





PEARL BUCK PRESCHOOL & FAMILY SUPPORT SERVICES

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OUR MISSION STATEMENT

Pearl Buck Center offers people with various abilities and their families quality choices and supports to achieve their goals.

OUTCOMES FOR TODAY

Statistics show that nationally 2.3%* of parents have a cognitive disability.

Today we will address:Who are these parents?How do we recognize them?Supports they need.



*From through the Looking Glass https://www.lookingglass.org/pdf/States-Data/TLG-Parents-with-Disabilities-US-Demographics.pdf

History



Founded in 1953 in Creswell, Oregon By Lisl Waechter as the only school for children with special needs in the western US.



1953



Joined forces with Kiwanis in 1959 and relocated facilities to Eugene to offer supportive services to children and then eventually to adults in need of vocational training. Specialized Preschool for children of adults with cognitive limitations customized through 40 years and continues as the only program of it's kind in the state of Oregon. 2019

OUR PROGRAMS

Parent Navigator Program (Child Welfare Contracts) established 2010

- <u>ISRS</u>: Implement, supervise, and monitor safety plans for the mitigation of an immediate threat to child safety. Facilitate supportive reunification of children from foster care to parental care.
- <u>IHSS</u>: Available to families who have court mandated services or who have concerning home environments but no identified safety threat. Includes parent mentoring, basic needs support, crisis intervention, system navigation, protective capacity education, etc.
- Parent Skills Group:
 - Parent education in child Development and home safety. Lab where parents can practice skills with coaching/mentoring.

OUR PROGRAMS

Family Support Program established 1976, revised in 2017

 A preventive case management program for families with a parent experiencing a cognitive limitation and a child between 0 and 6 years.

Preschool Program established 1976

 Serves 30 children ages 2-5, providing therapeutic respite for parents 2 to 4 days a week.

SOME DEFINITIONS

Cognitive Disability

 Includes I/DD and intellectual disability caused by traumatic or other types of brain injuries (drug or medically induced), mental illness etc.

Cognitive Limitation

All of the above but includes those who experience functional difficulties without a specific diagnosis.

Disability programs offer a lot of assistance to people with I/DD, limited support to people with cognitive disabilities, and no supports to people with just cognitive limitations.

IDENTIFYING WHO MIGHT HAVE A COGNITIVE LIMITATION:

- Resistance to travel alone on public transportation; always accompanied by another adult.
- Reading and writing challenges observed when filling out applications:
 Difficulty writing
 Writes minimal factual information

Reads words with limited comprehension

• Erratic appointment keeping (early, late, odd excuses, wrong day).

IDENTIFYING WHO MIGHT HAVE A COGNITIVE LIMITATION:

- Provides vague or naive information about basic facts.
- Has difficulty managing money.
- Overwhelmed by routine demands.
- Excessive degree of child management difficulty (observed or reported).
- Uses "covering up techniques" to conceal deficit(s).
- Requires help in areas not expected for adult; central role of a "benefactor."

* Adapted from The Einstein Parent Screening Instrument (Kramer & Cohen, 1983)

CHALLENGES:

- High ACE scores
- Differing abilities
- Relationship challenges
- Learned behaviors/Survival skills
- Poverty
- Attrition from system

ADVERSE CHILDHOOD EXPERIENCES (ACES) AND ADULT TRAUMA

Many people with cognitive limitations have high ACE scores, and the adverse experiences they had as children make adult trauma more likely.

Even those without cognitive limitations struggle with:

- Lack of social supports.
- Mental illness.
- Hyper-vigilance or dissociation.
- Executive function challenges.
- Major health problems.



WIDE RANGE OF ABILITIES

- Challenged by day-to-day functioning.
- Difficulties with executive functions.
- Limited of awareness / acceptance of cognitive limitation.
- Labeling and stigmatization; subsequent sense of being "less than."
- Require different ways of learning, accessing information, and receiving support.
- May need ongoing or lifelong support.

RELATIONSHIP PROBLEMS: ROOTED IN TRAUMA

- Distrust of professionals.
- Resistance to authority.
- Sense of failure to communicate well or be understood.
- Lack of parenting as a foundation to learn to be a parent.
- Impulsive choices in intimate partners and friends.

LEARNED BEHAVIORS/SURVIVAL SKILLS

- Work to conceal limitations "PASSING."
- Exhibit learned passivity.
- Display defensiveness.
- Express desire to be "normal".

LIVING IN POVERTY

- Housing unstable and often below community standards.
- Experience food insecurity.
- Need to make choices between needed amenities (food or diapers, gas to get to work or pay the rent).
- Unsafe neighborhoods and neighbors; isolated.

HOW WE SUPPORT PARENTS

We provide in-depth case management, responsive home visiting, parenting skills, and life skills supports including:

- Basic needs assessments.
- Self-care and emotional needs education.
- Parenting and child development education.
- Home safety support.
- Planning and problem solving skills bolstering.
- Navigation and advocacy with doctors, lawyers, DHS etc.

