

# September-November, 2013

VOLUME 3 ISSUE 3

SEPTEMBER- NOVEMBER 2013

Open Your Heart And Home To A Teen Today...Become A Foster Parent!



Contact Jennifer Buss  
888-537-9727  
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Make a difference!

Nebraska Department of Health and Human Services NEBRASKA

## From the Director

The idea that Advocates should be certified has been discussed at length recently. The six Directors of Family Peer Support organizations in Nebraska voted to support the development of a certification credential, with support currently being on adoption of the National Federation's model.

Like my peers, I voted to adopt that model, because we have to start somewhere. But in the long run I see some challenges if that system continues to be our provider of a certification credential.

The National Federation is often a service provider and competes for Federal Grants. What happens if they should compete for something that another organization—say ours—should compete for the same grant. Do they not then have a conflict of in-

terest regarding certification?

Also, the Federation has a number of political goals and strategies in its objective to be a national voice

ronment. I would prefer a State entity that is knowledgeable, not linked to or opposed to any personality or organization, and whose primary purpose is to assure that at least minimum level of competence

is being demonstrated by certification applicants.

Taking this view in no way reflects a lessening

**DON'T FORGET TO ATTEND THE FOCUS GROUP! SEE PAGE 5 FOR THE SCHEDULE**

for families and children with mental health issues. I believe that certification should occur from an independent, non-biased group or State entity that has no other interest than quality of care. The Federation is not singular in purpose. This is not to say that the Federation is not concerned about quality of care. Not only would that be an disingenuous assertion, but clearly not my belief.

Finally, national certifications often are dominated by the larger States, and often don't take into account the needs and realities of life in a rural envi-

of my commitment to the kinds of collaboration that have strengthened the family organizations in Nebraska, nor does it prevent us from working together. As an advocate for families and children, it's my duty to do and say that which I believe is best even if it is not popular. To simply agree out of fear of the consequences of disagreement invites exclusion and tyranny. I believe that it is independent, thoughtful consideration that will achieve the goals we seek, and to that end I remain committed. We are at our best when our thoughts are challenged, and we're forced to use our brains.

*“Originality is independence, not rebellion; it is sincerity,*

★ ★ ★  
**Page 5 contains information about Focus Groups coming to Region 4 Behavioral Health**

If you want to have a say in what happens to your child...If you want to have a say in how the State behavioral health system(s) function, then you need to either attend one of the focus groups, or go on line to the address on the next page to fill out the survey. **Want to improve the system?** You'll never get a better way to do so, so we strongly encourage you to participate as much as possible in this process. If Parent to Parent Network can help you to participate, let us know. We'll support you as much as possible. We cannot, by contract, provide transportation, however.



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Make a difference!

Nebraska Department of Health and Human Services 

# A TASTE OF THANKSGIVING

PLEASE JOIN US AT PARENT TO PARENT FOR A THANKSGIVING MEAL. WE WILL PROVIDE THE TURKEY, POTATOES, STUFFING, DESSERT ETC.

**\*WHEN: MONDAY, NOVEMBER 18<sup>TH</sup>.**

**\*TIME: 5:00 TO 7:00PM**

**\*WHERE: PARENT TO PARENT NETWORK BUILDING  
201 MILLER AVENUE.**

**REGISTRATION IS REQUIRED!**

**PLEASE CALL: 1-877-226-8819 OR 402-379-2268**

**BY NOVEMBER 14<sup>TH</sup>.**

## What is “System of Care?”

### System of Care

An approach in which many agencies at the state and local levels work together and in partnership with families and youth to develop youth-guided and family directed services for children and adolescents with multi-system needs. Systems of Care include:

- A full array of effective services

**“SYSTEM OF CARE IS NOT A PROGRAM...IT IS A PHILOSOPHY AND OFFERS NEBRASKANS THEIR BEST CHANCE TO MEET THE NEEDS OF CHILDREN WITH BEHAVIORAL HEALTH ISSUES”**

- Coordination of care across child-serving systems
- A community interagency team that includes youth and families that makes decisions to improve systems and services
- Improving training and capacity to provide culturally and linguistically appropriate services, and Coordination of funding to maximize resources across systems.

A System of Care also includes state and community agencies working together to improve services for youth and families. These agencies may represent mental health, substance abuse, child welfare, juvenile justice, education, medical care, public health, developmental disabilities and other systems.

