

THE VERMONT PARENTS' HOME COMPANION



& RESOURCE DIRECTORY

R.E.A.C.T.

Take care of yourself. Take care of others. It matters.

RECOGNIZE

the signs of emotional suffering

EXPRESS

concern and offer support

ACT NOW

and talk to someone you trust - parent, teacher, coach, relative, friend, doctor

CARE

enough to follow through and follow up

TEXT 'SIGNS'

to 741-741 or call 1-800-273-8255 (TALK)*

***For substance abuse concerns, call 844-711-HELP or visit nhtreatment.org**

THE VERMONT PARENTS' HOME COMPANION



by Mary Azarian

& RESOURCE DIRECTORY

Our 31st Edition

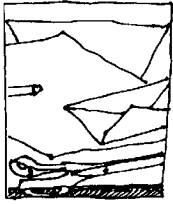
Introduction

Each child is unique and special. Deciding to become a parent means taking on the responsibility of helping that unique and special personality to achieve his fullest potential. Providing for needs such as food, clothing and shelter is only the first step in shaping your child's future. Creating a safe, loving environment that builds your child's self-esteem and makes him feel good about himself is equally important. Education on parenting and child development can make a difference for you and your child. Parents aren't expected to be perfect, but all of us want to be very good at the job.

This booklet provides some tips and a Resource Directory of support services organized by county. Included are sections on the growth and developmental stages of children, information for helping parents deal with stress, and child safety tips for when you and your child are apart.

There are several keys to surviving parenthood — one is information, another is support. This booklet is designed to provide you with some good strategies to help you along the way and the names of organizations that have support and caring to offer.

Editor's Note: To avoid the awkwardness of he/she or his/her, our editors have identified children as he in one section, and she in the next. Each implies all children, of course.



A Note from the American Academy of Pediatrics

Dear Parents,

Parenting is the single most important and challenging job that we face. We all enter our roles as parents or caretakers with expectations, hopes, dreams, and worries and for most of us with minimal experience. We want the best for our children and we want to do our best. We try to learn anyway we can, including drawing from our experience, asking advice from family, medical professionals and friends. We all reach out to whatever resources we have and for many this happens in the face of limited resources.

The role of the Pediatrician and the American Academy of Pediatrics in helping parents is central to their success. Pediatricians and Family Practitioners are trained to support, advise, offer suggestions and reassurance for this most important role, parenting. We cannot do this in a vacuum and we are lucky to have this wonderful resource, *The Parents Home Companion* to help us.

Jill Rinehart, M.D.

President of the Vermont Chapter of the American Academy of Pediatrics

"We believe in the inherent worth of all children. They are our most enduring and vulnerable legacy."— American Academy of Pediatrics

From the Board of Prevent Child Abuse Vermont

Raising a child in the 21st century is complicated, and not necessarily natural or instinctive for every parent. Families are no longer defined by a two parent, two child unit, where mom stays at home in a neighborhood with similar families. There are single parents, step-parents in blended families, grandparents, and couples all trying to be good parents. Parents are influenced by relatives, friends, co-workers and child care providers, and new parents are often inundated with well-meaning and over-whelming advice. Just as there are no perfect children, there are no perfect parents, and all of us have made mistakes during our parenting journeys. In this age of social media, memes of good and bad parenting skills are rampant, and all parents can identify with each of the situations depicted. Online influencers, are not substitutes for trusted advice when dealing with a newborn, toddler, youth, tween or teen. All children need a nurturing environment full of love, support, kindness, and respect. This book serves as a source of information and support to help you navigate the challenging, but most rewarding journey of becoming a family.

May your parenting successes be far more frequent than your challenges.

Leslie DeMars, MD
Board Secretary
Prevent Child Abuse Vermont

A Letter From The Executive Director

Dear Parents,

Balancing the demands parents have today as we care for our children is a great challenge. It is important to remember that we can create safe, nurturing environments if we also take time to nurture ourselves.

The *Vermont Parents' Home Companion and Resource Directory* is an attempt to give you up to date information and lots of support. Professionals and volunteers who have knowledge, skills and offer help for parents and children can be found in the organizations listed in the directory.

If you are struggling with questions about a child's development, safety, health or emotional well being, reach out to one or more of the caring organizations listed in the directory or phone our Parents Help Line at 1-800-CHILDREN (1-800-244-5373). One of our support staff will listen and help you identify the resources you may want to contact.

It not only takes a village to raise a child, it takes a village to support a parent as well! Vermont's network of children and family serving organizations is available and ready to support you!

For Our Children,

Linda E. Johnson, Executive Director, Prevent Child Abuse Vermont

Ensuring a Safe Sleep Environment for Your Baby

Tip 1. Place your baby on his/her back for every sleep until age 1.

Tip 2. Always place your baby to sleep on a firm surface, in a safety-approved crib, with a firm mattress and fitted sheet.

Tip 3. Do not fall asleep in bed or on a couch or recliner with your baby. The baby can sleep in your bedroom in a crib, but should not sleep in your bed. You may bring your baby into bed to feed or comfort her, but she needs to be returned to her crib for sleep.

Tip 4. Make sure there are no stuffed animals, loose bedding, or soft objects in the crib. Do not use crib bumpers even though these are for sale in many baby stores.

Tip 5. You should not smoke during your pregnancy or after the baby is born. There should be no smoking in the home, car, or any other area where the baby will be exposed to tobacco smoke. If you need help quitting, talk to your doctor, call 1-800-QUIT-NOW, or go to <http://802quits.org/>

Tip 6. Do not use alcohol or illicit drugs during pregnancy. After delivery, use caution with alcohol and other drugs that may impair your ability to safely care for your baby.

Tip 7. Once breastfeeding has been well established, try a pacifier at nap and bedtime to calm your baby.

Tip 8. Avoid overheating, over-bundling, and any loose clothing (bibs, hats, scarves). Place your baby in footed pajamas with a light cover tucked at the bottom and sides of crib, coming no higher than armpit level.

Tip 9. Never use devices that claim to reduce the risk of Sudden Infant Death Syndrome (SIDS.) For example: wedges, positioners, or special sleep surfaces making a claim to reduce the risk of SIDS.

Tip 10. Tell others who care for your baby about safe sleep. You have every right to demand that they follow these rules when caring for your baby.

These tips were developed by the Vermont Department of Health.

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This publication was inspired by *Children, Virginia’s Greatest Resource, Survival Tips for Parents and Kids* and printed with permission from the Virginia Chapter, National Committee to Prevent Child Abuse, Parents Anonymous of Virginia, Inc., and the Virginia Department of Social Services. *Happy Healthy Children*, published by the New Hampshire Task Force on Child Abuse and Neglect as well as numerous authors, organizations and publishing companies as credited, also inspired this publication.

Cover illustration: Mary Azarian.
Printed by Springfield Printing.



Fostering the safety, healthy development, well-being and self-sufficiency of Vermonters.



Here are some of the ways we can help:

Child Care/Development

Call 1-800-649-2642 to:

- Find a child care provider
- Find out if you're eligible for help with child care costs
- Talk to someone about any concerns with your child's development

Child Protection

Call 1-800-649-5285 to:

- Report suspected child abuse or neglect (*24 hours a day, 7 days a week*)

Child Support

Call 1-800-786-3214 for help to:

- Establish, modify or enforce a child support order
- Locate a missing parent
- Establish parentage

Economic Benefits

Go to dcf.vermont.gov/benefits or call 1-800-479-6151 to:

- Learn about programs that can help you meet your basic needs (e.g., food, energy and fuel)
- Find out how to apply for programs you may qualify for

Foster Care

Go to fostercare.vt.gov to learn about:

- The need for foster families in Vermont
- How to become licensed to provide foster care
- The support available to foster families
- Other ways you could help

dcf.vermont.gov



It helps to know some of the key things to expect from children as they grow and develop. Here are a few examples.

Newborn Infants

Tiny newborns need to feel safe. Before birth they were in a warm, pleasant place where they were held securely all of the time.

Coming into the bright, noisy world is quite a big change. Food, burps, and baths are basics, but the extra touches count too as your baby learns to cope with the world.

- Babies are awkward. Their arms and legs jump around and scare them. Wrapping them snugly in a small blanket and talking in affectionate tones makes them feel more secure.
- Sucking on something helps babies relax even when their tummies are full.
- New babies cannot be spoiled; they can only be made to feel safe by meeting their needs most of the time.

Self-Care for Parents

Parents need to find time for rest. Baby's sleeping schedule can ruin everyone else's. Exhausted parents can lose tempers quickly. So nap when baby does, and don't worry about all of the housework.

3-6 Month-old Infants

By this time a baby has gained some control of his body. His head moves when he wants it to, and his arms and legs don't scare him as much. He listens, watches, and touches. He smiles when he's pleased and cries when he isn't. He starts to know familiar faces and strangers may scare him. Teething may begin near the end of this period.

- If your baby is having trouble with teething, comfort and soothe him with a cool teething toy and rub on pain medicine designed for that purpose. Ask your doctor or pharmacist for suggestions.
- Babies this age don't know right from wrong and aren't ready to learn the difference. Discipline is not appropriate at this age.

Self-Care for Parents

Now that baby is settling into a routine, find special time for yourself. A portion of naptime could be used to do something YOU like.

Self-care helps you provide better baby care.

6-18 Month-old Infants

This is a period of rapid development. Most babies learn to sit, crawl, stand, walk, and even talk during this stage. They begin to

develop a sense of humor, and they'll laugh when amused. One of the things they enjoy most is being with other people, but strangers may continue to frighten them.

- Let them follow you as you go through your daily routine.
- Let them feed themselves cooked vegetables and dry cereal from a high chair tray. It won't be neat, but it teaches coordination. It also keeps them busy for long stretches of time!
- Games like peek-a-boo and pat-a-cake can be learned, as can pointing to nose, eyes, mouth, and ears when asked.
- Books with cardboard pages and bright pictures capture a baby's attention, especially if someone looks at the books with the baby.
- Babies like to watch themselves in a mirror and putting the high chair or playpen within sight of one makes them happy.
- "Not for babies" is a phrase they will learn to recognize, but it's important to divert their attention from the forbidden object to something that's safe to touch. Babies at this stage are too young to understand so they have to be reminded again and again gently.

Self-Care for Parents

Start finding a sitter whom you trust to give you some time away from baby. Spending time with other adults is healthy.

Baby Surprises

As you probably have already discovered, no one has given your baby instructions on how to behave. Babies just act upon their needs and feelings at the moment.

If you suspect that a problem your infant is having is a sign of something serious, or if you just don't understand his behavior, do not hesitate to check with your pediatrician or to call one of the organizations listed in the Resource Directory in the back of this book.

Books

Infants and Mothers-Differences in Development,
by Dr. T. Berry Brazelton

Preparing for Parenthood-Understanding Your Feelings about Pregnancy, Childhood & Your Baby, by Dr. Lee Salk

You and Your Child: Birth to 5, by Penelope Leach

Baby & Childcare, by Dr. Benjamin Spock



Parenting – it's one big adventure.



**Pick up a copy of
award-winning Kids VT,**

Vermont's free monthly parenting magazine, at 600+ locations, or find us online between monthly issues

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When you have a baby, no matter how much planning you may have done, everything in your life seems to change: sleeping habits, sexuality, hormones, free time, and self image are among some of the changes. There are also 2 a.m. feedings, dirty diapers, and a little person who is completely dependent on you. Sometimes these changes may seem overwhelming. Caring for yourself is a priority in providing loving care for your baby.

Here are some of the ways to reduce the stress:

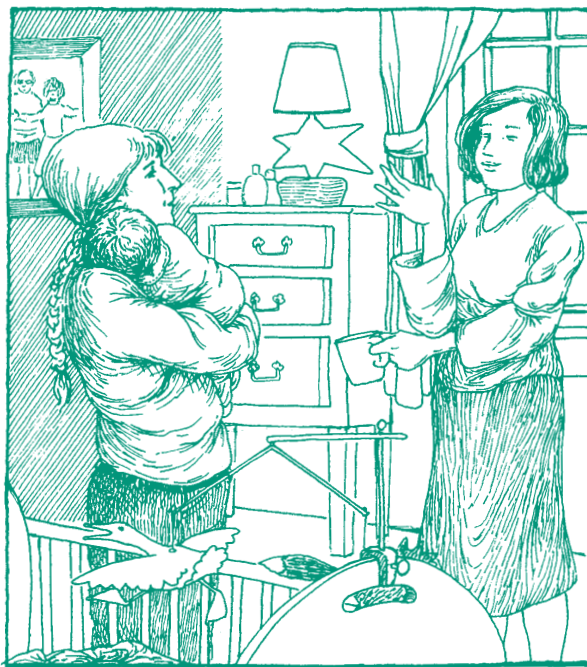
- Ask questions and express any concerns you have to your doctor, nurse, or midwife about the birth, your baby or yourself.
- Attend childbirth and breast feeding classes with a friend or partner and plan to have your “coach” with you during the birth.
- Have a few people on hand who will provide emotional support, and who will take care of your baby for a few hours so that you can nurture yourself.
- Sleep and rest whenever possible.
- Take a break and take time to do something you really enjoy: exercising, reading, cooking or talking on the phone.

Sometimes, despite the best planning, it can seem as though everything is going wrong. You can't get enough sleep; you can't stop crying; and you just feel like you can't cope. Postpartum (after birth) depression or the “baby blues” are not uncommon. There are resources and information to help you through this stressful time. Consult your obstetrician, midwife, nurse, pediatrician or a mental health counselor if you are concerned about feelings of depression, confusion or anxiety after the baby is born. Remember that nurturing your baby starts with nurturing yourself.

Books

After the Baby's Birth: A Woman's Way to Wellness. A Complete Guide for the Postpartum Woman, by Robin Lim

The New Mother Syndrome: Coping with Postpartum Stress and Depression, by Carol Dix



Life After Childbirth, Make it Workable for You: A practical guide for creating your own postpartum care plan. Available by calling: Jan Campbell, (802) 863-7200 at the Vermont Dept. of Health. By Sue Jaynes, Mary King, Amy Ludwin, Pam Piper, and Pasha Rivers McMahon

Operating Instructions, by Anne Lamott

Postpartum Survival Guide, by Ann Dunnewald and Diane Sanford

The Mother Dance: How Children Change Your Life, by Harriet Lerner

This Isn't What I Expected, by Karen Kleinman and Valerie Raskin

Resources

Postpartum Support International: Offers emotional support, information and resources. (805) 967-7636

PSI Warmline: 1-800-944-4773

Depression After Delivery: Offers information packets for new parents, support and resources. (215) 295-3994 or (800) 944-4773

Prevent Child Abuse Vermont: Offers self-help groups, parents Help Line, the Nurturing Parenting Program for parents and children. (800) 244-5373

La Leche League: (802) 879-3000

Visiting Nurse Association of Vermont: Provides prenatal and postpartum evaluation and support, home visits, parenting education, family room, parent groups and playgroups. Contact 802-229-0579 to find your local agency.

Babysitting is Important Business... Safe Sitter can teach you the skills to do it well!



- Learn how injuries happen so you can prevent them and how serious a problem is if someone is injured
- How to get help if you need it
- How to keep yourself safe when babysitting
- How to rescue a choking child or infant
- How to prevent problem behavior

To Register for Upcoming Classes,
Visit www.RRMC.org or call 802.772.2400



Classes for 11-13 year old boys & girls are held at 435 West Street, Rutland, VT

Pre-registration is required. Fee is \$60. Scholarships are available based on need.

 **Community Education**
A Department of Rutland Regional Medical Center

It often takes a little time for a parent to develop a relationship with a new baby. A baby may seem like a stranger at first. Some good ways to bond with your baby are to hold your baby close to you, cuddle, kiss and look at your baby's face. Use a soothing voice and handle your baby gently and your baby will usually respond happily.

Infant Feeding

How you choose to feed your infant is a personal choice; we suggest speaking with your maternal care provider and pediatrician about what is best for you and your baby. Feeding time is a great time to bond with your baby. Whether you breast or bottle feed, you can bond with your baby by talking to your baby, making skin-to-skin contact, and by holding your baby close. When possible, set up a special and preferably quiet place where you can relax and enjoy this special opportunity to bond with your baby.

The American Academy of Pediatrics suggests exclusive breastfeeding for the first 6 months and continued breastfeeding with solids for 1 year or longer as mutually desired by parent and infant. Your pediatrician can help you decide when to introduce solid foods and the best foods with which to start.

The best benefit of breastfeeding is that your breast milk is the perfect food for your baby; your body makes milk that contains just the right levels of nutrients and antibodies that your baby needs. Babies often do well with “on-demand” nursing and tend to want to nurse every 2- 4 hours, usually nursing for about 20 minutes. If you are worried that your baby is not getting enough to eat or that your body is not producing enough milk, call your doctor or midwife; There are many professionals that want to help you succeed in breastfeeding. If you want extra help around nursing, they can refer you to a lactation consultant or visiting nurse at low or no cost.

Books

Academy of Pediatrics New Mothers Guide to Breastfeeding by American Academy of Pediatrics, Joan Younger Meek M.D., Winnie Yu

The Nursing Mother's Companion, by Kathleen Huggins

Nursing Your Baby, by Karen Pryor

Bottle-Feeding

Tips for Safe Bottle-feeding:

- If you are using formula, always prepare according to package instructions.
- Never heat the formula or milk in the microwave. You can heat the bottle to room temperature by placing it in a bowl of warm water.
- Discard any unused milk/formula after each feeding. Do not let a bottle sit for over an hour and do not reheat milk.
- In the beginning, as a new born, your baby may need to be fed every 2 – 3 hours- about 6-8 feedings a day. As babies grow, feedings will be fewer times a day with more ounces taken at each feeding.
- Hold the bottle at an angle when feeding and make sure to burp your baby a couple times during the feeding; it is not safe to prop the bottle as it can cause choking and increases ear infections.
- Avoid putting your baby to bed with a bottle; this can cause tooth decay and is a choking hazard. Wipe any milk from the baby's mouth before lying your baby down to sleep. Try using a pacifier if your baby needs soothing.

Resources

La Leche League (see local contact numbers in our resource directory) <http://lillmarivt.org/>

Good Beginnings of Central VT: <http://www.goodbeginnings-centralvt.org/>

Good Beginnings of the Upper Valley: <http://www.gbuvt.org/>

Strong Families Vermont: www.healthvermont.gov, or 802-863-7200

*Vermont Chapter of the American Academy of Pediatrics and
Vini Kate Devine Emery
Prevent Child Abuse Vermont*



VERMONT

**AGENCY OF HUMAN SERVICES
DEPARTMENT FOR CHILDREN & FAMILIES**

Safe Havens for Babies

Don't abandon your baby. There's a better way.

Vermont's Baby Safe Haven Law offers you safe places you can give up your baby – anonymously and legally.

Hand your baby (*up to 30 days old*) to an employee or volunteer at any:

- Adoption agency
- Police station
- Fire station
- Place of worship
- Health care facility



dcf.vermont.gov/prevention • Call 911 in an emergency



VERMONT

**DEPARTMENT FOR CHILDREN & FAMILIES
FAMILY SERVICES DIVISION**



Child protection is everyone's responsibility

If you suspect a child is being (or is at risk of being) abused or neglected, stand up, step in and act!

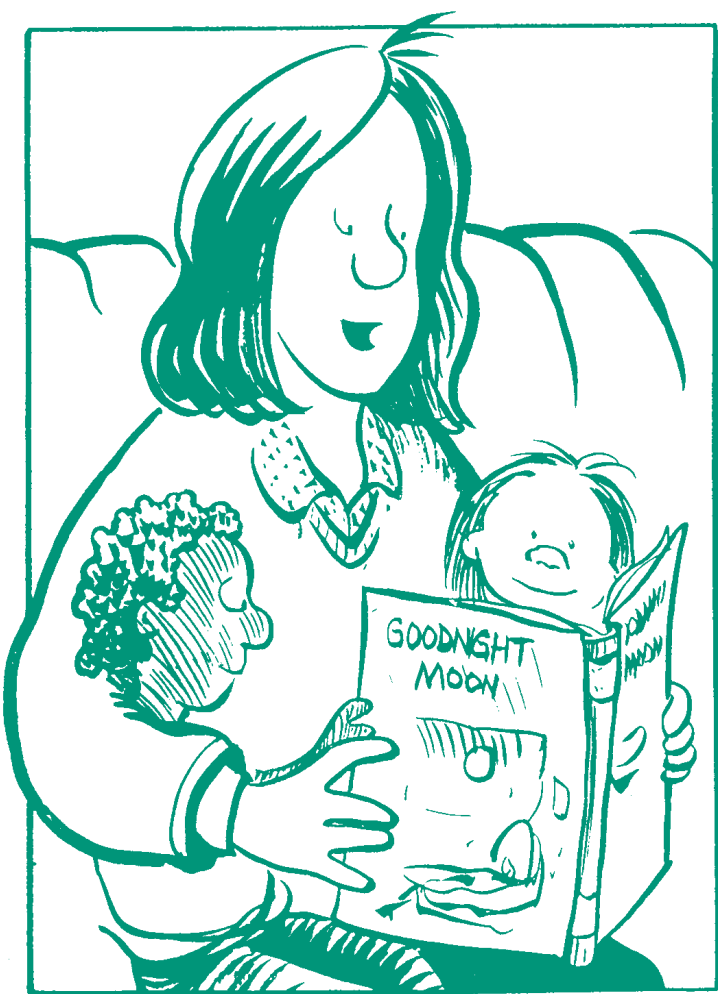
Call our toll-free Child Protection Line —
24 hours a day, 7 days a week.

1-800-649-5285

dcf.vermont.gov/prevention

To many people, adoption is a process — a long, complicated maze of applications home study, paperwork and waiting. But adoption really just begins when a baby or child joins a family. It is a life-long journey of child and parent together making sense of a unique situation.

Adoption is both the same as and different from raising a birth child. Parents who adopt need all the help, information and support that every parent needs. The basic requirements for raising adopted children are the same as for parenting a birth child — love, patience, trust and understanding.



Parents need information about what kinds of questions their child will be asking at each developmental stage. Many parents find they need some support along the way either from other adoptive parents or from professionals trained in adoption.

A parent's own upbringing may or may not prepare him for adoption. Sometimes friends, relatives or professionals may not be familiar with specific adoption concerns.

When questions arise, there are resources to help families through the ages and stages of adoption. They are the following:

Adoption Agencies

The licensed agencies that work with children and families for adoptions are good sources of current information on what parents and children need to know and talk about.

Parent Groups

Check with adoption agencies, the newspaper, Circle of Parents, and 211 for support groups and/or workshops near you.

Books

The following are recent books that discuss the kinds of questions children ask and parents need to answer about adoption. They are a must for adoptive parents today!

Making Sense of Adoption, by Lois Ruskai Melina, New York: Harper & Row, 1989

Raising Adopted Children, by Lois Ruskai Melina, New York: Harper & Row, 1986

How to Raise An Adopted Child, by Judith Schaffer and Christina Lindstrom, New York: Crown Publishers, 1989

Head Start

A GOOD PLACE FOR PARENTS AND CHILDREN TO GROW TOGETHER



Head Start is a child and family development program for pregnant women and families with children ages birth to 5 years old.



HEAD START WORKS!



Capstone Community Action Head Start is now accepting applications.

For information or an application contact us at:

1-800-639-1053 or 1-802-477-5153

Children with disabilities are always welcome!

Capstone Head Start helps parents problem-solve transportation needs.



advanced care with a family-centered approach

Combining advanced techniques in pediatric care with a family-centered, child-friendly approach, The University of Vermont Children's Hospital is a comprehensive children's hospital within a hospital offering a full range of services.

**QUESTIONS?
CALL (802) 847-KIDS**



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We proudly donate 10% of annual earnings to local community organizations. Simply by banking with us, you are helping make Vermont a better place to live and work.

There's no better time than now.

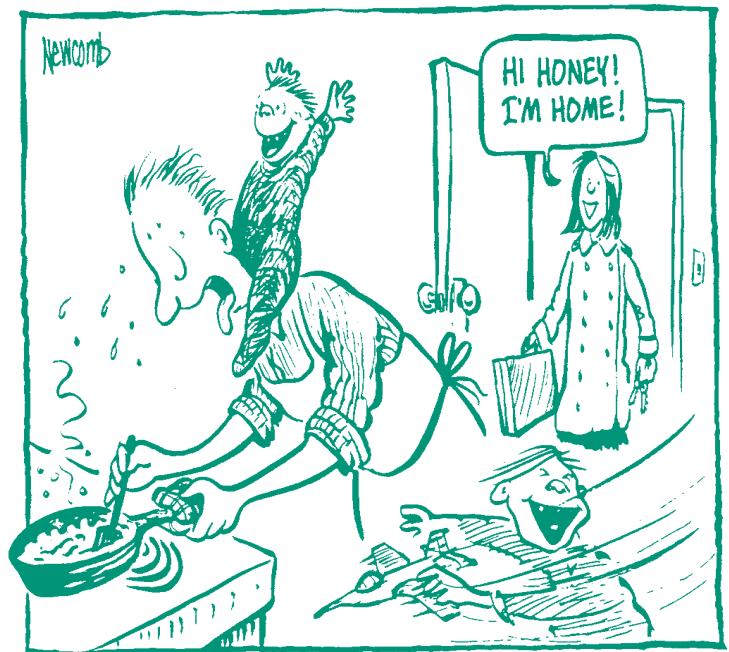


NSBVT.COM
(800) NSB-CASH



Fathers, you have a special place in your children's lives. Children whose fathers take an active part in their daily lives tend to be more well-adjusted and better equipped for success. It's not easy being a father, but don't think that you aren't as important as the mother. Your roles may not always be the same, but your interest in your children can make a significant difference. Be proud of your responsibilities and your efforts. Children don't need perfect fathers; they need caring and involved fathers.

- Give your children hugs and kisses often; children need physical comfort and contact from their fathers.
- Tell them how much they mean to you, "You're really important to me."
- Praise their efforts, especially if they don't succeed; teach them the importance of doing their best.
- Give your children rules and make sure your rules are clear to them; don't say "maybe" when you mean "no."
- Explain your rules; it's important that children understand why they need to follow those rules.
- Be consistent with your rules; children get confused when you seem to change your mind without any reason.
- Use effective discipline to help children develop self-control; set limits and encourage children to feel good about themselves.
- Look directly at your children when they talk to you.
- Gain your children's trust by listening to them when they come to you with a problem. Children will welcome your guidance, but are not likely to listen to lectures.
- Be honest with your children; admit your mistakes and teach your children the importance of taking responsibility and making amends.
- Tell your children that they can come to you with any questions, otherwise they may receive inappropriate answers from other people.
- Remember that you are your children's role model; they are looking to you to learn how a responsible and mature adult acts.



- Do household chores with your children; make them feel good about helping you and teach them that fathers also share household duties.
- Encourage your children to think for themselves; guide and help them with their decision making process.

Provided by Prevent Child Abuse America

Need Help Paying for Child Care?

The Vermont Child Care Financial Assistance Program can help!

We help eligible families pay part of their child care cost for children from 6 weeks up to 13 years

For more information about eligibility and to apply online visit:
<http://dcf.vermont.gov/cdd>

For information about your local eligibility agency or to request a paper application call us at 1-800-649-2642



Be aware

Children exposed to their parents' cigarette smoke can have higher rates of ear infections, respiratory illness, and asthma attacks.

A black and white photograph of a woman with long dark hair, wearing a light-colored top, sitting and holding a young child. The child is wearing a striped shirt and a light-colored scarf. The woman has her hand on the child's forehead, appearing to comfort or soothe them.

 North Country Hospital
Where caring runs deep.
www.northcountryhospital.org

SIDS, or Sudden Infant Death Syndrome, is very frightening and confusing for parents.

Sudden infant death syndrome (SIDS) is the unexpected, sudden death of any infant or child under one year of age in which an alternative cause of death cannot be found on autopsy. Since the “Back to Sleep” campaign was started in 1992, the rates of SIDS in the United States have steadily decreased from 6,000 infant deaths/year to the current rate of 2,236 deaths/year. While this is a huge improvement, SIDS is still the major cause of death in infants one month to one year of age.

The exact cause of SIDS remains a mystery despite massive amounts of research. There probably is not just one cause but several different factors which can result in SIDS. Some of these factors might include problems with sleep arousal or an inability to sense a build up of carbon dioxide in the blood. Almost all SIDS deaths occur without any signs or warnings. The is recent research

suggesting serotonin may be a possible link to SIDS. The peak incidence for SIDS is between 2 and 4 months of age and 90% of deaths occur by 6 months of age. There is an increase in incidence in winter months with January being the peak month.

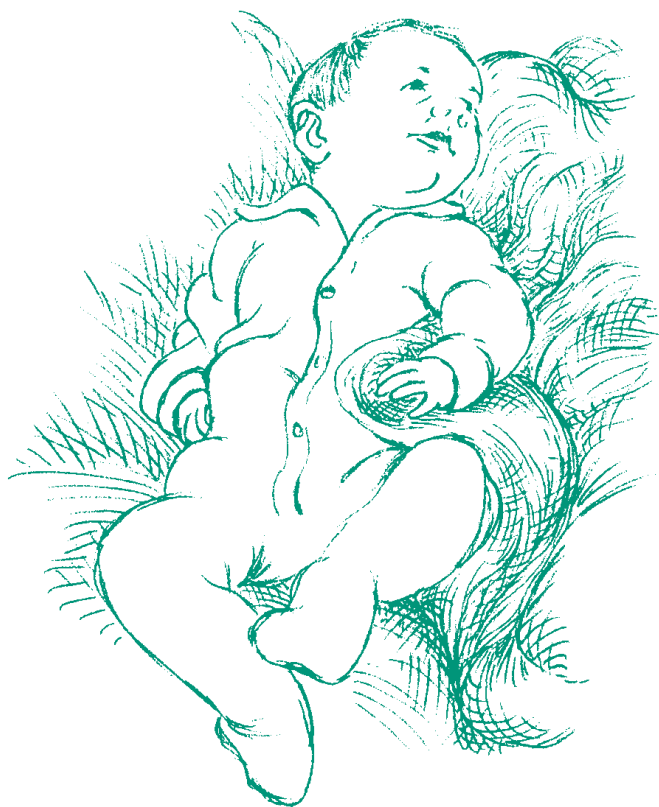
Since 1992 we have been recommending that infants be placed to sleep on their back. This has made a huge impact in the incidence of SIDS. Interestingly, when the deaths of infants who die of SIDS are investigated, it turns out that the majority of these infants were co-sleeping; that means in bed with one or both parents. The link between co-sleeping and SIDS is not yet clear and more data is being collected. In the meantime, it is recommended that infants sleep in a separate bed or bassinet.

So, what can a parent do to minimize the risk of SIDS? Here are some simple recommendations you can follow:

1. Put your baby to sleep on her back. (The side position is NOT as protective as back position.)
2. Do not allow your baby to sleep in bed with you. If you are breast-feeding frequently, put the baby in a bassinet or co-sleeper close by when she is done nursing.
3. Keep your baby in a smoke free environment.
4. Breast-feed your baby if this is at all possible. (Breast-feeding has not been shown to decrease the incidence of SIDS but it does help prevent some upper respiratory infections, which may influence the development of SIDS.)
5. Do not lay your baby on pillows, beanbags or sheep skin mattresses; a firm surface is best.
6. New evidence suggests that sucking a pacifier may reduce the risk of SIDS.

If you have questions or concerns about SIDS and how best to prevent it, talk with your baby’s doctor or a public health nurse.

By Karyn M. Patno, MD.



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Shaken Baby Syndrome (SBS), (Abusive Head Trauma) is the name given to physical child abuse that occurs when an infant or small child is violently shaken. The shaking may only last a few seconds, but the effects can be deadly.

What triggers shaking?

Inconsolable crying is the number one reason given for shaking a baby. Usually, those who have little or no knowledge on how to safely care for a crying infant or young child are most at risk. The caregiver becomes frustrated, loses control, and violently shakes the child to get him to stop crying. They just want the baby to stop crying!

Why are babies vulnerable to shaking?

It is not unusual for babies to cry for two to three hours a day. Some cry for longer periods for no obvious reason. Babies communicate by crying.

Babies also have very large heads, soft brains, and weak neck muscles. Their neck muscles can't support their heads, and when shaken, the head whips back and forth, causing the brain to bounce off the skull. This results in bruising, bleeding, and swelling.

What are the long term effects?

- Severe brain damage
- Learning disabilities
- Blindness
- Paralysis
- Hearing loss
- Speech problems
- Death

Tips For Quieting A Crying Baby

- Wrap the baby snugly in a warm, soft blanket and gently tap or rub the baby's back while the baby is lying on its side or tummy on your lap.
- Talk, sing, play music, turn on the vacuum or a static TV channel, or play with a noisy toy in front of the baby.
- Rock, dance or try a baby swing. Take the baby outside for some fresh air, a ride in the stroller or in the car in the car seat.
- Try feeding the baby, offer a bottle, breast, or try a pacifier.
- Give the baby a warm bath.
- Stay calm and speak softly to your baby.

How can I keep my child safe?

Remember no matter how angry, tired or frustrated you become NEVER SHAKE YOUR BABY. In a few seconds your life and child's life could change forever.

- Never leave your child with someone who may be stressed.
- Make sure your child's caregiver knows never to shake a baby.
- Know your own limitations.
- Seek help.
- Always play gently with your baby.
- Have a plan before you can no longer tolerate your child's crying.

Sometimes these tips do not work.

Remember:

- It is okay to let a baby cry. No baby has ever died from crying.
- It is never okay to shake or throw a baby — serious injury or death can occur.





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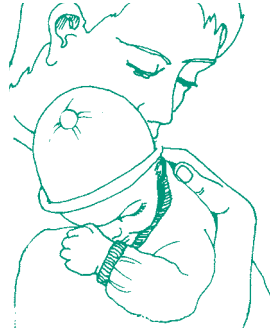
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imreadytohelp.vt.gov



A preemie is a baby born before the 37th week of pregnancy. Many mothers and fathers blame themselves for the premature birth, or they may feel disappointed or anxious. If you feel this way, talking to your doctor, nurse, or other parents of premature infants is helpful.

Preemies are tiny, usually weighing less than five pounds. Because they lack fat tissue, they appear long, and their skin is often so thin that sometimes you can see the blood vessels and ribs beneath it. Preemies may not have eyebrows or hair, and because their nervous systems and muscles are not fully developed, they don't have control of their movements.



Preemies usually stay in the hospital until they have gained weight, have improved their ability to suck, and don't require any medical equipment. While in the hospital your baby needs your love and support. Visit and talk with your baby as often as you can. Ask questions about the baby and ask if you can help care for the baby.

When your preemie comes home, caring for him may take a lot of your time. The baby usually needs to be fed often, and he may take longer to feed. Because preemies have problems maintain-

ing body temperature, they need to be kept warm. Holding your infant close to you, covered in a blanket, will not only keep him warm but will make him feel secure and loved. Keeping your baby away from too many visitors and from people who are sick will protect him from getting sick.

Try to relax and enjoy your baby. Don't be afraid to handle him. A preemie is not too delicate to be held, cuddled, and loved like any other baby.

Chances are your infant's needs will be well met, but it's important to remember that you need support and nurturing during the early months of your infant's life too.

For support groups, helpful home visitors and/or a warm voice over the phone, ask your hospital social worker for area resources: call the Vermont Family Network, 211, the Parents Help Line, or your Parent/Child Center. Their numbers, as well as other programs, can be found in the back of this book.

Doctors Care

Lewis First, MD	UVM Children's Hospital.	872-1440
Megan Gunn, MD, SVMC Pediatrics	Bennington.	447-3930
Joe Kropf, DMD, Family Dentsisry	Burlington.	863-5552
Chuck Seleen, Joyce Burmore, Vermont Dental Care.	Winooski.	655-2385
Tracey Maurer, MD, UVM Medical Center, OB/GYN.	Colchester.	847-5800
Community Health Centers of the Rutland Region.	Rutland and Bennington.	773-9131
Dartmouth Hitchcock Medical Center.	Hanover, NH.	603-650-5000
Gifford Medical Center	Randolph.	728-7000
North Country Hospital	Newport.	334.7331
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Sleeping, or sharing a bed with your infant, could put your child in harm's way. Many families practice cosleeping, but according to the U.S. Consumer Product Safety Commission (CPSC) placing babies to sleep in adult beds puts them at risk of suffocation or strangulation. In fact, a CPSC study found that an average of 64 babies under the age of two die each year after being placed to sleep in adult beds, including waterbeds and daybeds. Babies can: suffocate when an adult rolls on top of or against them; become entrapped or wedged between the mattress or another object; suffocate when they are lying face down on an adult mattress or soft bedding; strangle when their head becomes trapped in rails or openings on the bed. If you do choose to share your bed with your baby, take precautions!

- Never sleep with your baby if you are under the influence of alcohol or any drug, because that could reduce your awareness of the baby.
- Don't let other children, particularly toddlers, sleep with your infant.
- Always place your baby on his back to sleep to reduce the risk of SIDS (Sudden Infant Death Syndrome)

- Always leave your child's head uncovered while sleeping.
- Make sure your headboard and footboard don't have openings or cutouts that could trap your baby's head.
- Make sure your mattress fits snugly in the bed frame so that your baby won't become trapped in between the frame and the mattress.
- Don't place a baby to sleep in an adult bed alone.
- Don't use pillows, comforters, quilts, and other soft or plush items on the bed.
- Don't place your bed near draperies or blinds where your child could be strangled by cords. To keep your little one close by, without putting your baby in your bed, try placing a bassinet or crib next to your bed. This can help you maintain that desired closeness, which can be especially important if you're breastfeeding. The AAP (American Academy of Pediatrics) says that having an infant sleep in a separate crib in the same room as the mother reduces the risk of SIDS.

Source: CPSC and KidsHealth (www.kidshealth.org)



What You Need to Know About

Circle of Parents[®]

Circle of Parents is a self-help support group for parents. Circle of Parents offers parents the opportunity to explore parenting in a safe and confidential weekly group. Parents come together and share their experiences — challenges and successes. Parents learn they are not alone and they can change the way they raise their children.

Circle of Parents is co-led by professionally trained volunteers and a parent leader, who is also a group member. There are no fees or dues to attend.

While parents are meeting, children are cared for by professionally trained volunteers. Children have snacks, play games, are read to, and have fun!



Circle of Parents allows parents to:

- ♥ Learn new parenting ideas
- ♥ Replace old, harmful parenting ways with new, healthy ways
- ♥ Give support to other parents
- ♥ Receive support from other parents
- ♥ Have time with other adults while children are cared for in a safe, nurturing environment
- ♥ Build friendships



1-800-CHILDREN

www.pcavt.org

Primary care is the regular health care that your child receives from a doctor or nurse practitioner. A “well child” check-up is a regular visit to a doctor or nurse practitioner, when your child is healthy. During a “well child” visit, children are checked for vision, hearing, and health growth and development. Immunizations are also given at these visits.

Immunizing children on schedule is the best protection against dangerous childhood diseases. Along with regular checkups at the doctor’s office, immunizations are the best way to keep children healthy.

In Vermont it is recommended that all children have check-ups within the first week; at 1, 2, 4, 6, 9, 12, 15, and 18 months; at ages 2, 3, 4, 5, 6, 8, and 10 years; and annually up to age 20 years. Your doctor may vary this schedule slightly. Immunizations are generally given following the schedule shown below. Check with your doctor for updates on this schedule.

If, for some reason, your child cannot receive an immunization as part of the check-up, it is important that you check with your doctor about when to bring your child back in to receive it. A child never needs to restart a vaccine series because scheduled doses were missed, but it is important to get the missing doses.

Dr. Dynasaur and Medicaid pay for these visits and immunizations for eligible families. A family of four can earn up to \$60,156 a year and still qualify.

For more information or assistance, call **1-800-464-4343**, or your local Vermont Department of Health office.

Vermont Recommended Child & Teen Vaccination Schedule

8/2017

Vaccine	Birth	2 Months	4 Months	6 Months	12–15 Months	15–18 Months	Required		
							Prior to Kindergarten 4–6 Years	Prior to 7th Grade 11–12 Years	13–18 Years
<i>Haemophilus influenzae</i> type b (Hib)		Hib	Hib	Hib	Hib				
Pneumococcal (PCV)		PCV	PCV	PCV	PCV				
Hepatitis B (HepB)	HepB	HepB		HepB					
Diphtheria, Tetanus, Pertussis (DTaP)		DTaP	DTaP	DTaP		DTaP			
Poliovirus (Polio) (IPV)		IPV	IPV	IPV		IPV			
Measles, Mumps, Rubella (MMR)					MMR	MMR			
Varicella (Chicken pox) ¹					Varicella	Varicella			
Tetanus, Diphtheria, Pertussis (Tdap)							Tdap		
Meningococcal ACWY (MCV4) ²							MCV4		MCV4 second dose, after age 16
Meningococcal B (MenB) ³									MenB 2 doses, ages 16-18
Hepatitis A (HepA)					HepA	HepA			
Rotavirus (RV)		RV	RV						
Human Papillomavirus (HPV)								HPV 2 or 3 doses ⁴	
Influenza				Influenza			Every flu season		

Required for child care

Required for school

**

Recommended

Children should be up-to-date by age 2

¹ Vaccine or documentation of history of disease.
² Recommended for all. Required only for residential students entering 7th grade and newly enrolled in 8-12.
³ Recommendation for MenB vaccine is based on clinical discretion. Beginning at age 16, two doses at least one month apart.
⁴ If you start the series before age 15, only 2 doses are recommended. If you start after age 15 or are immunocompromised, then 3 doses are recommended.

Vermont’s immunization schedule is compatible with the current recommendations of the Centers for Disease Control and Prevention (CDC).

For more information, contact the Vermont Department of Health Immunization Program:
 Phone: 802-863-7638 toll free (in VT): 800-640-4374 website: HealthVermont.gov



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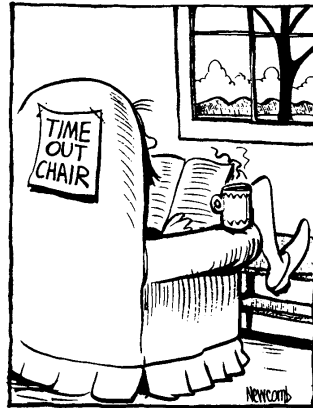

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Being a parent is the most demanding job in the world, yet most of us train “on the job.” When things are going well, savor the moment. Give your child hugs and plenty of praise. Be generous with pats on the back for yourself and the other adults in your life, and don’t be afraid to admit mistakes — your child will respect your honesty.

Sometimes things will not go well. You may feel stressed, angry and overwhelmed. The way you deal with these times is important. Even young children can be helped to understand how you’re feeling if you tell them. Tension relievers can help. Try some of these:

- Count to ten. Go to another room for a few minutes. If your child is an infant or toddler, put him in a safe place first.
- Lie on the couch, put your feet up, and place a cool cloth on your eyes or forehead. Take a couple of deep breaths and think of a peaceful scene. Lie there for at least five minutes.
- Call someone who cares about you and understands what you’re going through. Tell what’s bothering you and get the support you need.
- If your children take naps, use that quiet time to pamper yourself. Take a bubble bath, read a book or listen to soothing music with your eyes closed.
- Change your daily routine. Take a walk, visit a friend, watch a special program on television.
- Do something physical. Physical activity is good for you and your children. It lets off steam, and often it’s free.



- Do you feel as if your children misbehave on purpose?
- Are you frustrated because your children don’t listen to you?
- Do you feel as if you pick on a particular child?
- Do you feel that your children rarely do what you expect of them?
- Do you feel as if you can’t talk to your kids?

It’s not always easy to reach out for help, but when you do you’ll find many caring people who want to hear from you, people who will listen and provide assistance.

What Help Is Available?

Throughout Vermont there are services that offer support for families. The staff of these agencies are trained and experienced in the kinds of problems families share, and nothing you tell them will be a surprise. Painful relationships happen in families of all social and economic groups, but they can be helped. If the frustration level of you or someone

in your family is reaching a danger level, contact one or more agencies listed below. Help is available and often it’s free.

See your telephone directory or the resource directory at the back of this booklet for the following:

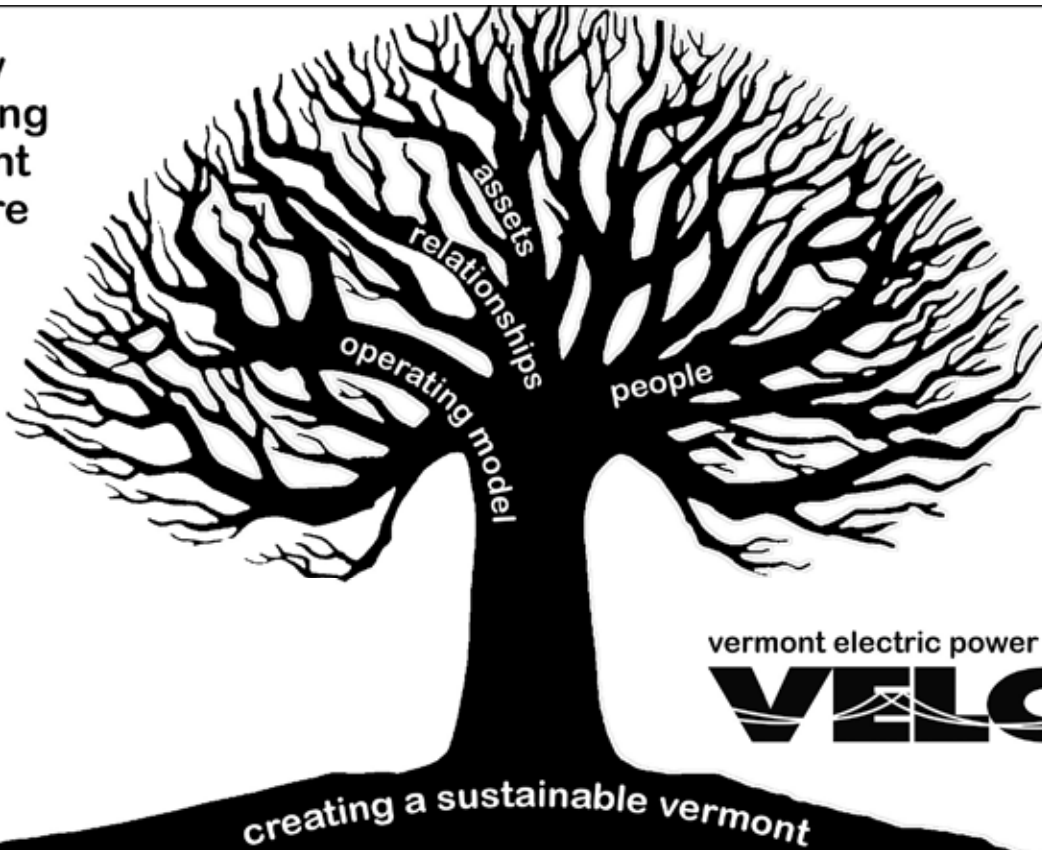
Knowing When to Ask for Help

These tension relievers aren’t enough for many people. They work hard to control their emotions, but sometimes they feel they can’t stand the frustration any longer. This doesn’t make them bad parents. The fact that they ask for help is a sign of good sense. If you can answer, “Yes” to any of these questions, you too may benefit from some help from outside of your family:

- Do you feel as though you take your frustrations out on your kids?
- Do you feel out of control more than you like?
- Do you feel overwhelmed and see no way out?
- Do you strike out either physically or verbally when you’re angry with your children?

- Social & Rehabilitation Services (Department for Children and Families)
- Mental Health
- Family Services
- Circle of Parents
- Vermont Network Against Domestic Violence & Sexual Assault
- Parent/Child or Family Centers
- United Ways
- Church, Synagogue, or Mosque
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Parents can care for many emergencies at home. These include: minor cuts, bruises and scrapes. An approved First Aid course will give you important information on how to manage these problems, as well as more serious emergencies.

What are some of the serious emergencies you might encounter?

These are some of the emergencies and guidelines to follow until help arrives:

Severe Bleeding: Apply direct pressure over the bleeding area with a towel or large bandage. This will usually stop the bleeding. Call for help.

Seizure: Place the child on his/her side. Do not force anything between the child’s teeth. Call for help.

Falls: Do not move the child:

- 1) if he is unconscious,
- 2) complains of neck or back pain, or
- 3) has broken or dislocated a bone. Call for help.

Burns: Minor burns can be treated with cool compresses, then an antibacterial ointment and dressing. Do not use butter or oils on burns. If the burn causes blistering or charring or if the burn involves the palms of the hands, soles of the feet, face, or genital area, your child should see a physician immediately. Your local emergency medical services at your nearest hospital should be called for large burns, burns associated with house fires and for smoke inhalation.

