A RESOURCE GUIDE FOR GRANDPARENTS AND OTHER RELATIVES RAISING CHILDREN IN OREGON
A Resource Guide for Grandparents and Other Relatives Raising Children in Oregon

“I thought I was done raising children…and I never thought I’d be raising children that were not my own.”

Hundreds of families in Oregon find themselves caring for their relatives’ children. Sometimes families need help to meet these children’s needs.

Your willingness to care for a relative child is a gift—to the child and to the parents. Our hope is that the information on resources, benefits and services in this guide can help you take care of a relative child when his or her parents are unable to do so.

An Oregon resource information guide

This publication resulted from a collaboration between several partners. A grant given in 2003 by the Brookdale Foundation’s Relatives as Parents Program (RAPP) to Oregon State University’s Extension Family and Community Development Program was the impetus for creating both a legal guide and a resource guide on caring for relative children. The Oregon Department of Human Services (DHS) and the Oregon Post Adoption Resource Center (ORPARC) partnered in developing the content. A special thank you goes to Kelsey Evans from NorthWest Senior and Disability Services, who worked extensively to update this 2013 guide.

Support groups in Oregon

Contact your local Area Agency on Aging (see pages 36–40) for the most recent support group information. Also, visit www.aarp.org/relationships/grandparents for a list of support groups and other information.

Diverse community resources in Oregon

State, local and community partners may have special programs and services available for culturally specific populations.
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Limitations

The material in this book focuses on relatives of children living in Oregon and is up-to-date as of November 2012. Social services are subject to availability of and changes to programs. Eligibility for services, locations and phone numbers of services can also change. Furthermore, this book contains general information only; it does not take into account the facts specific to your situation and cannot take the place of individual counseling or legal advice. A list of additional online resources starts on page 53. The information and Web links contained in this resource guide are current as of January 2013. The Oregon Department of Human Services desires to keep the guide’s contents accurate and up-to-date. Therefore, any reader who discovers errors or out-of-date information or links is encouraged to communicate his/her findings to LaDonna Lofland. You may email ladonna.lofland@state.or.us or telephone 503-872-5566.

About reading this guide

This book explores a range of opportunities and challenges faced by kinship caregivers. It starts with common issues faced by family members caring for relative children and moves on to provide resources for those families.

Some families caring for relative children may be involved with the Department of Human Services Child Welfare Program, which may include some unique situations that are discussed separately. The information in this guide is valuable regardless of your involvement with the Child Welfare Program.

Terms of relationship among three generations can be confusing. Here is how this guide uses relationship terms:

- The law that applies to grandparents also applies to other non-parent relatives. In this book, grandparent includes aunts, uncles, cousins, siblings, great-uncles, etc. — even stepparents who have not adopted their spouses’ children.
- The words parent and parents typically mean the birth parents of the minor child(ren) related to the grandparent or other relative.
- The words child, relative child, children, grandchild and grandchildren always identify the minor child(ren) related to the grandparent or other relative.
What we know about relatives caring for children

*Kinship care: The provision of full-time nurturing and protection of children by adults, other than parents, who have a family relationship with the children.*

If you are a grandparent, aunt, uncle, sibling or other adult who is caring full-time for a relative’s child, you are providing kinship care. The practice of kinship care is not new. Grandparents and other relatives frequently step in when children need to be raised apart from their parents. According to the 2010 U.S. Census Bureau, 50,757 Oregon children live in grandparent-headed households and 18,363 live in households headed by other relatives. This number continues to increase each year, and many families providing kinship care go unreported and unrecognized.

Many pathways lead to the need for kinship care. Relatives become caregivers for children because parents commit domestic violence, child abuse, neglect or abandonment. Or, parents become unable to be the primary caregiver for a variety of reasons: substance abuse, incarceration, military deployment, mental and/or physical illness. Or, parents die.

As the important role of kinship care becomes more acknowledged, more programs are being created to support relative caregivers and children.

**Kinship caregivers**

“It wasn’t supposed to be like this ... we were supposed to enjoy a cruise with our friends, but now we don’t have the money or the time because we are caring for our grandchild.”

“We were planning to retire in five years. Now what? We have the children to take care of. What if our health fails? Who will take care of the children then?”

“I feel like I am doing this all on my own. I feel isolated. My family and friends don’t understand. I need a break and some support!”

Taking on the responsibility of caring for your relative child can change your life in many ways. It can affect the time devoted to friends, intimate relationships, work and hobbies. Future plans like retiring or having another child of your own may be delayed.
In addition, your normal daily routines may change dramatically. For example, when you have a child in the home, there may be more housework (laundry, cleaning, cooking larger meals) and you may need to add time for homework or school-related activities to your daily schedule. In addition to affecting your relationships and routines, it may also significantly affect your financial situation.

This can be an emotional time. You may feel anger, resentment, jealousy, grief, guilt, fear, doubt or loss. You may experience the loss of the relationship with the child’s parent(s), who is also your child or other family member, or a change in the relationship with the child. You may also feel a sense of self-satisfaction, love and pride in providing quality of life and meeting the challenges of becoming a caregiver for a relative child.

Often, children return home to their parent(s). Rebuilding and repairing relationships isn’t easy in any situation. It can be especially difficult when you have had to assume the parental role for a family member’s child. It is important to remember that this can be an emotional experience for everyone involved, and it is not uncommon to experience guilt, worry, blame and anger.

If you are having a difficult time coping with your new situation, it may help to talk to someone. The counseling resources (see page 23) and support groups listed in this guide may be helpful.

Change can be hard for anyone, but here are some tips that might help you to adjust:

- Join or form a support group.
- Create a support team by making a list of family members, friends, neighbors, faith-based community members or professionals who can help when you need a break.
- Get organized. Make a realistic schedule with your family and friends to make sure you get the support you need. This can also help you manage the extra demands on your time.
- Be sure to schedule time for yourself. Take time out for activities you enjoy because this will help you to stay healthy in mind and body.
- Take care of your own health. Be sure to eat well and get plenty of rest and exercise.

Kinship care can be a tough job. Sometimes it can be frustrating or exhausting, but it can also be one of the most rewarding things you’ll ever do — an ultimate act of love. Be sure to ask for help when you need it.

Family members who care for a relative child might face some legal problems given the unique circumstances of their situation. A helpful complement to this Resource Guide is “Oregon’s Legal Guide for Grandparents and Other Relatives Raising Children” (a publication also created through the Brookdale Foundation Relatives as Parents Program [RAPP] grant awarded to Oregon State University’s Extension Family and Community
Development Program). The Legal Guide addresses a range of problems faced by grandparents and other relatives and the laws that apply in those situations. For more information about the legal guide, contact Ladonna.Lofland@state.or.us.

Checklists

Important things to do first

Ensure that the child’s medical insurance needs are met by doing one of the following:

☐ If the child’s parent has medical insurance, get the insurance information from him or her.

☐ Add the child to your private insurance policy.

☐ Apply for the Oregon Health Plan through the Department of Human Services (DHS) Self-Sufficiency offices (see pages 44–45).

☐ Use your personal funds to acquire medical care for your relative child.

☐ If your relative child is in state custody, the child’s caseworker will apply for Oregon Health Plan coverage for the child.

Ensure that the child’s medical needs are met through the following resources:

☐ Schedule comprehensive medical, dental and mental health assessments.

☐ Ask about medical care, vitamins and nutrition, as well as dental and eye care.

☐ Talk to the child’s health care provider about how the child is doing.

☐ Make a list of the care provider’s suggestions for immediate and ongoing medical care.

☐ Ask for referrals, and explain your source of payment.

Ensure that the child’s other needs are met.

☐ Apply for financial assistance through the Department of Human Services (DHS) Self-Sufficiency offices, pages 44-45.

☐ Enroll the child in a local school, and make an appointment to meet with the child’s teacher or school counselor.

☐ If you are age 55 or over, apply for the Family Caregiver Support Program though your local Area Agency on Aging office, pages 36-40.
Child checklist

Start a file for the child. The sooner you start, the easier it is. The file might contain:

☐ Birth certificate or proof of citizenship;
☐ Photos;
☐ School records;
☐ Immunization records (ask the child’s parent, school or physician);
☐ Social Security card or verification of the child’s Social Security number;
☐ Copy of the medical card or child’s insurance coverage;
☐ Any legal documents relating to the child, including any documents giving you authority to have the child in your care;
☐ Names and phone numbers of the child’s caseworkers, attorney, Court Appointed Special Advocates (CASA), or anyone who has been or is important to the child’s safety and care (keep this information up-to-date);
☐ Information about how to contact the child’s parents — where they are, phone numbers and addresses, names and numbers of friends and other family members. If they have been involved with a social service agency, contact agency staff to inform them that you have the child.
Meeting your relative child’s emotional and behavioral needs

What is your relative child feeling?

Children may experience many emotions when removed from their homes or parents. They may feel great sadness, loss, grief and loss of control in their lives. Grief is a normal reaction to loss (such as the physical or emotional absence of a parent or even the loss of home and routines). Young children grieve as much as adults do, but often their grief is masked because it looks different from what we’re used to seeing in adults and older youth.

How each child expresses (or doesn’t express) his or her feelings varies among children. They may exhibit many unusual behaviors. They may direct anger and resentment toward you.

It can be difficult to know what to say to a child. What do you tell children when:

- Their parent is seriously ill?
- Their parent has died?
- Their parent is in jail?
- Their parent has a substance abuse problem?
- Their parent has abused them?

In addition to dealing with these difficult conversations, there may also be school, counseling or medical issues to address. Please refer to the Resources section of this guide for a list of Oregon resources.

Children who have been abused or neglected

Unfortunately, many children are in kinship care because they have been abused or neglected by their parents. In Oregon in 2010, the DHS Child Welfare Program confirmed 11,188 unduplicated child abuse or neglect victims. In 2010, almost 32 percent of children in foster care were placed with relatives.

You may not immediately know if the child you are caring for has been abused. Abused and neglected children often love the person who is hurting them because it is someone
they know well and depend on; therefore, children are sometimes hesitant to reveal abuse out of fear of getting the person in trouble. Another reason children may not disclose abuse is because their abuser has frightened or threatened them. Remember, if you are a Department of Human Services (DHS) certified foster parent or a certified daycare provider, you are required to report abuse.

A child who has been abused may start talking to you about it, and hearing this can be difficult. Be very sensitive and listen carefully when a child is talking to you about abuse; keep in mind that it is very difficult for the child to talk about being abused. This is especially hard for children who have been sexually abused.

**How do I respond when a child reports abuse to me?**

Tell the child that you believe him or her and that you are going to contact people who can help. Respect the privacy of the child. The child will need to tell the story in detail later, so don't press the child for details. Remember, you need only suspect abuse to make a report. Don’t display horror, shock or disapproval of the parents, child or situation. Don’t place blame or make judgments about the parent or child.

Sexual abuse can affect a child’s development and trigger inappropriate behaviors. Because most sexual assault victims knew their abuser, children can be profoundly affected around issues of trust, love and security. Sometimes the abuser is someone in their own family. The effects of incest can be distressing to every person within the family. If you are caring for a child who has been sexually abused, you must establish family rules for everyone’s safety and protection. The effects of sexual abuse can be traumatic for everyone in the family. Be sure to seek help immediately for yourself, your family and especially the child.

