as a result of the services provided? What did happen for children and families	B: Objectives What specific, numerical target was set to demonstrate progress or achievement of the outcome within what time frame? What numerical target was reached during the specified time frame.	C: Indicators What data or tools will be used to measure progress towards or achievement of the objective? What data or tools were used?
Example Families will be healthy Families are healthier	<u>90% of the children served will receive recommended immunizations according to physician recommended time frames during Fiscal Year 2002</u> 91% of the children served months received up-to-date immunizations according to physician recommended time frames during Fiscal Year 2002	Parent report <i>Parent report</i>
	<u>95% of the pregnant moms served will receive all of the physician recommended prenatal visits during Fiscal Year 2002</u> 92% of the pregnant moms served received all of the physician recommended prenatal visits during Fiscal Year 2002	Physician report <i>Physician report</i>
	<u>Target Set:</u> What happened:	Expected data or tool: Actually used:
	<u>Target Set:</u> <i>What happened</i>	Expected data or tool: Actually used:
3. Outcome expected What happened:	<u>Target Set:</u> What happened:	Expected data or tool: Actually used:
	<u>Target Set:</u> <i>What happened</i>	Expected data or tool: Actually used:
4. Outcome expected What happened.	<u>Target Set:</u> What happened	Expected data or tool: Actually used:

A: Outcomes: What do you expect will happen <u>for children and families</u> as a result of the services provided? What did happen <u>for children and families</u>	B: Objectives What specific, numerical target was set to demonstrate progress or achievement of the outcome within what time frame? What numerical target was reached during the specified time frame.	C: Indicators What data or tools will be used to measure progress towards or achievement of the objective? What data or tools were used?
	<u>Target Set:</u> <i>What happened</i>	Expected data or tool: Actually used:
6. Outcome expected: What happened:	<u>Target Set:</u> <i>What happened</i>	Expected data or tool: Actually used:
7. Outcome expected What happened:	<u>Target Set:</u> <u>What happened</u>	Expected data or tool: Actually used:

ATTACHMENT C

1. Technical Assistance Registration Form
2. Intent to Apply Form

**0-3 Secondary Prevention Grant Application
Technical Assistance Session**

June 27, 2003

**Conference Call
Lansing, Michigan**

Registration Form

Complete this form and return it to the address (or fax number) listed at the bottom. Please note: Registrations will be limited to one call per site. Once your site is registered, the call in number will be provided.

Please Print or Type

Name	
Agency	
County	
Address	
City, Zip	
Telephone	
Fax	
E-Mail	

Fax this form prior to Monday June 23, 2003 to:

Children's Trust Fund
Direct Service Technical Assistance Session
Attn: Shannon Stotenbur
FAX: (517) 241-7038

0-3 Secondary Prevention Grant Request for Proposal

NOTICE OF INTENT TO APPLY

FOR FY 2004 GRANTS

Organization: _____

Contact Person: _____

Address: _____

Phone: _____

Fax: _____

E-mail: _____

County(ies) to be Served: _____

Please submit this form if your agency is applying for 0-3 Secondary Prevention funds under this RFP.

Please fax this form to:

0-3 Secondary Prevention Grant

Attn: Shannon Stotenbur

Fax: (517) 241-7038

Parenting Awareness Michigan

Parenting Awareness Month 2004

Greetings . . .

From the Parenting Awareness Michigan Steering Committee

March 2004 is Parenting Awareness Month, and we invite your interest and participation in this important celebration.

In support of local PAM and parenting activities we are pleased to make available the 2004 Parenting Awareness Month (PAM) Organizers' Packet.



PACKET CONTENTS ARE CAMERA-READY FOR YOU TO COPY and distribute in your community during Parenting Awareness Month and throughout the year.

PAM Organizers' Packet contents are designed for:

- ❑ Individuals and groups organizing for Parenting Awareness Month
- ❑ People who work with parents
- ❑ Parents
- ❑ Use during Parenting Awareness Month and throughout the year.

We always include a variety of items that will appeal to a broad range of individuals, groups, and organizations. There are several new items and many updated favorites from past years.

We encourage you to:

- ❑ Connect with others in your community who care about parents and parenting issues.
- ❑ Call us with information about your local PAM activities.
- ❑ Translate PAM Organizers' Packet contents for non-English speaking individuals.

Parenting Awareness Michigan is a statewide initiative to promote awareness, education, and resources — through state outreach and local efforts — emphasizing the importance of effective parenting in nurturing children to become healthy, caring, and contributing citizens.

The month of March is celebrated as Parenting Awareness Month. Throughout our state, local organizers plan and hold special events and activities for parents and families during and around Parenting Awareness Month.

We hope the 2004 PAM Organizers' Packet is helpful and continues to provide information and support to your local Parenting Awareness Month / Parenting Awareness Michigan activities.

We invite you to complete and return the Invitation to Participate included in this packet.

For more information about Parenting Awareness Michigan and Parenting Awareness Month please call 1-800-968-4968 or visit www.preventionnetwork.org

Invitation to Participate in Parenting Awareness Month 2004

Please Fill out and Return this Form

Doing So Does Not Obligate You to Anything

Parenting Awareness Michigan (PAM) is a year around Michigan campaign to celebrate people raising children and promote resources to help with this important task. Parenting Awareness Month (PAM) is celebrated in March. PAM can offer you or your organization:

- A link with organizations throughout Michigan who embrace the goals of PAM
- Increased visibility for your year-around parenting and networking programs
- Organizers' packet, campaign updates, and other organizer support
- Clearinghouse services — campaign materials, assistance, referrals and networking.

I/We support the purpose and goals of Parenting Awareness Michigan/Parenting Awareness Month and would like to be listed as participant(s) in the campaign.

NAME/ORGANIZATION _____

CONTACT PERSON _____

ADDRESS _____ CITY/STATE _____ ZIP _____

PHONE NUMBERS _____ FAX _____

E-MAIL / WEB SITE _____

WE ARE A PAM COALITION. Name of coalition _____

Area and groups represented _____

Please list local PAM activities taking place during March (*or complete and return form on reverse side*) _____

We have a local PAM calendar We have a local parent resource list Other local PAM materials _____

Please send samples of your local PAM calendars, resource list, and other PAM materials. Thank you.

Please return form to:

PAM • Box 4458, East Lansing, Michigan 48826-4458 • FAX 517/393-6931

Local PAM Activities for 2004

Please complete and return this local activities form by January 16, 2004.

We would like to publicize as much local Parenting Awareness Month activity as possible in *Prevention Network News* and to have on hand for callers seeking local PAM activities.

Title of PAM event (please copy this form if more than one event):

Date(s) of event: _____

Location: *Place* _____ *City* _____ *County* _____

Type of event: (examples: conference, fair, local kickoff, workshop, local placemat, etc.)

Cost: (or please indicate if event is free) _____

Contact person for event/activities info (will be publicized):

Name: _____

Phone: _____

(If available, please attach any flyers, brochures, etc., for your event. Otherwise, please send when available. Thanks.)

Please fax or mail completed form by January 16, 2004, or as soon as possible to:

Luanne Beaudry, Parenting Awareness Michigan Coordinator
Prevention Network
PO Box 4458
East Lansing MI 48826-4458

Fax to: 517/393-6931. Questions? Call 800/968-4968.

Or e-mail all requested information to: pamcampaign@preventionnetwork.org

2004 Parenting Awareness Month

Parenting Materials Order Form

These materials are available at no charge for Parenting Awareness Month.

_____ 2004 PAM Organizers Packet – Camera-ready reproducible materials designed for local distribution.

_____ 2004 PAM Bookmarks - Two-sided information piece about Parenting Awareness Month, helpful tips for parents, and resource numbers.

_____ 2004 PAM Posters (17" x 22") Folded

_____ 2003 PAM Posters (While supplies last)

_____ 2003 PAM Bookmarks (While supplies last)

_____ 2002 PAM Posters (While supplies last)

_____ 2002 PAM Bookmarks (While supplies last)

_____ 2001 PAM Bookmarks (While supplies last)

Other Print Materials Available at no charge until March 31, 2004.

Limit of 50

_____ FS047 Facts About Teenagers and Alcohol Fact Sheet (MRC) Limit 50
_____ WH107 When Mom Drinks Baby Pays Too (OCHD & MRC) Limit 50
_____ YA400 Zero Tolerance Means Zero Chances Litter Bags (OHSP) Limit 50
_____ YA401 Zero Tolerance Means Zero Chances Bookmark (OHSP) Limit 50
_____ YA402SP Zero Tolerance Means Zero Chances Bookmark (OHSP) Spanish Limit 50

Limit of 25

_____ AVD140 Get the Facts – Drug Education Web Site Card (ONDCP) Limit 25
_____ OP243 Child Identity Sticker (OHSP) Limit 25
_____ PHD941 Parents At Work – The Anti-Drug (ONDCP) Limit 25
_____ PHD979 Helping Your Children Navigate: A Parent's Guide (NCADI) Limit 25
_____ PP043 Michigan Parent Handbook (MRC) Limit 25
_____ PP046 When Kids Ask About Alcoholism (NCADI/MRC) Limit 25
_____ PP052 A Few Words For Parents About Alcohol and College Limit 25
_____ RETRO Retrospective - A Parent's Guide to Youth Culture (CSAP) Limit 25
_____ VIOX4012 Club Drugs: What You and Your Kids Should Know (MDCH) Limit 25

Limit of 1

_____ PAMTIPS Ten Tips on Doing Parenting Business with Business Limit 1
_____ PP049 What Should I Tell My Child About Drinking? (NCADD) Limit 1
_____ CAT01 MRC Publications Catalog Limit 1
_____ CAT04 FACE Catalog (Facing Alcohol Concerns Through Education) Limit 1

Parenting Videos for Loan from MRC's Video Loan Library (An application must be on file, please call (800/626-4636)

_____ CAT02 MRC Video Catalog Limit 1

Please submit order form to:

MRC

Michigan Resource Center

111 W. Edgewood Blvd., Ste. 11

Lansing, MI 48911

Fax Orders to: (517) 882-7778

Name: _____

Organization: _____

Address: _____

City/State/Zip: _____

Telephone Number: _____

Visit Our Website: www.michiganresourcecenter.org

When Mom Drinks Baby Pays Too!

FACTS ABOUT FETAL ALCOHOL SYNDROME

- Fetal Alcohol Syndrome (FAS) is a pattern of birth defects that results from drinking alcohol during pregnancy. According to the Centers of Disease Control and Prevention's August 1996 final report about FAS/FAE, each year an estimated 130 to 400 children in Michigan are born with FAS.
- Children born with FAS may be small in size, have abnormal facial features and central nervous system problems. FAS symptoms are irreversible. Children with FAS never catch up mentally or physically.
- FAS is the leading cause of mental retardation in the United States.
- FAS is totally preventable. No alcohol during pregnancy = No FAS.
- Alcohol in any form is alcohol. A can of beer, a glass of wine or a wine cooler and a mixed drink all contain the same amount of alcohol.
- Every time a pregnant woman drinks, the alcohol passes through the placenta to the unborn baby.
- Alcohol is more harmful to the fetus than the mother because of the unborn baby's small size and rapid growth rate.
- Even women who drink only on special occasions run the risk of harming their unborn baby. Binge drinking (four drinks at a time) carries a very high risk for damage to the baby.
- Pregnant teenagers are more likely to have babies with problems and drinking alcohol may increase these risks.
- There is no safe drinking level. The best advice is not to drink during pregnancy.
- If you are breast feeding, you should not drink alcohol. Alcohol can reach the baby through breast milk and cause problems in development.

To prevent FAS and increase your chances for a healthy baby . . .

**DON'T DRINK IF YOU ARE PREGNANT OR
PLANNING TO BECOME PREGNANT**

&

SEEK HELP IF YOU HAVE A PROBLEM WITH ALCOHOL.

If you are pregnant and unable to stop drinking, help is available.
There are programs throughout Michigan that address the special needs of women.
Call the **Michigan Substance Abuse Treatment Information Line at 1-888-736-0253**
for more information regarding treatment programs available in your area.

IF YOU WOULD LIKE MORE INFORMATION ON HAVING A CHILD EVALUATED FOR FAS, PLEASE CONTACT ONE OF THE FOLLOWING FAS DIAGNOSTIC CENTERS:

University of Michigan

Packard Community Clinic
3174 Packard, Ann Arbor, MI 48108
Marie Heys, Coordinator
Phone: 734-663-4241

Marquette General Hospital

Women & Children's specialty Clinic
580 W. College, Marquette, MI 49855
Sue Britton, Coordinator
Phone: 906-225-4777

Mott Children's Health Center

806 Tuuri Place, Flint, MI 48503
Patricia Gushman, Facilitator
Phone: 810-767-5750

Spectrum Health-DeVos Children's Hospital

21 Michigan, Grand Rapids, MI 49503
Linda Hoezee, Coordinator
Phone: 616-391-2319

Western Michigan University, CTAC Clinic

1000 Oakland Dr., Kalamazoo, MI 49008
Connie Black-Pond, Coordinator
Phone: 269-387-7073

Resources for more information on Fetal Alcohol Syndrome

The ARC Michigan: 1-800-292-7851 www.arcmi.org

Michigan Resource Center: 1-800-626-4636 www.michiganresourcecenter.org

National Organization on Fetal Alcohol Syndrome: 1-800-66-NOFAS www.nofas.org

National Taskforce on FAS: www.cdc.gov/ncbddd/fas/taskforce.htm

FAS Family Resource Institute: 1-253-531-2878 www.fetalalcoholsyndrome.org

Fetal Alcohol Syndrome Information Services: PO Box 95597, Seattle, WA 98145

Family Empowerment Network: 1-800-462-5254

Adapted from a public awareness program sponsored by Oakland County Health Division.



MICHIGAN RESOURCE CENTER

For Alcohol, Tobacco & Other Drug Information,
Health Awareness, and Traffic Safety Education Materials

111 W. Edgewood Blvd., Ste. 11 • Lansing, MI 48911
(517) 882-9955

MATERIALS INFO 800-626-4636 • FAX (517) 882-7778

The Michigan Resource Center is operated by the Traffic Safety Association of Michigan under a contract from the Michigan Department of Community Health, Office of Drug Control Policy. Additional funding and materials are provided by the Michigan Office of Highway Safety Planning. 30,000 copies were printed at .0281¢ per copy, at a total cost of \$843.20.

The National Standards for Parent/Family Involvement Programs

100 Ways for Parents to Be Involved in Their Child's Education

1. Give positive feedback and show appreciation for teachers and the principal.
2. Approach interactions with a positive attitude and an open mind.
3. Listen to others' viewpoints.
4. Share your child's strengths, talents, and interests with your child's teachers.
5. Share expectations and set goals together for your child.
6. Make appointments as needed to discuss your child's progress or concerns.
7. Attend parent-teacher conferences with specific questions you want to ask.
8. Indicate the best way to give you information (phone, e-mail, notes, etc.).
9. Understand and reinforce school rules and expectations at home.
10. Participate in informal opportunities to talk with and get to know school staff and educators.
11. Address concerns or questions honestly, openly, and early on.
12. Attend PTA or parent meetings regularly.
13. Read classroom and/or school newsletters.
14. Visit your school's web page.
15. Know school staff's extensions and office hours.
16. Read and know your school's handbook.
17. Request that information be available in all relevant languages.
18. Share your family's culture, values, and parenting practices with your child's school.
19. Share your perceptions with educators and school staff of how parents are treated.
20. Work with school staff and educators to revise and improve perceptions and school climate.
21. Meet your child's friends and get to know their parents.
22. Contact your school for information on family programs and resources.
23. Help establish a parent center at school and use its resources.
24. Help create a toy/book lending library and visit it regularly.
25. Assist in developing parent support programs/groups and attend them.
26. Attend workshops or seminars on various parenting topics.
27. Participate in parenting classes on child development, expectations, discipline, etc.
28. Attend parent fairs and other events especially for parents and families.
29. Start a parent book club to discuss current publications.
30. Help create and/or contribute to a school newsletter on parenting.
31. Assist in creating and/or offer your services to before- and after-school programs.
32. Build a child file with medical records, pictures, fingerprints, etc.
33. Make donations and/or offer to work at clothing drives or swaps, food co-ops, etc.
34. Talk with your child's teacher for ideas on parent/child games and activities.
35. Discuss your child's school day and homework daily.
36. Learn your child's strengths and weaknesses in different areas of school.
37. Provide a quiet, well-lighted place with basic school supplies for studying/homework.
38. Help your children break down projects into smaller, more manageable steps.
39. Develop a consistent daily routine and time for studying and homework.
40. Provide encouragement and approval for effort and schoolwork.
41. Share your interests, hobbies, and talents with your children.
42. Provide children with books, magazines, and so forth, and develop a nighttime reading routine.
43. View selected TV programs together and then review and discuss them.

44. Make family trips to the library, zoo, museum, or park a fun learning experience.
45. Talk with your child's teacher on creating home learning games and activities.
46. Complete interactive homework assignments with your child.
47. Attend meetings on learning expectations, assessment, and grading procedures.
48. Help set goals and develop a personalized education plan for your child.
49. Participate in activities that help you understand school technology.
50. Help plan and attend family nights on improving study habits, doing homework, etc.
51. Help develop, visit, or offer services to your school's study/tutor center.
52. Participate in fairs and fests for math, science, history, and so forth.
53. Respond to school surveys on your interests, talents, and skills.
54. Let school staff know your availability to volunteer (days, times, and how often).
55. Supervise and coordinate evening and weekend volunteer activities at school.
56. Assist your child's teacher in the classroom or on field trips when you are able.
57. Work with school staff and teachers to develop volunteer activities you can do from home.
58. Assist school staff and educators in creating a warm and welcoming atmosphere for parents.
59. Help provide child care and/or transportation for volunteering parents.
60. Help develop creative ways to use volunteers at school.
61. Actively help school staff recruit parents and community members as volunteers.
62. Attend training and orientation on how to be an effective volunteer.
63. Learn and uphold school discipline, confidentiality, and other policies as a volunteer.
64. Plan a regular time each week to talk with school staff and educators with whom you are working.
65. Help develop volunteer job descriptions and evaluations.
66. Participate in organizing and planning ways to recognize and appreciate volunteers.
67. Respond to school surveys/questionnaires on how effective volunteer programs are.
68. Help develop and distribute a volunteer directory to parents, school staff, and teachers.
69. Provide volunteer consulting services to school staff or educators on your areas of expertise.
70. Learn of school and district policies and practices that affect children.
71. Voice your support or concerns on any issue that will affect your family.
72. Be involved in decisions on student placement and course and textbook selections.
73. Participate in meetings to determine special educational needs and services.
74. Attend workshops on problem solving, conflict resolution, public speaking, and so forth.
75. Serve on school advisory councils or committees on curriculum, discipline, and so forth.
76. Serve on a site-based school management team with teachers and the principal.
77. Encourage and support older children in serving in student leadership positions.
78. Help your school create a student's rights and responsibilities guide for families.
79. Attend PTA, school board, and/or town meetings and speak to issues of concern.
80. Learn representatives' backgrounds and participate in school board elections.
81. Work with teachers and school administrators to develop a parent involvement policy.
82. Write, call, or travel to state capitals to support or oppose proposed legislation.
83. Participate in petition drives or letter-writing campaigns to Congress on legislation.
84. Give testimony at public hearings in support of or opposition to education legislation.
85. Vote in local, state, and federal elections for public officials who support education.
86. Help your school develop a directory of social and community services.
87. Find out information on community resources and organizations and use them.
88. Help develop and/or distribute a community newsletter to local agencies and businesses.
89. Help coordinate and participate in an event to raise money for a local charity.
90. Talk with employers about holding parent meetings or parenting workshops on-site.
91. Advocate for flexible work schedules and leave time to attend school functions.
92. Encourage employers and local businesses to make donations and support school programs.
93. Help organize and/or participate in community health fairs.
94. Help recruit community members (seniors, business people) to volunteer at school.
95. Become active in community groups such as YMCA and Boy and Girl Scouts.
96. Serve on local community advisory councils and committees.
97. Work with local authorities and public officials to sponsor community events.
98. Help organize and/or participate in a community "clean up" or "beautification" project.
99. Encourage and help facilitate your child's participation in community service.
100. Be a role model, be active in community service yourself or together with your child.

National PTA

Parent Involvement as Students Make Their Transition From Middle to High School

Parent involvement is important all through a child's school career — but particularly as children move from middle to high school. And of course, this can be one of the most difficult times to be involved because children are at the developmental stage where they want to be more independent (trying to establish some autonomy) and many times don't want their parents to be involved in the same ways or to the extent they were during elementary school.

So what's a parent to do? Because, after all, "parenting is for a lifetime!" Children need and really want their parents to be involved — But involvement at this stage just needs to be a little different than volunteering in the classroom or for school field trips (although these are still important too).

Here are some suggestions for parents and other caregivers to take an active role in their children's education. These are appropriate for parents of all school aged children – but during times of transition and when parents feel less connected because children are growing more independent, the following tips are more important than ever.

- Encourage your child to share his or her feelings. Acknowledge that starting high school can be challenging, but also exciting.
- Stay involved with your child by monitoring his or her homework, school attendance, and peer involvement.
- Ask your child questions. Be interested. Just refrain from doing it the minute you see him or her each day. Wait until they've made their daily transition from "student" to "family member."
- The moment you become aware of potential problems your child may be experiencing find out the best course of action to help your child resolve the problem. Ask your child what might help, talk to a school counselor, and talk to other parents.
- Advocate for your child especially when your child faces challenges. If you are not sure how to do this, contact your child's school counselor for suggestions.
- Support homework and learning at home. Monitor your child's homework. Ask your child's teachers for ideas on how to do this.
- Find ways to get your child involved in a positive social network through the school's extra curricular activities, church youth groups, and community youth development programs. If your child does get involved in one of these activities, make sure you show interest and stay connected.
- Ask your school to communicate regularly through a variety of ways – newsletters, bulletins, homework hotlines, and the internet are four suggestions.
- Ask your child's school for feedback about your child — beyond parent-teacher conferences. Let schools know you want the positive feedback as well as the negative!
- Ask your child's school to let you know the available opportunities for involvement. Find out how you can take an active role doing something at your comfort level.
- If you identify barriers to being involved, let the school know and see if they will make changes.
- Try really hard to attend any parent activities offered by your school. Ask another family member to attend if you can't be there. (If you don't seem to be getting notices about activities, make sure you call the school on a regular basic to find out what is going on for parents.)
- Join your school's PTA, PTO, LSCO, or other parent network.

Parent involvement is important to children's academic success. Remember — you were your child's first best teacher, you continue to be a role model, and you are a partner in their education!

Sources:

Baker, A. J. Parent Involvement for the Middle Level Years: Recommendations for Schools. *Schools in the Middle*, May 2000.
Jones, R. Involving Parents is a Whole New Game: Be Sure Your Win! *Education Digest*, November 2001.
Michigan PTSA, www.michiganpta.org
National PTA, www.pta.org/parentinvolvement

Developed by Luanne Beaudry for *Prevention Network News* and the 2004 Parenting Awareness Month Organizers' Packet.

Fatherhood

Fathers, parenting is not easy, but do not think you are less important than mothers. Your roles are not the same; however they complement each other to fulfill what children need from their parents. You have a special place in your children's lives, and your interest in them can make a significant difference. Children whose fathers take an active part in their daily lives tend to be well-adjusted and better equipped for success. Take pride in your responsibilities and efforts. Children do not need perfect fathers; they need caring and involved fathers.

10 Tips for Successful Dads

1. **Spend Time With Your Child.** For children, love is spelled T-I-M-E.
2. **Play With Your Children.** Through play, men teach self-control and perseverance to kids.
3. **Be a Good Role Model.** Lasting values are "caught" by children more than "taught" by adults.
4. **Respect Your Child's Mother.** A child's self concept is strongly linked to how their parents interact.
5. **Discipline With Love.** Give clear guidelines, give praise for positives, correct with kindness.
6. **Be a Good Teacher.** Take daily opportunities to help children develop a love for learning.
7. **Eat Meals Together.** Regular meals provide opportunity for healthy interactions.
8. **Read To Your Children.** Children read to daily have great advantages in their education. For fathers who do not read well, activities with wordless picture books help children get a good start on pre-reading and comprehension skills.
9. **Show Physical Affection.** Children feel more secure with regular comfort from fathers.
10. **Stick With It! Never Quit!** Be patient with your children and yourself- by seeking resources and support, father care can be positively enhanced.

--You are the best DAD your child will ever have!

Here are some positive results for children:

- Stronger self concept
- More likely to enjoy school — children who enjoy school are more likely to perform better academically and remain in school.
- Show more compassion and empathy
- More likely to get A's — the odds that children get mostly A's are 43% higher if their fathers are highly involved in their schools compared to if they are not involved. (U.S. Department of Education, National Center for Education Statistics, 1996 National Household Education Survey <http://nces.ed.gov/pubs98/fathers>)
- More likely to avoid high risk behaviors like substance abuse, early sexual activity, delinquent conduct, and others.
- Better emotional health and self-control
- Stronger problem solving abilities
- More likely to obtain financial independence.

Important Tips for Communities:

- Respect fatherhood.
- Understand that father interaction is vital to each child's optimal development.
- Support father/child activities.
- Affirm community and business practices supportive of healthy father/child relationships.
- Uphold positive male influences to children.
- Encourage men to be role models and mentors for children in the community as well as in their family.
- Help kids without fathers spend time with positive men.

(continued on back)

Resource Organizations For Fathers

All Pro Dad. “To increase public awareness of the importance of being a good father and to provide the resources that will enable fathers to become better dads.” www.allprodad.com

The Center for Successful Fathering. “Promoting the Benefits of Involved Dads. Founded on the belief that children need the balance of Mom and Dad.” www.fathering.org 1-800-537-0853

Dads and Daughters. “Inspire, understand, and support your daughter.” www.dadsanddaughters.org
888-824-DADS (3237)

Families and Corrections Network. The Incarcerated Fathers Library Resources for Dads Behind Bars and Those Working with Them. www.fcnetwork.org 434-589-3036

Fathers Network. “Celebrate and support fathers and families raising children with special health care needs and developmental disabilities.” www.fathersnetwork.org 425-747-4004 ext.218
Excellent Links Page! - to over 33 websites for many other fatherhood and men’s resources.

Michigan Fatherhood Coalition. “The Mission of the Michigan Fatherhood Coalition is to provide a network for those who promote healthy families, function as an information source both for and of fatherhood initiatives in Michigan, enhance positive male parenting, collaborate efforts; for the common good of all children.” www.michiganfatherhood.org

Michigan’s First Gentleman- Daniel Granholm Mulhern. First Man’s Forums - “This forum will focus on the challenges and opportunities men face in their roles as husbands and fathers as well as celebrating ways fathers contribute to the overall strength and structure of families.”
www.michigan.gov/firstgentleman

The National Center For Fathering. “Insights, Information, and Training helping you become a better dad.” www.fathers.com 800-593-DADS (3237)

The National Fatherhood Initiative. “To improve the well being of children by increasing the proportion of children growing up with involved, responsible, and committed fathers.”
www.fatherhood.org 301-948-0599 Father Facts www.fatherhood.org/pdf/ffacts.pdf

Resilience Net. Information for helping children and families overcome adversity.
<http://resilnet.uiuc.edu/>

Responsible Single Fathers. “Providing mentoring, support, and referrals to dads that better their ability to cope, parent, nurture, love, and emotionally and financially care for their children.”
www.singlefather.org 616-447-0798

Stepfamily Network. A nonprofit organization dedicated to helping stepfamily members achieve harmony and mutual respect in their family lives through education and support. www.stepfamily.net

Young Fathers Net/ Michigan. “Assisting Young Fathers to make a difference in their child’s life.”
<http://www.youngfathersmichigan.com> 866-822-9352

Working Parents and the Time Crunch

Despite the enormous importance of parenting, American society has made it increasingly difficult for moms and dads to come through for their kids.

- Sylvia Ann Hewlett & Cornel West

The time crunch experienced by working parents has become an important topic for public discussion in communities. This fact sheet was developed to give an overview of the problems many working parents experience as they struggle to ease the time crunch. It is important that parents, youth, employers, human service providers, educators, and community leaders are brought together to begin forming solutions to this issue which effects families, communities, workplaces, and society as a whole.

Until recently the time crunch was viewed as a work-family issue. Parents were expected to find the balance necessary to get the job done, while meeting family demands. Employers were looked upon to provide family-friendly policies to ease the worries of parents, while meeting business goals. A lot has been accomplished to ease the burden of some working parents; however the solutions created to this point are not affordable for many businesses. Many other families have not benefited, and the struggles are mounting as society changes at a faster pace.

This fact sheet will show that the time crunch is more complex; it affects and is affected by community values and society at large.

The work-family issue must be viewed from a community perspective in order to develop solutions that will benefit ALL families. The following information is guided by three principles established by Steve Small of the University of Wisconsin:

1. Communities are not defined simply as the neighborhoods, towns, or physical places where people live and work. Indeed, many people do not live in the same town or city in which they work. Social and psychological aspects of "community" influence individuals and families more than the physical aspects.
2. Relationships, norms, and rules and policies within communities influence human development more than the physical makeup.
3. Communities are complex systems made up of smaller interacting subsystems. Each community organizes its systems uniquely. The synergistic interactions among subsystems create a "whole that is greater than the sum of its parts."

There are many relationships and places within a community with which parents interact on a regular basis. Family and child ecology experts refer to these settings as "microsystems." As the next page will show, relationships and policies occurring within community settings either promote or interfere with parent and family well-being.