Who to call if your child is sick or injured:

- Call 911 or your local emergency number first if you are concerned that your child’s life may be in danger or if your child is seriously hurt.

Examples:

Difficulty breathing	Convulsion
Fall from height	Unconscious
Severe bleeding	Car Crash

- Call your family physician or pediatrician first if you are concerned about your child’s health.

Examples:

Vomiting and/or diarrhea
Persistent fever

- Minor injuries can be taken directly to the emergency department.

Examples:

Cuts and sprains

- Consult your family physician or pediatrician for more specific guidelines.

REMEMBER! If in doubt, call the emergency number.

IMPORTANT PHONE NUMBERS:

EMERGENCY

Pediatrician/ Family Physician

Poison Information

Hospital

Emergency Department



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Toddlers: 18 Months-3 Years

This is the age when babies first realize that they are separate from their mother. More than anything else, they want to establish their independence to do things themselves. That's why they say "NO!" so often when asked to do something. Such negativism doesn't mean they don't love you; they just want to practice making decisions. Sharing and toilet training are two skills that need practice during this period.

- As children get older, offer them choices whenever possible. Let them pick one of two shirts, for example. Such choices give them a chance to make decisions without having to fight with you.
- Sharing is a hard thing to learn. Verbal praise for the times when they do share teaches more quickly and kindly than other methods. Avoid "ordering" children to share. Encourage children to put special things away that they do not wish to share.
- Not all babies mature at the same rate and toilet training is a matter of physical readiness. Ask your doctor for help in deciding when your child will be ready.
- This is the age when all children need a "guardian angel."

Such new independence, coupled with natural curiosity about the world, demands an older, wiser person be with them at all times. Parents of toddlers must have invented the words "taking care". Taking care to avoid falls down stairs or playground heights, taking care to prevent poisoning, drowning, fires, being hit by vehicles, and taking care to make home and yard as child-safe as possible is serious work. Parents can also rely on other responsible caretakers for toddlers when much deserved breaks to heal parent stresses and anxieties are needed.

Self-Care for Parents

As children begin exploring your house, putting dangerous things out of baby's reach may save your sanity, as well as his. Find ways of relieving stress, such as physical exercise, hobbies, reading, sewing, doing your nails, and talking to friends and relatives. Consider joining a parent support group.

Books

The Magic Years- Understanding and Handling the Problems of Early Childhood, by Selma H. Charles

How to Raise a Human Being-A Parent's Guide to Emotional Health from Infancy Through Adolescence, by Dr. Lee Salk

What To Do When There's Nothing To Do, by Elizabeth Gregg and Boston Children's Medical Center staff

Golden Tips

Ways to Make Shopping with Children Easier

1. Plan shopping trips when children are not tired or hungry. Go when you are rested, as well as when the child is rested. Avoid waiting until the end of a tiring day.
2. Discuss the rules before entering the store. "When we leave, you can select a package of _____ if you remember the rules."
3. Bring a nutritious snack for your child to eat during the shopping trip (raisins, cut-up apples, nuts, etc.)
4. Bring a favorite blanket, toy or book from home to help make him feel secure.
5. Give the child a responsibility. (Help select the hardest apples, find the cheapest green beans, match the coupons with the labels).
6. Select a secret word or signal that you can both use to get the immediate attention of the other.
7. Don't let the child out of your sight. Hold hands. Let him hold onto or help steer the grocery cart.
8. Reinforce appropriate behavior. Talk with him, play with him, engage him in the decision making process. Encourage him to talk, watch, listen, and think.
9. Make a game of it. "Do you remember what animal bacon comes from? What cereal can you see in a purple box? Find the peas in the red can, etc."
10. Play "I see something" in the check-out lane and have the children guess what you see; find the things in an aisle that are red, in cans, are for eating, are not for eating, etc.
11. Sing quiet songs together while rolling the cart, encouraging him to chime in on verses he knows; make a silly song about spinach; while waiting in line tell your child's favorite story.
12. Consider swapping with someone you trust who will watch your child while you shop.

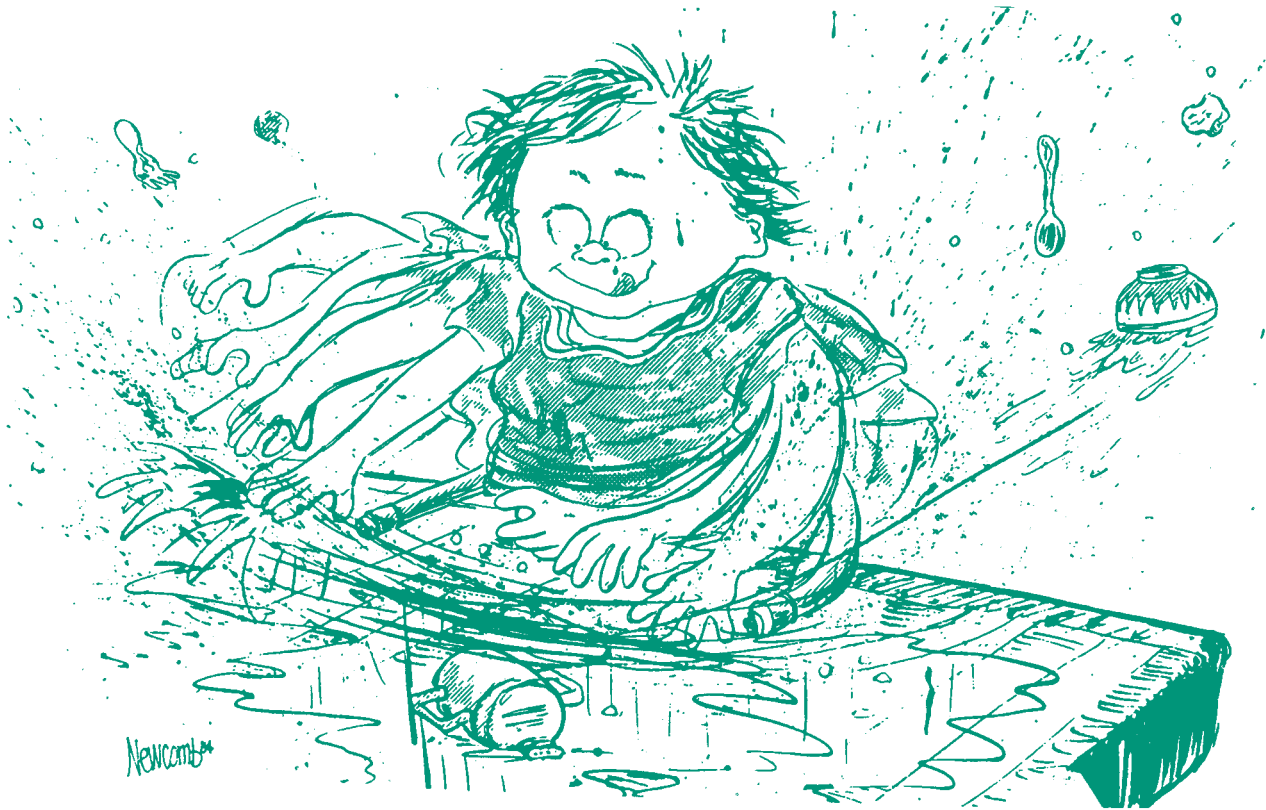


*Advocates For Children, Box 3316, Auburn, ME 04210
(207) 783-3990*

Feeding and eating times can be happy times. Often toddlers go through a stage of saying “no” to everything. This can make mealtime frustrating and upsetting.

Here are some suggestions that have worked for some parents:

- Kids first learn to feed themselves by using their hands. Encourage finger foods by cutting food into strips and small pieces. Use small portions.
- Because learning to eat may be messy, cover the floor with a paper or cloth. Ignore the mess.
- Unbreakable bowl-shaped dishes and short-handled spoons with a wide mouth work well. Children will learn to use a fork later.
- Children who play with their food probably aren't hungry and should be allowed to leave the table. Never force children to eat or “clean their plate.” They will eat when they are hungry.
- Some children learn through imitation. Letting them eat with the family is a good opportunity for them to learn table skills.
- Before mealtime, provide some quiet play activity. It's difficult to get an excited child to settle down to eat.
- If there is some food your toddler doesn't like, don't be concerned. No one food is required for good health. Reintroduce the food later.
- Kids' appetites change quickly. After one year of age, a child's appetite decreases. From then on, a child may be very hungry one day and only a little hungry the next. Be patient.
- Get kids off to a good start. Offer them a variety of foods and praise them often. Try to make meal times happy times.



Sexuality is a part of our lives from the very beginning and is a normal part of growing up. Children begin to learn about sexuality by watching and listening to others and from their own exploration. Sexuality is a normal part of growing up.

Healthy sexual development is nurtured when parents, childcare providers, and teachers understand that sexuality is a natural part of human growth and development.

Adults can help by reflecting on the messages they received about sexuality as children. For example, some of us were not encouraged to discuss sex at all with our parents and we tried to understand what we saw in movies, on television and in other places without the benefit of our parents' support. The fact that we could not discuss sexuality gave some of us the message that it might be dirty or shameful, although we didn't know why. Some of us had parents who were more open with us as we were growing up and helped us make sense of some of the things we heard our friends say about what caused pregnancy (much of it not true!) or our parents talked to us about the sexual scenes we saw on television or at the movies. Some of us were sexually abused as children, which made us feel scared and confused about sexuality and how it is connected to love.

Once we have reflected on our own childhood and how we learned about sexuality, it is easier to decide what kinds of messages we want our own children to have about sexuality. No one wants their child to be afraid and confused. We can give children the right information at the right age so that they will feel good about their bodies and know that they can depend on parents and other caring adults to discuss their questions about sexuality. Sexuality is a big word with a long meaning. The meaning of sexuality includes:

- Understanding your biology;
- Learning about how to act as a male or female (the way we dress, the things we do), and this is different for people in different countries, cultures, religions, and even families;
- Our attraction to other people and our desire to be with others in a sexual way;
- The need we all have to belong, to be loved, held and touched;
- The way we communicate our attraction to, or affection for, others;
- Our values and beliefs about sex, sexuality, and relationships.

Children do not all develop in the same way sexually and that is also natural. Children will be influenced by their family's values, their ethnic background, the culture they live in, the religion they are being taught, and by their friends. It is normal for children to explore every part of their bodies and they are naturally curious about others' bodies. At each stage of development, children will engage in sexual behaviors that are expected. At each stage, parents will need to give children certain information.

Infants and toddlers (0-2 Years)

- Babies feel secure and begin to develop healthy feelings about themselves when they are held, touched, fed, diapered, and comforted when they cry. They need people to speak to them in a loving way and look into their eyes. Newborn babies can only see clearly a foot or two in front of them so we have to get close!
- Babies and toddlers will explore their bodies by touching all their parts. They are quick to learn that touching their private parts feels good. They will know that the good feelings are natural as long as adults are calm when children touch themselves.
- Name all parts of their body as they discover them. ("That is your nose," "that is your leg," "that is your vagina/penis," "that is your ear.") This sends a positive message about all body parts, and about sexuality.

Preschool Children (3-4 Years)

- Adults need to explain to toddlers that touching their own vagina or penis is a private thing – it can take a while for a child to understand the difference between private and public. You could say, "I see you touching your vagina/penis, that is a private thing to do and this is a public place."
- Teach children that our private parts are special and we keep them covered. Give them the message that small children sometimes need help washing and wiping their private parts, and that is ok. Also let them know that other children and grown-ups do not need help from children with their private parts.
- Teach children that we do not touch others who do not want to be touched.
- Help children to feel safe by supporting them when they do not want to be touched. Pressuring them to kiss or hug others is not recommended. Remember that you want them to know that anyone can say "no" to touching and that touching is never a secret.
- Help children to identify what they are feeling – mad, happy, sad. If they don't know what they are feeling, we call that mixed-up or confused.
- Encourage them to come to you no matter what they are feeling. Help them identify other adults they can talk to you when you are not available.
- Remember that their curiosity about their own bodies and that of others is very expected and normal. Children will want to look at other children's private parts and may play games that

require removing clothes. Always stay calm, acknowledge their curiosity, teach them that private parts are kept private, and give them other ways to explore their curiosity. For example, you can get children's books that have pictures of all body parts or purchase dolls that include genitals.

- Answer their questions about sexuality simply, briefly, and at the level they can understand. There is a great method to use, called the LAST method:
 - **L is for listen.** The question may be “how did I get out of Mommy’s belly?” from your five-year-old.
 - **A is for ask**, which means to ask the question back. For example, “that is a really good question. How do you think you got out of Mommy’s belly?” This may give you more information about why they are asking and also will tell you what they think they know already.
 - **S is for sort.** Think about the message you want to give the child. A five-year-old may need more information than a three-year-old. You want to give a brief answer that is satisfactory to the child. Why? Because you want your children to rely on you for answers about such important questions rather than their friends or TV. ALWAYS give correct information. Your honest answers will build their trust in you. They will keep coming to you with questions as long as you take the time to listen and discuss with them.
 - **T is for talk.** For example, “When you were ready to come out, Mommy went to the hospital and the Doctor helped get you out.” If the child is not satisfied and wants to know more, there will be more questions. Let their questions guide you – you know your child best so trust your own judgment about how much you can say.

Early Elementary (5-8 Years)

- Continue to teach the messages we discussed for younger children. Now you will want to encourage your children more to come to you with any questions about their bodies or sexuality.
- Children this age become more sensitive to sex differences and show a strong interest in male/female roles. They want to play with same sex friends and play at being grown up boys and girls. Their questions about sexuality, including where babies come from, pregnancy, birth, etc. will continue and become more in-depth.
- Remember to encourage a good feeling about bodies – bodies are all different and good just the way they are.

Pre to Early Adolescence (9-12 Years)

- Puberty may be starting at this age, even without the outward physical signs. Many children this age feel awkward and wonder “am I normal?” Sexual feelings may start to be strong and they try to understand where the feelings come from and what to do with these feelings.

- Friends their own age are becoming more important to them and they want to fit in and belong. They begin to have romantic and sexual fantasies and will use sexual language to explore the adult world.
- Talk to your child about the changes boys and girls experience with puberty. This includes the growth of body hair, breast development, vaginal lubrication, penis/testicle growth, erections, wet dreams, hygiene, and skin changes. Puberty takes place over time and each person is unique. Some experience changes quickly and others more slowly. Discuss the effects of hormones on boys and girls.
- Discuss what intercourse is and what responsibilities and risks are involved.
- Talk about the expected roles of boys/girls and men/women and explore together what ideas are true and false. The messages from the media need to be addressed at this age too – what does music, movies, TV and the internet seem to be telling us about what it means to be male or female?

Adolescents (13-18 Years)

- This continues to be an intense period of growth. “Who am I?” is the big question and they may try on different identities, including sexual preference. Romantic relationships may develop because they feel sexually attracted to others. Adolescents may masturbate to orgasm and may try intercourse.
- Continue to have discussions with your teenager about sexuality, including the need to behave responsibly. Talk about respect, acceptance, and trust in all relationships and the role that sexuality plays.
- Adolescents need to know about sexually transmitted diseases, the risk of pregnancy and how to protect themselves from disease and pregnancy. Call Planned Parenthood or your pediatrician for information.
- Continue to talk about not doing things they do not want to do, including touch. Encourage them to talk to you if anyone ever pressures them. Discuss their responsibility to respect the wishes of others. Talk about the difference between a healthy and an unhealthy romantic relationship.
- They are often interested in current music and movies, etc. so talk to them about body image, gender roles, and stereotypes.
- Remember that although adolescents naturally want to be more independent, their brains are still maturing and they depend on you. Studies show that teenagers care very much about what their parents think and want their help.

For more information about sexual development, talk to your pediatrician, a child psychologist, or call PCAVT at 1-800-CHILDREN.

There is no safe level of lead in the body. A child can be hurt by lead and still look healthy. Lead in the body can hurt the brain, kidneys, and nervous system. The way to find out if your child has been exposed to lead is a blood lead test. Your child should have a blood lead test at age 1 and again at age 2.

Prevention

In Vermont, most lead poisoning comes from eating invisible lead dust. Peeling and chipping paint creates this lead dust. The dust clings to fingers and objects that children normally put in their mouths. Lead was banned in house paint in 1978. Houses built before 1978 may have lead paint.

If you are a tenant in a house built before 1978, your landlord must look for chipping and peeling paint and fix it in a safe way. You can also help prevent lead poisoning by maintaining your house in good condition, cleaning in a lead-safe way, and eating healthy foods.

Maintain

- Check for chipping, peeling, cracked, or disturbed paint
- Block children's access to chipping, peeling, cracked, or disturbed paint until it is repaired
- Install window well inserts to provide a smooth cleaning surface
- Use lead-safe work practices such as wet sanding and wet scraping
- Do not use a belt sander or heat gun.
Do not dry scrape or dry sand

Clean

- Use only a vacuum with a HEPA filter, and vacuum slowly
- Wet mop floors instead of sweeping
- Use disposable towels to wet clean window sills and other surfaces
- Leave shoes at the door to prevent tracking soil that contains lead into the house
- Wash children's toys often to remove invisible lead dust

Eat Healthy

- Serve children fruits, vegetables, and dairy products as well as iron-rich foods
- Plant vegetable and other food gardens in lead-free soil
- Run water until cold for cooking, drinking, and making formula
- Wash children's hands often, especially before meals and naps

- Serve snacks and meals to children at the table or in their highchairs

Other Sources

Children can get lead poisoning from sources other than lead paint. There may be lead in soil or in water. Many products may contain lead. Examples are keys, glazed pottery, children's jewelry, toys made in other countries, artist's paints, bullets, fishing sinkers, antique furniture, and imported candy (especially from Mexico). Keep children away from products with lead.

- Keep children from playing in bare soil near roadways and along the side of older houses
- Do not let children play with metal keys
- Do not store food in open cans or pottery
- Beware of dangers with sports/hobbies such as reloading shells or making stained glass
- Be aware of products that have been recalled by the Consumer Product Safety Commission

To keep track of lead hazards in many products, check with the Consumer Product Safety Commission regularly for recalled items. You can check at www.cpsc.gov.

Call 1-800-439-8550 for answers to your questions about lead.

The Vermont Department of Health Childhood Lead Poisoning Prevention Program



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Most girls are ready for toilet training at age 2, most boys at age 2½. Put a potty chair in the bathroom a few days before you're ready to try toilet training so the child can get used to it being there. When you change your toddler's diapers, talk to her about why you are changing the diaper: "Tanya went poop, went potty, or had a BM." "Sarah went peepee or weewee in the diaper," so children can learn to say words that let you know they need to go to the bathroom. Some children pull at their diapers or your hand or clothes to let you know they need to go. At this age, dressing them in loose fitting training pants helps so they can pull them on and off easily.

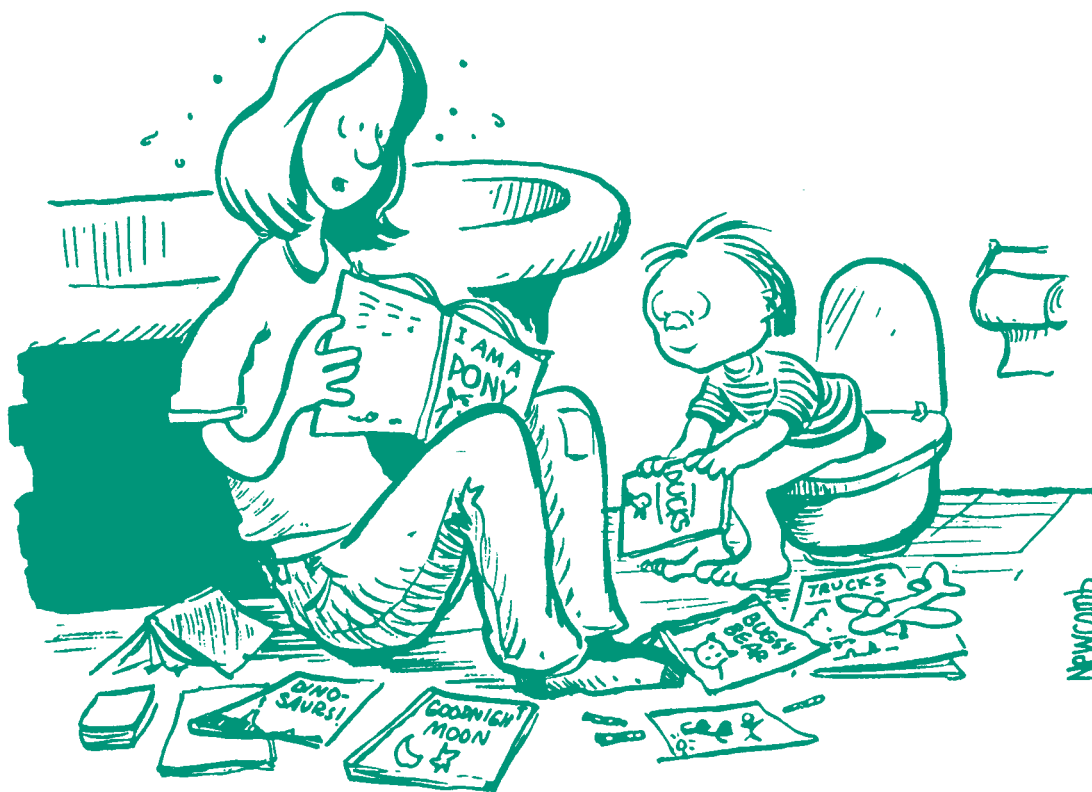
Take the child to the bathroom each time she wants to go. Do not insist she stay long, or "do" anything. Do not give her toys to play with. Sit with the child the first few times. After that, leave for short periods of time and come back until she is used to going to the bathroom on her own. Praise the child for success. Do not punish for "accidents."

You may feel anxious and frustrated if the child isn't toilet trained quickly. The truth is you may be ready for the child to be out of diapers before the child is. Be patient. The child doesn't hate you. Not all 2 or 2½ year olds are ready to be potty trained. If your child isn't interested in potty training, put the chair away and try again in a few weeks.

About 20% of children still have problems staying dry even at age six. This behavior should not be considered disobedient or unusual. Children who wet their pants usually do it because their attention is on something else. Be patient. Compliment them for things they do well. Hugs and praise for success work best.

1987 Jacy Showers, Ed.D., Director, Ohio Research Institute on Child Abuse Prevention

*Distribution By: League Against Child Abuse Ohio Chapter,
Prevent Child Abuse America, 615 Copeland Mill Road, Suite 1H,
Webster, Ohio 43081*



For parents, the decision about who will care for your children during the time you are away is a major one. Where your child spends the day is just as important as where you work. The beliefs your child forms about life during the time he or she is in child care will influence the kind of person he or she grows up to be. There are a few steps you can take when looking for childcare. These will help you find the kind of person and the place you really want.

First Ask Yourself a Few Questions

- Do you have a preference for home-based or center based care?
- Does your schedule or location make one type of care most suitable?
- What kind of program would best suit your child's needs?
- What have your previous experiences with child care been?

Find Out What Kind of Care Exists in your Area

- Ask other parents. Check bulletin boards at the local library, pediatrician's office, stores, or community centers.
- Call your local child care information service or resource and referral agency.

Child Care Resource and Referral Agencies are community based, not-for-profit agencies. Referral specialists help parents find child-care by giving them information about people and programs that are registered or licensed by the State of Vermont. You can talk to them about your questions and concerns and about how to look for the kind of care you really want. They can give you names of homes or centers that have current openings. Each agency has its own fee scale for the referral service. However, there is no fee for families at a certain income level and referral specialists have information about requesting assistance to pay for childcare through the state's Child Care Subsidy Program.

Check to Make Sure the Program is Reputable

- State licensing agencies, child care information services, and resource and referral agencies can give you information on how to find out if the provider or program has had any past complaints.
- Talk with other parents who have used the provider.
- Learn about a center's hiring policies and practices and find out what kind of training and experience each caregiver or teacher has had.

Ask Questions Over the Phone to Save Interview Time

- Do you have openings for the age of my child and the times I need care?
- Are you flexible about pick-up and drop-off times?
- Do you serve meals and snacks? Do you participate with the Child Care Food Program?
- What are your rates? Do you accept payment through the state's Child Care Subsidy Program?
- Do you or any household members smoke?

continued on page 41



Learning More: Child Care, *continued*

Visit Homes and Centers

- Ask if your children will fit the composition of the group.
- Observe how your child might fit in with the group.
- Notice and ask about how many children there are per staff member. Young children especially benefit from having a consistent caregiver.
- Ask if there is a handbook or contract which discusses policies (sick and vacation).

Think About Safety

- Be sure that you have the right to drop in and visit the program at any time.
- Make sure that you are informed about every outing in advance. Never give blanket permission to take your child off the premises.
- Be sure that your child care center only releases your child to people with advanced written permission from you. Make sure the program knows who will pick up your child on any given day.

Other Sources of Help

- 211 has a toll-free number you can call anytime for help with parenting issues. You can reach them at 211.
- For information on services for young children with disabilities, call the Vermont Family Network toll-free at 1-800-870-6758.
- The Child Care Consumer Concern Line, 1-800-649-2642, is a consumer education clearinghouse for information on regulations, becoming registered or licensed, and learning about substantiated child care complaints.

To Learn More

Portions of the above appear in a booklet entitled *Child Care and You: How to Find and Keep Quality Care*, written by Andrea Van Hoven, Child Care Resource & Referral Center, Inc. You can request a copy of this booklet by calling the resource and referral agency nearest you (see the Resource by County portion of this directory) or by contacting the Vermont Agency of Human Services, Department for Children & Families, Child Development Division, 103 So. Main Street, Waterbury, Vermont 05676 (1-800-649-2642).



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No one ever said being a parent was easy, and that goes double for single parents. As a single parent, knowing that you alone are responsible for your children's well being can be overwhelming. As one single parent put it, "You have to accept that everything is going to be harder." With no one to back you up when firmness is needed or to consult with on tough decisions, you have to rely entirely on yourself. But the gains in self-confidence from doing exactly that are extremely rewarding.

Finding good, reliable child care resources, especially for such times as after-school, school vacations and when a child is sick, are important needs for single parents. Even though an increasing number of children live with only one parent, schools still seem to assume a traditional two parent family, with one parent able to be at home when needed. Because single parents are apt to feel "different," they may be apologetic about speaking up about their child's needs. The more you are involved in your child's school, the more helpful the school will be able to be.

Children learn how to be an adult by identifying with persons whom they admire and look up to. Making sure your child has one or more role models of the same sex as the non-custodial parent, such as a friend, neighbor, or relative with whom your child is in regular contact, will be an important way to help your child grow into a loving, responsible adult.

There may be times when you will feel sad, confused, or angry. Do not feel that you have to hide these feelings from your child. Your child can cope much better if she knows how you are feeling, as long as your feelings are stated honestly and without attempting to hold someone else responsible for them.

You may feel that, because you aren't sharing childrearing with another

person, you aren't entitled to private time away from the children. However, it's important that you be good to yourself and arrange for time to pursue your own interests. You'll be better off and so will your children.

Make use of the many resources in your community that are there to help, most of which are free. Don't hesitate to seek outside professional help when you or your child need it.

Getting together with other single parents in your area on a regular basis for mutual support and information sharing is helpful. Any of the resources listed in the back of this book under "Parent Education and Support" can help you locate or start such a group.

Raising children is both a positive and a challenging experience for all parents. Remember that no one has a perfect childhood and

our job as parents is to just do our best.

The fact is, it's probably the toughest job you will ever have and sometimes it can be pretty overwhelming. Your most important challenge is to accept your child for who she is - an individual, different from you and all other children. By accepting this challenge, you are celebrating her unique and special personality.

Alice Blachly, Consumer Affairs Coordinator, Ben & Jerry's Homemade, Inc.



What's Happening

No matter why or how they came to live with you, your relative's children will benefit from being in your home. When children cannot be with their parents, living with a family member may provide:

- Fewer moves from place to place
- The comfort of a familiar language, culture, and family history
- A chance to stay with siblings
- More contact with their parents, depending on the situation

What You Might Be Seeing

Despite these benefits, the children will face some unique challenges:

- They may feel insecure and unsure about how long they will be with you.
- They may act out or challenge you.
- They will miss their parents.
- They may be anxious or depressed.
- They may seem young or act too old for their ages.

Remember:

Parenting a relative's child brings special challenges and special joys. Do not hesitate to ask for help or seek services in your community for yourself and your children.

What You Can Do

It will take time for your relative's children to feel safe and secure in their new home with you. You can encourage these good feelings in a number of ways:

- Set up a daily routine of mealtimes, bedtime, and other activities.
- Help the children feel "at home" by creating a space just for them. Allow them to bring comfort items from home, such as bedding, stuffed animals, and photos or posters.
- Talk to the children and listen when they talk to you.
- Set up a few rules and explain your expectations. Then, enforce the rules consistently.
- Reward positive behavior. When children make mistakes, focus on teaching rather than punishing.
- Be as involved with their school as you can, and encourage the children to participate in school activities.

This is a big job, and you may need help from your community. Here are some suggestions:

- Help with housing or other bills, clothing, or school supplies may be available in your community to help you meet the children's needs.
- Join or start a support group in your neighborhood. Often there are local kinship caregivers support groups. Call 1-800-CHILDREN or 211.
- Ask for help and referrals from a community of faith leader, a school counselor, or a social services agency.
- If necessary, get professional help to address any special needs your relative's children may have, such as medical care, mental health care, or special education. Use respite care, if it is available.



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The Nurturing Parenting Program[®] is an education program that works with the whole family. Families participate in the 2¹/₂-hour fun and educational sessions that meet weekly for 9 to 18 weeks. At each session, adults and children take part in separate, age-appropriate activities as well as share food and family nurturing time together.

The Nurturing Parenting Program is appropriate for any family that wants to get along better, have healthier communication, and feel closer. The Nurturing Parenting Program provides a unique opportunity for parents and children to learn together. Families learn with, and from, each other. The Nurturing Parenting Program is for all kinds of families: two-parent, single-parent, blended, foster, kinship care, adoptive, and others.

Nurturing Parenting Programs take place in communities throughout the state and are offered free of charge. Although many programs begin in the early fall (September) or early winter (January), we offer a variety of programs year-round. To find out about the Nurturing Parenting Programs offered in your area, call 1-800-CHILDREN (1-800-244-5373) Monday through Friday between 9AM and 5PM.



1-800-CHILDREN
www.pcavt.org

A Family Affair...

Children's oral health begins with parent's oral health. Cavity-causing germs love diets rich in carbohydrates. The germs make an acid and the acid dissolves the tooth enamel which leaves a cavity. Carbohydrates are in many processed foods, including fruit juice, flavored waters, sport drinks, crackers, and granola bars. Tap water, cheese, and fresh vegetables make great snack choices. The idea is to have only 4-5 carbohydrate snacks or meals per day. Grazing or sipping on a sugar-loaded food is tough on teeth.

We are not born with those cavity-causing germs. Caregivers who have high numbers of those germs are more likely to transfer those to their children at an early age. That may cause toddlers to be at higher risk for early childhood cavities. The oral health basics are: Brush 2x daily, floss once daily, eat sugar-free snacks, and go for regular preventive dental services with your children.



Getting A Good Start

Avoid putting your child to bed with a bottle of milk or juice. Nursing tends to be less of a cause for tooth decay until children are taking in other kinds of carbohydrates. Begin cleaning the teeth as soon as they start coming in. Initially, a gauze or clean cloth is fine. Switch to a toothbrush when molars are in. When your dentist recommends using a fluoride toothpaste, only use a tiny bit. Your child may graduate to a pea-size amount of toothpaste when you are sure they can spit out the excess. Continue to help children with brushing until they are able to do the job. Usually that is at age 7yrs; and even then, children may need supervision.

When Teeth Come In...

At birth, the baby teeth are present below the gums. Some children are born with baby teeth while other children may not have a tooth erupt until age one year. The timing and order is not important. But, cleaning starts as soon as the teeth come in. Usually by 28 months, all of the primary teeth are present. Some of the permanent teeth start to develop between birth and six months, while others start coming in to develop at two to three years old. The permanent teeth begin to come through emerge into the mouth at around age six years.

Dental Problems

Tooth trauma is common as the toddlers increase their activities and become active. Little chips are usually okay, but see the dentist when children have displaced a tooth or a tooth is very loose. Sometimes tooth trauma can cause a tooth to turn gray. If a gray tooth becomes sensitive to touch or there is swelling in the gum tissue, see the dentist. For bleeding from the mouth, a little blood mixed with saliva can look like a lot of blood. Try wiping the wound to how serious the problem is. Often a little direct pressure can be a fix. For significant bleeding, go to the ER for help.

Dental Home

The Academy of Pediatric Dentistry and the Academy of Pediatrics recommends seeking that first dental visit within 6 months of the first tooth coming through, generally at age one year. The goal is to establish a dental home for good oral health care, just like your pediatrician provides the medical home. Your dentist can assess the risk for tooth decay and help to initiate preventive care. Your dentist is your best resource for trauma, infection, or just everyday questions.



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Managing Food Allergies – a Parent’s Perspective

Whether you are a parent, someone who cares for children professionally, or you’re a favorite aunt or uncle, you know that with children around, you look at things differently. Everywhere you turn, ordinary objects can become dangerous objects.

For my daughter, the ordinary object was food. And this discovery started our family on a journey of learning. We realized our daughter was allergic to peanuts on October 16, 2006, after her first birthday, and the way we found out was typical of how many parents find out. I shared a bite of peanut butter ice cream with her and a few hours later we were in the emergency room, my daughter covered in hives and struggling to breathe. We had done what her pediatrician recommended, which was to wait until age one before introducing peanuts into her diet, and yet this did not prevent an allergic reaction. We immediately had to make it a priority to learn all that we could about food allergies. We turned to the internet, bought books, started reading every label on the foods we bought, and made an appointment with an allergist.

According to the Food Allergy Research & Education website, <http://www.foodallergy.org>, one in 13 children in the United States currently has a food allergy. The top eight food allergies are: wheat, eggs, milk, soy, tree nuts, peanuts, fish and shellfish. The danger of allergies is that they trigger an immune system response in the body, with symptoms ranging from mild to severe, from hives and itching to wheezing and trouble breathing.

If you suspect or are concerned that your child has a food allergy, discuss this with your child’s pediatrician. If your child has been diagnosed with one, here are some things we have learned:

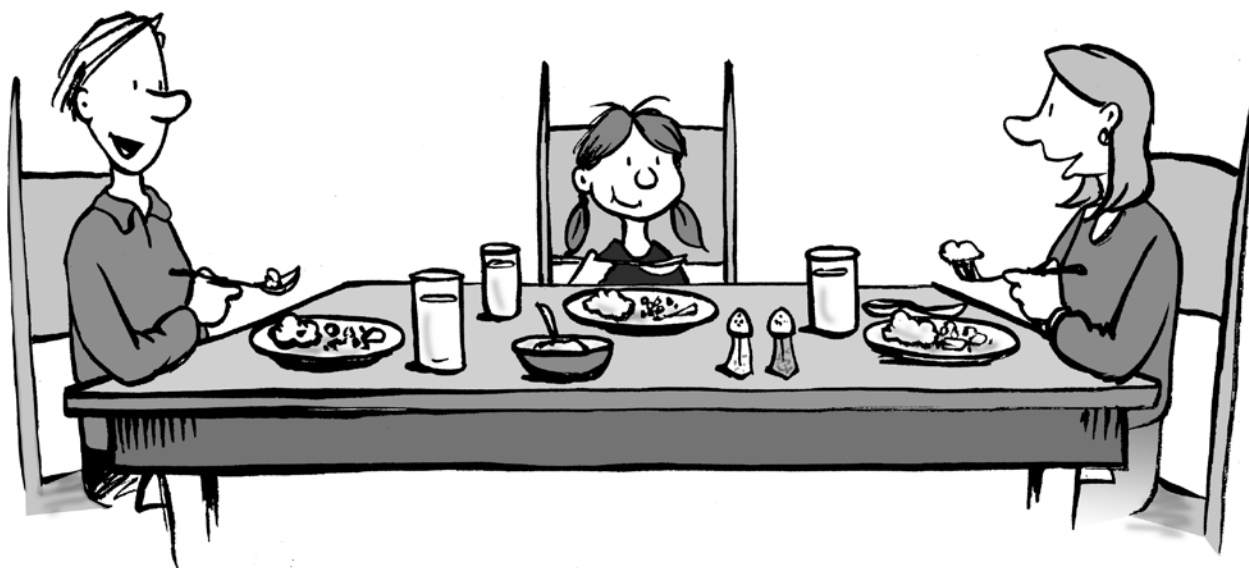
- www.foodallergy.org and www.allergyasthmanetwork.org are reputable websites to start your research.
- United States food labeling laws require companies to list in the ingredient section the presence of any of the top eight allergens. Read all labels every single time.
- If your child is school age, or will be soon, you’ll want to familiarize yourself with Section 504 of the Rehabilitation Act of 1973.
- Find an allergist.
- Restaurant owners, chefs and servers are now more knowledgeable about food allergies than ever before.
- The more you know about your child’s allergy, the better advocate you will be.

Raising a child with life-threatening food allergies is scary. It’s scarier for your child, however, which confirms why, as adults, it is our responsibility to do all we can to keep our children safe.

I wish for you all to have healthy and allergy-free children, but if your child does develop food allergies, rest assured that there are resources, supports and experts available to you.

— Beth Hoffman

Healthy Relationships Project Director, Prevent Child Abuse Vermont



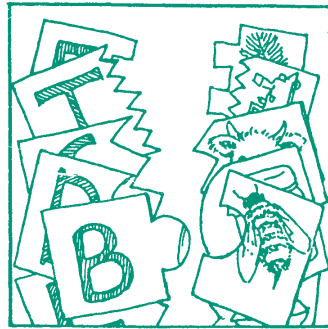
Preschoolers: 3-5 Years

Lots of learning takes place at this stage, and the questions they ask seem endless. It's important to answer as well as you can in short simple sentences, and to remember that they need to have time and space to be active. Fears, showing off and using "bad words" are typical during this phase.

- Simple wooden puzzles, blocks, fat crayons and large paper will help develop coordination and prepare them for school.
- Nightlights and stuffed animals to cuddle help with night fears, which are normal as imaginations develop.
- Let your child help with simple household jobs and praise what she is able to do.
- Ignore "bad words." Work hard at not laughing or giving any attention to your child's behavior.

Self-Care for Parents

As your parenting skills are developing, so are your children's social skills. Try a mother's morning out program at a local church, parent child or family center to give both of you a break.



Books

Sensitive Parenting, by Katharine Kersey

The Black Child-A Parent's Guide to Raising Happy and Healthy Children, by Phyllis Harrison-Ross and Barbara Wyden

What to expect from the preschool child

Parents naturally compare their kid with other kids. We're always wondering if our child is "normal." Well, in a study of 555 average children of preschool age, the following behaviors were observed:

Most 2, 3 and 4-year olds...

- pay no attention to what they are asked to do.
- say "no," refuse to do what is expected or asked.
- are poky, waste time eating, dressing and washing.
- leave tasks undone, start but don't finish.
- wiggle around, don't sit still.
- laugh, squeal, and jump around most of the time.
- grab toys, shove, hit, scratch others.
- refuse to share with other children.
- ask for unnecessary help.
- cry easily, sulk.
- pick nose, play with fingers.
- stay close to adults.
- seek attention by showing off, look for praise.
- go to adults with criticisms of others; boss others.
- stay awake at nap time; don't want to rest; refuse food.
- speak indistinctly.
- are hard to reason with.

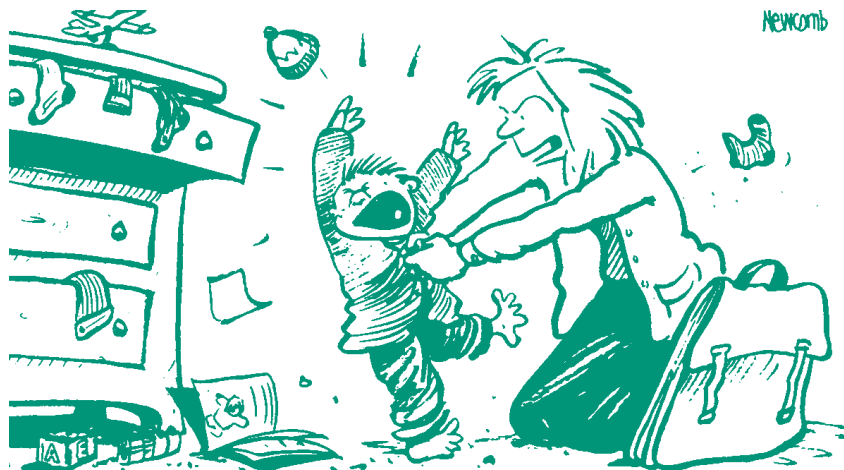
One-third to one-half of all 2, 3 and 4-year olds...

- grumble, whine.
- chew objects, suck thumb, lisp, twist hair.
- are shy, fear strangers.
- tell fanciful stories as real or untrue. won't play with others.
- are jealous.

More than one-fourth of all 1, 3 and 4-year olds...

- bite nails, twitch, handle genitals.
- break toys, tear books, mark walls or furniture.
- have temper tantrums.
- wet selves during the day.
- fear animals and loud noises.
- secretly take things that belong to others.

Extension Agriculture and Home Economics, University of Wisconsin



We all remember our favorite cartoon cat Garfield who looks at himself in the mirror and says, “I’m not fat, I’m just fluffy”. We can laugh at Garfield but when we look at our children and wonder if they are too fat, well, that is just not as funny.

With all the attention being paid to childhood obesity and the implications for future health outcomes, it is important to take this issue seriously. On the other hand, we don’t want to go overboard and jeopardize our children’s health in an effort to “do the right thing”. So what is a healthy weight and how do you know if your child is in that healthy range? Before tackling this question it is worth reviewing some good nutritional guidelines.

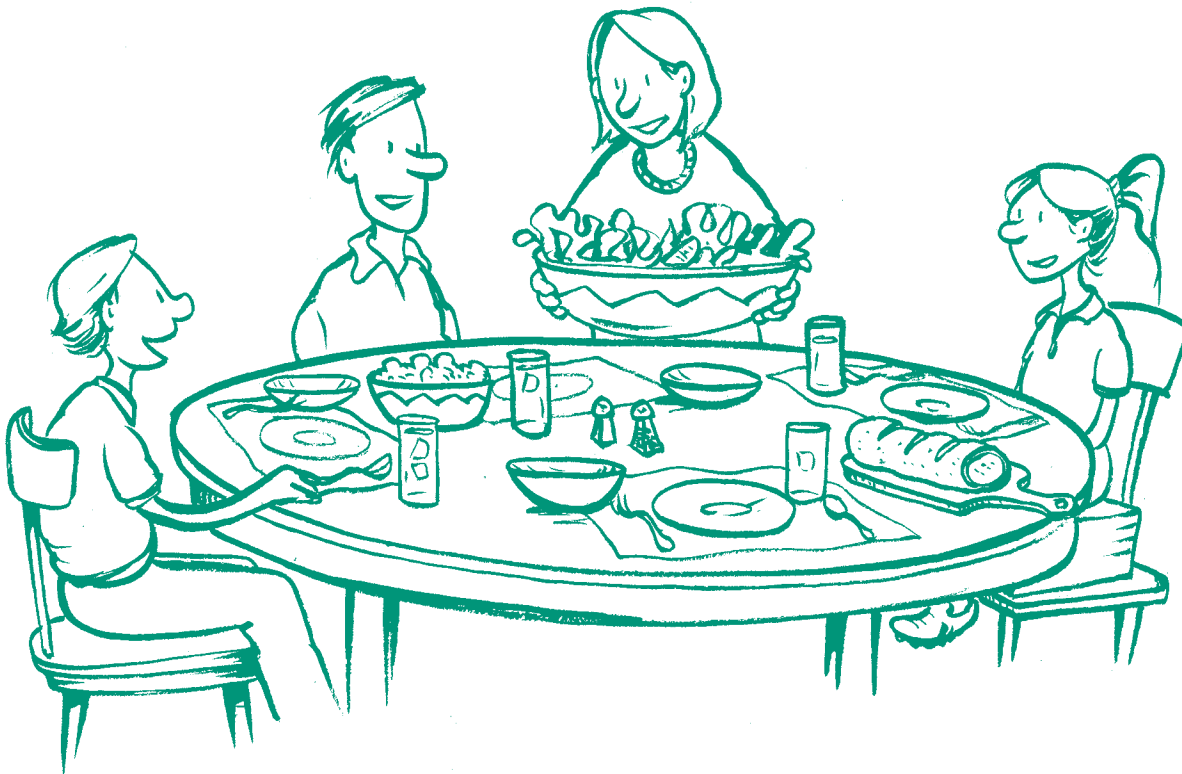
Children, from birth to adolescence, are growing and need good nutrition in the form of regular meals. Infants, under the age of one year, need to be offered breast milk or formula on demand. Solids do not have to be introduced at all during the first year of life, but if they are, six months is a good age to start. Remember that the majority of the infant’s nutrition is from the breast milk or formula and the solid food is more of a pleasurable experience and a chance to socialize with the family.

After one year of age, children are getting the majority of their nutrition from solid food and typically are on a three-meal/day

schedule with one to two snacks. Snacks should consist of low sugar, less dense calorie foods such as fruits and vegetables. Cakes, cookies, chips and candy are all in the “junk food” category and should not be used as regular food choices. These foods should be considered “treats” and saved for special occasions.

It is critical to establish good drinking habits in children at this time. The only liquids they should consume regularly are milk and water. Before age two years, whole milk should be offered; after two years of age, low fat milk is preferable. Milk should be offered at each meal but one serving is adequate. If the child finishes the one serving of milk and wants more to drink, water should be given during the remainder of the meal. Between meals or during snack time, water should be offered. Fruit juices and sugar sweetened beverages are in the “treat” category and should be reserved for special occasions such as birthday parties, holidays or family movie night. It is far more preferable to offer an apple or an orange than it is to give a six-ounce glass of juice. (It takes three to four oranges to make a six-ounce glass of orange juice

continued on next page



continued from page 45

and we know that giving two-year-olds four oranges for a snack is not reasonable.)

Meals need to have a variety of foods from the different food groups. It is not necessary to have each food group represented at each meal but throughout the day it is important that children eat something from all the food groups. Using fresh foods instead of processed foods is best but not always possible. (Don't feel bad for doing the best you can.) It is helpful to have at least one low calorie food during the meal that the child can enjoy for seconds in case he is still hungry. Portion size is often the area where American families have the most difficulty. In general, a portion the size of the child's fist is reasonable. Larger than this promotes overeating.

So, how do you know if your child is overweight or "fat"? This is not as easy to answer as you might think. It is best to talk this over with your child's doctor. Growth curves, body type, and age are all important considerations when assessing weight. Growth velocity (how fast your child is gaining weight) is an important consideration and this is best evaluated using growth curves. A child who is at the 50% for height and 75% for weight

but is growing steadily at this rate on these curves may not be overweight, while a child who is at the 50% for height and is at the 75% for weight but had been growing at the 50% for weight over the past year, may now be overweight.

A few cautions to think about. Genetics can definitely affect growth (both height and weight.) Don't use genetics as an excuse for obesity: "He's fat because our whole family is fat." Stressing good eating and drinking habits early in your child's life can help your child avoid becoming obese.

If your child is a bit heavy, try changing his behavior. Get them more active. Instead of spending an hour in front of TV, get them outside playing. Instead of telling them they can't have the snack they are "dying" for, get them to walk the dog and then have their snack. Instead of depriving them of the food they are used to eating, find ways for them to burn the calories consumed in that food.

Finally, help your children embrace their bodies and love themselves. There is no one perfect body type and even if there was, we can't all have it. We need to empower our children to eat healthy, live healthy and love their bodies.

Karyn M. Patno, MD



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Mealtime can be an enjoyable experience for children and parents. When families gather at the table to share food and socialize, everyone benefits, especially children! Establishing healthy habits early will go a long way to make mealtime even more fun for your children.

First of all, try to have at least one meal together as a family. Even if your child is an infant you can have her at the table in her car seat. Seeing and hearing parents enjoy time together will be a very nurturing experience. As your child gets older, participating in the conversation at mealtime will help her feel connected and important as a member of the family. Be sure to have the TV off during meals so that family members will not be distracted and will be able to focus on each other and the enjoyment of sharing food together.