### *High-Fidelity Wraparound*

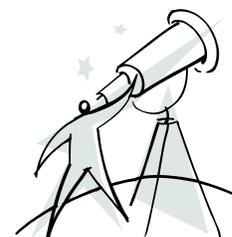
Sometimes referred to as Family Centered Practice or Individualized Care, this approach includes:

- A child and family teams

consisting of all the systems and agencies involved in care

- An interagency community team to joint planning and decision making about development and implementation of wraparound
- Flexible funding to address the unique needs of each youth and family
- Plans of care that are coordinated across agencies and directed by families and guided by the youth
- Access to individualized services that are effective and informal supports provided by family members, friends, and community members

A focus on monitoring fidelity to the wraparound process and achieving outcomes relevant to youth and families.



**Solving problems takes vision.**

# Core Strategy Team

**Editor’s Note:** The following article was written by Candy Kennedy of the NE Federation of Families for children’s mental health.

## Services and Supports Core Strategy Team

### Nebraska System of Care Planning

#### BACKGROUND AND DESCRIPTION

The Nebraska Department of Health & Human Services System of Care (SOC) Planning Project is bringing together Nebraska youth and families, child-serving systems and providers and Nebraska leaders to develop a comprehensive strategic plan for prevention-oriented, culturally and linguistically appropriate, and family-driven, youth-guided SOC for children/youth with Serious Emotional Disturbances and their families. We have divided the planning process into 10 “Core Strategy Teams”.

***The Services and Supports Core Strategy Team (CST) is charged with developing recommendations for promoting, expanding and supporting statewide implementation of a broad array of home- and community-based services and supports that are individualized, coordinated, family-/youth-driven, and culturally and linguistically competent. The CST will ensure coordination with current efforts in the child welfare system regarding Alternative Response and the Title IV-E Waiver Demonstration.***

#### ACTIONS

Develop specific recommendations, using available data and information from the SOC assessment process, regarding priorities and strategies relating to this core strategy area, inclusive of variations responsive to regional differences.

Share recommendations with the System of Care Development Team (SOC-DT) to shape Nebraska’s comprehensive strategic plan and logic model.

Hold each other accountable for ensuring equal and effective participation across CST membership.

#### MEMBERSHIP AND STRUCTURE

The Services and Supports CST will be made up of youth partners, family partners and system partners working in equal partnership. The CST will be facilitated using a “TriChair” model with a youth partner, family partner and system partner collaborating to chair the Team. TriChairs, with support from SOC planning staff, will work together to facilitate CST meetings, record and share recommendations and other products of the CST and to work with SOC staff to arrange additional meetings as needed.

SOC planning staff [SOC Project Director (Mary O’Hare), SOC Staff Assistant (Linda Henningsen) and SOC Consultants (TriWest: Peter Selby and Suki Martinez-Parham)] will support the CST both logistically (arranging conference calls, providing clerical support, answering questions regarding processes, etc.) and tech-

nically (assistance with agenda development, help running meetings, background information, interpretation of documents, development and reporting of recommendations, etc.)

#### ESTIMATED TIME COMMITMENT

This will be an ongoing workgroup for the life of the planning grant (June 2014). Meetings will consist of 3 or 4 formal ½ or full day in-person meetings with 2 additional statewide meetings. In-person meetings will most likely be held in either Lincoln or Kearney. Team members will also be involved in intermediate discussions and document reviews and communication via email.

# Nebraska System of Care Focus Groups – Region 4

## November 12, 2013

**Purpose:** To better understand from stakeholders, what system-of-care components are in place in their communities/areas and perceptions about strengths, gaps and priorities for improvement.

**Meeting Place:**

**Region 4 Behavioral Health System**

206 Monroe Avenue  
 Norfolk, Nebraska 68701  
 (402) 370-3100

**Tentative Schedule:** The following is a tentative schedule for the focus groups.

<b>Time</b>	<b>Track 1</b>	<b>Track 2</b>
1200-1300	Provider/Stakeholder Discussion Group	Provider/Stakeholder Discussion Group
1400-1500	Provider/Stakeholder Discussion Group	Provider/Stakeholder Discussion Group
1600-1700	Family Discussion Group	Youth Discussion Group
1700-1800	Provider/Stakeholder Discussion Group	Provider/Stakeholder Discussion Group
1800-1900	Family Discussion Group	Youth Discussion Group

Below is the general guide for focus group/interview questions and the definitions of System of Care and High Fidelity Wraparound that will be provided to participants. Participants will also be offered the opportunity to complete the System of Care survey immediately after the focus group/interview. The survey may be accessed at:




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Stand upright, speak thy  
 thoughts, declare The truth  
 thou hast, that all may share; Be  
 bold, proclaim it everywhere:  
 They only live who dare.