(Continued on back)

Within the family setting:

- ⌚ Many parents say sibling rivalry is a top issue that makes parenting harder.
- ⌚ Responsibility, time and costs for the care of an older relative is an issue that is expected to grow as baby boomers age.
- ⌚ Advancing technology, media, and the parental time-crunch contribute to a blurring of family rules and boundaries. Youth are exposed to a faster-paced society and sometimes develop a mistrust of adult relationships.
- ⌚ According to author and researcher, Arlie Hochschild, working parents work a "second shift" in order to attend to family and household needs, in addition to the hours spent performing paid work.
- ⌚ Working parents have not reduced time with children, but have reduced time for themselves. This has created high levels of stress and time pressure.

Within the workplace setting:

- ⌚ Working hours have increased dramatically. Many parents must work evenings, nights, and weekends due to our society's "round-the-clock, year-round economy."
- ⌚ Lower income families are less likely to have basic benefits such as paid sick leave, paid vacation leave, and flexibility. These parents are forced to take time off ~~un~~paid to take care of family illnesses and emergencies.

Within the school/child care setting:

- ⌚ Childcare for preschoolers costs more than tuition at state universities.
- ⌚ Work schedules and childcare are two important issues that affect parent involvement and participation in parent-teacher conferences.
- ⌚ School days are 2/3 as long as workdays and the school year has 30% fewer days than the work year. Affordable and reliable childcare or out-of-school activities are out of reach for many working-class families.
- ⌚ Despite the importance placed on early-childhood education, only 1/2 of all 3-4 year olds have a formal education. According to some experts, "access to early childhood education today looks a lot like access to high school education did in 1949."
- ⌚ Working parents of children with special needs struggle to make time to meet with learning specialists and to help with homework.

Within the community setting

- ⌚ Accessibility of community institutions is a problem when hours of operation conflict with work hours. Many parents must take time off work unpaid to access these institutions and take care of needs.
- ⌚ Transportation is a problem for many families in larger cities and rural areas.
- ⌚ Current eligibility requirements for some community institutions, like social service agencies do not meet the needs of many lower income families whose income is considered "too high" to qualify. These families struggle to make ends meet at a time when the real value of salaries is decreasing and the time crunch is increasing.
- ⌚ Whether positive or negative, direct or indirect, parents exert peer pressure on each other through norms and attitudes about parenting practices.

Promoting Healthy Weight for Children

Information for Professionals

Definitions

* *Overweight for children: a BMI at or above the 95th percentile of the CDC growth charts.*

** *At risk of Overweight: a BMI between the 85th and 95th percentile of the CDC growth charts.*

Body Mass Index (BMI): a measurement system used to define overweight and obesity. BMI is a measure of weight in relation to height.

For children and adolescents who are growing, the measurement is a function of age and sex-specific BMI, based on revised Centers for Disease Control and Prevention (CDC) growth charts.

(www.cdc.gov/growthcharts).

BMI is the recommended screening tool for children who are overweight or at risk of overweight.



**Family and
Consumer
Sciences**

Overweight and obesity are critical health issues in America, and the trend among children is alarming. The number of children aged 6 to 11 who are overweight has more than doubled in the past twenty years, while the number of overweight adolescents has tripled.¹ Nationally, between 20-30 percent of children aged 2 to 19 can be classified as overweight* or at risk of overweight.**² In Michigan, 11 percent of students in grades 9 to 12 meet the definition for overweight.³ These statistics are disturbing because children who are overweight at age 6 and beyond have a greater than 50 percent chance of being obese as adults.⁴

The Risks

Being overweight as a child may represent the start of lifelong health problems.

- Serious health conditions, such as high blood pressure, high cholesterol, early maturation and orthopedic problems occur with increased frequency in overweight youth.⁵
- Type 2 diabetes, once regarded as an adult disease, has increased among children and adolescents in the last few decades.^{5,6}
- Psychosocial issues (i.e., discrimination), low self-esteem, unsafe dieting practices, and the potential for eating disorders are also risks faced by overweight children.^{7,8}

The Causes

Factors that contribute to overweight in children are numerous and complex. Body weight is the result of a combination of genetic, behavioral, lifestyle, and cultural influences. Lack of physical activity and unhealthy eating habits play an important role in the development of childhood overweight.

Children today spend an average of four hours per day—more time than any other generation—engaged in sedentary activities such as watching television and playing computer and video games.^{5,9} Opportunities to be physically active in schools are often limited with less than 20 percent of Michigan schools requiring physical education after 10th grade, and less than 5 percent of the schools requiring it at the 12th grade.¹⁰

Other lifestyle factors contribute to the unhealthy eating habits of children. The increased availability of convenience foods, more meals eaten away from home, fewer family meals, and greater portion sizes have increased the potential for weight gain.¹¹ Many children's diets do not meet nutrition guidelines. Barely 21 percent of Michigan's high school-aged students meet the guideline of at least five daily servings of fruits and vegetables.³ Milk consumption has decreased, while the consumption of non-diet soft drinks and non-citrus juice has increased.¹²

Promoting Healthy Weight

Various strategies are needed to help prevent children from becoming overweight and to increase their physical and emotional well-being. These strategies for all children and their families include: (1) promoting healthy eating through education and by increasing access to healthy foods, and (2) providing opportunities for regular physical activity. Schools play a key role in creating an environment where students can improve their food choices and be active. Foods offered should be consistent with guidelines for a healthy childhood weight, and opportunities should be provided for physical activity throughout the day. Healthy eating and physical activity during school years will build the foundation for a health-promoting lifestyle.

Resources are available to professionals and families to help children improve their lifelong eating and physical activity habits and to provide schools information on improving their nutrition and physical activity environment. Michigan State University Extension county offices can provide educational resources and guidance for children and their families related to planning healthy meals and minimizing sedentary habits. Additional resources, information, and links to helpful web sites are available through the *Team Nutrition* program (www.tn.fcs.msue.msu.edu). Prevention of overweight during childhood requires a collaborative commitment within communities. Schools, families, health professionals, government agencies, profit and non-profit organizations must work together to promote physical activity and healthy eating. Strategies recommended in *The Role of Michigan Schools in Promoting Healthy Weight*¹³ include:

- Create a safe and supportive learning environment respectful of all body shapes and sizes.
- Encourage and promote environments where children can be physically active.
- Strengthen nutrition education and provide opportunities for healthy food selection.
- Work with families to encourage physical activity and healthful food choices.
- Identify community resources that help families with weight concerns.

Take action today! Bring a team together to share strategies and resources available in your community to promote healthy weight for children.

References

1. National Center for Health Statistics. Health, United States, 2002 With Chartbook on Trends in the Health of Americans. Hyattsville, Maryland: 2002. Available online at: www.cdc.gov/nchs/products/pubs/pubd/hus/tables/2002/02hus071.pdf.
2. Ogden, C.L., Flegal, K.M., Carroll, M.D., Johnson, C.L. (2002). Prevalence and trends in overweight among US children and adolescents, 1999-2000. *JAMA* 288:1728-32. Available online at <http://jama.ama-assn.org/issues/v288n14/rpdf/joc21462.pdf>.
3. Grunbaum, J.A., et al. (2002, June 21). Youth Risk Behavior Surveillance—United States 2001. *MMWR* 51(SS04), 1-64. Available online at <http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5104a1.htm>.
4. Whitaker, R.C., Wright, J.A., Pepe, M.S., Seidel, K.K., Dietz, W.H. (1997). Predicting obesity in young adulthood from childhood and parental obesity. *New England Journal of Medicine*, 337, 869-873.
5. U. S. Department of Health and Human Services. (2001). The Surgeon General's call to action to prevent and decrease overweight and obesity 2001. Washington, D.C. Available online at: www.surgeongeneral.gov/topics/obesity/calltoaction/fact_adolescents.htm.
6. American Diabetes Association. (2000). Type 2 diabetes in children and adolescents (consensus statement). *Diabetes Care*, 23(5), 381-389.
7. Dietz, W.H. (1998). Health consequences of obesity in youth: childhood predictors of adult disease. *Pediatrics*. 101(3), 518-525.
8. Strauss, R.S. (2000). Childhood obesity and self-esteem. *Pediatrics* 105(1), e15. Available online at: www.pediatrics.org/cgi/content/full/105/1/e15.
9. Kaiser Family Foundation. (1999, November). *Kids and media at the new millennium. A Kaiser Foundation Report*. Menlo Park, CA: Henry J. Kaiser Family Foundation.
10. Michigan State Board of Education. (2001). *The Michigan Physical Education Survey, 2000*. [Brochure]. Michigan Department of Education. Available online in 2003 at: www.mde.state.mi.us/.
11. Putnam, J. (1999). US food supply providing more food and calories. *Food Review*, 22(3), 2-12. USDA, Economic Research Service. Available online at: www.ers.usda.gov/publications/foodreview/sep1999/frsept99a.pdf
12. Cavadini, C., Siega-Riz, A.M., Popkin, B.M. (2000). US adolescent food intake trends from 1965 to 1996. *Archives of Diseases in Childhood*. 83(1), 18-24.
13. Michigan State Board of Education. (2001). *The role of Michigan schools in promoting healthy weight, A consensus paper*. Michigan Department of Education. Available online at: www.michigan.gov/documents/healthyweight_13649_7.pdf.

Family and Consumer Sciences program staff at MSU Extension can answer questions or help you learn more about money management, parenting, and food, nutrition and health issues. Michigan State University Extension educators integrate university and community resources to provide tools that help families succeed. For more information on Family and Consumer Sciences programs in Michigan, call your county MSU Extension office. Check the government pages of your phone book for contact information.

MSU is an affirmative-action, equal-opportunity institution. Michigan State University Extension programs and materials are open to all without regard to race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, marital status or family status. November 2002. Go to www.fcs.msue.msu.edu to print a copy of this fact sheet. This fact sheet may be copied for educational purposes with credit given to Michigan State University. This information is provided by the MSU Extension Food, Nutrition and Health Area of Expertise team.

Healthy Weight for Children

Resources for Parents and Caregivers

If My Child is Overweight, What Should I Do about It?

By Joanne Ikeda, MA, RD. University of California Extension Nutrition Specialist.

This 20-page booklet for parents provides information on how to help overweight children. It is written in a question and answer format including how to tell if a child is overweight, how to talk to a child about weight, suggestions for healthy food choices and advice on increasing physical activity.

Order from: ANR Communications, University of California, ph. 800.994.8849
<http://anrcatalog.ucdavis.edu> click on *Nutrition & Eating Right* then *Childhood Obesity*

Product Ordering Code: 21455

Language: English

Date: Revised 1998

Cost: \$3.00 each plus shipping/handling

Your Child's Weight. Help Your Child with Successful Weight Management.

From the USDA/ARS Children's Nutrition Research Center at the Baylor College of Medicine.

This 4-page pamphlet provides information on common causes of weight problems in children and offers suggestions for ways that families can work together to increase physical activity and have healthy eating habits. It encourages family goal setting and includes how to find professional assistance.

Order from: Children's Nutrition Research Center, 1100 Bates St., Houston, TX 77030,
e-mail to cnrc@bcm.tmc.edu

Language: English and Spanish

Date: 2001

Cost: free. Can also be downloaded and printed from the web site

www.bcm.tmc.edu/cnrc click on *Information Resources* then *Childhood Obesity (Overweight Children)*. [Help Your Child with Successful Weight Management.](#)

Coming soon - Healthy Kids Healthy Weight. Tips for Parents.

From the Michigan Department of Community Health and the Michigan Department of Education.

This colorful booklet provides practical tips to help parents role model healthy behaviors. Parents will be empowered to make eating healthy easy and being physically active fun for the whole family! Tips are included for breakfast, snacks, lunches, beverages and eating out as well as how to be active for life.

Order from: ordering information will be available in late 2003 at
www.emc.cmich.edu

Language: English

Date: 2003

Cost: free single copies to Michigan residents

MORE RESOURCES ON BACK

Helping Your Overweight Child.

From the Weight-Control Information Network, National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health.

This booklet provides information for parents on what causes children to become overweight, how to tell if a child is overweight and how to help an overweight child. Practical suggestions for helping children develop positive attitudes about eating and simple snack ideas are provided.

Order from: Weight-Control Information Network, ph. toll free 877.946.4627

Language: English

Date: 1997

Cost: free for 1-25 photocopies. Can also be printed from the web site <http://www.niddk.nih.gov/health/nutrit/pubs/helpchld.htm>. The web-text was last updated February 1998. The web-text is not copyrighted and users are encouraged to duplicate and distribute.

Childhood and Adolescent Obesity in America: What's a Parent to Do?

By Betty Holmes, MS, RD. University of Wyoming Extension 4-H Youth Specialist.

This 12-page booklet provides an overview on the failure of dieting, size acceptance, normal and healthy eating, the importance of physical activity, and successful strategies for parents of overweight children.

Order from: Office of Communications and Technology Resource Center, University of Wyoming; ph. 307.766.2115

Language: English

Date: June 1998

Cost: Can be printed from the web site <http://uwacadweb.uwyo.edu/cesnutrition/Publications.htm>

10 Steps for Parents.

From USDA Team Nutrition.

This 2-page pamphlet includes both a Food Guide Pyramid and a physical activity pyramid. Tips for making physical activity easy and for encouraging healthy eating at school and at home are provided.

Order from: Team Nutrition, order on-line (see web address below) or fax your name, address, publication name and # copies desired to fax # 703.605.6852

Publication #: USDA9 (English version), USDA75 (Spanish version)

Language: English and Spanish

Date: January 2002

Cost: free to schools and parents. Can also be downloaded and printed either in color or black & white at www.fns.usda.gov/tn click on Resources.

Compiled by Patricia Hammerschmidt, MS, Program Leader, Family and Consumer Sciences, Michigan State University Extension, on behalf of the Food, Nutrition and Health Area of Expertise Team. E-mail comments to hammersc@msue.msu.edu. May 2003

**MICHIGAN STATE
UNIVERSITY
EXTENSION**

MSU is an affirmative-action, equal-opportunity institution. Michigan State University Extension programs and materials are open to all without regard to race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, marital status, or family status. This information is for educational purposes only. Reference to commercial products or trade names does not imply endorsement by MSU Extension or bias against those not mentioned. This material may be copied for purposes of non-profit educational groups with credit given to MSU.

Strengthening Your Stepfamily

Stages of Stepfamily Development¹

Stage 1: Fantasy – The Grand Illusion

Illusions of stepfamilies come from not recognizing their uniqueness and differences. Instead, members attempt to masquerade as a nuclear family, negating the complexity of long-standing biological relationships. Another common illusion is that the new stepparent will rescue children from the excesses or inadequacies of the absent biological parent.

Stage 2: Confusion – What Are We Doing in a Stepfamily?

During this stage, suppressed feelings begin to emerge. Unclear roles and expectations can cause confusion and anger. A stepparent's attempts for positive relationships with stepchildren can be met with resistance, indifference or outright rejection. Between the stressful tasks of establishing a new spousal relationship, coping with children, managing multiple and often conflicting roles, and managing money shared by two homes, romance can start to lose its glow. The adults may begin to question the merit of their decision to marry. The children, on the other hand, sense the growing tension and experience the greatest fear of all - that this family won't work either.

Stage 3: Crazy Time – The Pain and Disappointment of Crisis

In this stage, as crises develop, the stepfamily can become divided into two camps. Whatever crisis forces the stepfamily into action, the chaos and struggles must be recognized as normal and inevitable.

Crisis is truly an opportunity to begin confronting the issues and working toward change. Sometimes it takes a crisis to clarify feelings, roles and boundaries and move family members to regroup and build strong relationships. Surviving the "crazy time" moves the family toward the next stage: stability.

Stage 4: Stability – Coming Together

As a stepfamily begins to stabilize, a sense of "us" or "our family" begins to emerge. Responsibility for making the family work is shared by all. Remember that stability does not mean staying the same. Rather, a stable family is adaptable and open to change.

Stage 5: Commitment – Finding the "Glue"

In some stepfamilies, this just happens over time. In others, it can be helpful to make a conscious resolution to be authentic, to trust, to connect, and to create an effective family unit. Crisis may still occur, but such times won't become quite so crazy. Now there is a basis for working on them together, with trust and love.

(continued on back)

The Effective Stepparent²

<p>Recognizes the importance of non-custodial parent</p> <ul style="list-style-type: none"> • Respects children's need and right to love that parent • Helps stepchildren nurture relationship by encouraging them to write, phone, visit • Allows pictures and mementos of biological parent without creating conflict • Invites parent to important milestone ceremonies and events • Strives to be added parent figure and friend rather than substitute parent 	<p>Understands family life cannot always be happy</p> <ul style="list-style-type: none"> • Accepts that problems exist • Understands that unhappy experiences teach children coping skills • Allows full expression of emotions whether negative or positive, pleasant or unpleasant
<p>Acknowledges existing bond between new spouse and children</p> <ul style="list-style-type: none"> • Realizes it's natural to feel closer to biological children • Reduces jealousy and competition for time and attention • Controls resentment when child and parent need time alone 	<p>Possesses the courage to be imperfect</p> <ul style="list-style-type: none"> • Rejects fairy-tale myths and unrealistic media portrayals of stepfamilies • Understands every mistake does not reflect a causal stepparent image • Realizes the way people learn is by making mistakes, thinking about them, and trying again • Shares own mistakes to give children permission to be imperfect and human
<p>Allows time for relationships to develop</p> <ul style="list-style-type: none"> • Focuses on process of developing as a family unit • Values each small success as evidence of relationship growth • Minimizes worrying or trying to force progress • Respects and accepts others as new family forms 	<p>Accepts grief and loss as part of life's experience</p> <ul style="list-style-type: none"> • Encourages children to face the reality of death or divorce that preceded stepfamily • Feels empathy, not sympathy, with children of loss • helps kids confront and express feelings that grief elicits • Provides strength and encouragement so children can move into the future
<p>Manages own relationships with each child</p> <ul style="list-style-type: none"> • Avoids interfering in other people's problems unless invited • Encourages family members to care for own needs and relationships 	<p>Lets go</p> <ul style="list-style-type: none"> • Permits children to belong to two families with a minimum of fuss • Allows children to spend time with peers, activities, other parent, without fearing stability of stepfamily is threatened • Plans family activities without forcing participation • Uses time away from children to enhance relationship with spouse

¹Elliot, B. "Strengthening Stepfamilies." University of Main Cooperative Extension, Androscoggin-Sagadahoc County Office.

²Adapted from Elizabeth Einstein and Linda Albert, "Pitfalls and Possibilities," one of four booklets in The Stepfamily Living Series (Ithaca, N.Y. and Tampa, Fla: Einstein and Albert, 1983), 14-16.

Adapted for the PAM Organizers' Packet with permission from
CARE - Community Assessment Referral and Education, Fraser, Michigan

Want to Help Save Lives by Reducing Youth Smoking?

Roughly half of all youth smokers usually buy their cigarettes either directly from retailers or vending machines or by giving money to others to buy for them. Another third typically get their cigarettes from others for free, and a smaller but significant percentage of kids obtain their cigarettes by shoplifting or other stealing.¹

- 1. Say “thank you” to clerks who check I.D.s when selling cigarettes (and alcohol). If there is a store manager around thank that person too.**

Some store owners tell their clerks not to check I.D.s and then they pay the \$50 fine for them if they get caught selling tobacco to a minor. Michigan Law imposes no penalty on the owner – only on the clerk and the youth buyer.

- 2. Ask store managers to put tobacco products behind the counter where kids can’t steal them.**

Tobacco distributors may be paying the store to put cigarettes or chew tobacco where they can be stolen. Tobacco is very addictive for most people, so letting kids steal it when they are young guarantees the tobacco company a customer until the person successfully quits or dies.

- 3. Report to the Police any stores who sell single cigarettes.**

Let the police know that you want them to enforce this law whenever they can. Kids who can’t afford a pack often start with single cigarettes. Let the clerk know that violating this law is a misdemeanor and the fine may be up to \$500.

- 4. Ask store managers not to promote tobacco use to kids by selling candy cigarettes or “Big League Chew” bubble gum. Ask them not to put tobacco products next to candy.**

The average high school senior who smokes regularly started in 4th grade.

- 5. Don’t give cigarettes to kids, don’t buy for them, and don’t let them steal cigarettes from you or other possible smokers in your home.**

Ninety percent of adult smokers started before they were 18 years old.

¹ CAMPAIGN for TOBACCO-FREE Kids, 1400 I Street NW, Suite 1200, Washington, DC 20005, Phone (202) 296-5469 · Fax (202) 296-5427 · www.tobaccofreekids.org.

Prevention Network
PO Box 4458, East Lansing, Michigan 48826-2258
1 - (800) 968-4968 · www.preventionnetwork.org
This may be copied and distributed.

Preventing Tobacco Use and Addiction Among Youth

What Parents Can Do

- Learn the facts about tobacco.
- Set a good example by not using tobacco.
- Give clear and consistent messages about the dangers of tobacco to your children.
- Provide your children with a tobacco-free environment at home.
- If you use tobacco, you can still help your children choose not to smoke or use spit tobacco. Your best move is to try and quit. A free Smoker's Quit Kit is available at 1-800-537-5666. Until you quit, don't use tobacco in your children's presence and share with them your own struggles with being addicted to tobacco.
- Connect with your kids by being involved in their day-to-day activities, getting to know their friends, and listening to what they are saying.
- Help your children critically analyze messages that glamorize tobacco use on television, in movies, and in magazines and other print media.
- Share tobacco-use prevention information with your children and talk with them about related homework assignments and projects.
- Join a school health committee and guide policies to prevent tobacco use.
- For more information on raising tobacco-free kids call, **1-800-537-5666** to receive a **Free *Talk It Out: A Parent's Guide to Kids and Smoking*** brochure.

GREAT IDEAS FOR CELEBRATING PARENTING AWARENESS MONTH 2004

March 2004 Begins a Second Decade of Parenting Awareness Month!

Whether you work as a community-wide coalition or a small committee, or as an individual, you can celebrate Parenting Awareness Month in a variety of ways. Each activity listed here has been carried out by a Michigan community. Call 1-800-968-4968 for additional activity ideas and samples.

- Form a local PAM coalition and begin planning parenting and family celebrations and activities for PAM 2004 and beyond.
- Invite other organizations in the community to join your efforts.
- Hang a 2004 PAM poster on your front door!
- Join forces and resources with other awareness campaigns. March is also: *National Reading Month*; *National Nutrition Month*; *National Talk to Your Teen About Sex Month*. April is: *Month of the Young Child*; *Child Abuse Prevention Month*; *Alcohol Awareness Month*.
- Create a list of community resources for parents, print and distribute widely—through businesses, schools, churches, libraries, agencies, bulletin boards. Ask grocery stores to stuff in their bags.
- Create a local calendar or flyer listing parenting education classes and parent network/group meetings offered during March and throughout the year.
- Create a calendar or flyer of local Parenting Awareness Month events. Distribute same as posters and resource lists.
- Create a local list of “things parents can do with children.” This can be distributed as a poster, tray liner, handout in libraries, schools, and other inventive ways.
- Seek resolutions from local governing bodies which support Parenting Awareness Month goals and affirm parenting (sample resolution in PAM Packet).
- Hold a local community or county-wide 2004 PAM Kickoff.
- Create a Parenting Awareness Month display or showcase in schools and local businesses.
- Take PAM posters and bookmarks to local libraries and bookstores for distribution.
- In January, libraries and bookstores receive PAM information. Visit your libraries and bookstores to encourage them to have special displays in March. Ask them to include information about your organization, events you plan, and the parenting resource list you have compiled.
- Encourage libraries and bookstores to provide a special display area during March featuring their parenting books and other multimedia parenting information.
- Encourage your public library to develop a list of their parenting books, tapes, and videos. Find unique ways to distribute the list to parents.
- Create a portable Parenting Awareness Month display. Make it available at local PAM and parenting activities.
- Help plan and/or promote parenting conferences held in during March and throughout the year, and encourage parents and others who work with parents and children to attend.
- Conduct poster and essay contests — through churches, schools, or community at large.
- Conduct educational events and community forums on parenting issues. Consider days, times, locations, and costs that make the events accessible to most parents. Provide child care.
- Focus on empowering people who raise children and supporting the good work parents do. Use titles, slogans, presenters, and materials that praise instead of blame.
- Enlist publications of local organizations, church bulletins, community newspapers, etc. in featuring parenting information during March.
- Consider non-traditional sites for parenting education — work sites, recreational centers, block club meetings, laundromats, street theater.

MORE PAM IDEAS ON BACK → → →

- ✦ Conduct free parenting education workshops throughout March. Provide child care.
- ✦ Take PAM posters everywhere you can think of — to schools, places of worship, work sites, community bulletin boards, city hall, your doctor's office, your hairdresser, your mechanic, day care centers, your neighbors, and the senior citizen center.
- ✦ Prepare a promotional video for local access cable. Do a series that features various parenting resources in your community.
- ✦ Plan Parenting Awareness Month events that involve **youth** and senior citizens.
- ✦ Visit local media; involve them in your efforts.
- ✦ Get parenting messages on local billboards.
- ✦ Work with local radio stations to run "Did you know . . ." radio spots featuring local parenting and family resources and parenting tips. Create and distribute a local calendar to match.
- ✦ Enlist local newspapers to feature parenting articles throughout the month of March.
- ✦ Work with local restaurants and fast foods to develop and use Parenting Awareness Month tray liners and placemats. Include parenting tips and local parenting resources information.
- ✦ Contact your legislators to involve them in local Parenting Awareness Month campaigns. Request a free copy of *Citizen's Guide to State Government*.
- ✦ Work with faith communities to highlight Parenting Awareness Month in newsletters, bulletins, discussion groups, and from the pulpit.
- ✦ Host a PAM celebration and give awards to "parent/family friendly" employers.
- ✦ Work with a local hospital to provide parenting tips and local resource lists to new parents.
- ✦ Work with a local agency to provide a parenting hotline.
- ✦ Plan a Parent's Day, Parenting Fair, or Family Fun Fest at a mall, or other community area, showcasing family and parenting resources and providing family friendly activities.
- ✦ Prepare folders with Parenting Awareness Month materials to be given to parents at parent/teacher conferences. Have students decorate the folder for their parent(s).
- ✦ Work with your local school district to hold weekly family nights throughout the month of March. Decide on a theme. Involve parents and youth!
- ✦ Encourage local businesses to provide paycheck stuffers with a Parenting Awareness Month message and the 10 parenting tips.
- ✦ Talk about Parenting Awareness Month in your own family.
- ✦ Design a family friendly slogan/logo and have a sweatshirt/t-shirt sale.
- ✦ Host a community "Family Dinner" with guest speakers or other fun activities.
- ✦ Organize a "family reading night" with your local literacy council, school district, church, work site, day care center, etc.
- ✦ Host a family workshop focusing on reading in the home, story telling, quality television viewing.
- ✦ Encourage local focus on grandparenting and other kinship care issues and resources.
- ✦ Designate a different parenting theme for each week in March and plan weekly activities around each theme.
- ✦ Hold a resource fair with/for agencies and organizations who serve parents and children so family-serving organizations become familiar with all resources and materials available in the community.
- ✦ Encourage daycare providers to plan fun parenting education opportunities. Let parents have input about resources and activities they'd like or need.
- ✦ Take items from the PAM Packet and create a bound booklet for families in your school, church, or community. Include local resource information.
- ✦ Plan special activities with a focus on fathers and celebrate the importance of fathers in childrens' lives. Involve fathers in the planning.
- ✦ Host an "appreciation" breakfast, lunch, or dinner for parents and other caregivers — or make it an "Appreciation Day!"

**Please share your PAM activities with us
at 1- 800-968-4968 or
pamcampaign@preventionnetwork.org
We will share ideas with others.
For PAM information call: 1-800-968-4968
For PAM materials: 1-800-626-4636**

Planning for Parenting Awareness Month, March 2004

Local Time Line for October 2003 - February 2004

COALITION BUILDING

- ❖ Invite appropriate people/groups to meet.
- ❖ Determine goals, activities, events for local Parenting Awareness Month.
- ❖ Decide how you will operate as a coalition, make decisions, and communicate.
- ❖ Decide on spokespersons for the group and media contacts.
- ❖ Determine a local clearinghouse for local PAM activities — *Where do people call for info? Where do workers report to or get assignments? What contact number will be on materials, publicity, and so forth? Who's responsible for events?*
- ❖ Make special assignments — *Who will do tray liner project? bookstore & library project? local resource list?*
- ❖ Determine fundraising needs and sources.
- ❖ Welcome newcomers. Find a role for everyone.

ACTIVITIES & EVENTS

- ❖ Start planning events or activities the coalition, group, or organization will sponsor.
- ❖ For a list of activities and events refer to *Ideas for Celebrating Parenting Awareness Month 2004* in the PAM Organizers' Packet.
- ❖ For producing a local parenting calendar — design and distribute forms for groups to report their events and activities. Set a deadline for obtaining information.
- ❖ For producing a local parenting resource list — design and distribute forms for individuals and groups to identify local resources.
- ❖ Work with employers to plan worksite parenting education opportunities.

OUTREACH AND PROMOTION

- ❖ Design a local media plan. Include media personnel in coalitions.
- ❖ Draw up lists of local organizations for contacting in January, and for including PAM info in their bulletins, and newsletters.
- ❖ Assign people to contact area churches, youth groups, civic organizations, work sites, agencies and groups with parenting related concerns.
- ❖ Design an outreach plan to local businesses. Include businesses in the coalition.
- ❖ Decide on a presentation script, develop materials needed, and assign people to approach local businesses beginning in January — for support, displays, inclusion in events.
- ❖ Plan use of Public Service Announcements with local tag line and contact numbers (call local radio and TV stations for more information).