Americans are experiencing an epidemic of obesity. The habits you start early in your infant or child's life can help to keep her fit and healthy. Start by encouraging water. As early as 10 months of age, your infant can start to have water. Many parents feel that juice is a healthy choice. TV has convinced us that 100% pure orange juice is a "healthy" choice. Juice is primarily water and sugar with some vitamin C. The amount of sugar in juice (yes even in 100% natural fruit juice!) is staggering. Consider a glass of juice the same way you would consider a chocolate bar. Instead, give them water. Children can get their Vitamin C from eating fruit, which also gives them fiber and is more filling. If children have juice when they are thirsty, they will consume far more

calories than they need, (which promotes obesity) and they will be constantly bathing their teeth in sugar, which leads to tooth decay.

Next, work on portion size. Start your child on portions that are the right size for her. If you are unsure what a healthy portion is get some advise from your pediatrician, a WIC advisor or dietician.

Remember, it is never too early to start healthy habits:

- **Share at least one meal together as a family each day**
- **Always have the TV OFF during meal time**
- **Encourage WATER and limit juice to one 4 oz serving/day**
- **Keep portions reasonable for age; get advice from a dietician**

By Karyn M. Patno, MD.



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As babies grow, there is a normal progression of behaviors that show that they are experiencing the sensation of hearing. Parents can observe these behaviors so that they can identify problems and get help if it appears that development is not progressing normally. Although the steps and progression of these stages vary for each individual child, certain responses and the approximate ages at which they develop have been suggested:

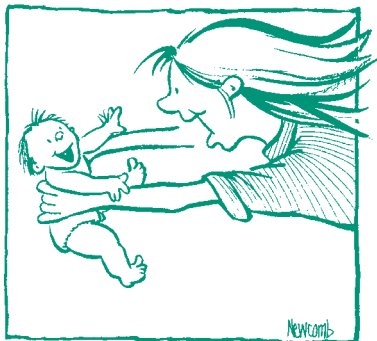
- **0-2 months:** Has a startle response to loud sound. Reacts differently between speech and non-speech sounds. Makes crying and other sounds to signal discomfort and preferences. Has an attraction to human faces and basic visual patterns. Stops activity or quiets when paying attention.
- **3-6 months:** Has a babbling assortment of speech sounds for vocal play, including rising and falling of pitch in voice. Turns head to source of sound (side to side). Recognizes emotions based on voice intonation. Infant gains attention by vocalizing and responding to speech.
- **9-15 months:** Uses first single words. Begins development of language meaning or content. Attends to sounds at average conversational level. Turns to sounds side to side, up and below.
- **18-24 months:** Uses two-word combinations. Develops use of beginning sentences. Attends to speech at soft or whispered levels. Turns to sound source in all directions.

Through these stages, you should become concerned if you notice that your child:

- Does not seek sound source or localize sound.
- No longer babbles after 6-9 months and vocalizations decrease.
- Has no speech or language.
- Responds inappropriately to requests.
- Hesitates before responding or is inattentive.
- Needs repetition to understand.
- Has frequent ear infections (otitis media).

Frequently acts out by:

- being easily frustrated
- being overactive
- dominating
- withdrawing



Tries to compensate by:

- watching faces intently and staying physically close to people
- questioning, interrupting
- speaking in a loud voice
- using a high volume setting (TV, radio)

Share your concern with your physician. You as the parent know your child best. Hearing tests are available as early as birth to three months of age, and can produce valid and reliable results. And while speech may not normally be clear or easy to understand to others by age 2 - 3 for many children within the average range, it is true that language normally develops by that age and can be assessed by observing the child's efforts and style of communication. Contact your local speech and hearing center, or one of the following resources for more information.

Vermont Department of Health, Division for Children with Special Health Needs, Box 70, 108 Cherry St., Burlington, VT 05482, 1-800-660-4427 (Voice/TTY), 1-802-863-7338.

American Speech Language Hearing Association (ASHA), 1081 Rockville Pike, Rockville, MD 20852, 1-301-879-5700 (TTY/Voice), 1-800-660-4427 (TTY/Voice).

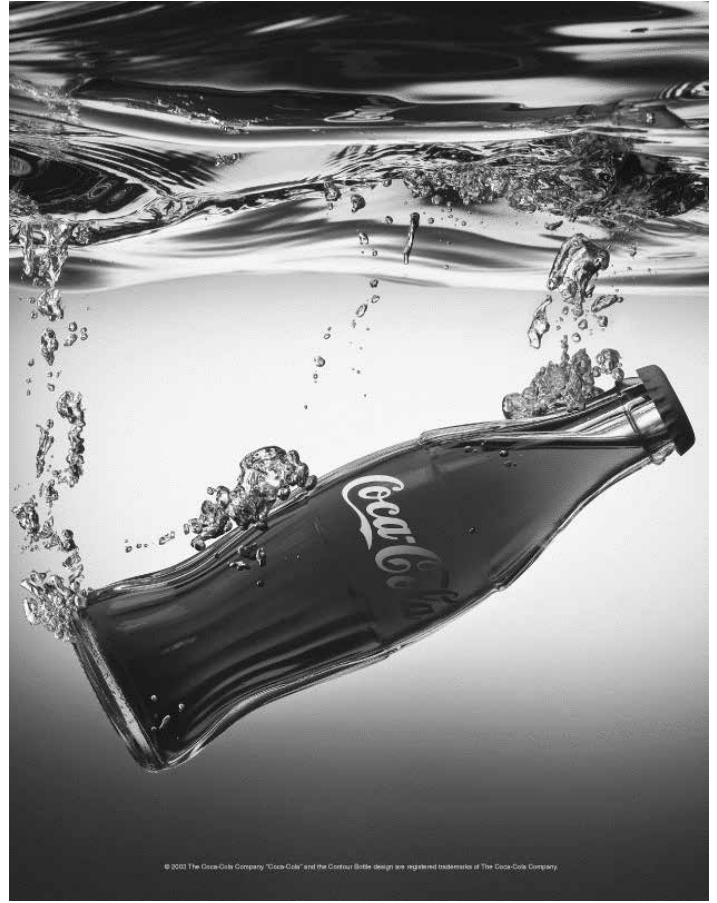
Better Hearing Institute (BHI), 1430 K Street, NW, Washington, DC 20005, 1-202-638-2848 (TTY), 1-202-638-7577 (Voice), 1-800-424-8576 Hearing Helpline.

Family Sign Language Mentor Program Sign language instruction for childcare staff, educators, and families. 802-258-9502.

National Information Center of Deafness, Gallaudet College, 800 Florida Ave., NE, Washington, DC 20002, 1-202-651-5051 (Voice), 651-5052 (TTY).

Adapted from an article prepared by: James T. Bombicino, Director of Clinical Services at the Austine School and Center for the Deaf and Hard-of-Hearing.

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Teaching children to be kind to animals can go a long way towards eliminating violence and aggression later in life. The American Humane Association suggests several ways to communicate humane attitudes to your children.

- **Be a good role model.** Your actions towards animals will help shape your child's attitudes. When you scratch the neighbor's cat under the chin, or gently pet a dog, your children will watch and likely copy the behavior. Children and animals must be taught how to interact or they can hurt each other. You must explain to your child why it's not nice pull on the dog's ears or drag the cat by the tail. Give your children clear guidance on how to treat animals.
- **Be consistent.** Children thrive on consistency and routine. If you tell them not to pull on the dog's tail one day, but don't say anything when they do it the next day, your children will become confused about which behavior is all right. Be reasonable. A child's early, normal interactions with animals may result in unintentional harm. Mistakes made when children are very young do not mean that a child will grow up to be cruel.
- **Be realistic.** Children do not learn responsibility from pets, so don't get a pet just to help make your child responsible. Children learn responsibility and compassion from parents who demonstrate how to care and relate to others. A child's special relationship with a pet, though, can teach many other things: nonverbal ways to communicate, the pleasure of giving and receiving unconditional love, and why it's important to respect other living creatures.

Being humane at every age and stage

Preschool age children can be taught that animals can be just like children:

- They can get hurt and feel pain.
- They need food, water, and shelter, as well as vaccinations and visits to the doctor to stay healthy.
- Some pets, like dogs and cats, like to play but don't always want to.
- Pets need gentle care and handling and lots of affection. They aren't toys.

Elementary school age children should be taught:

- Each animal has a special purpose in the web of life, even scary looking animals.
- Inappropriate and aggressive actions towards animals can cause them fear, pain and suffering.
- Nature is the wild animals' home and you are the guests there. Just like any home, guests should not leave garbage behind, break things (like breaking off tree limbs and yanking off leaves), or act loud and obnoxious.
- People and their pets share a special relationship, loving and caring for each other no matter what.

Middle and high school age children should be taught:

- Why we need laws to protect animals from cruelty, even from their owners.
- The difference between fair treatment versus abuse or neglect.
- How society "uses" animals and the difference between humane and inhumane treatment of animals.
- Complex issues, such as euthanasia of unwanted pets, endangered species, use of animals in scientific experimentation.
- The concept of charity, such as donating time or part of the child's allowance to a good cause.





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Approximately 12 percent of those who have asthma are under the age of 18. Asthma is not only the most common chronic childhood disease, but it is also the most common cause of school absenteeism due to chronic illness. Although asthma cannot be cured, it can almost always be controlled.

What is asthma?

Asthma is a disease process in which the defense mechanisms in the lungs designed to protect them go into overdrive. During an asthmatic episode, the airway muscles tighten, tissues swell and mucus forms. Shortness of breath and wheezing may be present, but the most common symptom of asthma is a chronic cough. Any child who has a frequent cough (especially at night) or respiratory infections should be evaluated by a physician for asthma.

What causes asthma?

Childhood asthma often runs in families and can include a strong allergic factor. Asthma episodes are caused by inflamed airways and are brought on by “triggers.” Triggers can be identified and controlled. Sometimes the use of medication is needed to control the episodes.

How do I find out if my child has asthma?

If there is a suspicion that your child has asthma, your doctor should be consulted immediately. Your doctor will know what questions to ask and what to look for to diagnose asthma. Sometimes testing for allergies can be helpful. Once a diagnosis is made, a treatment regimen is developed and asthma may be controlled.

Asthma Triggers

- Smoke:** Cigarettes, cigars, pipes, woodstove.
- Infections:** Colds, other viruses.
- Exercise:** Wheezing or coughing may start after overexertion.
- Dust:** Cloth upholstered furniture, carpets, drapes, and stuffed animals that gather dust. Brooms and dusters that raise dust. Dirty filters on air furnaces and air conditioners.
- Allergies:** Pollen, animals, feather pillows. Food such as nuts, eggs, fish, milk chocolate, orange juice.
- Household Products:** Vapors from cleaning solutions, cosmetics, perfumes, talcum Powders.
- Nighttime:** Lying down, tiredness, accumulating mucus.
- Weather:** Blasts of cold air, excessive humidity change in seasons.
- Air Pollution:** Traffic jams, smoke filled rooms.



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Capacity to communicate

It’s how we form relationships, the foundation of a child’s life.

“Capacity to communicate” means wanting to and being able to share ideas and feelings with others. Most children learn to communicate just by being part of a family. We can help support language development and the will to communicate, by paying special attention to how we interact with our children.

Communication is more enjoyable when you:

- Listen attentively to your child. Make eye contact on his level, and try to cut down on distraction. Never pretend to listen when you’re really not. Instead say, “I want to hear your story. I’ll be finished sweeping very soon, and then we’ll sit down to talk.”

A young child’s language will grow when you:

- Use self-talk: As you go through the routines of your day, say, “I’m washing the dishes. I’m squeezing the yellow dish soap into the warm water.”

Confidence

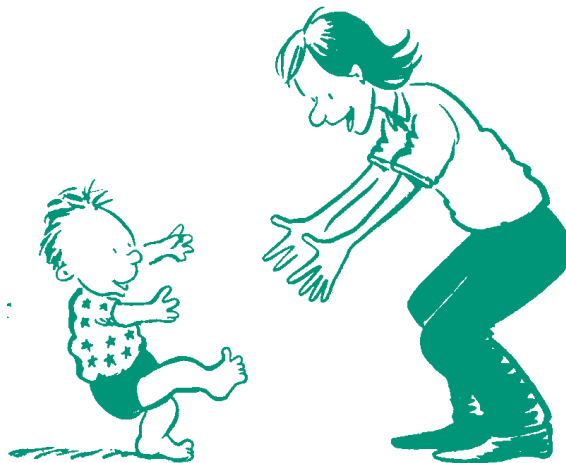
Children need it to make friends, try new things, and simply succeed in life!

Confidence is believing in oneself-in your ability to understand the world and have an effect on it. Feelings of confidence open the door to learning. Yet, we can’t pour confidence into our children. They have to fill themselves with it, from within.

Each time a child does something new, she teaches herself that she’s

capable of meeting life’s challenges. Our job is to set the stage for children to explore and discover, to make choices, and to solve problems. When we create an atmosphere of love, trust and encouragement, our children feel successful and grow confident.

- Establish routines with your baby or child. When a child has a sense of what will happen next in his day, he feels that the world is safe and predictable. If life doesn’t make sense to him, it may feel too scary to fully explore. That may stop him from learning. When we say things like, “after breakfast we can go play”, we’re helping children feel more confident about what’s in their world.
- Let your child solve problems. Give her support, but let her do it herself. If she’s building a block house on the rug and it keeps falling, you can say, “Feel the rug. It’s bumpy, not hard, so the blocks tip. What can you use to make a hard floor?” Let her take it from there. She’ll learn that she can depend on you to encourage her. Meanwhile, she’s the one who finds the solution.



Self-control

Developing inner control takes time and a lot of practice.

Self-control is being able to decide how and when we express our feelings. It helps us figure out how to act. It’s actually a skill that even adults work on. Children need limits in their lives to keep them physically and emotionally safe. With the guidance of an understanding adult, children can practice self-control, little by little. Establish a positive approach to discipline-which means teaching, not punishment.

- When your child misbehaves, stay calm and don't take it personally. Anger and excitement increase misbehavior. Keep your own self-control so the child learns to calm himself down safely. Learning inner control takes years.
- Give a child choices. Children need to feel responsible for their behavior so they can develop self-control. Making age appropriate choices helps them feel that they can be in control - like decisions about who or what to play with, what to wear, and how to use art materials. What's important is the process of choosing, not the outcome. It's all about self-determination.

Cooperation:

It's a two-way street!

Cooperation is the ability to balance one's own needs with someone else's. We often make the mistake of thinking that cooperation means children doing what adults want. That's compliance. True cooperation means working things out together—a give and take that works for everybody. A baby lifting up her arms when her shirt is put on, is cooperating. To develop a cooperative spirit in children, we need to notice times when we cooperate together and help them understand how our requests and rules help everyone.

- Explain your reasons for limits and requests. At three years old, most children use and understand language well enough to understand simple reasons. Point out how the rules benefit both of you. “We all help clean up. Please put away the laun-



dry with me. Then we'll be finished quicker and we can play.”

- Do chores together starting at an early age. Let your child grow up with the benefits and joys of working together toward a goal. That means helping him with his “projects” too. When you cooperate with each other, say something like, “Isn't it nice when people work together?”

Curiosity:

Children have a natural drive to explore. They're simply born curious and want to learn.

Curiosity is the sense that finding out about things is good and fun. Although we all hear sayings like, “Curiosity killed the cat”, it's actually curiosity that keeps children wanting to know more. Our job is to protect and encourage it in our children.

- Create an interesting environment. Babies spend a lot of their waking hours looking around. They're curious about what's in their world. Families doing things around the house are naturally fascinating people and are the best to look at! Also, provide pictures on the wall, and baby safe toys and objects to explore. Change toys and objects so they stay interesting.
- Redirect, don't discourage. For example, if your toddler is exploring the houseplants, put them out of reach, but offer something similar. Put some dirt in a plastic container that's hers to inspect.



Determination:

He’s not stubborn, just determined-and that’s good!

Being determined means reaching a goal with a sense of purpose, and sticking with it. Think of the baby who tries over and over to walk her first few steps. She may take a break, but she won’t give up until she’s walking with confidence. And from there, she’ll set her sights on bigger and better things.

Children want to challenge themselves. We want to preserve that natural quality-it’s key to being a lifelong learner.

- Support your child in her goals. If your toddler wants to get dressed by herself, let her! Don’t pull up those pants for her; instead give her the time to do it herself. Offer suggestions if necessary, but let her do it on her own.
- Encourage your child to stretch a little. Offer small challenges to the child who is not sure he wants to try. Suggest that he try to put on his own shoe. Tell him it may take a few tries, but you believe he can do it. Just be sure you’re asking something that makes sense for his age.

**Relatedness:**

Through relationships, children discover who they are, and learn to understand others.

Relatedness in children means their sense of belonging. Before they can walk or talk, children develop emotional connections with others, based on trust and feeling close. These bonds root children in family and community. With that foundation, they grow to be healthy and caring people.

- Make your relationship with your child the most important thing. Limit how much else you do, so that you’re well rested and can enjoy relating to your child. Your child will learn that people can be trusted, and that relationships are positive, if you’re generally consistent and relaxed.
- Show interest in your child’s activities. Although praise for a job well done is important, what’s even more important is your real interest in your child whatever he’s doing. Your attention is what he thrives on, and feels nurtured by.

Child Sexual Abuse Prevention Training for Those Who Care for Children

Prevent Child Abuse Vermont

(PCAVT) offers a series of trainings on preventing child sexual abuse. Find out how you can integrate child sexual abuse prevention into your childcare or other program by calling 1-800-CHILDREN (1-800-244-5373), 1-802-229-5724, or e-mail pcavt@pcavt.org. Website: www.pcavt.org.



WCSEA: Act One - What is Child Sexual Abuse? (2 hours)

Participants will: a) discuss child sexual abuse and grooming; b) determine how to respond to potential child sexual abuse. This program is particularly for infant through after school teachers and caregivers and those who support them.

NHSD: Nurturing Healthy Sexual Development (3 hours)

Gain information and skills to develop and maintain open communication with children, identify and respond to normal as well as concerning sexual behaviors in children, answer children's questions, and give children positive messages.



OBP: Overcoming Barriers to Protecting Children from Sexual Abuse (3 hours)

Participants will: a) distinguish healthy behaviors from boundary violations and pre-offending behaviors; b) practice directly addressing concerning behaviors. Individuals and communities have a strong desire to prevent child sexual abuse. However, they often face barriers to protecting children.

PI: Plugged In: The Viewing of Pornography by Children (2 hours)

Adults in this workshop will: a) analyze the potential impacts of pornography on healthy sexual development; b) summarize potential healthy responses to the viewing of pornography by children.

USBC: Understanding the Sexual Behaviors of Children (2 hours)

This training is designed to promote adult understanding of the range sexual behaviors in children 0-12, including behaviors that are developmentally expected, concerning, and abusive

PREV: Child Sexual Abuse Prevention (2 hours)

Participants will: a) identify age-appropriate healthy sexuality messages that they could use in their classrooms; b) predict what Care for Kids lessons could look like in their classrooms.

CFK: Care for Kids Curriculum (2 hours)

Participants will: a) identify age-appropriate healthy sexuality messages that they could use in their classrooms; b) predict what Care for Kids lessons could look like in their classrooms. This workshop is for preschool through second grade teachers and caregivers, and those who support them.

RSBC: Responding to the Sexual Behaviors of Children (2 hours)

This training is designed to prepare adults to respond to the range of children's sexual behaviors in order to intervene earlier in the development of concerning or sexually abusive patterns

IS: Informed Supervision of Juveniles Who Have Sexually Offended (2 hours)

Participants who work with children and/or youth with sexually harmful behaviors will explore the cycle of abuse and learn strategies for intervening at different points in the cycle. A model for safety planning is introduced and practiced. This program is for those who have previously attended USBC.



Find out how you can make a difference for children.

CALL 1-800-CHILDREN (1-800-244-5373)

802-229-5724

E-mail: pcavt@pcavt.org

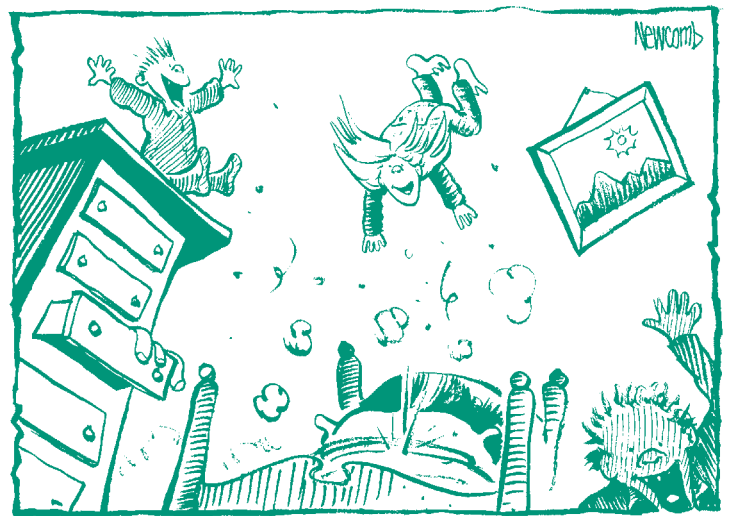
Website: www.pcavt.org

Lots of families have difficulties around bedtime. There are ways to make it easier. It is important to have a regular bedtime for children. Parents have a right to have time for themselves in the evening and kids do better when bedtime is consistent. For the preschool child, sticking to a routine every night helps. For example, tell him he has 15 minutes to finish what he is doing. Then it's time to brush teeth, put on pajamas, read a story or listen to recorded music, get a backrub or hug, and then lights out. Having the same routine every night helps kids settle down more easily.

If your child comes out of his room after bedtime, take him by the hand back to bed, saying nothing. Repeat if necessary. A child's need for sleep is different from age to age and even day to day. If a child complains of not being sleepy at bedtime, insist that he stick to bedtime rules anyway. For a school-age child, going to bed and "lights out" may be different times. Allowing your child to read or write or do another quiet activity after going to bed, but before lights are out, can help improve his reading and writing skills. It can also help the child learn to spend good time alone.

If a child has to be dragged out of bed in the morning or is constantly irritable during the day, consider making "lights out" earlier for a while. School-age children are often more cooperative about bedtime if they make the decision with you about what bedtime should be on school nights, and how it should differ on Friday and Saturday nights.

Children of different ages have different needs at the end of the day. Young children may want a hug, a story, or some other attention at bedtime. Teens may prefer a parent just calling out "Good Night" while walking by their door.



Your Baby Has You, You Have Text4baby.



A free mobile information service designed to promote maternal and child health through text messaging. Vermont women who text BABY (BEBE for Spanish) to 511411 receive three free text messages a week, timed to their due date or their baby's birth date, through pregnancy and up until the baby's first birthday.



1-800-CHILDREN | pcavt.org
pcavt@pcavt.org

Children misbehave because they don't have much self-control. It is not a sign that a child is hateful or mean. Children are human beings and human beings will get angry, we can't prevent that. What we can do is teach our children how to handle their frustration and anger in appropriate ways. If your child uses these physical acts to express her feelings, use some of the following tips to change her behavior.

DO'S

Stop it before it happens

Watch your child during playtime. When you see her becoming frustrated or angry – talk to her. Coach her through the situation. Teach her what to do, or model what to say to her friend. Or if she seems too upset to hear you, redirect her attention to another activity until she calms down.

Teach and explain It's one thing to tell a child what not to do or to step into an argument and solve it yourself. It's another thing entirely to teach her what to do next time. This can be done through role-play, talking together, and reading a few children's books about angry feelings.

Examine hidden causes Is your child hungry, tired, sick, jealous, frustrated, bored or scared? If you can identify any feelings behind your child's actions you can address those along with the negative behavior.

Give more attention to the injured party. Often the child who hits gets so much attention that the action becomes a way of gaining the spotlight. Instead, give more attention to the child who was hurt. After saying firmly but without yelling, "No hitting" turn and give attention to the child who was wronged, "Come here and Mommy will give you a hug. Tell me what happened and how you are feeling"

Teach the clapping method

Tell a child to clap her hands whenever she feels an urge to hit. This gives her an immediate outlet for her emotions and helps her learn to keep her hands to herself. Another way is to teach her to put her hands in her pockets when she feels like hitting. Reward with praise anytime you see she is doing well.

DON'TS

Avoid play hitting and wrestling

Young children who roughhouse with a parent or sibling during play time might then use these same actions during nonwrestling times. It can be hard for them to draw the line between the two. If you have a child who has trouble controlling his temper then avoid this kind of play.

Don't lose control

When you see your child hurting another child it's easy to get angry. This won't teach your child what she needs to learn: how to control her feelings when others are making her angry. You are angry at her, so she'll be watching how you handle your anger.

Don't let your child watch violent TV or video games

Children can become immune to the impact of violence, and they may copy what they see on the screen. Avoid shows that show aggression as a good way to handle anger.

Don't assume your child can figure it out

If your child comes to you about a difficult situation, don't send her away for tattling. But don't step in and handle it for her, either. View her call for help as an invitation to teach her important social skills.

Don't focus on punishment

More than anything your child needs instructions on how to treat other human beings, particularly during moments of anger or frustration.

DON'TS

Avoid "play" hitting or wrestling.

Don't lose control.

Do not watch violent TV or video games.

Don't focus on punishment.

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Dear Parents,

I went out to lunch with my son today. He graduated from high school last June, and this was the first time we had gone back together to visit his teachers and have lunch with some old friends. When Josh walked into his old classroom, he became the highlight of the students' and teachers' day. He spoke to everyone, hugged several, and offered his condolences to a friend who had lost a family member. Normally, none of this would be considered amazing, but Josh has autism.

Autism is considered a developmental disability that is characterized by delay/difficulties in: speech and language, social development, relating to environmental changes. Other areas of concern for folks with autism are stereotypic, repetitive actions and other peculiar motor movements and, for Josh and many other children, sensory differences and sensitivities.

As I look back over the last 15 years, I remember clearly several places on our journey.

Josh seemed to develop at a slower rate than my other two children. I called him my "Late Bloomer." He didn't talk until he was three and made very slow progress with language. His play and social interactions were "odd" compared to other children. His learning seemed to come much harder and later than any other children I knew. At the recommendation of our pediatrician, we took Josh for some developmental testing. He received a diagnosis of "developmental delay." No one explained exactly what that meant, or at least not in a way I understood. My feelings at the time were that he would catch up with other children, given a few more years.

Two years later, at a follow up visit, a few more pieces of the puzzle that was Joshua fell into place. This time a team with more experience examined him. Josh had also been displaying many more puzzling characteristics. This time, Josh was diagnosed as

autistic.

This new word "autism" totally changed our lives. We learned that his difficulties were probably lifelong, but with the right training, interventions and education he would continue to progress. At first, the hardest part for me was the emotional piece. I remember feeling as if I had lost a child, and yet gained a child as well. I thought that my hopes, dreams and ideas of who Josh was and could become had to die. This brought with it some grief. I need to be clear that the grief wasn't over Josh, but over the unspoken dreams we all have for our children before and after they are born. Josh was and is still my son, a son whom I love dearly, and would give my life for. His future was uncertain, but not hopeless.

I have talked with and supported many families of children with disabilities. Many of those are parents of children with an autism spectrum diagnosis. All experience this emotionality at diagnosis. Not all see it as grief, but prefer to just label it as a roller coaster of emotions. It absolutely feels like a roller coaster, and strong emotions can continue to pop up at different places throughout our children's lives. One event that always triggered strong emotions for me was every three years when Josh was re-evaluated for special education. On the positive side, the three year evaluation always showed growth and strengths. On the other hand, it also pointed out Josh's slower development and learning. I do not see Josh as disabled as the testing always showed him to be.

Which brings me to a very strong value that I hold; I choose to see Josh from a strength based point of view. He brings great strength, determination, unique interests and gifts as all children do. I need to see his strengths in order to help create a balanced program and life for and with him.

continued on next page

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After diagnosis, we found ourselves immersed in learning: about autism, behavior management techniques, special education, how to be part of Josh's educational team, and how to be the best advocate I could become in order to speak up for Josh's best interests. We also had to understand the systems and services he and our family needed. This learning process has been as much for us as a family as it was for Josh.

Important lessons learned include:

- Create a support system for you, your child and family. We found that Josh does best with a team of people supporting him. That team has changed over the years, but continues to include family, friends, caregivers, teachers, coaches, and our family of faith.
- Remember our children need a team to grow. Learn how to be a valuable team member.
- You are the expert about your child. Other people and professionals will have expertise you and your child will need, but you really know your child. You know what works and what doesn't. Your child's teams need your expertise.
- Strengthen your advocacy skills. We all have them, but don't often know we do until we need them. You will need them.
- Talk to and meet other parents of children with special needs. Support groups, family support organizations and social and recreational opportunities for children with special needs have all been helpful.

- Take care of yourself as a caregiver. If you don't who will?
- Find and make good use of available resources for your child and family, such as: *Autism Next Steps Guide* (www.ddas.vermont.gov/ddas-publications/publications-autism/publications-autism-documents/next-steps-vermont-2009); local children's integrated services (CIS teams can help identify local supports and services for you and your child—<http://dcf.vermont.gov/cdd/cis>); and Vermont's 211 phone link to information and referral.

Our experiences have changed our lives for the better and those of many other families. We are stronger as individuals and as a family. We have learned to be thankful and appreciate every small step Josh makes. His progress comes in smaller steps, but it comes. Josh has exceeded the expectations of many people who've known him through the years. Over the past several years, Josh has done public speaking with me about how disability affects a family, and how folks can better assist families and individuals. He has a job he loves, working with horses. He is happy and has a social network with many friends. He volunteers in a therapeutic horse-riding program and helps with our Church's weekly soup kitchen. Josh continues to need support as we help him move toward the highest level of independence he can achieve.

Written by Kathleen Holsopple with permission from Joshua

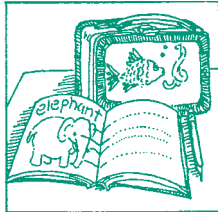
Kathleen is also the Executive Director of the Vermont Federation of Families for Children's Mental Health

Knowing What to Expect: 6-10 Year Olds

School-Aged Children: 6-10 Years

All children reach the stage when they want to learn the magic of reading. These years set the tone for all of their future academic achievement. Crying and whining over unimportant things may become nerve-wracking, but this is also the time when children develop consciences and can appreciate the value of rules.

- Praise for efforts in schoolwork is very important.
- Contact the teacher and seek ways to help reinforce what is being taught in school.
- Make every effort to remain calm while trying to determine the cause of problem behavior.
- Children at this stage test limits through negative behavior. Such testing helps them to learn appropriate behavior.
- When using “time out” to correct negative behavior, keep in mind that children perceive time much differently than do adults. Ten or fifteen minutes may seem short to an adult, but for a first grader who is being made to sit in a chair, it



can seem endless. Be sure to use time frames that are “child appropriate”.

- If children are interested in after-school activities, encourage and support them. This can be especially important if the child is having difficulty with school. Activities like music lessons, scouts, ice-skating, horseback riding, library programs, etc. can lead to feelings of competence.

Self-Care for Parents

Find other parents you can talk to on a regular basis. Join a support group or take a parenting class, so you don't feel like you are the only frustrated parent in the world.

Books

Systematic Training for Effective Parenting, by Don Dinkmeyer (Parent Handbook)

Living With Children, by Gerald Patterson

What Every Child Would Like His Parent to Know-To Help Him With The Emotional Problems of His Everyday Life, by Lee Salk

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10 Wheelock Street, Montpelier, VT 05602**

Having a group of friends gives children an opportunity to fit in and be accepted for who they are.

Encouraging friendships between children with and without disabilities

A group of parents and professionals gathered at a Vermont Family Network workshop to talk about friendship and belonging for children with disabilities. In recent years more parents have expressed concern about their child's lack of friends and the harassment children experience in schools. It was clear that the parents and professionals at the workshop understood how important friendship is in a child's life. They expressed a common interest in helping children with disabilities to feel accepted and welcome in their communities and schools.

Common sense tells us that having friends boosts a child's self esteem, confidence, learning and development. Friends can help children celebrate good times and get through difficult times. Having a group of friends gives children an opportunity to fit in and be accepted for who they are.

Here are some suggestions for parents and professionals in helping children with special needs develop friendships. Cooperation among home, childcare and preschool settings, and school is an important part of friendship building.



- **Identify activities the child likes.** Build on the child's strengths and interests and find other children who enjoy the same things, such as playing games, drawing or building with blocks. Make sure that everyone knows the child well and understands the child's likes and abilities.
- **Find resources in the community.** Help the child to join a club, play a sport, or participate in after-school or weekend activities. Learn about organizations that sponsor children's programs and encourage and support children with disabilities to participate.
- **Use the buddy system.** Encourage children to become peer buddies. Pair children together to do homework, eat lunch, or play sports. Look for children in the neighborhood who take an interest in the child and consider inviting them for play dates and buddy arrangements.
- **Teach children social skills.** Talk to the child about what's appropriate behavior. Help the child to understand what peers expect of him or her and practice social skills at school and at home. Read books about friendship and ask the child to identify steps to making friends from the story.
- **Provide opportunities for children to talk.** Establish a level of communication with the child to share their concerns and problems. Listening carefully to the child is just as important as giving advice. When problems occur, talk to the child about other ways of handling them.
- **Set up play dates.** Arrange sleepovers or after-school play dates. Invite classmates to birthday parties or to spend time on a weekend. Planning beforehand is important to ensure the experience is a positive one for the child. Learn what games or activities are favorites and keep the time short, one to two hours.

Connie Curtain

“Children should be seen, heard, and believed”

The way that we talk to our children about sex, sexuality, and gender is changing. We have learned that by supporting our children regarding their gender and sexual identities and expression, we foster happier and healthier children, with stronger family relationships. When we support and love our children, we decrease risk of self-harm, depression, and suicide and increase resiliency, confidence, and a sense of belonging.

Although some children may not express sexual or gender identity until later in life, some children will do so earlier in life. This can especially be true for transgender* children and gender non-binary* children.

It’s important to acknowledge the difference between sex, sexuality, gender identification, and gender expression:

Sex refers to biological differences, internal and external sex organs. This means male, female or intersex*

Sexuality refers to our emotional, physical, and or sexual attraction to other people.

Gender identity refers to how one identifies: Male, female, neither, or both. This may or may not reflect the gender assigned to them at birth.

Gender expression refers to how one expresses oneself through fashion, appearance, voice, and hair style. These expressions may or may not conform with typical characteristics associated as masculine or feminine.

The best way to help children feel safe and free to explore and express their true selves is by creating a space that does not create a gender binary. Gender Binary means that there are only two genders and that there are particular attributes for those

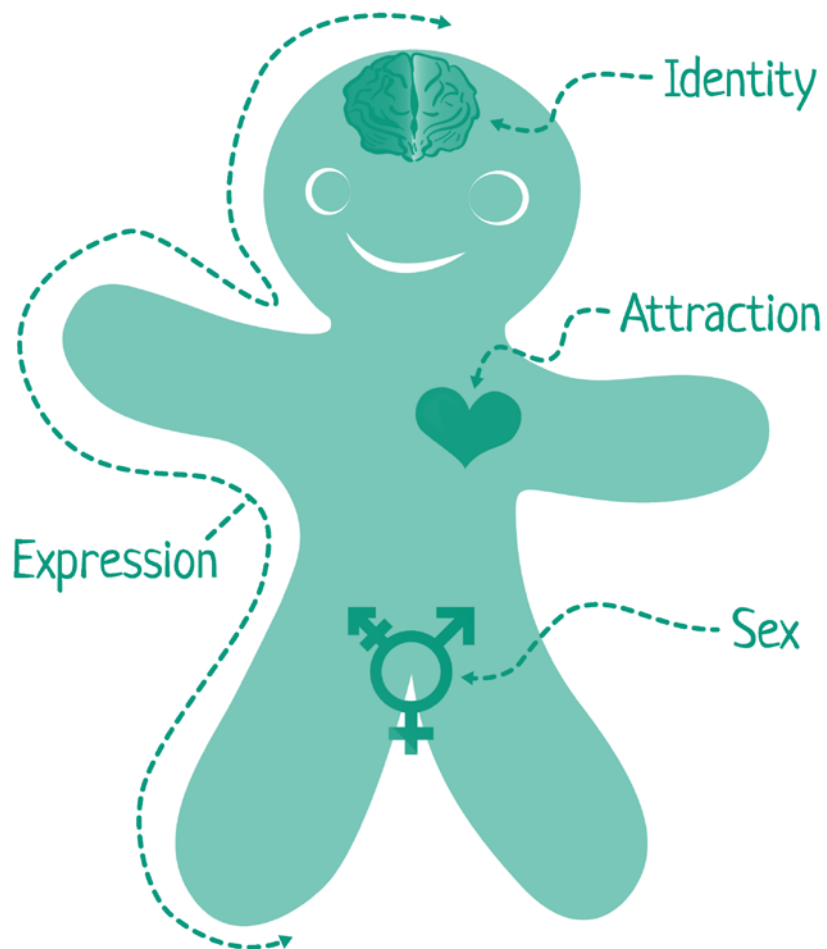
genders. For example, stereotypes like: “Boys like blue and girls like pink”, “girls like dolls and boys like trucks”, and “Boys are tough and rowdy and girls are sensitive and sweet”. This also includes sayings like, “boys will be boys” and “boys don’t cry”. We now know that these binary ideas may be harmful to children, no matter their gender or sexual identification.

Additionally, if your daughter prefers trucks to dolls, and your son prefers pink to blue, this does not make them transgender or gay.

We have come a long way in how we love and support our LGBTQ+ children and community members. And there are many

The Genderbread Person v3.3

Gender is one of those things everyone thinks they understand, but most people don’t. Like *Inception*. Gender isn’t binary. It’s not either/or. In many cases it’s both/and. A bit of this, a dash of that. This tasty little guide is meant to be an appetizer for gender understanding. It’s okay if you’re hungry for more. In fact, that’s the idea.



For a bigger bite, read more at <http://bit.ly/genderbread>

resources out there to help you and your child. The best resource in Vermont is an organization called Outright Vermont. They are located in Burlington, but can help you by giving support over their website or by phone. They can also help you find support groups in your area and by recommending helpful websites and books. In addition, Outright has a directory on their website for therapists who specialize in LGBTQ issues.

Resources:

Outright Vermont: <http://www.outrightvt.org/>

Pride Center: <http://www.pridecentervt.org/>

PFLAG: <https://www.pflag.org/>

References:

This Is a Book for Parents of Gay Kids: A Question & Answer Guide to Everyday Life, Dannielle Owens-Reid and Kristin Russo

Is It a Choice?: Answers to 300 of the Most Frequently Asked Questions About Gay and Lesbian People, Eric Marcus

Always My Child: A Parent's Guide to Understanding Your Gay, Lesbian, Bisexual, Transgendered, or Questioning Son or Daughter, Kevin Jennings

Transgender 101: A Simple Guide to a Complex Issue, Nicholas M. Teich

—Vini Kate Devine Emery
Prevent Child Abuse Vermont

See page 68 for LGBTQ Glossary

by its pronounced METROsexual.com

Plot a point on both continua in each category to represent your identity; combine all ingredients to form your Genderbread

4 (of infinite) possible plot and label combos

Gender Identity

How you, in your head, define your gender, based on how much you align (or don't align) with what you understand to be the options for gender.

Woman-ness

Man-ness

Indicates a lack of what's on the right.

Gender Expression

The ways you present gender, through your actions, dress, and demeanor, and how those presentations are interpreted based on gender norms.

Feminine

Masculine

"butch"

"femme"

"androgynous"

"gender neutral"

Biological Sex

The physical sex characteristics you're born with and develop, including genitalia, body shape, voice pitch, body hair, hormones, chromosomes, etc.

Female-ness

Male-ness

Sexually Attracted to

Nobody {

(Women/Females/Femininity)

(Men/Males/Masculinity)

Romantically Attracted to

Nobody {

(Women/Females/Femininity)

(Men/Males/Masculinity)

In each grouping, circle all that apply to you and plot a point, depicting the aspects of gender toward which you experience attraction.

LGBTQ* Terminology

In this document you will find some of the most commonly used terms, but please see some links below to find more complete lists.

The terminology used here is borrowed from UCLA's LGBTQ chapter.

Bisexual – A person emotionally, physically, and/or sexually attracted to males/men and females/women. This attraction does not have to be equally split between genders and there may be a preference for one gender over others.

Cisgender – describes someone who feels comfortable with the gender identity and gender expression expectations assigned to them based on their physical sex.

Gay – 1. Term used in some cultural settings to represent males who are attracted to males in a romantic, erotic and/or emotional sense. Not all men who engage in “homosexual behavior” identify as gay, and as such this label should be used with caution. 2. Term used to refer to the LGBTQI community as a whole, or as an individual identity label for anyone who does not identify as heterosexual.

Gender non-binary or **Genderqueer** – A gender variant person whose gender identity is neither male nor female, is between or beyond genders, or is some combination of genders. Often includes a political agenda to challenge gender stereotypes and the gender binary system.

Homosexual – A person primarily emotionally, physically, and/or sexually attracted to members of the same sex.

Intersexed Person — someone whose sex a doctor has a difficult time categorizing as either male or female. A person whose combination of chromosomes, gonads, hormones, internal sex organs, gonads, and/or genitals differs from one of the two expected patterns.

Lesbian – Term used to describe female-identified people attracted romantically, erotically, and/or emotionally to other female-identified people. The term lesbian is derived from the name of the Greek island of Lesbos and as such is sometimes considered a Eurocentric category that does not necessarily represent the identities of African-Americans and other non-European ethnic groups. This being said, individual female-identified people from diverse ethnic groups, including African-Americans, embrace the term ‘lesbian’ as an identity label.

LGBTQI – A common abbreviation for lesbian, gay, bisexual, transgender, queer and intersexed community.

Pangendered – A person whose gender identity is comprised of all or many gender expressions.

Pansexual – A person who is sexually attracted to all or many gender expressions.

Queer – 1. An umbrella term which embraces a matrix of sexual preferences, orientations, and habits of the not-exclusively-heterosexual-and-monogamous majority. Queer includes lesbians, gay men, bisexuals, transpeople, intersex persons, the radical sex communities, and many other sexually transgressive (underworld) explorers. 2. This term is sometimes used as a sexual orientation label instead of ‘bisexual’ as a way of acknowledging that there are more than two genders to be attracted to, or as a way of stating a non-heterosexual orientation without having to state who they are attracted to. 3. A reclaimed word that was formerly used solely as a slur but that has been semantically overturned by members of the maligned group, who use it as a term of defiant pride. ‘Queer’ is an example of a word undergoing this process. For decades ‘queer’ was used solely as a derogatory adjective for gays and lesbians, but in the 1980s the term began to be used by gay and lesbian activists as a term of self-identification. Eventually, it came to be used as an umbrella term that included gay men, lesbians, bisexuals, and transgendered people. Nevertheless, a sizable percentage of people to whom this term might apply still hold ‘queer’ to be a hateful insult, and its use by heterosexuals is often considered offensive. Similarly, other reclaimed words are usually offensive to the in-group when used by outsiders, so extreme caution must be taken concerning their use when one is not a member of the group.

Same Gender Loving – A term sometimes used by members of the African American / Black community to express an alternative sexual orientation without relying on terms and symbols of European descent. The term emerged in the early 1990’s with the intention of offering Black women who love women and Black men who love men a voice, a way of identifying and being that resonated with the uniqueness of Black culture in life. (Sometimes abbreviated as ‘SGL’.)

Trans – An abbreviation that is sometimes used to refer to a gender variant person. This use allows a person to state a gender variant identity without having to disclose hormonal or surgical status/intentions. This term is sometimes used to refer to the gender variant community as a whole.

Transgender – A person who lives as a member of a gender other than that expected based on anatomical sex. Sexual orientation varies and is not dependent on gender identity.

Find a more comprehensive list at <http://www.lgbt.ucla.edu/documents/LGBTTerminology.pdf>

TIME OUT: An Alternative

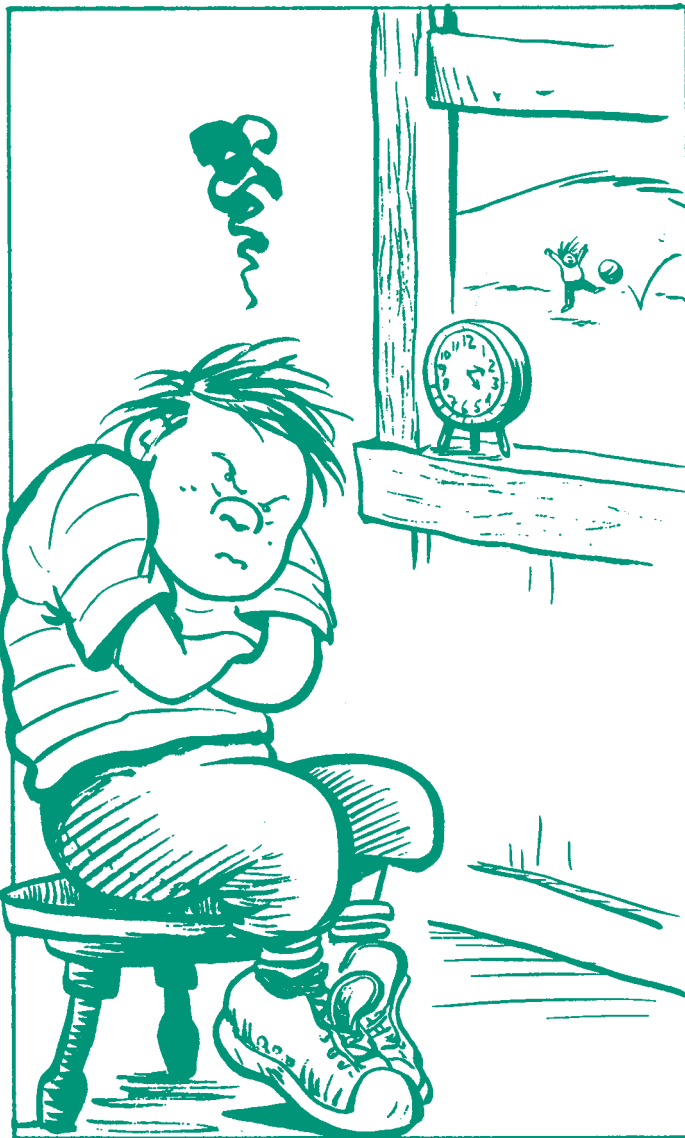
There are many times when ignoring inappropriate behavior is the best thing to do. However, there are other times when your child's behavior is too extreme to be ignored. At times like this, when safety is at issue, parents have to interrupt to stop their child's behavior.

There are times when “time out” may work very well. Time out is a plan in which your child spends a short time by himself. Children spend this time in a quiet and safe place out of the way of busy activity. Time out can work because it stops your child from getting attention for the troublesome behavior. It lets your child know clearly that what he was doing was not okay, and it gives everyone a chance to calm down. It may be helpful for parents to take a “time out” themselves.

Before you begin to use time out with your children, it is important to tell them how it is going to work. Be sure to explain time out when you and the children are getting along and everyone is calm. Be specific in telling them the kinds of behaviors that will call for time out. Tell them where they need to be each time and how long they will need to stay there. Choose a safe, comfortable space for time out. Children need to feel comfortable so they can rest and think.

It can take a while to learn how to make time out work easily for you. Below are some things to remember as you are using time out:

- Be consistent in praising appropriate and positive behavior. This is the best way to help your child continue his good choices about behavior. Be consistent in using time out. Make an extra effort to notice and reward good choices after time out.
- Reserve time out for unsafe behaviors such as fighting or intentional destruction of things.
- Choose a time out space that is away from family activities, but safe and non-frightening. Use the same space whenever possible.
- Use time out right after the misbehavior occurs.
- Once the child is sitting in time out, join her. Ask her if she understands why she is in time out.
- Sit with the child to discuss alternatives to the misbehavior. Ask him what he could have done instead; then offer additional suggestions.
- If you are having a lot of difficulty using time out, or for help with other methods that parents have found useful, call one of the Parent/Child Centers, Parents Together, or one of the other family support services in the resource directory located in the back of this book. You will find support and more information about how to successfully use time out.



Learning includes reading, writing, speaking, and listening. When parents and schools work together, children gain skills they will enjoy for a lifetime.

Useful tips:

- Read aloud with your family as often as possible.
- Take time every day to listen and talk with your family about daily events.
- Be a good role model by writing and reading at home.
- Make writing tools available—paper, pencil, markers and books.
- Encourage your child to write in a personal journal.
- Visit the school and public library; get a library card for each member of your family.
- Start a personal library of books that your child may keep at home.
- Let children select books based on interest rather than ability.
- Share written messages or letters with each other.
- Read the newspaper and share local, state, and national events.
- Parents play the most important role in helping their child develop a lifelong interest in learning.
- Visit your child center/home care or school and talk with her classroom teacher and school librarian for more suggestions about learning activities at home.
- Vermont bookstores and public or school libraries offer a rich selection of resources for all children.
- Learning is a family affair!