To report abuse or neglect, call your local DHS Child Welfare office between 8 a.m. and 5 p.m. If you need to report abuse after hours, contact your local law enforcement agency or child abuse hotline: [www.oregon.gov/dhs/children/pages/abuse/cps/cw_branches.aspx](http://www.oregon.gov/dhs/children/pages/abuse/cps/cw_branches.aspx).

**If a child is in immediate danger, call 911.**

**Children affected by domestic violence**

All children are affected when there is violence in their home, regardless of whether or not they have been physically abused. Children who witness violence in their homes are often as traumatized as those who are directly victimized.

Some common behaviors exhibited by children exposed to violence include sleep disturbances, separation anxiety or worry about a parent’s safety, changes in behavior,
intrusive thoughts or memories about the violence, and increased physical complaints. These can include things like headaches, stomachaches, vague complaints and body aches. In addition, a child’s ability to concentrate, focus on and carry out tasks — particularly in school — may be compromised.

Unlike physical abuse, where you might see bruises, it can be difficult to see the effects of family violence. If you suspect the child you are caring for has been exposed to domestic violence, you may want to seek counseling support.

**Drug- and alcohol-affected children**

*I feel sad that my adult child’s life is a mess."

Many families experience the effect of a family member’s abuse of drugs or alcohol. In fact, in 2010, 44.4 percent of founded abuse and neglect cases were due to parental drug and alcohol usage. Parents who have become addicted to a substance may show less interest in the well-being of their children because the primary focus of their life has changed from their children to substance misuse. They may deny substance abuse even though you and other family members and friends know that they are using. This can be painful to observe, and many family members feel helpless to intervene.

Although people can become addicted to many types of substances, the most commonly abused include alcohol, marijuana, prescription medications, cocaine and methamphetamines. Any of these substances can become destructive to individuals and families when misused.

**Methamphetamine abuse:** This has become an epidemic in Oregon and across the country. Methamphetamine is a very potent stimulant with unpredictable effects. It can be particularly devastating to families, especially to children who are exposed to methamphetamines in the home. Children growing up in a home that manufactures methamphetamines may inhale dangerous fumes and chemicals and can be neglected by parents who do not want their children to witness them getting high on the drug. This can affect children's physical health (malnourished, poor hygiene, respiratory ailments), social health (isolated from mainstream society, introduced to use and manufacture of drugs, exposed to unsafe people who may visit the home), and emotional health (insecure, withdrawn or having low self-esteem).

**Maternal alcohol and drug abuse:** As the number of drug- and alcohol-addicted pregnant women has increased, the number of children born with the adverse effects of prenatal drug addiction has also grown. The effects of prenatal alcohol and other drug exposure can be debilitating to the developing infant’s brain.
A wide array of developmental problems can emerge in children because of maternal alcohol and drug abuse, but the effects of prenatal exposure to alcohol and drugs vary widely in children. Sometimes, diagnosing children with this disability is challenging if the only indicators are learning problems and other behavioral characteristics.

Below are services that can assist your family member who is seeking help in achieving sobriety, as well as resources for you and your family to find support and more information on substance addiction:

» **Alcoholics Anonymous, Al-Anon, and Alateen in Oregon**
  Alcoholics Anonymous (AA) is also listed in most phone books and drop-in meetings are generally available every day of the week. Al-Anon and Alateen are for alcohol-affected children, family members and partners/spouses.
  
  [www.aa.org](http://www.aa.org)
  [www.al-anon.alateen.org](http://www.al-anon.alateen.org)

» **Narcotics Anonymous in Oregon**
  This website includes information on treatment centers and meetings in Oregon.
  [www.usrecovery.info/NA/Oregon.htm](http://www.usrecovery.info/NA/Oregon.htm)

**Children whose parent(s) are deceased**

One of the saddest and most painful situations a relative caregiver can face is helping a child deal with the death of a parent. There are no easy answers, but there are ways to help your relative child through the grieving process. It is natural for your relative child to feel deep sadness, loss, fear and even anger. Talking — and crying — can help. Many children need and can benefit from counseling, a support group or other special programs for children who have lost parents.

In addition to allowing your relative child to grieve, be sure to let yourself grieve as well. You have also experienced a loss, especially if the parent who died was your child. Be sure to seek support for yourself, either from friends, support groups or counseling. It is good to be honest with your relative child about the sadness you are feeling, but try not to use him or her as your support system.

Help your relative child remember, but also move on from the trauma. Your relative child may find comfort in making an album, writing stories or any other activity that helps keep the parent real and remembered. Don’t worry if many memories are sad ones, but do try to focus on the good.
Children whose parent(s) are incarcerated

When parents are arrested and put in jail or prison, children often times are scared, confused and upset. The majority of these children reside with another parent or relative during their parent’s incarceration. One way to help young children understand this situation is to explain that parents can be put into “time out” too. The number of women in jails and prisons has grown exponentially over the past decade. Because women are usually the primary caregivers for minor children, kinship care of incarcerated parents’ children will likely continue to grow.

Although it may be tempting to cut off contact with the child’s incarcerated parent, this is usually a mistake. More than ever, your relative child will be struggling with feelings of loss, fear for the parent and shame. Research also indicates that inmates with strong family ties and support networks are much more likely to succeed upon release.

Children with incarcerated parents face unique circumstances. Their parents are often housed in prisons far from their home, making it difficult to maintain contact. The parent’s re-entry and reunification with his or her children can also be challenging. Furthermore, children of incarcerated parents are five to six times more likely to become incarcerated than their peers.

» Children of Incarcerated Parents Project
The Children of Incarcerated Parents Project can offer additional support and resources. You can also contact the parent’s jail or prison to find family support programs. If your relative child is in the Child Welfare system, you must contact the caseworker first.

www.oregon.gov/DOC/PUBAFF/docs/oam/2003_childrens_project.pdf

Children’s emotional, behavioral or learning needs

Because of the early stressful life events that your relative child may have experienced, he or she may be at a higher risk for emotional or behavioral issues.
Anxiety: Children and adolescents with anxiety may experience intense fear, worry or uneasiness that can last for long periods and significantly affect their lives. If anxiety is not assessed and treated early, it could lead to problems like repeated school absences or an inability to finish school; impaired relations with peers; low self-esteem; alcohol or other drug use; problems adjusting to work situations; attachment disorders, and anxiety disorders in adulthood.

Attention deficit hyperactivity disorder (ADHD) and attention deficit disorder (ADD): ADHD/ADD are common neuropsychiatric conditions that affect 6 to 9 percent of school-age children and 4 percent of adults. Symptoms of ADHD/ADD can include difficulty paying attention, being easily distracted, fidgeting, acting impulsively, or difficulty following instructions. The good news is that with diagnosis and treatment, the symptoms of ADHD/ADD can be substantially decreased and one’s quality of life can be improved. ADHD/ADD can flare up during periods of stress (such as school or work), in group settings, and when tasks seem difficult or tedious. People with ADHD are often creative and highly energetic; however, it can cause problems in relationships and can diminish performance at work or in school.

Depression: Only in the past two decades has depression in children been taken very seriously. A depressed child may pretend to be sick, refuse to go to school, cling to a caregiver, or experience feelings of worry. Older children may sulk, get into trouble at school, be negative or grouchy, and feel misunderstood.

High risk behaviors: Children who have experienced adverse experiences in childhood (recurrent abuse, incarceration of a household member, neglect or trauma) may be more likely to engage in unhealthy behaviors, such as substance abuse, sexual promiscuity, self-harm behaviors and eating disorders.

Learning difficulties: Learning difficulties are disabilities that affect the ability to understand or use spoken or written language, do mathematical calculations, coordinate movements or direct attention. Although learning disabilities occur in very young children, the disorders are often not recognized until the child reaches school age.

Oppositional defiant disorder or conduct disorder: All children can be difficult from time to time, particularly when tired, hungry, stressed or upset. They may argue, talk back, disobey and defy parents, teachers and other adults. Oppositional behavior is often a normal part of development for 2- to 3-year-olds and early adolescents. However, openly uncooperative and hostile behavior becomes a serious concern when it is so frequent and consistent that it stands out when compared with other
children of the same age and developmental level and when it affects the child’s social, family and academic life. Children with oppositional defiant disorder (ODD) or conduct disorder (CD) have an ongoing pattern of uncooperative, defiant and hostile behavior toward authority figures that seriously interferes with a child’s day-to-day functioning.

**Post-traumatic stress disorder (PTSD):** Children who have been exposed to a trauma (abuse, witness to violence, experience a life-threatening illness) are at risk for developing PTSD. PTSD symptoms in children may last for a long time, and may include disturbing memories or flashbacks, repeated nightmares, feeling nervous and jumpy, or feeling emotionally numb.

**What about counseling?**

Most children who have had a troubled relationship with parents can benefit from counseling with a mental health professional. Your relative child has been through a lot. A good counselor can work with you to help your relative child heal and grow. The team approach can also take some of the pressure off you. For example, if your relative child seems angry a lot, a counselor can help the child with those feelings. Then, if there is a blow-up at home, you do not have to fight it out. You can say, as calmly as possible, “I understand you’re angry (or hurt or sad). Maybe you could talk about it with Mrs. Smith next Wednesday.”

It is also a good idea to take care of you. Counseling may help you to make better, informed choices or to think of solutions for new challenges in your life.

**Types of counselors**

**Clinical social workers** often have experience working with children who have been abused or neglected. They are trained to work with families, and can be a very good choice. Look for the initials MSW (master of social work) or LCSW (licensed clinical social worker) after the counselor’s name.

**Licensed professional counselors (LPC) and licensed marriage and family therapists (LMFT)** work with individuals, couples, families and groups. They are able to work with issues such as marriage, sexual abuse, depression, anxiety, grief or personal growth issues, family discord and chemical dependencies. Counseling services include the use of recognized counseling techniques, appraisal and assessment methods, and research activities.
Contact each professional directly to find out his or her specialty, fees, experience and services to determine the best therapist for your child/family. You may also want to check with the state licensing boards to verify that the therapist is in good standing.

» Oregon Board of Licensed Professional Counselors and Therapists
   www.oblpct.state.or.us

» Oregon State Board of Licensed Social Workers
   www.oregon.gov/BLSW/index.shtml

A psychologist (PhD) or a school counselor (EdD) may be a good choice if your grandchild also needs work with problems at school.

If your grandchild has serious medical problems and serious mental health problems, you may want to consider a psychiatrist (MD).

Types of counseling your grandchild might benefit from include the following:

- **Individual therapy**: Your grandchild meets one-on-one with the counselor. Individual therapy gives a child a lot of adult attention, and may help the child to feel safe.

- **Group therapy (or support groups)**: Several children with something in common meet with one or two counselors. Groups might be, for example, “Children being raised by grandparents” or “Children who were sexually abused.” Group therapy can help children feel less alone, and let them learn from others.

- **Family therapy**: Members of a family who want to get along better meet with a counselor. Family therapy can also help the adults in the family to help the children with their problems.