RESOURCES

- ❖ Contact Parenting Awareness Michigan at 1-800-968-4968 for ideas for activities and events, and for other resources.
- ❖ Utilize the PAM Organizers' Packet as a tool to assist in planning for Parenting Awareness Month.
- ❖ Compile a list of local parenting programs and supports. Refer to *Developing a Local Parenting Resources List* in PAM Packet.
- ❖ Preview videos and printed materials, and other items for use during local PAM and parenting activities in March.
- ❖ Order PAM posters, bookmarks, and brochures from 1-800-626-4636 or 1-800-968-4968.

<<< REMINDER >>>

PLEASE REPORT IDEAS, PLANS, OR CONCERNS TO THE PAM CAMPAIGN FOR SHARING WITH OTHERS
IN *PREVENTION NETWORK NEWS*. 1-800-968-4968 or pamcampaign@preventionnetwork.org.

Developing a Local Parenting Awareness Month Coalition

PARENTING AWARENESS MONTH COALITIONS — an opportunity to mobilize communities to support their citizenry in their role as parents and caregivers.

PURPOSE: Local PAM coalitions bring diverse people and resources together, for a focused and systematic approach to increasing parent education and involvement in the community.

FUNCTION: In a PAM Coalition individuals and organizations retain their identity but agree to work together to achieve local Parenting Awareness Month goals, during the March campaign or year around.

POSSIBLE FUNCTIONS FOR A PAM COALITION INCLUDE:

- ❑ setting local priorities
- ❑ planning events
- ❑ providing a forum for community issues or concerns
- ❑ creating awareness about or ensuring ready access to parenting education and resources
- ❑ working with the media
- ❑ getting information to local organizations
- ❑ involving more parents and community members
- ❑ advocating for policies that support parents.

POSSIBLE COALITION MEMBERS:

■ parent organizations and networks ■ MCRUD and Safe Communities coalition members ■ religious communities/clergy ■ businesses ■ civic organizations, fraternities, clubs ■ city councils and county commissions ■ local public health, mental health, social services, substance abuse services ■ 4-H and Extension programs ■ local girl and boy scout councils ■ youth organizations ■ law enforcement, judicial systems, juvenile justice ■ neighborhood organizations ■ child welfare organizations ■ RSVP and other senior citizen programs ■ Schools kindergarten through college ■ health care providers and hospitals ■ Coordinated Child Care Councils, day care centers and workers ■ community leaders ■ local media.

CHARACTERISTICS OF COALITIONS THAT WORK:

- ❑ Clearly defined and agreed upon operating procedures, democratic decision-making.
- ❑ Clear and agreed upon goals—both short term and long term.
- ❑ Facilitative leadership and delegation of responsibility.
- ❑ Meaningful roles for everyone; clear definition of roles.
- ❑ Processes for bringing closure, for evaluating efforts, and for revising or renewing mission and goals.
- ❑ A coordinating "headquarters."
- ❑ Good communication—within the coalition and with the community.
- ❑ Responsiveness to community input.
- ❑ A working relationship with media.
- ❑ A collaboration mentality, which includes:
 - **Focus** — setting aside turf issues to accomplish a common goal
 - **Trust** — believing others will do their part and do it well and will let you do yours.

As you develop a local PAM coalition consider the following —

“Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it is the only thing that ever has.”

—Margaret Mead

“It's amazing how much can be accomplished when it doesn't matter who gets the credit.”

—anonymous wise person

For more information about coalitions or Parenting Awareness Michigan call Prevention Network at 800-968-4968.

Developed for the 2004 PAM Organizers' Packet

**SAMPLE LOCAL RESOLUTION DECLARING MARCH 2004
AS PARENTING AWARENESS MONTH**

A Parenting Awareness Month resolution can be proclaimed by local governing boards and school boards. Ask a city council member, county commissioner, or school board member to sponsor a local resolution declaring March as Parenting Awareness Month in your community, county or school district. Wording below, in parentheses, indicates where to personalize with your local information.

***A RESOLUTION RECOGNIZING MARCH, 2004, AS PARENTING AWARENESS MONTH
IN (COMMUNITY/COUNTY/DISTRICT)***

Sponsored by: (NAME OF PERSON)

WHEREAS, March is Parenting Awareness Month in the State of Michigan; and

WHEREAS, Parenting Awareness Month celebrates people who are raising children; and

WHEREAS, Parenting Awareness Month seeks to draw public attention to the critical importance of parenting in helping children to become healthy, caring, and contributing citizens; and

WHEREAS, Parenting Awareness Month seeks to promote education and resources for developing parenting skills throughout the year; and

WHEREAS, Parenting Awareness Month encourages the development of local parent networks; and

WHEREAS, Parenting Awareness Month encourages everyone to participate in the lives of all of our children; now, therefore, be it

RESOLVED, That the (SPONSORING GROUP) declares March, 2004, as Parenting Awareness Month in (COMMUNITY/COUNTY/DISTRICT); and be it further

RESOLVED, That the (NAME OF COMMUNITY/COUNTY/DISTRICT) supports all efforts, and resources, particularly local, that promote, encourage, support and educate the community on parenting issues; and be it finally

RESOLVED, That the (NAME OF COMMUNITY/COUNTY/DISTRICT) upholds the vision that every person, everywhere, every day understands their responsibility in raising our children.

Adopted (MONTH/DAY/YEAR)

(SIGNATURE OF LEAD MEMBER OF SPONSORING GROUP)

PROMOTING YOUR LOCAL PARENTING AWARENESS MONTH AND PARENTING ACTIVITIES

LOCAL PAM ORGANIZERS: It is important to let parents know how you are celebrating Parenting Awareness Month, 2004, in your community.

The following format can be used as a guide for informing your local media about your parenting events, activities, and resources. Remember to use organization letterhead, if available. Take to local newspapers, radio, and TV stations. List a contact who is a reliable spokesperson and available. Make follow-up telephone calls.

Please note the sample format below:

For Immediate Release

(CURRENT DATE)

Contact: (NAME)
(AREA CODE/PHONE #)

(NAME OF YOUR ORGANIZATION) Celebrates
Parenting Awareness Month in (CITY OR TOWN)!

(YOUR CITY or TOWN), MI. March is Parenting Awareness Month in Michigan. As part of this state-wide effort, (NAME OF YOUR ORGANIZATION) will be joining hundreds of parenting groups from across Michigan to celebrate Parenting Awareness Month in (YOUR CITY or TOWN).

The (YOUR CITY or TOWN) community plans to celebrate Parenting Awareness Month with (LIST OF EVENTS) or (NAME OF EVENT). See the attached.

Instructions for an attachment: If complete information about your event(s) will not fit this page, provide an attachment. This could be an event flyer, or a bulleted list of activities. List events or activities; include date/time/place; include any unique points of interest to your community.

Parenting Awareness Month celebrates the people who raise our children, and seeks to:

- Draw public attention to the critical importance of effective parenting to create children who grow up to be healthy, caring, contributing citizens.
- Promote education and resources for developing parenting skills throughout the year.
- Encourage and assist in the development of parent networks throughout Michigan.
- Promote local parenting events in March.

Groups, individuals, and organizations are encouraged to participate in the Parenting Awareness Month celebration in (CITY or TOWN). For more information on how to be part of this parenting celebration, call (NAME) from (ORGANIZATION) at (AREA CODE/PHONE NUMBER).

For information about Parenting Awareness Michigan and Parenting Awareness Month call 1-800-968-4968 today.

DEVELOPING A LOCAL PARENTING RESOURCES LIST AND WHAT TO INCLUDE ON YOUR LIST

The PAM Campaign Encourages Organizers to Develop a Local Parenting Resources List.

- Include resources that address a range of issues and special needs. Families today are diverse, and a variety of people are involved in raising children.
- Consider programs in agencies, churches, and schools, legal aid, credit counseling, shelters, councils on domestic assault, and programs that may be offered by fraternal and professional organizations, and many other resources for both general and special parenting needs.
- Include also the resources of volunteer community groups — parent organizations, self-help groups, civic and fraternal/sorority organizations, clubs, residential organizations, faith communities, ethnic organizations, etc.
- Include what is available in your community and also any state and federal resources that may be helpful to parents. Update regularly.

The following resources offer direct parenting education, services, or support, or can give you information about local affiliates and resources for inclusion on your local list—

**These are suggestions for developing a resource list,
and should not be viewed as a complete list.**

1. **Community mental health agencies, county health departments**
Listed in phone books under county
2. **Family Independence Agency**
Listed in phone books by county and under State of Michigan
3. **Intermediate School Districts (ISDs), Regional Educational Service Districts (RESDs), or Regional Education Service Administrations (RESAs)**
Listed in phone books under county, or in yellow pages under "Schools" (by county + ISD, RESD, or RESA).
4. **Michigan State University Extension County Offices**
Listed in phone books under county + "Cooperative Extension Services."
5. **Child Abuse Prevention Councils and Child Abuse and Neglect Councils. For Contact with County Councils:** The Children's Trust Fund, 517/373-4320
6. **Grandparents Raising Grandchildren**
 - ▶ American Association of Retired Persons (AARP) Grandparent Information Center, 202/434-2296; www.aarp.org
 - ▶ Kinship Care Resource Center, 517/355-9600 or 800/535-1218
 - ▶ Michigan Office of Services to the Aging, Bonnie Graham, 517/373-9360; www.miseniors.net
7. **Michigan 4C / Community Coordinated Child Care.**
For referral to local 4-C, contact: 1-866-424-4532 (to connect to your regional office); www.mi4c.org
8. **Michigan Parent Teacher Student Association.** Check with local schools or contact:
Michigan PTA, 101 N. Washington Avenue, Lansing, MI 48906, 517/485-4345; www.michiganpta.org
9. **Toll-free help lines and crisis lines (statewide, 24 hour):**
 - Parent HELPLine, 1-800-942-HELP (4357)
 - RAPLine, 1-800-292-4517 (Runaway Assistance Program)
 - Vulnerable Adult Helpline, 1-800-996-6228
10. **Parents Supporting Parents — for persons raising children with fetal alcohol syndrome or effects:**
 - ▶ Barb Wybrecht, 616/241-9127
11. **MiChild:** Health Insurance for uninsured children under the age of 19. Call: 888/988-6300.

(continued on back)

12. **Michigan Foster & Adoptive Parent Association**
2450 Delhi Commerce Dr., Suite #10, Holt, MI 48842
800/632-4180, 517/694-1056
13. **Parents of children with special health care needs — resources, support, advocacy:**
 - ▶ Resources Unlimited Dedicated to You (RUDY), 1-800-262-0650 (toll free parent line), 517/726-0200 (office)
 - ▶ Family Information Exchange, 1-800-292-7851
 - ▶ ARC Michigan, 517/487-5426; www.arcmi.org
14. **Michigan Protection and Advocacy Services, Disabled Citizens and Mental Health Divisions**
106 W. Allegan, Suite #300, Lansing, MI 48933-1706, 517/487-1755
15. **Parents or Children with Attention Deficit Disorders:**
 - ▶ ADD Center of Ann Arbor, 342 S. Ashley, Ann Arbor, MI 48104, 734/761-4717
 - ▶ Children & Adults with Attention-Deficit/Hyperactivity Disorders (CHADD), 1-800233-4050; www.chadd.org
16. **Multi-Purpose Collaborative Bodies (MPCBs) — county level human services coordinating bodies:**
Access through Community Mental Health (see at #1) or Intermediate School District (see at #3).
17. **Michigan Interagency Family Preservation Initiatives (MIFPI) — Interagency services to avoid out-of-home placements of children served by mental health, FIA, or probate court systems:**
Reached through Community Mental Health or FIA.
18. **Even Start Programs — family-centered educational services to improve literacy skills of parents and assist children to reach full learning potential:**
Renée Demars-Johnson, Michigan Department of Education, 517/241-0162.
19. **Early On Programs—family-centered services for children 0-3 with established conditions and developmental delays:** 1-800-EARLY ON. Or access through ISD (see at #3)
20. **Programs and resources for teen parents:**
Reached through county health departments, Community Mental Health, FIA (see at #2); ISD (see at #3)
21. **Internet resources for parents:** Consider including a list of parenting resources on the Internet.
Call Prevention Network, 800-968-4968, for a starter list.
22. **Substance Abuse Coordinating Agency Prevention Professionals:**
Call Prevention Network, 800/968-4968, for name and telephone number.
23. **Traffic safety contacts (for councils, community programs, and resources):**
Michigan Office of Highway Safety Planning, 517/336-6477.
24. **Lead Poisoning information:**
 - ▶ The Childhood Lead Poisoning Prevention Project, 517/335-8885
 - ▶ United Parents Against Lead of Michigan (UPAL), 1-877-623-2688
25. **Girl Scouts and Boy Scouts, and Boys and Girls Clubs:** Listed in phone books under Business Pages.
26. **Parent Networks — addressing community norms regarding alcohol, tobacco, and other drug use and supporting adolescents in no-use choices.** For referral to a local network: Prevention Network, 800/968-4968.
27. **Children's Charter of the Courts of Michigan, Inc.:** 517/482-7533
28. **Michigan Coalition to Reduce Underage Drinking (MCRUD):** 1-800-968-4968; www.mcrud.org
29. **Michigan Resource Center (MRC):** Clearinghouse for alcohol, tobacco, and other drug information, 1-800-626-4636; www.michiganresourcecenter.org
30. **National Clearinghouse for Alcohol and Drug Information (NCADI),** 1-800-487-4889; www.health.org
31. **National Council on Alcoholism and Drug Dependency of Michigan,** 1-800-334-3400.
32. **American Council for Drug Education,** 1-800-488-DRUG; www.acde.org
33. **WIC Program (Women, Infants, and Children),** 1-800-26-BIRTH
34. **Mental Health Services to Children and Families,** 517/335-9261

PARENTING AWARENESS AND THE BUSINESS COMMUNITY

March is Parenting Awareness Month

How Businesses Can Support Parenting Awareness Michigan / Parenting Awareness Month (PAM) and Its Goals —

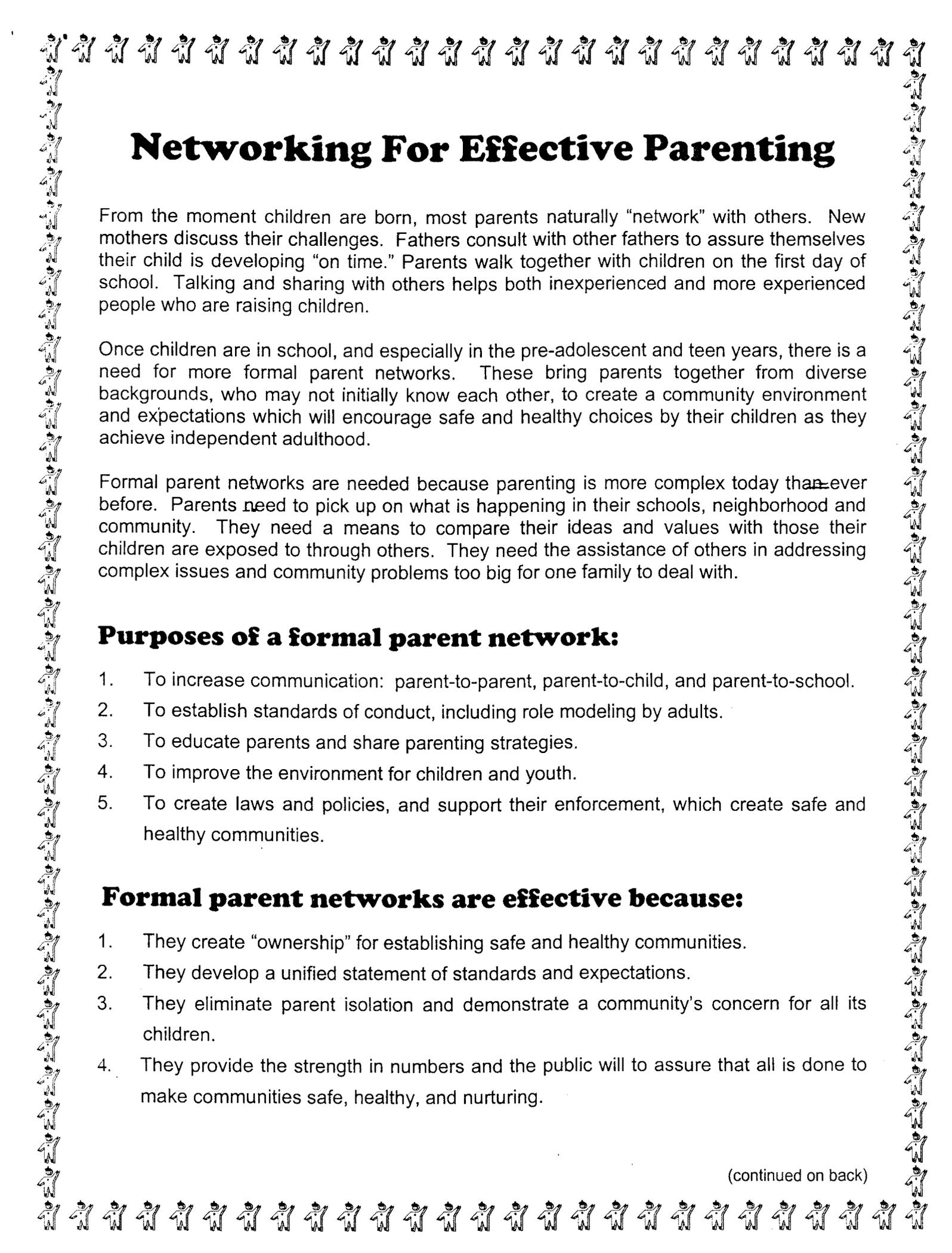
1. Join a Parenting Awareness Month coalition or parenting-related collaborative. Share your expertise. Loan an executive or worker to provide training and technical assistance.
2. Donate money or make in-kind contributions of materials, printing, technology, specialty items or postage.
3. Offer to sponsor a local Parenting Awareness Month activity. Lending your name can add stature and credibility to efforts.
4. Encourage employees to organize a company-wide Parenting Awareness Month activity. Ask Employee Assistance Programs to focus on the PAM campaign and its goals by offering parenting education, child development, or stress management workshops.
5. Use corporate vehicles to publish information about the importance of effective parenting and the resources available to improve parenting skills and support people raising children.
6. Share corporate advertising space. Reserve a corner of your space for a helpful message that supports parents.
7. Encourage volunteer participation by employees in local PAM events, parenting education, local child abuse and substance abuse prevention activities, and to serve on boards, staff committees, raise funds, etc.
8. Establish or review "family-friendly" policies, such as benefits, day care, maternity/ paternity leave, and any other activities that focus on employees' families.
9. Distribute parenting materials to your employees, or create an inviting parenting resources information area in your place of business.
10. Reach out to at least one other corporation or business to ask them to join you in support of Parenting Awareness Michigan / Parenting Awareness Month.

➡ For PAM information: 1-800-968-4968

➡ For PAM materials: 1-800-626-4636

How Local PAM Campaigns Can Involve Local Businesses —

1. Take this list and PAM Organizers' Packets to local businesses. Invite their participation. (For additional information, *10 Tips on Doing Parenting Business With Business*, is available by calling Michigan Resource Center at 1-800-626-4636.)
2. Include local business people in your organizing. Give them a meaningful role. Listen to their ideas. Let them know they can offer something besides money.
3. Include businesses in local coalitions. Use their ideas for others who should be included. Have them make contacts.
4. Offer to conduct Parenting Awareness Month education and other parenting events at local work sites.



Networking For Effective Parenting

From the moment children are born, most parents naturally “network” with others. New mothers discuss their challenges. Fathers consult with other fathers to assure themselves their child is developing “on time.” Parents walk together with children on the first day of school. Talking and sharing with others helps both inexperienced and more experienced people who are raising children.

Once children are in school, and especially in the pre-adolescent and teen years, there is a need for more formal parent networks. These bring parents together from diverse backgrounds, who may not initially know each other, to create a community environment and expectations which will encourage safe and healthy choices by their children as they achieve independent adulthood.

Formal parent networks are needed because parenting is more complex today than ever before. Parents need to pick up on what is happening in their schools, neighborhood and community. They need a means to compare their ideas and values with those their children are exposed to through others. They need the assistance of others in addressing complex issues and community problems too big for one family to deal with.

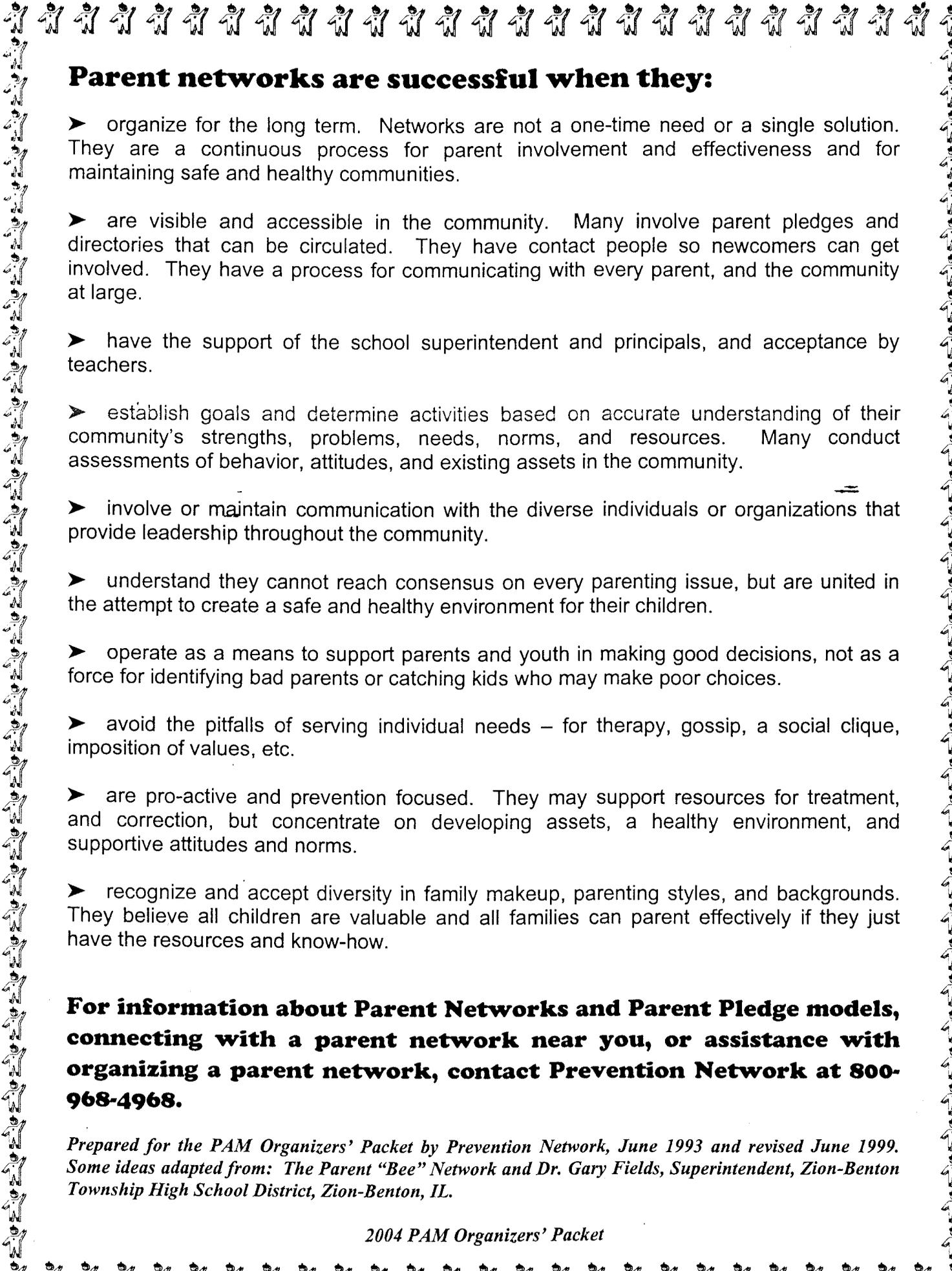
Purposes of a formal parent network:

1. To increase communication: parent-to-parent, parent-to-child, and parent-to-school.
2. To establish standards of conduct, including role modeling by adults.
3. To educate parents and share parenting strategies.
4. To improve the environment for children and youth.
5. To create laws and policies, and support their enforcement, which create safe and healthy communities.

Formal parent networks are effective because:

1. They create “ownership” for establishing safe and healthy communities.
2. They develop a unified statement of standards and expectations.
3. They eliminate parent isolation and demonstrate a community’s concern for all its children.
4. They provide the strength in numbers and the public will to assure that all is done to make communities safe, healthy, and nurturing.

(continued on back)



Parent networks are successful when they:

- ▶ organize for the long term. Networks are not a one-time need or a single solution. They are a continuous process for parent involvement and effectiveness and for maintaining safe and healthy communities.
- ▶ are visible and accessible in the community. Many involve parent pledges and directories that can be circulated. They have contact people so newcomers can get involved. They have a process for communicating with every parent, and the community at large.
- ▶ have the support of the school superintendent and principals, and acceptance by teachers.
- ▶ establish goals and determine activities based on accurate understanding of their community's strengths, problems, needs, norms, and resources. Many conduct assessments of behavior, attitudes, and existing assets in the community.
- ▶ involve or maintain communication with the diverse individuals or organizations that provide leadership throughout the community.
- ▶ understand they cannot reach consensus on every parenting issue, but are united in the attempt to create a safe and healthy environment for their children.
- ▶ operate as a means to support parents and youth in making good decisions, not as a force for identifying bad parents or catching kids who may make poor choices.
- ▶ avoid the pitfalls of serving individual needs – for therapy, gossip, a social clique, imposition of values, etc.
- ▶ are pro-active and prevention focused. They may support resources for treatment, and correction, but concentrate on developing assets, a healthy environment, and supportive attitudes and norms.
- ▶ recognize and accept diversity in family makeup, parenting styles, and backgrounds. They believe all children are valuable and all families can parent effectively if they just have the resources and know-how.

For information about Parent Networks and Parent Pledge models, connecting with a parent network near you, or assistance with organizing a parent network, contact Prevention Network at 800-968-4968.

Prepared for the PAM Organizers' Packet by Prevention Network, June 1993 and revised June 1999. Some ideas adapted from: The Parent "Bee" Network and Dr. Gary Fields, Superintendent, Zion-Benton Township High School District, Zion-Benton, IL.

Key Elements of Effective Parenting Programs

The following guidelines are recommended by the Center for Substance Abuse Prevention (CSAP) as key elements of effective parenting programs focusing on alcohol, tobacco, and other drug (ATOD) prevention.

1. Knowledge of the Target Population

Base the program or prevention effort on a clear understanding and definition of the populations and groups to be influenced. Give careful consideration to their cultures, value systems, and likelihood of responsiveness to the effort.

2. Clarity and Realism of Expected Results

Focus the program or prevention effort on specific, realistic goals.

3. Supported Research Based Evidence of Potential Effectiveness

When available, gather and use reliable evidence of effectiveness based on experience from comparable programs to select and guide the program or prevention effort.

4. Conceptual Soundness

Use a logical conceptual framework to connect the program or prevention effort with its intended results and ultimately with the overall goal of reducing substance abuse.

5. Inclusive Participation

Include in the program or prevention effort activities that secure and maintain buy-in of key decision makers and leaders as well as of those organizations and individuals who directly or indirectly will be responsible for implementing the program or effort.

6. System Integration

Design and implement the program or prevention effort to build on and, in turn, support related prevention efforts.

7. Appropriate Structuring of the Effort

Carry out the program or prevention effort through activities consistent with the availability of personnel, resources, and realistic opportunities for implementation.

8. Appropriateness of Timing, Intensity, and Duration

Time the program or prevention effort so that implementation coincides with a period of peak community concern OR the target population's readiness for the change intended.

9. Attention to Quality of Delivery

Design and carry out the program or prevention effort for the highest possible quality in each step of its implementation.

10. Commitment to Evaluation and Effort Refinement

Pay adequate attention to monitoring, and process and outcome evaluation in order to measure success of the effort in producing desired results.

Resources for effective parenting for ATOD prevention programs: SAMHSA's National Clearinghouse for Alcohol and Drug Information, 1-800-729-6686, <http://www.health.org> & <http://www.samhsa.gov/centers/csap/modelprograms>.

MICHIGAN INITIATIVE TO REDUCE UNDERAGE DRINKING

The initiative includes the programs described below. Youth and parents are the most important components of the initiative and active in communities throughout Michigan. By educating themselves and reaching others, they are creating the social changes which will achieve underage drinking prevention goals. Anyone can get involved and use the resources of these programs.

Michigan Coalition to Reduce Underage Drinking (MCRUD) Steering Committee

The MCRUD mission is to reduce underage drinking by assisting individuals, grassroots groups, and organizations in their efforts to reduce underage alcohol use in communities. Support staff, a MCRUD Coordinator, and program specialists assist anyone interested in reducing and preventing underage alcohol use. The committee meets monthly to coordinate efforts within the initiative. They emphasize community level approaches and the meaningful involvement of youth in all aspects of addressing underage alcohol use. They also identify and take action on issues which require a statewide approach.

The Steering Committee has adopted a "MCRUD Agreement," which outlines factors contributing to underage drinking and a range of strategies to address these which target the environment as well as individuals. The Agreement is available for local communities to endorse and adopt strategies from. MCRUD can provide assistance and resources for carrying out strategies.