Voltaire

## System of Care Focus Group/Interview Questions:

How are child or youth/family systems working together in your community developing systems of care (see definition)?

What does interagency collaboration look like here?

What elements are in place?

What are the strengths of your community in this area?

What are the needs?

What are the barriers?

What exists that hasn't been helpful?

What financing strategies support systems of care (optional depending on group)?

What social marketing efforts are there to promote systems of care?

How are systems and organizations developing high-fidelity wraparound in your area (see definition)?

Strengths

Gaps

How are families and youth involved in these efforts?

Strengths

Gaps

What are the service strengths and gaps in your community?

Array of evidence based/effective services?

Trauma informed care?

Prevention?

Training/workforce development?

Culturally and linguistically appropriate services?

What else could improve the State/community's approach to improving the lives of youth and families?

If you prefer to answer these questions in writing, responses may be sent to [shutter@nebraska.edu](mailto:shutter@nebraska.edu)



The goal of System of Care is to help families help their children succeed at home, in school and in the community. In Nebraska and nation-wide, System of Care is considered the best way of planning, developing and delivering services to children and their families. Because children are not little adults, their services must be planned and delivered in ways that fully involve their families, peer groups, neighborhoods, schools and community. This is especially important for children who have serious challenges related to their behaviors, health, school performance and safety at home, in their schools, and in the community. System of Care is fundamentally changing the relationships families have to the service system at every level. Collaboration and partnership between families and service providers is the thread that links successful programs, policies and practices. Many federal and state policies mandate parent involvement. Parents now provide services (like Family Peer Support with your local Family Organization), act as advocates for change, mentor other families, shape programs, create policies and carry out public service agendas. Parents and professionals working collaboratively as partners are now recognized as a best practice. These collaborative partnerships have resulted in measurable and direct positive benefits for families, children and providers.

## W h a t i s S y s t e m s o f C a r e ?

### *What is a System of Care (SOC)?*

*The purpose of a System of Care is to make comprehensive, flexible and effective support available for children, youth and families throughout the community and through this assistance make the community a better place to live (Franz, John).*

*Families and youth work in partnership with public and private organizations so services and supports are effective, build on the strengths of individuals, and address each person's cultural and linguistic needs.*

## The Role of Families in SOC

Families are at the center of the System of Care. They should expect to be partners in

the local Community Collaborative with agencies, schools, and others in the Community. They should also expect to have a strong voice on their Child and Family Team, planning and making decisions about their child's services and supports. Families inform Child and Family Team members about their strengths and values, and they advocate for their children and themselves. Families help inform Community Collaboratives about what services and supports are needed in their community in order to help children and families succeed.

- ◆ Provides opportunity to effect meaningful change
- ◆ Feels good to make a contribution
- ◆ Increase confidence in ability to effect change
- ◆ Makes providers accountable to families
- ◆ Provides opportunities to network with other families and providers
- ◆ Builds knowledge and skills
- ◆ Models community involvement and empowerment for own children and family
- ◆ Creates less passive recipients of care and services
- ◆ Makes things better for other families
- ◆ Opens doors to employment
- ◆ Creates a sense of belonging
- ◆ Offers a sense of accomplishment
- ◆ Increases sense of person power
- ◆ Offers leadership role models for other families
- ◆ Decreases the isolation that so many families face when their children are having difficulties

*Why is it Important for families to get involved in their systems of care?*

## **Why is Parent Leadership Needed?**

Parents and other caregivers are powerful advocates. By educating other leaders and decision makers about the needs of children and families, parents can help shape program policies and effect changes in the systems with which they interface. Parent leadership is a common-sense approach for ensuring that families get the resources they need to raise healthy children and protect their well-being. It is driven by the principle that the democratic involvement of parents is integral to better outcomes for families and communities.