Usually, before a child starts any counseling, there is a meeting between the counselor and the child to try to learn what the child needs. That’s a good time to talk with the counselor about what type of counseling will help your grandchild the most. Sometimes a combination works well, such as individual therapy once a week and a support group twice a month.

Children enrolled in the Oregon Health Plan (OHP) or Healthy Kids have mental health counseling benefits. To find the contact information for the mental health plan, check the child’s benefit enrollment letter, contact their eligibility specialist or check the following website:

Meeting your relative child’s physical needs

Children with developmental disabilities

Children with developmental disabilities may have additional needs. Here is a brief explanation of some of the most common developmental disabilities.

**Autism spectrum disorders**: Neurobiological disorders causing impairment in speech and social interaction. Autism, pervasive developmental disorder (PDD), and Asperger’s syndrome are examples.

**Cerebral palsy**: Describes various degrees of impairment to the brain caused during, before or right after birth and resulting in physical and/or cognitive disability. Cerebral palsy can be caused by bleeding in the brain, congenital malformations of the brain, certain chemicals including alcohol and mercury, low birth weight, premature birth, and a pregnant woman’s infection with rubella.

**Down syndrome**: A genetic condition (an extra chromosome) that affects one in every 800 children born in the United States. Children with Down syndrome often have low muscle tone, mild to moderate mental retardation, heart defects and a variety of other health issues.

**Mental retardation**: A child is described as having mental retardation when he or she has an IQ of 70 or lower. The average IQ of children and adults who do not have mental retardation is 100. There are several causes of mental retardation, including genetic factors, severe injuries to the brain, problems during pregnancy or birth, and health problems. Mental retardation affects a child's ability to process information, to learn and to perform basic daily and independent-living skills.

There can also be developmental disabilities caused by traumatic brain injuries or maternal drug abuse.
Children with physical health problems or conditions

There are many common physical health problems or conditions that your relative child may experience.

**AIDS/HIV:** An epidemic disease caused by the human immunodeficiency virus, a retrovirus that causes immune system failure and is often accompanied by secondary infections such as tuberculosis. AIDS is spread through direct contact with body fluids.

**Allergies:** A state of hypersensitivity induced by exposure to a particular antigen (allergen) resulting in harmful reactions. Common symptoms include sneezing, runny nose and congestion.

**Asthma:** A disease characterized by narrowing of the lung passageways, making breathing difficult. Symptoms include frequent coughing during play, at night or while laughing; less energy during play; complaint of chest tightness or chest “hurting”; wheezing; and loss of breath. Special home environment changes may be necessary if a child has asthma.

**Drug-affected or prenatal exposure:** Prenatal exposure to alcohol, tobacco and illicit drugs has the potential to cause a wide spectrum of physical, emotional and developmental problems for infants. The harm caused to the child can be significant and long-lasting, especially if the exposure is not detected and the effects are not treated as soon as possible.

**Eating disorders:** Physiological and psychological disturbances in appetite or food intake.

**Epilepsy/seizures:** Disturbances of brain function, including episodic impairments or loss of consciousness.

**Juvenile diabetes:** A severe metabolic disorder that has sudden onset before the age of 20. Diabetes occurs when insulin deficiency prevents the body from properly using carbohydrates. Diet changes may be necessary and sugar intake must be closely monitored.

**Malnourishment:** A deficiency in vitamins and minerals necessary to sustain life.

**Obesity:** An increase in body weight beyond skeletal and physical capacity, which may limit physical activity.

It is best to speak to your medical provider to assess and treat any of these health conditions. Your medical provider can also provide you with detailed information on these problems.

The potential implications of your child’s physical health problems vary by condition and severity. Health problems might cause changes in your child’s diet, activities, ability to learn and social interaction. Medication may also be required.
Working with the Oregon Department of Human Services (DHS) Child Welfare Program

“Now that another child is added to my family, how do I make sure my family’s needs are met?”

Each family situation is unique. You may need only brief assistance, since most children who go to live with relatives or in foster care return home within a short time. Or you may need help with resources and services over a number of months in order to care for your relative child.

When the child is in DHS Child Welfare custody, a caseworker evaluates the child’s and parent’s needs and your situation to assess what support you require to care for the child. This is a critical time in the case, and your active participation is essential to successful case planning. Services are available within DHS and in your community to meet the needs of the entire family.

What happens if the child is involved in Child Welfare?

When there are safety issues in the home that a family is unable to resolve alone, court intervention may be required. State and federal laws define what constitutes child abuse and neglect. If a child has been removed from home due to allegations of abuse or neglect, the courts determine the time in which the parents have to prove that they can provide a safe home for their child. The federal Adoption and Safe Families Act (ASFA) allows 14 months from the time a child is removed from home for parents to make changes and create a safe environment for their child. If the child is living with relatives, however, the court may allow an exception to this timeline.

Generally, DHS Child Welfare and the Juvenile Court develop a plan with the parents for children to return safely to their homes. However, a concurrent or alternate plan for another permanent home is also made in case the child cannot return home. In many cases, adoption or guardianship may be the permanent plan for the child. In 2010, 36 percent of all adoptions statewide were by relatives.
To license your home and ensure that children will be safe when they come to stay with you, DHS Child Welfare workers require the following:

- All adult household members must have an agency background check for any history of child maltreatment.
- All adult household members must have a criminal history check.
- A safety checklist must be completed at the home.
- Four references are required.
- A Child Welfare worker must complete an in-depth social history and the Oregon SAFE home study with you.
- An extensive preliminary and annual training requirement must be done.
- Regular, ongoing visits in your home occur.

Each case is considered individually. The regular process usually takes 60 days, but the agency also has an emergency placement process for relatives in order to reduce the time children spend in stranger care. This emergency placement process takes between five and seven business days.

**Managing visits and contact with family**

“I feel so relieved to have the children with me, but I also want them to have good contact with their parents.”

Many times, relatives intervene directly to provide care for relative children in need. If DHS Child Welfare is involved, qualified relatives are always the required first placement. Either way, managing contact between your relative child and the child’s parent(s), who may be coping with their own problems, can often be challenging. If you are working with DHS Child Welfare, there are many ways that visits can be arranged: supervised or unsupervised visits at the Child Welfare office, at home, or at another location in the community. Your family, DHS Child Welfare and the parents will collaborate on a visitation plan that best suits the child’s needs.

Examples of possible challenges associated with visits and family contacts include:

- The child may refuse contact with the parent or be extremely upset before and/or after contact with the parent.
- A parent may lie, break promises or miss visits.
- A parent may call or visit a child while he or she is intoxicated or using drugs.
- A parent may try to abduct the child.
Relatives who are not involved with Child Welfare may find it helpful to contact a support group for relatives raising others’ children.

Relatives who are working with Child Welfare can ask for a family meeting to set boundaries or arrange support for visits. You may want to keep a list of concerns to share with your caseworker or ask Intensive Family Services to help with visits.

**What is an Oregon Family Decision Meeting?**

An Oregon Family Decision Meeting (OFDM) is usually scheduled within 60 days of DHS Child Welfare involvement. Family members, DHS staff and others concerned with the well-being of the child (a school teacher, neighbor, minister, grandparent) meet and discuss the best way to protect and care for the child. Oregon Family Decision Meeting participants discuss the strengths of the family as well as the needs of the child. The focus of the meeting is to strategize and agree on a plan for the child’s safety and permanent care. Although most plans include the eventual return of the child to the parent’s home, an alternate plan is discussed if the first plan does not work out. Child Safety Meetings (CSM) are held at case transfer and/or at 30 days.

**What are the expectations of DHS Child Welfare and the court?**

If the court is involved in deciding where your relative child will live, you and DHS Child Welfare will be expected to ensure the child is being cared for appropriately. In some instances, the court may grant legal custody of the child to DHS Child Welfare even though the child is living with you.

If DHS Child Welfare has legal custody of the child, you and all those living in the household will be notified of any court hearings concerning the child. Court hearings and Citizen Review Board (CRB) reviews provide a lot of information about the child and the child’s parents. Your attendance at these hearings is important because the court and CRB want to hear your opinion of how the child is doing. The CASA and the child’s attorney will also be very helpful to you in meeting the child’s needs.

The relationship you have with your DHS Child Welfare caseworker is important. Your caseworker’s recommendation to the court can determine if a child remains in your home or is placed somewhere else. You can tell the worker specifically what you need in order to care for your relative child (childcare, crib, clothes). You may also face difficult issues and situations, such as not agreeing with the service plan created for your relative child, trying to prevent contact between the child and parent, and documenting information regarding the behavior of the child’s parents. Your DHS Child Welfare caseworker should support you in dealing with these challenges.
You may experience frustration dealing with public agencies. Know that staff have to interpret and apply complex, frequently changing rules. If you disagree with the decisions made by the DHS Child Welfare caseworker, you can contact the caseworker’s supervisor to discuss your concerns and review other options outlined in the agency grievance procedure pamphlet.
Assistance for families

Note: All of the resources mentioned below may be subject to eligibility or other requirements.

Resources for people parenting a relative child are growing. In this section, you’ll find information about various program and contact information.

Adoption, foster parent and general resources

Family and Corrections Network (FCN)
FCN is an organization for and about families of prisoners. It offers information, training and technical assistance on children of prisoners, parenting programs for prisoners, prison visiting, incarcerated fathers and mothers, hospitality programs, keeping in touch, returning to the community, the justice system's effect on families, and prison marriage.

215-576-1110;
www.fcnetwork.org

Family and Medical Leave Act (FMLA)
Under the Family and Medical Leave Act of 1993 (FMLA), many employees are entitled to a total of up to 12 work weeks of unpaid leave and access to group health benefits during any 12-month period for the following purposes:

- Birth of a child of the employee and the care of such child;
- Placement of a child with the employee for adoption or foster care;
- Care of a spouse, child or parent of the employee who has a serious health condition;
- Employee's own serious health condition that makes the employee unable to perform the essential functions of his or her position.

www.dol.gov/whd/fmla/

Governor’s Advocacy Office
The Governor’s Advocacy Office includes the Department of Human Services ombudsmen and the children’s ombudsman. The Governor’s Advocacy Office at the Department of Human Services is part of the Director’s Office and serves as the ombudsman for the department’s programs and services. The children's ombudsman is also located in this office.
The Governor’s Advocacy Office serves thousands of families throughout Oregon every year. Oregon residents experiencing a problem with, or seeking information about, DHS programs or services receive help and direction from the Governor’s Advocacy Office’s ombudsmen. These concerns include, but are not limited to, child and elder abuse and neglect, access to health and dental programs, homelessness, personal or family crisis, drug and alcohol treatment, mental health programs, and services for the developmentally disabled.