MCRUD Regional Coalitions

At any time, several regional coalitions are in development with funding through the initiative, and others have become established and continue their efforts with local support. In their communities they are addressing environmental issues related to underage alcohol use—law enforcement, availability, adult role modeling, media influences, and so forth. They are a significant resource to others who want to become involved.

MCRUD Teen Leadership Team

MCRUD has a leadership team of youth from around Michigan. They help identify issues for Steering Committee action. They also work with local youth groups to carry out projects that will create change in their communities and contribute to a "groundswell" that reduces underage drinking factors statewide.

Grants to Address Underage Drinking

Through Prevention Network, Environmental Change grants up to \$2500 are available to address the underage drinking issues in a given community. Project strategies must be designed to address such environmental factors as availability, consistent enforcement, industry promotion, adult role modeling, etc. Youth should be substantially involved.

Reaching 18-21 Year Olds in the Workplace

Youth who are underage but out of high school and not in college are a challenge to reach with prevention. MCRUD funded a model project which succeeded in doing this through a team of management and youthful employees at a grocery store in the VG's Market chain. A manual and training are available for replication of this project.

Michigan Campus and Community Coalition for Prevention

The Michigan Campus and Community Coalition for Prevention is a statewide leadership initiative addressing alcohol, tobacco, other drugs and violence on Michigan campuses. The Coalition is open to individuals, organizations, campus administrators, law enforcement and judicial personnel, and campus/community coalitions. This leadership initiative addresses underage and high risk drinking by Michigan college students.

(continued on back)

Prevention Network partners through the Coalition with the Michigan region of The Network Addressing Collegiate Alcohol and Other Drug Issues to schedule meetings and trainings that focus on prevention issues. These issues include: reducing underage drinking; changing college drinking norms; building effective campus/community coalitions; and complying with federal requirements for informing students of alcohol and other drug health risks, federal and state laws, campus policies, and alcohol and other drug resources.

The Coalition supports "Campus Connections," a program committed to helping entering freshmen make a successful transition to college without alcohol, tobacco or other drugs. Printed brochures for students and parents are available from Prevention Network

Law Enforcement Programs

Two programs, Spotlight and LEGAL, help law enforcement partner with retailers to curb alcohol purchase by or for underage youth. These involve compliance checks as well as training, manuals, media materials, and other resources. Two additional programs combine enforcement and education to create a community climate that discourages underage alcohol use. Through Party Patrol programs, law enforcement works with community groups and schools to identify parties where youth are drinking and employ safe dispersal methods. The Lookout program has law enforcement working with event organizers to deter underage drinking at festivals, concerts, car shows, and other community events.

Involvement of Judges and Prosecutors

Resources have been developed to meet the need for training prosecutors and judges on minor-in-possession alcohol laws and related issues, social and legal consequences for youth, best practices being used throughout the state, alternative sentencing and the consequences of plea bargaining. As part of this, the "Courageous Decisions" program uses video based discussions with youth and actual conducting of court sessions within middle and high schools to encourage healthy decisions and understanding of the consequences for poor decisions.

Public Information and Education

Many items have been developed targeting youth, their parents, and communities at large. These discuss the dangers of underage alcohol use, minor-in-possession and other related laws, what parents and communities can do to support healthy choices by young people, and how youth themselves can be involved. Materials are available primarily through Michigan Resource Center, 800-626-4636. They also carry a variety of materials for the zero tolerance campaign, *Zero Tolerance Means Zero Chances*.

Information about underage drinking and other alcohol issues is a regular feature in *Network News*, a free periodical issued by Prevention Network. They also supply a public service announcement prepared by FACE—Truth and Clarity on Alcohol, which communities may use without charge. Training is also provided through Prevention Network which focuses on strategies for changing the environment of underage drinking—enforcement of laws and policies, advertising and promotion, community norms, adult role modeling, etc. Call 800-968-4968.

Youth, Parent, Community and Other Organizations

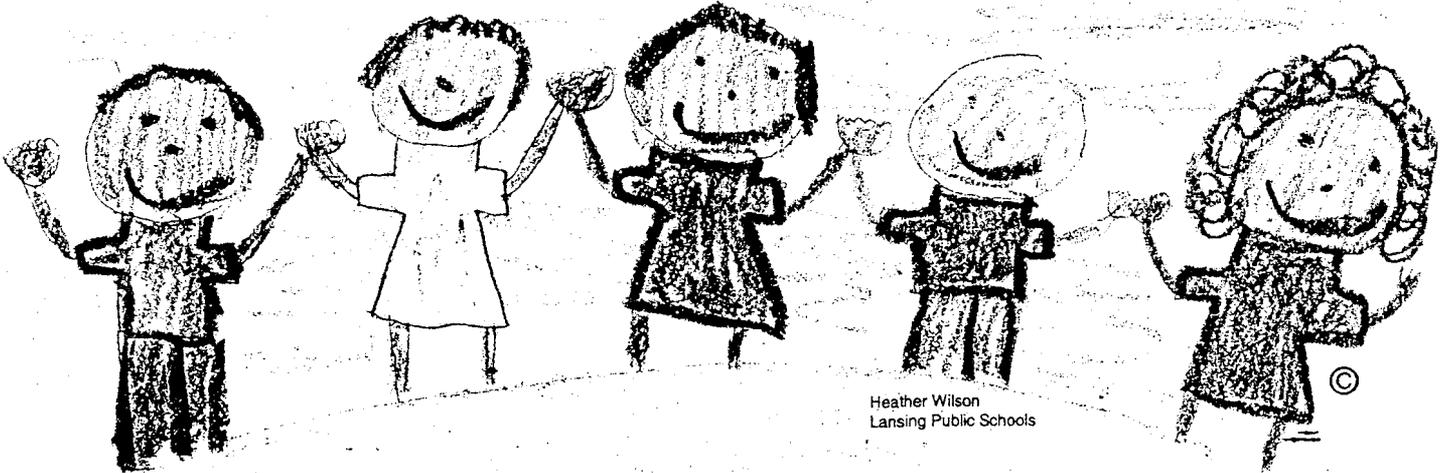
Many organizations in Michigan have focused on underage drinking prevention. Many of these have partnered with the underage drinking initiative; many continue to work independently at both state and local levels. Anyone concerned about underage drinking can benefit from connection with their local organizations and familiarity with other resources in the state. For referral, contact Prevention Network.

FOR CONNECTION WITH COMPONENTS OF THE UNDERAGE DRINKING PREVENTION INITIATIVE AND FOR HELP GETTING INVOLVED, CALL PREVENTION NETWORK AT 800-968-4968.

The underage drinking prevention initiative is supported by Prevention Network with funding provided through the Michigan Department of Community Health/Office of Drug Control Policy and Michigan State Police, Office of Highway Safety Planning.

APRIL IS Month of the

Celebrate Children



Young Child[®]

Special Events and Focus Weeks

Each April, Michigan's communities celebrate the Month of the Young Child[®] (MOYC[®]). MOYC focuses our attention on early childhood issues and highlights the needs of young children.

2004 MOYC Focus Weeks

- April 1-10 Celebrating Community Partnerships
- April 11-17 Promoting Healthy Children and Families
- April 18-24 Recognizing Early Childhood Professionals
- April 25-30 Advocating on Behalf of Children and Families

Help celebrate the Month of the Young Child!

For information, contact:
(517) 336-9700 or (800) 336-6424
MOYC@MiAEYC.org
www.MiAEYC.org

Purple Ribbon Campaign

Displaying a purple ribbon shows you care about young children and are aware of their needs. Place a purple ribbon on your lapel, on your car, or in your window; place one on your briefcase, handbag or door. Ask your child to wear a purple ribbon too!

Doll Campaign

Write a "true story" about a child you know and attach it to a paper doll. Display the project or send it to a legislator or community leader. Call MiAEYC for instructions.

Various days in April

Child Care Job Shadow Day

A job shadow day allows community leaders to "work" in child care centers or with home providers. This allows them to see the complexities and the skills involved in the child care profession.

April 18-24, 2004

Early Childhood Professional Recognition Week

Make a point to participate in this special week, which recognizes and thanks the many dedicated people who educate and care for young children.

Various days in April

Kite Day

All who work with and care about young children are encouraged to sponsor a Kite Day at their homes, centers, schools, or in their communities. Contact MiAEYC for information.

Ways to Celebrate Month of the Young Child® 2004

Week One: Celebrating Community Partnerships April 1–10

When public and private enterprises work together, they can more effectively provide for the well-being of children and their families.

- Wear a purple ribbon in support of MOYC®
- Work on a community fund-raiser
- Make a donation of time or money to your local Child Abuse Council
- Visit your child's classroom

Week Two: Promoting Healthy Children and Families April 11–17

Prevention is key in promoting healthy children and families; it assures excellent health for most children and allows more affordable treatment when children suffer serious health problems.

- Healthy babies should sleep on their backs
- Routine dental visits should begin at age 3
- Time is the best thing you can spend on your child
- Well-balanced meals support growth and development

Week Three: Recognizing Early Childhood Professionals April 18–24

Research and experience show the social and economic benefits of a quality early childhood experience—please recognize the professionals who provide quality education and care.

- Smiles are an easy way to show appreciation
- Offer to help in your child's classroom
- Catch the moment! Donate a roll of film and prepaid film developing to your child's school
- Help children create thank-you notes or gifts for their caregivers and teachers

Week Four: Advocating on Behalf of Children and Families April 25–30

Although most of our children live in healthy, nurturing environments, too many do not. We have sufficient resources to assure the well-being of every child, but it will take citizen advocacy to make that happen.

- Protect children from second-hand smoke
- Trade off child care with a friend
- Celebrate your family; create a family tree
- Register to vote

For information, contact MiAEYC: (517) 336-9700 or (800) 336-6424
Email: MOYC@MiAEYC.org
Web: www.MiAEYC.org

Month of the Young Child and MOYC are registered service marks of the
Michigan Association for the Education of Young Children.

Guide to 2004 PAM Organizers' Packet

The 2004 PAM Organizer's Packet is filled with items for use in your local parenting activities during Parenting Awareness Month and anytime throughout the year. There are several new items. All familiar favorites have been updated.

- ➔ Contents are camera-ready for you to copy and distribute.
- ➔ Helpful materials for PAM organizers and people who work with parents are located in the left side pocket.
- ➔ Materials developed for parents are located on both sides of the packet.
- ➔ PAM Posters and Bookmarks are wonderful for EVERYONE!
- ➔ You are encouraged to translate materials to languages used by parents and families in your community.

Parenting Awareness Michigan / Month Items

- ☑ Greetings from the PAM Steering Committee
- ☑ 2004 PAM Invitation to Participate / Local Activities
- ☑ 2004 PAM Poster and Bookmark
- ☑ 2004 Executive Declaration for PAM
- ☑ PAM Brochure
- ☑ 2004 PAM & Parenting Materials Order Form

Completely New Items* (located left side pocket)

- ☑ When Mom Drinks Baby Pays Too!
- ☑ 100 Ways for Parents to Be Involved in Their Child's Education
- ☑ Parent Involvement: Going From Middle to High School
- ☑ Fatherhood
- ☑ Working Parents and the Time Crunch
- ☑ Promoting Healthy Weight for Children
- ☑ Healthy Weight for Children: Resources for Parents
- ☑ Nurturing Your Child's Mental Health
- ☑ How Parents Can Help Children Cope with Divorce
- ☑ Strengthening Your Stepfamily
- ☑ Want to Help Save Lives by Reducing Youth Smoking?
- ☑ Preventing Tobacco Use and Addiction Among Youth

Coalition / Parent / Community Groups

- ☑ Great Ideas for Celebrating PAM 2004
- ☑ Planning for PAM 2004: Local Timeline
- ☑ Developing a Local PAM Coalition
- ☑ Sample Local PAM Resolution
- ☑ Promoting Your Local Parenting Activities
- ☑ Developing a Local Resources List
- ☑ Parenting Awareness & the Business Community
- ☑ Networking for Effective Parenting
- ☑ Key Elements of Effective Parenting Programs
- ☑ Michigan Initiative to Reduce Underage Drinking
- ☑ April is Month of the Young Child

2004 PAM Organizers' Packet, Prevention Network, 1-800-968-4968

Parenting Information

- ☑ Effective Parenting Includes . . . (English/Spanish)
- ☑ 31 Ways to Build Your Child's Self-esteem
- ☑ Words Your Child Needs to Hear
- ☑ A Dozen Ways to Strengthen Your Family
- ☑ 10 Steps to Positive Parenting
- ☑ Cultivate Your Child's Intelligence
- ☑ Parents Are the First, Best Models in Teaching Their Children Good Citizenship
- ☑ Promoting Reading in Your Family
- ☑ The First Years Last Forever
- ☑ Infant Development: Birth to 12 Months
- ☑ Toddler Development: 1 to 3 Years
- ☑ Parenting Adolescents
- ☑ Adolescent Development
- ☑ Adolescents: What Are They Thinking?
- ☑ When Children Go to College
- ☑ Parent Involvement Beyond High School
- ☑ Special Tots
- ☑ Tips for Parents to Avoid Alcohol, Tobacco, and Other Drug Problems in Children
- ☑ Parenting for Prevention of Underage Drinking
- ☑ Children and Secondhand Smoke
- ☑ Quitting Smoking is One of the Most Important Things a Woman Can Do to Protect Her and Her Baby's Health
- ☑ Is Your Child Safe From Lead Poisoning?
- ☑ How Do I Know If My Child is Being Bullied?
- ☑ Kinship Care Resource Center
- ☑ Statewide Toll Free Parent Help Line

Asset and Resiliency Information

- ☑ Asset-Building Ideas for Parents and Guardians
- ☑ 40 Developmental Assets for Infants & Toddlers
- ☑ 40 Developmental Assets for Preschoolers
- ☑ 40 Developmental Assets for Elementary-Age
- ☑ 40 Developmental Assets for Adolescents

Additional Resources

- ☑ Internet Resources for Parents and Service Providers
- ☑ Regional Substance Abuse Coordinating Agencies

Effective parenting includes . . .

- 1. Showing children love, concern, and respect at all times.**
- 2. Giving children a safe place to live and play.**
- 3. Helping children express all their feelings appropriately and listening to what they say.**
- 4. Giving children appropriate choices whenever possible.**
- 5. Having reasonable rules that are understood by all.**
- 6. Being responsible and teaching children to be responsible.**
- 7. Spending time with children.**
- 8. Setting an example by what we say and do.**
- 9. Working with our schools and communities to make them better for children.**
- 10. Asking for help when we need it.**

March is Parenting Awareness Month

**2004 Parenting Awareness Month Organizers' Packet,
Parenting Awareness Michigan, Prevention Network, 1-800-968-4968**

Ser padres efectivos incluye . . .

- 1. Mostrar a los niños el amor, el interés, y el respeto todo el tiempo.**
- 2. Dar a los niños un lugar seguro en que pueden vivir y jugar.**
- 3. Ayudara los niños a expresar todos sus sentimientos apropiadamente y escuchar a lo que dicen.**
- 4. Dar a lo^s niños selecciones apropiadas cuando sea posible.**
- 5. Mantener reglas razonables que todos entienden.**
- 6. Ser responsable y enseñar a los niños a ser responsables.**
- 7. Pasar el tiempo con los niños.**
- 8. Mantener un ejemplo de lo que decimos y de que hacemos.**
- 9. Cooperar con nuestras escuelas y con la comunidades para mejorarlas para los niños.**
- 10. Pedir ayuda cuando la necesitemos.**

March is Parenting Awareness Month

**2004 Parenting Awareness Month Organizers' Packet,
Parenting Awareness Michigan, Prevention Network, 1-800-968-4968**

Sun



Mon

1 Hug and tell your children "I love you" everyday.

Tue

2 Show interest in your children's school day. Tell them about your day.

Wed

3 Frame and display a family photo in each child's bedroom.

Thu

4 Plan and prepare a meal with your child, and eat the meal together.

Fri

5 Attend a local school sports game together ENJOY!

Sat

6 Visit the Library and help your child sign up for a library card. Check out books to read together.

7 Make, bake, and decorate cookies together. Share some with a neighbor.

8 Start a collection with your child such as rocks or stamps.

9 Focus on success! List five successes experienced by each family member this week. Post the list.

10 Plan a no TV night. Play a variety of games Read books together. Look at family photos.

11 Have each family member share what they learned today.

12 Teach your child safety rules. Have a fire drill. Post safety and emergency numbers.

13 Begin a scrabook for each child with their help.

14 Take a walk with your child and learn about the neighborhood. Find your street on a city map.

15 Talk to your child about his r her cultural heritage. Begin drawing a family tree.

16 Make a list of all he reasons your child is special and post it.

17 Hang up your child's atwork at home or at your place of work.

18 Make cards or write a letter together to send to a relative.

19 Help your children sort through toys and books they've out-grown. Decide if there is anything to donate.

20 Create a family bird feeder by using an old milk jug. Fill with seed and hang near a window.

21 Designate a special time or day to spend just with your child.

22 Tell your children you are proud of them. Think of different ways to praise your child each day.

23 Slip a note of encouragement in your child's coat, lunch box, or under pillow.

24 Have an indoor picnic. Everyone in the family helps.

25 Teach your child a skill such as sewing on a button, or using a hammer and saw.

26 Have a family movie and popcorn night.

27 Have a treasure hunt indoors or in the yard.

28 Decorate a shoebox with your child to store their treasures and keepsakes.

29 Take a family walk and look for signs of spring.

30 With your child's help plant some seeds indoors for summer flowers.

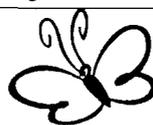
31 Talk with your family about the wonderful times you had with each other during March.

Reminder:
March is Reading Month

Reminder:
Plan to attend School events -- field trips, parent/teacher conferences, open houses.

Reminder for April:
April is the Month of the Young Child. For more information call 1-800-336-6424.

Call 1-800-968-4968 for more information about Parenting Awareness Month



WORDS YOUR CHILD NEEDS TO HEAR

I'm so lucky to have you 

 **You are a great helper**

I like it when you try so hard 

 **Let's talk about it**

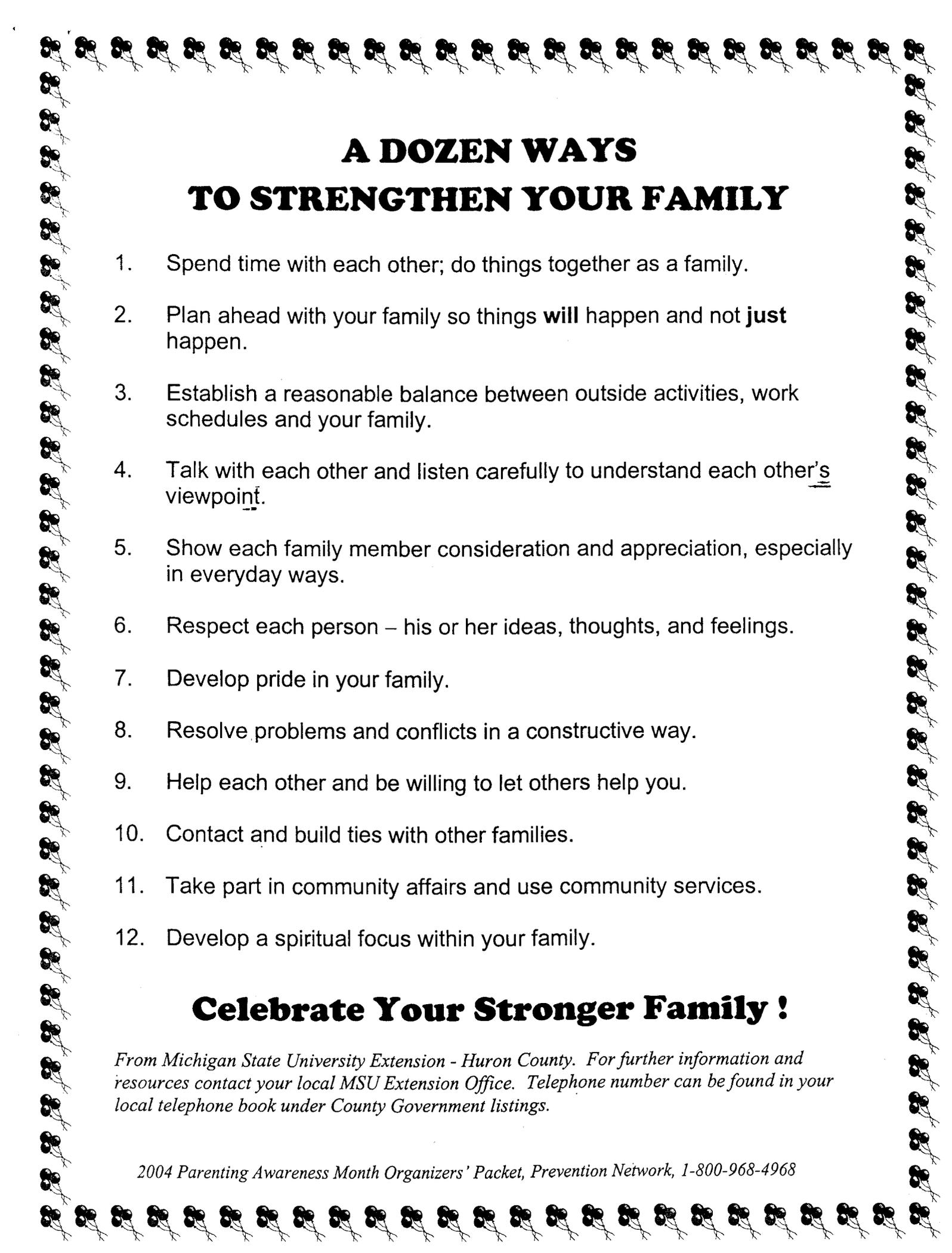
I'm sorry 

 **You're very special to me**

Thank you for being patient 

 **You're a great kid**

I love you 



A DOZEN WAYS TO STRENGTHEN YOUR FAMILY

1. Spend time with each other; do things together as a family.
2. Plan ahead with your family so things **will** happen and not **just** happen.
3. Establish a reasonable balance between outside activities, work schedules and your family.
4. Talk with each other and listen carefully to understand each other's viewpoint.
5. Show each family member consideration and appreciation, especially in everyday ways.
6. Respect each person – his or her ideas, thoughts, and feelings.
7. Develop pride in your family.
8. Resolve problems and conflicts in a constructive way.
9. Help each other and be willing to let others help you.
10. Contact and build ties with other families.
11. Take part in community affairs and use community services.
12. Develop a spiritual focus within your family.

Celebrate Your Stronger Family !

From Michigan State University Extension - Huron County. For further information and resources contact your local MSU Extension Office. Telephone number can be found in your local telephone book under County Government listings.

10 Steps To Positive Parenting

Show love and affection.

When necessary, take
time to cool down.

Compliment your child.

Set basic rules and limits.

Teach values.

Introduce your
child to books.

Listen and talk to
your child.

Be the kind of
person you want
your child to be.

Offer guidance.

Tell your child
"I love you"
each and every day.



10 Steps To Teach A Child Discipline

Teach and model self-
control by your example.

Set routines for bedtime,
meals, and chores.

Explain reasons for
your rules.

Let your child help
make rules.

Let your child help
decide consequences
for broken rules.

Try to understand your
child's feelings.

If your child breaks a rule,
control your anger.

If you lash out, apologize.

Compliment your
child often.

Tell your child
"I love you"
each and every day.



10 Steps To Cool Down

Take a deep breath. And
another. Then remember
you are the adult.

Close your eyes
and imagine you're
hearing what your child
is about to hear.

Press your lips together
and count to ten.
Or better yet, to 20.

Exercise to release tension.

Phone a friend.

If someone can watch
your child, go outside
and take a walk.

Take a hot bath or splash
cold water on your face.

Turn on some music,
maybe even sing along.

Drink a glass of cold water.

Tell your child
"I love you"
each and every day.



Cultivate Your Child's Intelligence

Be sure your home is a place that stimulates the senses - touch, sight, smell, hearing, and taste.

Find toys or play materials with bright colors, unique textures, interesting sounds and smells.

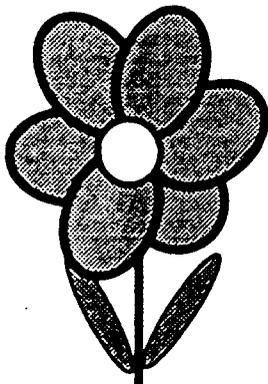
Teach your child colors, numbers, and letters.

Make sure play materials and toys are age appropriate.

Encourage exploration while monitoring safety.

Teach your child how to clean up after play.

Talk to your child often and in complete sentences.



Nurture Your Child's Emotional Growth

Tell your children you love them. Offer lots of hugs and kisses.

Make a list of wonderful things about your children.

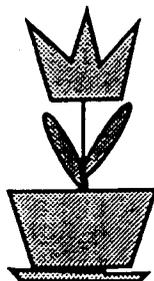
Avoid exposing your children to stressful or violent situations.

Provide structure for your children's day. Set times for meals, naps, bedtime.

Make sure your children feel safe. Comfort them when they're scared. Show them you have taken steps to protect them.

Take care of yourself so that you can be available for your children.

Join a parent support group to share your joys and challenges.



Foster Your Child's Physical Development

Offer an abundance of love and care. Cuddle, hug, and kiss your child daily.

Make sure your child has plenty of opportunities to run, skip, and jump.

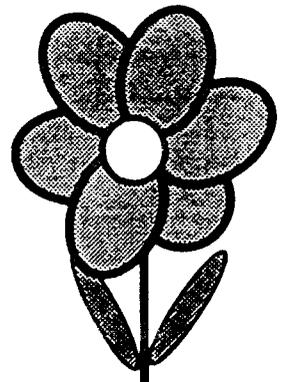
Monitor your child's diet so that it is balanced and full of nutrients.

Play a sport with your child. Organize neighborhood games.

Cook meals with your child and talk about nutrition.

Teach your child healthy hygiene habits.

Monitor television watching. Provide alternate activities.



Parents Are the First, Best Models in Teaching Their Children Good Citizenship

Parenting Awareness Michigan, which celebrates people raising children and promotes resources to help with this important task, takes this opportunity to encourage parents to model good citizenship for their children. Citizenship takes many forms and can be taught to children in many ways.

WHY MODEL GOOD CITIZENSHIP?

1. **Children learn by what they see, not by what they hear.** Parents who exhibit responsible behavior teach their children on a daily basis about the behavior that is expected of them.
2. **Citizenship is something that needs to be nurtured to become a habit.** Children who see parents demonstrate concern for others in society learn that this is a positive activity which is of value to their family. Repeated exposure to positive, caring behavior teaches a child compassion and concern for society, near and far.
3. **Citizenship is something that crosses cultural and economic boundaries.** Helping our neighbors, participating in charitable acts, caring for the environment, and voting are concrete habits which families can practice without spending much more than time and effort.

HOW CAN PARENTS MODEL GOOD CITIZENSHIP?

1. **Be a good neighbor.** Take walks in your neighborhood, sit on your front steps, learn the names of the people who live in your area. Show your children that you enjoy being neighborly by extending friendship and help when possible.
2. **Volunteer in your community.** Join and become active in your school's parent/teacher group. Help out at the community center. Work in the community garden. Participate in activities that help less fortunate people. Involve your children in these activities so that they can see the ways in which community is important to your life.
3. **Take care of the environment.** Involve your children in curbside recycling. Participate in neighborhood or park clean-ups. Use receptacles instead of littering. Teach your children that we all have to take care of the world in which we live, as citizens of one large community.
4. **Obey laws.** Drive carefully and within the speed limit. Keep your temper when driving with children in your car. Use your turn signals. Use trash containers in your vehicle, and don't throw any trash out your windows. Don't try to "get away with something" around your children. Kids learn by watching, not listening. Model law abiding behavior, with a clear sense of right and wrong.
5. **Participate in government.** Have fun with the election process, and turn it into a learning experience for your family. Learn about elections together. Use election issues as a current affairs conversation starter. Take your children with you to the polls, let them watch the process, and let them see YOU vote. Teach your children that it is part of your civic responsibility to partake in the privilege of voting.



PROMOTING READING IN YOUR FAMILY

-  Spend 30 minutes a day reading to your child.
-  Keep reading materials visible and available throughout the house.
-  Talk about the story as you read.
-  Give books as gifts.
-  Have a family reading time. DEAR - Drop Everything And Read.
-  Sing songs, say nursery rhymes and poems together.
-  Read environmental print with your child - food labels, signs, posters.
-  Follow a recipe with your child.
-  Exchange refrigerator messages with your child.
-  Make reading together a happy time.
-  Take your child regularly to the local library.
-  Encourage your child to write and make books.
-  Establish a routine time for daily reading.
-  Read favorite books over and over again.
-  Encourage your child to ask questions about the story.
-  Take books and tapes in the car. Read while traveling and waiting.
-  Make lists together.
-  Talk about the pictures in books.
-  Make cards and send them to family and friends.
-  Look at the book cover. Let your child make predictions about the book.
-  Let your child see you reading for enjoyment.
-  Make a writing box for your child. Select a special place for writing.
-  Talk with your child as you eat, walk, ride, play, watch TV, or shop.
-  Read the mail with your child.
-  Talk about the story after reading it. Encourage your child to retell the story.



The First Years Last Forever - National Campaign Educates Parents On Importance of the First Three Years of Life

Natural instinct makes parents cuddle, soothe and sing lullabies to their infant. But new research shows these nurturing acts are vital for growth of a healthy brain.

Bruce Perry, M.D., Ph.D., neuroscientist and Senior Fellow at the Baylor College of Medicine, reports that the first three years of a child's life are more important for emotional and intellectual growth than we ever thought before. Experiences that fill babies first days, months and years have a decisive impact on the architecture of their brains; this in turn impacts on every aspect of a child's life through adulthood, including how well he or she does in school, in relationships and at work.