Joan Fingon, Vermont PTA



Are you concerned your child may be one of over eight million youngsters who has a learning disability? If your child's school achievement is not on the same level as his overall intelligence, a good possibility exists that your child may have a learning disability. He may experience frustration, anger with himself and school and a lowering of self-esteem. Generally, such a student becomes "turned off" by school and loses interest in learning.

Most learning-disabled students exhibit some of the following characteristics. The fact that the student cannot function in school so as to achieve at a level in keeping with his ability is key.

1. Language

- Trouble pronouncing words
- Limited vocabulary for age
- Difficulty following directions
- Low reading comprehension skills
- Weak writing skills
- Poor spelling
- Trouble explaining himself-searches for words

2. Memory

- Trouble with learning of alphabet, math facts, months, days of the week
- Difficulty with organization of personal things and school materials
- Learning new skills requires a lot of repetition
- A hard time giving back learned information
- Difficulty studying for tests-frequently knows material at home the night before but can't do it for the test the next day
- Works at a slower pace than others his age

3. Attention

- Trouble sitting still
- Appears restless
- Leaves tasks incomplete
- Impulsive
- Makes seemingly careless errors
- Distractible
- Inconsistent

- A hard time managing his own behavior
- Knows a lot of small bits of unrelated information

4. Fine Motor Skill

- Clumsiness as a pre-schooler
- Avoids drawing activities
- Difficulty holding a pencil
- Hard-to-read handwriting. Avoids writing

5. Other

- A hard time managing physical space
- Difficulty interacting in social situations
- Misbehavior as a way to ask for information and new skills
- Few friends

If your child learns differently, then the school must provide a program that teaches to his learning style. If you as a parent have to teach your child, rather than simply reinforcing or helping him practice skills he supposedly learned in school, it is time to visit the school. When approaching the school, it is most important that you and the teacher share a common goal-the child's well-being — and are not on opposite teams.

A child with learning disabilities presents many unique challenges to himself, his family, and his school. It is most important to bring a feeling of success to your child by looking for his strengths and communicating these strengths to him. Seek support from other parents who have had this experience. You are not alone although this feeling may surround you from time to time.

Support groups are an excellent place for parents to express feelings safely and receive help. For information on finding support groups, call the Vermont Family Network at 1-800-800-4005, Circle of Parents at 1-800-CHILDREN, or 211.

*Mary Jean Thielen
Pine Ridge School
Williston, VT 05495*

Learning More: Understanding, the Most Important Grade

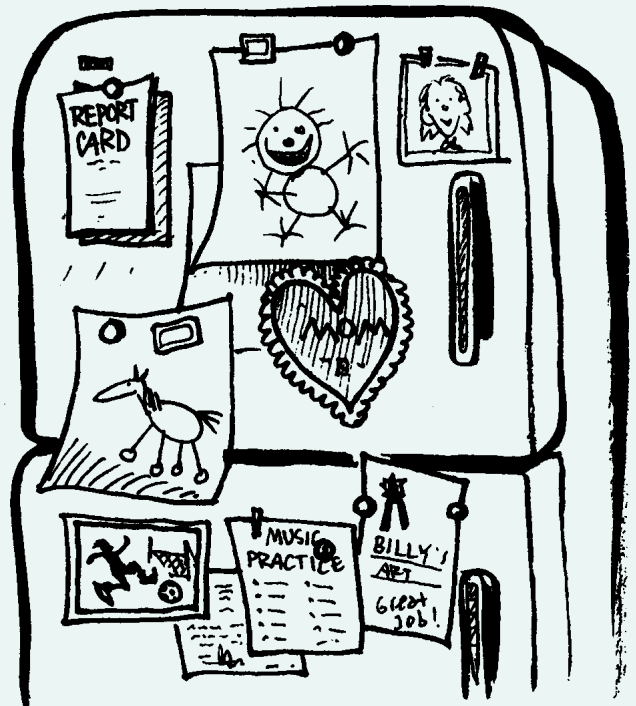
Grades are not everything.

Your child may excel in many areas and still not bring home the grades you expect.

Here are some tips at report card time:

- Sit down with your child and look over the report card.
- Ask your child what she has done well.
- Praise your child. Find at least one good thing: attendance, or no tardies!
- Be calm! Let your child tell you about the grades.
- Ask how you can help your child do better.
- Ask what your child can do to make better grades.
- Make a plan with your child's teacher and your child to do better.

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It's hard to listen to kids fight. Parents feel frustrated, angry and often helpless. They feel irritated because they have to decide when to ignore fighting (which is most of the time) and when to try to stop it (not often). Usually kids fight less if adults:

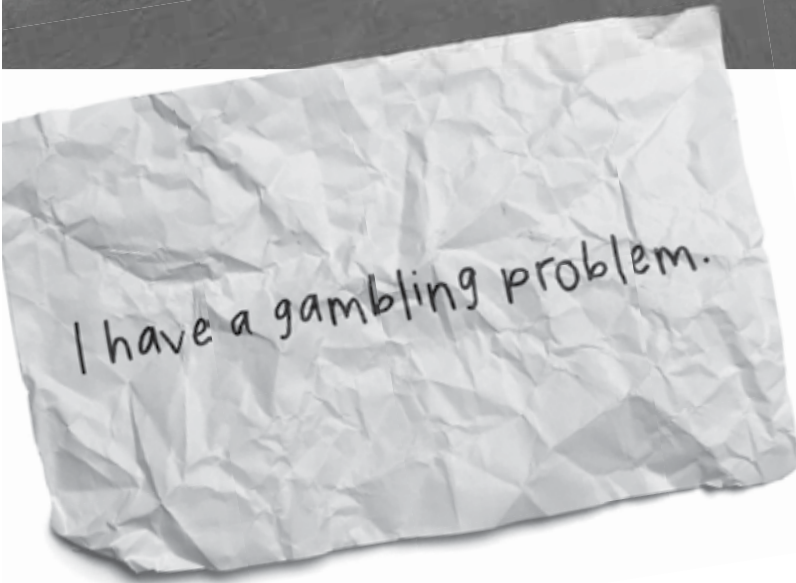
- Don't compare kids to one another ("If he can do it, so can you.") Comparisons make kids feel as if they are competing and they are more likely to fight.
- Ignore as much fighting as possible. If you pay attention to fighting, kids learn they can hook you into their problems. Let them learn to solve their own problems.
- Don't try to find out how a fight started or who started it ("All right, who hit first?" or "Well, what did you do to him?") Each one will blame the other. If necessary, separate the fighters for a few minutes.
- Let kids say their feelings ("I hate my brother," "I feel like bashing him", "I wish he'd never been born"). These feelings are NORMAL and will not go away because you say you don't want to hear them. Let kids know their feelings are okay ("I can tell you're really angry with him") but hitting someone is not okay.
- Give kids permission to do something to get their angry feelings out (run, take a break from playing together, breathe) in ways that don't harm anyone.
- When kids are hitting each other, you can say, "We don't hit; I'll give you one minute to solve the problem without hitting" or "You have a choice. You can stop fighting and keep playing the game or you can put the game away until you're ready to play without fighting." If this doesn't work, or if the fighting starts again, say "I can see you're still not ready." Take the game away, saying, "Perhaps you'll be ready later." When they ask for the game back, you may say, "I'm glad you're ready to play together now."
- Set a good example. Don't hit your children or anyone else.
- Praise kids and hug them when they cooperate with each other. Praise them for solving their own problems.

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Prevention

Distribution by: League Against Child Abuse, Ohio Chapter,
Prevent Child Abuse America, 360 S. Third Street,
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There is no magic age when a child is ready to stay by herself. All children are different, but a child under nine should never be left alone. To help you make a decision consider the following:

- How does the child feel about the situation?
- Look at her age in relationship to her growth behavior and judgment.
- What are the responsibilities your child will be left with?
- Will she be able to handle those responsibilities?
- How long will she be left alone? The first few times should be quite short. You will be able to stay away longer once she feels more confident about her safety.
- What are the safety risks if your child is alone? (fires, accidents, burglaries, etc.)
- Can your child say no to peer pressure if friends encourage her to break rules in your absence?
- Encourage the child to discuss feelings about being alone. If a child seems afraid, help her to talk about it and help her feel safe.
- Set up an emergency plan with a relative, friend or neighbor who may be unable to care for your child but who would be willing to be called by the child for advice and reassurance in “small emergencies” when you are unavailable by phone.
- When you leave, post the house address and important phone numbers where she can easily see it.
- Establish a daily routine in which your child calls you or the designated person when she arrives home.
- If your child comes home after school, give her keys and an attractive key chain. The keys should be carried out of sight so that the child isn’t easily identified as being on her own.
- Provide at-home projects and materials as well as nutritious snacks.
- Arrange some after school activities such as clubs, scouts, sports, or library. If you need help with transportation, make arrangements to trade weekend driving or sitting with other parents.
- Afterward, praise your child for doing a good job. You may be pleasantly surprised at how readily and how well she assumes responsibility when prepared and given the opportunity.

Whether children are home every day after school or once in a while when parents need to run errands, the experience can be made safer and more fun with some of the following tips:

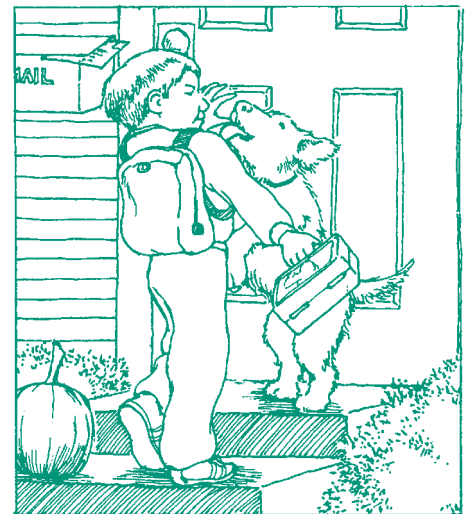
- Remove fire hazards and install smoke detectors. Hold fire drills with each child “practicing” what she is to do and where she is to go.
- Teach the children basic first aid and have a first aid kit available.
- Have the children rehearse emergency (911) calls giving their full address and directions if necessary.
- It is important that ground rules be established. This avoids confusion about what you expect and adds to the child’s own sense of security. Careful planning can help insure physical safety and emotional well-being for your child.
- Review safety rules such as not playing with matches, knives, or scissors.
- Have clear understanding about use of ovens, stoves, and other appliances.
- Instruct children not to tell callers they are alone; say that the parent is busy and offer to take a message. If a call seems suspicious, tell them to call you or another adult.
- Be sure to tell children not to open the door when you are not at home.

Books

Key Facts for Latchkey Families, by Family Services, 222 19th St., Norfolk, VA 23517

Handbook for Latchkey Children and Their Parents, by Linette Long

Prepared for Today, from Boy Scouts of America (No. 3941





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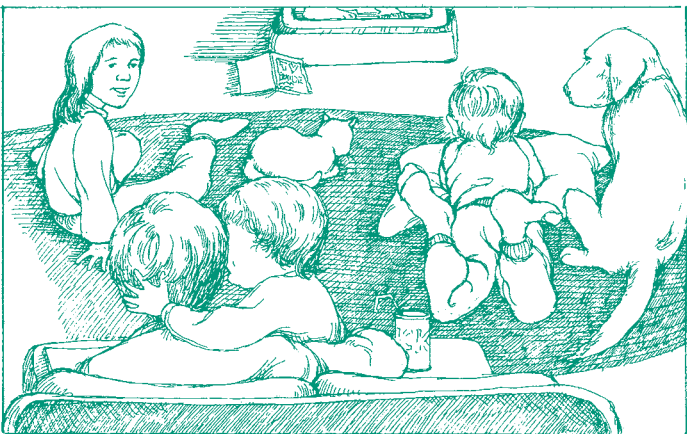
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Kids like television because it has pictures, sound, and action. Shows like “Sesame Street,” “Barney,” “Reading Rainbow” and “Bill Nye the Science Guy” can help kids learn about letters, numbers, colors, words and how things work. Children can also see adults and kids having fun and solving problems together. Parents like television sometimes just because it gets kids out of their way. On the other hand, television can have a bad effect on kids and give them messages parents really don’t want them to have. The way characters in programs act with each other is often violent and dishonest, even in cartoons. Kids can start to believe that this is how people act toward each other in real life, and that it is okay.

Let’s face it; we live in a “TV Culture”. Most American households have a TV and the majority has more than one. You can get TV by cable or satellite; you can even get TV on the computer now. You have the option of hundreds of channels from music to history to science to sit-coms. With so much to choose from why would anyone want to turn it off? Well, there are some very good reasons to “Turn the TV OFF!”

When a baby is born there is still a lot of brain development, which needs to occur. Nerves are connecting and forming a protective sheath called myelin. Once these connections are made and myelin is formed, it is permanent. The important thing that parents need to know is that the environment can affect how the nerves connect. Visual input to the brain of the infant will determine the way the nerves connect to each other. In the April 2004 edition of the medical journal, “Pediatrics”, a study was presented which showed a link between infants who watched TV and the development of Attention Deficit Disorder (ADD). This study showed that for every hour of television watched per day, two groups of children (ages 1 and 3) faced a 10% increased risk of having ADD. It is probably not the content of the show that affects brain development but rather the “unrealistically fast-paced visual images typical of most TV programming” and commercials that re-wire the developing brain. The American Academy of Pediatrics



If watching TV cannot be avoided, try the following:

- Have a “rule” that no one eats in front of the TV—only water drinking.
- During commercials, have your children do sit-ups, jumping jacks or running in place. This way, TV watching becomes an “action” activity instead of a sedentary activity.

TV watching is best as a last option for your child.

(AAP) recommends that infants and children less than two years of age not watch any TV.

When children watch TV, it is best to have rules. Some suggestions for reasonable TV watching are:

1. Turn the TV on just for the special shows you want to watch and then turn it off. Children will learn to do this as well instead of just turning it on and “vegging” out with it.
2. Watch TV with your children and explain the difference between what is pretend and what is real. Tell them what you agree with and what you don’t agree with.
3. Pick educational programs right for the age of your child instead of letting them watch soap operas or nighttime television.
4. Avoid using television as a “babysitter”. Children will get the idea that you think watching TV is good for them.

Another reason to turn off the TV is because it leads to a sedentary life style which promotes obesity. Americans are becoming obese at an alarming rate. There are many factors contributing to this but one main factor is increased TV watching. Make TV an activity. Encourage young children to play games, go outside or read books.

Bottom Line: Less TV is GOOD!

By Karyn M. Patno, MD.

To many people, discipline means verbal or physical punishment. But actually, “to discipline” means “to teach.” Discipline should therefore be a positive way of helping and guiding children to achieve self-discipline. Parents’ beliefs about what is good discipline will have a great effect on how their children live their lives and get along with others. Here are a few ways you can discipline your children without hitting them.

- **Set a good example.** Children learn more by how parents act than by what they say.
- **Praise children for their accomplishments.** Let children know you appreciate their efforts.
- **Involve children as much as possible in making family rules and decisions.** Children are less likely to break rules that they have helped establish. Involve them in determining the consequences for breaking the rules, too, so they know what they’re risking.
- **Try to ignore unwanted behavior unless it is causing harm to people or is otherwise destructive.** But do be honest with a child about the behavior that is annoying to you or other adults.
- **Act quickly when young children behave inappropriately.** Their attention span is short, so they may not link the action to the discipline if the time is too great.
- **Help your child develop inner control.** Remember that young children do not have the self-control needed to follow all the rules all the time, so don’t place temptation in their path.
- **Encourage independence in your children.** Let them make decisions that affect their lives, such as what clothes to wear or what food to order in a restaurant.
- **Take time to listen especially if they have a problem.** Offer guidance if -they ask for it, but don’t impose your views on them. They can only learn if they think out the answer themselves.
- **Be flexible.** Some rules may work when a child is young but are not necessary as the child gets older and more independent.
- **Set consequences that are not harmful in any way, but ones that the child does not like.** For example, remove the child from a stimulating environment or take away certain privileges for a set period of time.
- **Logically relate consequences to the behavior.** For example, if your child does not pick up his toys when he is supposed to, take them away for a few hours or a few days, depending on the age of the child.
- **Provide the consequence as a choice, so that it is the child’s decision.** For example, if your child is playing too roughly with other children, you could say, “Your behavior is upsetting me and the other children. You can either play gently with them or go for “time out.” You decide.”
- **Give children responsibilities, including household chores.** Having something important to do can help children achieve independence and develop high self-esteem.
- **Remember hitting or spanking is never okay.**

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Selecting the Right Pet for Your Children and Making the Introduction

For many children, the family pet is their best friend—a companion who not only provides unconditional love, but also teaches them about friendship, responsibility, loyalty and empathy. While most family pets are cats and dogs, other animals may also be appropriate for children. Rabbits, hamsters, gerbils, guinea pigs, small birds, and fish can make great family pets, as long as they receive the specialized care they need.

Pets may become upset by too much petting or stimulation. Teach your child to heed warning signs such as hissing, lip curling, retreating, and growling, that indicate her animal friend wants to be left alone. Other people's pets may feel and display discomfort if your child touches or even approaches them. Tell your child to get permission from an adult before touching another pet. Explain how some pets may feel threatened when stared at, cornered or hugged. Animals in pain may lash out or bite anyone who tries to touch them. Teach your child to leave an injured pet alone and to tell an adult about the animal immediately. Some dogs get excited and may even become dangerous when children scream and run.

Teach your child appropriate behaviors around dogs. Dogs contained in yards or cars may try to protect their territory if approached. Teach your child not to tease or get close to them. Dogs may become overly excited and dominant during games such as tug-of-war or wrestling, possibly injuring a child in the process. Teach your child not to play such games with dogs and to instead play fetch with a ball or Frisbee®.

How Can I Help My Pet Feel Safe?

Pets, like children, need time to adjust to new surroundings and circumstances and need opportunities for downtime. Provide pets with a place of their own where they can retreat from children. Don't put your pets in situations where they feel threatened. For example, dogs left alone in yards can be accidentally or intentionally teased by neighborhood children. What's more, pets live longer, healthier and safer lives when kept indoors with the family.

How Can My Child Help Care for a Pet?

Allowing children to help care for a pet teaches responsibility and instills a feeling of competency and accomplishment. Choose tasks appropriate for the age of your child. Even young children can be

involved in caring for an animal friend—selecting a new toy or collar, assisting with grooming, or carrying a food can.

How Can I Teach My Children to Take Good Care of Pets?

The best way to teach your children how to be responsible pet caregivers is to be one yourself. This should start before you even get a pet—make sure you have realistic expectations about pet ownership. And most importantly, select the right animal for your family at the right time.

As soon as you bring a pet into your family, set up and enforce rules regarding proper pet care. For example, tell your children not to pull the animal's tail, ears, or other body parts, and insist that they never tease, hit, or chase the pet. Teach children how to properly pick up, hold, and pet the animal. These simple lessons are essential to helping children become responsible caretakers.

Although certain pet-care activities must be handled by adults, you can still include your children by explaining what you're doing and why. For example, when you take your pet to the veterinarian to be spayed or neutered explain to your child how the operation not only reduces pet overpopulation but can also make your pet healthier, calmer, and more affectionate. Involve your children in pet-training activities, which will not only make your pet a more well-mannered family member, but will also teach your child humane treatment and effective communication.

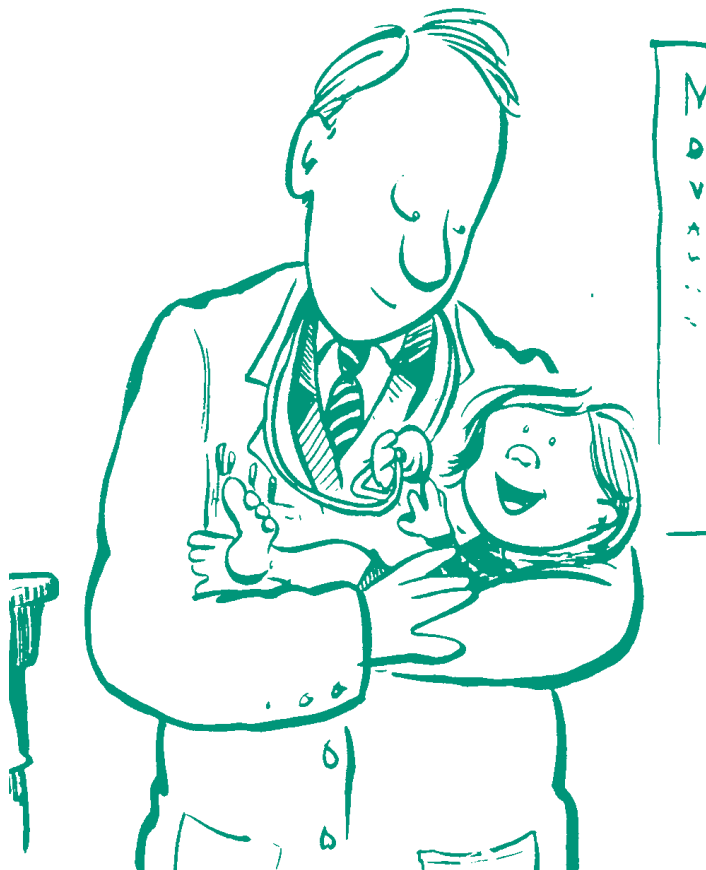
Ultimately, your children will learn how to treat animals—and people—by watching how you treat the family pet. They'll study how you feed, pet, and exercise your companion animal. Children will pay close attention to how you react when a pet scratches the furniture, barks excessively, or soils in the house. Frustrating as these problems are, giving the pet away is not fair to the pet and your children. It also sends the wrong message about commitment, trust, and responsibility. When faced with pet

problems, get to the root of the problem. Often a veterinarian, animal shelter professional or dog trainer can help you resolve pet issues so you can keep the whole family together.



Your child must go the hospital. Like most parents, you'll probably be concerned and unsure about what to expect. There are many people who can help to answer your questions. There are also people who can help to support you and your child with information or resources. Finding these resources, getting your questions answered and your concerns heard is sometimes the best preparation for taking your child to the hospital. Following are some important guidelines to remember:

- Get Information
 - Ask Questions
 - Get Support For You and Your Child
 - Support and Inform Your Child
 - You and Your Child Have Rights
- **At the Hospital:** You have the right to ask any questions you want about your child's care. You know your child best. You are your child's advocate in the hospital and have the right to question all aspects of your child's care. You can get information from hospital staff, your doctor(s) and the hospital social workers. Ask about care in the hospital, procedures, costs of care at home afterwards - anything that is important to you and your child.
 - **Supporting Your Child:** Remember, the more informed you are, the more you will be able to help your child understand what is happening. The information that you give your child will depend upon his age and interest. Your understanding can help your child feel more secure and less frightened in the hospital. And even more, parents who feel informed and in charge will be more emotionally available to give support to their child.
 - **Other Parents:** Many times you can get helpful information from friends and other parents who have gone through similar experiences. Talk with others about your questions. This can be a helpful way to prepare for doctor appointments and for the hospitalization. As you talk with others, write down your questions and fears. If you have them written down, you'll remember them and they will be easier to talk about when you are talking with medical staff.



- **Outside of the Hospital:** If you need more information or help, your doctor can often refer you to other agencies for assistance. Sometimes, you may need to find help or information on your own.

In the back of this book is a list of agencies that could assist you. Do not hesitate to call any of them. If they cannot help you, they will help you find the right place.

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Ask about substance abuse services.



Select the region you live in and call:

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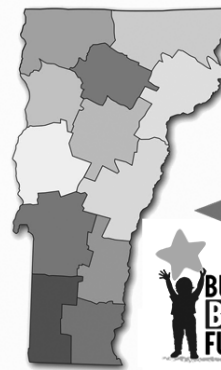
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Building Bright Futures Regional Councils are a central artery in Vermont's early childhood system of care, health and education. Regional Councils organize local communities to engage, plan and act.

LOOK FOR THIS MAP on www.buildingbrightfutures.org



Find us on and

Military families face many issues raising young children. Multiple deployments, combat injuries, and the challenges of coming home can have far-reaching effects not only on soldiers, but on their families. In Vermont, there are approximately 3,300 service members in the National Guard and 1,000 in the Reserves. In 2010, 1,500 Vermonters were deployed to Afghanistan. Nearly 80% of Vermont service members are married. There are also over 53,000 veterans living in Vermont.

Challenges for Military Family Members

Military service members often feel a high level of stress when they know they are about to be deployed. While they are away, they often worry about their children and spouse or partner. When they return home, they may have problems as a result of their service, and all family members face re-adjustment issues. A growing number of service members have been exposed to combat and have post-traumatic stress disorder (PTSD) and/or traumatic brain injury (TBI). There can also be effects on other family members, particularly spouses and children. This is especially true in situations where there have been more than one or long deployments.

One of the biggest challenges of all can be re-uniting with one's own family. The soldier as well as their spouse or partner must learn how to share parenting once again. Parents returning from deployment often think of their children as being at the same age and stage of development as when they left. This can lead to "missteps," difficult re-entry, and a sense of grief and loss for

time missed. There is also a huge re-learning curve for couples in reuniting and dealing with one another's new ideas, activities, and changes that may have taken place during deployment.

Strategies to Help Children

Children who are facing deployment of a parent or who have a parent deployed often show stress reactions and behaviors that are like those of children who have suffered a major loss. The following are ways to help children through their parent's deployment:

- **Make sure children know they are loved!** Whenever there is a stressful situation in a family, most children believe that it is somehow their fault. Providing them with consistent, loving assurance will help a great deal.
- **Learn about the location where your soldier is serving.** Use the tools at your fingertips...the internet, a map, or a globe. Learn together about where the service

continued on next page



member is going. Learning about the geography, weather conditions, cultural norms, etc. can ease the fears of children, and yours as well.

- **Be truthful.** Talk with children in ways they can understand, but be truthful. Listen to the questions they ask and answer simply. If the people around children can be honest yet sensitive, it opens the door for them to ask their questions.
- **Share your feelings.** Children may not be able to share their feelings easily. It will be very helpful to them if parents, or even trusted extended family members and friends of the family, talk about some of the feelings that they are experiencing. By doing this, you let them know that feelings, such as anger, fear, sadness, and even pride, are all okay and normal.
- **Parent as a team.** The most important way the parent at home can help their children keep a sense of stability is to maintain the feeling that you and your partner are parenting as a team. Children will feel better knowing that their parents are communicating, problem-solving, and meeting challenges together.
- **Communicate with teachers and others.** It is very important to communicate with those who also care for and

guide your children. Talk with your child care provider about what is going on. Let your children's teacher and school in on what is happening. Consult with your child's doctor, as needed.

Heather Green Hinckley, Family Support Programs Coordinator for Rutland, Bennington, and Addison Counties (and a military spouse) and Steven Ness, PhD, Family Support Programs Manager, Prevent Child Abuse Vermont

Call PCAVT at 1-800-CHILDREN.

Vermont National Guard: 1-802-338-3076 www.vtguard.com

Not only is there information about recruiting and links to all divisions, this website is also a resource for military members and their families during peacetime as well as times of training and mobilization. Resources include family readiness programs and family assistance centers which provide a variety of useful information, including assistance with a full range of situations and problems that can arise for families around deployment. Contact Mary Blow, Family Support Program Manager, Vermont National Guard, at (802) 338-3076 for further information.



The VERMONT DEVELOPMENTAL DISABILITIES COUNCIL is a state-wide board that identifies and addresses critical issues affecting people with developmental disabilities and their families.

Want to learn more? Visit the website at <http://ddc.vermont.gov/> or contact the Council by phone (802) 828-1310 or email vtddc@vermont.gov



Open communication throughout childhood is very important.

- Talk with your child every day and take time to really listen and observe. Learn as many details as you can about your child's activities and friendships. Encourage him to share good experiences and difficulties with you.
- Open up healthy communication with your children about sexuality, using simple and accurate language. After all, it is offenders who rely upon our silence!
- Teach children to identify their feelings, including the feeling of being mixed-up or confused. If they ever feel mixed-up or sad, let them know they can always ask you for help.
- Remind your child that sometimes we like touching and sometimes we don't, but that touching is **never** a secret. Children can say "no" to touching and that they must not touch someone else who says, "No to touching."



If You Think Your Child Has Been Abused:

- Believe your child. Children rarely lie about sexual abuse.
- Praise your child for telling you about the experience.
- A child's greatest fear is that he is responsible for the incident. Telling your child he is not responsible is extremely important.
- Control your reaction. Do not let the child see how upset you may be.
- Remember that taking action is most important. If you don't, your child and other children may continue to be at risk.
- Don't blame yourself. Sexual abuse is a fact in our society. Many people who molest children have access to them through their jobs, family, or community activities.
- Report the suspected abuse directly to the Vermont Department for Children and Families; 1-800-649-5285.

Grooming refers to the subtle and gradual process of building trust with a child and/or parents. This process may take place over weeks, months, or even years before any abuse takes place.

Offenders often start by grooming adults to ensure that their time with the child is welcomed and encouraged.

What to look for

While none of the indicators listed below necessarily indicate that a person is grooming your child or family, they are things to watch out for and ask questions about. Pay particular attention when an adult or older youth:

- Seems overly interested in your child and creates opportunities to spend time alone with him/her.
- Gives special privileges or gifts to your child.
- Befriends your family and shows more interest in a relationship with your child than with you.
- Plays with your child in a way that makes you uncomfortable.
- Seems "too good to be true" (e.g., babysitting for free, taking your child on special outings).
- Creates opportunities to be around your child outside the context of their given role.

*Vermont Department for Children and Families, 2010.
Step Up: Protect Children from Sexual Abuse
(with edits by Prevent Child Abuse Vermont)*

The Impact of Death on Children

By the time most of us are twelve years old, we understand that death is a necessary part of life — that all living things must die, that this stopping of life is inevitable and irreversible. Yet, even for adults, death and dying remain the most frightening of things we must deal with, and this fear often reduces us to feeling like children ourselves, once again: overwhelmed, out of control, at a loss as to what to do and how to behave. As parents, we must come to grips with the reality of death, find simple ways of explaining it to our children, and create our own family strategies to help them — and ourselves — cope with the many feelings of grief that come with losing someone we love.

Explaining Death to Children

It is vital to give even pre-verbal children explanations of death when a pet or friend or family member is dying or has died suddenly. Begin with the simplest, concrete and physical description of death as “stopping.” This will give you a chance to calm yourself and thus reassure your child with your matter-of-fact voice. “Our dog Mac is dead. His heart stopped working because he was sick and the medicine didn’t work. Everything living must die, the flowers, the trees, animals, and people too. When someone is dead he stops breathing, stop moving, stops eating, stops sleeping..” Kids readily understand this because it fits their own observations of nature.

Next you must reassure your children that they are safe and make it clear to them what has changed and what has not, in terms of their daily routines. “Mac is never coming back because he is dead. But Mama and Daddy will still be here when you come home.” Then children need to know what they can do about this death thing - we all feel better when we know what is going to happen next and what we can do to help. “We can bury Mac in the backyard and you can help dig the hole. We will put his body in it, then cover it up with dirt. All living things go back to being part of the earth when they die. We can plant some flowers on top of the dirt, so Mac’s body will help the flowers grow. This is the great circle of life-to death-to life.”

Many parents fear answering their children’s questions about death, but it is not necessary to have all the answers. It is vital that children get the message from you that their questions are welcome, and this is an open subject to continue exploring as they grow more and understand more. - just answer what you can honestly, then reassure the children that these are important questions that people have been wondering about for thousands of years. Then ask them, “What do you think happens to someone after he dies?” Kids always have their own ideas, and pick up others from popular movies and books. Show them that great music, paintings, and poetry have all been created by all people of the

world, trying to understand death just as they are.

Coping with Feelings of Grief

The trauma of losing a loved one to death can cause all of us to regress and become child-like, self-centered, and unable to help ourselves, let alone our children. The closer the death is to you the more you may need outside support for your child. Be sure to inform any teachers and care givers of the situation. Know that your child may return to younger behaviors such as sleeping with you, wanting to be rocked, tantrums or bed-wetting. These are normal, unconscious efforts to return to a time when life felt safer, and you should indulge them for a while.

Grief has a wide variety of expressions and you may see your child act out death situations in play. This is a healthy attempt to gain control over what is big and mysterious about life. You can encourage creative expressions of grief by drawing pictures of who died, using clay to act out what happened, and writing or telling a story about the event. It is very important that the children have opportunities to participate in rituals of remembering the dead loved one. This can be as simple as lighting a special candle together at the particular time when the grief seems to be bothering the child, or on holidays, birthdays or anniversaries of the death. This teaches children how to remember loved ones and to be comforted by memories and actions, rather than hiding from them in fear of becoming upset or upsetting the family.

Remember that your child needs to learn that death is a natural part of life, no matter how traumatic the dying may be. And feelings of grief and the mourning process are the normal way we understand and adjust to the loss of someone important. Children will naturally grieve in healing ways if we adults give them approval and support for these activities and lots of love during this difficult process. And you don’t have to go through this alone - your local library has many books for children and adults about death, and every part of Vermont has a local hospice with counselors experienced in helping people cope with grief.

Media is becoming more and more a part of American family life. According to the Kaiser Family Foundation, 68% of children ages 8-18 have a television in their bedroom and 37% have cable or satellite television wired into their bedrooms. Almost half of this age group have some kind of video game system in their bedroom. All of this access to media means that children are using non-school-related media for more than 6 hours each day, or 44 ½ hours each week! If children are spending this much time with media, it is very important for parents to consider the effects media can have on children.

Very young children are also exposed to television, videos, DVDs and video games. Over 80% of children age 6 months to 6 years use some type of screen media every day. Children in this age group spend about an hour and a half in front of the television every day, compared to 40 minutes of reading or being read to.

It is important to note that the American Academy of Pediatrics recommends no screen time for children ages birth to 2 years and that children over age 2 watch no more than 1-2 hours a day of quality (educational and nonviolent) programming. The first 2 years are crucial for physical, intellectual, social and emotional development. However, videos and DVDs that claim to enhance an infant's intelligence are one of the most popular baby shower gifts. It is important to know that there is no existing research that suggests that these products are good for children.

Consider these statements:

If your child watches three to four hours of non-educational TV per day, he will have seen about 8,000 murders on TV by the time he finishes grade school. (American Academy of Pediatrics).

A study at the National Institute of Mental Health found that children who see kindness on television tend to imitate it. For this reason, you may want to limit their viewing of violent programs and encourage them to watch shows that promote ideas about caring and helping. (American Academy of Pediatrics).

Even television shows and commercials targeted toward very young children have messages about sexuality, including dress, body image, relationships, etc. Research has suggested that the more sexually explicit television a child watches, the earlier they will become sexually active.

Media usage has also been shown to have an impact on a child's nutrition and activity level. Television and video games are very passive activities, and commercials are filled with advertisements for junk food.

Suggestions for Parents and Caregivers

Below is information on electronic ways to monitor what kinds of programming can be shown on your television. However, no safety plan you can put in place is better than watching television with your child. When watching TV with your child, talk about what might happen in the 'real world' if someone did the kinds of things that characters on TV do. Helping our children to look at television, movies and advertisements critically is an important gift we can give them.

TV Ratings (from www.tvguidelines.org):



All Children

This program is designed to be appropriate for all children. Whether animated or live-action, the themes and elements in this program are specifically designed for a very young audience, including children from ages 2 - 6. This program is not expected to frighten younger children.



Directed to Older Children

This program is designed for children age 7 and above. It may be more appropriate for children who have acquired the developmental skills needed to distinguish between make-believe and reality. Themes and elements in this program may include mild fantasy violence or comedic violence, or may frighten children under the age of 7. Therefore, parents may wish to consider the suitability of this program for their very young children.



Directed to Older Children - Fantasy Violence

For those programs where fantasy violence may be more intense or more combative than other programs in this category, such programs will be designated TV-Y7-FV.



General Audience

Most parents would find this program suitable for all ages. Although this rating does not signify a program designed specifically for children, most parents may let younger children watch this program unattended. It contains little or no violence, no strong language and little or no sexual dialogue or situations.



Parental Guidance Suggested

This program contains material that parents may find unsuitable for younger children. Many parents may want to watch it with their younger children. The theme itself may call for parental guidance and/or the program contains one or more of the following: moderate violence (V), some sexual situations (S), infrequent coarse language (L), or some suggestive dialogue (D).

**Parents Strongly Cautioned**

This program contains some material that many parents would find unsuitable for children under 14 years of age. Parents are strongly urged to exercise greater care in monitoring this program and are cautioned against letting children under the age of 14 watch unattended. This program contains one or more of the following: intense violence (V), intense sexual situations (S), strong coarse language (L), or intensely suggestive dialogue (D).

**Mature Audience Only**

This program is specifically designed to be viewed by adults and therefore may be unsuitable for children under 17. This program contains one or more of the following: graphic violence (V), explicit sexual activity (S), or crude indecent language (L).

**Information about the V-Chip
(from www.tvguidelines.com):**

Is there a V-Chip in every television?

The V-Chip is in every television set 13 inches or larger manufactured after January 2000 and some sets sold after July 1, 1999. This means if you bought a new television set after July 1, 1999, your television is most likely equipped with a V-Chip.

How do I program and activate the V-Chip?

Each television set's V-Chip works a little differently. Once you understand the definition of each rating and content label, programming and activating the V-Chip is as simple as following the set-up procedure which can be found in one of two places: 1) the television on-screen menu options, or 2) the written instruction guide included in the owner's manual. The V-Chip will only be activated if you select the option to do so.

How do I ensure that my child will not de-activate the V-Chip?

To activate the V-Chip, a parental lock code is required. This identification number acts as the password to activate, de-activate, and change the settings of the V-Chip.

Does the V-Chip turn off when I turn my television off?

Turning the television off will not turn off the V-Chip. It will continue to block programs when the television is turned on again.

What Do We Mean By MEDIA?

Children of all ages are encountering media in all its forms.

Here are some examples:

- Television
- Print (newspapers, magazines, books)
- Music & Music Videos
- Computer & Internet
- Video Games
- DVDs and Videos

What type of programming does the V-Chip block?

The V-Chip can block programming by age-based category or content label. For instance, if you want to block all TV-14 programs, you can do so by selecting TV-14. If you only want to block TV-14 programs that contain higher levels of violence, you can select TV-14-V. You should also know that when you block a particular rating or content label, all categories above that will be blocked. For example, if you block all TV-14 programs, all TV-MA programs will also be blocked. If you block TV-14-V programs, all TV-MA-V programs will also be blocked.

Can the V-Chip block out motion pictures that carry the MPAA rating?

Motion pictures that are uncut and unedited can run on premium channels (e.g. HBO and Showtime). You can set the V-Chip to block these programs using the MPAA rating system.

For more information on media's effects on children, please consider the following resources:

- Parent Help Line: 1-800-CHILDREN
- American Academy of Pediatrics: www.aap.org
- Campaign for a Commercial Free Childhood: www.commercialfreechildhood.org
- Kaiser Family Foundation: www.kff.org
- Television Ratings: www.tvguidelines.org
- Video Game Ratings: www.esrb.org

Courtney Gandee, MSW

The Impact of Divorce on Adults

Divorce is a very painful process for all involved. Parents often feel anger or hostility and experience grief and loss. Divorce is not only the loss of a marriage, but also often severely affects finances, lifestyles, friendships and family ties. Uncertainty about the future brings stress. It is natural for parents to feel confused, isolated and depressed.

While it is difficult to do at a time of such intense feelings, it helps greatly if both parents avoid blaming one another for the marital problems and begin working toward a successful parenting relationship.

The Impact of Divorce on Children

Children experience fears about their future. They feel a great sense of loss through the separation from one of the two most important people in their lives.

Young children often feel some responsibility for the breakup. Their behavior may regress and they may feel rejected by the leaving parent.

Older children often display anger at the parent they perceive as responsible for the separation. Their sense of personal identity is shaken. They suffer from issues of loyalty to one parent or the other.

Teens often feel a sense of right and wrong and may blame one parent. They also are affected more by financial insecurities. Teens have a need to confirm their sexual identity which can be confused by the ending of their parents' marriage. A new awareness of their parents as sexual beings may make them feel uncomfortable.



Guidelines for Parents

1. Give children permission to feel positively about both parents. Children gain their own self-esteem from their concept of both parents. When children are not allowed to feel good about both parents, their own self-esteem suffers.
2. Acknowledge that this is a painful time for everyone, and allow time for you and your children to adjust.
3. Parents must end their conflict and move forward. Continuing bitterness and conflict is more damaging to the children than the divorce itself.
4. Reassure children that they are not to blame for the breakup, and that they will continue to be cared for and loved, even when they don't express these insecurities.
5. Keep your criticisms and anger toward the other parent away from the children. This may be difficult, but it is essential.
6. Provide consistency wherever possible in friendships, school, daycare, neighborhoods, etc. Consistency in routine and discipline are important ways to offer a sense of security amidst change.
7. Encourage children to talk about the divorce and their feelings.
8. Remember the good times and talk about them with the children.
9. Seek support for yourself and the children through contacts with important others. Professional counseling may be very beneficial to help you and the children cope with the hurt and changes in your lives.
10. Make new goals for yourself. Your life is going forward.

Remember that how well parents adjust to the divorce will in large part determine how well the child will adjust.

*Prepared for the Vermont courts by the
Vermont Family Mediation Program,
P.O. Box 328, Worcester, Vermont 05682
(802) 223-3408*

Anyone who is one knows that being a stepparent is tremendously challenging, requiring the patience and tact of a career diplomat. There are no fool-proof rules for how to do it, but there are some general guidelines that can make your life as a stepparent a little smoother:

- **Go slowly:** It takes a lot of time for relationships to build. Don't expect to be an instant parent. Usually children have deep attachments to both of the parents even when one is absent and/or not supportive.
- **Be a friend:** develop a friendship. Spend time with the child doing things you both enjoy. Let the biological parent do most of the parenting, especially the discipline. If he or she wants you to take over a lot of the disciplining - resist. Your spouse may be looking for help and relief, which is understandable, but not a solution. Stepparents are not responsible for disciplining stepchildren. It makes things much clearer for biological parents, too, when this is understood.
- **Be a team:** work with your mate. If something one of the children is doing is driving you nuts - don't react, make a date to vent and problem solve with your mate. Let him know that you are not going to yell or scream at his children, but you may need to vent a little in his or her presence. This does not mean that you do not like the child, but that you are feeling frustrated and need to let off a little steam. Then the two of you can problem solve together. This is very important. A new stepparent yelling - hitting - scaring stepchildren is very damaging to the fragile bonds in a newly formed stepfamily. How you deal with conflict as a blended family will make all the difference in the health of your new family.
- **Have regular family meetings.** This allows everyone to have a voice. Having family meetings regularly promotes good communication and prevents little problems from growing bigger.
- **Take a parenting class** with your spouse so that you share a similar philosophy and skills.
- **Be respectful** of the child's relationship to their other biological parent. Support the child's relationship when you can do so honestly - avoid putting that parent down. If the other biological parent is hurtful to the child, still avoid negative talk, but help the child by expressing your caring and affection. Children suffer terribly from torn allegiances and need to feel that they

do not have to choose even when the other biological parent is obviously a less than great parent.

- **Remember being a stepparent means being a friend for life.** Be patient as you build this unique and rewarding relationship.

Karen Roos, Central Vermont Head Start



When a parent goes to prison, it affects the whole family. The parent in prison often feels guilt, sadness and shame. The parent who is left caring for the children often feels alone, afraid, and angry. The children often feel betrayed, afraid, and to blame for their parents' incarceration.

There are many things that the parent who is in prison and the parent who is caring for the children can do to make this difficult time a little easier.

Be informed — get as much information as possible — location of the prison, length of prison sentence, visiting days/times, environment for the visits (play area, physical contact), address for letter writing, what do the inmates wear for clothing, security procedures for visitors (metal detector, items appropriate to bring to a visit).

Talk with your children — children will have lots of questions for both of you. “Where is mommy/ daddy?” “When is he or she coming home?” “Can I come see you?” “Are you OK?” Allow time for your children to ask their questions. Answer the questions no matter how many times they are asked. Being informed as stated above will help you to answer these questions. Do not make promises if you will not be able to keep them, such as “I will be home for your birthday” or “I will talk to you everyday.” Answer the questions honestly and in a way that your children will understand, such as “I know it is hard for you to understand why I can not be home with you. You have not done anything to make me leave. I wish I were at home with you right now, but I can’t be. I am away from you because I am in jail.”

Keep communication open throughout the incarceration - your children will also have feelings that they may not express through their questions. Their feelings may change as time goes by. Don’t ignore what is happening. Ask your children about their feelings. Talk to them about their fears. Especially important times to talk to your children are: before, during and after visits (visiting a parent in prison can be scary, but preparing them for what this will be like can help relieve some of that fear), when receiving letters, and around special occasions such as the child’s birthday, a school play, and Christmas.

Support and encourage an ongoing relationship between your children and the parent who is in prison — it is beneficial for children to have healthy, nurturing relationships with both of their parents. There are many ways to maintain a relationship with your children while in prison, including visits, letter writing, drawing, and phone calls. You can read the same book as your children and then talk about it or you can learn about a topic that your children are learning about in school and share your information. You can talk with your children about school, their friendships, special occasions, and of course their feelings as well as your own. Let them know that you still love them, even though you can’t be with them everyday,

In some situations it is harmful for children to have a relationship with a parent who has been abusive. Social and Rehabilitation Services or the court generally makes this decision.

Focus on the children - children love their parents and don’t want to hear bad things about them. Spend your time with your children in positive ways. Do not put down the other parent or question the children about their parents’ behavior.

There are many children’s books available that deal with a parent going to prison, including:

- *When Andy’s Father Went To Prison*, Martha Whitmore Hickman
- *Let’s Talk About When Your Parent Is In Jail*, Maureen K. Wittbold
- *A Visit to the Big House*, Oliver Butterworth

For more information or support, call the Parents’ Stress Line at 1-800-CHILDREN.

Becky Corcoran, Former Director of Family Support Programs, Prevent Child Abuse Vermont

We all dream about what our children will be like when they are born and look forward with joy to their arrival. When we have a child born with, or diagnosed with a disability, our whole world seems to change in an instant. Feelings of shock, panic, numbness, anger, and disbelief are typical. There are so many questions and uncertainties. The first days and weeks can feel overwhelming and isolating. We are suddenly introduced to a maze of services and professionals, jargon and diagnoses. Fortunately, families don't need to travel this road alone.

People and resources are available to help children with special needs and their families as they navigate this maze. In Vermont we have a commitment from the state to ensure the coordination of services and supports for families with an infant or toddler with a disability. Children's Integrated Services/Early Intervention puts families in touch with people who can tell them about resources and supports that are available in their community.

Another source of support is provided through the Vermont Department of Health, Division for Children with Special Health Needs (CSHN). This program offers families with children who have complex health conditions assistance in getting the medical care needed.

Children's Integrated Services/Early Intervention (1-800-870-6758) will provide you with the name and number of a Community

Resource Parent in your region. For more information, or to apply for services, contact the CSHN Specialist at the Vermont Department of Health at their toll-free number 1-800 660-4427 (TDD equipped).

Just as it is important to identify resources and supports for our children in our community, it is essential that we, as parents, take time to identify our own needs as individuals. As parents of children with special needs, we do everything for our children that parents of "typical" children do and take responsibility for meeting the special needs of our children. This may involve, for example, regular and frequent medical appointments, home therapy sessions, appointments with physical and occupational therapists, and special educational interventions. We all need to take time to replenish ourselves, to take one day at a time, and to celebrate our strengths and accomplishments.

The pain we initially experience can be triggered again and again throughout our children's lives. Missed milestones, birthdays, holidays, and special events can all trigger strong emotions. When possible, talking about your feelings with your spouse or a trusted individual can help you work through some of your feelings. Talking with other parents who have children with special needs is often helpful. They have experienced similar challenges and can

understand your frustrations, anger, and fears, as well as share in the celebration of the many accomplishments and victories.

If you would like to talk with another parent who may have experienced the same kinds of feelings or have similar questions or concerns, please call the Vermont Family Network at 1-800-800-4005.

Our roles as parents change as our children grow from early childhood to adolescence

and we help them deal with personal changes as well as social and vocational issues. Some of us may become advocates, working to ensure that schools, recreational facilities and community resources provide an appropriate and welcoming atmosphere for our children. Full participation in their community life will help our children develop friendships and relationships that will sustain them throughout their lives.

The Vermont Family Network provides support and information to families regarding the education process and community resources. You may contact them by calling 1-800-800-4005.