1-800-442-5238

**Legal Aid**
Some families have had a hard time finding someone to help them with a legal problem. If you need legal services, contact your local Legal Aid agency to provide you with a starting point in your search. Note: Each of these agencies provides different services, in different areas and on different fee scales.

www.osbar.org/public/ris/LowCostLegalHelp/LegalAid.html

**Modest Means Program**
Oregon lawyers created the Modest Means Program to help moderate-income Oregonians find affordable legal assistance. Eligibility for the program is based upon type of legal matter, applicant income and assets, and availability of participating attorneys. The Modest Means Program is only available for family law, criminal defense and landlord/tenant matters at the trial court level, not including appeals. Modest Means Program attorneys will charge $35 for the first in-office consultation and then $60, $80 or $100 per hour thereafter, depending on your income and assets.

www.osbar.org/public/ris/ris.html#referral

**Problem Solvers**
Oregon lawyers volunteer as Problem Solvers to offer free legal information and advice to children. Any young person between the ages of 11 and 17 can call to request a referral to this program. Volunteer attorneys agree to provide a free 30-minute consultation.

1-800-452-7636
Oregon Foster Parent Association (OFPA)
OFPA provides services and support to Oregon’s foster and adoptive families as well as to grandparents and other relatives caring for children. Some of the services and support include:

• Advocacy with state and private agencies;
• Child behavior education;
• Educational advocacy with schools;
• General training needs;
• Resource and referral for children’s basic needs.

1-888-544-3402;
ofpaoffice@aol.com

Oregon Post Adoption Resource Center (ORPARC)
The Oregon Post Adoption Resource Center (ORPARC) provides services to Oregon families who have adopted children through any state foster care system and to Oregon assisted guardianship families. Knowledgeable and dedicated staff offer connections to community resources, specialized parenting consultation, advocacy and support, statewide trainings, an extensive lending library, seasonal newsletters and assistance with parent support groups. Resources are also available in Spanish for eligible families. All services are provided at no cost to eligible families.

1-800-764-8367;
www.orparc.org

Child care and respite programs

Family Caregiver Support Program/Relatives as Parents Program
This program provides supportive services to grandparents and other relatives 55 years of age or older who are raising a grandchild or other family member. These unpaid caregivers may be eligible for supportive services if a child (18 or younger) or child with a disability (19 or older) is living in their home because the child’s parents are unable or unwilling to care for them. Through the Family Caregiver Support Program, these primary caregivers may be eligible for the following services:

• Caregiver trainings
• Support groups and individual counseling
• Access to respite services
• Assistance finding services
• Community outreach and information services.
See pages 36-40 for your local Area Agency on Aging.

Lifespan Respite Care
Respite care or short-term relief is time for families and primary caregivers to restore and strengthen their ability to continue providing care for a child or adult with special needs including being medically fragile or having mental or physical disabilities, chronic illness or dementia. Lifespan Respite helps families and caregivers seeking temporary relief from the demands of providing ongoing care for an individual with special needs, regardless of age, income, race, ethnicity, special needs or situations.
• For help finding a respite provider
  www.oregon.gov/DHS/respite/
• For help with the cost of respite
  www.oregon.gov/DHS/respite/families/paying.shtml

Oregon Child Care Resource and Referral
Free referral service to help locate certified full- or part-time child care.
www.oregonchildcare.org/

Counseling and crisis services

Community mental health
Contact your county’s community mental health program for more information on local mental health services, counseling and crisis services in your area.
See pages 47-49 for your local mental health program.

Women’s Crisis Service
A 24-hour hotline for victims of domestic violence or sexual assault. Services are for women and children and include shelter information and referral, women’s support groups in English and Spanish, crisis counseling, transition support, and 911 emergency cell phones for victims. The Portland Women’s Crisis Line can refer callers to the appropriate agency in their county area. The National Domestic Violence hotline can connect callers to state resources throughout the country.
503-399-7722-866-399-7722;
www.mvwcs.com
Financial assistance

Adoption assistance
If you adopt a relative child, you may receive adoption assistance through Child Welfare to help pay for your child’s special needs. Adoption assistance can provide financial support for legal and other fees relating to adoption or for one-time, unexpected expenses related to the adoption process.

To be eligible for adoption assistance, the child must meet specific criteria such as being diagnosed with a disability, being part of a large sibling group, being part of a racial or ethnic minority, being age 8 or older, being at risk for future problems, or other unlisted reasons. A child can be eligible for adoption assistance until age 18.

503-947-1134 or your local DHS Child Welfare office (see pages 44-45)

Community Action Agencies
Community Action Agencies work to eradicate the causes and conditions of poverty that exist in Oregon. Community Action Agencies work in collaboration with a variety of partners, representing local, state and federal governments, as well as community and advocacy groups, policymakers, and low-income leaders.

Services offered by Community Action Agencies may include:
- Housing and transportation
- Food and utility assistance
- Emergency services
- Head Start educational programs
- Child care referrals
- Community resource referrals

See pages 41-43 for your local Community Action Agency.

Child support
The child’s parents are legally responsible to financially support the child, sometimes through child support payments. The Oregon Department of Justice Division of Child Support (DCS) or the local district attorney’s office handles the collection of child support, which may be available from each parent to help provide care for a child. If the child is receiving benefits from the state, DCS can be helpful. The local district attorney’s office handles most other cases. Website includes information in English, Spanish, Russian and Vietnamese.

1-800-850-0228;
www.oregonchildsupport.gov
Relative foster care reimbursement
Relative foster care reimbursement may be made on behalf of a child who is in the care and custody of DHS, depending on the child’s eligibility. Coverage for medical, dental, eye care and mental health counseling is also provided. In addition, the family caring for the child must meet extensive DHS standards and requirements. Contact the child’s caseworker for more details.

Self-Sufficiency offices
The Oregon Department of Human Services, through Self-Sufficiency, offers temporary monthly assistance to eligible families and children.

Temporary Assistance to Needy Families (TANF)
- **Non-needy caretaker relative grant**: This grant provides monthly financial assistance for the children only based on the income and resources of the household. The child is eligible until age 18 (or age 19 if still in high school). Does not require job search activities by the grandparent or relative caregiver.

- **Family grant**: The TANF program provides monthly financial assistance for all children and adults living in the household, based on the household’s income and resources, and requires participation in the JOBS program for adults in the home. The program provides case management and cash assistance to low-income families with minor children. The goal of the program is to reduce the number of families living in poverty through employment services and community resources.

Call your local Self-Sufficiency office (see pages 44-45 for list).

Employment Related Day Care (ERDC)
This program subsidizes child care expenses for employed caretakers (including non-needy caretaker relatives). It is for daycare expenses due to employment. Eligibility and the amount of the subsidy are based on a number of factors, such as family income and the number of family members. Caretakers are responsible to pay monthly co-pay. There may be a waitlist for this program.

Call your local Self-Sufficiency office (see pages 44-45 for list).

Oregon Helps
It can be tough to get the help your family needs. Try the Oregon Helps online resource to find out if your family can get help from 33 different services. Oregon Helps does not ask who you are, and does not share your information with anyone. You answer a series of questions about what county you live in and who lives in your household. Suggestions for services that you may be eligible for based on your characteristics are provided at the end of the questions. It’s a great place to start when deciding what services to apply for in Oregon. This resource is available in English, Spanish, Russian and Vietnamese.

[www.oregonhelps.org](http://www.oregonhelps.org)
Social Security
There are three categories of Social Security benefits available to help children. The eligibility requirements are different for each benefit. In addition, because benefit decisions can take several weeks, it is important to start the application process as soon as possible. If benefits are awarded, they should be retroactive to the date of the application submission.

- **Supplemental Security Income (SSI):** A benefit for children who have significant physical or mental impairment.
- **Survivors benefits:** A benefit for children whose parent(s) are deceased.
- **Social Security benefits:** A benefit for children* who have a parent(s) receiving Social Security Disability or Social Security Retirement. The parent does not need to be living in the home.

* Dependent grandchildren may qualify based on the grandparent receiving Social Security Disability or Social Security Retirement if their biological or adoptive parents are deceased or disabled. The grandparent must be financially supporting the child throughout the year without assistance from the parents and the parents cannot live in the household. Additional eligibility requirements apply.

1-800-772-1213;
www.ssa.gov

Subsidized guardianship
Subsidized guardianship is a program to help families obtain guardianship of children in the custody of DHS. Guardianship assistance includes financial or medical benefits paid to guardian families for costs associated with the needs of the child under their guardianship. Benefits may be in the form of cash and/or Medicaid coverage.

Contact the child’s case manager for additional details.

Food

Emergency food and food boxes
Most communities have emergency food banks. Look in your local telephone directory; contact your local DHS office or the Oregon Food Bank for more information.

www.oregonfoodbank.org

Contact your local Self-Sufficiency office (see pages 44-45 for list).

Supplemental Nutrition Assistance Program SNAP (formerly Food Stamp Program)
SNAP provides monthly funds to assist with the cost of food. SNAP benefits are issued an Oregon Trail Card. Eligibility is based on size of household, income, housing costs, child
care costs and medical costs. To estimate the amount of food benefits you would be eligible for and apply online go to www.oregon.gov/DHS/assistance/foodstamps/snap-info.shtml.

You can apply at your local DHS, SPD or AAA office.

Call 1-800-723-3638 (Oregon SafeNet) for the closest office;

Contact your local Self-Sufficiency office (see pages 44-45 for Self-Sufficiency and pages 36-40 for AAA offices).

**Free school meals**
Free or reduced prices for school meals may be available through local schools. Children in DHS custody who are placed with relatives or relative families receiving TANF or SNAP are generally eligible. Otherwise, eligibility is based on family income on a sliding scale. Contact the child’s school for more information.

**Free summer meals program**
Many communities have free summer meals programs available to children through local schools, parks and churches. The programs do not have income requirements and are available for children through age 18.

1-800-723-3638 (Oregon SafeNet) for the closest meal site; www.summerfoodoregon.org/

**Women, Infants and Children Program (WIC)**
Through the county health department, WIC provides nutritional foods and education to women who are pregnant or have recently given birth and for children from birth to 5 years of age. Vouchers are provided to buy specific types and amounts of nutritional foods during each month of eligibility. Assessment, counseling and — if needed — referral to services for pregnant mothers, new mothers and young children are available. Eligibility is based on household size and income. Children in DHS custody placed with relatives and other adults — or who are on TANF, OHP or SNAP — are generally eligible.

1-800-SAFENET;
http://public.health.oregon.gov/HealthyPeopleFamilies/wic/Pages/index.aspx

**Housing and utility assistance**

Your local Community Action Agency can help you navigate various housing services. Depending on the Oregon county in which you live, there are programs to help find and pay for housing. Eligibility is based on household income and the number of people in the household. Some programs require criminal history background checks of family members. There are typically long waiting lists for these housing options, so be sure to
apply as soon as possible. Energy or utility assistance programs can help pay electricity and other heating bills. Eligibility is based on income. There may also be specific programs for older adults.

Contact your local Community Action Agency (see pages 41-43).

**Telephone Assistance**

The Oregon Telephone Assistance Program (OTAP) helps you with your home or cell phone bill. The maximum reduction from your phone bill is $13.50. You may be eligible for OTAP if you are getting one of the benefits listed: Supplemental Nutrition Assistance Program (SNAP), Supplemental Security Income (SSI), Medicaid or certain state medical programs, or Temporary Assistance to Needy Families (TANF).

Link-Up America helps qualified low-income individuals by paying for one-half (up to $30) of the line-connection charges for new residential telephone service.