Research illustrates that parents and care givers can help a child's brain develop to its full potential if the child is loved and receives attention by talking, reading and playing. However, if a child is abused or neglected problems may ensue that can persist a lifetime.

The first three years of a child's life are crucial. That's why a national campaign - *I Am Your Child* - was launched in 1997 to focus on these critical years and help families and communities learn what they can do to promote healthy development in young children.

Founded by Rob Reiner, Michele Singer Reiner, and Ellen Gilbert, *I Am Your Child* is an unprecedented coalition of entertainment leaders, children's organizations, elected officials, health professionals, foundations and corporations who have joined together to help promote family and community involvement in young children's healthy development.

For more information on what parents and care givers can do to promote young children's healthy development, visit the *I Am Your Child* website, www.iamyourchild.org. To request free materials call 1-888-447-3400.

Michigan Resources to Contact for Information About Early Childhood and Brain Development

- **Information about early childhood education, professional development, advocacy, legislation affecting children, and parent trainings:**
Michigan Association for the Education of Young Children (MiAEYC)
1-800-336-6424
<http://www.miaeyc.org>
- **Information about legislation affecting children:**
Michigan's Children
1-800-330-8674
<http://www.michiganschildren.org>
- **Child care resource and referral:**
Michigan 4C Association
1-800-950-4171
<http://www.mi4c.org>
- **Public Television and children's learning:**
PBS Ready to Learn. <http://pbskids.org/grownups>
- **Information about children and nutrition:**
MSU Extension
Call 517/355-2308 for your local Extension Office, or check county listings in your phone directory.
<http://www.msue.msu.edu>

Association for Child Development
517/332-7200
<http://www.acdcacfp.org>
- **Information about the Michigan Ready to Succeed Partnership:**
<http://www.readytosucceed.org>
- **Information about early childhood brain development:**
I Am Your Child Foundation
<http://www.iamyourchild.org>
Child Trauma Foundation
<http://www.childtrauma.org>

(Parenting Tips on back)

The First Years Last Forever: Tips for Parents

(Developed by the I Am Your Child Campaign)

1. **Be warm, loving and responsible.** When children receive warm, responsive care, they are more likely to feel safe and secure with the adults who take care of them.
2. **Respond to the child's cues and clues.** Recognize and respond with sensitivity to the sounds, movements and expressions that your child makes. This will help you build secure attachments.
3. **Talk, sing, and read to your child.** All of these interactions help your child's brain make the connections it needs for growth and later learning. Talking, singing, and reading to your child is not only important for brain development, but a wonderful opportunity for closeness with your child.
4. **Establish routines and rituals.** Teach your child to know when it's time for bed by developing routines such as singing a song and pulling the curtains—daily routines associated with pleasurable feelings are reassuring for children. Repeated positive experiences provide children with a sense of security.
5. **Encourage safe exploration and play.** As infants grow, they begin to explore the world beyond their care givers. Parents should encourage this exploration. While many of us think of learning as simply acquiring facts, children actually learn through playing.
6. **Make television watching selective.** Be selective and involved in your children's television habits. Whenever possible, watch TV with your child and talk about what you are viewing. Don't use TV as a baby-sitter.
7. **Use discipline as an opportunity to teach.** As children explore their ever-expanding world, they need limits and consistent, loving adult supervision. Setting limits is intended to help and children, rather than punish them. When you respond in a supportive, consistent way, you are helping your child to feel safe in the world. Never hit or shake a child.
8. **Recognize that each child is unique.** Children grow at different rates. Their ideas and feelings about themselves reflect, in large measure, parents' and care givers' attitudes towards them.
9. **Choose quality child care and stay involved.** Choosing a child care provider is one of the most important decisions families make. Seek someone who responds warmly and responsively to your child's needs. Select someone who will give children individual attention and engage them in creative play and exploration. Carefully check provider's references. After choosing your child care provider, stay involved.
10. **Take care of yourself.** Parents and caregivers need care, too. Because you provide the primary environments for infants and young children, your health and welfare are extremely important. When you feel overwhelmed, take care of yourself. Reach out and get some help. Family, friends, neighbors, pediatricians, child health care providers and others—all can assist you in fostering your child's healthy development.



INFANT DEVELOPMENT BIRTH TO 12 MONTHS*

Neonatal Period (0-4 weeks):

- Your infant is oriented to sights in her visual range and sounds around 1 week of age. She may not yet differentiate the human voice from other sounds in her environment.
- A little over 1 week of age, your infant may begin to recognize the human face and voice.
- Your infant will begin to recognize your voice when he is between 1-4 weeks of age.

Age 1-3 Months

- At 1 or 2 months of age, your infant will begin to develop daily routines, with your help. This does not mean, however, that you should attempt to regulate feeding to certain times during the day.
- Your infant will begin developing the capacity to soothe himself between 1 and 3 months of age. Occasionally, when he is upset, he will be able to calm himself down without your help. You should still respond to him, however, when he is distressed.
- It is also during this time that your infant may begin smiling and cooing. She may show preference for a primary caregiver.

Age 3-6 Months

- Your infant now recognizes you as his primary caregiver and prefers to be around you as opposed to other adults.
- Play gradually develops during this time period. Most of this play will be exploratory as your infant becomes familiar with the world around her.
- Your infant is gradually developing his memory. He may begin to develop favorite games because he remembers the positive interaction with you.
- Your infant is gaining control of her upper body. She can now hold her head up on her own. She can also reach for objects and grasp them.

(continued on back)

Age 6-12 Months

- Your infant now initiates play with you, rather than waiting on you to play with him.
- Your baby is very interested in her own body and in her physical surroundings. As a result, she may be able to entertain herself for short periods of time.
- You have probably noticed that your infant is now babbling quite a bit more. He may also be pointing and gesturing in an effort to communicate with you. He is understanding more and more of your words, and the day when he speaks his first word is fast approaching.
- Your baby is trying to develop her physical skills, especially locomotion. She will be very persistent as she tries to creep, crawl, cruise, and then walk.
- At 9-10 months, your baby will be able to understand simple directions from you and will begin to respond to your words and gestures.
- Watch what you're doing! At 9-12 months, your baby will begin to watch you in order to learn new things.
- It is during this time period that your baby will begin to develop a sense of herself based on her increased control over her own actions and communication.

RESOURCES FOR PARENTS OF INFANTS AND TODDLERS

Websites

<http://www.Babyparenting.about.com>

<http://www.keepkidshealthy.com> - A pediatrician's guide to keeping your baby healthy

<http://www.thebabycorner.com>

Book

The Magic Years by Selma Fraiberg

*Davies, D. (1999). *Child development: A practitioner's guide*. New York: Guilford.

Prepared by Jaime D. Goff, MMFT, Michigan State University, 2002, for the 2003 PAM Packet.

TODDLER DEVELOPMENT

1 TO 3 YEARS*



Attachment

- The bond you have developed with your child will allow her to become more self-protective and to soothe herself more often (24-36 months).
- Between 16 and 36 months, you may notice that your child uses an object to comfort himself, such as a favorite blanket or stuffed animal. These items help him to cope with being separated from you.
- Your toddler's attached relationship with you will help him to progress in development. You provide a model for his behavior and give him a safe base from which to explore his environment.

Social Development

- Toddlers are self-centered at this stage in their development. As a result, they are unable to share or to acknowledge the feelings of others.
- Your toddler will begin to understand reciprocity as she begins to play with peers (2-3 years).
- By watching you, your toddler is learning socially acceptable behavior (2-3 years).

Cognitive Development

- Your toddler is very interested in learning about the world around him. Reading and talking to him are very important.
- Between 18 months and 3 years, your toddler will begin to understand that there are consequences for her bad behavior.
- Your toddler is now able to develop plans for what he wants to do. He can remember his plan explore the kitchen cabinets and will persist in trying to accomplish his goals.

(continued on back)

Language and Communication

- From 12-18 months, you will notice that your toddler is gradually gaining new language skills. After this, you may notice a burst in her language development because she has a growing wish to communicate her experiences with you.
- Between 18 and 24 months, your toddler will begin speaking in two or three word sentences.
- You may notice that your toddler begins asking questions, telling about his experiences, or talking to himself between 2 and 3 years of age.
- Although your toddler's language skills are rapidly advancing, she still has many limitations. This will likely be a source of frustration and angry behavior from her when she is not able to communicate what she wants to say.

Play

- Between 1 and 2 years of age, your toddler's play will be characterized by exploring the properties and functions of objects.
- You may notice that in play, your toddler often pretends to be involved in ordinary activities such as pretending to eat or pretending to be a mother.
- By 16 months, your toddler is capable of symbolic play. This means that he is able to pretend that a broom is a horse.
- When toddlers cannot express themselves in words, they express themselves in play.

RESOURCES FOR PARENTS OF INFANTS AND TODDLERS

Websites

<http://www.Babyparenting.about.com>

<http://www.keepkidshealthy.com> - A pediatrician's guide to keeping your baby healthy

<http://www.thebabycorner.com>

Book

The Magic Years by Selma Fraiberg

*Davies, D. (1999). *Child development: A practitioner's guide*. New York: Guilford.

This was prepared by Jaime D. Goff, MMFT, Michigan State University, 2002, for the 2003 PAM Packet.

Parenting Adolescents

HELPING YOUNG PEOPLE BRANCH OUT, WHILE KEEPING THEIR ROOTS

Parenting adolescents can be a challenging task. Adolescents are experiencing great physical, emotional, and intellectual growth. It's a wonderful time, yet it also can be a disruptive time. Teenagers are moving from childhood to adulthood and reaching out for independence with skills that haven't been proven. Parents can help ease the transition and insure a positive future relationship with their teens by keeping the following information in mind.

Maintain a positive outlook. Remember, adolescence is temporary, and your attitude can help your teens develop and maintain a good self image, confidence, and competence. It's normal for teens to suddenly become critical of their family. They are trying to break away and need an excuse. Enjoy helping them discover their talents and interests.

Establish clear, simple rules. Your teens are experimenting, and just as you had to protect them from danger when they were young children, you need to protect them now. Part of what your adolescents need to know is that they have a responsibility to their family and community. Continue enforcing family rules, although it may be a good time to review your rules to see if they are still practical.

Keep the lines of communication open. This is one of the most important tasks you have. Most teens don't know how to communicate. Really listen to them and avoid judgmental responses. Seek outside help to solve problems instead of risking the loss of your relationship with your teens.

Be patient. Your teens may not be comfortable with themselves. Their bodies and emotions suddenly seem strange, and their new skills are not perfected. They may be very critical of themselves and need your support and love.

Praise good behavior. Remind them that you think they are wonderful. Help them remember they are valuable people.

Evaluate your own attitude. Your teens' push for independence may trigger an equal but opposite response from you. Their independent behavior may make you aware that there isn't much time left for you to teach them everything they need to learn from you. Don't begin to lecture or become too controlling. It will only add stress to the situation.

Get professional help if your teen's behavior has gotten out of control. A good counselor often is the key to helping parents and their teens get over rough spots.

**Remember, you are the most important influence
in your adolescent's life.**

From Prevent Child Abuse America, 1-800-CHILDREN or www.preventchildabuse.org

Adapted for the 2004 PAM Organizers' Packet

ADOLESCENT DEVELOPMENT

Adolescence is a time of change, and lots of it!! Not only do adolescents experience changes in their bodies, but they also struggle with their changing identities. Families also experience many changes during adolescence. The relationship between parents and their adolescent children changes as the teen becomes more independent. During adolescence, parents are also going through the changes of middle adulthood. Although adolescence can be a time of stress for families, it can also be a wonderful experience of growth.

EIGHT DEVELOPMENTAL TASKS OF ADOLESCENCE*

Central Task: Achieving a stable identity

Early Adolescence

1. Achieving new, more mature relationships with peers of both sexes
2. Achieving masculine or feminine social roles
3. Accepting one's body as it is and learning to use it effectively
4. Beginning to gain emotional independence from parents and other adults

Late Adolescence

5. Preparing for marriage and family life
6. Preparing for a career
7. Acquiring a set of values that will guide behavior
8. Desiring and achieving socially responsible behavior

*Havighurst, R. J. (1972). *Developmental tasks and education*. New York: Longman.

WHAT KIND OF PARENTS DO ADOLESCENTS NEED ?

Authoritative Parents are very accepting of their children, but also have high expectations of them. Adolescents with authoritative parents are:

- More self-confident
- Independent
- Self-reliant
- More curious

Authoritarian Parents have unrealistically high expectations of their children. They are not very accepting or warm towards their children. Adolescents with authoritarian parents are:

- Unhappy
- Withdrawn
- Inhibited
- Distrustful

Permissive Parents are very accepting of their children. They do not, however, provide their children with appropriate boundaries.

Adolescents with permissive parents are:

- Less independent
- Lacking in self-control
- Immature

Indifferent Parents are neither accepting nor demanding of their children. They do not have rules and consequences for their children's behavior, but they also do not show their children love and warmth. Adolescents with indifferent parents are most negatively impacted.

(continued on back)

ADOLESCENT THINKING

Characteristics of Adolescent Thinking

- Adolescents are able to think abstractly.
- Adolescents can think hypothetically. That is, they can turn a problem around in their minds and come up with different solutions and ways to approach the problem.
- Adolescents can think logically. They are able to test different ideas against one another to determine which idea is true.

Pitfalls in Adolescent Thinking

- Pseudo-stupidity - Sometimes teenagers fail to see the obvious by making simple tasks more difficult than they really are.
- Imaginary audience - Teenagers often feel as if everyone is watching them. This is because they are so self-aware at this stage in their development. They may believe every eye is on them and every thought is about them. For example, your teenage daughter may be convinced that everyone will remember exactly what she wore to school on Tuesday of last week.
- Personal fable - Teenagers often believe that they are special and different and that what happens to others will not happen to them. This is why teenagers often engage in risky behaviors without thinking about the consequences.

-- ADOLESCENT IDENTITY DEVELOPMENT*

The central task of adolescence is to achieve a stable identity. Some teens are able to achieve this by the time they reach the age of 20. Most, however, are not and will continue to define who they are well into young adulthood. There are four primary types of adolescent identity.

Identity Achieved

These are the adolescents who have "made it." They have successfully explored many life options and chosen the ones that fit them best. Although some adolescents may reach this stage, many people are not able to do so until later in life.

Identity Moratorium

Some adolescents never make any decisions about who they are. Adolescents in this stage begin looking at the many options for their lives but become overwhelmed by the number of choices. Rather than choose and make a mistake, they decide not to decide on who they are or what they will do with their lives.

Identity Foreclosed

Adolescents who foreclose on their identity development adopt their parents' values and beliefs without question. They do not explore other options for their lives but only live as others expect.

Identity Diffused

These adolescents also do not make a decision about who they would like to be. Unlike adolescents in moratorium, however, diffused adolescents do not see the importance in choosing one option over another.

*Marcia, J. E. (1980). Identity in adolescence. In J. Adelson (Ed.), *Handbook of adolescent psychology*. New York: Wiley.

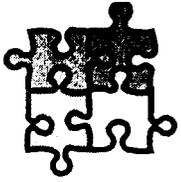
RESOURCES FOR PARENTS OF ADOLESCENTS

Website

www.parentingadolescents.com - Get questions answered for free by a social worker. Includes a resource page with books, articles, links, and listing of therapists who work with adolescents and their families.

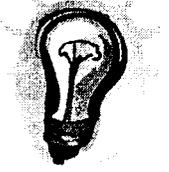
Books

- *Reviving Ophelia: Saving the Selves of Adolescent Girls*, by Mary Pipher
- *Parenting Toward Solutions*, by Linda Metcalf
- *Raising Teens You Can Live With*, by Jamie Raser



ADOLESCENTS: WHAT ARE THEY THINKING?

Current Research on the Development of Teen Brains



Brain research has revealed new information about brain development in teenagers. Old thinking was that the structure of the brain was complete in adolescence, but new technology has made it possible to demonstrate that the teen brain is a work in progress, far from mature, until well into the 20's. Photo-imaging has made it possible to detect activity in a living brain and demonstrates within the function of the brain why teens often use poor judgement and make decisions that are not rational or well-considered.

In teens the emotional centers of the brain are very active. However, the prefrontal cortex, the part of the brain in charge of executive functions, like planning, organizing, setting priorities, making sound judgements, prioritizing, anticipating consequences, controlling impulses and calming unruly emotions, is the last part of the brain to mature. In teens, the prefrontal cortex is "asleep at the wheel". Adults often assume that teens, who look older and are sexually mature, have a better grasp of consequences than they do. Often adults interpret the lack of skill in these executive functions as poor choices or misbehavior, when, in fact, teens are exhibiting their immature brain structure and not-yet-developed thinking skills.

- *Be conscious of expectations of teens. The brains of teens are not as fully developed as the brains of adults. They cannot think like an adult.*
- *Expect teens to "think" with their emotions. In guiding and teaching teens, engage them at the emotional level.*
- *As the prefrontal cortex is beginning to "turn on", teens need the attention of adults who will walk along side them while they are learning to use this new equipment. Teens need adults who will help them learn to think a problem through, consider their options, and make a rational decision.*
- *Early adolescents, no matter how mature they may look, need supervision and the involvement of parents. Parents need new skills to work effectively with youth. Parents must shift their style from manager to consultant. The emerging abilities of teens must be honored, at the same time that on-going support is provided.*
- *Because of the developmental task of separation in the teen years, teens need the support of adults other than their parents. Teachers, coaches, youth leaders, parents of friends can all play a role in the teen's development.*
- *Adolescence is a stage in which a large investment of time and energy will pay off huge dividends in setting patterns for adult behavior. Even troubled teens, with adequate support, can learn restraint, good judgement, and empathy. For children who were deprived of what they needed in the first three years of life, this is the perfect time to intervene.*

Mirroring the dramatic process of brain development that occurs in infancy, the development of the teen brain involves a massive overproduction of connections between brain cells, sometimes doubling the gray matter in one year. Excess connections (synapses) mean that teens cannot keep track of multiple thoughts. By about age 18, as the connections which are "hardwired" by experience are kept and the rest are pruned away, pruning increases the power and efficiency of brain function. In a sense, teens are creating their own brains. Whatever teens choose to learn or experience will be hardwired and kept.

- *Teens should be encouraged to try many different activities to determine where their particular interests and talents lie.*
- *Give directions one at a time. Asking teens to remember a series of directions is an unrealistic expectation.*

(continued on back)

- *Early adolescence can be a chaotic time, with the activity inside the brain reflected in messy rooms, lockers, notebooks. Be patient and know that the best predictor of how tidy teens will be as adults is how tidy their parents are.*
- *Adolescence is a particularly vulnerable time for the brain because of all the dramatic changes and development. Talk to your teen about the devastating effects of drugs, alcohol and tobacco during this time. Give them the facts, and remember to engage their emotions.*

New experiences, novelty, with an element of thrill or danger, create a chemical process in the brain that is intensely pleasurable to teens, more so than to either adults or children.

- *Provide activities for teens with a perception of thrill or danger, but in a monitored, supervised setting. White water rafting, rock climbing, etc. fulfill a need for teens which is sometimes filled by shoplifting, illegal substances, or risky driving.*

In adolescence, biological clocks change, resetting natural sleep and wake cycles. Most teens are not chemically ready for sleep until 11 PM or later, and sleep-inducing chemicals are elevated into the school day. Teens require more sleep than adults, an average of 9 hours and 15 minutes. Most teens are sleep deprived. Sleep is food for the brain. Hormones critical to growth and sexual maturation are released during sleep. Deep REM sleep boosts memory and learning. Without enough sleep, teens are cranky and depressed; memory judgement, and reaction time are impaired.

- *Advocate for later start times in middle and high schools.*
- *Help your teen arrange for a school schedule with more demanding subjects later in the day.*
- *Understand that staying up late and wanting to sleep in the morning is biologically driven and is not misbehavior or a lack of cooperation.*

Adolescence is a miraculous time of change and growth. Emotions are at a height of activity, and the thinking brain is beginning to mature. Parents and other adults are crucial to this process and must invest in teens at a heightened level, keeping expectations realistic, and skillfully providing safety and support.

To find out more about brain development in teenagers contact: Pat Crum, Parent Counselor
DeVos Children's Hospital
100 Michigan Ave NE MC-178
Grand Rapids MI 49503
Phone: 616 391-8829 Fax: 616 391-3206
E-Mail: pat.crum@spectrum-health.org

You can also visit the following web sites:

www.duke.edu
www.brightbeginnings.k12.az.us
www.entech.net/brain_based_learning.html
www.focusas.com/Adolescence.htm

Recommended books and publications include:

Associated Press, "Kids brains still growing into puberty", USA TODAY, 3/9/2000.

Begley, Sharon, "Getting Inside a Teen Brain", NEWSWEEK, 2/28/2000.

Riera, Michael, Uncommon Sense for Parents with Teenagers, Celestial Arts, Berkeley CA, 1995.

Windell, James, 6 Steps to an Emotionally Intelligent Teenager: Teaching Social Skills to Your Teen, John Wiley & Sons Inc., New York, 1999.

When Children Go To College: Parenting Long Distance

Barb Flis, Health and Welfare Consultant, Michigan PTSA

As children approach their teen years, many parents find it difficult to strike a balance between "letting go" and "being there"

Lorenza DiNatale, Parent Involvement Programs Coordinator, National PTA, in "Beyond The Teen Years", *Our Children*, June/July 1999

You may experience panic as you think about your child leaving for college. Will she study? Will he be safe? Will they know how to do their laundry?

The answer is "maybe." Much of your child's success will depend on parenting received, especially in the middle and high school years — a difficult time for young people because of growing peer pressure, dramatic physical changes, and an awakening need for more independence.

Research shows that parent involvement begins to decline as children approach adolescence, yet the middle school and high school years are critical years for "striking a balance" because:

- ◆ Maturing children need to develop a sense of self that is independent from their families. In these years they begin to weigh choices and consequences, make decisions on their own, learn from mistakes, establish their own set of guide rules, refuse help from parents, and interact with friends on their own.
- ◆ Parent roles must change as they continue to offer support but begin to step back in all aspects of their children's lives. It is a time to show respect for their children's growing independence, to let them make their own choices—good or bad—and take responsibility for their own actions and decisions.

Striking a balance continues to be important for parenting teens who are going off to college. The big difference is they will no longer be under your watchful eye. That is why giving them a strong foundation in middle and high school is key.

The parent involvement strategies that are recommended for effective parenting of middle schoolers and high school teens are communication, consistency, and demonstrating support. These can be maintained for effective parenting through the college years.

(1) Keep lines of communication open

Build on the teen years when it is important to have regular conversations, provide accurate information, and initiate discussion of difficult topics such as sex, alcohol, tobacco, or other drugs.

College Years are a time of tremendous growth and independence and variety of experiences both good and bad. Through they may not show it, children are still comforted by communication that assures them someone still cares.

- Write often, call, and visit (but let them know you are coming).
- Continue to be clear about tobacco, alcohol, drugs, and sex. Why? Because your children are in an atmosphere where:
 - ⇒ Smoking among college students has increased by 28%.
 - ⇒ 43% of college students surveyed are binge drinkers.
 - ⇒ 52% of college students surveyed use alcohol for the purpose of getting drunk.
 - ⇒ Alcohol use correlates with inappropriate sexual behavior.

(Harvard School of Public Health College Alcohol Study, 1998)

(continued on back)

- ✦ Conduct free parenting education workshops throughout March. Provide child care.
- ✦ Take PAM posters everywhere you can think of — to schools, places of worship, work sites, community bulletin boards, city hall, your doctor's office, your hairdresser, your mechanic, day care centers, your neighbors, and the senior citizen center.
- ✦ Prepare a promotional video for local access cable. Do a series that features various parenting resources in your community.
- ✦ Plan Parenting Awareness Month events that involve **youth** and senior citizens.
- ✦ Visit local media; involve them in your efforts.
- ✦ Get parenting messages on local billboards.
- ✦ Work with local radio stations to run “*Did you know . . .*” radio spots featuring local parenting and family resources and parenting tips. Create and distribute a local calendar to match.
- ✦ Enlist local newspapers to feature parenting articles throughout the month of March.
- ✦ Work with local restaurants and fast foods to develop and use Parenting Awareness Month tray liners and placemats. Include parenting tips and local parenting resources information.
- ✦ Contact your legislators to involve them in local Parenting Awareness Month campaigns. Request a free copy of *Citizen's Guide to State Government*.
- ✦ Work with faith communities to highlight Parenting Awareness Month in newsletters, bulletins, discussion groups, and from the pulpit.
- ✦ Host a PAM celebration and give awards to “parent/family friendly” employers.
- ✦ Work with a local hospital to provide parenting tips and local resource lists to new parents.
- ✦ Work with a local agency to provide a parenting hotline.
- ✦ Plan a Parent's Day, Parenting Fair, or Family Fun Fest at a mall, or other community area, showcasing family and parenting resources and providing family friendly activities.
- ✦ Prepare folders with Parenting Awareness Month materials to be given to parents at parent/teacher conferences. Have students decorate the folder for their parent(s).
- ✦ Work with your local school district to hold weekly family nights throughout the month of March. Decide on a theme. Involve parents and youth!
- ✦ Encourage local businesses to provide paycheck stuffers with a Parenting Awareness Month message and the 10 parenting tips.
- ✦ Talk about Parenting Awareness Month in your own family.
- ✦ Design a family friendly slogan/logo and have a sweatshirt/t-shirt sale.
- ✦ Host a community “Family Dinner” with guest speakers or other fun activities.
- ✦ Organize a “family reading night” with your local literacy council, school district, church, work site, day care center, etc.
- ✦ Host a family workshop focusing on reading in the home, story telling, quality television viewing.
- ✦ Encourage local focus on grandparenting and other kinship care issues and resources.
- ✦ Designate a different parenting theme for each week in March and plan weekly activities around each theme.
- ✦ Hold a resource fair with/for agencies and organizations who serve parents and children so family-serving organizations become familiar with all resources and materials available in the community.
- ✦ Encourage daycare providers to plan fun parenting education opportunities. Let parents have input about resources and activities they'd like or need.
- ✦ Take items from the PAM Packet and create a bound booklet for families in your school, church, or community. Include local resource information.
- ✦ Plan special activities with a focus on fathers and celebrate the importance of fathers in childrens' lives. Involve fathers in the planning.
- ✦ Host an “appreciation” breakfast, lunch, or dinner for parents and other caregivers – or make it an “Appreciation Day!”

**Please share your PAM activities with us
at 1- 800-968-4968 or
pamcampaign@preventionnetwork.org
We will share ideas with others.
For PAM information call: 1-800-968-4968
For PAM materials: 1-800-626-4636**



Nurturing Your Child's Mental Health

As a parent, you are responsible for your child's physical safety and emotional well-being. There is no one right way to raise a child. Parenting styles vary, but all caregivers should agree on expectations for your child.

Many good books are available in libraries or at bookstores on developmental stages, constructive problem-solving, discipline styles, and other parenting skills. The following suggestions are not meant to be complete.

- ◆ **Do your best** to provide a safe home and community for your child, as well as nutritious meals, regular health check-ups, immunizations, and exercise. Be aware of stages in child development so you don't expect too much or too little from your child.
- ◆ **Encourage your child** to express his or her feelings; respect those feelings. Let your child know that everyone experiences pain, fear, anger, and anxiety. Try to learn the source of these feelings. Help your child express anger positively, without resorting to violence.
- ◆ **Promote mutual respect and trust.** Keep your voice level down—even when you don't agree. Keep communication channels open.
- ◆ **Listen to your child.** Use words and examples your child can understand. Encourage questions. Provide comfort and assurance. Be honest. Focus on the positives. Express your willingness to talk about any subject.
- ◆ **Are you setting a good example?** Look at your own problem-solving and coping skills. Seek help if you are overwhelmed by your child's feelings or behaviors or if you are unable to control your own frustration or anger.
- ◆ **Encourage your child's talents** and accept limitations. Set goals based on your child's abilities and interests—not someone else's expectations. Don't compare your child's abilities to those of other children.
- ◆ **Celebrate accomplishments.** Appreciate the uniqueness of your child. Spend time regularly with your child.

(continued on back)

- ◆ **Foster your child's independence and self-worth.** Help your child deal with life's ups and downs. Show confidence in your child's ability to handle problems and tackle new experiences.
- ◆ **Discipline constructively, fairly, and consistently.** (Discipline is a form of teaching, not physical punishment.) All children and families are different; learn what is effective for your child. Show approval for positive behaviors. Help you child learn from his or her mistakes.
- ◆ **Love unconditionally.** Teach the value of apologies, cooperation, patience, forgiveness, and consideration for others. Do not expect to be perfect; parenting is a difficult job.

INFORMATION

Call toll-free: 800/789-2647

TTY: 301/443-9006

Website: www.mentalhealth.org

Every child's mental health is important.

Many children have mental health problems.

These problems are real and painful and can be severe.

Mental health problems can be recognized and treated.

Caring families and communities working together can help.



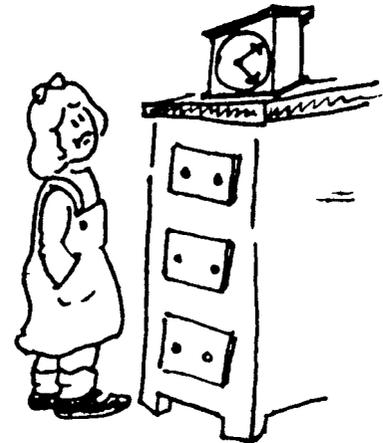
From the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services

HOW PARENTS CAN HELP THEIR CHILDREN COPE WITH DIVORCE

Divorce often results in children feeling overwhelmed by the losses and changes they are experiencing. It takes time to adjust, and the time needed varies from child to child. Parents can help their children cope with divorce.