Children are affected when one parent is physically and/or emotionally abusive to the other. Exposure to violence in the home can be traumatic for children. Children who have experienced domestic violence benefit greatly from the presence of consistent caring adults, increased safety, and ways to express their feelings. There are advocates and children’s mental health professionals who may provide support to help children heal.

Domestic violence is a pattern of coercive behavior used by an individual to gain and maintain power and control over an intimate partner. People who are abusive may use physical, sexual, emotional and economic abuse to maintain this control over their partner.

Children and teens who are exposed to abuse against a parent/caregiver may feel shame, embarrassment and that they are responsible for the abuse. Children may act out or withdraw, and may feel social isolation. They may appear to be ‘always on alert’ for scary things to happen. They may show physical signs like sleep or eating problems or experience abuse that is directed toward them. Older children may experience depression, run away, or engage in risk-taking behaviors like using substances.

Children are almost always aware of the abuse – even if they don’t ‘see’ a lot. Each child living in a home where their caregiver is being abused has a unique experience – even children in the same family can be affected differently. How children are affected by domestic violence depends on a number of factors. These factors can provide either strengths or challenges for children and include: the severity and frequency of the abuse, age and developmental stage, gender, birth order, and the strength of relationships that they have within their families and communities.

There are several factors that support children to heal and cope with violence against a caregiver. These include: a strong relationship with a caring consistent adult, safety, structure and predictability, a strong connection to family and community, and supportive ways to express their feelings about their unique experience. Children who live with abuse benefit greatly from the presence of caring adults who support these pathways to healing.

Vermont Statewide Hotlines:

Domestic Violence 1-800-228-7395

Sexual Violence 1-800-489-7273

To find your local Domestic and Sexual Violence program, go to **www.vtnetwork.org**

Or look in the resource section for programs in your county. The programs of the Vermont Network support victims and survivors of domestic and sexual violence across Vermont, providing:

- Confidential Advocacy
- 24/7 Hotlines
- Emergency Shelter
- Help with the Legal System
- Medical Advocacy

Family members have the right to be safe in their home and no one deserves to be abused. If you are being abused and need support, you can anonymously call Vermont’s statewide domestic or sexual violence hotlines where you will be connected to the Vermont Network program closest to you. You will have the opportunity to speak with an advocate who can offer you resources work with you to develop a safety plan for yourself and your children.

— Amy Torchia, Children’s Advocacy Coordinator
Vermont Network Against Domestic and Sexual Violence

Knowing What to Expect: Early Adolescence

Adolescence is a challenging period for both children and their parents. Three rather distinct stages of adolescence — early, middle, and late — are experienced by most children, but the age at which each stage is reached varies from child to child even within the same family. These different rates of growth are seen in three distinct areas: physically, intellectually, and socially/emotionally. For this reason, adolescents should be treated as individuals, and guidelines for areas such as levels of responsibility should be adapted to the particular child.

It's not always fun for parents, but it is true that teenagers learn who they are by experimenting with and deciding about who they are not. During early adolescence this accounts for the insistence on certain dress and/or music, the fascination for a best friend's family and their traditions, or, possibly, experimenting with the tenets of another religion. When young people do this, it does not mean that their parents have not been clear in expressing THEIR values but only that before teens are ready to adopt any values, they usually want to “test drive” others. Parents can best deal with this by modeling their own fair and humane values and continuing to listen to and learn about their teens.

- Gaining a sense of maleness or femaleness is an important stage of development. Both boys and girls need a period of time in which most of their activities are with members of their own sex.
- Membership in groups is important to the pre-teen. Scouts, athletic teams, and church groups are some ways of meeting that need.
- Having a hero or an adult to look up to is also necessary during this time. Special people outside the family, as well as relatives can be helpful.
- Curiosity about sexual matters increases in this developmental stage, so it is important that accurate information be made available. Preteens have new feelings about their own bodies; when we give them access to information, they can find answers there rather than in relationships with members of the opposite sex.
- Special athletic, artistic, academic, or musical talents often start at this stage. Areas of potential success should be encouraged and supported as much as possible as a means of helping the child to develop a good self-image.

Growth Areas

Physical – Their bodies are growing and changing; they have a new physical self to get used to. There are also hormonal changes, which the youngster cannot control, that lead to abrupt ups and downs in mood and feelings of vulnerability and irritability.

Intellectual – They begin to think more abstractly as adults and yet their emotions are often so intense that their thinking lacks objectivity. They become concerned with justice and equality. This critical eye on society also often leads to a judgmental eye on parents.

Social and Emotional - They are changing their self-concept and developing a sense of identity. That includes separating from parents, forming new and stronger identification with peers, establishing relationships with the opposite or same sex and choosing and pursuing career goals.

Often parents become overprotective and it is not always in the youngster's best interest. The following story illustrates this point:

Once upon a time a teenage boy was the student of a guru in India. The boy came to the guru one day to report that he had found a cocoon, and he was very excited about it. The guru advised the boy to watch the cocoon and when the butterfly started to hatch out of the cocoon to continue to study and watch but not to touch the butterfly. The boy went home and watched his cocoon for a long time. Finally, the butterfly started to crack the shell of the cocoon. The boy continued to watch for a long time, and very slowly the first parts of the butterfly inched their way out of the cocoon. The boy continued to watch for a long time and the butterfly continued to make the hole in the shell of the cocoon larger and larger and had more and more of its body outside the cocoon.

continued on next page

Finally the boy couldn't stand it any longer and gently reached in, grasped the butterfly, and helped the butterfly out of the cocoon. The butterfly fluttered up to the ceiling and then spiraled down to the floor and was able only to crawl. The butterfly could not fly. The boy was heartbroken. He ran back to the guru with tears in his eyes and told his story. Upon hearing what had happened, the guru said, "When you helped the butterfly out of the cocoon, you denied it the opportunity to strengthen its wings in the struggle."

Parents often try to do too much for their children and forget to start slowly letting go during adolescence. Giving their youngster the opportunity to do their own laundry, for example, is a way of showing them that you believe they are capable of doing it. Try letting them enjoy occasions to develop responsibility rather than presenting it, as with the laundry, as a punishment.

However, finding the right balance in letting go is very challenging. There are still many dangerous situations that make it important for you to pay careful attention. For example, it is always a good idea to speak to the parents at the home your youngster may be visiting to confirm that there will be adult supervision. Your child

may be annoyed with you but it also shows them how serious you are about their safety.

Self-Care for Parents

During this period of developing independence, look for opportunities for your child to spend time with other healthy adult role models. You can use that time to take a break from the intensity of this exciting developmental age and your young person will enjoy input from other sources.

Books

Changing Bodies, Changing Lives, by Ruth Bell, et al

You and Your Adolescent, by Steinberg & Levine

Between Parent and Teenager, by H. Ginott

How to Parent Your Teenager, by Fontenelle



Did you know that between 25% - 33% of U.S. students report having been bullied at school? Bullying is about power over another person, and that power differential can be based on age, size, strength, popularity in school (status), among other things.

Is your child being bullied?

Recognize the warning signs. These may include:

- Unexplainable injuries
- Lost or destroyed clothing, books, electronics, or jewelry
- Frequent complaints of feeling sick or faking illness
- Changes in eating habits. Your child may suddenly begin skipping meals or even seem hungrier than usual
- Difficulty sleeping or frequent nightmares
- Poor grades, loss of interest in schoolwork, or not wanting to go to school
- Sudden loss of friends or avoidance of social situations
- Lower self esteem
- Behaviors such as running away from home, self-harm, or talking about suicide

Worried your child might be bullying others?

Recognize the warning signs. These may include:

- Getting into fights (physical or verbal)
- Having friends who are bullies
- Showing aggressive behavior
- Frequent trips to the principal's office or detention
- Extra money or belongings that are unaccounted for
- Blaming others for their problems
- Being overly-competitive

Do you want to talk to your child about bullying?

Statistics show that the majority of children who experience or witness bullying will not tell an adult. There are many reasons a child might not tell, including:

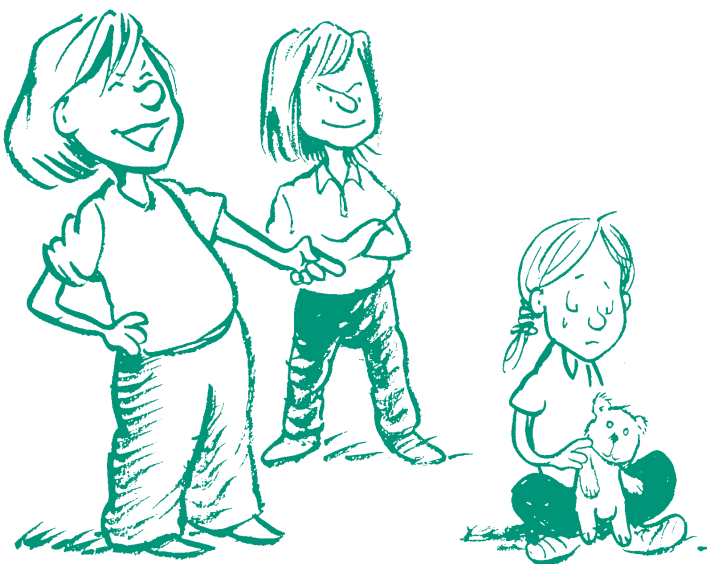
- Many children will fear being seen as a tattler.
- Kids may fear that telling will make the bullying worse.
- Kids may have been threatened to keep quiet about the bullying.
- Bullying can be embarrassing. Kids may not want the adults in their life to know about it.
- Kids may feel alone in the experience, like no one cares or understands their problems.
- Kids may fear being rejected by their peers and may be afraid of losing the support of their friends if they tell an adult what is going on.

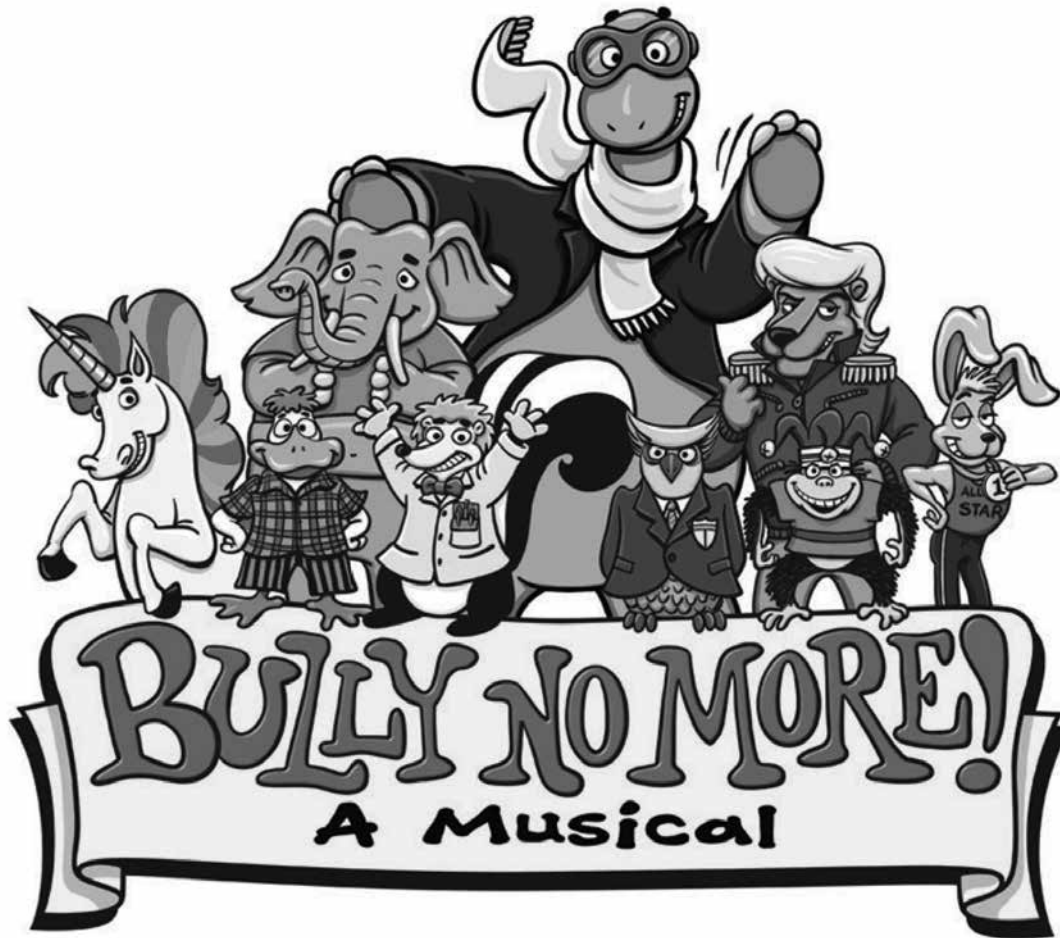
It does not feel good when you find out your child is being bullied, nor does it feel good when you find out your child is the one bullying another child. Below are some things you can do to help your child in either situation.

Things you can do if your child is being bullied:

- Encourage your child to share the good parts of their days and the bad parts of their days with you. Be "askable", which means letting your children know you are available to talk and listen anytime.
- Encourage your child to have/find solid, caring friends.
- Stay in touch with your child's school and make sure adults there know what is going on.
- Enlist the help of a mental health professional or a counselor outside of the school.

continued on next page





Perform *Bully No More!* at Your School!

Bully No More!, a new Tams-Witmark show, is a way to begin or strengthen anti-bullying programming in your school. The musical is appropriate for elementary, middle, and high school students. Direction and depth of production can determine the age level.

Music by Jon Gailmore and Vermont author Elaine D. Sklar. Every cast member has a solo singing part! Costumes can be realistic or avante-garde. Roles can be doubled, and a chorus can be added for a larger cast.

A Discussion Guide for student and adult audiences has

evaluation tools for bully prevention to use in conjunction with performances, written by PCAVT with contributions by Prevent Child Abuse America.

A portion of all licensing fees will be donated to Prevent Child Abuse Vermont. Visit the *Bully No More!* website at www.bullynomoremusical.com to find out everything about the show, and to order the guide. You may also call 1-800-975-7147.

Visit www.tamswitmark.com/show/bully-no-more to order a perusal copy, scripts, music, and to license the show.

***Bully No More!* contributes to a safe and positive environment
and may just change someone's life!**

Things you can do if your child is the one bullying:

- Stress to your child the seriousness of bullying and that it is not something you will tolerate from them.
- Encourage your child to talk to you about what is going on when they feel like bullying another child.
- Stay in touch with your child's school to make sure adults there know that you don't condone bullying behavior from your child, and encourage open communication between the school and you.
- Spend time with your child strengthening their skills/hobbies and praise them for trying new things.
- Enlist the help of a mental health professional or a counselor outside of the school.

To learn more about what bullying is, to find tips on how to talk to your child about bullying, or for more information on what to do if you know or suspect bullying has occurred, you may call 1-800-CHILDREN or please explore the following resources:

- <http://preventchildabuse.org/resource/parenting-tip-talking-about-bullying/>
- <http://preventchildabuse.org/resource/parenting-tip-cyberbullying/>
- <http://preventchildabuse.org/resource/preventing-bullying/>
- www.stopbullying.gov
- www.pacer.org/bullying
- www.netsmartz.org
- www.cyberbullying.org

Jennifer Casserly, M. Ed
Healthy Relationships Project Trainer
Prevent Child Abuse Vermont



The Healthy Relationships Project

The Healthy Relationships Project (HRP) of Prevent Child Abuse Vermont (PCAVT) is comprised of three child sexual abuse prevention programs: Care for Kids® (PRE-K through 2nd grade), We Care Elementary® (3-6 grades) and SAFE-T (Sexual Abuse Free Environment for Teens™), for 7th –8th grades. The programs include 6-10 developmentally targeted lessons for children, trainings for school faculty & staff, and parent education. An important message of the HRP is that adults, not children, are responsible for preventing child sexual abuse. The focus, therefore, of adult education is on what constitutes sexual abuse, recognizing signs and symptoms, grooming, and what to do if one suspects abuse. Programs are trauma-informed, meaning the language is chosen specifically to not re-traumatize those who have previously experienced harm, physical/emotional spaces are created in which people feel safe and ready to learn, and the focus is on social/emotional skill-building and education. PCAVT, through the HRP, has worked with school communities to prevent child sexual abuse for over 20 years. Schools today continue to play a critical role in creating safe and nurturing environments for children.



For more information, contact us
at **802-229-5724**,
pcavt@pcavt.org,
or learn more on our website:
www.pcavt.org

Care For Kids

Care for Kids® develops self-esteem and positive attitudes toward sexuality and gender, as well as promotes an understanding of body boundaries and empathy through its 6 lessons. A topic thread that ties all the lessons together is the idea that kids can ask for help from trusted adults.

We Care Elementary

This program emphasizes adult responsibility for protecting children from abuse and works to develop healthy relationship skills with children. Concepts addressed in the six lessons are: empathy, coping and accepting no, trusted adults, asking for help, recognizing feelings in ourselves, personal boundaries, and feeling mixed up and confused.

The Sexual Abuse Free Environment for Teens™ (SAFE-T) Program

This program addresses the roles of potential victims, victimization and bystanders. Consent is discussed in more detail, using previous HRP lessons as building blocks, which are needed to understand and value consent in relationships. SAFE-T's 10 lessons per grade build on the following concepts: Empathy, understanding one's own and others' feelings, coping with "No", and respecting self and others' boundaries.

Sometimes child abuse involves children who are sexually abused by other children. Right now, as hard as it is to accept, there are young people who are using threats, physical force, or harassment of younger or less powerful children.

Why would a child act in that way toward another child? Isn't this just kids being kids? Won't it stop if I ignore it? Does this mean my child's been sexually abused? What will people think?

Be brave; your child needs you to be direct and honest to help change the behavior. You do not have to do this alone. There are some very specific actions that you can take which will bring help to both you and your child. There are people in Vermont with extensive experience working in this area who will be glad to help you. They will help answer your questions and provide you with support.



Ways to Take Action:

1. Give your child clear messages that the behavior is harmful, unacceptable and, possibly, against the law, and that you are concerned, but that the child is loved and accepted. It will be helpful for you to name the inappropriate behavior and state how it affected the other child and you (i.e., "When you lifted Suzy's skirt, Suzy was embarrassed and I was uncomfortable.").
2. Give your child correct information and clear limits about what is "okay" and what is "not okay" behavior. This should include specific consequences for going beyond the limits as well as support for your child's steps toward responsible behavior. You may want to build a team of the adults who come in contact with your child in order to support changing behavior and provide caring and clear supervision. This team could include teachers, camp counselors, babysitters, sports coaches, and therapists, among others.
3. Get professional help to improve the chance of your child having a normal happy life. People learn abusive behaviors; people are not born knowing them, but the behaviors and their impact may not go away without specific help.
4. If your child has done something that makes you feel uncomfortable, but you are just not sure if it is abuse or harassment or "just kid stuff," ASK. The Vermont Center for the Prevention and Treatment of Sexual Abuse (651-1663) or Prevent Child Abuse Vermont (1-800-CHILDREN) will be glad to help.



Nurturing Safe Environments



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1-800-CHILDREN | pcavt.org
pcavt@pcavt.org

Keeping Children Safe in a Technology Saturated World

Today's world is full of technology and our children are saturated with it. As a parent, you may feel like your children live in this tech world where their language and activities are completely foreign to you. Technology can provide us with amazingly positive things. We have the ability to stay widely connected to friends, family, and community. We can share information in efforts to educate, inform, and activate change. Technology is also the new way of communication in nearly every aspect of our lives (academic, professional, and personal). Unfortunately, with the many wonderful things technology offers, there are also several potential risks. Risks such as cyberbullying, sexting, exposure to violent and explicit content, online predators, Internet scams, etc., are harmful to our children if we do not protect them or show them how to use their technology safely. Just as you monitor your child's activities in real life, it is important to pay attention to what they are doing online and to help them use these technologies in the safest ways possible.

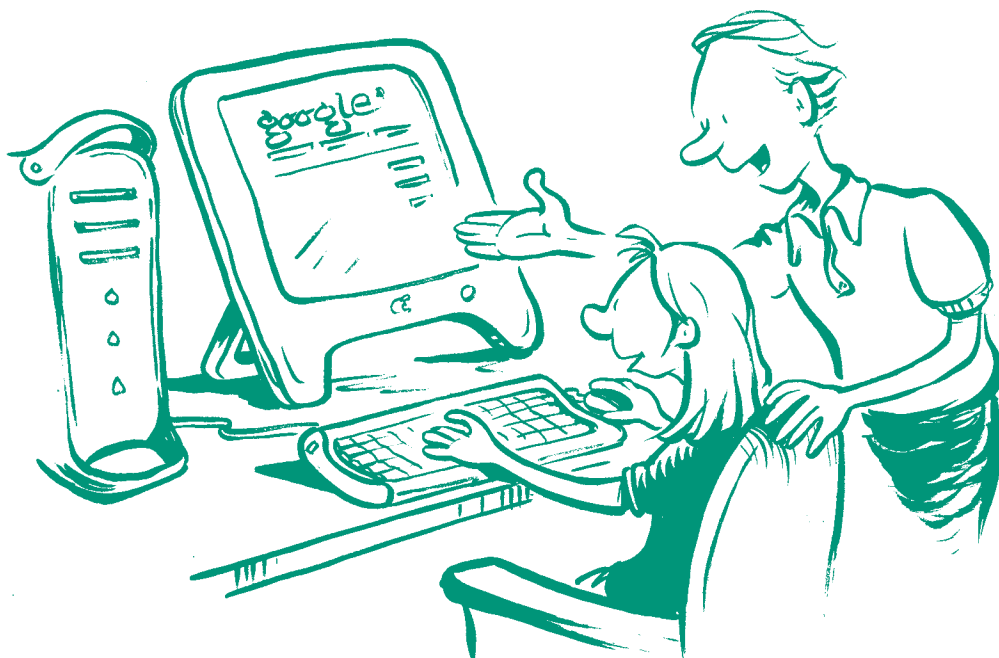
Many tweens and teens are using the Internet as a primary method of communicating with friends. Social networking sites (SNS) like MySpace and Facebook and messaging services like Gchat, Yahoo or MSN Instant Messenger allow them to post pictures of themselves or others, post and share blogs, send messages, and chat live with friends. Unfortunately, these sites also allow predators to seek out potential victims as they can search for users by age, sex, location or other personal information, especially if children's user profiles are not made "private."

The Facts:

- One in five children are sexually solicited online each year. (ncmec.org)
- 55% of online teens age 12-17 use social networking sites such as MySpace or Facebook. (PEW/INTERNET Study)**
- The National Center for Missing and Exploited Children reported that Online Harassment has increased by 50% since 2001. (ncmec.org)
- 71% of teens reported receiving messages online from someone they don't know. (netsmartz.org)

However, Internet abuse is not limited to strangers and is, in fact, more likely to be committed by a person your child knows. Cyberbullying is the online risk affecting the largest number of children, and is usually done by a child's classmates and acquaintances.

Cyberbullying is any form of bullying behavior (intentional and repeated behavior meant to hurt, annoy, or embarrass the target) that takes place in cyberspace. Cyberbullying can involve cell phones and social networking sites as both of these technologies allow for the posting of embarrassing photographs and/or the spreading of rumors. Most cyberbullying is done for revenge or in





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Learning More: Keeping Children Safe in a Technology Saturated World

retaliation for being cyberbullied. Our children can get caught in vicious cycles of negativity if they do not understand the risks of bullying behavior and the ways to access supports when they need them.

Some cyberbullying spurs from “sexting,” the act of sending or receiving sexually explicit images or messages via communication devices like cell phones. Sometimes these pictures are shared widely, despite the desire or intention of the person being photographed. Technically, this behavior is illegal because nude pictures of anyone under age 16 may be considered child pornography and it is illegal to possess, manufacture, or distribute child pornography. Many adolescents do not know that sexting is illegal. Some may know that it is dangerous but do it anyway. A lot of them also know that it is possible for the sexts they send to be shared, but they trust the recipient to keep them private. Unfortunately, technology makes it quick and easy to widely distribute these images.

Fortunately, there is a lot you can do to help keep your children safe. We have provided some things you can do to protect your tech-savvy kids.

Things Adults Can Do To Protect Our Tech-Savvy Children

Communicate. Talk to your children about media messages and technology. Counteract what they have heard and learned with what you want them to know and do. Explain to your child that once they have put something out on the Internet (pictures, text, posts, videos), there is no way to “take it back.” It is best to never write, send, receive, or post something online that they would not want the whole world to see or know about themselves or anyone else.

Supervise. Just as we would want to physically know where our children are and what they are doing, we need to know where they are going, what they are doing, and who they are meeting on the Internet. Try Googling your child to see what information about them is already online. Let your child know you would like to see their online user profile(s) if they have one. Checking up on a child online for their safety is very different than snooping in their room for their private diary. If you are concerned about a child’s Internet activities, you are not alone. Please consult a professional who can help you and your child. Call 1-800-CHILDREN for more information and resources.

Be informed. Adults are often intimidated by how much they do not know about computers, but our children need us to learn in order to better protect them. Look for community classes on computers and software (often given at public libraries or schools for free), enlist your child as your teacher, and/or research Internet safety.

Safety-check your computer. Review your Internet’s website history and cookie files. Doing this will inform you of what websites have been viewed and what programs have been used recently. Be mindful that many children and adolescents know how to clear a browser history or delete records of certain websites. Fortunately, fewer children will clear cookie files. You can also look into filtering and monitoring software meant to help you with supervising your child’s online activity. This software can help ensure that your child does not run into inappropriate, sexually explicit, or violent content while doing a search on the Internet. However, these software programs are not a substitute for adult supervision of online activities. Tech-savvy young people can find ways around even the best filtering and monitoring software.

Keep computer and cell phones in a safe-space. Keep the computer in a common room and have children leave their cell phones in a common room before bed, too. Children who have computers with Internet access in their bedrooms are much more likely to experience problems online. Be aware of wireless networks in and around your home where children might gain access to the Internet on their computers or hand held devices.

Create technology-use rules. Discuss with your children what is allowed and what is not allowed with the technology they have access to. Rules may include how often and for how long they may use technology; what they may use technology for; where they may use it; who they may talk to; etc. Review these rules with your children every few months and see if anything should be changed. Children sometimes hear about new tricks or dangers online before adults do.

NTK (Need-to-Know) Definitions:

Definitions cross-referenced with www.techterms.com and www.techtarget.com

Avatar: A virtual character representing the user. Avatars are commonly used in multiplayer gaming, online communities, and web forums.

Blog (short for “web log”): A series of posts, similar to private entries in a journal or diary, written by a user and posted on a blogging web site. Via blogs people can share their personal thoughts, feelings, opinions, and experiences with thousands of people who are online.

Chat room: An online “room” (or designated space) where users can post messages and type to one another. Chat rooms can be organized by particular topics of interest or by a particular group of people, i.e. “music” or “teens”.

Cookie: Data sent to your computer by a web server like Internet Explorer. Cookies record your actions on a particular web site.

Learning More: Keeping Children Safe in a Technology Saturated World

Cyberspace: This term is used to describe the virtual world. Anything said to be in cyberspace refers to data floating around the Internet.

Cyberbullying: Any form of bullying behavior occurs on or through a communication device (i.e. computers, cellphones or gaming consoles.)

IM (Instant Message): A typed message sent instantly to another person who is using the same instant messaging program on the Internet. IM programs allow you to have several different conversations at the same time.

MMORPG (Massively Multiplayer Online Role-Playing Game): A role-playing game that is played in cyberspace with a large number of players who interact with each other inside the game and sometimes outside the game via IM or microphone. Many of these games also require gamers to have an avatar.

Online: To be “online” typically means that a person or device is connected to the Internet.

Private profile: Information that is entered into one’s user profile and is only seen by people that the user has given permission. Private profiles do not guarantee complete privacy.

Public profile: Information that is entered into one’s user profile and can be seen by anyone who also has an active profile with that particular program or in some cases anyone with Internet access.

Sexting: The act of sending or receiving sexually explicit images, message, or videos (in some cases) via communication devices such as the Internet or cell phones.

SNS (Social Networking Site): Online communities where users have profiles, can add friends to a contact list, send messages to other users, and leave comments directly on other people’s profile pages. Popular SNSs are Facebook and Twitter.

Texting: Sending short text messages between cell phones, pagers, or other communication devices. Users can also send text messages from a computer to a handheld device such as a cell phone or pager.

Username: A name that uniquely identifies someone on a particular computer or software program. Usernames are created by the user and can be the same or different for various accounts requiring a username.



User Profile: An online record of user-specific data including privacy settings, network connections, social connections (i.e. people and/or groups they are connected to), and personal information the user has chosen to post. SNSs function via user profiles.

Webcam: This is a combination of the word “web” and of “video camera.” Webcams broadcast video on the web. They are small cameras that are built into the computer, attached onto the monitor, or sit near the computer. They are often used during video IM conversations or chat room sessions.

For more information on how to keep your children safe online and with wireless technology, visit www.technicoolvt.org or www.connectsafely.org for a comprehensive list of Internet safety resources. Report any disturbing incidents or suspected predators at cybertipline.com or call 1-800-THE LOST (1-800-843-5678).

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Here are steps you can take to help your children choose not to abuse alcohol and other drugs:

- **Be a Good Example.** Parents are the strongest influence on children. They can use this influence to help their children avoid abusing alcohol and other drugs by modeling moderate drinking behavior and by avoiding the use of illegal drugs.
- **Help Your Child Feel Good About Herself.** A child who feels positive about herself is more likely to have the self-respect to say “no” to alcohol and other drugs. Here are eight ways a parent can increase a child’s self-esteem: a) Give lots of encouragement; b) Praise effort, not just accomplishments; c) Help your child set realistic goals; d) Don’t compare your child’s efforts with others; e) When correcting, criticize the action, not the child; f) Take responsibility for your own negative feelings; g) Give your child real and appropriate responsibilities; and h) Show your children you love them.
- **Learn to Really Listen to Your Child.** Children of all ages are more likely to talk to parents who know how to listen - about alcohol, other drugs, and other important issues. Here are five listening skills that parents can use to help them communicate with their children: a) Restate your child’s comments to show you understand; b) Watch your child’s face and body language; c) Give nonverbal support and encouragement (a smile, a hug, a wink, a pat, reaching for your child’s hand); d) Use the right tone of voice for the answer you are giving; e) Use encouraging phrases to show your interest and to keep the conversation going.
- **Talk with Your Child about Alcohol and Other Drugs.** Television and movies are a major source of information about alcohol and other drugs. Yet, many of the impressions about drinking that kids get from the media are wrong. Get the facts, and emphasize that any use of alcohol and other drugs is dangerous and illegal for children.
- **Help Your Child Develop Strong Values.** A strong value system concerning personal health can give children the courage to make decisions based on their own value of health rather than peer pressure.
- **Help Your Child Deal with Peer Pressure.** The following skills will help you to help your child say “no” to alcohol and other drugs: (a) Teach your child to value individuality; (b) explore the meaning of “friendship” with your child; (c) Give your child the support needed to say “no;” (d) Know the facts about youth drinking; (e) Use peer pressure in a positive way by encouraging youth groups in which children support each others’ positive values; and (f) Have your child practice saying “no.”
- **Make Family Agreements that Help your Child Say “No.”** Contrary to popular belief, children want structure in their lives. They behave more responsibly when parents set limits. Discuss with your child how you expect him or her to behave and the results of doing or not doing it. Make sure your child knows that under no circumstances is she to experiment with alcohol and other drugs. Family agreements automatically give your child an easy way of saying “no” to peer pressure.
- **Encourage Healthy, Creative Activities.** Support your child’s involvement in school activities, sports, hobbies, or music without pressuring your child to always win or excel. Also, do things with your child. The key is togetherness — children appreciate the time parents spend with them, even if it involves doing chores.
- **Team Up with Other Parents.** When parents join together in support groups, they can take broad steps that will reinforce the guidance they provide at home. Your group can raise the issues of alcohol and drug abuse with community organizations like parent teacher organizations, churches, youth groups, health care facilities, etc. You can use your group’s voice to influence school and local government policies that can affect youth alcohol and other drug use.
- **Know Where to Go for Help.** Call your local treatment agency and find out how they work with children and families. Tell your child you will not hesitate to get an alcohol and drug assessment if you think she is having a problem with drugs. If you observe major changes in your child’s moods or behavior that concern you and if your child is not responsive to your concern, get in touch with a treatment provider and get your child assessed. Problems with alcohol and other drugs don’t just go away. The earlier the intervention, the greater the likelihood of surer and faster recovery.



Prevention, intervention, and treatment resources are available throughout the state. For more information, call the Office of Alcohol and Drug Abuse Programs (ADAP) at 241-2170.

Middle adolescence is a stage of confusion. Rapid growth and sexual maturation combine with an ever-increasing need to be independent from parents. Hormones have more control of their moods than they do.

- Young people at this stage have a strong sense of fairness, and they become very judgmental if adults or peers do not do what is “fair”.
- A deep need for love and acceptance by parents and peers is typical, but often they hide such needs in an effort to act grown up.
- Annoying habits such as refusal to wash, poor manners, and untidy dress are normal ways in which children try to become independent.
- A physical need for extended periods of rest is normal. Often parents think sleeping late on weekends and during school breaks is a sign of laziness, but most young people need more rest during this stage than at any other stage since infancy, and too little rest can result in moodiness.
- While few will admit it to parents, young people at this stage find security in structure. When setting and enforcing rules, keep the following points in mind: When a rule is presented, explain the reason for it in twenty-five words or less. The risks and consequences of breaking the rule should be made clear along with exactly what is not allowed.

- Recognize that their appearance is their own problem and set strict standards only when it’s important to you, (going out to dinner, for example).
- Try to be cheerful and ignore their moods as much as you can.
- Make sure your expectations are reasonable and praise them when they do well.

Self-Care for Parents

When you hear, “I’m the only one who has to...” check out rules with other parents. You are not the “meanest parent in the world”! Remember when you were a teen and all the scary and confusing feelings you had.

Books

Living With Teens and Surviving, by P. & M. Woods

Between Parent and Teenager, by Haim Ginott

Teenagers: The Continuing Challenge, by Shirley Gould

If you have concerns about your child’s development at any stage, visit your pediatrician or local clinic.

For more detailed information on the different stages of child development, consult your local library, parent/child or family center, health department, mental health agency, social services, hospital or your pediatrician.



As a parent we feel helpless as we watch our child make mistakes or feel pain or sadness. As parents of teenagers, we often have that feeling as our children learn life's lessons from which we cannot and should not protect them.

But what about when it seems that the adolescent is hurting for too long? When he just doesn't bounce back? When the usual positive events and occurrences just don't seem to make a difference? How do you know if your teen is becoming depressed or even suicidal?

There are some general warning signs to look for. They include:

- loss of interest in activities, sports, school, or any other area in which he was usually interested;
- changes in eating habits;
- changes in sleep needs or cycles;
- mood changes — can be either angry, irritable or withdrawn—that stay without any obvious reason;
- strong tendencies to blame himself for all negative happenings;
- “ending” behavior: giving away possessions, tying loose ends, saying good-bye through words or actions.

It is important to remember that any of these “warning signs” can and do occur perfectly naturally for all of us at one time or another in our lives. What parents need to be aware of are the sudden changes and/or symptoms that seem to hang on. It is also of greater concern if a teen seems to be struggling with more than one of the behaviors listed above.

If you have concerns that your teenager is depressed or suicidal, there are some steps to take. First, talk honestly with him, letting him know your concerns. It is better that your child think you are slightly weird than suffer alone thinking you haven't noticed. Second, offer to get both him and yourself some support and professional help. Serious depression requires counseling and, sometimes, medication. Third, let your teen know that you are willing to hear and act on whatever is feeling so overwhelming to him. Depression is an expression of tremendous pain and hopelessness. Knowing that he is not alone can be a light with which he can begin to see the way out.

For help and information contact: Center for Health and Learning-Umatter

28 Vernon Street, Suite 319

Brattleboro, VT 05301

Phone: (802) 254-6590

Email: info@healthandlearning.org

Suicide Prevention

Mental and Emotional Health

Books

High Times/Low Times: How to Cope with Teenage Depression,
by Meeks

Parents of Teenagers Alert!

The law has changed. The new law states:

No person shall engage in a sexual act with a child who is under the age of 16, except:

- *Where the persons are married to each other and the sexual act is consensual; or*
- *Where the person is less than 19 years old, the child is at least 15 years old, and the sexual act is consensual.*



Rebellion, drama, risky behavior, these are all common among adolescents. But when does it become too much? When should parents become worried that their teenager might be depressed or suicidal?

Research indicates there are a number of warning signs that might mean that a teenager is thinking about or even planning suicide. As a parent, if you see any of these warning signs, take action to keep your children safe. Warning signs include:

- Threatening suicide or talking about a strong wish to die.
- Looking for guns, medications, poisons, or other dangerous things.
- Talking, writing, drawing, emailing or texting about death, dying, or suicide.

If you see these behaviors in your children, begin a conversation. Try to find out what these behaviors mean for them. If it is just a matter of curiosity, children will let you know. But if they are seriously considering suicide, a teen may not give you a straight answer. In that case, get some help. Contact a school counselor, mental health professional, or call 9-1-1 if you think your teen may be at immediate risk.

We know that depression is the way many suicides begin, so it's a good idea to watch for signs of depression such as...

- Hopelessness
- Rage and anger – especially in boys
- Feelings of being trapped
- Withdrawal from friends, family, and activities that were once enjoyable
- Sleep problems

- Dramatic mood swings
- Persistent physical complaints
- Low mood for more than two weeks
- No sense of purpose in life

When you notice these signs in anyone, there are four simple but very helpful steps you can take:

- 1. Show you care** – Listen with your full attention. Be supportive, non-judgmental, honest, reassuring and tell your child you understand they are in a lot of pain.
- 2. Ask about suicidal thoughts**– Say something like, “Are you thinking of hurting yourself?” or “Are you thinking life is not worth living?”
- 3. Get help** –Make sure to not leave them alone and make an appointment with a mental health professional.
- 4. Offer hope** – Help them see that their life has purpose, people need them, and that they have an important role to play in their family, school, community even if it doesn't feel like it right now.
- 5. Express your love and commitment to your child.**

Remember, never leave a suicidal person alone or with the ability to obtain car keys, firearms, medications, sharp objects, ropes, or cords that they could use to hurt themselves.

For more information about suicide and how to help someone you care about, call 2-1-1 in Vermont or the National Suicide Prevention Lifeline at 800 273-TALK. You can also find information about suicide prevention at www.UmatterUCanHelp.com.

— Brian Remer, Vermont Youth Suicide Prevention Project
www.UmatterUCanHelp.com

Pornography's Impact on Children's Sexual Development

Pornography is a common source of sex education for children and teens in the United States today. Studies vary, but on average the majority of both boys and girls have seen pornography by age 12 – about one third by age 10. As one study of mainstream porn videos clearly demonstrated, the vast majority of ‘sexual’ acts show violence and degradation. Positive sexual behaviors are shown in less than 10% of the scenes. Images often include body punishing sex acts, particularly toward females. Sexualized references to teens and children are not uncommon.

While many are concerned about all sexually explicit materials – this alone is not what causes harm. What is increasingly linked to various kinds of harm are exploitive materials – those that show violent language and degradation of women as arousing and sexy. The harm includes:

- Girls identifying themselves primarily as sexual objects and as “things” for the sexual use of boys.
- Boys believing porn shows how they should treat girls and that girls want to be treated that way.
- Possibly being aroused by acts of violence they see in the images
- Lack of access to healthy images, messages and information
- Having difficulty getting the memories of images out of their minds
- Getting information/images that are too much for their age and stage of development
- Such easy access to porn that it seems as if it is okay. For example, porn can pop up accidentally even in unrelated Google searches.

Yesterday's porn is today's mainstream media and today's mainstream media too often shows children as sexual objects for adult interests. It can feel overwhelming to give children healthy messages with such unhealthy images and messages in everyday advertising, TV, music and the internet. We know prevention involves making the healthy choice the easy choice and yet so much of what is in pornography and “pornified culture” normalizes unhealthy, toxic choices and arousal.

Caring adults need to consider the reality that we have all been affected. Adults have been made to feel that to not appear uncomfortable with sexuality, we have to accept that pornography is normal and beyond question. However, when we are silent, we risk approving pornography as part of our children's and teens' understanding of sexuality.

Things you can do:

- 1) Talk about pornography and take opportunities for discussion when you and your children witness harmful messaging together. Discuss the differences between pornified images and those that are realistic, respectful, and not degrading or abusive.
- 2) Be aware of how the content, reach and messages have changed – your first experiences with pornography were likely quite different than that of your children's, in part due to the internet.
- 3) Know that internet filters and monitors, although helpful, cannot protect your child from the attitudes, language and actions of friends and others who are exposed to pornography.
- 4) Help your boys and girls to speak up when they are offended or don't want to look or to act like what they have seen. Adults and youth all need to find ways to respond to these social pressures.
- 5) Recognize that those who profit from this want it viewed as simply sex. We need to name it as harm, and not buy the lies!
- 6) Allow love, respect and intimacy to be our response to “pornified culture.”

It is no small challenge to raise sexually healthy boys and girls, but it is possible. We all have a right to demand and create a different environment for our children.

— Cordelia Anderson, President,
Sensibilities Prevention Services, Minneapolis, MN

Sources

Bridges A. J., Wosnitzer R, Scharrer E, Sun C, & Liberman R. (2010). Aggression and sexual behavior in best-selling pornography videos: a content analysis update. *Violence Against Women*. 16(10), 1065-85.

Skau, Bente (2007) *Who has seen what when? Pornography's contribution to the social construction of sexuality during childhood and adolescence*. Doctoral Dissertation. Retrieved from Library and Archives Canada.

Additional Resources

Sensibilities Prevention Services, www.cordeliaanderson.com

Stop Porn Culture, www.stoppornculture.org

Be Web Aware, www.bewebaware.ca/english/pornography.html#tips

Anderson, Cordelia. (2012). *The Impact of Pornography on Children, Youth and Culture*, Holyoke: NEARI Press. To Order: <http://bookstore.neari-press.org/index.php/books/prevention.html?cat=41>

Dines, Gail. (2011). *Pornland: How Porn Has Hijacked our Sexuality*. Boston: Beacon Press.

Levin, Diane E., PH.D & Kilbourne, Jean, ED.D. (2008). *So Sexy So Soon: The New Sexualized Childhood and What Parents Can Do to Protect Their Kids*. New York: Ballantine Books.

In some ways, life may seem easier when young people and their parents are going through this stage, yet the mature appearance and behavior that mark this period of development may be misleading. Most late adolescents worry a great deal about whether they are ready to face the challenges that adulthood will bring, and the pressures of school, relationships, first job and future planning often combine to cause frustration and depression.

- Most young people have opportunities to experiment with drugs and liquor by this stage and parents have little power to prevent such opportunities from arising. A major objective should be to get adolescents through this stage alive and intact. Toward that end, parents need to be very frank about the dangers of mixing drinking and/or drugs with driving. Parents need to tell their children that they will provide transportation no questions asked at any hour, rather than have them ride with a driver who has been drinking or using drugs. Parents who do not have access to a car can provide transportation with taxi fare or a friend who is willing to help.
- Once young people become sexually active, most of them remain sexually active. Information about contraceptives and other sexual matters must be made available. Open communication on such matters is an ideal goal, but if that is not possible, the child needs to be told where help can be found. Pregnancy and/or venereal disease are dangerous to bodies which are not fully grown.
- Career choices can be difficult. Parents need to help young people explore careers which fit them rather than careers which the parents wish they would explore. Libraries, high schools, counseling centers, and college or vocational career planning programs offer materials on the options available.



Self-Care for Parents

When children leave home, parents may feel they have lost their most important job. There may also be the added financial burdens of college. Try putting a new focus on adult relationships and getting out into the community. While one period of your life as a parent may be ending, a new one is beginning.

Libraries, high schools, counseling centers, college or vocational career planning programs, and the Vermont Student Assistance Program (VSAC) offer information on the options available. Visit the VSAC home page (www.vsac.org) and click on the "Explore Careers" tab to access a variety of online tools and other resources available to school-aged students and adult learners.

Books

Adolescent Development and Life Tasks, by Guy J. Manaster, Publisher Allyn and Baken Inc.

Making It On Your Own, by Dorothy Ancell, VCU School of Social Work

Teenagers: The Continuing Challenge, by Shirley Gould

Learning More: Time to Listen-Time to Share

A father of a large family I know once shared a secret that the “golden hours” with his teenagers were after midnight. He didn’t mean this literally, but he was suggesting that the late hours are often best for letting down your hair and getting close to your adolescent.

The late-hour fatigue factor tends to open the kids up (and you too). Their defenses are down. It’s time to share, open up your heart, and listen sympathetically. If you’re there, uncritical, and their friend - not boss or first sergeant as earlier in the day - they may just open up. And if you want a really successful conversation, when you get together, make sure there is a pizza on hand, or chips, or some other snack. You know the way to a kid’s heart.

Above all, every teenager needs private, uninterrupted time with one or both parents frequently. Do it on a regular basis. Give the child private moments, when she alone is the center of your attention, concern and love.

Dr. Victor B. Kline, Dept. of Psychology , Univ. of Utah , Salt Lake City, UT 84112



Tips on Parenting Teenagers

1. Make sure each rule is reasonable, clear and enforceable. If one of those characteristics is missing, the potential for conflict will be increased.
2. There is a difference between giving advice and listening. Sometimes, because as parents we want to be helpful to our young people, we get the two confused and our kids call it “lecturing” or “nagging” and tune us out. Ask “May I make a suggestion about that?” and, if they answer “Yes,” you’ll find you really have their attention.
3. Adolescents are very sensitive to fairness. When you need to make a rule that includes a double standard (i.e. about drinking, sex, use of the car) let them know that you are aware that it is not fair and that as a parent that is your role.
4. If you say to your teenager, “That’s your decision,” be prepared to mean exactly that and not to be angry or disappointed by the decision made. Specifically be prepared to accept unusual hair and dress styles if you feel your teenager has a right to decide on his appearance.
5. As teenagers get more outspoken and independent, many parents begin to feel less important and like they are “losing” their son or daughter. It’s okay! The need for distance from family and closeness with friends is part of healthy development. However, studies show that parents continue to be teens most important influence.
6. When talking with a young person whose response is frequently “I don’t know” or “I don’t care” try not to take it as back talk. Those phrases are usually indicators of feelings of pressure or attack. Work on how he can feel safe and encouraged to share his thoughts and feelings.
7. Throughout your child’s teen years, talk with other parents and family members about how they handled similar situations. Remember to take great care of yourself, continue to tell your teenager that you love him and fill your growing free time with activities you enjoy.



Conclusion

There are no simple ways for meeting the challenges of being a parent. The key is to look for information, to take advantage of resources designed to help you handle what is happening now, and to prepare yourself for future challenges.

Educate yourself. Remember, you didn't learn how to be a parent in school. The more you learn about children, the easier your job will be. Resources for you include the library, and parenting classes offered by hospitals, parent/ child and family centers, mental health centers, social services, Parents Together, UVM Extension offices, and schools.

Develop a support system. Parenting is one of the hardest jobs you will ever have. Every parent needs encouragement and support. Surround yourself with people who make you feel good: friends, relatives a support group, a church group, or a special interest group

Communicate with your child. Children need to be seen and they need to be heard. Listen and try to see the world through their eyes. Get in touch with your own childhood. When you speak remember that "sticks and stones can break their bones" and words can break their spirit.

If you see a problem brewing, don't be afraid to ask for help. Parents who use programs in the community are responsible and brave, not weak and uncaring. Parents who are seen nipping problems in the bud are respected and encouraged by those people who offer help. Some of those resources in your community are your church or synagogue, PAL Line, Parents Together, social services, mental health centers, and parent/ child and family centers.





Prevent Child Abuse
Vermont™

Vermont Parents Help Line

8:30 to 4:30 Monday-Friday

1-800-CHILDREN

Prevent Child Abuse America:

www.preventchildabuse.org

Prevent Child Abuse America leads the way in building awareness, providing education and inspiring hope to everyone involved in the effort to prevent the abuse and neglect of our nation's children. Working with our chapters, we provide leadership to promote and implement prevention efforts at both the national and local levels. With the help of our state chapters and concerned individuals like you we're valuing children, strengthening families and engaging communities nationwide.

Child Care Subsidy Hotline 800-424-2246

When daycare costs are too high, there is help. The National Association of Child Care Resources will help caller find payment assistance groups.

Child Support Enforcement Hotline 877-696-6775

For single moms due support, the US Department of Health and Human Services will send a handbook complete with advice and contact numbers

Child Welfare Information Gateway:

<https://www.childwelfare.gov/>

Many of our newest and most popular publications are available in Spanish. Share these resources with families in your area, community organizations that support Spanish-speaking families, and your colleagues.