1-800-848-4442;
[www.oregon.gov/puc/Pages/rspf/otap.aspx](http://www.oregon.gov/puc/Pages/rspf/otap.aspx)

**Medical and dental coverage**

Children need routine medical attention, including immunizations, vision check-ups and dental visits. Some serious medical needs might not be obvious at first, so be sure to get medical coverage now so any future health problems will be covered.

**Oregon Health Plan (OHP)**

OHP is medical coverage for children who meet eligibility requirements. Relatives and other caregivers can apply for OHP for a child based primarily on the income and resources of that child. The Oregon Health Plan can pay for medical, vision, dental and mental health services provided in your area. Access to providers is specified. Be sure to check the coverage and which providers you can use with the health plan.

1-800-359-9517;
[www.oregon.gov/DHS/healthplan](http://www.oregon.gov/DHS/healthplan)

**Healthy Kids**

Healthy Kids offers health insurance to all uninsured Oregon kids and teens. Coverage includes medical, dental, vision and mental health care. No family earns too much to be eligible. The monthly premium amount will be based on household income and may be no-cost, low-cost or full-cost.

1-800-359-9517;
[www.oregonhealthykids.gov/index.html](http://www.oregonhealthykids.gov/index.html)
Family Health Insurance Assistance Program (FHIAP)
FHIAP helps Oregon families pay for up to 95 percent (100 percent for kids up to age 18) of the monthly premium for private health insurance plans. Applicants must be uninsured (or have COBRA) and meet income and other rules. Individuals and families use FHIAP to pay for job-based insurance or to buy an individual health plan, if insurance is not available through an employer. Members pay for co-pays and deductibles.

1-888-564-9669; 
www.fhiap.oregon.gov

Oregon SafeNet
SafeNet is a free and confidential helpline providing statewide information and referral services for community health, social and mental health services; immediate care health services; and pregnancy and reproductive health services. SafeNet helps Oregonians find health care, public services and information about eligibility for the Oregon Health Plan and other low-cost health insurance options.

1-800-SAFENET (1-800-723-3638)

Senior Health Insurance Benefits Assistance (SHIBA)
SHIBA is a federal/state program that provides free and unbiased advice to people with Medicare and their families. Trained SHIBA volunteers provide personalized counseling to help people with Medicare make insurance choices.

1-800-722-4134; 
www.oregonshiba.org

Extra Help
Anyone who has Medicare can get Medicare prescription drug coverage. Some people with limited resources and income also are eligible for Extra Help to pay for the costs — monthly premiums, annual deductibles and prescription co-payments — related to a Medicare prescription drug plan. The Extra Help is estimated to be worth about $4,000 per year. Many people qualify for these big savings and don’t even know it.

1-800-772-1213; 
ssa.gov/prescriptionhelp/

Oregon Prescription Drug Program (OPDP)
The Oregon Prescription Drug Program (OPDP) is the state prescription drug purchasing pool. OPDP offers a discount card that may save you money on your prescription drugs. There is no cost for the card and all Oregonians may sign up. OPDP provides an average savings of 42 percent. All prescription drugs are covered with the highest discount on
generics. There is no paperwork required to join and no age or income limit. You can have other prescription coverage even through Medicare and still sign up for OPDP.

1-800-913-4146;
www.opdp.org

Oregon Medical Insurance Pool (OMIP)/Federal Medical Insurance Pool (FMIP)
OMIP covers adults and children who can’t obtain other medical insurance because they have pre-existing medical conditions, have exhausted their employer-based COBRA, have no commercial portability plan available or are eligible for the Federal Health Coverage Tax Credit. FMIP is an option for those who have been without insurance for six months and who meet the citizenship requirements. OMIP/FMIP benefits are comprehensive and premiums vary by age and plan choice. OMIP/FMIP is not a low-cost health insurance program, but those who are eligible for FHIAP may use their subsidies to pay for some OMIP/FMIP plans.

1-800-848-7280;
www.omip.state.or.us

Advantage Smiles for Kids
This nonprofit organization provides orthodontic and dental care for low-income, at-risk youth. A dentist, teacher, social worker, CASA, social service agency, mental health professional or school counselor must refer the child to the program. The parent or guardian must make a monthly financial contribution, regardless of how small. Children 11 to 16 in good standing at school will be considered.

541-504-3911;
www.advantagesmilesforkids.org

Smiles Change Lives
Smiles Change Lives connects caring orthodontists with children in need. Children must be between ages 10 and 18 years old and have a household income at or below 200 percent of the poverty level. Approved families must pay $500 toward the cost of the braces. There is a $25 non-refundable application fee to apply.

www.smileschangelives.org/

Other orthodontic help
Check with local orthodontists to see if they offer kids full or partial scholarships for the cost of braces.

Immunization clinics
County health departments offer immunizations at no charge or a sliding scale based on income. They offer all state-required vaccines for day care, preschool, K-12 and a variety of adult vaccines.

Contact your local health department (see list on page 46).
Help for seniors and people with disabilities

Aging and Disability Resource Connection (ADRC)
The ADRC assists older adults, people with disabilities, their families and caregivers with resources and support services. Individuals can search the ADRC website for information and services on their own or they may walk in or call any local ADRC for assistance. The ADRC provides information and referral information for those who are able to look for services on their own or just need quick information. In addition, staff is available for consumers who need assistance navigating through all the options to find the best service or combination of services that meet their needs. Staff is also available to assist in long-term care planning.

Contact your local AAA (see pages 36-40);
https://adrcoforegon.com/index.php

Other help with basic expenses

AARP Tax-Aide
AARP Tax-Aide is the nation’s largest free, volunteer-run tax preparation and assistance service. With the help of more than 34,600 trained and certified volunteers nationwide, the program provides free tax preparation and assistance services to millions of low- and middle-income taxpayers, with special attention to those ages 60 and older. The program also offers electronic filing and online counseling. There are approximately 6,500 Tax-Aide sites in Oregon. AARP Tax-Aide is available from Feb. 1 through the middle of April.

1-888-227-7669;
www.AARP.org/money/taxes/aarp_taxaide

Earned Income Tax Credit
This is a tax credit to supplement the income of working people with children. The credit is paid after a family files income taxes, and a relative can get a refund even if no income tax is owed. This credit is available to relatives who are employed and have at least one qualifying dependent child.

www.irs.gov/Individuals/EITC-For-Individuals

Success at school: School services
Securing a good education can help children lead successful lives. Sometimes children who end up in kinship care have had a difficult time in school. Many of these children
have moved several times, had no one to help them with their homework or had special learning needs that were not diagnosed. Without support, these children may get behind and feel defeated.

Many schools have programs available to make sure children receive the best possible education. Services exist to help them prepare for school, to stay in school, and to excel in school. This section includes information on how to help children of all ages (from birth through higher education) succeed in school.

**Early Intervention/Early Childhood programs**

This program serves children from birth to school age. If you’re worried about your preschool child being hyperactive or missing developmental milestones, contact Early Intervention. Early Intervention provides a free total assessment of your child for developmental delays and provides services to prepare your child to be successful in his or her school years.

Contact your local health department (see page 46).

**Education advocacy and information**

**School-age children:** Some children have serious problems that must be addressed, such as attendance or behavioral problems in school. If you are worried that their needs aren’t being met, you can contact the following advocacy programs:

- Family and Community Together (FACT) Parent Training and Information Center (PTI) is a statewide resource serving families of children with disabilities, emotional or behaviors concerns, or suspected disabilities from ages birth to 26. The center’s goal is to educate, encourage and empower children and young adults with disabilities as well as their parents and family members.

  1-888-505-2673;

- Disabilities Rights Oregon offers free legal assistance and other advocacy services to individuals who have physical or mental disabilities.

  1-800-452-1694;
  [http://disabilityrightsoregon.org/](http://disabilityrightsoregon.org/)

**Head Start**

Head Start is a federal program designed to assist preschool children (ages 2 years to school age, depending on location) to get ready for school. Eligibility is based on income and other factors; however, there are exceptions to these eligibility rules. Most children in the care of relatives and in the custody of the state are eligible.

Children in Head Start generally attend morning or afternoon sessions; transportation is available. Some programs also include a childcare component for working parents. The purpose of Head Start is to assess the child’s needs and to help families find services
and support targeted toward school preparation. Since each program has a different age requirement, and often a waiting list, contact your area program as soon as you have a child (between 1 and 6 years old) to learn the specifics of your program.

1-866-763-6481;
http://eclkc.ohs.acf.hhs.gov/hslc

**Individualized Education Plan (IEP)/surrogate parent**
If your child has a disability, an education surrogate parent must be appointed to serve in the parental role in order to make education decisions as a part of the education planning team. You may serve in this role, recommend another person or rely on Court Appointed Special Advocates (CASA). The surrogate parent may request an educational assessment or meetings as necessary at any time to discuss the child’s education plan. Contact the FACT PTI for specialized help with your child.

1-888-891-6784;
info@orpti.org

**Scholarships and education loans**
Loans and scholarships may be available to foster (or former foster) teens who attend college. They must have spent at least one year in foster care between the ages of 16 and 21, and enroll in college no later than three years from the date they left foster care or graduated from high school, whichever date is earlier.

1-800-452-8807;
www.osac.state.or.us

**School fees**
Many fees can be associated with school attendance including lockers, band instruments, sports and extracurricular activities. Contact your school counselor or case manager regarding assistance for your child’s school fees.

**Back-to-school clothing and supplies**
Getting a child ready for a new school year is exciting but also can be financially difficult. Operation School Bell and other supply and clothing drives collect items for those needing help. Talk with your child’s school counselor for a referral to the district’s family resource center or other resource if you need assistance with school clothes and supplies.

**School medical insurance**
Some schools have low-cost medical coverage for children. Check with the school counselor to see if your child can receive medical coverage for in-school or after-school activities.
**Talented and Gifted programs**
If you have a child you feel is exceptionally gifted in one or more areas, contact your local school. The school has the responsibility to provide gifted children with work that is compatible with their abilities. Your child will be tested and may be identified for the TAG (Talented and Gifted) Program. Contact your child’s school counselor for more information.

**Support groups and trainings**

**Support groups for grandparents and other relatives raising children**
Support groups for grandparents raising grandchildren and relatives raising children are available throughout the state. Contact the Family Caregiver Support Program through your local Area Agency on Aging for a listing of support groups.

Call your local Area Agency on Aging (see pages 36-40).

**Grandparents Raising Grandchildren conferences**
Some Area Agencies on Aging throughout the state of Oregon hold annual Grandparent Raising Grandchildren conferences including speakers and resource fairs. Contact your local Area Agency on Aging to see if a conference is held in your area.

Call your local Area Agency on Aging (see pages 36-40).

**A Gift of Time of Oregon**
A Gift of Time of Oregon holds an annual statewide respite weekend for grandparents raising grandchildren; other kinship parents and family caregivers raising a relative child are also included. Event includes guest speakers, entertainment, arts and crafts, relaxation activities and fellowship. For event date and registration, contact A Gift of Time of Oregon.

503-831-5593; [http://agiftoftimeoforegon.org](http://agiftoftimeoforegon.org)

**Native Care Conference**
Join caregivers of Native Elders and relative caregivers of children from Northwest Indian communities for the annual two-day event. The conference includes valuable workshops that will enhance your caregiving skills and provide you with a break from your daily responsibilities.