CHILDREN NEED PREDICTABILITY

- Children who can maintain regular routines are less likely to be overwhelmed by the changes divorce brings. Parents should do their best to build and maintain healthy and smooth environments.
- Children need frequent and regular contacts with both parents.
- Parents should be on time for the exchange of children for time sharing. This sets a good example for children and does not disrupt children's routines.
- Children need continued contact with friends and relatives of both parents.
- Children need personal space to call their own, even if it is just a corner.
- Parents should exercise caution when introducing new boyfriends or girlfriends to children. Children often feel confused about their sense of loyalty, and parents' casual relationship may contribute to children's sense of insecurity and instability.



CHILDREN NEED RELATIONSHIPS WITH BOTH PARENTS

- A parent needs to stress the good points about the other parent and avoid name calling, saying bad things, or blaming the other parent for problems.
- A parent should keep family photos available, including photos of the other parent.
- A parent should allow children to express their love for the other parent and talk about their experiences with the other parent.
- If children complain about one parent, the other parent should encourage children to take the complaint to the person responsible rather than agree with the children. A parent has no control over the other parent.
- A parent should encourage the other parent's involvement in the children's school or other activities and advise of parent/teacher conferences, provide report cards and give other information pertaining to the welfare of the children.



- A parent should assist children in buying cards and gifts for the other parent.
- Parents should telephone, write, make tapes and send cards if they are not able to see their children regularly.

CHILDREN SHOULD BE KEPT OUT OF THE MIDDLE

- Parents should talk directly to each other about child-related information parents need to discuss. If talking is not possible, communicate in writing. Children should not be used as messengers.
- A parent should not ask children what goes on in the other parent's home. This is a violation of children's trust.
- Parents should not argue in front of the children.
- Parents should manage their feelings, and if they cannot, they should end the conversation until they are able to do so.
- Parents should never expect or encourage their children to take sides.
- If children tell a parent that the other parent lets them stay up late or lets them eat sweets for dinner, a parent should tell children that they must follow the rules of the household and that the other parent cannot be told what to do in his/her home.
- A parent should not withhold the children from the other parent or refuse to pay child support. Children should not be used as weapons to get back at the other parent.



CHILDREN NEED PARENTS AS ADULT ROLE MODELS

- Parents should use common courtesy and be civil and business-like in their dealings with each other.
- Parents should not jump to conclusions before getting all the information.
- Parents should follow-up agreements, in writing, about vacation dates, trips to the doctor or dentist, and changes in time sharing to avoid confusion and double scheduling.
- Parents should negotiate with one another about changes in time sharing or responsibilities for the children that each parent will assume. Negotiation requires giving and taking by both parents.
- Parents should recognize that as children grow and develop, time sharing and parents' responsibilities may have to change to meet the changing needs of the children.
- Parents should not allow their past conflicts to interfere with present decisions regarding children.



Parent Involvement Beyond High School: For Parents of Students Continuing Their Education

Prevention Network in partnership with the Michigan Region of *The Network Addressing Collegiate Alcohol and Other Drug Issues* has joined with campuses and other organizations to support a statewide coalition of higher education institutions, organizations and agencies interested in alcohol, tobacco and other drug (ATOD) prevention with college students. This statewide leadership initiative, the *Michigan Campus and Community Coalition for Prevention*, addresses any ATOD issues of interest to its members.

Special emphasis is given by this coalition to organizing and supporting environmental prevention strategies as identified by the Higher Education Center for Alcohol and Other Drug Prevention:

- Increase availability of and participation in alcohol-free social options
- Shift faculty, staff and student perceptions that the campus is a place where high risk alcohol consumption is the norm to one that promotes healthy choices and an academic environment
- Decrease the availability of alcohol
- Consistently enforce State and local laws and campus policies
- Decrease the use of aggressive promotions to target underage and other college drinkers by bars, restaurants and alcohol outlets.

Parents will recognize these strategies as being similar to those that many communities are implementing to reduce underage and high-risk alcohol use. Parental knowledge of and support for utilizing these strategies can be helpful to the colleges and universities being attended by their children.

The *Michigan Campus and Community Coalition For Prevention* is supported by: the U.S. Department of Education; the Michigan Department of Community Health, Office of Drug Control Policy/Substance Abuse Prevention Section; and the Michigan State Police/Office of Highway Safety Planning.



Campus Connections at many universities in Michigan is a program committed to helping entering freshmen make a successful transition to college without alcohol, tobacco or other drugs.

Many campuses provide for alcohol and smoke-free housing. Almost all campuses provide alcohol and smoke-free social alternatives. Some have student organizations that are actively involved in ATOD prevention.

Students at all public colleges and universities should be provided information about state law and campus policies governing ATOD use. This publication or web site should include health risks of use and possible penalties for violations of laws and policies. It should also describe campus resources.

(Resources on back)

Resources for Parents of Students Continuing Education Beyond High School

“A Few Words for Parents About Alcohol and College” is included in your PAM packet. The printing and distribution of this brochure is possible through support from *Federal Safe and Drug Free Schools and Communities Act – Title IV of 1994* and the Michigan Department of Community Health, Office of Drug Control Policy. To order additional brochures call Prevention Network, 1-800-968-4968.

The best web resources for parents of students going to college include the following:

www.edc.org/hec/parents

This web site is put together by the Higher Education Center for Alcohol and Other Drug Prevention. It includes a brochure for parents and its own web links.

www.collegeparents.org

College Parents of America put together this web site. This organization partners with the Higher Education Center to organize and support parents.

www.collegedrinkingprevention.gov/

This web site is about “A Call to Action: Changing the Culture of Drinking at U.S. Colleges” – the report from the Task Force of the National Advisory Council on Alcohol Abuse and Alcoholism published in April 2002. It includes a publication for parents.

www.michigan.gov/mdch

Click on “Mental Health & Substance Abuse,” then go to “Drug Control & Substance Abuse,” and click on “Binge Drinking” for information.

For data about college student drinking, see:

www.siu.edu/departments/coreinst/

A site of the Core Institute, Center for Alcohol and Other Drug Studies at Southern Illinois University.

www.hsph.harvard.edu/cas

Harvard School of Public Health College Alcohol Study.

For more information about campus initiatives in ATOD prevention, contact Prevention Network, 1-800-968-4968 or e-mail campus@preventionnetwork.org.

Parents – Talk to Your Children About Tobacco!!!

Yes, alcohol is the most widely used drug on America’s college campuses and therefore, the “biggest problem,” but tobacco use by college students increased between 1993 and 1997.¹ Unfortunately, while under 18 use is declining, college use is holding steady.² Tobacco ultimately kills many more people than alcohol and 9 out of 10 current adult smokers (89%) started their habit before age 19.³

Encourage your student to quit, if already a smoker. If not, reinforce the good decision-making!

¹ Substance Abuse – The Nation’s Number One Health Problem. Prepared by the Schneider Institute for Health Policy, Brandeis University for the Robert Wood Johnson Foundation, Princeton, New Jersey, February 2001.

² Data from website of Core Institute, Center for Alcohol and Other Drug Studies at Southern Illinois University.

³ “Youth Smoking Prevention: What Works?” by Paula M. Lantz, Ph.D., Peter D. Jacobson, J.D., M.P.H., and Kenneth E. Warner, Ph.D. The Prevention Researcher, April 2001, Vol. 8, No. 2.

Special Tots

Early intervention can make a big difference in the lives of children with disabilities.

By **Judy Winter**, award-winning journalist and recipient of the Michigan Federated Chapters of the Council for Exceptional Children (MCEC) 2002 Exceptional Parent Award.

Jappwinter@aol.com

The news that your child has a disability or developmental delay can leave a family reeling with sadness and disappointment. Parents often feel unprepared to seek services for their children that can make the difference between later success and failure in school. Here are a few things you can do to be sure these important early learning years won't be lost.

Teach Yourself

Ask questions and learn about resources available. The more you understand about your child's disability, the more confident and empowered you will become when working with professionals who work with your child.

Use the Internet to research your child's disability and to e-mail parents nationwide who have children with a similar disability.

Visit bookstores as well as local and university libraries for books about parenting children with special needs. *Laying Community Foundations for Your Child With a Disability* by Linda Stengle provides an excellent start.

Don't be intimidated by professionals or by the "system" that employs them. No one knows your child better than you, and only you know what it's like to live daily with a special-needs child.

Teach Your Child

Provide your child with a stimulating and nurturing environment. Provide a normal preschool experience, if possible, read books, arrange play with other children and attend family outings. This will serve your child well later as he or she adapts to the school environment.

Read to your child and speak using age-appropriate language.

Reach Out For Help

Develop a dynamic team of professionals to address your child's special needs, including a physician, and place yourself at the head of that team.

Take advantage of dynamic Early On Michigan and other intervention services.

Contact the Intermediate School District in your county as soon as you suspect your child may have a disability or is slow to develop in any way.

Seek help if you find it hard to accept your child's disabilities and its challenges. This help can come from Community Mental Health, your family or within your faith community.

Network With Others

Few individuals can provide more tried and true resources than another parent. An added bonus? The social support of such a network can help reduce a sense of isolation and helplessness that may come with parenting a child with special needs.

Use the Internet to network nationwide or join parent-support groups and classes offered by the Intermediate School District. If your district doesn't offer any, find one that does.

Be Patient With Yourself

It takes time to adjust to the reality of having a child with special needs. Don't expect to have all the answers up front. In time, you will be better able to handle the challenges that come your way and become skilled at making positive things happen for your child.

A good rule of thumb? Concentrate on what your child needs to be successful *today*. The future of your child, as well as your own, can be brighter as a result.

This article has been adapted with permission for use in the PAM Organizers' Packet. It first appeared in Michigan Learning, September/October 1999. For more information contact Partnership for Learning, 800/832-2464 or visit their web site at www.PartnershipForLearning.org.

Resources for Parents and Caregivers of Children with Special Needs

AbleNet

Practical products and ideas for teaching students with special needs.

<http://www.ablenetinc.com>

The ARC Michigan

Michigan and national information and resources for families of children with special needs.

1-800-292-7851 or <http://www.arcmi.org>.

Bridges4Kids: Building Partnerships Between Families, Schools, and Communities

Information and links regarding a wide variety of special needs and at-risk issues.

<http://www.bridges4kids.org>.

Disability Resources Monthly (DRM) Guide to Disability Resources on the Internet.

Topics for people with disabilities and those working with them.

<http://www.disabilityresources.org>

Early On Public Awareness / Central Directory Project

Offers brochures and advice on when you should be concerned about your child's development and how to get help. 1-800-Early On; or e-mail them at earlyon@juno.com.

Exceptional Parent Magazine

Monthly publication and yearly resources for the disability community. <http://www.eparent.com>

Federal Interagency Coordinating Council (FICC)

U.S. Department of Education web site identifying individuals in government to contact for answers to families' questions about children and disability issues. <http://www.fed-icc.org> or 202-205-8658.

National Center for Children and Youth With Disabilities

1-800-695-0285 or <http://www.nichcy.org>.

Parenting Special Needs

Website that provides links to special needs information and resources.

<http://specialchildren.about.com>

Parent HELPline

Parenting a child with special needs can be stressful. This resource is for parents who need immediate help in exploring new ways to deal with the pressures of being a parent.

1-800-942-HELP accepts calls 24-hours a day, 7 days a week.

Project P.E.F.O.R.M.

A parent-to-parent support and resource center for families of children with special needs.

1-800-552-4821 or <http://www.wash.k12.mi.us/perform>.

The Sibling Support Project

National program addressing interests of siblings of individuals with special needs.

<http://www.thearc.org/siblingsupport> and 202-297-6368.

TIPS FOR PARENTS TO AVOID ALCOHOL, TOBACCO AND OTHER DRUG PROBLEMS IN CHILDREN

- TALK TO YOUR CHILDREN.** Give accurate information. Start early and keep talking.
- LISTEN TO YOUR CHILDREN.** You will learn what they are dealing with and what they need to know.
- STATE CLEARLY THAT YOU DO NOT WANT AND DO NOT EXPECT YOUR CHILD TO USE ALCOHOL, TOBACCO, OR OTHER DRUGS.** [All are illegal for underage children.]
- BE AWARE OF AND DISCUSS ALCOHOLISM IN THE FAMILY, OR OTHER FACTORS THAT PUT YOUR CHILDREN AT RISK.**
- BUILD ON THE ASSETS IN YOUR CHILD, FAMILY, SCHOOL, AND COMMUNITY.** Every child, family, school, and community has strengths and positive qualities to celebrate and nurture.
- HAVE FAMILY RULES.** Enforce them and carry out logical and clearly stated consequences.
- PROVIDE GOOD ROLE MODELING.** Parent behavior is the biggest influence on a child's use of alcohol, tobacco or other drugs.
- START EARLY BY PREVENTING TOBACCO USE.** Smoking is an indicator for later marijuana use and other risky behaviors.
- EMPHASIZE THE RISKS OF ALCOHOL.** A child's belief that a drug is harmless or acceptable increases their risk of using. Emphasize that alcohol—
 - is illegal for persons under 21
 - is immediately harmful to health
 - alters judgment and perception
 - has effects which interfere with physical, emotional and social growth and brain development
 - can cause inappropriate, risky, and unintended behavior, dependence, addiction, and death from intoxication.
- KNOW WHAT YOUR CHILDREN ARE DOING** — The people they associate with, what they do after school, what's in their bedroom.
- KNOW YOUR CHILDREN'S FRIENDS AND THEIR PARENTS. SUPERVISE ACTIVITIES AND AFTER SCHOOL HOURS.**
- HELP YOUR CHILD DEAL WITH MEDIA, PEER, AND SOCIAL PRESSURES.** Rehearse with them how to make a good decision, say "no," and avoid risky situations. Discuss TV, movies, and music with them.
- TALK TO YOUR CHILDREN EVEN IF YOU HAVE USED ALCOHOL, TOBACCO, OR OTHER DRUGS YOURSELF.**
 - Don't lie, but don't dwell on the subject either.
 - Avoid discussion which could glamorize use, or give an unintended "I survived, you can too" message.
 - Stress that today we know better about the hazards of alcohol, tobacco and other drugs.
 - If you smoke, express your wish that you were not dependent.
 - Say the discussion is not about your past mistakes, but about mistakes your child must avoid.
- HUG YOUR CHILDREN AND TELL THEM THAT YOU LOVE THEM!** Their world is not an easy place to be in. They need your supervision and your love.

Parenting for Prevention of Underage Drinking

Children and youth are bombarded every day with incorrect information and mixed messages about alcohol. The reality is that alcohol is linked with health problems, violence, vehicle crashes, unwanted and unsafe sex, and other social problems.

Changing the alcohol abuse picture in any community requires us to “parent for prevention.” This involves looking at ourselves individually, looking at the community environment, and working with other parents and care givers.

1. **Become educated** about the disease of addiction, risk factors, why people use, environmental influences, parent role modeling, real facts.

2. **De-myth our thinking**

- * A little beer won't hurt
- * It's a rite of passage, all kids do it.
- * Thank goodness she only drinks and doesn't use something illegal.
- * I can trust my son not to drink and drive.
- * It's ok because my kid only drinks at home.

THE FACT IS: Alcohol use by adolescents leads more rapidly and more frequently to addiction than for adults. People who start drinking before the age of eighteen become addicted at much higher rates than those who start drinking later. Alcohol interferes with the physical, emotional, social, and spiritual growth of children and youth, and with critical childhood and adolescent brain development.

3. **Examine our own attitudes and role modeling.** The perception that alcohol use is the norm makes a young person more likely to use. Drinking patterns are learned at home.

4. **Know—and tell our children about—individual family risk.** People whose biological relatives are alcoholic are at higher risk for addiction if they choose to use. High tolerance for alcohol (they can drink a lot) indicates a person is at high risk for addiction.

5. **Understand and warn against youthful patterns of alcohol use.** Young people tend to binge drink. They seek intoxication. They can drink themselves to death.

6. **Learn the signs** that a young person is using alcohol and seek help when needed.

7. **Take parenting education classes.** Few of us have been prepared for this most important responsibility. Most of us could improve our skills.

8. **Help children develop resilience**

- ❖ Teach them steps for making wise decisions.
- ❖ Role play how to “say no” and avoid risky situations.
- ❖ Model and create opportunities for good, two-way communication.
- ❖ Encourage self-expression.
- ❖ Foster situations and use language that promote healthy self-esteem.
- ❖ Nurture the developmental assets (*building blocks of healthy development*) of children and youth.

(CONTINUED ON BACK)

9. **Become involved in providing alternative activities for youth** and a variety of means for recreation, community service, creative expression, civic engagement, and personal achievement.
10. **Examine the community environment in regard to alcohol**
 - access to alcohol
 - enforcement of laws and ordinances
 - consistency of school and community policies and their enforcement
 - advertising and other marketing/industry influences
 - adult role modeling and attitudes about youthful use
 - sources of mixed messages
 - influences on community norms such as college culture, tourist trade, etc.

Then participate in making needed changes.
11. **Network with other parents.** Establish community standards. Support children in making no-use choices. Provide safe activities and celebrations.
12. **Create and participate in community coalitions** that work for healthy community norms, a safe environment, adequate services, and opportunities for all children. In time, other people's children influence our own.

RESOURCES

Education

- Substance Abuse Coordinating Agency Prevention Specialists — Call Prevention Network for local numbers, 1-800-968-4968, or refer to list included in Parenting Awareness Michigan/Month packet.
- Alcoholism, signs, family risk — Call National Council on Alcoholism and Drug Dependence of Michigan, 1-800-344-3400.
- Written materials and free video loans — Call Michigan Resource Center, 1-800-626-4636. Request:

<ul style="list-style-type: none"> ✓ <i>Publications Catalog</i> ✓ <i>Video Catalog</i> ✓ <i>Michigan Parent Handbook</i> 	<ul style="list-style-type: none"> ✓ <i>Parenting Awareness Month Organizers' Packet</i> ✓ <i>Materials Order Form</i> ✓ <i>Ask for their suggestions</i>
--	--

Parent Networks and Community Coalitions

- For local referral — Prevention Network, 1-800-968-4968, or e-mail pamcampaign@voyager.net
- School District Safe & Drug Free Schools Communities Committees — check with local school districts
- Parent Teacher Student Associations — Michigan PTSA, 517/485-4345; or www.michiganpta.org

Parenting Education—check local phone book listings for

- | | |
|--|---|
| <ul style="list-style-type: none"> • Local and Intermediate Schools Districts • Community Mental Health Offices • MSU Extension Offices • Child Care Coordinating Councils • PTSA Chapters • Local hospitals | <ul style="list-style-type: none"> • Human services agencies such as Catholic Social Services and Lutheran Social Services • Urban Leagues • Parent, family, or community resource centers • Religious institutions |
|--|---|

Prepared by Prevention Network and updated April, 2002.

CHILDREN and SECONDHAND SMOKE



What is Secondhand Smoke?

Secondhand smoke, also known as Environmental Tobacco Smoke (ETS), is a combination of the smoke from a burning cigarette, cigar or pipe and the smoke exhaled from a smoker's lungs. According to the Environmental Protection Agency (EPA), over 4,000 different chemicals are contained in tobacco smoke, and more than 50 of them are recognized as known or probable cancer causing agents.

Why Should Parents and Other Adults Be Concerned About Secondhand Smoke?

- Children who breathe secondhand smoke are more likely to experience pneumonia, bronchitis and decreased lung function.
- Children who breathe secondhand smoke are more likely to suffer from more ear infections. Ear infections are the most common cause of children's hearing loss.
- Children who breathe secondhand smoke can have more frequent and more severe asthma attacks.
- Secondhand smoke may cause children to develop asthma.
- Infants who breathe secondhand smoke are at a higher risk for Sudden Infant Death Syndrome (SIDS), the main cause of death in babies between one month and one year of age.
- An unborn baby's exposure to secondhand smoke can result in low birth weight, SIDS and possibly other adverse health effects.

What Can Be Done To Protect Children?

- If you smoke, make a decision to quit.
 To help you, free Quit Kits are available by calling 1-800-537-5666.
- Choose to protect your children by making your home smoke-free. Take the Environmental Protection Agency's Smoke-Free Home Pledge by calling 1-866-SMOKE-FREE (866-766-5337).
- Choose not to smoke around children.
- Choose to avoid smoke filled environments.
- Choose to make your car smoke-free.
- Make sure your day care facilities are smoke-free.
- Choose to eat at smoke-free restaurants.

For More Information Contact:

Michigan Department of Community Health
Health Promotions & Publications
Tobacco Section
3423 N. Martin L. King, Jr. Blvd.
P.O. Box 30195
Lansing, MI 48909
517-335-9885

Environmental Protection Agency's Indoor Air
Quality INFO Clearinghouse
1-800-438-4318, or visit their website at
www.epa.gov/smokefree/index.html

American Lung Association
1-800-586-4872, or visit their web site at
www.alam.org

Quitting smoking is one of the most important things a woman can do to protect her and her baby's health.

Smoking during pregnancy can cause the following:

- Infant death
- Decreased oxygen to the brain
- Premature birth
- Low birth weight
- Decreased infant lung function
- Increased risk of childhood behavioral problems and learning disabilities

Benefits of staying quit after pregnancy for baby:

- Fewer chest colds, coughs, ear infections
- Lower risk for SIDS (crib death)
- Decreased risk of developing asthma and wheezing
- Less likely to become a childhood or adolescent smoker

Below are some resources to help pregnant women quit smoking:

Smoke-Free for Baby & Me* (Program)
Michigan Department of Community Health
517-335-9750 (or contact your local health department for program availability)

Expectant Mother's Quit Kit
Michigan Department of Community Health
1-800-537-5666

About Smoking and Pregnancy (Booklet)
Michigan Resource Center
1-800-626-4636

Need Help Putting Out That Cigarette? (Booklet)
Smoke-Free Families
919-843-7663
Booklet is also available at www.smokefreefamilies.org

Great Start (Prenatal Quit Line)
American Legacy Foundation
1-866-66-START

For more information on smoking during pregnancy and prenatal quit smoking programs, contact Teri Wilson, Michigan Department of Community Health, at 517-335-9124 or scorciawilson@michigan.gov.

IS YOUR CHILD SAFE FROM LEAD POISONING?

Learn How to Protect Your Family

Take this test to see if your child may have lead poisoning.

By the time there are signs, harm may have been done that will last your child's lifetime.

If you answer yes to any of these questions, your child is at risk for lead poisoning.

The only way to know for sure is to have your child tested.

Does your child now or in the recent past live in or often visit a house built before 1950 with peeling or chipping paint? This could include a day care, preschool, or home of a relative.	Yes	No	Don't Know
Does your child now or in the recent past live in or often visit a house built before 1978 that has been remodeled within the last year?	Yes	No	Don't Know
Does your child have a brother, sister, or playmate with lead poisoning?	Yes	No	Don't Know
Does your child live with an adult whose job or hobby involves lead?	Yes	No	Don't Know
Does your family use any home remedies that may contain lead?	Yes	No	Don't Know

▣ What Causes Lead Poisoning?

There are many places in a home that could put babies and children in danger of lead poisoning.

Lead paint was used in many homes built before 1978. The older the home, the more likely that windows, cupboards, doors, porches, and outdoor surfaces contain lead paint.

Children are most often poisoned by lead dust and lead paint in older homes. Lead dust can come from disturbing areas with lead paint, opening and closing windows, and through normal wear and tear of painted areas. Lead dust falls to the floor and gets on children's hands and toys. It enters their bodies when they put their hands or toys into their mouths.

We know how dangerous lead is. Lead poisoning can cause health and behavior problems in young children. It can make them less able to learn when they get to school. Lead poisoning can affect a child for a lifetime. The good news is that there are things you can do to keep your child safe from lead.

▣ How Can I Tell If My Child Has Lead Poisoning?

A lead poisoned child most often looks healthy, but may have any of the following signs: Learning and behavior problems, hearing problems, tiredness, weight loss, headaches, hyperactivity, or irritability.

▣ When Should My Child Be Tested For Lead Poisoning?

Many children have blood lead tests as part of their regular care by a doctor or clinic. These tests are important for children who live or spend time in older houses which may have lead paint.

Children should be tested for lead poisoning at one and two years of age or more often depending on their contact with sources of lead. Medicaid requires that enrolled children be tested at 1 and 2 years of age.

(continued on back)

▣ What Else Can I Do To Protect My Child?

- Wash your child's hands, bottles, pacifiers and toys often.
- Take off shoes when going into the house.
- Keep dust and dirt off of floors, window sills and other surfaces.
- Use very cold tap water for drinking and cooking.
- Make sure children eat 4 to 6 small meals a day. Foods such as lean red meat, chicken, fish, milk, cheese, yogurt, collard greens, oranges, grapefruits, tomatoes, peppers, cereals and dried fruit. Low fat foods are best for children over the age of two years.
- Check your home for lead hazards.
- Test the dirt in child play areas for lead.
- Talk to your landlord about fixing peeling and chipping paint.
- Learn how to safely remove lead paint.
- Avoid exposure to lead dust when remodeling by wetting work areas.
- Do not use a power sander, open-flame torch, heat gun above 1,100 F, dry scraper or dry sandpaper on painted surfaces that may contain lead.

▣ What Can I Do To Make My Home Lead-Safe?

Areas that should be cleaned regularly are windows, doors, floors, porches, stairs and child play areas.

Follow these steps when cleaning:

- **Use the right cleaner:** Any soapy household cleaner or products made to remove lead dust. Use a spray bottle or bucket for the cleaning solution.
- **Put on gloves:** If you do not have rubber gloves, wash your hands well after cleaning.
- **Pick up all paint chips first:** Window areas and porches often have lots of paint chips. Put chips in a plastic bag and throw away. **Do not use your vacuum!** Many local health departments have vacuums with special HEPA filters to borrow.
- **Wipe areas with cleaning solution:** Use new paper towels to clean each area and then throw them away. A mop can be used on floors.
- **Keep soapy water clean:** Do not put dirty paper towels or mop into the wash water.
- **Pour wash water down a toilet:** Do not pour it down a sink.
- **Rinse after cleaning:** Use clean water and paper towels or mop for rinsing each area. Throw away mop head after the last rinse.
- **Repeat these steps often:** Use this cleaning method when dust and dirt appear.

IMPORTANT! Do not use your vacuum. This will spread lead dust into the air you breathe.

Professional Help in Michigan

For additional information, answers to questions and referrals.

Michigan Department of Community Health

Lead Hazard Remediation Program toll-free (866) 691-5323
Childhood Lead Poisoning Prevention Project (517) 335-8885
WIC Program (800) 26-BIRTH

Website: www.michigan.gov/mdch

Link: Physical Health and Prevention

Link: Prevention

Link: Lead Poisoning

Detroit Lead Poisoning Prevention and Control Program

(313) 876-4200

Children's Hospital of Detroit Lead Clinic

(313) 745-4000

U.S. Department of Health and Human Services
Head Start of Michigan

(800) 585-9997

United Parents Against Lead of Michigan toll-free (877) 623-2688

Updated for 2004 PAM Organizers' Packet

How do I know if my child is being bullied?

By Glenn Stutzky, MSW, School Safety Researcher and Consultant
associated with Michigan State University's School of Social Work

Bullying among school-aged children is the most frequently occurring form of violence in American schools. However, most adults have ignored it or failed to recognize bullying as a significant aspect of school violence. That is changing as researchers, educators, administrators, and parents are taking a closer look at bullying and its effects on children.

Bullying Myths

We all need a clear understanding of just what bullying is and what it isn't. How we define a problem determines the type of policies we write and the interventions we plan. So if we are going to deal with bullying, we need to dispel some widely believed myths.

- **Bullying is mainly a boy thing.** When they think of bullying, many people picture a large boy—mean, rough, not that smart, with few friends. Bullying is as much a "girl thing" as it is a "boy thing." Girls tend to use different tactics in their bullying. Using rumors, gossip, manipulation of friendships and social isolation, most girl bullies fly underneath the radar of adults in the school.
- **Bullying is just a developmental stage.** Many people believe that being bullied is a "rite of passage" that is part of learning that life is tough. Some even say that it can help children solve problems and "build character." Bullying is *not* a developmental stage that children go through and naturally grow out of. Some excellent long-term studies prove that children who are bullies in elementary school remain so into their adult life.
- **Bullying is no big deal.** This myth has been one of the most devastating because it results in the suffering of millions of children. Some people believe that bullying doesn't result in any "real" harm to a child—that if they "feel" hurt it is probably the result of being too "sensitive," or too "thin-skinned." Research clearly shows that children who suffer this type of abuse are affected physically, mentally, emotionally, socially, and academically. Bullied children report higher number of health related concerns, such as depression, anxiety, and insomnia. They also report loneliness, unhappiness, feelings of isolation and lower grades and test scores. In extreme cases bullying can lead to acts of homicidal revenge, targeting schools for violence or to suicide—what I call Bullicide: death by bullying. Bullying is a big deal. There is no such thing as a small bullying incident.

What is bullying?

People define bullying differently, but most agree it includes the following aspects:

- Bullying is *repeated meditative actions* that bring *harm to an individual*.
- Also that there is an *imbalance of power* between the bully and victim.
- Bullying is a *relationship* in which one individual seeks to gain power and control over the life of another.

Bullying is all about power—the imbalance and abuse of power. The essence of bullying is not in the actions of a bully but in their intentions.

Is it normal peer conflict or is it bullying?