Debt Relief Hotline 800-685-2705

For families struggling with credit card debt, (typically over \$10,000); relief is available. This agency will contact a family's creditors, reduce payments, interest, and even principal amounts owed. Harassing calls will stop.

Discount Prescriptions 800-291-1206

Families can save between 20% and 40% on their prescription medications. No exam needed. National Program. No need to make trips to the pharmacy, medication shipped to the home. Call for free information.

Family Justice Initiative:

<https://familyjusticeinitiative.org/>

The Family Justice Initiative is a national collaborative of children's attorneys, parents' attorneys, educators, researchers, and national policy advocates who share a common goal: to increase access to high-quality legal representation for children and parents in child welfare cases.

Free Bankruptcy Advice 800-379-0985

Families who cannot use other debt solutions may need to seek with an attorney. Families may call for a free conversation to discuss whether debt relief under bankruptcy makes sense for them.

ICAN: 802-235-2329 icanvt@vermontel.net

International Cesarean Awareness Network, Inc.
43 West Street, Middletown Springs, VT 05757
802-235-2329; icanvt@vermontel.net

Kinship Care

For more information on support for kin raising children, visit Information Gateway's About Kinship Care web section at <http://www.childwelfare.gov/topics/outofhome/kinship/about/>.

La Leche League International: LLL.org [facebook.com/La-Leche-League-International](https://www.facebook.com/La-Leche-League-International)

Our Mission is to help mothers worldwide to breastfeed through mother-to-mother support, encouragement, information, and education, and to promote a better understanding of breastfeeding as an important element in the healthy development of the baby and mother.

The website has a great deal of useful information and links to resources.

Military OneSource: www.militaryonesource.com

Military OneSource supports every phase of military life including deployment, parenting, financial management, education, career, child care, spouse employment, tax information, health, and recreation. The website has a great deal of useful information and many links to resources.

Mortgage Payment Assistance 800-750-8956

For families falling behind on mortgage payments, this agency will work with a family's mortgage company to arrange a workout plan to catch up missed payments. Counselors will discuss all options available to avoid foreclosure. Agency does not make loans or buy property.

National Military Family Association:

1-800-260-0218 www.nmfa.org

This organization is one of the leading nonprofits committed to strengthening and protecting the families of the men and women serving in the military. The website provides information and resources on supporting families, children's resources, benefits, education, counseling, advocacy, scholarships, and publications.

National Runaway Switchboard: 1-800-RUNAWAY:

If you, or a friend, have been sexually abused, the National Runaway Switchboard (NRS) is available 24-hours a day for anonymous, confidential, non-judgmental support and referrals to local programs. NRS' frontline team members are trained to provide support to youth in crisis and their families. The NRS mission is keeping America's runaway and at-risk youth safe and off the streets. Resources are also available at www.1800RUNAWAY.org.

National Resources

Stop It Now: www.stopitnow.org 1.888.PREVENT

Stop It Now! prevents the sexual abuse of children by mobilizing adults, families and communities to take actions that protect children before they are harmed.

Student Loan Relief Hotline 866-836-9168

This agency works for students and graduates who wish to reduce their monthly payments by consolidating. Experts in all options available, counselors will evaluate and seek ways to provide relief. Candidates must have over \$10,000 in student loan debt, and be less than 150 days past due.

Tax Relief Hotline 877-283-8580

Agency works directly with the IRS on behalf of citizens who generally owe over \$10,000 in back taxes. Services include: offers in compromise, payment plans, innocent spouse relief, and garnishment relief. Free consultation.



Statewide Organizations

3SquaresVT:

1-800-479-6151

<http://dcf.vermont.gov/benefits/3SquaresVT>

3SquaresVT is a federal USDA program (formerly food stamps) that can help stretch your food budget so you can put three healthy meals on your table every day. At the national level, it is called the Supplemental Nutrition Assistance Program or SNAP.

802 Quits:

1-800-QUIT-NOW

802quits.org

802Quits offers many different steps you can take to help you prepare to quit smoking.

National Alliance on Mental Illness: (NAMI) of Vermont:

802-876-7949 or 1-800-639-6480

www.namivt.org

NAMI Vermont is the independent Vermont chapter of the National Alliance on Mental Illness, a statewide non-profit, grassroots, volunteer organization comprised of family members, friends, and individuals affected by mental illness. Our mission is to provide education, support and advocacy to individuals and family members living with serious mental illness.

American Lung Association of the Northeast:

1-800-LUNG-USA (1-800-586-4872)

Vermont only: 802-876-6500

Fax: (802) 876-6505

www.lung.org

372 Hurricane Lane Suite 101 Williston, VT 05495

The American Lung Association of the Northeast serves Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island and Vermont. We are part of the American Lung Association, the oldest voluntary health agency in the U.S. Its focus today is on healthy air, tobacco control and all lung disease, including asthma and COPD. Its mission is to save lives by improving lung health and preventing lung disease and we do that through education, research and advocacy.

Howard Center

First Call for Chittenden County:

Crisis Hotline for All Ages

802-488-7777

Phone and in-person support; individual crisis assessment; short-term crisis management; referrals to appropriate services; information about community resources; suicide prevention training; post-tragedy disaster response.

Brain Injury Association (BIA) of Vermont:

1-877-856-1772 (Toll Free Helpline)

802-244-6850

www.biavt.org

Provides information, referral, and assistance through a toll-free helpline. The mission of the Brain Injury Association of Vermont is to create a better future for Vermonters with brain injury and their families through prevention, education, advocacy and support. Resource lending library. Newsletter published for members. Non-profit.

Brattleboro Retreat:

1-800-RETREAT (738-7328)

802-257-7785

Anna Marsh Lane, Brattleboro, VT

P.O. Box 803 05302

brattlebororetreat.org

The Brattleboro Retreat is a not-for-profit, regional specialty mental health and addictions treatment center that was founded in 1834. Provides a full range of diagnostic and treatment services for individuals of all ages and their families.

Building Bright Futures:

(802) 876-5010

www.buildingbrightfutures.org

600 Blair Park, Suite 160, Williston, VT 05495

Building Bright Futures (BBF) serves a dual role as both the Vermont Early Childhood Advisory Council and 501(c)(3) statewide network, aligning local solutions of 12 regional Councils with policy at the state level in order to make improvements in access, quality, and affordability of early care, health, and education for families and young children 0-8.

Center for Health and Learning:

(802) 254-6590

28 Vernon Street, Suite 319

Brattleboro, VT 05301

Email: info@healthandlearning.org

healthandlearning.org

Building a foundation for healthy communities, through educational resources, professional development and practice improvement, research, policy development, evaluation, and consult.

Central Vermont Adult Basic Education: Serving Washington, Orange and Lamoille Counties

(802) 476-4588

fax: (802) 476-5860

46 Washington Street, Suite 100, Barre, VT 05641

www.cvabe.org

Central Vermont Adult Basic Education provides free literacy instruction for adults and out of school youth in the belief that a person who is literate has the essential key for self understanding and for full and active membership in the world.

Statewide Organizations

Child Abuse Hotline:

1-800-649-5285

dcf.vermont.gov/protection/reporting

Vermont's 24-hour Child Protection Line makes it easy for you to share your concerns about a child's safety with a trained social worker.

Child Development Division:

1-800-649-2642

Child Care Consumer Line:

1-800-649-2642 or 802-241-3110

Child Development Division

Department for Children and Families

NOB 1 North, 280 State Drive, Waterbury, VT 05671-

1040

<http://dcf.vermont.gov/cdd>

The Child Development Division (CDD) is the state agency charged with improving the well-being of Vermont's children by increasing access to high quality child development services. Its goal is to increase access to high-quality services that are developmentally beneficial for children and strengthen families. Direct services for children and families include regulating early childhood and afterschool programs; early intervention services; information, resource and referral for families; parent education and family support services.

Child Protection Unit, The Attorney General's:

802-828 3171-Main

ago.info@vermont.gov

The Attorney General's Child Protection Unit is a special unit that investigates and prosecutes crimes against children. It primarily handles sexual abuse cases that for one reason or another can't be prosecuted by the local state's attorney. The unit also provides information to professionals and the general public about preventing and responding to child abuse. It can be reached through the Office of the Attorney General, Pavilion Office Building, Montpelier, Vermont 05609-1001.

Children's Integrated Services:

1-800-649-2642

Child Care Consumer Line: 1-800-649-2642 or

802-241-3110

Child Development Division

Department for Children and Families

NOB 1 North, 280 State Dr., Waterbury, VT 05671-1040

<http://dcf.vermont.gov/child-development/cis>

CIS is a resource for pregnant or postpartum women and families with children from birth to age six. CIS can help: Pregnant or postpartum women: If you have questions or concerns about a condition or risk situation that has an impact on your or your baby's health or safety:

Families - If you have questions or concerns about providing a stable, healthy environment for your children;

Children - If you are the parent of a child age six or younger, and you have questions or concerns about a suspected developmental delay or condition.

Children with Special Health Needs (CSHN):

1-800-660-4427 or (802) 863-7338

<http://healthvermont.gov/family/special-health-needs>

The Office of Children with Special Health Needs (CSHN) provides a number of services to Vermont children - birth to age 21 - who have complex health conditions, and to their families.

Community College of Vermont:

1-800-228-6686

www.ccv.edu

An accredited Vermont State College, CCV offers twenty degree and six certificate programs, workforce, secondary and continuing education opportunities, and academic and veterans support services. CCV offers classes throughout Vermont, in Bennington, Brattleboro, Middlebury, Montpelier, Morrisville, Newport, Rutland, Springfield, St. Albans, St. Johnsbury, Upper Valley, and Winooski. Daytime, evening, weekend, and online classes, starting in September, January, and May. Free academic and financial aid counseling and skills assessments.

GreenPath Debt Solutions:

1-800-550-1961

www.greenpath.com

A non-profit, credit counseling organization that has been helping people get out of debt since 1961. GreenPath offers free debt counseling, eliminating credit card debt, assisting with student loan debt, helping homeowners avoid foreclosure, providing reverse mortgage counseling to seniors, helping people manage their credit score, and providing bankruptcy counseling and education for debtors filing for bankruptcy. GreenPath offers a wide variety of financial education tools and resources.

Impaired Driver Rehabilitation Program:

802-651-1574

www.healthvermont.gov

Vermont's Impaired Driver Rehabilitation Program. When an individual's privilege to drive is suspended due to an alcohol/drug related offense, they are required to successfully complete the IMPAIRED DRIVER PROGRAM.

Deaf Vermonters Advocacy Services:

Voice: 802-471-4707

Text: 720-235-6539

South Barre, VT 05670

www.dvas.org

Serving all signing and non signing deaf, hard of hearing, late deafened, deaf-blind individuals to enhance awareness and education about crimes and abuse.



Statewide Organizations

Easter Seals Vermont:

802-622-3230

www.easterseals.com/vt

Easterseals Vermont offers services to children, families, and young adults across the State of Vermont, from Bennington to Newport. We are a leading agency in the state in working hand-in-hand with the Department for Children and Families (DCF-FSD) to find family-centered solutions to problems many of our friends and neighbors face. Many children suffer not only from the effects of their disabilities, but also from the effects of trauma associated with abuse, neglect, and lack of sufficient help and understanding. Easterseals is known for finding practical, realistic solutions and helping families to be successful in their communities. Our services start with helping parents to recognize and understand their children's needs: we work for children's safety, permanency, and well-being. Our primary programs are Child and Family Supports, Post Permanency Support, the Youth Development Program, Child Parent Psychotherapy, and Military and Veterans Services.

Friends In Adoption:

1-800-98-ADOPT (1-800-982-3678)

Office: 802-884-2002

212 Main Street, Poultney, VT 05764

www.friendsinadoption.org

Friends in Adoption (FIA) is a non-profit, pro-choice, licensed agency with a focus on helping people make informed decisions concerning adoption. FIA is committed to open adoption, inclusiveness, and providing lifelong support to all members of the adoption circle. FIA provides free services to pregnant women/couples considering adoption, works with women and men who are considering placing their already born child with adoptive families, assists prospective adoptive families with home study, approval process, and all aspects of pre-adoptive preparation, and presents adoption-related workshops for professionals who may be in contact with expectant and/or adoptive parents.

Friends of Recovery-Vermont:

1-800-769-2798

friendsofrecoveryvt.org

Friends of Recovery – Vermont, is a grassroots advocacy and education organization. It helps spread the word about the value of long-term recovery from drug and alcohol addiction and the effects of addiction on individuals, families and communities.

Fuel Assistance:

1-800-479-6151

<https://dcf.vermont.gov/benefits/fuel-assistance>

Fuel Assistance (also known as Home Heating Assistance) can help pay part of your home heating bills whether you: own your home or rent; pay for heat directly or as part of rent; rent a room in someone's home; or live in public, subsidized, or Section 8 housing AND rent includes the cost of heat. To apply, visit the website above or call the phone number above toll free. Crisis assistance is available.

Vermont Governor's Highway Safety Program: Agency of Transportation

One National Life Drive, 3rd Floor

Montpelier, VT 05633-5001

ghsp.vermont.gov

Vermont Governor's Highway Safety Program (GHSP) awards federal highway safety grant funds to local, state and not-for-profit agencies for projects to improve highway safety and reduce deaths and serious injuries due to crashes. The staff of the GHSP manage the state highway safety program by reviewing and monitoring grant programs, coordinating special programs such as the Child Passenger Safety or the Drug Recognition Expert (DRE) police officer programs, and by providing guidance and oversight to state and local agencies.

Boy Scouts of America, Green Mountain Council:

802-244-5189, or 1-800-704-3089

Fax: 802-244-5259

scoutingvermont.org

Scouting services in a family-oriented, values-driven program. Current emphasis is placed on 5 unacceptable in today's society: substance abuse; child abuse; illiteracy; future unemployment; hunger. PO Box 557, Waterbury, VT 05676.

Have Justice Will Travel:

Toll Free: 877-496-8100

802-685-7809

Fax: 802-685-4663

9580 Vermont Route 113, Vershire, Vermont 05079

havejusticewilltravel.org

The mission of Have Justice - Will Travel, Inc. (HJWT) is to end the generational cycle of abuse in rural families by bridging the legal, cultural, geographical, psychological, and economic gaps that exist for victims of domestic abuse. HJWT provides legal and supportive services for battered, low-income women and their children.

Help Your Baby, Help Yourself:

1-800-649-HELP (1-800-649-4357)

If you're pregnant, a Vermont Public Health nurse can provide you with help getting pre-natal care, financial assistance, transportation to pre-natal appointments and other social support.

Hunger Free Vermont:

hungerfreevt.org

Hunger Free Vermont, formerly the Vermont Campaign to End Childhood Hunger, is an education and advocacy organization with the mission to end the injustice of hunger and malnutrition for all Vermonters.

Statewide Organizations

La Leche League of MA/RI/VT:

<https://www.llmarivt.org>

Our Mission is to help mothers worldwide to breastfeed through mother-to-mother support, encouragement, information, and education, and to promote a better understanding of breastfeeding as an important element in the healthy development of the baby and mother. Find local groups with free, monthly meet ups with this website. Some meetings qualify for WIC Nutrition Activity credits.

Lawyers Referral Service:

1-800-639-7036

www.vtbar.org

The Vermont Bar Association's Lawyer Referral Service provides referrals at no cost to you. Our attorneys provide an initial 30-minute consultation for no more than \$25. Office hours are Monday through Friday from 8:00 a.m. - 4:00 p.m. Please call 1-800-639-7036 to be referred to an attorney.

LeadSafeVermont.org:

1-800-290-0527 or 802-828-5064

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

LeadSafeVermont.org is part of a comprehensive lead awareness program administered by the Vermont Housing & Conservation Board.

Let's Grow Kids:

(802) 391-4416

<https://www.lets-growkids.org/>

info@lets-growkids.org

Let's Grow Kids is a statewide campaign about the need for more high-quality, affordable child care in Vermont to better support our children, families, communities and economy.

Lund Family Center:

76 Glen Rd., Burlington, Vermont 05401

Toll Free: 800-639-1741

802-864-7467

Fax: 802-864-1619

www.lundfamilycenter.org

Lund Family Center facilitates adoption, cares for infants and toddlers while parents work, treats women for substance abuse and mental health issues, counsels pregnant women and teens, teaches and models parenting skills, provides access to education and job training, and a host of other services.

March of Dimes:

888-663-4637

marchofdimes.org

March of Dimes helps moms have full-term pregnancies and research the problems that threaten the health of babies .

MENTOR Vermont

802-658-1888

**19 Marble Avenue, Suite 4
Burlington, VT 05401**

benji@mentortv.org

MENTOR Vermont is a non-profit that supports more than 140 youth mentoring programs and 2,300 mentor matches across the state. Are you looking to volunteer as a mentor or place a youth in a mentoring program? Feel free to contact us directly or locate a mentoring program in your community by visiting www.mentortv.org.

New England Kurn Hattin Homes:

802-722-3336

Fax: 802-722-3174

**PO Box 127, 708 Kurn Hattin Road
Westminster, VT 05158**

kurnhattin.org

Since 1894, Kurn Hattin has helped thousands of disadvantaged children and their families by offering a safe home and quality education in a nurturing environment.

Northern New England Poison Center:

802-847-2393

Poison Hotline: 1-800-222-1222

www.nnepc.org

Someone calls a poison center about a poisoning every 14 seconds in the U.S. With over-the-phone advice from the poison center, most poisonings can be treated on site. Poison centers are available 24 hours a day to help you treat a poisoning or to answer questions about poisons, including medications, drugs, household products, chemicals and carbon monoxide. All calls are free, confidential and answered by specially trained medical professionals. Call 1-800-222-1222 or chat online at www.nnepc.org.

Parks Place Community Resource Center:

802-463-9927

parksplacevt.org

We are a Community Resource Center located in Bellows Falls. We host many health, human service and education programs that are otherwise only available in Brattleboro or Springfield. We also help people get connected to other resources that are available in our area. The Parks Place Patch Team is a group of local people who meet every month to talk about community issues. Everyone is welcome at Patch Team meetings.



Statewide Organizations

Prevent Child Abuse Vermont:

1-800-CHILDREN

pcavt@pcavt.org

www.pcavt.org

PCAV offers a Parent Helpline (1-800-CHILDREN) from 8:30 to 4:30,

Monday through Friday; parent education and support groups; child sexual abuse prevention education for childcare providers; social workers; mental health professionals; shaken baby syndrome prevention for middle and high school, parents and professionals; child sexual abuse prevention—grades pre-K through 8 for students, parents, faculty and staff; consultations and training to other organizations on all forms of child abuse and neglect.

Reach Up:

1-800-479-6151

<https://dcf.vermont.gov/benefits/reachup>

Reach Up helps families with children by providing cash assistance for basic needs and services that support work and self-sufficiency.

Safe Havens for Babies in Vermont:

1-800-649-4357

<https://dcf.vermont.gov/prevention/safe-havens>

Vermont's Baby Safe Haven Law offers you safe places you can give up your baby—anonously and legally. To be covered by the law, you must hand the baby to a volunteer or employee at a Safe Haven:

- Fire or police station; Health care facility;
- Place of worship; Adoption agency licensed in Vermont; or
- Place an emergency responder, contacted through 911, agrees to meet you to receive your baby.

You cannot leave the baby alone.

Recovery House:

802-446-2640

Recovery House is a professional alcohol, and drug, program dedicated to providing effective treatment with practical goals and a reasonable cost for services. We will turn no one away who we feel would benefit from treatment, including those currently supervised by federal or state corrections programs. We also offer our services to pregnant women and to intravenous drug users.

Traumatic Brain Injury Program with Vermont Agency of Human Services:

802-241-0299

HC 2 South, 280 State Drive

Waterbury, VT 05671-2070

<https://asd.vermont.gov/services/tbi-program>

The Traumatic Brain Injury Program diverts and/or returns Vermonters, with a moderate to severe traumatic brain injury, from hospitals and facilities to a community-based setting. This is a rehabilitation-based, choice-driven program intended to support individuals to achieve their optimum independence and help them return to work.

United Cerebral Palsy:

1-800-872-5827

ucp.org

United Cerebral Palsy (UCP) educates, advocates and provides support services to ensure a life without limits for people with a spectrum of disabilities.

Valley Vista:

802-222-5201

23 Upper Plain, Bradford, Vermont 05033

11vvista.net

Valley Vista is an 80 bed Alcohol and Chemical Dependency Co-Occurring Inpatient Treatment Center. Its comprehensive goal is to provide clinically indicated intervention, assessment, treatment, and rehabilitation services reflective of best practice standards.

Vermont 2-1-1

A Program of United Ways of Vermont:

Dial 2-1-1 from anywhere in Vermont

www.vermont211.org

Vermont 2-1-1 is the free number you dial to find out about thousands of important community resources, like emergency food and shelter, disability services, counseling, senior services, healthcare, child care, drug and alcohol programs, legal assistance, transportation needs, educational and volunteer opportunities, and much more. Simply dial 2-1-1 any time of the day or night, or text your zipcode to 898211 Monday-Friday: 8am -8pm, or visit our updated website: www.vermont211.org

Vermont Achievement Center (VAC):

802-772-7802

74 Park Street, Rutland, VT 05701

vacvt.org

VAC Strives to be a catalyst in transforming our community through advocacy, education and empowerment. VAC fosters a workplace of mutual support, respect and collaboration to bring out the best in our staff in order to insure high quality services and programs.

Vermont Alcohol & Drug Abuse Programs:

802-651-1550

healthvermont.gov/adap.aspx

The mission of ADAP, a division of the Vermont Department of Health, is to help Vermonters prevent and eliminate the problems caused by alcohol, marijuana, and other drug use. Working in partnership with state and national public and private organizations, ADAP plans, supports, and evaluates a comprehensive system of services.

Statewide Organizations

Vermont Association for the Blind and Visually Impaired (VABVI):

South Burlington: 802-863-1358, Toll free: 1-800-639-5861

Berlin: 802-505-4006, Toll free: 1-877-350-8838

Rutland: 802-775-6452, Toll free: 1-877-350-8839

Brattleboro: 802-254-8761, Toll free: 1-877-350-8840

www.vabvi.org

The Vermont Association for the Blind and Visually Impaired (VABVI), a non-profit organization founded in 1926, is the only private agency to offer free training, services, and support to visually impaired Vermonters. Each year VABVI serves hundreds of children from birth to age 22 and adults age 55 and over. VABVI's mission is to enable Vermonters with vision problems, whether blindness or impairment, to achieve and maintain independence. Offices are located in South Burlington, Berlin, Rutland, and Brattleboro.

Vermont Association for the Education of Young Children:

802-622-1155

**145 Pine Haven Shores #2032,
Shelburne, VT 05482**

vaeyc.org

VAEYC is the state affiliate of the National Association for the Education of Young Children, the nation's largest membership organization of early childhood professionals. This nonprofit organization is dedicated to improving the quality of care and education, improving the professional practice of early childhood professionals, and building public understanding and support for high quality early childhood programs.

Vermont Association for Mental Health and Addiction Recovery:

802-223-6263

www.vamhar.org

The Vermont Association for Mental Health & Addiction Recovery, is a statewide advocacy and education organization that supports all paths to recovery from addiction and mental health conditions. Programs include camps specially targeted towards young Vermonters.

Vermont Breast Feeding Resources Vermont Department of Health:

<http://www.healthvermont.gov/breastfeeding>

Vermont Catholic Charities:

Burlington: 877-250-4099

Rutland: 800-851-8379

<https://www.vermontcatholic.org/ministries-programs/catholic-charities/>

Vermont Catholic Charities is a statewide social service agency which has been providing services to the young and the elderly, and to individuals and families since 1929. Programs provided include Emergency Aid, Prison Ministry, Residential Care Homes,

Counseling Services, Crisis Pregnancy Services, and a Denture Program. It is our goal to enhance the dignity, self-respect, confidence and personal development of the individuals, families, and communities whose lives are touched by our programs. Our dedicated staff is committed to the people they serve every day.

Vermont Center for Crime Victims Services:

1-800-750-1213 (VT Only) or 1-802-241-1250

FAX: 1-802-241-4337

58 South Main Street, Suite 1, Waterbury, VT 05676-1599

www.ccvs.vermont.gov

The Vermont Center for Crime Victim Services joins with victims, survivors, and those who interact with victims and offenders to provide, sustain, and support a collaborative system of direct services across Vermont that is comprehensive, victim-centered, trauma-informed, and accessible to all diverse populations. The Center also works to hold offenders accountable for the harm they have caused victims and communities.

Vermont Deaf and Hard of Hearing Program Hosted by Nine East Network:

802-229-0100

9 West Street, Montpelier, VT 05602

www.9east.net

The VT Deaf and Hard of Hearing program offers the statewide Parent-Infant Program, at no cost, to families with children identified with hearing loss. These services are available until the child turns age 3. The School Age Consultation program is comprised of teachers of the deaf, speech-language pathologists and educational audiologists who work across the state with children, schools and families to address the communication and educational needs of children with hearing loss. Our sign support program offers instruction and communication facilitation to children birth to age 22, for whom sign may be the primary access to language.

Vermont Children's Alliance:

Wendy Loomis, Executive Director

802-353-1623

P.O. Box 543

Bennington, VT 05201

vtchildrensalliance.org

The Vermont Children's Alliance, or VCA, is Vermont's state chapter of Children's Advocacy Centers (CACs) and is an accredited chapter member of the National Children's Alliance. The VCA is an IRS 501(c)(3) non-profit organization that represents all CACs in Vermont. The VCA assists with the development, continuation, and enhancement of the CAC model throughout Vermont, as well as provides support services to local communities and CACs. The VCA also serves as a resource and facilitates a network dedicated to a coordinated and comprehensive response to child abuse.



Statewide Organizations

Vermont Department for Children and Families Economic Services Division:

1-800-479-6151

www.mybenefits.vt.gov

The Economic Services Division (ESD) helps Vermonters meet their basic needs through programs such as 3SquaresVT, Essential Person, Fuel Assistance, and Reach Up.

Vermont Department of Forests, Parks & Recreation:

Commissioner's Office: 802-828-1534

Forestry: 802-828-1531

State Parks: 1-888-409-7579

Lands: 802-272-4156

Conservation Education: 802-522-0780

Fax: 802-828-1399

1 National Life Dr., Davis 2 Montpelier, VT 05620-3801
vtfpr.org

The mission of the Department of Forests, Parks and Recreation is to practice and encourage high quality stewardship of Vermont's environment by: monitoring and maintaining the health, integrity and diversity of important species, natural communities, and ecological processes; managing forests for sustainable use; providing and promoting opportunities for compatible outdoor recreation; and furnishing related information, education, and service.

Vermont Department of Health:

1-800-464-4343

(See county listing for an office in your area)

Voice: 802-863-7200

In Vermont: 800-464-4343

Fax: 802-865-7754

108 Cherry Street Burlington, VT 05402
healthvermont.gov

The Department of Health is proud to continue a long tradition of public health service in Vermont. We are the state's lead agency for public health policy and advocacy. Public health is the system that works to protect and promote the health of citizens. It is the science and art of preventing disease, prolonging healthy life and promoting physical and mental health.

Vermont Department of Labor:

802-828-4000

Fax: 802-828-4022

5 Green Mountain Drive, PO Box 488

Montpelier, VT 05601-0488

labor.vermont.gov

Providing career counseling, job training, job placement, and more through 12 Career Resource Centers located in Barre, Bennington, Brattleboro, Burlington, Middlebury, Morrisville, Newport, Rutland, St. Albans, St. Johnsbury, Springfield, and White River Jct.

Vermont Developmental Disabilities Council (VTDDC): 802-828-1310

Mailing: 100 State St Suite 342

Montpelier, Vt. 05601

www.ddc.vermont.gov

The Vermont Developmental Disabilities Council is a statewide board that works to increase public awareness about critical issues affecting people with developmental disabilities and their families. In addition to state agency and nonprofit representatives, 14 of its 23 members (61%) are self-advocates and family members.

Vermont's Early Childhood Resource Directory:

http://education.vermont.gov/documents/educ_early_childhood_directory.pdf

Vermont Family Network:

(802) 876-5315 or 1-800-800-4005

600 Blair Park Road, Suite 240 in Williston, VT, 05495

www.vermontfamilynetwork.org

Vermont Family Network (VFN) empowers and supports all Vermont families of children with special needs

Vermont Federation of Families for Children's Mental Health:

802-876-7021

Toll Free: 1-800-639-6071

vffcmh.org

The Vermont Federation of Families for Children's Mental Health exists to support families and children where a child or youth, age 0-22, is experiencing or at risk to experience emotional, behavioral, or mental health challenges. The Federation is committed to providing families with peer support and information in order to make informed decisions; empowering families, youth and young adults to navigate service and support systems; advocating for accessible, flexible and quality family centered and driven services on a local, state and national level.

Girl Scouts of the Green and White Mountains (Girl Scouts of New Hampshire and Vermont):

888-474-9686

Fax: 603-627-4169

Mansfield Business Park

60 Knight Lane, Suite 30, Williston, VT 05495

customercare@girlscouts.gwm.org

The Girl Scouts is Vermont's preeminent organization dedicated solely to girls. Girls build character and skills for success in the real world and develop qualities that will serve them all their lives-like strong values, social conscience, and conviction about their own potential and self-worth. Discover the fun, friendship and power of girls together in the Girl Scouts.

Statewide Organizations

Vermont Human Rights Commission:

800-416-2010 (in State only)

Or 802-828-1625

802-828-2481 (fax)

14-16 Baldwin Street

Montpelier, VT 05633-6301

www.hrc.vermont.gov

The mission of the Vermont Human Rights Commission is to promote full civil and human rights in Vermont. The Commission protects people from unlawful discrimination in housing, state government employment, and public accommodations. The Commission pursues this mission by enforcing laws, mediating disputes, educating the public, providing information and referrals, and advancing effective public policies on human rights

Vermont Lead-Based Paint Hazard Reduction Program:

802-828-5064 or 1-800-290-0527

<https://vhcb.org/our-programs/healthy-lead-safe-homes>

The Vermont Lead-Based Paint Program provides financial and technical assistance to income-eligible landlords and homeowners to reduce the risk of lead poisoning caused by lead-based paint hazards. Work is completed by certified lead abatement contractors and testing is done to insure properties are safe before residents return.

Vermont Legal Aid:

1-800-889-2047

www.vylawhelp.org

Vermont Legal Aid provides free civil legal services to people throughout Vermont who are poor, elderly, or have disabilities and who would otherwise be denied justice or the necessities of life.

Vermont Migrant Education Program:

802-476-2003

www.uvm.education./agriculture/farmwork/vmep

The Vermont Migrant Education Program provides educational support services to eligible children of families that relocate in order to obtain seasonal or temporary employment in agriculture and to eligible out-of-school youth that have moved to obtain seasonal or temporary agricultural employment. These free services can include free books, tutoring, homework support, English as a second language support, summer programs, and referrals to local resources. A child/youth is eligible up until their 22nd birthday or until they obtain their high school diploma or its equivalent.

Vermont National Guard:

Recruiting: 802-338-3174

Records Request: 802-338-3138

Other: 800-338-3000

www.vtguard.com

The Vermont National Guard is the premier national guard organization; ready, reliable, and relevant. We are a diverse team proudly answering our Nation's call and providing value to our communities. We strive to be innovative in our approach across a broad spectrum of missions and committed to developing our people.

Vermont Network Against Domestic and Sexual Violence:

PO Box 405, Montpelier, VT 05601

Tel: 802-223-1302

Fax: 802-223-6943

vtnetwork@vtnetwork.org

Domestic Violence: 1-800-228-7395

Sexual Violence: 1-800-489-7273

www.vtnetwork.org

Advocacy and support for victim survivors of domestic and sexual violence and their children which includes: 24/7 hotlines, shelters and safehomes, confidential advocacy, legal advocacy and support, hospital support, financial and personal advocacy.

Vermont Office of Veterans Affairs:

Toll Free (Vermont only): (888) 666-9844

Phone: (802) 828-3379

Fax: (802) 828-5932

118 State Street

Montpelier, Vermont 05620-4401

<https://veterans.vermont.gov/>

The Office of Veterans Affairs is a state government organization that administers many of Vermont's veteran programs.

Vermont Parent/Child Center Network:

Child Care Consumer Line:

1-800-649-2642 or 802-241-.0300

Fax: 802-241-0846

Child Development Division

Department for Children and Families

280 State Drive

Waterbury, VT 05671-1040

<https://dcf.vermont.gov/partners/pcc>

Parent Child Centers serve as clearinghouses for general information about child and family issues; provide home visits to families with young children who request home-based support; offer playgroups; provide opportunities for parent education; and advocate for family-centered services in the community.



Statewide Organizations

U S Committee for Refugees and Immigrants Colchester Vt. Office

Phone: 802-655-1963

Email: vrrp@uscrtv.org

462 Hegeman Ave, Suite 101, Colchester, VT 05446

www.refugees.org/

As a local field office of the U.S. Committee for Refugees and Immigrants (USCRI), the Vermont Refugee Resettlement Program (VRRP) serves as the only resettlement program in the state of Vermont. Since its establishment in 1980, VRRP has been bringing hope and opportunity to the lives of refugees and immigrants by defending human rights, promoting self-sufficiency, and forging community partnerships. VRRP provides refugees with their first home in the United States and acculturation services. VRRP's award-winning volunteer program offers crucial community connections to newly arrived refugees. In addition, VRRP's Interpreting and Translating Services (VITS) provides the region with professional services in more than twenty-five languages. Through a wide range of direct and collaborative programs, VRRP helps refugees to successfully adapt to life in the United States.

Vermont State Amateur Hockey Association:

www.vermonthockey.org

The governing body for youth hockey activity in the State of Vermont. The V.S.A.H.A. is comprised of twenty local associations spread throughout the state from Brattleboro to Swanton.

Vermont State Dental Society:

802-864-0115

Fax: 802-864-0116

1 Kennedy Drive, Suite L-3

South Burlington, VT 05403

www.vsds.org

The Vermont State Dental Society, established in 1877, is the state's professional association of dentists. The Dental Society works to: enhance the professional practice environment for its members; be the source of information on issues involving oral health care and its relation to general health and well-being; advocate for access to oral health care for all Vermonters; and foster collaboration among oral health stakeholders

Vermont State Housing Authority:

Voice: 802-828-3295

Fax: 802-828-3248

TDD: 800-798-3118

Message Line: 800-820-5119

One Prospect Street, Montpelier, Vermont 05602

www.vsha.org

Established in 1968, VSHA has the distinction of being the first statewide housing authority in the nation. Throughout its history, VSHA has aggressively and compassionately pursued opportunities to provide and make housing more accessible and affordable for Vermonters.

Vermont Statewide Hotlines:

Domestic Violence: 1-800-228-7395

Sexual Violence: 1-800-489-7273

Teen Dating Abuse: 1-866-331-9474

Vermont Student Assistance Corporation (VSAC):

800-642-3177 or 802-655-9602

vsac.org

The Vermont Student Assistance Corp. was created in 1965 as a public nonprofit agency to help Vermonters who want to go to college or other training after high school. It provides grants, loans, scholarships, career and education planning, and general information about how you, or others in your family, can get the education you want.

Vermont Victim Services Resource Directory:

802-241-1250

www.ccvs.state.vt.us/resource-directory

The Vermont Victim Services Resource Directory was designed to be a tool to help victims of crime find appropriate resources.

The Vermont Youth Conservation Corps:

802-434-3969 x200

Toll Free: 1-800-639-8922

Fax: 802-434-3985

info@vycc.org

The Vermont Youth Conservation Corps is a nonprofit youth, leadership, service, conservation, and education organization that instills in individuals the values of personal responsibility, hard work, education, and respect for the environment. This is accomplished by using conservation projects as the vehicle for learning in an intense environment.

Each year, the VYCC hires young people ages 16-24 who work and study together under adult leadership to complete high-priority conservation projects such as state park management, trail maintenance, and backcountry construction. Through the performance of this important work, young people expand their job and leadership skills and develop personal values, ethics, and an awareness of social, political, and environmental issues. All VYCC jobs are characterized by comprehensive and intensive training, close supervision, and extensive opportunities for individual learning and personal growth.

Statewide Organizations

Voices for Children:

802-229-6377

PO Box 261 Montpelier, VT 05601

voicesforvtkids.org

Voices addresses the full spectrum of child, youth and family issues – from child care and access to health care coverage for children and youth to juvenile justice and child welfare. Voices for Vermont's Children works on behalf of children and youth by: advocating during the Vermont Legislative session; organizing and working in state and regional coalitions; and providing up-to-date information, policy briefs and fact sheets on issues important to children and youth. This includes publishing Vermont KIDS COUNT child and family data reports; and co-sponsoring workshops, trainings and conferences.

Help Me Grow VT

Dial 2-1-1 ext 6

Text HMGVT to 898211

www.helpmegrowvt.org

Inclusive Arts Vermont

21 Carmichael Street, Suite 206

Essex Junction, VT 05452

802-871-5002

info@vsavt.org

vsavt.org

VSA Vermont is a not-for-profit arts and education organization, using the magic of the arts to engage the capabilities and enhance the confidence of children and adults with disabilities. Partnering with community organizations of all kinds, in all counties of Vermont, each year VSA VT presents inclusive arts and education programs for Vermonters of all ages at more than 60 separate sites including childcare sites, schools, and community centers serving adults with disabilities.

W.I.C. - Women, Infants & Children:

802-863-7333

W. I.C.@Vermont.gov

WIC helps pregnant women, new mothers, and young children eat well, learn about nutrition and stay healthy. WIC is the Federal "Special Supplemental Nutrition Program for Women, Infants and Children."



Addison County

Child Care/Early Childhood Education

Mary Johnson Childcare Center

81 Water Street
Middlebury, VT 05753-0591
388-4304
office@mjcvt.org
mjcvt.org

Mount Abraham Unified School District

(ANESU/MAUSD)
72 Munsill Avenue, Suite 601
Bristol, VT 05443
453-3657
Fax: 802-453-2029
www.anesu.org

ANESU MAUSD Early Education Program

57 Mountain St
Bristol, VT 05443
453-3674

Addison Northwest School District

11 Main Street
Vergennes, VT 05491
877-3332
Fax: 802-877-3628
www.anwsd.org

Evergreen Preschool

30 South Water Street
Vergennes, VT 05491
877-6702
www.evergreenpreschoolvt.
gmail.com

Champlain Valley Head Start

Addison County Field Office
87 River Bend Rd.
New Haven, VT 05472
802-388-9881
Fax: 802-989-7588

Bristol Family Center

45 Orchard Terrace
Bristol, VT 05443
453-5659
Email: bfc@gmavt.net

Bristol School Age Program

57 Mountain Street
Bristol, VT 05443
802-453-3227

New Haven School Age Program

50 North Street
New Haven, VT 05472
453-2331
www.beemanmausd.org

New Leaf Montessori

484 Maple Street
Leicester, VT 05733
247-1274

Child/Family Abuse

WomenSafe

P.O. Box 67
Middlebury, VT 05753
388-4205 & 388-9180
Hotline: 1-800-388-4205
TTY 802-388-4305
info@womensafe.net
www.womensafe.net

Vermont Department for Children and Families Child Abuse Services

156 So Village Green, Suite 202
Middlebury, VT 05753
388-4660
Fax: 388-4665

Victim Advocate

c/o State's Attorney's Office
7 Mahady Court, 2nd Floor,
Suite 4
Middlebury, VT 05753
388-7931 Fax: 802-388-4653

Family Education And Support

4-H Development
(802) 388-4969 Martha Seisert
www.uvm.extension/youth/

Help Me Grow VT

Dial 2-1-1 Ext. 6
Text HMGVT to 898211
www.helpmegrowvt.org

The Supervised Visitation Program Women Safe

P.O. Box 67
Middlebury, VT 05753
388-6783 Fax: 802-388-3438
www.womensafe.net

Mount Abe Unified School District

Robinson School
41 Parsonage Road
Starksboro, VT 05487
802-453-2949

Boys and Girls Club of Vergennes

20 Armory Ln.
Vergennes, VT 05491
802 870-7199

Everybody Wins Vermont

P.O. Box 34
Montpelier, VT 05601
802-229-2665
everybodywinsvermont.org

The Bristol Hub

P.O. Box 249
110 Airport Dr.
Bristol, VT 05443
802-453-3678

Middlebury College Center for Community Engagement

20 Old Chapel Road
Middlebury, VT 05753
802-443-3580

Safer Society Foundation

P.O. Box 340
Brandon, VT 05733
802-247-3132
www.saferociety.org

Youth Development Program

38 Elm Street/ P.O. Box 627
Montpelier, VT 05601
802-229-9151: Emergency Crisis
Service
802-622-0211: Return House
802-223-3877: Basement Teen
Center

Addison County Parent Child Center

PO Box 646
126 Monroe Street
Middlebury, VT 05753
388-3171 Fax: 802-388-1590
www.addisoncountypcc.org

Champlain Valley Office of Economic Opportunity Head Start

87 River Bend Rd.
New Haven, VT 05472
802-388-9881
Fax: 802-388-7588
www.champlainvalleyheadstart.org

Slate Valley Unified School District

33 Mechanic St
Fair Haven, VT 05743
265-4905
www.slatevalleyunified.org

Specialized Community Care, Inc.

PO Box 578
East Middlebury, VT 05733
3627 Rte 7 South,
Middlebury VT 05753
388-6388

Circle of Parents

Support Groups
1-800-CHILDREN
(1-800-244-5373)

UVM Extension

County Agricultural Center

23 Pond Lane, Suite #300
Middlebury, VT 05753-1189
388-4969 or 1-800-956-1125
www.uvm.edu

Vermont Adult Learning

282 Boardman Street
Middlebury, VT 05753
388-4392
www.vtadullearning.org
Email: addisoninfo@
vtadullearning.org

Addison County

Financial Assistance/ Housing/Food

Vermont 2-1-1

United Ways of Vermont
Dial 2-1-1 or 1-866-652-4636
www.vermont211.org

Addison Community Action / CVOEO

54 Creek Road, Suite A
Middlebury, VT, 05753
388-2285
1-800-639-2318
www.cvoeo.org

Hope

282 Boardman Street
Middlebury, VT 05753
802-388-3608
www.hope-vt.org

Congregational Church of Vergennes

30 South Water Street
Vergennes, VT 05491
802-877-2435
www.vergennesucc.org

Victory Baptist Church

862 US Route 7
Vergennes, VT 05491
802-877-3393

John W. Graham Housing and Services

69 Main Street
Vergennes, VT 05491
802-877-2677
After hours phone: 877-2048
info@johngrahamshelter.org
www.johngrahamshelter.org

Vermont Department For Children and Families, Economic Services Division

156 Village Green, Suite 201
Middlebury, VT 05753-1105
388-4660
(800) 479-6151 Food, Fuel &
Reach Up Asst.
www.mybenefits.vt.gov

Health

Addison County Home Health and Hospice

PO Box 754, Middlebury, VT
05753
254 Ethan Allen Highway
New Haven, VT 05472
388-7259
1 (800) 639-1521
www.achhh.org

Open Door Clinic

100 Porter Drive
Middlebury, VT 05753
388-0137
opendoormidd.org

Planned Parenthood of Northern New England

Middlebury Health Center
1330 Exchange Street Suite 202
Middlebury, VT 05753
388-2765
www.ppnne.org

Vermont Department of Health

WIC Program

156 South Village Green, Suite 102
Middlebury, VT 05753
388-4644
Fax: 802-388-4610

Mental Health

Counseling Service of Addison County

89 Main Street
Middlebury, VT 05753
388-6751
24-Hour Emergency Service:
388-7641
www.csac-vt.org

Substance Abuse

Alcoholics Anonymous

PO Box 774
Middlebury, VT, 05753
www.aavt.org

Alcohol and Drug Abuse Prevention

300 Asa Bloomer Building + 88
Merchants Row
Rutland, VT 05701
786-5811
www.healthvt.gov

Turning Point Center of Addison County

54 A Creek Road,
Middlebury VT 05753
PO Box 405,
Middlebury, VT 05753
(802) 388-4249
info@turningpointaddisonvt.org
www.turningpointaddisonvt.org

Childcare/Early Childhood Education

Sunrise Family Resource Center

PO Box 1517
244 Union Street
Bennington, VT 05201
447-3778

Bennington Head Start

PO Box 588
2 Park Street
North Bennington, VT 05257
442-3686
www.ucsvt.org

Head Start Pownal Center

97 School House Road
Pownal, VT 05261
823-5410

Head Start Manchester

5312 Main Street
Manchester Center, VT 05255
362-3950
www.ucsvt.org

Bennington/Rutland Supervisory Union

6378 VT Route 7A
Sunderland, VT 05250
362-2452
www.brsu.org

Children's Integrated Services

238 Union Street
Bennington VT 05201-1998
442-6934
Toll Free: 1-800-637-7347
www.vermonthhealth.gov

Molly Stark School

181 Orchard Road
Bennington, VT 05201
442-2692

Northshire Head Start

PO Box 815
Manchester Center, VT 05255
362-3950

Battenkill Valley Supervisory Union

529 East Arlington Road
Arlington, VT 05250
375-1570 Fax: 800-375-1571
central@bvsu.org

Child/Family Abuse

Project Against Violent Encounters/PAVE

PO Box 227
Bennington, VT 05201
442-2370
Hotline: 442-2111
www.pavebennington.org

Vermont Department for Children and Families

District Office
200 Veterans Memorial Drive,
Suite 14
Bennington, VT 05201-1956
442-8138 Fax: 802-447-2808

Victim Advocate Domestic Violence Unit

c/o State Attorney's Office
200 Veterans Memorial Drive,
Suite 10
Bennington, VT 05201
442-8116, Fax: 802-447-2775

Bennington County Child Advocacy Center

129 Elm St
Bennington, VT 05201
442-5107

Family Education and Support

4-H/Youth Development

(802) 773-3349 Kimberly Griffin
www.uvm.edu/extension/youth/

Help Me Grow VT

Dial 2-1-1 ext 6
Text HMGVT to 898211
www.helpmegrowvt.org

Big Brothers Big Sisters of Bennington County

P O Box 588
100 Ledge Hill Drive
Bennington, VT 05201
802-442-5491 ext 332

Circle of Parents Support Groups

1-800-CHILDREN
(1-800-244-5373)

Help Me Grow VT

Dial 2-1-1 ext. 6
Text HMGVT to 898211
www.helpmegrowvt.org

The Collaborative

91 VT RT 11
Londonderry, VT 05155
802-824-4200

Building Bright Futures Bennington Early Childhood Council / Playgroups

200 Veteran's Memorial Drive
Bennington, VT 05201
447-2887

Early Intervention Southwest VT Medical Center

100 Hospital Drive East
Bennington, VT 05201
447-2768
Toll Free: 1-800-750-6975

La Leche League

lllmarivt.org
www.facebook.com/lllburlingtonvt.org

Southwestern Vermont Supervisory Union

Early Childhood Programs
246 South Stream Road
Bennington, VT 05201
447-7501
www.svsu.org

Sunrise Family Resource Center

PO Box 1517
244 Union Street
Bennington, VT 05201-1517
442-6934
sfire@pcc.com

The Tutorial Center

208 Pleasant Street
Bennington, VT 05201
802-447-0111 Fax: 802-447-7607
www.tutoringvermont.org

The Tutorial Center

PO Box 1434
3511 Richville Road
Manchester Center, VT 05255
802-362-0222
www.tutoringvermont.org

UVM Extension

PO Box 559
310 Main Street
Bennington, VT 05201-0559
802-447-7582
www.uvm.edu/extension

Youth Development Program

38 Elm Street Box 627
Montpelier VT 05601
802-229-9151
ydr@wcysb.org

Windsor County Mentor's

P.O. Box 101
54 Main Street
Windsor, VT 05089
802-674-5101

Financial Assistance/ Housing/Food

Vermont 2-1-1

United Ways of Vermont
Dial 2-1-1 or 1-866-652-4636
www.vt211.org

Bennington Housing Authority

22 Willowbrook Drive
Bennington, VT 05201
442-8000

BROC - Community Action

Southwestern Vermont
332 Orchard Road #10
Bennington, VT 05201
447-7515
Toll Free: 1-800-717-2762
www.broc.org

Arlington Food Shelf
165 Old Mill Road
Arlington, VT 05250-0723
802-375-6328

Bible Baptist Food Basket
1425 Harwood Hill
Bennington, VT 05201
802-447-3618

Community Food Cupboard
6309 Main Street
Town Office Building, Rt. 7A
North
Manchester Center 05255
802-362-0057

Green Mountain Christian Center
440 Main Street
Bennington, VT 05201
802-447-7224

His Pantry
238 Main Street
Bennington, VT 05201
802-442-1720

Shaftsbury United Methodist Church
127 Church Street
Shaftsbury, VT 05262
802-442-5893

Saint John the Baptist Church
5 Houghton Street
North Bennington, VT 05257
802-447-7504

The Kitchen Cupboard
121 Depot Street
Bennington, VT 05201
802-379-0149

Health

Aids Project of Southern Vermont
PO Box 4264
324 Main St
Bennington, VT 05201
447-8007
www.aidsprojectsouthernvermont.org

Planned Parenthood Of Northern New England
194 North Street Suite 8
Bennington, VT 05201
442-8166

Vermont Dept. of Health
324 Main Street, Suite 2
Bennington, VT 05201-2107
447-3531

VNA & Hospice of the Southwest Region
1128 Monument Ave.
Bennington, VT 05201
802-442-5502 www.ravnah.org

Mental Health

Turning Point Club of Bennington County
PO Box 454
465 Main Street
Bennington, VT 05201
442-9700
www.tpcbennington.org

United Counseling Service of Bennington County, Inc.
PO Box 588
100 Ledge Hill Drive
Bennington, VT 05201
24-Hour Emergency Service
442-5491 or 362-3950
www.ucsvt.org

Substance Abuse

Al-Anon/ Alateen
Toll Free: (866) 972-5266
www.vermontalananalateen.org

Alcoholics Anonymous
Bennington, VT 05201
447-1285
aa-meetings.com

Champlain Valley Narcotics Anonymous
CVANA
P.O. Box 64714
Burlington VT 05406-4714
(866) 580- 8718 toll free
CVANAVT@gmail.com
<http://cvana.org>

Childcare/Early Childhood Education

NEKCA Head Start/Early Head Start

191 High Street, Barton, VT 05822
525-3362
626-3782

Children's Integrated Services—Early Intervention

166 Railroad Street
St. Johnsbury, Vermont 05819
802 748-6586
www.neklsvt.org

Early Childhood Program Kingdom East School District

PO Box 107, 109 Park Avenue
Lyndonville, VT 05851
802-626-6100
Fax: 802-626-3423

Child & Family Development Program

At NEKCA Lincoln Center
(North East Kingdom Community Action)

115 Lincoln Street
St. Johnsbury, VT 05819
802-748-6040

Vermont Department of Health, WIC

107 Eastern Avenue, Suite 9
St. Johnsbury VT 05819-2638
802-748-5151
Toll Free: 1-800-952-2936

Umbrella, Inc.