Contact the Tribal Health Center for date and registration for the next conference.
**Powerful Tools for Caregivers**
In the six weekly classes, caregivers develop a wealth of self-care tools to reduce personal stress; change negative self-talk; communicate their needs to family members and health care or service providers; communicate more effectively in challenging situations; recognize the messages in their emotions; deal with difficult feelings; and make tough caregiving decisions.

Call your local AAA (see pages 36-40);

[www.powerfultoolsforcaregivers.org](http://www.powerfultoolsforcaregivers.org)
Resources

Notice: The information in this resource guide is accurate to the best of our knowledge as of January 2013. However, we assume no responsibility for the accuracy of program resources or contact information.

Area Agencies on Aging offices, by county

- **Baker**
  - Community Connection of Northeast Oregon, Inc.
  - 2810-1/2 Cedar Street
  - Baker City 97814
  - Phone 541-523-6591
  - Fax 541-523-6592
  - [www.ccno.org](http://www.ccno.org)

- **Benton**
  - Oregon Cascades West Council of Governments
  - 1400 Queen Avenue S.E., Suite 206
  - Albany 97322
  - Phone 541-967-8630/1-800-638-0510
  - Fax 541-967-6423
  - [www.ocwcog.org/](http://www.ocwcog.org/)

- **Clackamas**
  - Clackamas Area Agency on Aging
  - 2051 Kaen Road, P.O. Box 2950
  - Oregon City 97045-0295
  - Phone 503-655-8640
  - Fax 503-650-5722
  - [www.clackamas.us/socialservices/senior.html](http://www.clackamas.us/socialservices/senior.html)

- **Clatsop**
  - NorthWest Senior and Disability Services
  - 2002 Chokeberry Avenue
  - Warrenton 97146
• **Columbia**  
  **Area Agency on Aging**  
  Community Action Team  
  125 N. 17th Street  
  St. Helens 97051  
  Phone 503-397-3511  
  Fax 503-397-3290  
  [www.cat-team.org](http://www.cat-team.org)

• **Coos**  
  **Area Agency on Aging**  
  16399 Lower Harbor Road  
  Harbor 97415  
  Phone 541-469-5306/1-800-481-5777  
  Fax 541-469-292  
  [www.scbec.org/SCBEC_senior_services.htm](http://www.scbec.org/SCBEC_senior_services.htm)

• **Crook**  
  **Central Oregon Council on Aging**  
  1135 S.W. Highland Avenue  
  Redmond 97756  
  Phone 541-548-8817  
  Fax 541-548-2893  
  [www.councilonaging.org](http://www.councilonaging.org)

• **Curry**  
  **Area Agency on Aging**  
  16399 Lower Harbor Road  
  Harbor 97415  
  Phone 541-469-5306/1-800-481-5777  
  Fax 541-469-292  
  [www.scbec.org/SCBEC_senior_services.htm](http://www.scbec.org/SCBEC_senior_services.htm)

• **Deschutes**  
  **Central Oregon Council on Aging**  
  1135 S.W. Highland Avenue  
  Redmond 97756  
  Phone 541-548-8817  
  Fax 541-548-2893  
  [www.councilonaging.org](http://www.councilonaging.org)

• **Douglas**  
  **Douglas County Senior Services**  
  621 W. Madrone Street, Room 316  
  Roseburg 97470  
  Phone 541-440-3580/1-800-234-0985  
  Fax 541-440-3599  
  [www.councilonaging.org](http://www.councilonaging.org)

• **Gilliam**  
  **Mid-Columbia Council of Governments**  
  1113 Kelly Avenue  
  The Dalles 97058  
  Phone 541-298-4101/1-800-831-8217  
  Fax 541-298-2084  

• **Grant**  
  **Community Connection of Northeast Oregon**  
  1504 Albany Street  
  LaGrande 97850  
  Phone 541-963-7532  
  Fax 541-963-5932  
  [www.ccno.org](http://www.ccno.org)
• **Harney**  
  **Senior and Community Services Center**  
  17 S. Alder Street  
  Burns 97720  
  Phone 541-573-6024  
  Fax 541-573-6025  
  [www.co.harney.or.us/seniorcenter.html](http://www.co.harney.or.us/seniorcenter.html)

• **Hood River**  
  **Mid-Columbia Council of Governments**  
  205 Wasco Loop Suite 101  
  Hood River 97031  
  Phone 541-386-6300  
  Fax 541-386-2189  

• **Jackson**  
  **Rogue Valley Council of Governments**  
  155 N. First Street  
  Central Point 97502  
  Phone 541-664-6674  
  Fax 541-664-7927  
  [www.rvcog.org](http://www.rvcog.org)

• **Josephine**  
  **Rogue Valley Council of Governments**  
  155 N. First Street  
  Central Point 97502  
  Phone 541-664-6674  
  Fax 541-664-7927  
  [www.rvcog.org](http://www.rvcog.org)

• **Klamath**  
  **Klamath Basin Senior Citizens Council**  
  2045 Arthur Street  
  Klamath Falls 97603  
  Phone 541-883-7171  
  Fax 541-883-7175

• **Lake**  
  **Klamath Basin Senior Citizens Council**  
  2045 Arthur Street  
  Klamath Falls 97603  
  Phone 541-883-7171  
  Fax 541-883-7175

• **Jefferson**  
  **Central Oregon Council on Aging**  
  1135 S.W. Highland Avenue  
  Redmond 97756  
  Phone 541-548-8817  
  Fax 541-548-2893  
  [www.councilonaging.org](http://www.councilonaging.org)

• **Lane**  
  **Lane Council of Governments**  
  1015 Willamette Street  
  Eugene 97401-3178  
  Phone 541-682-4038/1-800-441-4038  
  Fax 541-682-2461  
  [www.sdslane.org](http://www.sdslane.org)
• Lincoln
Oregon Cascades West Council of Governments (OCWCOG)
203 N. Main Street
Toledo 97391
Phone 541-336-2289/1-800-282-6194
Fax 541-336-1510
www.ocwcog.org

• Linn
Oregon Cascades West Council of Governments (OCWCOG)
1400 Queen Avenue S.E., Suite 206
Albany 97322
Phone 541-967-8630/1-800-638-0510
Fax 541-967-6423
www.ocwcog.org

• Malheur
Malheur Council on Aging and Community Services
842 S.E. First Avenue
Ontario 97914
Phone 541-889-7651
Fax 541-889-4940
www.mcoainfo.org

• Marion
NorthWest Senior and Disability Services (NWSDS)
3410 Cherry Avenue N.E.
Salem 97309
Phone 503-304-3400/1-800-469-8772
Fax 503-304-3421
www.nwsds.org

• Morrow
Community Action Program East Central Oregon
721 S.E. Third Street, Suite D
Pendleton 97801
Phone 541-276-1926/1-800-752-1139
Fax 541-276-7541
www.capeco-works.org/senior.htm

• Multnomah
Multnomah County Aging and Disability Services (ADS)
421 S.W. Oak Avenue, Suite 510
Portland 97204-2238
Phone 503-988-3646
Fax 503-988-6945
web.multco.us/ads

• Polk
NorthWest Senior and Disability Services
260 N.E. Kings Valley Highway
Dallas 97338
Phone 503-831-0581/1-800-582-7458
Fax 503-606-7601
www.nwsds.org

• Sherman
Mid-Columbia Council of Governments
1113 Kelly Avenue
The Dalles 97058
Phone 541-298-4101/1-800-831-8217
Fax 541-298-2084
http://mccog.com/area-agency-on-aging/
• Tillamook  
  **NorthWest Senior and Disability Services (NWSDS)**  
  5010 E. Third Street  
  Tillamook 97141  
  Phone 503-842-2770/1-800-584-9712  
  Fax 503-842-6290  
  [www.nwsds.org](http://www.nwsds.org)

• Umatilla  
  **Community Action Program East Central Oregon**  
  721 S.E. Third Street, Suite D  
  Pendleton 97801  
  Phone 541-276-1926/1-800-752-1139  
  Fax 541-276-7541  
  [www.capeco-works.org/senior.htm](http://www.capeco-works.org/senior.htm)

• Union  
  **Community Connection of Northeast Oregon**  
  1504 Albany Street  
  La Grande 97850  
  Phone 541-963-7532  
  Fax 541-963-5932  
  [www.ccno.org](http://www.ccno.org)

• Wallowa  
  **Community Connection of Northeast Oregon**  
  702 N.W. First Street  
  Enterprise 97850  
  Phone 541-426-3840  
  Fax 541-426-6260  
  [www.ccno.org](http://www.ccno.org)

• Wasco  
  **Mid-Columbia Council of Governments**  
  1113 Kelly Avenue  
  The Dalles 97058  
  Phone 541-298-4101/1-800-831-8217  
  Fax 541-298-2084  

• Washington  
  **Washington County Disability, Aging & Veteran Services**  
  133 S.E. Second Avenue  
  Hillsboro 97123  
  Phone 503-846-3060  
  Fax 503-846-3065  
  [www.co.washington.or.us/HHS/DAVS/](http://www.co.washington.or.us/HHS/DAVS/)

• Wheeler  
  **Mid-Columbia Council of Governments**  
  1113 Kelly Avenue  
  The Dalles 97058  
  Phone 541-298-4101/1-800-831-8217  
  Fax 541-298-2084  

• Yamhill  
  **NorthWest Senior and Disability Services**  
  300 S.W. Hill Road  
  McMinnville 97128  
  Phone 503-472-9441/1-866-333-7218  
  Fax 503-472-4724  
  [www.nwsds.org](http://www.nwsds.org)
Community Action Agency offices, by county or county partnerships

- **Jackson County**  
  ACCESS, Inc.  
  P.O. Box 4666  
  3630 Aviation Way  
  Medford 97501  
  Phone 541-779-6691  
  Fax 541-779-8886  
  [www.access-inc.org](http://www.access-inc.org)

- **Yamhill County**  
  Yamhill Community Action Partnership (YCAP)  
  800 E. Second Street  
  McMinnville 97128  
  Phone 503-472-0457/1-800-945-9992  
  Fax 503-472-5555  
  [www.yamhillcap.org](http://www.yamhillcap.org)

- **Gilliam, Morrow, Umatilla and Wheeler counties**  
  Community Action Program of East Central Oregon (CAPECO)  
  721 S.E. Third Street, Suite D  
  Pendleton 97801  
  Phone 1-800-752-1139  
  Fax 541-276-7541  
  [www.capeco-works.org](http://www.capeco-works.org)

- **Deschutes, Jefferson and Crook counties**  
  Neighbor Impact  
  2303 S.W. First Street  
  Redmond 97756  
  Phone 541-548-2380 ext. 100  
  Fax 541-548-6013  
  [neighborimpact.org](http://neighborimpact.org)

- **Clackamas County**  
  Clackamas County Social Services  
  2051 Kaen Road  
  Oregon City 97045  
  Phone 503-655-8640  
  Fax 503-650-5722  
  [www.clackamas.us/socalservices/senior.html](http://www.clackamas.us/socalservices/senior.html)