1. **First, take a look at the issue of power.** In a normal peer conflict, the parties involved are friends or good acquaintances and have the same power and status among their classmates. With bullying you have a clear imbalance of power, with one having greater social status than the other. Remember that bullying is deliberate, repeated over time and causes serious harm to the target. Normal peer conflict happens once in a while, is not targeted, and usually doesn't result in serious harm.

(continued on back)

2. Second, look at the child's willingness to resolve the conflict. Children involved in normal peer conflict will try to resolve their differences, often with the help of others. In a bully-victim situation, the bully takes no responsibility for his or her actions, often blames the victim, and makes little or no effort to resolve the problem.

3. Next, ask the right questions to put the event into context. Bullying is simply the most subtle type of violence. When a child comes to us and says, "Frank pushed my pencil off my desk," our natural response is (while we may not say it out loud), "Why are you bothering me with this? So he pushed your pencil, pick it up, stop whining and being such a tattle-tale."

Rather we need to ask, "Has he done this before?"

If the answer is yes, ask "How many times?"

If the answer is, "Everyday," then ask "Has he done other things?"

If the answer is "Yes, he has taken my folder and torn it up," then ask, "Anything else?"

You might then hear, "Yes, he spits on me when I'm on the playground."

The point is, an individual incident can seem petty and insignificant unless it is put into context. By asking the right questions and taking the time to listen, parents and teachers can often uncover a pattern of bullying behavior.

What can adults do?

Unfortunately, most children fail to talk to adults about bullying, both at school and at home. They may feel embarrassed, ashamed, guilty, or afraid that if they tell us it will make the situation worse. They have reason to fear; many adults fail to understand the severity of what's going on or what to do about it. What can we do?

1. The first step is to become more informed on the issue of bullying.
2. The next is to make bullying a talkable subject in school and in the home
3. Most importantly, listen to young people, take seriously what they are telling us, put together a plan of action, and do it.

Bullying, like domestic violence of twenty years ago, thrives in darkness and silence. To stop the violence of bullying we must break the silence. Let's not wait for another tragedy for motivation. Now is the time.

If your child is being bullied, teach them these steps:

- Be assertive—look bullies in the eye and tell them to stop. Practice at home to find the words and tone of voice that sound calm and confident.
- Walk away from the situation as quickly as possible.
- Tell an authority such as a teacher, coach or other adult.
- Tell someone in the family
- If you're scared to tell an adult, bring a friend or write a note.
- If the adult doesn't listen, try telling someone else until someone listens.
- If you are afraid to tell authorities, ask someone from your family to help.

When talking to adults about bullies, have your child tell them:

- What has happened.
- How often it has happened.
- Who was involved.
- Who saw it happen.
- Where it happened and when.
- What you have done about it already.

Source: Stop Bullying Me! Citizens Against Bullying Association (CABA) of Northern Alberta.

For more resources and ideas, visit www.PartnershipForLearning.org; or call 800-832-2464 and ask for bully prevention resources.

2004 PAM Organizers' Packet

This article was adapted with permission for use in the PAM Organizers' Packet.

It first appeared as the cover article in *Michigan Learning*, August, 2002.



WHAT WE OFFER:

- *Trainings and workshops for agency professionals.*
- *Trainings and workshops for kinship caregivers*
- *A toll free hotline to answer legal, developmental, and other questions.*
- *A statewide conference for both agency professionals and kinship caregivers.*
- *Consulting services for grant-writing, resource development, and program development.*
- *Periodic roundtable presentations on topics of interest to both kinship caregivers and agency professionals.*
- *Written information and research about kinship care issues.*



Kinship Care Resource Center



FOR MORE INFORMATION CONTACT:

Kinship Care Resource Center
MSU School of Social Work
6810 S. Cedar St.
Suite 6
Lansing, MI 48911
www.kinshipcare.net

Phone: (517) 355-9600
(800) 535-1218 (toll free)
Fax: (517) 694-5615
E-mail: kinship@msu.edu

*Sponsored by:
Michigan State
University School of
Social Work*





WHAT IS KINSHIP CARE?

Kinship care is defined as the provision of full-time nurturing and protection of children by adults other than parents who have a family relationship bond with the children (Child Welfare League of America, 1994). Most of the time this nurturing and protection is provided by grandparents when original families are torn apart by substance abuse, incarceration, death, mental and physical illness, AIDs, and child abuse and neglect. There are three types of kinship care arrangements.

- Informal Care. In an informal arrangement, family members become caregivers for relative children without the involvement of the court or a social service agency.
- Formal Care. Formal arrangements are made with the assistance of an agency, such as Child Protective Services, which may maintain limited contact with the kinship caregivers over time.
- Kinship Foster Care. Kinship foster care involves the licensing of relative caregivers as foster parents.

A LOOK AT KINSHIP CARE...

Across the United States

- In 2000, there were approximately 2,400,000 grandparent caregivers in the United States.
- 5.4 million children are cared for by grandparents and other relative caregivers.
- 77.2 percent of these grandparents had been responsible for their grandchildren for more than one year.
- 18.8 percent of these kinship care families live below the poverty level.

Across Michigan

- In 2000, there were approximately 66,000 grandparent caregivers in Michigan.
- 76.2 percent of these grandparents had been responsible for their grandchildren for more than one year.
- 11.9 percent of these kinship care families live below the poverty line compared to only 6.8 percent of other families in the state.

Data taken from Census 2000 Supplementary Survey.

ARE YOU RAISING A RELATIVE'S CHILD?

Do you need information about:

- *relative caregiver support groups
- *legal or guardianship issues
- *financial assistance programs
- *social services for kinship families
- *parenting concerns

WE CAN HELP!

CALL THE KINSHIP CARE RESOURCE CENTER.

1-800-535-1218

OR

1-517-355-9600

MONDAY-FRIDAY

9 A.M. TO 4 P.M.



This service is sponsored by the Michigan State University School of Social Work Kinship Care Project and Chance at Childhood Program.

Parents!

are you feeling...

- . OVERWHELMED?
- . ALONE?
- . SCARED?
- . FED UP ?



PARENT HELPLINE

1.800.942.HELP

(1.800.942.4357)

...your call is confidential and toll free.

Call the Parent Helpline...we can help!

State-wide Crisis Intervention and Information & Referral services.

CALL US ANY TIME — 24 HOURS, 7 DAYS A WEEK.

*... these lines are funded by the State of Michigan Family Independence Agency
Crisis line services provided by . . .*

Gryphon

place

helping you find solutions . . . 24 hours a day.

Gryphon Place • 1104 S. Westnedge Avenue • Kalamazoo, MI 49008 • 269.381.1510 phone •
- For more information about the FIA Crisis lines, contact lranney@gryphon.org -

Asset-Building Ideas For Parents and Guardians

Being a parent or guardian can be very hard work — no surprise there, right? Most parents and guardians have things they love about their role as well as problems with their kids that they have to deal with. What might be surprising, though, is that one of the best ways to deal with problems is to focus on positives. Research shows that a more effective approach to raising healthy, competent kids is to concentrate on building developmental assets. These assets form the foundation young people need to make healthy choices and to succeed in life. The more assets your kids have, the stronger this foundation will be. There are probably lots of asset-building things you already do for your children — even if you don't call them that. Here are some ways to be intentional about asset building:

- **Post the list of 40 developmental assets on your refrigerator door.** Each day, do at least one asset-building thing for each family member.
- **Talk to your children about the 40 developmental assets.** Ask them for suggestions of ways to strengthen their assets.
- **Connect with other parents who are interested in asset building.** Form relationships in your neighborhood, on the job, through a congregation, or through a parent-education organization.
- **Regularly do things with your child,** including projects around the house, recreational activities, and service projects. Take turns planning activities to do together as a family
- **Eat at least one meal together** as a family every day.
- **Negotiate family rules and consequences** for breaking those rules.
- **Develop a family mission statement** that focuses on building assets. Then use it to help you make family decisions and set priorities.
- **Talk about your values and priorities,** and live in a way that is consistent with them.
- **Give your children lots of support and approval** while also challenging them to take responsibility and gain independence.
- **If you are parenting alone, look for other adult role models** of both genders who can be mentors for your children.
- **Nurture your own assets** by spending time with people who care about you and are supportive. Also, take opportunities to learn new things, contribute to your community, and have fun. You'll take better care of your children if you take care of yourself.
- **Think about the way you were parented** and how that affects your relationships with your children. If there are parts of your relationship with your parents that were very difficult or that get in the way of your parenting, consider talking with someone about these issues.
- **Don't let anyone in your family (including you) watch too much television.** Find other interesting and meaningful activities for your children to do—some with you, some with their friends, some by themselves.
- **Learn as much as you can about what your kids need at their current ages.**
- **Recognize that children need more than just financial support.** They also need emotional and intellectual support. Balance family time with other priorities like work, recreation, and hobbies.
- **Don't wait for problems to arise before talking with your children's teachers.** Keep in regular contact with them about how your children are doing and what you can do to help your children learn.
- **Think of teenagers as adults in training.** Teach them something practical, such as how to change a tire on the car, prepare a meal, or create a monthly budget.
- **Be aware of differences in how you relate to your children.** Are you more comfortable with one gender? If so, why? What impact does that have in your family?
- **Do intergenerational activities** with extended family and with other neighborhood adults and families.
- **Be an asset builder** for other young people in your life.
- **Remember that you are not alone.** Other asset builders in your children's lives include coaches, child-care providers, religious education teachers, club leaders, and neighbors. Work with these people to give kids consistent messages about boundaries and values.



40 Developmental Assets for Infants and Toddlers (Ages 0 to 2)

Search Institute has identified a framework of 40 developmental assets for children from birth to age 2 that blends Search Institute's research on developmental assets for 12- to 18-year-olds with the extensive literature in child development. For more information, see *Starting Out Right: Developmental Assets for Children* (published by Search Institute in 1997).

CATEGORY	ASSET NAME AND DEFINITION
Support	<ol style="list-style-type: none"> 1. Family support—Family life provides high levels of love and support. 2. Positive family communication—Parent(s) communicate with the child in positive ways. Parent(s) respond immediately to the child and respect the child. 3. Other adult resources—Parent(s) receive support from three or more nonparent adults and ask for help when needed. The child receives love and comfort from at least one nonparent adult. 4. Caring neighborhood—Child experiences caring neighbors. 5. Caring out-of-home climate—Child is in caring, encouraging environments outside the home. 6. Parent involvement in out-of-home situations—Parent(s) are actively involved in helping the child succeed in situations outside the home.
Empowerment	<ol style="list-style-type: none"> 7. Children valued—The family places the child at the center of family life. 8. Child has role in family life—The family involves the child in family life. 9. Service to others—Parent(s) serve others in the community. 10. Safety—Child has a safe environment at home, in out-of-home settings, and in the neighborhood.
Boundaries and Expectations	<ol style="list-style-type: none"> 11. Family boundaries—Parent(s) are aware of the child's preferences and adapt the environment to best suit the child's needs. Parent(s) begin setting limits as the child becomes mobile. 12. Out-of-home boundaries—Child care and other out-of-home environments have clear rules and consequences while consistently providing the child with appropriate stimulation and enough rest. 13. Neighborhood boundaries—Neighbors take responsibility for monitoring the child's behavior as the child begins to play and interact outside the home. 14. Adult role models—Parent(s) and other adults model positive, responsible behavior. 15. Positive peer observation—Child observes positive peer interactions of siblings and other children and has opportunities for beginning interactions with children of various ages. 16. Expectations for growth—Parent(s) are realistic in their expectations of development at this age. Parent(s) encourage development but do not push the child beyond his or her own pace.
Constructive Use of Time	<ol style="list-style-type: none"> 17. Creative activities—Parent(s) daily expose the child to music, art, or other creative activities. 18. Out-of-home activities—Parent(s) expose the child to limited but stimulating situations outside of the home. Family attends events with the child's needs in mind. 19. Religious community—Family attends religious programs or services on a regular basis while keeping the child's needs in mind. 20. Positive, supervised time at home—Parent(s) supervise the child at all times and provide predictable and enjoyable routines at home.

EXTERNAL ASSETS



INTERNAL ASSETS

CATEGORY	ASSET NAME AND DEFINITION
Commitment to Learning	<ul style="list-style-type: none"> 21. Achievement expectation—Family members are motivated to do well at work, at school, and in the community and model this to the child. 22. Engagement expectation—The family models responsive and attentive attitudes at work, at school, in the community, and at home. 23. Stimulating activity—Parent(s) encourage the child to explore and provide stimulating toys that match the child's emerging skills. Parent(s) are sensitive to the child's level of development and tolerance for movement, sounds, and duration of activity. 24. Enjoyment of learning—Parent(s) enjoy learning and demonstrate this through their own learning activities. 25. Reading for pleasure—Parent(s) read to the child daily in enjoyable ways.
Positive Values	<ul style="list-style-type: none"> 26. Family values caring—Parent(s) convey their beliefs about helping others by modeling their helping behaviors. 27. Family values equality and social justice—Parent(s) place a high value on promoting equality and reducing hunger and poverty, and model these beliefs. 28. Family values integrity—Parent(s) act on convictions and stand up for their beliefs, and communicate and model this in the family. 29. Family values honesty—Parent(s) tell the truth and convey their belief in honesty through their actions. 30. Family values responsibility—Parent(s) accept and take personal responsibility. 31. Family values a healthy lifestyle and sexual attitudes—Parent(s) love the child, setting the foundation for the child to develop healthy sexual attitudes and beliefs. Parent(s) model, monitor, and teach the importance of good health habits, such as providing good nutritional choices and adequate rest and play time.
Social Competencies	<ul style="list-style-type: none"> 32. Planning and decision-making observation—Parent(s) make all safety and care decisions for the child and then model these behaviors. Parent(s) allow the child to make simple choices as the child becomes more independent and mobile. 33. Interpersonal observation—Parent(s) model positive and constructive interactions with other people. Parent(s) accept and are responsive to the child's expression of feelings, interpreting those expressions as cues to the child's needs. 34. Cultural observation—Parent(s) have knowledge of and are comfortable with people of different cultural/racial/ethnic backgrounds and model this to the child. 35. Resistance observation—Parent(s) model resistance skills by their own behaviors. Parent(s) are not overwhelmed by the child's needs and thereby demonstrate appropriate resistance skills. 36. Peaceful conflict-resolution observation—Parent(s) behave in acceptable, nonviolent ways and assist the child in developing these skills when faced with challenging or frustrating circumstances by helping child solve problems.
Positive Identity	<ul style="list-style-type: none"> 37. Family has personal power—Parent(s) feel they have control over things that happen to them and model coping skills, demonstrating healthy ways to deal with frustrations and challenges. 38. Family models high self-esteem—Parent(s) model high self-esteem and create an environment where the child can develop positive self-esteem, giving the child positive feedback and reinforcement about skills and competencies. 39. Family has a sense of purpose—Parent(s) report that their lives have purpose and model these beliefs through their behaviors. 40. Family has a positive view of the future—Parent(s) are optimistic about their personal future and work to provide a positive future for the child.

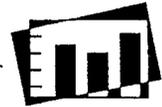


40 Developmental Assets for Preschoolers (Ages 3 to 5)

Search Institute has identified a framework of 40 developmental assets for children ages 3 to 5 that blends Search Institute's research on developmental assets for 12- to 18-year-olds with the extensive literature in child development. For more information, see *Starting Out Right: Developmental Assets for Children* (published by Search Institute in 1997).

EXTERNAL ASSETS

CATEGORY	ASSET NAME AND DEFINITION
Support	1. Family support —Family life provides high levels of love and support.
	2. Positive family communication —Parent(s) and child communicate positively. Child seeks out parent(s) for assistance with difficult tasks or situations.
	3. Other adult resources —Child receives support from at least one nonparent adult. Parent(s) have support from individuals outside the home.
	4. Caring neighborhood —Child experiences caring neighbors.
	5. Caring out-of-home climate —Child is in caring, encouraging environments outside the home.
	6. Parent involvement in out-of-home situations —Parent(s) are actively involved in helping child succeed in situations outside the home.
Empowerment	7. Children valued —Parent(s) and other adults value and appreciate children.
	8. Children given useful roles —Parent(s) and other adults take child into account when making decisions and gradually include the child in decisions.
	9. Service to others —The family serves others in the community together.
	10. Safety —Child has a safe environment at home, in out-of-home settings, and in the neighborhood.
Boundaries and Expectations	11. Family boundaries —Family has clear rules and consequences. Family monitors the child and consistently demonstrates appropriate behavior through modeling and limit setting.
	12. Out-of-home boundaries —Neighbors, child care, preschool, and community provide clear rules and consequences.
	13. Neighborhood boundaries —Neighbors take responsibility for monitoring the child's behavior.
	14. Adult role models —Parent(s) and other adults model positive, responsible behavior.
	15. Positive peer interactions —Child's interactions with other children are encouraged and promoted. Child is given opportunities to play with other children in a safe, well-supervised setting.
	16. Expectations for growth —Adults have realistic expectations of development at this age. Parent(s), caregivers, and other adults encourage child to achieve and develop his or her unique talents.
Constructive Use of Time	17. Creative activities —Child participates in music, art, or dramatic play on a daily basis.
	18. Out-of-home activities —Child interacts with children outside the family. Family attends events with the child's needs in mind.
	19. Religious community —Family attends religious programs or services on a regular basis while keeping the child's needs in mind.
	20. Positive, supervised time at home —Child is supervised by an adult at all times. Child spends most evenings and weekends at home with parent(s) in predictable, fun, enjoyable routines.



CATEGORY	ASSET NAME AND DEFINITION
Commitment to Learning	21. Achievement expectation —Parent(s) and other adults convey and reinforce expectations to do well at work, at school, in the community, and within the family.
	22. Engagement expectation —The family models responsive and attentive attitudes at work, at school, in the community, and at home.
	23. Stimulating activity —Parent(s) and other adults encourage the child to explore and provide stimulating toys that match the child's emerging skills. Parent(s) and other adults are sensitive to the child's level of development.
	24. Enjoyment of learning —Parent(s) and other adults enjoy learning and engage the child in learning activities.
	25. Reading for pleasure —Child is read to by a caring adult for at least 30 minutes a day.
Positive Values	26. Family values caring —Child is encouraged to express sympathy for someone who is distressed and to share his or her possessions.
	27. Family values equality and social justice —Parent(s) place a high value on promoting equality and reducing hunger and poverty, and they model these beliefs.
	28. Family values integrity —Parent(s) act on convictions and stand up for their beliefs, and they communicate and model this in the family.
	29. Family values honesty —Child learns the difference between truth and lying.
	30. Family values responsibility —Child learns that actions have an effect on other people.
	31. Family values a healthy lifestyle and healthy sexual attitudes —Parent(s) and other adults model, monitor, and teach the importance of good health habits. Child learns healthy sexual attitudes and beliefs and to respect others.
Social Competencies	32. Planning and decision-making practice —Child begins to make simple choices, solve simple problems, and develop simple plans at an age-appropriate level.
	33. Interpersonal interactions —Child plays and interacts with other children and adults. Child freely expresses feelings and is taught to articulate feelings verbally. Parent(s) and other adults model and teach empathy.
	34. Cultural interactions —Child is positively exposed to information and people of different cultural/racial/ethnic backgrounds.
	35. Resistance practice —Child is taught to resist participating in behavior that is inappropriate or dangerous.
	36. Peaceful conflict resolution practice —Parent(s) and other adults model peaceful conflict resolution. Child is taught and begins to practice nonviolent, acceptable ways to deal with challenging and frustrating situations.
	Positive Identity
38. Family models high self-esteem —Parent(s) model high self-esteem and create an environment where the child can develop positive self-esteem, giving the child positive feedback and reinforcement about skills and competencies.	
39. Family has a sense of purpose —Parent(s) report that their lives have purpose and model these beliefs through their behaviors.	
40. Family has a positive view of the future —Parent(s) are optimistic about their personal future and work to provide a positive future for the child.	



40 Developmental Assets for Elementary-Age Children (Ages 6 to 11)

Search Institute has identified a framework of 40 developmental assets for children ages 6 to 11 that blends Search Institute's research on developmental assets for 12- to 18-year-olds with the extensive literature in child development. For more information, see *Starting Out Right: Developmental Assets for Children* (published by Search Institute in 1997).

EXTERNAL ASSETS

CATEGORY	ASSET NAME AND DEFINITION
Support	1. Family support —Family life provides high levels of love and support.
	2. Positive family communication —Parent(s) and child communicate positively. Child is willing to seek advice and counsel from parent(s).
	3. Other adult relationships —Child receives support from nonparent adults.
	4. Caring neighborhood —Child experiences caring neighbors.
	5. Caring school climate —School provides a caring, encouraging environment.
	6. Parent involvement in schooling —Parent(s) are actively involved in helping child succeed in school.
Empowerment	7. Community values children —Children feel that the community values and appreciates children.
	8. Children given useful roles —Child is included in family decisions and is given useful roles at home and in the community.
	9. Service to others —Child and parent(s) serve others and the community.
	10. Safety —Child is safe at home, at school, and in the neighborhood.
Boundaries and Expectations	11. Family boundaries —Family has clear rules and consequences and monitors the child's whereabouts.
	12. School boundaries —School provides clear rules and consequences.
	13. Neighborhood boundaries —Neighbors take responsibility for monitoring the child's behavior.
	14. Adult role models —Parent(s) and other adults model positive, responsible behavior.
	15. Positive peer interactions —Child plays with children who model responsible behavior.
	16. Expectations for growth —Adults have realistic expectations of development at this age. Parent(s), caregivers, and other adults encourage child to achieve and develop his or her unique talents.
Constructive Use of Time	17. Creative activities —Child participates in music, arts, or drama three or more hours each week through home and out-of-home activities.
	18. Child programs —Child spends one hour or more per week in extracurricular school activities or structured community programs.
	19. Religious community —Family attends religious programs or services for at least one hour a week.
	20. Positive, supervised time at home —Child spends most evenings and weekends at home with parent(s) in predictable and enjoyable routines.



INTERNAL ASSETS

CATEGORY	ASSET NAME AND DEFINITION
Commitment to Learning	21. Achievement motivation —Child is motivated to do well in school.
	22. School engagement —Child is responsive, attentive, and actively engaged in learning.
	23. Homework —Child does homework when it is assigned.
	24. Bonding to school —Child cares about her or his school.
	25. Reading for pleasure —Child and a caring adult read together for at least 30 minutes a day. Child also enjoys reading without an adult's involvement.
Positive Values	26. Caring —Child is encouraged to help other people and to share her or his possessions.
	27. Equality and social justice —Child begins to show interest in making the community a better place.
	28. Integrity —Child begins to act on convictions and stand up for her or his beliefs.
	29. Honesty —Child begins to value honesty and act accordingly.
	30. Responsibility —Child begins to accept and take personal responsibility for age-appropriate tasks.
	31. Healthy lifestyle and sexual attitudes —Child begins to value good health habits. Child learns healthy sexual attitudes and beliefs and to respect others.
Social Competencies	32. Planning and decision making —Child learns beginning skills of how to plan ahead and makes decisions at an appropriate developmental level.
	33. Interpersonal competence —Child interacts with adults and children and can make friends. Child expresses and articulates feelings in appropriate ways and empathizes with others.
	34. Cultural competence —Child has knowledge of and comfort with people of different cultural/racial/ethnic backgrounds.
	35. Resistance skills —Child begins to develop the ability to resist negative peer pressure and dangerous situations.
	36. Peaceful conflict resolution —Child attempts to resolve conflict nonviolently.
	Positive Identity
38. Self-esteem —Child reports having high self-esteem.	
39. Sense of purpose —Child reports that "my life has a purpose."	
40. Positive view of personal future —Child is optimistic about her or his personal future.	



40 Developmental Assets for Adolescents (Ages 12 to 18)

Search Institute has identified the following building blocks of healthy development that help young people (ages 12 to 18) grow up healthy, caring, and responsible.

CATEGORY	ASSET NAME AND DEFINITION			
Support	<ol style="list-style-type: none"> Family support—Family life provides high levels of love and support. Positive family communication—Young person and her or his parent(s) communicate positively, and young person is willing to seek advice and counsel from parent(s). Other adult relationships—Young person receives support from three or more nonparent adults. Caring neighborhood—Young person experiences caring neighbors. Caring school climate—School provides a caring, encouraging environment. Parent involvement in schooling—Parent(s) are actively involved in helping young person succeed in school. 			
	Empowerment	<ol style="list-style-type: none"> Community values youth—Young person perceives that adults in the community value youth. Youth as resources—Young people are given useful roles in the community. Service to others—Young person serves in the community one hour or more per week. Safety—Young person feels safe at home, school, and in the neighborhood. 		
		Boundaries and Expectations	<ol style="list-style-type: none"> Family boundaries—Family has clear rules and consequences and monitors the young person's whereabouts. School boundaries—School provides clear rules and consequences. Neighborhood boundaries—Neighbors take responsibility for monitoring young people's behavior. Adult role models—Parent(s) and other adults model positive, responsible behavior. Positive peer influence—Young person's best friends model responsible behavior. High expectations—Both parent(s) and teachers encourage the young person to do well. 	
			Constructive Use of Time	<ol style="list-style-type: none"> Creative activities—Young person spends three or more hours per week in lessons or practice in music, theater, or other arts. Youth programs—Young person spends three or more hours per week in sports, clubs, or organizations at school and/or in community organizations. Religious community—Young person spends one or more hours per week in activities in a religious institution. Time at home—Young person is out with friends "with nothing special to do" two or fewer nights per week.

EXTERNAL ASSETS



INTERNAL ASSETS

CATEGORY	ASSET NAME AND DEFINITION
Commitment to Learning	21. Achievement motivation —Young person is motivated to do well in school. 22. School engagement —Young person is actively engaged in learning. 23. Homework —Young person reports doing at least one hour of homework every school day. 24. Bonding to school —Young person cares about her or his school. 25. Reading for pleasure —Young person reads for pleasure three or more hours per week.
Positive Values	26. Caring —Young person places high value on helping other people. 27. Equality and social justice —Young person places high value on promoting equality and reducing hunger and poverty. 28. Integrity —Young person acts on convictions and stands up for her or his beliefs. 29. Honesty —Young person “tells the truth even when it is not easy.” 30. Responsibility —Young person accepts and takes personal responsibility. 31. Restraint —Young person believes it is important not to be sexually active or to use alcohol or other drugs.
Social Competencies	32. Planning and decision making —Young person knows how to plan ahead and make choices. 33. Interpersonal competence —Young person has empathy, sensitivity, and friendship skills. 34. Cultural competence —Young person has knowledge of and comfort with people of different cultural/racial/ethnic backgrounds. 35. Resistance skills —Young person can resist negative peer pressure and dangerous situations. 36. Peaceful conflict resolution —Young person seeks to resolve conflict nonviolently.
Positive Identity	37. Personal power —Young person feels he or she has control over “things that happen to me.” 38. Self-esteem —Young person reports having high self-esteem. 39. Sense of purpose —Young person reports that “my life has a purpose.” 40. Positive view of personal future —Young person is optimistic about her or his personal future.

INTERNET RESOURCES FOR PARENTS AND SERVICE PROVIDERS

New & Updated for the 2004 PAM Packet. You will discover links from these sites to many other sites. If you find a helpful resource not listed, please e-mail us at pamcampaign@preventionnetwork.org.

700+ Great Sites for Kids & Parents

<http://www.ala.org/parentspage/greatsites>

Adolescent Violence Prevention Counseling

<http://members.aol.com/stringhamp>

American Academy of Child & Adolescent Psychiatry

<http://www.aacap.org>

American Council for Drug Education <http://www.acde.org>

American Library Association's Sites for Parents, Caregivers
Teachers, & Others Who Care About Kids

<http://www.ala.org/parentspage/greatsites/parent.html>

American Medical Association <http://www.ama-assn.org>

Annie E. Casey Foundation <http://www.aecf.org>

Bridges4Kids (special needs) <http://www.bridges4kids.org>

Centers for Application of Prevention Technologies

<http://www.captus.org>

CHADD Children and Adults with Attention – Deficit/
Hyperactivity Disorder

<http://www.chadd.org>

Children's Defense Fund

<http://www.childrensdefense.org>

College Parents of America

<http://www.collegeparents.org>

Community Youth Development <http://www.cyd.msu.edu>

Connect for Kids <http://www.connectforkids.org>

FACE - Truth and Clarity on Alcohol

<http://www.faceproject.org>

FACT - Families and Communities Together

<http://www.fact.msu.edu>

Family Education Network <http://www.familyeducation.com>

Family Information Center <http://eric.indiana.edu/www/indexfr.html>

Family Village (For families whose members have disabilities.)