## **Systems of Care Are:**

- ◆ Family driven and youth guided, with the strengths and needs of the child and family determining the types and mix of services and supports provided.
- ◆ Community based, with the locus of services as well as system management resting within a supportive, adaptive infrastructure of structures, processes, and relationships at the community level.
- ◆ Culturally and linguistically competent, with agencies, programs, and services that reflect the cultural, racial, ethnic, and linguistic differences of the populations they serve to facilitate access to and utilization of appropriate services and supports and to eliminate disparities in care.

## Youth-Guided Care

Youth-Guided means that youth are engaged as equal partners in creating systems change in policies and procedures at the individual, community, State and national levels. Applicants are required to develop plans for infusing a youth-guided approach throughout the system of care, including plans for training and supporting youth in positions of leadership and system transformation.

## Family-Driven Care

Family-driven means families have a primary decision making role in the care of their own children as well as the policies and procedures governing care for all children in their community, State, tribe, territory and nation. This includes:

choosing supports, services, and providers;

setting goals;

designing and implementing programs;

monitoring outcomes; and

determining the effectiveness of all efforts to promote the mental health of children and youth.

What you should know, as a Parent, when sharing your voice

## TIPS

## Understanding Advocacy

**Family Run Organizations** were created by families, for families. Employees and volunteers of the organizations are family members who understand the challenges and mentor other fami-

lies experiencing some of these same struggles they themselves have faced. Recognizing that parents and caregivers and youth are the experts when it comes to their families needs, the Family Organizations create a network of advocacy, support, education, and resource referral designed to strengthen families and empower them as they become stronger advocates for their children.

Nebraska has:

- 6 Behavioral Health Regions and 5 Service Areas, each with at least one Family Organization.
- Each Family Organization is an independent 501c3 non-profit.

### **Why Include Families?**

- ◆ Families define themselves and their own culture
- ◆ Families require culturally competent services and supports reflecting their race, ethnicity, gender orientation, language, soci-economic background, and family structure
- ◆ Families have their basic needs met
- ◆ Families have access to information and training
- ◆ Families identify priorities and concerns drive policy and practice
- ◆ Families share power to make decisions and responsibility for outcomes
- ◆ Families and their system partner know their individual strengths, limitations, and fears
- ◆ Families have their own independent organization to speak with a collective voice for system change
- ◆ Families and their organizations get both respect and protection from their system partner.

## **Understanding Yourself to Lead**

## **Others**

Before you can influence others, you must understand. Before you can lead others, you must know yourself. Before you can persuade, you must understand others.

We all differ from one another and we are not likely to make others change. Understanding why they make decisions like they do, or how they need to receive information can help us be better communicators and better leaders. We have very defined personality patterns. When we learn to identify our pattern and learn to recognize these patterns in others, we can enrich our sense of who we are, of who others are, and of how much can learn from each other.

- ◆ Remember that the more ways we have of looking at a problem or an issue, the better re-

sults we can come up with! My strength may be your weakness, and your strength may be my weakness. We all have areas of strength and areas that we struggle in. Understanding and respecting those areas can bring us great group strength.

- ◆ This is a quick version of a personality and communication style inventory. There are a few important things to remember.
- ◆ No one “style” is better than another.
- ◆ Our “style” is only the one we most prefer to “be in” most of the time. EACH ONE of us is composed of ALL these styles. This is like having a four-room house. One of the rooms is the one we spend the most time in, but all of them belong to us. We just use one more than the others and are more comfortable in “our” room.

As a parent or a youth in Nebraska, you are a valuable voice to system partners. Learn about your communication style so you can adequately share your voice about your experiences with others.

### **Parents are Advocates within Systems of Care**

Family advocates also speak on behalf of issues and concerns that professionals may not be able to voice regarding changes in the service system policies, practices, and funding. Family members contribute integrity to policy group work by providing reality-based, culturally-relevant information from a perspective that no one else has. In Nebraska families are required members of Community Collaborative, the local decision-making bodies involved in systems of care and Consumer and Family Advisory Committees.

#### **1) Do your homework**

Before approaching any criminal justice or mental health officials, advocates should learn as much as possible. For example, an advocate interested in enhancing law enforcement training on mental illness should know exactly what training is being provided right now, how often, and by whom. General information is helpful, but it is no substitute for information specific to an advocate’s city, county, or state.

#### **2) Find a Champion**

Systems change often hinges on whether advocates can identify a key official to take a leading role on criminal justice and mental health issues. This might be a corrections commissioner committed to improving reentry procedures, a judge whose son or daughter has a mental illness, or a high ranking police officer that has long fought for better mental health training. Among other virtues, these champions can remove institutional barriers that might otherwise stymie advocates.