Child Care Resource And Referral- Kingdom Childcare Connection
1216 Railroad Street, Suite C
St. Johnsbury, VT 05819
748-1992
Fax: 802-748-1405
umbrellanek.org

Child/Family Abuse

Child Protection

To report suspected child abuse or neglect
(24 hours a day, 7 days a week)
1 800-649-5285

The Advocacy Program at Umbrella

St. Johnsbury: (802) 748-8645
Newport: (802) 334-0148
advocate@umbrellanek.org
www.umbrellanek.org

Northeast Kingdom Human Services, Inc

2225 Portland Street
P. O. Box 368
St. Johnsbury, VT 05819
748-3181 office and 24/7 crisis services
800-649-0118 toll free during office hours
www.nkhs.org

Vermont Department for Children and Families

Family Services
1016 US Route 5, Suite 2
St. Johnsbury, VT 05819
802 748-8374 ex. 3
Fax: 802 751-3203

Victim Advocate

c/o State's Attorney's Office
211 Eastern Avenue, Suite 102
St. Johnsbury, VT 05819
802 748-6657

Family Education and Support

4-H/Youth Development (802) 751-8310 Anthony Willey

www.uvm.edu/extension/youth/

Help Me Grow VT

Dial 2-1-1 ext. 6
Text HMGVT to 898211
www.helpmegrowvt.org

Northeast Kingdom Human Services, Inc

2225 Portland Street
P. O. Box 368
St. Johnsbury, VT 05819
748-3181 office and 24/7 crisis services
800-649-0118 toll free during office hours

Nurturing Parenting Programs

Caledonia County
802 498-0611
1 800-CHILDREN
(1 800-244-5373)
www.pcavt.org

Caledonia Special Investigation Unit, Inc.

Serving Caledonia
36 Eastern Ave, Mezzanine, Suite 4
PO Box 272
St. Johnsbury, VT 05819
802 424-1227

Everybody Wins! Vermont

P.O. Box 34
Montpelier, VT 05601
802-229-2665
Everybodywinsvermont.org

La Leche League

Arcelie Reyes: 917-428-9559
Free monthly meet-ups in Lyndonville and St. Johnsbury,
facebook.com/
LaLecheLeagueNEK

NE Kingdom Youth Services

24 Bagley Street
St. Johnsbury, VT 05819
802 748-8732
Nekys.org

Circle of Parents

Support Groups
1-800-CHILDREN
(1-800-244-5373)

Children's Integrated Services

166 Railroad Street
St. Johnsbury, Vermont 05819
802 748-6586

UVM Extension

374 Emerson Falls Road, Suite 1
St. Johnsbury, VT 05819
802-751-8307

Financial Assistance/Housing/Food

Vermont 2-1-1

United Ways of Vermont
Dial 2-1-1 or 1-866-652-4636
www.vermont211.org

Northeast Kingdom Community Action

115 Lincoln Street
St. Johnsbury, VT 05819
748-6040
Toll Free: 1-800-639-4065

Neighbors Helping Neighbors

125 Mountain View Drive
St. Johnsbury, Vermont 05819
802-473-1236
neknhn@gmail.com
neknhn.wixsite.com/foodshelf

The Open Door Danville Food Shelf

Thrift Shop
29 Hill Street
PO Box 377
Danville, VT 05828
802-684-2515
Monday 10:00-1:00
Wednesday 10:00-1:00
Friday 10:00-4:00
1st Saturday each month 9:00-12:00

Hardwick Area Food Pantry

39 West Church Street
Hardwick, VT 05843
802-472-5940

Hope

Crisis emergency food bags
136 Church Street
Lyndonville, VT 05851
802-626-3228
Hopevermont.com

Kingdom Community Services

Tues & Thurs 12:00-3:45
36 Steeple Place
St. Johnsbury, VT 05819
802-751-8581

Lyndon Area Food Shelf

Wednesday 1:00-4:00
51 Elm Street
Lyndonville, VT 05851
802-626-5586
802-626-5705

NEKCA St. Johnsbury

115 Lincoln Street
St. Johnsbury, VT 05819
802-748-6040

Pleasant Street Baptist Church

193 Pleasant Street
St. Johnsbury, VT 05819
802-748-9029

Union Baptist Church

932 US Route 5
Waterford, Vermont 05819
802 748-5639

Sheffield Food Pantry

3210 VT Rt. 122
Sheffield, VT 05866
802-535-3383

Vermont Department For Children and Families, Economic Services Division

1016 US Route 5
St. Johnsbury, VT 05819
Toll Free: 1-800-479-6151

Health

Caledonia Home Health Care & Hospice

161 Sherman Drive
St. Johnsbury, VT 05819
802 748-8116
www.nchcvt.org

Planned Parenthood Health Services

501 Portland Street
St. Johnsbury, VT 05819
Fax: 748-0353
802 751-7821

Vermont Cares (HIV/AIDS)

1091 Hospital Drive, Suite 1
St. Johnsbury, VT 05819
748-9061
www.vtcares.org

Vermont Dept. of Health

107 Eastern Avenue, Suite 9
St. Johnsbury, VT 05819-2638
748-5151

Mental Health

Northeast Kingdom Human Services, Inc

2225 Portland Street
P. O. Box 368
St. Johnsbury, VT 05819
748-3181 office and 24/7 crisis services
800-649-0118 toll free during office hours
www.nkhs.org

Kingdom Recovery Center

297 Summer Street
St. Johnsbury, VT 05819
751-8520
C.Boyd.exec@Krcstj.org

Substance Abuse

Northeast Kingdom Human Services, Inc

2225 Portland Street
P. O. Box 368
St. Johnsbury, VT 05819
748-3181 office and 24/7 crisis services
800-649-0118 toll free during office hours
www.nkhs.org

Vermont Al-Anon Alateen/ Adult Children

1-866-972-5266
www.vermontalananonlateen.org

Alcoholics Anonymous

Toll Free: 1-877-334-1213

Chittenden County

Childcare/Early Childhood Education

Early Intervention (birth to 3) Services

Vermont Family Network
600 Blair Park Rd. Suite 249
Williston, VT 05495
876-5315
Fax: (802)-876-6291
info@vfn.org
www.VermontFamilyNetwork.org

Building Bright Futures of Chittenden County

600 Blair Park, Suite 160
Williston, VT 05495
802-876-5010
info@buildingbrightfutures.org
www.buildingbrightfutures.org

Burlington Children's Space

241 North Winooski Avenue
Burlington, VT 05401
802-658-1500 x 13
Fax: 802-658-6974
sadamskollitz@burlingtonspace.org
www.burlingtonchildrenspace.org

Champlain Valley Head Start Administrative Office

431 Pine Street Suite 212
Burlington, VT 05401
651-4180
Fax: 658-0983
Toll Free: 1-800-854-9648
www.champlainvalleyheadstart.org

Child Care Resource

300 Cornerstone Drive Suite 128
Williston, VT 05495
863-3367
Toll Free: 1-800-339-3367
www.childcareresource.org

Children, Youth and Family Services

(A Division of the Howard Center for Human Services)
1138 Pine Street
Burlington, VT 05401
488-6600
www.howardcenter.org

The Greater Burlington YMCA

266 College Street
Burlington, VT 05401
862-YMCA Burlington
www.gbymca.org

King Street Center

(Ages 18 months-16)
PO Box 1615
87 King Street
Burlington, VT 05401
862-6736
Fax: 658-5328
www.kingstreetcenter.org

Children's Integrated Services at VNA of Chittenden & Grand Isle Counties

1110 Prim Road
Colchester, VT 05446
860-4426
Fax: 802-652-0296

Lund Early Childhood Program

50 Joy Drive (Main Building)
76 Glen Road (Residential Treatment Program)
Burlington, VT 05401
864-7467
Toll-Free: (800) 639-1741
Fax: 802-864-1619
www.lundvt.org

Milton Family Community Center Childcare and Education Programs for Children

(Ages 6 weeks-5 years & 7th-12th Grade Teen Program)
PO Box 619
23 Villemaire Lane
Milton, VT 05468
893-1457
Fax: 802-893-1776
mfcc@miltonfamilycenter.org
www.miltonfamilycenter.org

Pine Forest Children's Center

(A Division of the Howard Center for Human Services)
208 Flynn Ave. Suite 2F
Burlington, VT 05401
651-9455

Fax: 802-652-2517
www.thepineforest.wordpress.com

Sara Holbrook Community Center

66 North Avenue
Burlington, VT 05401
802-862-6342
info@saraholbrookcc.org
www.saraholbrookcc.org

JSM Family Room
20 Allen Street
Burlington, VT 05401
802-862-2121
www.thefamilyroomvt.org

Child/Family Abuse

Children, Youth and

Family Services
(A Division of The Howard Center for Human Services)
1138 Pine Street
Burlington, VT 05401
488-6600
www.howardcenter.org

Chittenden Children's Advocacy Center

50 Cherry Street, Suite 102
Burlington, VT 05401
652-0391
Fax: 802-652-4167
www.chittendencac.org

KidSafe Collaborative of Chittenden County

Coordinates Child Protection and Family Support Teams
45 Kilburn St.
Burlington, VT 05401
863-9626
www.kidsafevt.org

Vermont Department for Children and Families

Family Services Division
426 Industrial Ave. Ste. 120
Williston, Vermont 05495
(802) 863-7370
Statewide Child Protection Line:
1-800-649-5285
www.dcf.vermont.gov/fsd

Victim Advocate

32 Cherry Street, Suite 305
Burlington, VT 05401
802-863-2865
Fax: 802-863-7440

Steps to End Domestic Violence

PO Box 1535
294 North Winooski Ave.
Suite 214-A
Burlington, VT 05402
658-1996
www.stepsvt.org

Women's Rape Crisis Center-Hope Works

PO Box 92
Burlington, VT 05402
864-0555
Hotline: 802-863-1236
Fax: 863-8449
Also: 1-800-489-7273 Statewide
www.hopeworksvt.org

Family Education and Support

4-H Youth Development

(802) 651-8343 Rose Garritano
www.uvm.edu/extension/youth/

Help Me Grow VT

Dial 2-1-1 Ext 6
Text HMGVT to 898211
www.helpmegrowvt.org

Saint Michael's College M.O.V.E./Mobilization for Volunteer Efforts

P.O. Box 395
Saint Michael's College
Colchester, VT 05439
802-654-2674
move@smcvt.edu

United Way of Northwest Vermont

412 Farrell Street, Suite 200
South Burlington, VT 05403
802-864-7541

Spectrum Youth and Family Services

191 North Street
Burlington, VT 05401
864-7423
Fax: 802-540-0116

Mercy Connections

255 South Champlain Street
Suite 8
Burlington, VT 05401
802-846-7063

Baba Tree International

P.O. Box 46
Jeffersonville, VT 05464
802-858-6489

Association of Africans Living in Vermont (AALV)

20 Allen Street, third floor
Burlington, VT 05401
985-3106
Fax: 802-881-0521
www.aalv-vt.org
info@aalv-vt.org

VSA Vermont

21 Carmichael Street, Suite 206
Essex Junction, VT 05452
802-871-5002

Big Brothers Big Sisters of VT

P.O. Box 1729
Brattleboro VT, 05302
802-689-0092
info@bbbsvt.org

Beginnings: A Center for Childbirth and Parenting Education

Breastfeeding, Parenting and
Infant CPR Programs
51 Timber Lane
South Burlington, VT 05403
658-5959
www.beginningschildbirth.com
info@beginningschildbirth.com

Boys & Girls Club of Burlington

62 Oak Street
Burlington, VT 05401
802-864-5263
Winooski-802-655-6860
www.bandgclub.org

Children's Integrated Services VNA of Chittenden & Grand Isle Counties

1110 Prim Road
Colchester, VT 05446
658-1900
Fax: 802-652-0296
www.vnacares.org

Children, Youth and Family Services

(A Division of The Howard Center for Human Services)
1138 Pine Street
Burlington, VT 05401
488-6600
www.howardcenter.org

Circle of Parents Support Groups

(inc. Grandparents As Parents, Kinship/ Guardianship, and all Parent/ Caregiver Support Groups)
Groups located in Chittenden County
1-802-498-0607 or
1-800-CHILDREN
(1-800-244-5373)
www.pcavt.org
pcavt@pcavt.org

CY: Connecting Youth in Chittenden South

5420 Shelburne Road, Suite 300
Shelburne, VT 05482
www.seewhy.info

Essex CHIPS, Inc.**Essex Teen Center/ Essex Tween Center**

*Community Health Programs
Serving Essex Town, Essex Junction and Westford*
2 Lincoln Street
Essex Junction, VT 05452
(802) 878-6982
Fax: (802) 878-6946
www.essexchips.org
info@essexchips.org

Families Together Vermont Family Network

600 Blair Park Road, Suite 240
Williston, VT 05495
Toll Free: 1-800-800-4005
Fax: 802-876-6291
www.vermontfamilynetwork.org

Outright Vermont

PO Box 5235
241 N. Winooski Avenue
Burlington, VT 05402
865-9677
www.outrightvt.org

Hinesburg Community Resource Center

Friends Of Families
Alexandra Koncewicz
482-4946
koncewicz@hinesburgresource.org
http://www.hinesburgresource.org/friends-of-families.

King Street Youth Center Teen Futures Program

PO Box 1615
87 King Street
Burlington, VT 05402
862-6736 Ext. 110
Dave@kingstreetcenter.org
www.kingstreetcenter.org

La Leche League Referral Line

Laura (802) 985-8228
lllmarivt.org

Lund Family Center

PO Box 4009
76 Glen Road
Burlington, VT 05406
802-864-7467
Toll Free: 1-800-639-1741
www.lundvt.org
info@lundvt.org

Milton Community Youth Coalition

PO Box 543
164 Route 7 South, Unit 1
Milton, VT 05468-0619
(802) 893-1009
Fax: (802) 893-1889
www.miltonyouth.org

Milton Family Community Center

23 Villemare Lane
PO Box 619
Milton, VT 05468
893-1457
Fax: 802-893-1776
www.miltonfamilycenter.org

Sara Holbrook Community Center

66 North Avenue
Burlington, VT 05401
802-862-6342

Spectrum Youth and Family Services

177 Pearl Street
Burlington, VT 05401
802-864-7423

Sarah Holbrook Teen Center

130 Gosse Court
Burlington, VT 05401
802-860-4986

Nurturing Parenting Programs

Groups located across Chittenden County
1-802-498-0607 or
1-800-CHILDREN
(1-800-244-5373)
www.pcavt.org
pcavt@pcavt.org

Saint Michael's College Little Brother/Little Sister Program

Ages 6-12 (Only Students in JFK Middle School In Winooski)
PO Box 395
1 Winooski Park
Colchester, VT 05439
Call JFK if interested

UVM Extension Expanded Food and Nutrition Education Program (EFNEP)

140 Kennedy Drive Suite 201
South Burlington, VT 05403
(802) 651-8343 ext 510
www.uvm.edu/extension/efnep

Vermont Adult Learning

(Chittenden County)
29 Church Street #9
Burlington, VT 05401
846-7245
Fax: 802-846-7228
www.vtadulthoodlearning.org
chittinfo@vtadulthoodlearning.org
info@vtadulthoodlearning.org

Vermont Family Network
600 Blair Park Road
Suite 240
Williston, VT 05495
876-5315
Toll Free: 1-800-800-4005
www.vermontfamilynetwork.org
info@vtn.org

Vermont Legal Aid
264 N. Winooski Avenue
Burlington, VT 05402
863-5620
Toll Free: 1-800-889-2047
www.vtlegalaid.org

VNA Children Youth Services
1110 Prim Road
Colchester, VT 05446
488-6600

JSM Family Room
20 Allen Street
Burlington, VT 05401
802-862-2121
Josh@thefamilyroomvt.org
www.thefamilyroomvt.org

Winooski Family Center
87 Elm Street
Winooski, VT 05404
c/o 80 Normand St.
Winooski, VT 05404
655-1422

South Burlington School District
F. H. Tuttle Middle School
500 Dorset Street
South Burlington, VT 05403
802-652-7035
802-652-7250

Financial Assistance/ Housing/Food

Vermont 2-1-1
United Way of Vermont
Dial 2-1-1 or 1-866-652-4636
www.vermont211.org

Burlington Housing Authority
65 Main Street
Burlington, VT 05401
864-0538; ext. 210
Fax: 802-658-1286
www.burlingtonhousing.org

**Burlington Lead Program/
CEDO**
149 Church Street
Room 32 City Hall
Burlington, VT 05401
869-7144
www.burlingtonvt.gov/cedo
cedofd@burlingtonvt.gov

Richmond Food Shelf and Thrift Store
58 Bridge Street
Richmond, VT 05477
802-578-4283

Aunt Dot's Place, Inc.
51 Center Road, (Route 15)
Essex, VT 05415
802-857-8208

Charlotte Food Shelf
403 Church Hill Road
Charlotte, VT 05445
802-425-3252
https://www.charlotteucc.org/
charlotte-food-shelf

Shelburne Food Shelf
5420 Shelburne Road
Shelburne, VT 05482
802-622-3313
http://www.shelburnefoodshelf.org/

Winooski Food Shelf
Winooski United Methodist Church
24 West Allen Street
Winooski, VT 05404
802-655-7371

Williston Community Food Shelf
400 Cornerstone Drive, Suite 130
Williston, VT 05495
802-735-6303

Champlain Housing Trust
88 King Street
Burlington, 05401
802-862-6244
Fax: 802-862-5054
www.champlainhousingtrust.org

The Chittenden Emergency Food Shelf/CVOEO
228 N. Winooski Avenue
Burlington, VT 05401
802-658-7939
www.feedingchittenden.org

Mallettes Bay Congregational Church
1672 West Lakeshore Drive
Colchester, VT 05446
802-658-9155

Essex, Underhill, Jericho Ecumenical Food Shelf
273 Rt. 15
PO Box 65
Jericho, VT 05465
802-899-3932
https://ejufoodshelf.wixsite.com/
ejufoodshelf/location

Milton Family Community Center
23 Villemarie Lane
Milton, VT 05468-0619
802-893-1457

Commodity Supplemental Food Program
Vermont Food Bank
33 Parker Road
Barre, VT 05641
1-800-214-4648
https://www.vtfoodbank.org/
share-food/csfp
Fax: 476-0319

COTS
PO Box 1616
95 North Avenue
Burlington, VT 05402
864-7402
www.cotsonline.org
info@cotsonline.org

Champlain Valley Office of Economic Opportunity (CVOEO)
255 South Champlain Street, #9
PO Box 1603
Burlington, VT 05402
802-862-2771
www.cvoeo.org

Home Share Vermont
412 Farrell Street, Suite 300
South Burlington, VT 05403
(802) 863-5625
www.homesharevermont.org
info@homesharevermont.org

Hunger Free VT
38 Eastwood Drive, Ste 100
South Burlington, VT 05403
802-865-0255
www.hungerfreevt.org

Joseph's House
20 Pine Street
Burlington, VT 05401
951-4290
www.josephshousevt.org

J.U.M.P. First Congregational Church
38 S. Winooski Avenue
Burlington, VT 05401
862-4501 (Weekday Mornings)
www.jumpvt.org

Ronald McDonald House
(Providing Temporary Living Accommodations for Parents with Hospitalized Children)
16 S. Winooski Avenue
Burlington, VT 05401
862-4943
Fax: 862-2175
www.rmhcvt.org

The Salvation Army
64 Main Street
Burlington, VT 05401
864-6991

School Meals

Burlington School District
52 Institute Road
Burlington, VT 05408
864-8416
www.burlingtonschoolfoodproject.org

Vermont Department for Children and Families, Economic Services Division (Reach UP, 3SquaresVT, etc)

District Office
119 Pearl Street, Suite 101
Burlington, VT 05401
Toll Free: 1-800-479-6151
www.dcf.vermont.gov/esd

Vermont Tenants Inc.

PO Box 1603
255 S. Champlain Street, Suite 2
Burlington, VT 05401
(802) 862-2771
802-864-0099
www.cvoco.org

Vermont Works for Women

32A Malletts Bay Avenue
Winooski, VT 05404
655-8900
Fax: 802-655-8922
www.vtworksforwomen.org
info@vtworksforwomen.org

Winooski Housing Authority

83 Barlow Street
Winooski, VT 05404
655-2360
Fax: 802-655-5540
www.winooskihousing.org

Women, Infants, and Children (WIC)

Supplemental Food Program of Vermont Department of Health
108 Cherry Street
Burlington, VT 05402
1-800-649-4357
(800) 464-4343
Fax: (802) 865-7754
WIC@Vermont.gov
www.healthvermont.gov/wic/

Health**Age Well**

76 Pearl Street, Suite 201
Essex Jct., VT 05452
865-0360
Helpline: 1-800-642-5119
Fax: 865-0363
www.agewellvt.org

Children with Special Health Needs Vermont Department of Health

108 Cherry Street, PO Box 70
Burlington, VT 05402
800-660-4427 or 802-863-7338
www.healthvermont.gov

Dr. Dynasaur

(low-cost or free health coverage for children, teenagers under age 19 and pregnant women)
280 State Dr.
Waterbury, VT 05671-1010
(800) 250-8427
Application- 1-866-482-4723
www.greenmountaincare.org/
vermont-health-insurance-plans/
dr-dynasaur

The Community Health Centers of Burlington

617 Riverside Avenue
Burlington, VT 05401
864-6309
www.chcb.org

Planned Parenthood of Northern New England

183 St. Paul Street
Burlington, VT 05401
863-6326
www.plannedparenthood.org
Fax: 802-863-4951

Vermont Cares (HIV/AIDS)

PO Box 5248
187 St. Paul Street
Burlington, VT 05401
863-2437
Fax: 802-864-7730
www.vtcares.org

Vermont Department of Health

108 Cherry Street
Burlington, VT 05402
802-863-7200 or 1800-464-4343
Fax: 802-865-7754
Healthvermont.gov

Vermont Gynecology

(A division of Planned Parenthood)
1775 Williston Road Suite 110
South Burlington, VT 05403
735-1252
(877) 698-8496
Fax: 802-862-9637
www.vtgyn.com

VNA of Chittenden & Grand Isle

1110 Prim Road
Colchester, VT 05446
658-1900
www.vnacares.org

Mental Health**Centerpoint Adolescent Treatment Services**

1025 Airport Drive
South Burlington, VT 05403
94 West Canal Street
Winooski, VT 05404
488-7711
www.centerpointservices.org
information@centerpointservices.org

Children's Integrated Services (CIS)

VNA Family & Children Services
1110 Prim Road
Colchester, VT 05446
860-4426
Fax: 802-652-0296
http://dcf.vermont.gov/cdd/cis

Children, Youth & Family Services

(A Division of The Howard Center for Human Services)
1138 Pine Street
Burlington, VT 05401
488-6000
www.howardcenter.org

University of Vermont Medical Center Mental Health Services UHC Campus

1 South Prospect Street, 3rd Floor
Burlington, VT 05401
847-0000

First Call for Children and Families in Crisis

(Program of Howard Center)
1138 Pine Street
Burlington, VT 05401
Crisis Line: 802-488-7777

Lund Family Center Residential Treatment Programs

(For Pregnant Or Parenting Young Women Ages 12-25)
76 Glenn Road
Burlington, VT 05401
864-7467

Milton Family Community Center

PO Box 619
23 Villemare Lane
Milton, VT 05468
893-1457
Fax: 802-893-1776
www.miltonfamilycenter.org

Northeastern Family Institute

30 Airport Road
South Burlington, 05403
658-0040
Fax: 802-658-0216
www.nfivermont.org

Pine St. Counseling Center

(A Division of the Howard Center for Human Services)
Adult Out-Patient
855 Pine Street
Burlington, VT 05401
488-6100
www.howardcenter.org

Spectrum Youth & Family Services

31 Elmwood Avenue
Burlington, VT 05401
864-7423
Fax: 802-660-0576
www.spectrumvt.org

Substance Abuse**Alcohol & Drug Abuse Programs**

Prevention Consultant
108 Cherry Street
Burlington, VT 05401
863-7561

Alcoholics Anonymous

P.O. Box 1212
Burlington, VT 05402
HOTLINE: 864-1212
www.aavt.org
burlingtonaa.org

Burlington Partnership for Healthy Community

PO Box 1353
236 Riverside Ave. Suite F
Burlington, VT 05402
652-0997
Fax: (802) 864-5263
www.burlingtonpartnership.com

Centerpoint - Adolescent Treatment Services

1025 Airport Drive
South Burlington, VT 05403
488-7711
www.centerpointservices.org

Chittenden Clinic

(Division of Howard Center)
1 South Prospect Street
Burlington, VT 05401
802-488-6450
802-488-7777
www.howardcenter.org
[http://www.howardcenter.org/
Substance-Abuse/Outpatient-
Services](http://www.howardcenter.org/Substance-Abuse/Outpatient-Services)

Champlain Valley Area Narcotics Anonymous

PO Box 64714
Burlington, VT 05406-4714
862-4516/1-866-580-8718
www.cvana.org
cvanavt@gmail.com

Green Mtn. Area Narcotics Anonymous

PO Box 6414
Brattleboro, VT 05302
773-5575
802-265-6414
www.gmana.org
info@gmana.org

Spectrum One Stop

(A Program of Spectrum Youth and Family Services)
177 Pearl Street
Burlington, VT 05401
864-7423
Fax: (802) 660-0576
www.spectrumvt.org
info@spectrumvt.org

Turning Point Center of Chittenden County

179 South Winooski Ave. Suite 301
Burlington, VT 05401
861-3150
www.turningpointcentervt.org

Winooski Partnership for Prevention

32 Malletts Bay Avenue
Winooski, VT 05404
(802) 655-4565
www.wcspc.org

Childcare/Early Childhood Education

Essex North Supervisory Union

318 Christian Hill, PO Box 100
Canaan, VT 05903
266-3330
Fax: 802-266-7085
www.ensvvt.org

Helping Hands North

96 Main Street, Suite 9
Colebrook, NH 03576
603-237-5891

NEKCA

253 Gale Street
Canaan, VT 05903
802-266-7134
Nekca.pccnorth.org

NE Kingdom Community Action

70 Main Street
Newport VT, 05855
802-334-7316
Fax: 802-334-5249
www.nekcavt.org

Child/Family Abuse

The Advocacy Program at Umbrella

St. Johnsbury: (802) 748-8645
Newport: (802) 334-0148
advocate@umbrellanek.org
www.umbrellanek.org

Northeast Kingdom Human Services, Inc

181 Crawford Road - Derby
P. O. Box 724
Newport, VT 05855
334-6744 office and 24/7 crisis services
www.nkhs.org

The Orleans and Essex Counties Child Advocacy Center

Serving Orleans and Northern Essex Counties
42 Central Street
Newport, VT 05855
334-6002

Caledonia State Attorney Office

Serving Caledonia County
211 Eastern Avenue Suite 102
St. Johnsbury, VT 05819
748-6657, Fax: 802-748-6659

Essex County Victim Advocate

Essex County State Attorney
PO Box 226
Orleans, VT 05860
802-754-2880
Fax:-754-2881

Family Education and Support

4-H/Youth Development

(802) 334-7325 ex. 481
Melinda Birch
www.uvm.edu/extension/youth/

Help Me Grow VT

Dial 2-1-1 ext 6
Text HMGVT to 898211
www.helpmegrowvt.org

Northeast Kingdom Human Services, Inc

181 Crawford Road - Derby
P. O. Box 724
Newport, VT 05855
334-6744 office and 24/7 crisis services
www.nkhs.org

NEKCA

253 Gale Street
Canaan, VT 05903
266-7134

Circle of Parents Support Groups

1-800-CHILDREN
(1-800-244-5373)
www.pcavt.org

Children's Integrated Services

55 Seymour Lane, Suite 27
Newport, VT 05855
334-5335, Fax: 802-334-5488

La Leche League

Free monthly meet up in Lyndonville, & St Johnsbury
Arcelie Reyes 917-428-9559
facebook.com/LaLecheLeagueNEK

Northeast Kingdom Youth Services

24 Bagley Street
St. Johnsbury, VT 05819
802-748-8732
Nekys.org

NEKCA Many Programs

70 Main ST
P.O. Box 346
Newport, VT 05855
802-334-7316

Financial Assistance/Housing/Food

Vermont 2-1-1

Dial 2-1-1 or 1866-652-4636
www.vermont211.org

Green Mountain Bible Church Food Shelf

567 Rt. 105 West
Island Pond, VT 05846
802-723-6184
Church #: 723-6143

NEKCA Canaan

253 Gale Street
Canaan, VT 05903
802-266-7134

NEKCA Island Pond

49 Miller Street
Island Pond, VT 05846
802-723-5276

Island Pond Food Shelf

21 Middle Street
First Congregational Church
Island Pond, VT 05846
802-723-5037

Sid's Pantry

173 School Street
Concord, VT 05824
802-695-2512

Indian Stream Health Center

141 Corliss Lane
Colebrook, NH 03576
603-237-8336
Fax: 603-237-4467
www.indianstream.org

Tri County Community Action

Fuel & Electric Aid
53 Park Street
Colebrook, NH 03576
603-752-3248

UVM Extension

338 Highland Avenue, Suite 3
Newport, VT 05855
802-334-7325

Health

Northeast Kingdom Human Services, Inc

181 Crawford Road - Derby
P. O. Box 724
Newport, VT 05855
334-6744 office and 24/7 crisis services
www.nkhs.org

Orleans/Essex VNA and Hospice

46 Lakemont Road
Newport, VT 05855
334-5213
www.oevna.org

Northern Human Services

(the Mental Health Center)
55 Colby St.
Colebrook, NH 03576
603-237-4955
Fax: 603-237-4882

Weeks Medical Center Home Health

278 Main Street
Lancaster, NH 03584
603-788-5020

Upper Connecticut Valley Hospital

181 Corliss Lane
Colebrook, NH 03576
603-237-4971

Vermont Department of Health

100 Main St, #220
Newport, VT 05855
334-6707
Toll Free: 1-800-952-2945

Franklin/Grand Isle Counties

Childcare/Early Childhood Education

Champlain Valley Head Start Field Office

5 Lemnah Drive, Suite 4
St. Albans, VT 05478
524-5876 or 524-8548
Fax: 802-524-8574
www.champlainvalleyheadstart.org

Champlain Islands Parent/Child Center

114 South Street
South Hero, VT 05486
372-4704 OR 372-5042
Fax: 802-372-8622
www.cipcc.org

Children's Integrated Services (CIS)

The Family Center of Northwestern Vermont

130 Fisher Pond Road
St Albans, VT 05478
524-6554
Fax: 802-524-1126
www.ncssinc.org

Childcare Resource & Referral/Childcare Financial Assistance

The Family Center of Northwestern Vermont

107 Fisher Pond Road
St. Albans, VT 05478
524-6554
Fax: 524-3894
www.ncssinc.org

Missisquoi Valley School District/Franklin County Early Childhood Programs

100 Robin Hood Drive, Suite 2
Swanton, VT 05488
868-4457
www.mvsdschools.org

Franklin Northeast Supervisory Union Early Childhood Programs (FNESU)

(includes towns of Bakersfield, Berkshire, Enosburg, Montgomery, and Richford)
80 Main Street
Richford, VT 05476
802-848-7661
Fax: 848-3531
www.fnesu.net

Franklin West Supervisory Union (FWSU)

(includes Georgia Early Childhood Program, BFA-Fairfax Preschool, and Fletcher Elementary Preschool)
4497 Highbridge Road
Fairfax, VT 05454
802-370-3113
Fax: 802-370-3115
www.fwsu.org

Grand Isle Early Childhood Program

Essential Early Education and Early Education Initiative Programs, Screening, Evaluation, Referral and Educational Programs
224 US RT 2
Grand Isle VT, 05458
372-6913
<http://www.grandisleschool.org/>

Maternal and Child Health — Vermont Department of Health

Office of Local Health
108 Cherry Street, Room 302
Burlington, VT 05402
Phone: 802-863-7333
Fax: 802-863-7229

VT Military, Family, Community Network Family Assistance Center

www.humanservices.vt.gov

Family Abuse

Voices Against Violence/Laurie's House

PO Box 72
St. Albans, VT 05478
24 hour crisis hotline:
802-524-6575
www.voicesagainstvviolence.org
voices@cvoeo.org

Special Investigation Units VT State Police

45 State Drive
Waterbury VT 05671
244-8781
www.vsp.vermont.gov
Also:
140 Fisher Pond Rd
St Albans, VT 05478
524-5993
Fax: 802-527-1150

Vermont Department for Children and Families (St. Albans)

Family Services
27 Federal St., Suite 300
St. Albans, VT 05478
802-527-7741
Fax: (802)-527-5404
Statewide Child Protection Line:
1-800-649-5285
www.dcf.vermont.gov/fsd

Family Education and Support

4-H Development

(802) 524-6501 Martha Manning
Franklin & Grand Isle,
www.uvm.edu/extension/youth/

Help Me Grow VT

Dial 2-1-1 ext 6
Text to 898211
www.helpmegrowvt.org

Champlain Adaptive Mounted Program (CHAMP)
57 East Shore Road
South Hero, VT 05486
372-4087 or Info@vtchamp.org
www.vtchamp.org

Children with Special Health Needs (CSHN)

PO Box 70
108 Cherry Street
Burlington, VT
863-7338

Circle of Parents Support Groups

(inc. Kinship/Adoptive, Recovery, and All Parent/Caregiver Support Groups)
Groups located across Franklin and Grand Isle Counties
1-802-498-0607 or
1-800-CHILDREN
(1-800-244-5373)
www.pcavt.org

Eleanor M. Luse Center for Communication: Speech, Language, and Hearing

UVM Pomeroy Hall
489 Main St.
Burlington, VT 05405
656-3861
Fax: 802-656-2528
luse.center@uvm.edu
www.uvm.edu/~cnhs/luse_center

Franklin County Caring Communities

27 Church Street, Suite 2
St. Albans, VT 05478
802-527-5049

Family Center of Northwestern Vermont/Northwestern Counseling and Support Services (NCSS)

6286, 107 Fisher Pond Road
St. Albans VT 05478
(802)-524-6554
www.ncssinc.org

Foster Grandparent Program, Franklin/Grand Isle

(through Franklin/Grand Isle United Way)
PO Box 387
412 Farrell St Suite 200
South Burlington VT, 05403
861-7822
<https://www.unitedwaynwvt.org/volunteer/foster-grandparent-program/>

Franklin County Home Health Agency /
3 Home Health Circle, Suite 1
St. Albans, VT 05478
Office: 802-527-7531
Fax: 802-527-7533
Toll Free: 1-800-888-4651
www.fchha.org

La Leche League
www.lllmarivt.org

Learning Together
(program for pregnant and parenting youth 13-22)
Individualized Case Management Services
www.ncssinc.org

NFI-Vermont
12 Fairfield Hill Road
St Albans, VT 05478
(802)-524-1700

Nurturing Parenting Programs
Groups located across Franklin and Grand Isle Counties
1-802-498-0607 or
1-800-CHILDREN
(1-800-244-5373)
www.pcavt.org

Franklin Grand Isle Restorative Justice Center
120 North Main Street
St Albans, VT 05478
(802)-524-7006

Vermont Family Network
600 Blair Park Rd, Suite 240,
Williston VT 05495
876-6291
1-800-800-4005
www.vermontfamilynetwork.org

UVM Extension/Expanded Food and Nutrition
Education Programming (EFNEP)
109 Carrigan Drive, UVM,
Burlington, VT 05405-0086
(802)-656-2311
Fax: 802-656-8642
Toll Free: 1-800-639-2130
efnep@uvm.edu
www.edu/extension/efnep

Vermont Adult Learning
5 Lemnah Drive
St. Albans, VT 05478
524-9233
Fax: 524-9702
www.vtadulthoodlearning.org
fgiinfo@vtadulthoodlearning.org

The UVM Health Network, Home, Health and Hospice
1110 Prim Road
Colchester, VT
802-658-1900
www.uvmhomehealth.org

Financial Assistance/ Housing/Food

Vermont 2-1-1 United Ways of Vermont
Dial 2-1-1 or 1-866-652-4636
www.vermont211.org

Champlain Housing Trust
13 Lake Street
St Albans 05478
(802)-527-2361
Fax: 527-2373
www.getahome.org

Commodity Supplemental Food Program Vermont Foodbank
33 Parker Road
Barre, VT 05641
1-800-585-2265
https://www.vtfoodbank.org/share-food/csfp

Franklin-Grand Isle Community Action (CVOEO)
5 Lemnah Drive Suite 5
St. Albans, VT 05478
(802)-527-7392
www.cvoeo.org

Enosburg Food Shelf
Enosburg Falls, VT 05450
(802)-933-4193

Fairfield Community Center Association
124 School Street
East Fairfield, VT 05448
802-827-3130

Montgomery UMC Food Pantry
60 Fuller Bridge Road
United Methodist Church
Montgomery, VT 05470
802-326-4651

North West Family Foods/ CVOEO
5 Lemnah Drive
St. Albans, VT 05478
802-527-7392
info@NorthWestFamilyFoods.org

Swanton Community Food Shelf
65 Canada Street
Swanton, VT 05488
802-868-7185

Champlain Islands Food Shelf
12 Hyde Road
Grand Isle, VT 05458
802-372-8404

Hunger Free VT
38 Eastwood Drive, Ste 100
South Burlington, VT 05403
802-865-0255
www.hungerfreevt.org

Samaritan House/ Tim's House
20 Kingman Street
St Albans, VT 05478
802-527-0847
Fax: 802-527-7906
www.samaritanhouseinc.com

Vermont Department For Children and Families, Economic Services Division (ReachUP, 3SquaresVT, etc)
District Office
27 Federal Street
St Albans, VT 05478
1-800-479-6151
http://dcf.vermont.gov/

Women, Infants, and Children (WIC)
Supplemental Food Program of Vermont Department of Health
27 Federal Street, Suite 201
St. Albans, VT 05478
524-7970
www.healthvermont.org
www.healthvt.gov/local-health-offices/st-albans/wic-services

Health

Aspire Together
56 Colchester Ave
Burlington VT, 05401
527-2005
www.aspire-together.org

Children with Special Health Needs
Vermont Department of Health
108 Cherry Street, PO Box 70
Burlington, VT 05402
800-660-4427 or 802-863-7338
vdhco@state.vt.us

Champlain Islands Health Center
52 Community Lane
South Hero, VT 05486
(802) 372-4687
www.chcb.org/locations-providers/champlain-islands-health-center/

Dr. Dynasaur
(low-cost or free health coverage for children, teenagers under age 19 and pregnant women)
www.greenmountaincare.org/vermont-health-insurance-plans/dr-dynasaur

Franklin County Home Health Agency
3 Home Health Circle
St. Albans, VT 05478
(802)-527-7531
www.fchha.org

You First*(VT Dept. of Health)*

St. Albans, VT 05478

1-800-508-2222

Fax: (802)-657-4208

www.healthvermont.gov/wellness/you-first/

Northern Tier Center for Health (NOTCH)

64 Industrial Park

Alburl, VT 05440

Alburl Health Center

796-4414

Fax: 796-3086

www.notchvt.org for all locations

(NOTCH)

Richford Health Center

44 Main Street, Ste 200

Richford, VT 05476

802-255-5560

(NOTCH)

St Albans Health Center

3 Crest Road

St Albans, VT 05478

(802)-524-4554

Fax: 527-6792

(NOTCH)

Swanton Health Center

26 Canada Street

Swanton, VT 05488

(802)-868-2454

Fax: 868-2461

(NOTCH)

Enosburg Health Center

PO Box 428

382 Main Street

Enosburg Falls, VT 05450

(802)-933-5831

Fax: 933-2362

Planned Parenthood of Northern New England

80 Fairfield Street

St. Albans, VT 05478

(802)-527-1727

Fax: 802-527-1729

Vermont Cares (HIV/AIDS)

PO Box 5248

187 St. Paul Street #2

Burlington, VT 05401

863-2437

Toll Free: 1-800-649-2437

www.vtcares.org

Vermont Department of Health/Breastfeeding Support and Peer Counselors HIV & AIDS Testing/ Immunizations

27 Federal Street

St. Albans, VT 05478-2248

524-7970

www.healthvermont.org

Mental Health**Centerpoint Adolescent Treatment Services**

1025 Airport Drive

South Burlington, VT 05403

81 West Canal Street

Winooski, VT 05404

(802)-488-7711

www.centerpointservices.org

information@centerpointservices.org

Children's Integrated Services (CIS) at The Family Center of Northwestern VT

130 Fisher Pond Road

St. Albans VT 05478

(802)-524-6554

Fax: 802-524-1126

www.dcf.vermont.gov

Northwestern Counseling & Support Services (NCSS)

107 and 130 Fisher Pond Road

St. Albans, VT 05478

802-524-6554

Fax: 802-527-7801

24-Hour Crisis / Emergency

Service:

1-800-834-7793 or 802-524-6554

www.ncssinc.org

Substance Abuse**Al-Anon Alateen/ Adult Children**

St. Albans, VT 05478

1-866-972-5266

www.vermontalateen.org

Alcoholics Anonymous

182 Lake Street

St. Albans, VT 05478

AA Hotline 24/7: 802-741-7100

www.aavt.org

Chittenden Clinic*(Division of Howard Center)*

75 San Reno Dr.

South Burlington, VT 05403

802-488-6450

www.howardcenter.org

Howard Center*(A division of The Howard Center for Human Services & CRASH Program)*

172 Fairfield Street

St. Albans, VT 05478

488-6265

www.howardcenter.org

Turning Point of Franklin County

182 Lake Street

St Albans, VT 05478

(802)-782-8454

www.turningpointfranklincounty.org

Alcohol and Drug Abuse Programs**Prevention Consultant**

27 Federal Street

St. Albans, VT 05478

(802)-524-7918

Franklin County Caring Communities

27 Church Street Suite 2

St. Albans, VT 05478

802-527-5049

info@fcccp.org

www.fcccp.org

Transportation**C.I.D.E.R.**

324 U.S. Route 2

South Hero, VT 05486

Mailing: C.I.D.E.R.