- **Washington County**  
  Community Action  
  1001 S.W. Baseline Street  
  Hillsboro 97123  
  Phone 503-648-6646  
  Fax 503-648-4175  
  [www.caowash.org](http://www.caowash.org)

- **Columbia, Clatsop and Tillamook counties**  
  Community Action Team, Inc.  
  125 N. 17th Street  
  St. Helens 97051  
  Phone 503-397-3511  
  Fax 503-397-3290  
  [www.cat-team.org](http://www.cat-team.org)
• Wallowa, Union, Baker and Grant counties
Community Connection of NE Oregon (CCNO)
1504 Albany Street
LaGrande 97850
Phone 541-963-7532
www.ccno.org
2810-1/2 Cedar Street
Baker City 97814
Phone 541-523-6591
702 N.W. First Street
Enterprise 97828
Phone 541-426-3840
www.ccno.org

• Linn, Benton and Lincoln counties
Community Services Consortium
545 S.W. Second Street, Suite A
Corvallis 97333
Phone 541-752-1010
Fax 541-752-2348
www.csc.gen.or.us

• Klamath and Lake counties
Klamath/Lake Community Action Services
1803 Main Street
Klamath Falls 97601
Phone 541-882-3500/1-866-665-6438
Fax 541-882-3674
www.klcas.org

• Lane County
Lane County Human Services Division
125 E. Eighth Avenue
Eugene 97401
Phone 541-682-3798
Fax 541-682-3760
www.lanecounty.org/hsc

• Hood River, Wasco and Sherman counties
Mid-Columbia Community Action Council (MCCAC)
312 E. Fourth Street
The Dalles 97058
Phone 541-298-5131
Fax 541-298-5141
www.mccac.com
205 Oak Street, #4
Hood River 97031
Phone 541-386-4027
Fax 541-387-2189
www.mccac.com

• Marion and Polk counties
Community Action Agency (CAA) Marion/Polk
2475 Center Street N.E.
Salem 97301
Phone 503-585-6232
Fax 503-375-7580
www.mwvcaa.org
• **Multnomah County**  
  **Multnomah County Community Services Division**  
  421 S.W. Oak Street, Suite 620  
  Portland 97204  
  Phone 503-988-3663  
  Toll Free 211  
  Fax 503-988-3093  
  [web.multco.us/dchs-community-services](http://web.multco.us/dchs-community-services)

• **Coos, Curry, and western Douglas counties**  
  **Oregon Coast Community Action (ORCCA)**  
  2110 Newmark Avenue  
  Coos Bay 97420-2957  
  Phone 541-888-7094  
  Fax 541-888-7027  
  [www.orcca.us](http://www.orcca.us)

• **Douglas and Josephine counties**  
  **United Community Action Network**  
  280 Kenneth Ford Drive  
  Roseburg 97470  
  Phone 541-672-3421/1-800-301-8226  
  Fax 541-672-1983  
  [www.ucancap.org](http://www.ucancap.org)  
  124 N.W. D Street  
  Grants Pass 97526  
  Phone 541-956-4050  
  Fax 541-956-4056  
  [www.ucancap.org](http://www.ucancap.org)

• **Harney and Malheur counties**  
  **Community in Action**  
  17 S. Alder Street  
  Burns 97720  
  Phone 541-573-6024  
  Fax 541-573-6025  
  49 N.W. First Street, Suite 6A  
  Ontario 97914  
  Phone 541-889-1060  
  Fax 541-889-0768

• **Statewide**  
  **Oregon Human Development Corporation**  
  9600 S.W. Oak Street, Suite 565  
  Tigard 97223  
  Phone 503-245-2600  
  Fax 503-245-9602  
  [www.ohdc.org](http://www.ohdc.org)
**Oregon Department of Human Services Self-Sufficiency offices, by county**

**State Office**  
**Department of Human Services**  
500 Summer Street N.E.  
Salem 97301  
Phone 503-945-5944  
Fax 503-378-2897  
TTY 503-945-6214  

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North Clackamas...........503-731-3400  
Oregon City..................971-673-7300 |
| Clatsop |  
Astoria..........................503-325-2021 |
| Columbia | ...................... 503-397-1784 |
| Coos |  
Coquille..........................541-396-7282  
Coos Bay..........................541-888-2667 |
| Crook | ...................... 541-447-3851 |
| Curry | ...................... 541-247-5437 |
| Deschutes |  
Bend............................541-388-6010  
LaPine............................541-536-5380  
Redmond............................541-548-5547 |
| Douglas |  
Canyonville..................541-839-6901  
Roseburg..........................541-440-3301 |
| Gilliam | ...................... 541-384-2882 |
| Grant | ...................... 541-575-0309 |
| Harney |  
Burns............................541-573-5227 |
| Hood River | ...................... 541-386-3199 |
| Jackson |  
Ashland........................541-482-2041  
Medford..........................541-776-6172  
White City........................541-864-8700 |
| Jefferson |  
Madras..........................541-475-6131  
Warm Springs....................541-553-1626 |
| Josephine |  
Cave Junction.............541-592-4149  
Grants Pass....................541-474-3101 |
| Klamath | ...................... 541-883-5511 |
| Lake |  
Lakeview.......................541-947-2273  
Christmas Valley.... 541-576-2115 x 25 |
| Lane |  
Cottage Grove...............541-942-9186  
Eugene...........................541-686-7878  
Eugene, West....................541-686-7722  
Florence.........................541-997-8251 |
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<td>Springfield,</td>
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<td>Portland, Maywood</td>
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<td>Sherman</td>
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<td>Umatilla</td>
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<td>Hermiston</td>
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<td>Yamhill</td>
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Oregon health department offices, by county

State Office
Oregon Public Health Division
500 800 N.E. Oregon Street
Portland 97232

Phone 971-673-1222
TTY 971-673-0372
http://public.health.oregon.gov/Pages/Home.aspx

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<td>541-766-6835</td>
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<td>Clackamas</td>
<td>503-655-8476</td>
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<td>Clatsop</td>
<td>503-325-8500</td>
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<td>Columbia</td>
<td>503-397-4651</td>
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<tr>
<td>Coos</td>
<td>541-756-2020 (ext. 521)</td>
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<td>Crook</td>
<td>541-447-5165</td>
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<td>Curry</td>
<td>541-247-3300</td>
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<td>Deschutes</td>
<td>541-322-7400</td>
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<tr>
<td>Douglas</td>
<td>541-440-3516</td>
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<tr>
<td>Gilliam</td>
<td>1-800-559-5878</td>
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<td>Grant</td>
<td>541-575-0429</td>
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<td>Harney</td>
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<td>541-265-4163</td>
</tr>
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<td>Linn</td>
<td>541-967-3888</td>
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<td>Malheur</td>
<td>541-889-7041</td>
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<tr>
<td>Marion</td>
<td>503-588-5057</td>
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<tr>
<td>Morrow</td>
<td>1-800-559-5878</td>
</tr>
<tr>
<td>Multnomah</td>
<td>503-988-3503</td>
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<tr>
<td>Polk</td>
<td>503-623-8175</td>
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<td>Sherman</td>
<td>541-506-2601</td>
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<tr>
<td>Tillamook</td>
<td>503-842-3900</td>
</tr>
<tr>
<td>Umatilla</td>
<td>1-800-559-5878</td>
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<tr>
<td>Union</td>
<td>541-962-8829</td>
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<tr>
<td>Wallowa</td>
<td>541-426-4848</td>
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<tr>
<td>Wasco</td>
<td>541-506-2610</td>
</tr>
<tr>
<td>Washington</td>
<td>503-846-3555</td>
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<tr>
<td>Wheeler</td>
<td>541-575-0429</td>
</tr>
<tr>
<td>Yamhill</td>
<td>503-434-6740</td>
</tr>
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</table>
Community mental health programs, by county

www.oregon.gov/OHA/amh/Pages/cmh-programs.aspx

- **Baker**
  Mountain Valley Mental Health Programs
  Phone 541-523-3646

- **Benton**
  Benton County Mental Health Program
  Phone 541-766-6835

- **Clackamas**
  Clackamas County Mental Health
  Phone 503-742-5300

- **Clatsop**
  Clatsop Behavioral Healthcare
  Phone 503-325-8500

- **Columbia**
  Columbia Community Mental Health, Inc.
  Phone 503-397-5211

- **Coos**
  Coos County Mental Health Program
  Phone 541-756-2020 ext. 528

- **Crook**
  Crook County Mental Health Program
  Phone 541-447-7441

- **Curry**
  Curry County Mental Health Program
  Phone 541-247-4082

- **Deschutes**
  Adult Treatment Services
  Deschutes County Mental Health Services
  Phone 541-322-7500

- **Douglas**
  Douglas County Health and Social Services Department
  Phone 541-440-3532/1-800-234-0985

- **Gilliam**
  Mid-Columbia Center for Living
  Phone: The Dalles 541-296-5452
  Phone: Hood River 541-386-2620

- **Grant**
  Grant County Center for Human Development
  Phone 541-575-1466

- **Harney**
  Harney Counseling and Guidance Services
  Phone 541-573-8376

- **Hood River**
  Mid-Columbia Center for Living
  Phone 541-386-2620/ 541-296-5452
• Jackson  
  Jackson County Health and Human Services  
  Phone 541-776-7355

• Jefferson  
  Best Care Treatment Services  
  Phone 541-475-6575

• Josephine  
  Josephine County Mental Health Program  
  Phone 541-474-5365

• Klamath  
  Klamath Mental Health Center  
  Phone 541-882-7291/1-800-667-0839

• Lake  
  Lake County Mental Health Center  
  Phone 541-947-6021

• Lane  
  Lane County Mental Health Office  
  Phone 541-682-3608 / 541-682-4085

• Lincoln  
  Lincoln County Mental Health Program  
  Phone 541-265-4179

• Linn  
  Linn County Health Services  
  Phone 541-967-3866

• Malheur  
  Lifeways Behavioral Health  
  Phone 541-889-9167

• Marion  
  Marion County Adult Behavioral Health  
  Phone 3-588-5357 / 503-588-4949

• Morrow  
  Morrow/Wheeler County Mental Health Program  
  Phone 541-481-2911

• Multnomah  
  Multnomah County Behavioral Health Division  
  Phone 503-988-5464

• Polk  
  Polk County Mental Health  
  Phone 503-623-9289

• Sherman  
  Mid-Columbia Center for Living  
  Phone: The Dalles 541-296-5452  
  Phone: Hood River 541-386-2620

• Tillamook  
  Tillamook Family Counseling Inc.  
  Phone 503-842-8201

• Umatilla  
  Umatilla County Mental Health Program  
  Phone 541-278-6334

• Union  
  Center for Human Development for Union County  
  Phone 541-962-8800
• **Wallowa**  
  **Wallowa Valley Mental Health Center**  
  Phone 541-426-4524

• **Wasco**  
  **Mid-Columbia Center for Living**  
  Phone 541-296-5452

• **Washington**  
  **Washington County Health and Human Services**  
  Phone 503-846-8881