Self-Fuffilment Needs Advocacy Child Development Education. Parent Mentorship, Planning and routines

Esteem Needs

Psychological Needs Self Care strategies, Mental health care, Boundaries Education, Emotional regulation

Safety Needs

Home sanitation & safety, appropriate people, informed decision making

Basicheeds

Physiological Needs

Food security, shelter, income, transportation, medical care

BASIC NEEDS

Parents who experience cognitive limitations may:

- Experience poverty, homelessness, food insecurity and be unaware of available services.
- Have limited understanding of how services apply to them.
- Experience physical barriers to accessing services due to difficulty with public transportation, physical mobility issues, being a single caregiver to numerous children, etc.





A PEARL BUCK CASE STUDY

A woman who lives with cognitive processing limitations was in a verbally abusive and controlling relationship with her husband, with whom she shares five children. The mother was not allowed to access contraceptives, finances, have friends, have an ID card, etc. Children range in age from 10-18 years and were not engaged in activities beyond the home and were not allowed to receive medical services, or public education. The children all present with cognitive delays and lack basic social skills. The father was removed from the home, mitigating the Child Welfare safety threat, but leaving the family with no income, knowledge of services or how to receive them.

SELF CARE & EMOTIONAL NEEDS

Parents with cognitive limitations may experience:

- Limited emotional literacy/regulation.Difficulty forming relationships.
- Poor boundaries in relationships.
- Mental health issues.
- Low self esteem.
- Social Isolation





A PEARL BUCK CASE STUDY

A mother dropped by our offices late one afternoon in tears, seeking preschool services for her toddler son. New to Oregon, she was living with her father who was a single man raising a teenager, a ten year old, and a four year old with autism. To help ease being overwhelmed by all of the people in the house, this mom worked to take care of all the children while also raising her son. She reported being responsible for the cleaning, cooking, care and special education for all of the children while also working to tend to her clinical anxiety disorder and a generalized learning disability. This mother expressed that she desperately wanted to ensure that everyone in her life was getting everything they needed but that she was feeling lonely, overwhelmed, and inadequate in her pursuit. She felt like getting her son into preschool would help him interact with other children and also with adults who were calm and centered. Something she regretfully wasn't able to provide him.

BARRIERS TO SELF CARE:

- •Not knowing how to practice self care.
- Feeling like they don't have time/ support for kids.
- Feeling guilty.

SELF AWARENESS COACHING

Nurturer What does it look like when you nurture others and yourself?"	Victim "In your life, what situations or events have happened that made you feel powerless?"
Nurtured "Who do you allow to nurture you and what does that look like?"	Perpetrator "How are you harmful to yourself and others?"

PARENT EDUCATION SUPPORT

Parents with cognitive limitations may:

- Describe themselves as "slow learners."
- Have difficulty processing and retaining information.
- Have had limited parenting models.
- Be challenged by understanding their child's development.
- Avoid asking for help for fear their child will be removed.
- Experience parental stress.





A PEARL BUCK CASE STUDY

Kim is a mom who lives with significant learning challenges due to Fetal Alcohol Syndrome. Having already experienced the termination of her rights to an older child, Kim was referred to us for preventative education services two weeks after the birth of her son. Child Welfare case workers were concerned that Kim wouldn't be able to recognize and meet the cues her infant provided. They also hesitated to trust that she would be able to attend and follow through with medical appointments, that she would be able to provide a safe home environment that evolved along with her developing child, and that she would be able to safely weather the stress of parenting altogether.

COLLABORATION & ADVOCACY





A PEARL BUCK CASE STUDY

Carlos is a caregiver who experiences a learning disability, married to Maria whose primary language is Spanish but who is also deaf. This case was referred to us after reports were filed that Carlos had participated in an instance of violence against the couple's elementary aged child. Although Carlos adamantly denied his intention to hurt his child and recounted a different series of events altogether, agencies were unable to corroborate his accounts based on what they understood to be true from Maria's communication. At the point of our involvement two caseworkers were assigned to this assessment; one who was a hearing, English speaking individual and a second who was a hearing, English speaking supervisor with limited American Sign Language education.

How We Measure Success







\$2000 in gift and gas cards and small purchases per year





\$2000 of FEMA utilities and housing supports

DHS Contracted Services

Parent Mentoring (IHSS) – 62% Families met all or most of their goals

Reunification Services (ISRS) – 74% Families reunited.

Stabilization Service (ISRS) – 68% Families successful in mitigating safety threats. Parent Skills Group/Lab – 74% participants were able to demonstrate mastery of objectives.

Child Name	# Adults	# Children	
Family X	1	7	
	Domain	Score (Fall)	Score (Spring)
	Housing	3	4
	Employment	1	1
	Income	3	3
	Food	2	2
	Child Care	5	5
	Children Education	4	5
	Adult Education	1	1
	Health Care	5	5
	Life Skills	4	4
	Family/Social Relations	2	3
	Mobility	2	5
	Community Involvement	2	2
	Parenting Skills	3	3
	Legal	5	5
	Mental Health	2	3
	Safety	3	5
	Substance Abuse	5	5
	Disabilities	2	2
	Total	54	63

Reducing System Representation

In 2017-2018, Family Support Services offered intervention & advocacy to Child Protective Services for 21 Preschool and Outreach families.

Thank You!

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