PO Box 13

South Hero, VT 05486

(802)-372-6425

Fax: 802-372-6747

cidervt@sover.net

www.cidervt.org

GMTA (Green Mountain Transit Agency)

375 Lake Road, Suite 3B

St. Albans, VT 05478

802-527-2181

www.ridegmt.com

Childcare/Early Childhood Education

Child Care Referral/Subsidy Lamoille Family Center

480 Cadys Falls Road
Morrisville, Vermont 05661
Phone: 802-888-5229
Fax: 802-888-5392
info@lamoillefamilycenter.org
www.lamoillefamilycenter.org

Vermont Department of Health -WIC

63 Professional Drive, Suite 1
Morrisville VT 05661
802 888-7447 ex. 2
Fax: 802 888-2576
Toll free: 1-888-253-8798
www.healthvermont.gov/wic

Lamoille South Unified Union

46 Copley Avenue
Morrisville VT 05661
Phone: 802-888-4541
Fax: 802-888-6710
www.lamoillesouthsu.org

Capstone Community Action – Lamoille Head Start

250 Industrial Park Drive
Morrisville VT 05661
Phone: 802-888-7993

Child/Family Abuse

Building Bright Futures

600 Blair Park, Suite 160
Williston, Vermont 05495
802-279-7558- Steve Ames
sames@buildingbrightfutures.org
www.buildingbrightfutures.org

Clarina Howard Nichols Center

Drop in community center at
120 Northgate Plaza, Suite 3
PO Box 517
Morrisville, VT 05661
Business: (802) 888-2584
Hotline: (802) 888-5256
Fax: (802) 888-2570
info@clarina.org
www.clarina.org

Vermont Department for Children and Families

District Office
63 Professional Drive, Suite 4
Morrisville, VT 05661
Phone: 1-800-479-6151

Vermont Child Protection

Report suspected child abuse or neglect
(24 hours a day, 7 days a week)
1 800 649-5285

Family Education And Support

4-H/Youth Development

(802) 888-4972 Anthony Willey
www.uvm.edu/extension/youth/

Central Vermont

Adult Basic Education
52 Portland St., 2nd Floor Rm 8
PO Box 478,
Morrisville VT 05661
802-888-5531
www.cvabe.org

Children's Integrated Services, CIS

480 Cadys Falls Road
Morrisville, VT 05661
(802) 888-5229
www.lamoillefamilycenter.org

La Leche League

Arcelie Reyes 917-428-9559
Nursing Beyond a Year and Monthly meet ups in Montpelier
facebook.com/LLLofMontpelier

Laraway Youth and Family Services

275 Route 15 West
P.O. Box 621
Johnson, VT 05656
802-635-2805
Fax: 635-7273

Lamoille Family Center

480 Cadys Falls Road
Morrisville, Vermont 05661
Phone: 802-888-5229
Fax: 802-888-5392
info@lamoillefamilycenter.org
www.lamoillefamilycenter.org

Lamoille South Unified Union

46 Copley Avenue
Morrisville VT 05661
Phone: 802-888-4541
www.lamoillesouthsu.org

Nurturing Parenting Programs

1 802 498-0611 or
1 800-CHILDREN (1- 800-244-5373)
www.pcavt.org
pcavt@pcavt.org

Circle of Parents

Support Groups
1-800-CHILDREN
(1-800-244-5373)
www.pcavt.org

UVM Extension

29 Sunset Drive Suite 2
Morrisville, VT 05661-8313
Phone: 802-888-4972
Fax: 802-888-2432

Lamoille North Supervisory Union & School District

96 Cricket Hill Road
Hyde Park VT, 05655
802-888-7908
www.lnsu.org

Financial Assistance/Housing/Food

Vermont 2-1-1

United Ways of Vermont
Dial 2-1-1 or 1-866-652-4636
www.vermont211.org

Cambridge Community Food Shelf

Monday: 6-7
Tuesday: 1-4
16 Church Street
Jeffersonville, VT 05646
802-644-8911

Johnson Food Shelf

Tuesday & Friday: 9-12
Wednesday: 4-6
661 Railroad Street
Johnson, VT 05656-0364
802-635-9003

Lamoille Community Food Share

Monday-Friday: 9-11:30
Saturday: 9:30-11
197 Harrell Street
Morrisville, VT 05661
802-888-6550

Capstone Community Action

250 Industrial Park Drive
Morrisville, VT 05661
802 888-7993
Toll-free: 1-800-639-8710

Lamoille Housing Partnership

PO Box 637
49 Brigham Street
Morrisville, VT 05661
802 888-5714
www.lamoillehousing.org/contact-1
www.lamoillehousing.org

Vermont Department for Children and Families

District Office
63 Professional Drive, Suite 4
Morrisville, VT 05661
Phone: 1-800-479-6151

Health

Lamoille Home Health and Hospice

54 Farr Avenue
Morrisville, VT 05661
802 888-4651
www.lhha.org

Planned Parenthood of Northern New England

1-866-476-1321
http://www.plannedparenthood.org/planned-parenthood-northern-new-england

Vermont CARES (HIV/AIDS)

187 St. Paul Street
Burlington, VT 05401
1-800-649-2437
www.vtcares.org



Lamoille County

Vermont Dept. of Health

Phone: 888-253-8798 or
802-888-7447
TTY Users: Dial 7-1-1
63 Professional Drive, Suite 1
Morrisville, VT 05661
healthvermont.gov/local/district/
Morrisville.aspx

Mental Health

Behavioral Health and Wellness Center

802-888-8320
Fax: 802-888-8136
65 Northgate Plaza, Suite 11
Morrisville VT 05661
www.chslv.org/behavioral.html

Lamoille County Mental Health Services

72 Harrel Street
Morrisville, VT 05661
802-888-5026
Fax: 802-888-6393
Email: info@lamoille.org
www.lamoille.org

Alcoholics Anonymous

1-800-839-1686
http://alcoholicsanonymous.com

Alcohol and Drug Abuse Programs

802-651-1550
AHS.VDHADAP@state.vt.us

Substance Abuse

Al-Anon & Alateen

In VT: 866-97-AL-ANON
866-972-5266 or 802-860-8388
www.vermontalananalateen.org

North Central Vermont Recovery Center

275 Brooklyn Street
Morrisville, Vermont 05661
802 851-8120
www.ncvrc.com

Orange County

Childcare/Early Childhood Education

Blue Mt. Union School

2420 Route 302
Wells River, VT 05081
757-2711
www.bmuschool.org

Capstone Community Action Head Start

Phone: 1-800-639-1053 or
479-1053
mlamson@capstonevt.org
www.capstonevt.org/head-start

Capstone Community Action/Headstart Orange County West

PO Box 284
12 Prince St.
Randolph, VT 05060
728-9506
Toll Free: 1-800-846-9506
www.capstonevt.org

Capstone Community Action/Headstart Orange County East

P.O. Box 500
22 Whistle Stop Way
Bradford, VT 05033
222-5419
Toll Free: 1-800-639-1053

Orange East Supervisory Union

530 Waits River Rd
Bradford, VT 05033
222-5216
Fax: 802-222-4451
www.oesu.org

Orange Southwest School District

24 Central Street
Randolph, VT 05060
728-5052
Special Ed: 728-9844
www.orangesouthwest.org

Orange County Child Advocacy Center Special Investigations Unit

Director: Ferron Wambild
PO Box 254
354-VT Route 110
Chelsea, VT 05038
685-4712

Child/Family Abuse

Safeline

PO Box 368
Chelsea, VT 05038
685-7900
Fax: 802-685-7900
Toll Free: 1-800-639-7233
safelineinfo@safelinevt.org
www.safelinevt.org

WISE – Upper Valley

38 Bank Street
Lebanon, NH 03766
603-448-5922
Hotline: 1-866-348-9473
www.WISEuv.org

Vermont Department for Children and Families Child Protection

District Office
Director: Kathy Hemingway
118 Prospect St. STE. 400
White River Jct., VT 05001
295-8840
www.dcf.vermont.gov

State Attorney

PO Box 116
30 Upper Village Road
Chelsea, VT 05038
Victim's Advocate: 685-3036

Family Education And Support

4H/Youth Development

(802) 476-2003 Molly McFaun
www.uvm.edu/extension/youth/

Help Me Grow VT

Dial 2-1-1
Text HMGVT to 898211
www.helpmegrowvt.org

Central Vermont

Adult Basic Education

Randolph Learning Center
Teacher/Community Coordinator
Tom Treece: Email ttreece@
cvabe.org
PO Box 84
10 South Main Street
Randolph, VT 05060
728-4492
www.cvabe.org

Bradford Learning Center

Teacher / Community
Coordinator
Ed Pirie: epirie@cvabe.org
PO Box 917
24 Barton Street Suite 1
Bradford, VT 05033
222-3282
www.cvabe.org

The Mentoring Project of the Upper Valley

P.O. Box 237
4251 Waits River Road
Bradford, VT 05033
802-439-3562

Children's Integrated Services (CIS), Orange County Parent Child Center

693 VT Route 110
Tunbridge, VT 05077
685-2264
Fax: 802-685-2278
www.orangecountypcc.org

**La Leche League
Referral Line**
lllmarivt.org

Outright Vermont
PO Box 5235
Burlington, VT 05402
241 North Winooksi Avenue
Burlington, VT 05401
865-9677
info@outrightvt.org
www.outrightvt.org

**Circle of Parents
Support Groups**
1-800-CHILDREN
(1-800-244-5373)

Financial Assistance/ Housing/Food

**Vermont 2-1-1
United Ways of Vermont**
Dial 2-1-1 or 1-866-652-4636
www.vermont211.org

Bradford Town Office
172 North Main Street
Bradford, VT 05033
802-222-4727

Randolph Area Food Shelf
12 Prince Street, Unit 3
Randolph, VT 05060
802-431-0144

Thetford Food Shelf
3910 VT Route 113
Thetford Center, VT 05075-0126
802-785-2922
Director: Mary Allen 612-719-8618

United Church of Chelsea
13 North Common Road
Chelsea, VT 05038-0098
802-685-4874
unitedchurchofchelsea@myfair-
point.net

**Capstone Community Action
Orange County East**
PO Box 284
12 Prince Street, Suite A
Randolph, VT 05060
728-9506
Statewide: 1-800-846-9506
www.capstonevt.org

**Vermont Department for
Children and Families**
Family Services Division
District Office (Hartford)
118 Prospect St, Suite 400
White River Jct., VT 05001-2095
295-8840
Hotline: 1-800-649-5285

**Orange County
Parent/Child Center**
693 VT Route 110
Tunbridge, VT 05077
685-2264
www.orangecountypcc.org

Health

HIV/HCV Resource Center
2 Blacksmith Street
Lebanon, NH 03766
603-448-8887
Toll Free: 1-800-816-2220
Fax: 1-603-448-8885
www.h2rc.org

**Planned Parenthood of
Northern New England**
See Washington County Listing

Vermont Dept. of Health
118 Prospect St Suite 300
White River Jct., VT 05001
295-8820
1-888-253-8799
www.healthvermont.gov

**Visiting Nurse Association of
VT/NH**
88 Prospect Street
White River Jct, VT 05001
603-298-0465
Fax: 888-300-8853
vnh@vnhcare.org
www.vnhcare.org

Mental Health

**Brookhaven Treatment and
Learning Center**
331 VT RTE 110
PO Box 127
Chelsea, VT 05038
Phone: 802- 685-4458
Fax: 802-685-3094
www.brookhaventlc.org

**Clara Martin Center –
Randolph**
PO Box G
Main Office:
11 North Main Street
Randolph, VT 05060
728-4466
Emergency: 1-800-639-6360
www.claramartin.org

**Clara Martin Center -
Bradford**
1483 Lower Plain
PO Box 278
Bradford, VT 05033
Phone: (802) 222-4477

Substance Abuse

**Al-Anon Ala teen/
Adult Children**
866-972-5266
802-860-8388
info@vermontalananalateen.org
www.vermontalananalateen.org

Orange East Senior Center
Open Mon-Fri from 8-2 (lunch)
176 Waits River Rd. (behind
Bradford Vets)
Bradford, VT 05033
802-222-4782

Bugbee Senior Center
Open Mon-Fri 8-4 with Meal at
noon
262 No Main St
White River Jct, VT 05001
802-295-9068

Alcoholics Anonymous
PO Box 1104
Montpelier, VT 05602
229-5100
24 hour helpline for White River
Junction & Upper Valley: 295-
7611
www.aavt.org

Second Wind Foundation
200 Olcott Dr
White River Junction, VT 05001
295-5206
Secondwindfound.org

Valley Vista
23 Upper Plain
Bradford, VT 05033
222-5201
hello@vvista.net
www.vvista.net



Orleans County

Childcare/Early Childhood Education

Albany Early Childhood Collaborative Program
351 Main Street
Albany, VT 05820
Albany Site: 802 755-6811
NEKCA Barton: 802 525-6291
North Troy Site: 802 988-2262

Department for Children & Families
Family Services
100 Main Street, Suite 220
Newport, VT 05855
802-334-6723
www.dcf.vermont.gov/fsd

Child Care Resource & Referral
Northeast Kingdom
Community Action
Parent Child Center North
70 Main St
Newport, VT 05855
802 334-7316
www.nekcavt.org

Children's Integrated Services (CIS)
NE Kingdom Learning Services
55 Seymour Lane
Newport, VT 05855
802-334-5335
802-334-6532
www.neklsvt.org

Orleans Southwest Supervisory Union
P.O. Box 338
157 Daniels Road
Hardwick, VT 05843
802 472-6531
Fax: 472-6250
www.ossu.org

Child/Family Abuse

Vermont Department for Children and Families, Family Services
District Office
100 Main Street, Suite 220
Newport, VT 05855
802 334-6723
www.dcf.vermont.gov

Essex County Victim Advocate
State Attorney's Office
PO Box 226
Orleans, VT 05860
802-754-2880
Fax: 802-754-2881

Northeast Kingdom Human Services, Inc
181 Crawford Road - Derby
P. O. Box 724
Newport, VT 05855
334-6744 office and 24/7 crisis services
www.nkhs.org

Orleans County Victim Advocate
State's Attorney's Office
217 Main Street, Suite 2
Newport, VT 05855
802 334-2037
Fax: 802 334-3319

Umbrella North
95 East Main Street, Suite 1
Newport, VT 05855
802 334-0148 or
Hotline: 1-800-224-7837
(fax and hotline the same)

Family Education And Support

4-H/Youth Development
(802) 334-7325 Melinda Birch
www.uvm.edu/extension/youth/

Northeast Kingdom Human Services, Inc
181 Crawford Road - Derby
P. O. Box 724
Newport, VT 05855
334-6744 office and 24/7 crisis services
www.nkhs.org

Orleans County Child Advocacy Center
Serving Orleans & Northern Essex Counties
42 Central Street
Newport VT 05855
802 334-6002
www.orleanscac.org

Laraway Youth and Family Services
P.O. Box 621
275 Route 15 West
Johnson, VT 05656
802-635-2805
Fax: 802-635-2805
Laraway.org

Children's Integrated Services
55 Seymour Lane, Suite 27
Newport, VT 05855
802 334-5335
www.neklsvt.org
Fax: 802-334-5488

La Leche League
Arcelie Reyes 917-428-9559
Free monthly meet-up in Lyndonville & St. Johnsbury, facebook.com/LaLecheLeagueNEK

NE Kingdom Community Action Youth Services
PO Box 346
70 Main Street
Newport, VT 05855
802 334-7316
www.nekcavt.org

Circle of Parents Support Groups
1-800-CHILDREN
(1-800-244-5373)

Nurturing Parenting Programs
802-498-0611
1 800-CHILDREN
(1 800 244-5373)
www.pcavt.org
pcavt@pcavt.org

Vermont 2-1-1 United Ways of Vermont
Dial 2-1-1 or 1-866-652-4636
www.vermont211.org

Financial Assistance/Housing/Food

Help Me Grow VT
Dial 2-1-1 ext 6
Text HMGVT to 898211
www.helpmegrowvt.org

Northeast Kingdom Community Action, Inc.
PO Box 346
70 Main Street
Newport, VT 05855
Toll Free: 1-800-639-4065
www.nekcavt.org

Jay Food Shelf
1036 Route 242
Town Clerk's Office
Jay, VT 05859
Kim Arel- Coordinator: 802-848-3313

St. Mark's Episcopal Church
44 2nd Street
Newport, VT 05855
802-334-7365

United Church of Newport
63 3rd Street
Newport, VT 05855
802-334-6033

Vermont Department for Children and Families, Economic Services Division
100 Main Street
Newport, VT 05855
Toll Free: 1-800-479-6151

Parent Child Center North Thrift Stores

55 Seymour Lane
Newport, VT 05855
802 673-3447
Fax: 802-334-5249

Health

Orleans/Essex VNA and Hospice

46 Lakemont Road
Newport, VT 05855
802 334-5213
www.oevna.org

Planned Parenthood of Northern New England at Newport Health Center

Health Services
79 Coventry St.
PO Box 932
Newport, VT 05855
802-334-5822
Fax: 802-334-5312
www.plannedparenthood.org

Vermont Cares (HIV/AIDS)

1091 Hospital Drive, Suite 1
St. Johnsbury, VT 05819
802 748-9061
www.vtcares.org

Vermont Department of Health

100 Main Street, Suite 220
Newport, VT 05855
802 334-6707
Toll Free: 1-800-952-2945
www.healthvermont.gov

Mental Health

Northeast Kingdom Human Services, Inc

181 Crawford Road - Derby
P. O. Box 724
Newport, VT 05855
334-6744 office and 24/7 crisis services
www.nkhs.org

Substance Abuse

Newport Adolescent and Adult Programs Substance Abuse Counseling

181 Crawford Road, Derby
PO Box 724
Newport, Vt. 05855
802 334-5246
www.nkhs.org

Northeast Kingdom Human Services, Inc

181 Crawford Road - Derby
P. O. Box 724
Newport, VT 05855
334-6744 office and 24/7 crisis services
www.nkhs.org

Childcare/Early Childhood Education

Boys & Girls Club of Rutland County

PO Box 636
71-75 Merchants Row
Rutland, VT 05701
747-4944
www.rutlandbgclub.org

Children's Integrated Services CIS

PO Box 787
7 Albert Cree Drive
Rutland, VT 05701
770-1621
Fax: 802-775-2304

Kids on the Move

A Pediatric Rehabilitation Program

7 Albert Cree Drive
Rutland, VT 05701
775-0568
www.vermontvisitingnurses.org

Rutland Head Start

PO Box 222
78 Meadow Street
Rutland, VT 05702
775-8225
www.rchscn.org

Rutland City Supervisory District

6 Church Street
Rutland, VT 05701
773-1900

Rutland Central Supervisory Union

16 Evelyn Street
Rutland, VT 05701
775-4342
www.rcsu.org

Rutland Southwest Supervisory Union

96 School Cir.
Poultney, VT 05764
287-5286
www.rswsu.org

Rutland Northeast Supervisory Union

49 Court Drive
Brandon VT 05733
247-5757
www.rnesu.org

Mill River Unified School District

2321 Middle Rd
North Clarendon, VT 05759
775-3264 Fax: 775-8063

Two Rivers Supervisory Union

609 VT Route 103 South
Ludlow, VT 05149
875-3365
Fax: 802-875-3313
su.trsu.org

Bennington Rutland Supervisory Union

6378 VT Route 7A
Sunderland, VT 05250
362-2452
www.brsu.org

Benson EEE Program

32 School Street
Benson, VT 05731
537-2491
aroy@arsu.org

Fair Haven Grade School Bright Beginnings

115 North Main Street
Fair Haven, VT 05743
265-3883

Vermont Achievement Center at Castleton

263 Elementary School Road
Castleton, VT 05735
468-5624

West Rutland EEE Program

713 Main Street
West Rutland, VT 05777
438-2288

Vermont Achievement Center

Child Care Resource & Referral Services
88 Park Street
Rutland, VT 05701
775-2395
www.vacvt.org

Child/Family Abuse

Child First Advocacy Center

80 West St
Suite 203, Box 6822
Rutland, VT 05702
747-0200 Fax: 802-747-7060
www.childfirstadvocacycenter.org

New Story Center

PO Box 313
Rutland, VT 05702
775-6788
Hot Line: 775-3232
Sexual Abuse: 1-800-489-7273
Dom. Violence: 1-800-228-7395
www.rcwn.org

Victim Advocate

400 Asa Bloomer Building
88 Merchant's Row
Rutland, VT 05701-9401
786-2531

Vermont Department for Children and Families

District Office:
88 Merchants Row
220 Asa Bloomer Building,
Rutland, VT 05701-9409
786-5817
www.dcf.vermont.gov

Family Education And Support

4-H/Youth Development (802) 773-3349 Kimberly Griffin

www.uvm.edu/extension/youth/

Help Me Grow VT

Dial 2-1-1 ext 6
Text HMGVT to 898211
www.helpmegrowvt.org

Parent Child Center Children Integrated Services Rutland County

61 Pleasant Street
Rutland VT 05701
802-775-9711
rcpcc.org

Boys and Girls Club of Rutland County

71-77 Merchants Row
Rutland VT 05707
802-747-4944

Castleton University

Stafford Academic Center
251 South Street
Castleton, VT 05735
802-468-1220

Friends in Adoption

PO Box 238
212 Main St.
Poultney, VT 05764
1-800-ADOPT (1-800-982-3678)
fia@friendsinadoption.org
www.friendsinadoption.org

Circle of Parents Support Groups

1-800-CHILDREN
(1-800-244-5373)
www.pcavt.org

La Leche League Referral Line

lllmarivt.org, 802-879-3000
Free monthly meet-up in
Woodstock, [facebook.com/LebanonNH2](https://www.facebook.com/LebanonNH2)
ariel@woodstocklactation.com
phone 281-731-7313

Ludlow Teen Center

106 Main Street#3
Ludlow, VT 05149
802-228-2400

The Mentor Connector

P O Box 1617
110 Merchants Row
Rutland, VT 05701
802-775-3434
hello@mentorconnector.com

UVM Extension

Howe Center Business Park
271 North Main St Suite 110
Rutland, VT 05701-2424
802-773-3349 Fax: 1-800-281-6997

Vermont Adult Learning

16 Evelyn Street, Suite 101
Rutland, VT 05701
775-0617
Fax: 802-773-0323
Email rutlandlearning@vtadultlearning.org
Vermont
2-1-1

Financial Assistance/ Housing/Food

Vermont 2-1-1

United Ways of Vermont
Dial 2-1-1 or 1-866-652-4636
www.vermont211.org

BROC - Community Action in Southwestern Vermont Food Shelf

45 Union St.
Rutland, VT 05701
775-0878
www.broc.org

Fair Haven Concerned Inc.

73 Main Street
Fair Haven, VT 05743
802-265-3666

Hubbarton-Castleton Food

1851 Monument Hill Road
Hubbarton, VT 05735
802-691-0405

Our Neighbors Table

133 Rt. 30
Wells, VT 05774
802-645-0934

Pittsford Food Shelf

4085 US Rt. 7
Pittsford, VT 05763
802-483-2967

Poultney Food Shelf

66 Beaman Street,
The Stone Bridge
Poultney, VT 05764
802-287-9558

Salvation Army

1 Scale Ave., Bldg. 12 A&B
Rutland, VT 05701
802-775-5150

Rutland Housing Authority

5 Tremont Street
Rutland, VT 05701
775-2926; ext. 10
Fax: 802-747-6180
Email: rhavt@sover.net
info@rhavt.org

Rutland City Rescue Mission

PO Box 80
31 Park Street
Rutland, VT 05701
775-5661

Vermont Department for Children and Families, Economic Services Division

320 Asa Bloomer State Office
Bldg.
88 Merchants Row
Rutland, VT 05701
802-786-5817
Toll Free: 1-800-479-6151
www.dcf.vermont.gov

Health

Planned Parenthood of Northern New England

11 Burnham Rd
Rutland, VT 05701
775-2333
Fax: 802-775-2044

Rutland Area VNA & Hospice

PO Box 787, 7 Cree Dr
Rutland, VT 05701
775-0568
www.ravnah.org

Vermont Cares (HIV/AIDS)

PO Box 6033
Rutland, VT 05701
775-5884

Vermont Dept. of Health

300 Asa Bloomer State Office
Bldg.
88 Merchants Row
Rutland, VT 05701
786-5811

Mental Health

Rutland Mental Health Services

Child, Family & Community Services
PO Box 222
Main Office 78 S. Main Street
Rutland, VT 05701
775-2381: Main Office Line
773-4225: Children in Crisis
24-Hour Emergency Services
775-1000: Adult Crisis Line
Toll free: 877-430-2273
www.rmhsccn.org

Substance Abuse

Turning Point Center of Rutland

141 State St.
Rutland, VT 05701
802-773-6010
Turningpointcenterrutland@yahoo.com

Alcoholics Anonymous

Rutland, VT
775-0402

Evergreen Center Out Patient Services

135 Granger St
Rutland, VT 05701
747-3588
www.rmhsccn.org

Narcotics Anonymous

Rutland, VT 05701
773-5575

Alcohol and Drug Abuse Programs

Prevention Consultant
300 Asa Bloomer State Office
Building
88 Merchants Row
Rutland, VT 05701
786-5876



Washington County

Childcare/Early Childhood Education

Capstone Community Action - Central Office

20 Gable Place
Barre, VT 05641
479-1053
Toll Free: 1-800-639-1053

Children's Early Learning Space

397 Main Street, Suite 5
Waterbury, VT 05676
244-5980
tcels@gmail.com

Family Center of Washington County

383 Sherwood Drive
Montpelier, VT 05602
262-3292
www.fcwcv.org

Capstone Community Action - Barre Head Start

Brook Street School
45 Brook Street
Barre, VT 05641
476-8474

Capstone Community Action - Washington County Head Start

921 US Rte 302- Berlin, Suite 1
Barre, VT 05641
223-4226

Child/Family Abuse

AWARE, Inc

PO Box 307
88 High Street
Hardwick, VT 05843
802-472-6463 (24 hr, toll free)
Fax: 802-472-3504
aware@vtlink.net
awarevt.org

Circle

PO Box 652
Barre, VT 05641
24-Hour Emergency Service:
1-877-543-9498
www.circlevt.org

Our House - Child Sexual Abuse Advocacy & Treatment

38 Summer Street
Barre, VT 05641
Phone: 802-476-8825
Fax: 802-479-0370
Email: ourhousebarre@gmail.com

Sexual Assault Crisis Team (SACT)

4 Cottage St.
Barre, VT 05641
Office: 476-1388
Hotline: 479-5577
www.sactvt.org

Central Vermont ARC

Families and Friends United
PO Box 751
Montpelier, VT 05601
223-6149
Centralvermontarc@gmail.com

State's Attorney Victim Advocate

255 North Main Street
Barre, VT 05641
Phone: 802-479-4220
Fax: 802-479-4408

Family Education And Support

4-H/ Youth Development

(802) 476-2003 Molly McFaun
www.uvm.edu/extension/youth/

Help Me Grow VT

Dial 2-1-1-ext 6
Text HMGVT to 898211
www.helpmegrowvt.org

Buddy Up - Youth Mentoring Program

(3rd-6th grade)
Center for Civic Engagement
Wise Campus Center
158 Harmon Drive
Northfield, VT 05663-2670
485-2644
4achange@norwich.edu

Basement Teen Center

P.O. Box 627
39 Main St
Montpelier, VT 05602
802-223-3877
229-9151 ex. 234

Cabot Connects Mentoring

P.O. Box 245
25 Common Road
Cabot, VT 05667
802-563-2289
Suzie Socks ex. 204

Twinfield Together Mentoring Program

106 Nasmith Brook Road
Plainfield, VT 05667
802-426-3213

Central Vermont Adult Basic Education

46 Washington Street, Suite 100
Barre, VT 05641
476-4588
www.cvabe.org
or:
100 State Street, Suite 3
Montpelier, VT 05602
223-3403
or:
31 North Main Street
Waterbury, VT 05676
244-8765
www.cvabe.org

Family, Infant & Toddler Project

Family Center of Washington County

383 Sherwood Drive
Montpelier, VT 05602
262-3292
www.fcwcv.org

Good Beginnings of Central Vermont

174 River Street
Montpelier, VT 05602
595-7953
info@goodbeginningscentralvt.org
www.goodbeginningscentralvt.org

La Leche League Referral Line

llmarivt.org
Free monthly meet-up in Montpelier, Nursing Beyond a Year meet up in Montpelier, facebook.com/LLLoftMontpelierVT

Outright Vermont

PO Box 5235, 05402
241 N. Winooski Ave.
Burlington, VT 05401
865-9677
info@outrightvt.org
www.outrightvt.org

Circle of Parents Support Groups

1-800-CHILDREN
(1-800-244-5373)

Family Center of Washington County

(a member of the Parent/Child Network)
383 Sherwood Drive
Montpelier, VT 05602
262-3292 ext. 122
www.fcwcv.org

Washington County Youth Service Bureau/Boys and Girls Club

PO Box 627
38 Elm Street #1
Montpelier, VT 05601
229-9151
www.wcysb.org

Washington Central Girls & Boys First Mentoring

(Montpelier & U32 Districts)
73 Main Street
Montpelier, VT 05602
802-224-6500

Financial Assistance/Housing/Food

Vermont 2-1-1

United Ways of Vermont
Dial 2-1-1 or 1-866-652-4636
www.vermont211.org

Barre Evangelical Free Church

Youth Group, 5pm Sundays, Grades 7-12

17 South Main Street
Barre, VT 05641
802-476-5344

Barre Salvation Army

25 Keith Avenue
Barre, VT 05641
802-476-5301

CERV

Food Shelf—Mon-5.30 to 6.30
Thrift Shop Mon 9 to 11
31 Dog River Drive
Northfield, VT 05663
802-485-4293

Duxbury Elf's Shelf

7-10 On Fridays
Green Mt Community Alliance Church
4987 Route 100
Duxbury, VT 05676
802-371-9906

Enough Ministries

84 Summer Street
Barre, VT 05641
802-595-5277

Faith In Action Northern Communities

3339 Main Street
Cabot, VT 05643
802-563-3322

Family Center of Washington County

383 Sherwood Drive
Montpelier, VT 05602
802-262-3292

Hedding United Methodist Church

Food Shelf - Wed & Thur 3to 5
Free Community dinner Fri at 5:30
Fuel & electric - Financial Assistance
40 Washington Street
Barre, VT 05641
802-476-8156

Just Basics Inc.

Tuesday-Saturday 10-12
137 Main Street
Trinity Methodist Church
Montpelier, VT 05602
802-375-5369

Old Brick Church

PO Box 38
60 Church Street
East Montpelier, VT 05651
802-223-1232
brickchurch@gmail.com

Onion River Food Shelf

Wed - 10-2 802-426-4097
2 Upper Depot Road
Old School House Common
Marshfield, VT 05656

Roxbury Congregational Church

1483 Roxbury Road
Roxbury VT 05669
802-485-7779

Waterbury Area Food Shelf

57 South Main Street #3
Waterbury, VT 05676
802-244-1561

Websterville Baptist Church

143 Church Hill Road
Websterville, VT 05678-0068
802-479-0141

Williamstown Food Shelf

Also serves Graniteville, Saturdays 9-1
47 Methodist Lane
Williamstown, VT 05679
802-917-4760

Barre Housing Authority

30 Washington Street #1
Barre, VT 05641-4529
476-3185
Fax: 802-476-3113
www.barrehousingauthority.com
office@barrehousing.org

Capstone Community Action

20 Gable Place
Barre, VT 05641
479-1053
Toll Free: 1-800-639-1053

Downstreet Housing & Community Development

22 Keith Ave., Suite 100
Barre, VT 05641
476-4493
877-320-0663
www.downstreet.org

Good Samaritan Haven

105 North Seminary Street
Barre, VT 05641
479-2294
Fax: 477-5021
jjoy@goodsamaritanhaven.org
www.goodsamaritanhaven.org

Montpelier Housing Authority

155 Main Street Suite A
Montpelier, VT 05602
229-9232

Vermont Department for Children and Families, Economic Services Division

5 Perry Street, Suite 150
Barre, VT 05641-1201
Toll Free: 1-800-479-6151

Vermont Department For Children and Families, Emergency Services/Food Stamps

5 Perry Street, Suite 150
Barre, VT 05641
Emergency Services/Food Stamps
Toll Free: 800-479-6151

Washington County Youth Service Bureau/Boys and Girls Club

38 Elm Street #1
P.O. Box 627
Montpelier, VT 05601
229-9151
www.wcysb.org

Health**Central Vermont Home Health & Hospice**

600 Granger Road
Barre, VT 05641
802-223-1878
TDD: 1-800-253-0191
www.cvhhh.org

Care Net Pregnancy Center of Central Vermont

PO Box 513
105 N. Main Street, Suite 101
Barre, VT 05641
479-9215
Text: 802-661-4012
www.carenetcv.org

The People's Health & Wellness Clinic

553 North Main Street
Barre, VT 05641
479-1229
www.phwcvt.org

Planned Parenthood of Northern New England

90 Washington Street
Barre, VT 05641
802-476-6696 Fax: 802-476-6419
plannedparenthood.org

Vermont Department of Health

McFarland Office Building
5 Perry Street, Suite 250
Barre, VT 05641-4162
479-4200
Toll Free (888) 253-8786
healthvermont.gov/local/barre

Mental Health**Children, Youth, & Family Services**

Washington County
Mental Health Services
260 Beckley Hill Road
Barre, VT 05641
479-0012
24-Hour Emergency Service:
229-0591
www.wcmhs.org

Children's Integrated Services (CIS) Family Center of Washington County

383 Sherwood Drive
Montpelier VT 05602
262-3292
Fax: 802-262-6071
familycenter@fcwcv.org
www.fcwcv.org

Howard Center for Human Services

Child, Youth & Family Services
208 Flynn Ave, Suite 3J
Burlington, VT 05401
488-6000
Crisis Number: 488-7777
www.howardcenter.org

Our House - Child Sexual Abuse Advocacy & Treatment

38 Summer Street
Barre, VT 05641
476-8825
www.ourhouse-vt.org

Turning Point Center of Central Vermont

PO Box 887
489 North Main Street
Barre, VT 05641
479-7373
www.tpccv.org
teddielynn.tpccv@gmail.com

Substance Abuse

Al-Anon Alateen/ Adult Children

Barre, VT 05641
(802) 860-8388
1-866-972-5266
vermontalanonlateen.org

Alcoholics Anonymous

Barre-Montpelier
229-5100

Central Vermont New Directions Coalition/ Substance Abuse Prevention Coalition

73 Main Street, Suite 33
Montpelier, VT 05602
223-4949
www.cvndc.org

Central Vermont Substance Abuse Services

PO Box 1468
Montpelier, VT 05601
100 Hospitality Drive
Berlin, VT 05602
223-4156
Emergency: 229-0591
www.vtaddictionservices.org

Alcohol & Drug Abuse Programs Prevention Consultant

Department of Health
5 Perry Street, Suite 250
Barre, VT 05641-4162
479-4250
Matthew.whalen@vt.gov

Center Point Adolescent Treatment Services

1025 Airport Drive
South Burlington, VT 05403
488-7711
information@centerpointservices.org
www.centerpointservices.org

Windham County

Childcare/Early Childhood Education

Winston L. Prouty Center
209 Austine Dr.
Brattleboro, VT 05301
257-7852
www.winstonprouty.org

Early Head Start
Head Start
Early Education Services
130 Birge Street
Brattleboro, VT 05301
254-3742

Child/Family Abuse

Windham County Safe Place CAC/SUSI
112 Hardwood Way
Brattleboro, VT 05301
579-1358

Vermont Department for Children and Families Family Services
District Office
232 Main Street
Brattleboro, VT 05301
257-2888

Victim Advocate
PO Box 785
185 Main Street, 2nd Floor
Brattleboro, VT 05302
257-2860

Women's Freedom Center
PO Box 933
Brattleboro, VT 05302
257-7364
Hot Line: 254-6954
Toll Free: 1-800-773-0689

Family Education And Support

4-H/Youth Development
(802) 885-8386 Liza Muzzy
www.uvm.edu/extension/youth/

Help Me Grow VT
Dial 2-1-1 ext 6
Text HMGVT to 898211
www.helpmegroevt.org

Big Brothers Big Sisters of Vermont
PO Box 1729
60 Austine Drive-Cro
Brattleboro VT 05302
802-689-0092

Boys and Girls Club of Brattleboro
17 Flat Street
Brattleboro, VT 05301
802-254-5990

Children's Integrated Services CIS
Winston Prouty Center
209 Austine Drive
Brattleboro, VT 05301
802-257-7852
Fax: 802-258-7852

La Leche League
llmarivt.org, 802-879-3000 Free monthly meet-up in Claremont NH, facebook.com/claremontla-lecheleague

Circle of Parents Support Groups
1-800-CHILDREN
(1-800-244-5373)

Early Education Services Parent/Child Center of Windham County
130 Birge Street
Brattleboro, VT 05301
254-3742

Parks Place Community Resource Center
44 School St. Exn.
Bellows Falls, VT 05101
463-9927
Email: director@parksplacevt.org

Putney Family Services
PO Box 463
54 Kimble Hill
Putney, VT 05346
kate@putneyfamilyservices.net
387-2120

The Collaborative
91 VT RT 11
Londonderry, VT 05148
802-824-4200

UVM Extension
130 Austine Dr. Suite 300/
Third Floor
Brattleboro, VT 05301-3647
257-7967

Vermont Adult Learning
90 Birge Street Suite 1
Brattleboro, VT 05301
257-9449
www.vtadulthoodlearning.org
windominf0@vtadulthoodlearning.org

Financial Assistance/ Housing/Food

Vermont 2-1-1 United Ways of Vermont
Dial 2-1-1 or 1-866-652-4636
www.vermont211.org

AGAPE Christian Fellowship
30 Canal Street
Brattleboro, VT 05301
802-257-4069

Brigid's Kitchen
19 Walnut Street
Brattleboro, VT 05301
802-558-6072

Deerfield Food Pantry
7 Church Street
Wilmington, VT 05363
802-464-0148

Guildford Cares Food Pantry
3940 Guilford Center Road
Guilford, VT 05301
802-579-1350

Loaves and Fishes
193 Main Street
Brattleboro, VT 05301
802-254-4730

Our Place Drop-In Center
4 Island Street
Bellows Falls, VT 05101-0852
802-463-2217

Putney Foodshelf, Inc.
10 Christian Square
Putney, VT 05346
802-387-8551

Second Congregational Church
2021 N. Main Street
Londonderry, VT 05148-0077
802-824-6453

Groundworks Drop-In Center
60 South Main Street
Brattleboro VT, 05301
257-5415
Toll Free: 1-800-852-4286

Brattleboro Housing Partnerships
PO Box 2275
Brattleboro, VT 05303
224 Melrose Street
Brattleboro, VT 05301
254-6071
Fax: 802-254-5590
www.brattleborohousingauthority.org
bha@sover.net

Groundworks Emergency Shelter
PO Box 370, 81 Royal Road
Brattleboro, VT 05302
257-0066

Windham/Windsor Housing Trust
56 Main St, Suite 210
Springfield, VT 05156
885-3220
Info@homemattershere.org

Southeastern Vermont Community Action (SEVCA)
91 Buck Drive
Westminster, VT 05158-9618
722-4575
Brattleboro Outreach: 254-2795
Toll Free: 1-800-464-9951

Vermont Department for Children and Families, Family Services Division
Economic Services
PO Box 70
232 Main Street
Brattleboro, VT 05302
257-2888
Toll Free: 1-800-479-6151

Windham/Windsor Housing Trust

68 Birge Street
Brattleboro, VT 05301
254-4604
Info@w-wht.org

Health**Aids Project of Southern Vermont**

PO Box 1486
15 Grove Street
Brattleboro, VT 05301
254-4444
Fax: 802-254-3613
apsv@aidsprouthernvermont.org

Brattleboro Walk-In Clinic

Tuesdays 5pm-6:30 pm
191 Clark Ave.
Brattleboro, VT 05301
251-8484

Planned Parenthood of Northern New England

402 Canal Street
Brattleboro, VT 05301
257-0534
www.ppnne.org

Vermont Department of Health/WIC

232 Main Street, Suite 3
Brattleboro, VT 05301-2881
257-2880

Mental Health**Brattleboro Retreat**

PO Box 803
Anna Marsh Lane
Brattleboro, VT 05302
257-7785
Toll Free: 1-800-738-7328

Diane Leardi, LICSW

54 Harris Place
Brattleboro, VT 05301
254-7345
dlvt@myfairpoint.net

HealthCare & Rehabilitation Services (HCRS)

51 Fairview Street
Brattleboro, VT 05301
(802) 254-6028
www.hcrs.org
Also
1 Hospital Ct., Suite 2
Bellows Falls, VT 05101
802-436-3947

Nancy Kale, LICSW

Counseling and psychotherapy for individuals, couples and families
54 Harris Place
Brattleboro, VT 05301
257-5002

Gordon Faison

Psychotherapy EMDR
54 Harris Place
Brattleboro, VT 05301
380-0695

Families First in Southern Vermont

PO Box 939
Wilmington, VT 05363
464-9633

Substance Abuse**Al-Anon Alateen/Adult Children**

866-972-5266

Alcoholics Anonymous AA Answering Service

257-5801
www.aavt.org

Brattleboro Area Prevention Coalition (BAPC)

PO Box 6008, 130 Austine Dr.
Brattleboro, VT 05302
257-2175
bapc802@gmail.com
www.brattleboroareapreventioncoalition.org

Brattleboro Retreat

PO Box 803
Anna Marsh Lane
Brattleboro, VT 05302
257-7785
Toll Free: 1-800-738-7328

Starting Now

(a division of Brattleboro Retreat)
PO Box 803
Anna Marsh Lane
Brattleboro, VT 05302
258-3705 or 800-738-7328 x3705

Alcohol and Drug Abuse Programs

Prevention Consultant
232 Main Street, Suite 3
Brattleboro, VT 05301
257-2885

SAP Counselor BUHS

Hanako Jones
451-3452

Youth Services

Substance Abuse and Runaway Shelters
PO Box 6008
32 Walnut Street
Brattleboro, VT 05302
257-0361

Healthcare & Rehabilitation Services (HCRS)

390 River Street
Springfield, VT 05156
24 Hour Emergency Service
1-800-622-4235
Also
1 Hospital Ct., Suite 2
Bellows Falls, VT 05101
802-436-3947

Turning Point Recovery Center

39 Elm Street
Brattleboro, VT 05301
257-5600

Champlain Valley Narcotics Anonymous

CVANA
P.O. Box 64714
Burlington VT 05406-4714
(866) 580- 8718 toll free
CVANAVT@gmail.com
http://cvana.org

Childcare/Early Childhood Education

Early Childhood Special Education Program

Park Street School
60 Park Street
Springfield, VT 05156
885-5242
<http://www.ssdvt.org/main/elm/pre-k-program/>

Children's Integrated Services (CIS) The Family Place Parent Child Center

319 US Route 5 South
Norwich, VT 05055
649-3268
www.familyplacevt.org

Children's Integrated Services (CIS) Springfield Area Parent Child Center + Playworks

6 Main Street
North Springfield, VT 05150
802-886-5242
Fax: 802-886-2007
www.sapcc-vt.org

Springfield School District

60 Park Street
Springfield, VT 05156
885-5141
ssdvt.org

Windsor Central Supervisory Union

70 Amsdem Way
Woodstock, VT 05091
457-1213
www.wcsu.net

Child/Family Abuse

Child Advocacy Centers of Windsor County The Family Place

319 US Route 5 South
Norwich, VT 05055
649-3268
www.familyplacevt.org

The Child Advocacy Center at the Springfield Area Parent Child Center

Special Investigation Unit of Windsor County
Julie Gaudette, Director
2 Main Street
North Springfield, VT 05150
(802) 295-3882 ex. 176

Women's Freedom Center

PO Box 933
Brattleboro, VT 05301
257-7364 business Line
Hot Line Windham County:
254-6954
Hot line Southern Windsor:
885-2050
Toll Free: 1-800-773-0689
www.womensfreedomcenter.org
E-mail -- advocates@womensfreedomcenter.net

Vermont Department for Children and Families Springfield DCF Office

100 Mineral Street, Suite 101
Springfield, VT 05156
802-289-0648

Federal Lifeline

1-800-234-9473

Windsor County Victim Advocate

5 So. Main St, Suite 208
White River Jct., VT 05001
Phone: 802-295-8870
Fax: 802-295-8878
John.Grandi@vermont.gov
Meghan.place@vermont.gov

WISE Upper Valley

38 Bank Street
Lebanon, NH 03766
603-448-5922
Hotline: (603) 448-5525
Or toll free 866-348-9473
www.WISEuv.org

Family Education And Support

4-H/Youth Development

(802) 885-8386 Liza Muzzy
www.uvm.edu/extension/youth/

Help Me Grow VT

Dial 2-1-1 ext 6
Text HMGVT to 898211
www.helpmegrowvt.org

The Family Place Parent Child Center

319 US Route 5 South
Norwich, VT 05055
649-3268
www.familyplacevt.org

Springfield Area Parent Child Center

6 Main Street
North Springfield, VT 05150
802-886-5242
Fax: 802-886-2007

Circle of Parents Support Groups

1-800-CHILDREN
(1-800-244-5373)
www.pcavt.org

Southeastern Vermont Community Action (SEVCA) Outreach

SEVCA Outreach Offices
226 Holiday Drive Suite 24
White River Jct., VT 05001
Call for appointment
295-5215

SEVCA Springfield

107 Park Street, STE 2
Springfield, VT, 05156
John Synovetz, Family Services Worker
(802) 885 6153
Fax: (802) 885-8765
Email: jsynovetz@sevca.org

SEVCA Windsor – Satellite Office

Thursdays only
Windsor Connection Resource Ctr.
1 Railroad Plaza
Windsor, VT 05089
John Synovetz (pls. see above)

UVM Extension/4-H

The Howard Dean Ed Center
307 South Street
Springfield, VT 05156
885-8386
Toll Free: 1-800-278-5471

4H/Youth Development

Windsor County (802)885-8386
Liza Muzzy
www.uvm.eduextensionyouth/

Vermont Adult Learning

White River Junction
225 Maple Street, Suite 6
White River Junction, VT 05001
Phone: 802-299-2469
Springfield Location
100 River Street, Suite 102
Springfield, VT 05156
Phone: 802-546-0880
www.vtadultlearning.org

Windsor County Mentors

Youth Mentoring
PO Box 101
Physical: 54 Main St.
Windsor, VT 05089
802-674-5101
wcmembers@outlook.com

Vermont 2-1-1

United Ways of Vermont
Dial 2-1-1 or 1-866-652-4636

Financial Assistance/ Housing/Food

Vermont 2-1-1

United ways of Vermont
Dial 2-1-1 or 1-866-652-4636
www.vermont211.org



Black River Good Neighbor Services

37B Main Street
Ludlow, VT 05149
Thrift Shop M-Sat 10:00 to 4:00
Food Shelf – M-F 10:00-to 3:00
802-228-3663

Chester-Andover Family Center

908 Route 103 South -- location
P O Box 302
Chester, VT 05143
Tues&Fri 10-4PM, Sat 10-3PM
802-875-3236

Praise Chapel Christian Outreach

1615 Maple Street
Hartford, VT 05047-0620
802-296-8447

Reading-West Windsor Food Shelf

Mon 2-4PM, TH 4-6PM
3456 Tyson Road
Proctorsville, VT 05153
802-484-5097- Sara
802-484-0276- Calista
Rwwfoodshelf.org

Sharon Food Shelf

55 Rt. 132
Sharon, VT 05065
Food Shelf 4:30-6:30 Tues & Thurs
802-763-2007

Springfield Family Center

365 Summer Street
Springfield, VT 05156
Daily Meal 11:30 to 12:30
Food Shelf M-F 9-11:30 12:30-2:30. Sat 10-12
Day Shelter
802-885-3646
Springfieldfamilycenter.com

United Church of South Royalton

67 So Windsor St
South Royalton, VT 05068
802-763 7690
e-mail ucsr@myfairpoint.net
www.unitedchurchofsoro.org

Upper Valley Haven, Food Shelf and Shelter

713 Hartford Avenue
White River Junction, VT 05001
802-295-6500
info@uppervalleyhaven.org

Weathersfield Food Shelf

1862 Route 106- Old Perkinsville
Elementary School
Perkinsville, VT 05151
802-263-5584 Cheryl
2nd & 4th Thursday 1-3PM

Woodstock Community Food Shelf

Mon 4-6 Wed 1-3 Sat 10-12
217 Maxham Meadow Way
Woodstock, VT 05091
802-457-1185

State of VT Housing Authority

828-3295

Southeastern Vermont Community Action Council

226 Holiday Drive, Suite 24
WRJ, VT 05001
Shannon Tzrinske, Family Services
Worker
(802) 295-5215
Fax: (802) 296-3682
Email: stzrinske@sevca.org

Springfield Housing Authority

80 Main Street
Springfield, VT 05156
885-4905
Fax: 802-885-5857 and 802-885-5835

Vermont Department for Children and Families, Family Services**District Office Economic Services**

100 Mineral Street, Suite 101
Springfield, VT 05156
802-289-0648
Toll Free: 1-800-479-6151

Health**Vermont Department of Health**

118 Prospect Street, Suite 300
White River Junction, VT 05001
888-295-8820
Toll Free: 880-253-8799

VNA & Hospice VT/NH

88 Prospect St
White River Jct. VT 05001
1-888-300-8853
www.vnhcare.org

Mental Health**Children's Integrated Services (CIS)
The Family Place Parent Child Center**

319 US Route 5 South
Norwich, VT 05055
649-3268
www.familyplacevt.org

Health Care & Rehabilitation Services (HCRS)

390 River Street
Springfield, VT 05156
802-886-4500
www.hcrs.org

HCRS Windsor Office

(802) 674-2539
14 River Street
Windsor, VT 05089
www.hcrs.org

HCRS Hartford Office

802-295-3031
49 School Street
Hartford, VT 05047
www.hcrs.org

Substance Abuse**Upper Valley Turning Point of White River Junction**

200 Olcott Drive
White River Junction, VT 05001
295-5206
secondwindfound.org

Health Care & Rehabilitation Services (HCRS)

390 River Street
Springfield, VT 05156
802-886-4500
www.hcrs.org

HCRS Windsor Office

(802) 674-2539
14 River Street
Windsor, VT 05089
www.hcrs.org

HCRS Hartford Regional Office

802-295-3031
49 School Street
Hartford, VT 05047
www.hcrs.org

Alcoholics Anonymous

Springfield: 885-8281
White River: 295-7611
Toll-Free 800-839-1686
A full list of meetings can be found at
<http://www.aavt.org/meetings.html>

The Turning Point Center of Springfield

7 Morgan Street
Springfield, VT 05156
802-885-4668
spfldturningpoint@gmail.com
spfldturningpoint.squarespace.com

Thank You!

**Prevent Child Abuse Vermont
wishes to thank the following organizations and individuals
for their support of the *Vermont Parents' Home Companion*:**

1. Vermont businesses, non-profits, and state agencies that have advertised in the *Home Companion*.
2. A very special thanks to the John LeClair Foundation for their generous gifts.
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Barbara Carter	Maureen O'Connor Burgess
Tim Newcomb	Suzanne Rexford Winston

6. ***Special thanks to*** National Life, Washington Electric Coop, Outdoor Gear Exchange, Northfield Savings Bank, Jane Burroughs, CPA, and Main Street Landing for their support of the children and families of Vermont.



proudly presents the

2020 WALK FOR CHILDREN



Walk or
Join Our
5K Run in
Montpelier!

Saturday, August 15

at the State House in Montpelier – WALK or 5K RUN at 10:00!

Saturday, September 19

at the Main Street Park in Rutland

Check-in at 8:00 a.m. • WALK at 10:00 a.m.

Call 1-800-CHILDREN

www.pcavt.org

sponsored by





When minor illnesses or injuries happen...

CVMC ExpressCare, with two locations in Berlin and Waterbury Center to help you get in, get out, and get well.

Perfect when you're visiting the area or can't get in to see your primary care provider.

Open every day 9am-7pm | No appointment needed
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Co-pay often lower than the ER

THE University of Vermont HEALTH NETWORK

Central Vermont Medical Center

ExpressCare

BERLIN

1311 Barre-Montpelier Road
Next to Burger King
(802) 371-4239

WATERBURY CENTER

76 McNeil Road
Off VT-100N next to Pete's Greens
(802) 241-1532

UVMHealth.org/CVMC/ExpressCare



Prevent Child Abuse Vermont™

P.O. Box 829
Montpelier, Vermont 05601

1-800-CHILDREN
(800-244-5373)

www.pcavt.org



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& Resource Directory* was made possible
in part by a generous grant from
the John LeClair Foundation—
caring for children in Vermont.