• **Wheeler**  
  **Morrow/Wheeler County Mental Health Program**  
  Phone 541-676-9161

• **Yamhill**  
  **Yamhill County Mental Health Program**  
  Phone 503-434-7523
Alphabetical resource list

**Adoption assistance**  
Phone 503-945-5988  
Contact your local DHS Child Welfare office (see page 44-45).

**Alcoholics Anonymous, Al-Anon and Alateen**  
[www.aa.org](http://www.aa.org);  
[www.al-anon.alateen.org](http://www.al-anon.alateen.org)

**Children of Incarcerated Parents Project**  

**Court Appointed Special Advocates (CASA)**  
Phone 503-373-1283 (Oregon director)

**Disability Rights Oregon**  
Phone 503-243-2081/1-800-452-1694;  
[www.disabilityrightsoregon.org](http://www.disabilityrightsoregon.org)

**Domestic Violence Resources and Assistance**  
Phone 1-888-235-5333 (Oregon 24-hour crisis hotline);  
Phone 1-800-799-SAFE (national 24-hour crisis hotline);  

**Early Intervention**  
Contact your local county health department, page 46.

**Employment Related Day Care**  
Contact your local DHS Self-Sufficiency office, pages 44-45.

**Family and Corrections Network**  
Phone 215-576-1110;  
[www.fcnetwork.org](http://www.fcnetwork.org)

**Family Caregiver Support Program**  
Contact your local Area Agency on Aging office, pages 36-40.

**Governor’s Advocacy Office (only for assistance with DHS programs)**  
Phone 1-800-442-5238
Head Start
Phone 1-866-763-6481;
http://eclkc.ohs.acf.hhs.gov/hslc

Healthy Kids
www.oregonhealthykids.gov/

Immunization clinics
Contact your county health department, page 46;

Lifespan Respite Care
www.oregon.gov/DHS/respite/

Narcotics Anonymous in Oregon
www.usrecovery.info/NA/Oregon.htm
(includes list of treatment centers and meetings)

Oregon Commission on Children and Families
Phone 503-373-1283;

Oregon Counseling Non-Profit
Consumer Protection
Phone 1-888-706-9933;
www.oregoncounseling.org

Oregon Department of Education
Phone 503-947-5600;
www.ode.state.or.us

Oregon Department of Human Services
www.oregon.gov/DHS

Oregon Department of Human Services Aging and People with Disabilities Program
www.oregon.gov/DHS/spd

Oregon Department of Justice
Phone 1-877-877-9392;
www.doj.state.or.us

Oregon Department of Justice Division of Child Support
Phone 503-986-6090/1-800-850-0228;
www.oregonchildsupport.gov

Oregon Food Bank
Phone 503-282-0555;
www.oregonfoodbank.org

Oregon Foster Parent Association
Phone 503-361-3906/1-888-544-3402;
www.ofpa.com

Oregon Health Plan
Phone 1-800-359-9517;

Oregon Housing and Community Services
Phone 503-986-2000;
www.ohcs.oregon.gov

Oregon Parent Training and Information Center
Phone 503-581-8156/1-888-505-2673;
www.orpti.org

Oregon Post Adoption Resource Center
Phone 1-800-764-8367;
www.orparc.org

Oregon SafeNet
Phone 1-800-SafeNet (800-723-3638)

Oregon Student Access Commission
Phone 1-800-452-8807;
www.osac.state.or.us
Oregon Telephone Assistance Program and Link Up America
Phone 503-373-7171/1-800-848-4442;
www.oregon.gov/puc/rspf/otap.shtml

Social Security
Phone 1-800-772-1213;
www.ssa.gov

Supplemental Nutrition Assistance Program (formerly Food Stamp Program)
Phone 1-800-723-3638;
www.oregon.gov/DHS/assistance/foodstamps/snap-info.shtml

The Dougy Center
Phone 1-866-775-5683;
www.dougy.org

Temporary Assistance to Needy Families (TANF)
Contact your Self-Sufficiency office, pages 44-45.

WIC Program (Women, Infants, and Children Program)
Phone 1-800-SAFENET;
http://public.health.oregon.gov/HealthyPeopleFamilies/wic/Pages/index.aspx

Women’s Crisis Service
Phone 503-399-7722/1-866-399-7722;
www.mvwcs.com
Additional online resources

**AARP’s Help for Grandparents Raising Grandchildren**

This site provides useful information for individuals raising relative children, including publications and information for support groups.

Phone 1-888-687-2277;  
[www.aarp.org/relationships/friends-family/](http://www.aarp.org/relationships/friends-family/)

**Administration for Children and Families**

You will find information on Temporary Assistance to Needy Families (TANF), Medicaid and the Energy Assistance Program, plus much more.

[www.acf.hhs.gov](http://www.acf.hhs.gov)

**A Parent’s Guide to the Teen Brain**

Ever wonder who is this kid and why is he/she behaving that way? Then this is the website for you. It has many educational videos explaining the reason behind typical teen behavior including being impulsive, rebellious, irritable, friend-centered and risk-taking. Parent Helpline is available from 7 a.m. to 3 p.m. Monday through Friday, English and Spanish.

Phone 1-800-DRUGFREE;  
[www.teenbrain.drugfree.org](http://www.teenbrain.drugfree.org)

**The Brookdale Foundation Group**

The Relatives as Parents Program (RAPP) was initiated in 1996. It encourages the creation or expansion of services for grandparents and other relatives who are parenting children whose parents are absent.

[www.brookdalefoundation.org](http://www.brookdalefoundation.org)

**The Child Welfare League of America**

The Child Welfare League of America is the nation’s oldest and largest membership-based child welfare organization.

Phone 202-638-2952;  
[www cwla.org](http://www.cwla.org)
Child Care Aware Parent Network

Child care experts present webinars about high-quality child care and other topics. They are designed specifically for busy parents and grandparents who want to learn more but have very little time. The educational webinars are free to watch and cover a variety of topics.


Children’s Defense Fund (CDF)

The Children’s Defense Fund provides a strong, effective voice for all children of America who cannot vote, lobby or speak for themselves. CDF pays particular attention to the needs of poor and minority children and those with disabilities. CDF encourages preventive investment in children. CDF began in 1973 and is a private, nonprofit organization supported by foundation and corporate grants and individual donations.

Phone 202-628-8787;  
www.childrensdefense.org

Child Welfare Information Gateway

The Child Welfare Information Gateway provides access to information and resources to help protect children and strengthen families. (This was formerly the National Clearinghouse on Child Abuse and Neglect Information and the National Adoption Information Clearinghouse.)

Phone 1-800-394-3368;  
www.childwelfare.gov

Foster Club

This is a nationwide website for children and youth who are in foster care or have “aged out” of care. It includes message boards, resources, scholarship information and training for parents caring for children with special needs or who have been abused.

www.fosterclub.com

Generations United

The organization's mission is to improve the lives of children, youth and older people through intergenerational collaboration, public policies and programs for the enduring benefit of all.

www.gu.org
Grandparenting Today

Free articles on child development, safety, setting limits, nutrition, self-care and many more topics.

http://fyi.uwex.edu/grandparenting/

Lines for Life

This free, confidential referral service assists individuals in a number of mental health crises. Lines of Life gives information about preventing substance abuse and suicide and encourages mental wellness. It includes a military helpline. Every year, the HelpLine serves thousands of Oregonians looking for a way to deal with the disease of addiction.

Phone 1-800-923-HELP; www.linesforlife.org/

National Aging Information Center

Access information about the Administration on Aging and its mission, budget and organizational structure. Also, you can learn more about the Older Americans Act, the federal legislation establishing the Administration on Aging and authorizing a range of programs that offer services and opportunities for older Americans and their caregivers.

www.aoa.gov

National Committee of Grandparents for Children’s Rights

The National Committee of Grandparents for Children’s Rights is a coalition of concerned grandparents, citizens and agencies who create one powerful voice. They network with groups throughout the nation that share goals. The organization’s mission is to advocate and lobby for substantial and urgent legislative changes that protect the rights of grandparents to secure their grandchildren’s health, happiness and well-being. They are committed to monitoring agencies that affect our grandchildren at the city, county, state and federal levels, and to protecting the rights of grandparents and the needs of grandchildren who are at risk.

1-866-659-3745; www.grandparentsforchildren.org

National Family Caregiver Alliance (FCA)

FCA is a public voice for caregivers. FCA supports programs in education, services,
research and advocacy. FCA’s mission is to sustain and support the important work of families nationwide as they care for loved ones with chronic, disabling health conditions.

[www.caregiver.org/caregiver/jsp/home.jsp](http://www.caregiver.org/caregiver/jsp/home.jsp)

**National Academy of Elder Law Attorneys (NAELA)**

You will find extensive advice for finding and hiring an elder law attorney, in addition to a NAELA member search for an attorney in your area.

[www.naela.com](http://www.naela.com)

**NetSmartz**

This website focuses on keeping kids safer on the internet. It includes information on cyber-bullying, social networking, chat rooms and cell phone safety. Separate age-appropriate web pages are included for parents, teens, tweens and kids.

[www.netsmartz.org/Parents](http://www.netsmartz.org/Parents)

**Oregon Department of Corrections Children of Incarcerated Parents Project**

This guide for caregivers of children whose parents are in prison may help you explain to children and families what it is like to have a mother, father or other close family member who is incarcerated.


The website below describes the Oregon research study designed to promote the well-being of children of incarcerated parents. It includes a booklet that helps caregivers answer children’s questions about jail and prison.


**Oregon Foster Parent Association**

Oregon Foster Parent Association provides support, advocacy and training for relative foster parents.

Phone 1-888-544-3402;
[www.ofpa.com](http://www.ofpa.com)
Oregon State University Extension Service Family and Community Development Program

This program offers effective education to help Oregon families meet the practical challenges of daily life. Programs address critical issues for families and individuals, and help Oregonians become healthy, financially secure, responsible members of society. This is accomplished by faculty, staff and volunteers who develop educational materials and conduct educational experiences in group, community and family settings.

www.extension.oregonstate.edu/fch/

Stay Smart, Don’t Start, The Truth about Drugs and Alcohol

This guide for young adults gives the straight facts on alcohol, drugs, over-the-counter and prescription medication abuse and addiction.

Educational books

by Joan Callander. Published by Wilsonville OR Book Partners, 1999

“Grandparents as Parents: A Survival Guide for Raising a Second Family”
by Sylvie de Toledo and D. Brown. Published by Guilford Press, 1995

by Marianne Takas. Published by The Brookdale Foundation, 1995

“Grandparenting with Love and Logic: Practical Solutions to Today's Grandparenting Challenges”
by Jim Fay. Published by The Love and Logic Press, Inc., 1998

Additional suggested books for grandparents and relative parents raising children:
http://extension.oregonstate.edu/fch/healthy-families/suggested-reading-list-grandparents

Suggested books for children being raised by grandparents or relative parents:
http://extension.oregonstate.edu/fch/sites/default/files/documents/childrens_reading_list_0.pdf
This document can be provided upon request in alternate formats for individuals with disabilities or in a language other than English for people with limited English skills. To request this form in another format or language, contact the APD In-Home Services Unit at 503-945-6985 or 711 for TTY.