<http://www.familyvillage.wisc.edu>

Federal Resources for Educational Excellence

<http://www.ed.gov/free>

Foster Parent Home Page <http://fostercare.org/FPHP>

Foundation Center (grant info) <http://www.fdncenter.org>

Future of Children <http://www.futureofchildren.org>

Grandparents raising grand children & kinship care

<http://www.aarp.org> and <http://www.miseniors.net>

The Grantsmanship Center <http://www.tgci.com>

Higher Education Center for Alcohol and Other Drug Prevention
for Parents <http://www.edc.org/hec/parents>

I Am Your Child <http://iamyourchild.org>

Join Together <http://www.jointogether.org>

Kids Health <http://www.kidshealth.org>

Kids Campaigns <http://www.connectforkids.org>

Kids Count <http://www.kidscount.org>

Kinship Care Resource Center <http://www.msu.edu/~kinship>

Library of Congress <http://www.loc.gov>

Mapping Your Future <http://www.mapping-your-future.org>

Michigan Association for the Education of Young Children

<http://www.miaeyc.com>

Michigan 4C Association (child care) <http://www.mi4c.org>

Michigan Childcare Health Resources

<http://www.mi4c.org/childhealthresources>

Michigan Department of Community Health

<http://www.michigan.gov/mdch>

Michigan Department of Education <http://www.michigan.gov/mde>

Michigan Fatherhood Coalition

<http://www.michiganfatherhood.org>

Michigan Head Start Association <http://www.mhsa.ws>

Michigan League for Human Services <http://www.milhs.org>

Michigan PTSA <http://www.michiganpta.org>

Michigan Resource Center <http://www.michiganresourcecenter.org>

Michigan State University Extension <http://www.msue.msu.edu>

(More web sites on back)

Michigan's Children <http://www.michiganschildren.org>

Minnesota Higher Education Center Against Violence
& Abuse <http://www.umn.edu/mincava>

Mi Peditra (Spanish-language site with child-health info)
<http://www.mipediatra.com.mx>

Month of the Young Child
http://www.miaeyc.com/moyc/MOYC_Page.html

National Association for the Education of Young Children
<http://www.naeyc.org>

National Center for Family Literacy <http://www.familit.org>

National Center for Fathering <http://www.fathers.com>

National Clearinghouse for Alcohol and Drug Information
<http://www.health.org>

National Clearinghouse for Bilingual Education: Parent
and Community Involvement
<http://www.ncbe.qwu.edu/library/parent.htm>

National Extension Parent Education Model
<http://www.ksu.edu/wwparent/nepem>

National Fathers Network <http://www.fathersnetwork.org>

National Health Information Center
<http://www.health.gov/nhic>

National Information Center for Children and Youth With
Disabilities <http://www.nichcy.org>

National Institute of Media and the Family
<http://www.mediaandthefamily.org>

National Institutes of Health <http://www.nih.gov>

National Network for Childcare <http://www.nncc.org>

National Network for Collaborations <http://crs.uvm.edu/nnco>

National Network for Family Resiliency <http://www.nnfr.org>

National Parent Information Network <http://www.npin.org>

National Parenting Center <http://www.tnpc.com>

National PTA <http://www.pta.org> Strategies on raising alcohol
and drug-free children <http://www.pta.org/commonsense>

National SafeKids Campaign <http://www.safekids.org/index.cfm>

Office of Highway Safety Planning <http://www.ohsp.state.mi.us>

Parent Advocacy Coalition for Educational Rights Center
(for families of children with disabilities) <http://www.pacer.org>

Parent Center <http://www.parentcenter.com>

Parent Soup <http://www.parentsoup.com>

Parenting Education Database
<http://www.hec.ohio-state.edu/famlife/nnfr/ctf/>

Parenting Pipeline <http://www.ext.nodak.edu/extnews/pipeline>

Parenting Special Needs <http://www.specialchildren.about.com>

Parenting Toolbox <http://www.parentingtoolbox.com/>

Parents as Teachers (PAT) National Center <http://www.patnc.org>

Parents Helping Parents <http://www.php.com>

Parents.The Anti-Drug <http://www.theantidrug.com>

Partnership for Learning <http://www.PartnershipForLearning.org>

Planned Parenthood <http://www.plannedparenthood.org>

Positive Parenting <http://www.positiveparenting.com>

Prevent Child Abuse America <http://www.childabuse.org>

Prevention Network <http://www.preventionnetwork.org>

Public Broadcasting System <http://www.pbs.org>

Michigan Ready to Succeed <http://readytosucceed.org>

Resilience Net <http://www.resilnet.uiuc.edu>

Resiliency In Action <http://www.resiliency.com>

Science-Based Prevention Programs & Principles
<http://modelprograms.samhsa.gov>

Search Institute (youth developmental assets)
<http://www.search-institute.org>

Stand for Children <http://www.stand.org>

Stepfamily Network <http://www.stepfamily.net/>

Talking With Kids <http://www.talkingwithkids.org/local.html>

U.S. Dept. Education <http://www.ed.gov/index.jhtml> Also,
EDPubs <http://www.edpubs.org/webstore/content/search.asp>

The White House <http://www.whitehouse.gov>

Whole Family <http://www.wholefamily.com>

ZERO TO THREE <http://www.zerotothree.org>



Michigan Chapter of Prevent Child Abuse America

December 29, 2003

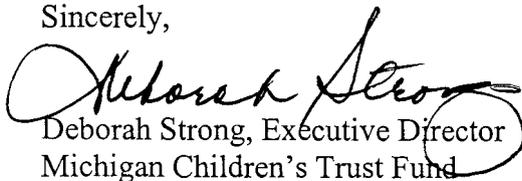
Ms. Melissa Lim Brodowski
Office of Child Abuse and Neglect
Switzer Building, Room 2417
330 C. Street, SW
Washington, DC 20447

Dear Ms. Brodowski:

Enclosed is an original and 2 copies of Michigan's FFY 2002-2003 Community-Based Family Resource and Support (CBFRS) grant final program report, documentation and the final fiscal year report (submitted earlier to the Office of Program Support/Division of Formula, Entitlement and Block Grant).

Please call if you have questions about any of this. I can be reached at 517-373-4320 (p) or 517-241-7038 (fax)

Sincerely,


Deborah Strong, Executive Director
Michigan Children's Trust Fund

Enclosures

Cc: Carolyn Wilson-Hurey, Region V, Administrator
Pam Posthumus, CTF Board Chair
Musette Michels, Acting FIA Director



FY 2002 – 2003 STATE PROGRAM REPORT MICHIGAN COMMUNITY-BASED FAMILY RESOURCE & SUPPORT GRANT

GENERAL REQUIREMENT: As required, the following final state program report (1) documents Michigan’s 2002 – 2003 activities under the Community-Based Family Resource and Support Grant, and (2) provides specific information to demonstrate compliance with the requirements of these funds. A copy of the 2002-2003 financial reports has been forwarded to the State ACF Regional Administrator and concurrently to ACYF. A copy is also enclosed with this report.

PERFORMANCE MEASURES: Section 207 of the Child Abuse Prevention and Treatment Act (CAPTA), provides that any state receiving a grant under the CBFRS program shall, through reports provided to the Secretary, do the following:

Demonstrate (through contracts, interagency agreements, and other means) the effective development, operation, and expansion of a statewide network of community-based, prevention-focused family resource and support programs that meet the requirements of the CBFRS program. (207 (1))

Appendix A includes documentation of Michigan’s compliance with this requirement. The documentation includes a) sample grant applications and agreements (e.g. CTF direct service, 0-3 Interagency Secondary Prevention, etc. b) local council application and designation agreement, and c) the extent of network (funded grant programs, local councils, technical assistance, etc.).

As noted last year, and probably each subsequent year until maybe FY 2007, Michigan’s fiscal crisis has worsened and had a devastating impact this past year on the service delivery systems within the state. With two back-to-back years of an almost \$2 B budget shortfall and declining revenue, few areas have escaped the cutting board and social services, in particular, has taken a significant hit. Short of statewide lay-offs, the state has instituted mandatory furlough days, hiring freezes, cut contracts and services, and overall trimmed every ounce of fat (and now lean) from the budget. The situation is more austere than I have ever seen it. This scenario, I know, is being replayed nationally in most states. The challenge this year for CBFRS grantees is have we been able to maintain the gains realized and/or keep prevention as a part of the service delivery agenda. It is especially true during times such as this when prevention is generally the first services cut and more crisis-oriented programs are deemed the only priorities.

However, in spite of the many financial woes Michigan is experiencing, several significant factors have helped us maintain much of the statewide network of prevention services we had last year. This has been the direct result of a confluence of factors and a small group of individuals knowledgeable of and dedicated to prevention. The first has been Michigan’s new Governor’s commitment or priority to early childhood/prevention, children and our most vulnerable populations. A second key factor has been the Family

Independence Agency making prevention and the 0-3 Secondary Prevention Initiative one of its priorities, too. In spite of the machinations of the budget process, FIA has steadfastly protected and continued to invest in this initiative and also recognize the efficacy of prevention as is reflected in their current Line of Service (LOS) organizational realignment process. (*See Appendix E*) As a result of LOS prevention work, FIA administration has made significant commitment to the development of prevention services state and locally. The third factor has been the Children's Trust Fund (CTF) itself. In spite of a truly challenging year, fundraising climate and a shortfall in its investment portfolio, CTF was able to increase its revenue, and maintain current levels of funding for all of its prevention programs and services. This was possible because of a great deal of hard work, a significant amount of reserves, leveraging, creativity and tremendous bi-partisan support. This has included maximizing current revenue via active monitoring of our revenue and investment portfolio, developing investment policy, and risk/return evaluations; bequests, and creating new, highly successful revenue sources such as our Cherish the Children...the Ultimate Fantasy Auction. Finally, the grass-root support for prevention continues to be very strong here in Michigan. Families, advocates and others have continued to come forward to testify, educate and show policy makers the value of prevention. Further, many of these programs have been around long enough now to have good data to support this work, too.

Specifically, what is it we were able to maintain? During 2002-2003, all of the Children's Trust Fund funded network programs and services (\$ 3.1M) were able to be maintained (and even added to), but the 0-3 Secondary Prevention Interagency Initiative was not so fortunate. Although there was drama in the Education and Department of Community Health budget process and a great deal of statewide local and state support (in the 11th hour the Governor eliminated \$1.75 M in the DCH budget), we count it a success that we were able to retain the \$2M in the MDE budget (which later had another 5% adjustment or reduction) and \$4M in the FIA budget. At one point both had been eliminated and then MDE was restored. However, the net result has been a reduction in the number of 0-3 programs and services from 64 (from the previous year) to 42 statewide. In total, as the CBFRS State Lead Agency, we are funding and/or administering 42 Interagency Secondary Prevention Programs, 48 direct service grants, and 69 local councils serving 80 of Michigan's 83 counties. (*See Appendix A*)

Our collaborative network of partners includes policymakers, local councils, grantees, state and local agencies, parents and providers, non-profit organizations, advocates, faith community, corporations, foundations, schools, health agencies, neighborhood associations, and multi-purpose collaborative bodies (MPCB's) which are community round tables in each county charged with the development of a human services continuum of care, system reform, interagency initiatives, parent involvement, asset building, community needs assessments, etc. *See Appendix B* for documentation of collaborative activities.

Also noteworthy we believe is the continuation of this interagency collaboration (with its braided funding approach) and the 0-3 Interagency Steering Committee. This modality continues to maximize resources, strengthen approaches, nurture cross-system problem

solving, training and technical assistance, and the sharing of resources for initiatives for prevention programs targeted at young children and their families. Additionally, we are also very proud of the collaborative Supporting Families With Young Children conference (that now has an attendance of over 1200 participants) that we with coordinate with over 20 different state and local organizations. Not only has it gained synergy and reduced the duplication of effort but it has gained a very respected reputation in the state too.

Additionally, *Appendix E* also offers documentation of other CBFRS activities such as the Governor's Proclamation for Child Abuse Prevention Month, a new electronic granting system currently under development, public awareness activities, and etc.

Provide an inventory and description of services provided to families by local programs that meet the identified community needs, including core and optional services as described in 202 of this legislation; (207 (2))

Provide evidence demonstrating the establishment of new respite care and other specific new family resource services, and the expansion of existing services that address unmet needs identified by the inventory and description required by 205 (3) of this legislation; (207 (3))

Include a description of the number of families served, noting and including families with children with disabilities, and the involvement of diverse populations of families in the design, operation and evaluation of the network of programs that are funded under this legislation; (207 (4))

Appendix A includes the inventory and description of services provided to families; evidence of respite and family resource program; distribution of these services; child abuse stats; etc.

The CBFRS services funded or administered in this inventory include the Direct Service Prevention Grants; 0-3 Secondary Prevention Grants and the Local Council Allocations. All three programs are primary or secondary prevention programs/services based on identified community needs and have a local match requirement. *Also, see Appendix A* for all applications, requirements and agreements related documentation. Other required funding priorities in the application for each of the following are:

- **DIRECT SERVICE PREVENTION GRANTS:** *parent education and support programs* (e.g. child development, childcare skills, life coping skills, stress management, general advocacy and support); *family resource centers* (e.g. parent education and support, information and referral, awareness and outreach); *parent/consumer involvement programs* (e.g. demonstrate meaningful parental involvement in program planning, implementation or evaluation); *collaboration and coordination* (demonstrates efforts as part of a comprehensive local plan; *service programs* (that include but are not limited to pre/postnatal programs, teen

parenting, in-home support, mentoring, family support, respite care, early childhood, referral services, etc}

- 0-3 SECONDARY PREVENTION GRANTS: are community-based collaborative prevention services designed to:
 1. *foster positive parenting skills;*
 2. *Improve parent/child interaction (especially children ages 0-3);*
 3. *increase local capacity to serve families at risk; improve school readiness;*
 4. *support healthy family environments that discourage alcohol, tobacco and other drug use,*
 5. *voluntary secondary prevention initiatives; and*
 6. *demonstrate that the services are part of a community's integrated family support strategy endorsed by the local MPCB's (local community collaborative bodies).*

- CTF LOCAL COUNCIL ALLOCATIONS: are awarded based on compliance with the requirements of CTF's designation agreements and the tiered funding standards. Most are single county jurisdictions but several of the northern Michigan councils serve more than one. These local councils are charged with: *conducting local need assessments, developing a local prevention plan, public awareness, and acting as an information and family resource center.*

The result of the cumulative efforts of all of these networks (local councils, CTF grants, 0-3 initiatives, etc.) includes the provision of more than 2,099,652 prevention services statewide to over 562,988 children and families and outreach to over 2.5 M people. Of the families served, 54.9 % were White, 13.2 % Hispanic, 8. 10.2% African American, and 21.6 % other. The other category includes Arab American, Asian, Native American and multi-racial families. In addition to the populations noted, a large number of the services are provided to families and children with special needs and multiple risk factors. Approximately 9% of the children served had special needs. *See Appendix D for documentation of the populations served, by programs and services provided.*

Appendix A also includes charts listing of all of the programs and services funded by the Children's Trust Fund. A breakdown of these services, by category, for direct services are: *parent education and support, home-visiting, respite care, individual and group services (counseling, assessments, transportation, peer supports, etc.), mentoring, fatherhood, shaken baby, and emergency supports.* Additionally, 100% of the 42 Zero to Three Secondary Prevention Programs are home-visiting programs targeted at children and families with multiple risk factors. These are also services based on program models such as Healthy Families, Healthy Start, or the David Olds. A breakdown of these by types of services provided include: *parenting education and support, service coordination, respite and child care, transportation, counseling, and other family supports as needed.* *Examples of respite care services include the Community Respite Center in Jackson and the Gratiot County Community Mental Health Respite Program and are documented on the inventory of services list in Appendix A.*

Additionally, our 69 local council network (which serve 79 of Michigan's 83 counties), act as family resource centers and provide information and referral, conduct public awareness campaigns, disseminate materials, provide in-services (Shaken Baby, Parent Nurturing, mandated reporting, etc.) to a variety of populations and settings (youth/schools, police, clergy, parents) conduct local needs assessments, develop local resource directories, etc.

Parents continue to participate in the decision-making, design and operation of these initiatives throughout our system (both state and locally). All of our programs and services have a continuous quality improvement component and a meaningful feedback is obtained through focus groups, client satisfaction surveys, needs assessments, evaluations, participation in the granting process, workgroups, and through the state and local boards. Additionally, our legislative statute mandates the involvement of public and private agencies, parents and providers, business, labor, faith and other community representatives. Their involvement is also required in our funding requirements.

Demonstrate (through evaluation data) a high level of satisfaction among families who have used the services of the CBFRS program; (207(5))

Aggregate data reported by the CBFRS grantees document that most families, on average, have a very high degree of satisfaction (92 %) with the all programs and services provided.

All CBFRS community-based prevention programs funded (or administered by) the Children's Trust Fund are also required to document client satisfaction (in both the request for proposal and the grant agreement). *See Appendix A.* They are required to 1) identify and document measurable program outcomes and 2) conduct and utilize client satisfaction surveys and/or other means of assessing this issue. Grantees are also required to submit quarterly progress reports and an annual final summary report. These reports identify progress towards objectives, successes/challenges, results, family stories and client satisfaction. No particular form is required. Additionally, the following family stories and client feedback and outcome information is provided to document further the success of these programs and services.

Client Satisfaction or Success Examples

Oakland Family Services Program (examples of successes taken from report)

94% of the target children have a primary health care provider
89% of the target children have age appropriate immunizations
89% of the target children have age appropriate well baby visits
100% of the pregnant parents are receiving prenatal care
90% of the families are satisfied with the services they receive
90% report the service has helped them to be a better parent
100% have had no referral for CPS

Family Success Story

Maria was referred by her WIC worker to the Infant Mental Health Program at Oakland Family Services. She had given birth to a daughter 5 weeks premature after a pregnancy that included 3 months of toxemia. She is a single mother in her early thirties with a son from a previous marriage. She was experiencing post partum depression, anxiety and panic like symptoms after a very traumatic birthing experience. She has an eighth grade education and has been unable to secure suitable employment since giving birth.

Her mother is a recovering alcoholic and functionally illiterate. She lives an hour away from Maria and is little support and often places demands and expectations on her. Maria has formed a strong bond with her IMH worker and with medication and support has also developed stronger assertiveness skills. She is on an antidepressant medication, which has helped to even out her mood and give her back the energy she needed to begin, taking GED classes with a goal of obtaining a better job. She has also benefited greatly from parent education and support services. Her baby has just had her first birthday and has begun to walk, babbles, and is a very happy baby despite the ups and downs her mother went through

(Excerpt from a parent letter Bridges Program)

“I have been getting respite care on and off for about three years. I just turned 50 and have raised my three children. I am now raising my three grandsons ages 1 ½, 3 and 4 and my 6 year old who was a neglect case and we are now in the process of adopting her. Respite care has helped me in so many ways...we have 8 in our family now so I really look forward to it. This really helps with our stress.”

Fathers Who Care (Responsibly Educate And Develop) ...Letter from a father in this prison program. *This program has been so successful that received one of our annual awards and in spite of all the budget cuts, the Michigan Department of Corrections has since decided to continue the program when our three year grant ended September 30, 2003.*

Today is the very last day of one of the most beautiful, most important classes I've ever been a part of. I have been in a number of programs and classrooms and as I look back on all that I have learned, all that I have been taught, there was and has not been a class that is more, or remotely close to how necessary this class is.

I seriously believed that my chances as a father in prison were closer to an end rather than a beginning. See I have been in prison going on 15 years and I have 2 children – a 16-year old girl and a 15 -year old son. I sat up days and nights thinking about how hard it is to raise a child in high school who really doesn't know me. I think about how late I am to be walking back into their lives and how hard it is to be a good parent in today's society and with my background. because of this program, I am no longer afraid of what lies ahead, I welcome my beginning.

My facilitator's name is Mrs. H. She's actually the best teacher I've ever had and through her I learned that it is not too late for me to apply the valuable lessons of parenting – I realize that I am not at the end of my journey – it is only the beginning. She taught me the difference between punishment and discipline, between communicating and talking and above all, quality time and pass time.....what I am trying to say is, this program is necessary and if I am called before this government, I would ask for funding, so it could be taught in schools as a requirement. This program can help a multitude of people in today's society because, there's a great deal of young father's out there who will be going through what I went through prior to this class – lost and afraid.

Demonstrate (through information and documentation) the establishment or maintenance of innovative funding mechanisms, at the State or community level, that blend federal, state, local and private funds, and innovative, interdisciplinary service delivery mechanisms for the development, operation, expansion and enhancement of the Statewide network of CBFRS;

Examples of innovative funding strategies utilized in Michigan's statewide CBFRS prevention network include pooled and leveraged funding for the prevention programs state and locally. At the state level, we have pooled resources (human, financial and in-kind) from federal, state and private funds to support these programs. Locally, we also require a local match and support has come from federal, state, and private sources. The cash monies local communities invested in the Michigan CBFRS programs in 2002-2003, collectively, are almost 2 times the amount awarded. Additionally, if in-kind contributions were given a dollar value and included, it would be significantly higher. A chart/s of grant and matching funds is included in *Appendix D*. The amount and sources are also delineated on the application budget forms and include both in-kind and cash supports from resources such as United Way, public agencies, faith community, foundations, corporations, universities, local units of government, etc. Examples of the budget forms for grantees and the local councils are included in the grant applications *in Appendix A*

Additionally, most of the initiatives the Children's Trust Fund continue to also be collaborative ventures that are a blend of human, financial and in-kind resources towards our mutual goals. Again it is not only a more cost effective approach but also yields richer results and broader impact. *Examples are included in Appendices A and B.*

Provide a description of the results of the peer review process conducted under the State program; (207(7));

As reported earlier and in previous CBFRS reports and applications, all program development, implementation and reviews include input from a variety of stakeholders, including peers. Our peer support system extends to the development of our funding priorities, grant reviews, monitoring, training and TA, data collection and evaluation.

Additionally, each year we attempt to improve or enhance our overall system. This includes 1) conducting statewide stakeholder needs assessments, focus groups, task

forces, 2) developing and monitoring the implementation of a new local council tiered funding system for the network which is based on standards and incentives, 3) providing best practice information and a series of trainings and TA to assist network based on the needs identified within the network; 4) continuing to support our regional technical assistance system and 5) planning and developing budget recommendations and committee work plans. These regional coordinators are peers who regularly convene peer support meetings and provide TA to community, local councils, and grant applicants. Peers support us, each other, as well as contribute to the overall statewide network. Products of these efforts include sharing programs, ideas, collective problem solving, system development, grant application and review process and so on. The result of this peer review process has made our overall system stronger, relevant, more flexible and better able to meet the demands of the system and needs of Michigan's families.

There is no significant difference in the types of issues identified in 2002-2003 by our network versus last year (just more of them) through our training needs assessments, peer network or local prevention plans. As economy slumps and Michigan wrestles with its financial crisis, so have Michigan families. As their stress levels increase, so has the incidence of child abuse and neglect and the need for more support. So instead of presenting a list of all of the needs this year, they are categorized and fall into 4 major categories:

- ❑ crisis intervention, treatment and support (particularly for the big 3...substance abuse treatment, mental illness, domestic violence)...including more respite care, medication and crisis hotlines and support groups for parents. Or, stress-management programs for both parents and providers.
- ❑ resources...\$\$ financial, in particular, but also human, in-kind, and other supports. The number of programs seeking financial support this year almost doubled. Many note that other traditional sources of support have been cut or eliminated. They are fearful of being able to fulfill their match requirements next year or that we will even honor our multi-year commitments.
- ❑ data collection, evaluation and effective outcome measures. More assistance and support to projects regarding the evaluation of prevention programs; and the expansion of effective prevention programs to scale (e.g. HFA program models and parent education/skill (behavioral change development programs).
- ❑ increased programs, services and materials for new parents and adolescents, ethnic populations, and special needs children and families. Respite care, in particular, continues to be an often-identified community need.

Provide an implementation plan that ensures the leadership of parents in the ongoing planning, implementation and evaluation of the CBFRS programs; (207(8));

Parent involvement is required in our enabling legislation, included in the grant requirements, the 0-3 enabling legislation and throughout every level of our system in

board policy. It is such an integral part of how we operate that removing it would be difficult to do. Additionally, parents serve on our boards, review teams and workgroups, are both paid and volunteer members of our monitoring system and supports are provided, when needed, to help ensure the meaningful participation of parents. This includes the provision of supports such as childcare, stipends, travel and other expenses, etc.

Additionally, the CBFRS Lead Agency is also on an interagency design team for a statewide parent leadership and community initiative. The lead staff is a parent/consumer and half of the design team is consumers. The program will be based on the Connecticut model. We are currently seeking monies from the Kellogg Foundation to seed the first 5 pilots.

FINAL REPORT MUST INCLUDE:

- (1) All of the information listed above; and**
- (2) A statement indicating how the lead agency, in conjunction with the collaborative network, plans to continue to improve its system of child abuse and neglect prevention and the delivery of family resource services.**

To this end, we will work with our collective network to enlighten, develop or simply try and maintain the gains we still have in what I call, “the last frontier of the service delivery system...prevention.” Health care has always understood the value of prevention and we, in human services are just beginning to get there. We will continue to use our knowledge, data and resources to educate, document, support, reach out and plead the case for prevention. We believe clear examples of these are the development of current FIA prevention line of service as well as the ASAP/PIE and early childhood movement in Michigan reported in previous reports. The wonderful thing about where we are at this juncture is that the converts are growing daily, there is a palpable synergy in the air and the task doesn’t seem as daunting. So if Woody Allen is right, and I believe he is, “90% of success is just showing up”...persistence....so in spite of the challenges, we remain as committed, passionate and hard working as we need to be to continue to move the prevention agenda forward to the “tipping point” of change and mainstream acceptance. Therefore, next year, some of the strategies we hope will assist us in at least maintaining, if not growing slightly, the current Michigan network of community-based child abuse and neglect prevention network include:

- Developing a Child Abuse Prevention Month Campaign and Press Events including others outside our network. April 2004, our network will be collaborating with a number of partners with related interests such as the State Police, school homeless liaisons, medical alliance, the faith community, etc. to kick-off this campaign. This year, the statewide campaign will be asking communities to all do at least 3 things.... 1) distribute information plan and engage the community (or chamber) to tie blue ribbons around trees in highly visible parts of the city’s downtown for the month, 2) engage the community to “Turn the Light on Prevention” by turning their porch light on the first Sunday in

April, after our press conference. 3) encourage the faith community to embrace Blue Sunday, the 4th Sunday in April, and talk about the issue. We will provide information on the Blue Ribbon/Sunday campaign enclosed in the OCCAN child abuse packets.

- Develop, as we have every year, a proclamation from the Governor for CA/N Prevention Month and catalog all the community activities planned by the network statewide for the month. We will make that information available to the media and our partners.
- Increase Revenue for Prevention Programs and Services. This includes identifying and acquiring two new major revenue sources and enhancing or maximizing those we currently have such as the Children's License Plate, auction, direct donations, etc. (See below)
- Conduct year two of the Cherish the Children...the Ultimate Fantasy Auction now our annual signature event. This statewide live and silent auction, sponsorships, etc, is scheduled for May 4, 2004. It was not only a tremendous fundraiser but also a wonderful public awareness tool. It allowed us to educate about the Children's Trust Fund, why prevention, and how these monies would be used. This next year we hope to make it bigger and more successful than last year's, which netted us over \$100,000 for our first year. The unique approach we took included having our advisory committee chairs (our board chair and the House and Senate minority and majority leaders) co-chair the event and other members included trade association representatives, current and emeritus board members, and other volunteers recruited for the event. This almost guaranteed us strong participation by the legislature and other policy makers. We hope to nearly double the participation of last year (over 300 last year to about 500) and gained a number of volunteers from last year's auction. We also hope to enlist the art community as partners, too. (See Appendix B)
- Develop our annual report to the legislature based on the 0-3 Secondary Prevention initiative cost/benefit information; program outcomes; and services provided. We also customize County Prevention Program Fact Sheets of these services provided in each legislator's district.
- Continue the statewide ARCAN symposia series that has been so successful stimulating dialogue and practice on prevention with policymakers, providers, researchers, advocates, community and other interested stakeholders.
- Develop a 501 (c) 3 extension of the Children's Trust Fund to help insure we do not lose any more revenue as we did this past year with two major donors.
- Work to increase the allocations in CAPTA, particularly, Part II, the CBFRS grant. Although Communities are leveraging or matching monies allocated, the fiscal crisis as it is many of these sources are drying up. Further, the number of

applicants we received for such limited resources nearly doubled. We are grateful to OCCAN for making more discretionary grant monies available to help build the case for an area long overlooked, but we also need to increase revenue significantly to communities for prevention programs. The funding in this area really needs to increase to at least the \$80 M all of the national child abuse prevention organizations are calling for.

- Finally, the Citizen Review Panel on Prevention that the Children's Trust Fund administers on behalf of the Family Independence Agency will develop a protocol, process and conduct sample case reviews on prevention families served by FIA to help the system better address family needs. The CTF and CRP also provided a great deal of support, documentation and input to the FIA line of service process.

Appendices Outline

Appendix A: Documentation of Network

- 0-3 Secondary Prevention Interagency Agreement
- 0-3 Renewal Application
- 0-3 Grant Agreement
- CTF Direct Service Application
- Direct Service Grant Agreement
- Local Council Designation Agreement
- Local Council Tier Services Application
- Grant Programs
- Local Council Network

Appendix B: Documentation of Partnerships and Collaborative Efforts

- Wonder Years Special Issue
- 0-3 Secondary Prevention Initiative (Also See Appendix A)
- ARCAN Symposia Series
- Supporting Families With Young Children Conference
- Brain Development CD
- Calendar (Spanish, Arabic and English)
- Cherish the Children Auction/Advisory Committee
- ZFAN

Appendix C: Local Examples

- Client Satisfaction Surveys
- Sample Local Program Initiatives
- Outcomes and Measures
- Ionia Prison Program
- Sample Budget and Match Allocations
- CTF 2003 Awards

Appendix D: Documentation of the Program Register Information

- Populations Served (number, ethnicity, etc.)
- Type and Number of Services Provided
- Geographic Distribution of the Services
- Expenditure Reports

Appendix E: Other Documentation

- Child Abuse Prevention Month Proclamation
- Cost of Prevention Summary Sheet
- E-Grants System Development
- Governor's Lead Agency Designation
- 2002 – 2003 Federal Financial Expenditure Report
- FIA Line of Service Process & Reports
- Public Awareness Activity
- Parenting Awareness Month