#### **3) Listen**

The best advocates are able to raise concerns while at the same time understanding the priorities and predicaments of officials they work with. They can hear what policy proposals will be viable, and which will be non-starters.

#### **4) Don't Reinvent the Wheel**

The experience of the hundreds of community organizations across the country working to improve their responses to people with mental illness in the criminal justice system is an invaluable resource for advocates. Most new programs and policies are adaptations of strategies being employed elsewhere, and advocates should do their best to capitalize on the successes and failures of those in other jurisdictions.

#### **5) Respect your Partners**

The majority of criminal justice and mental health officials are committed professionals doing the best they can to serve their clients and communities. Advocates can acknowledge this by understanding the protocols and procedures of different agencies, and the budgetary, political, and administrative limitations within which they work. Respect does not mean compromising one's principles; it means appreciating that potential partners have their own principles as well.

#### **6) Offer Support**

Even while they are raising concerns, advocates should also offer support—to find out information, to convene meetings, to provide services—in short, to become a partner in change. In most cases, approaching criminal justice and mental health officials with accusations is counterproductive.

#### **7) Capitalize on Self-Interest**

The most successful advocates recognize that criminal justice and mental health officials have numerous competing priorities. While the vast majority will agree that reversing the overrepresentation of people with mental illness in the criminal justice system is the “right thing to do,” that is usually not enough. Convincing them to put energy towards this problem requires making clear what they stand to gain. Their reasons will vary, but advocates should always strive to understand the needs of their partners, and work to meet them.

#### **8) Be Specific**

Many criminal justice and mental health officials are well aware of the overrepresentation of people with mental illness in the criminal justice system; they confront the problem every day. Advocates must avoid the pitfall of simply demanding change; if the problem were an easy one to solve, it wouldn't be a problem. The more specific the problems (and potential solutions) highlighted by advocates, the more criminal justice and mental health officials will be able to address them.

#### **10) Find Allies**

Advocates should seek allies everywhere they can. Someone connected to the advocacy organization may have an in at the local correctional facility; business owners are often interested in improving community safety and reducing public nuisance crimes, and may be supportive of advocacy goals. Some advocates have found it easier to engage mental health service providers when accompanied by representatives of law enforcement or the courts. Many unlikely partners are attracted to efforts to address problems raised by the contact of people with mental illness with the criminal justice system. Strength, in advocacy, truly does come in numbers.

#### **9) Set Realistic Goals**

Systems are like people: they don't change overnight. Advocates should focus their efforts on specific issues and work to achieve measurable successes. Over time, these small victories can add up to long term systemic change.

## Telling your Story

Nervousness, speech anxiety, stage fright, platform panic - it's known by many names, but it's a problem every speaker must confront. Actually, feeling nervous before a speech is healthy. It shows that your issue is important to you and that you care about doing well. But, unless you can manage and control your nervousness, it can keep you from becoming an effective speaker. Here's how you can make your "butterflies" fly in formation: Recognize you're not alone and realize that people want you to succeed!

- 1) Speak about what you know. Select speech topics that are within the realm of your knowledge and experience. This will build your confidence and make you less nervous.
- 2) Prepare thoroughly. If you are well prepared and have rehearsed your speech you will have more confidence and less anxiety.
- 3) Concentrate on the message - not the medium. Focus your energy and attention on your message and your audience and away from your nervousness
- 4) Turn nervousness into positive energy. The same nervous energy that causes platform panic can be an asset to you. Harness it, and transform it into vitality and enthusiasm.
- 5) Gaining experience builds confidence.

*Telling your family's story as it relates to systems can be very impactful!*

## What to Expect From Systems of Care Involvement in Nebraska

### KICK OFF EVENT:

**October 29th** will be the Nebraska SOC Kick-Off in Lincoln. This event will bring together hundreds of parents, young people, state leaders, providers and policy makers with a common goal of creating teams that will begin to identify barriers and create plans to overcome those barriers in Nebraska. There will be 10 Core Strategy Teams. You will be asked to choose one which you feel you could contribute to through your experience with your family and involvement with systems. The teams include:

- 1) **Policy, Administrative and Regulatory**
- 2) **Trauma Informed Care**
- 3) **Services and Supports**
- 4) **Financing Strategies**

- 5) Workforce Development**
- 6) Social Marketing and Communication**
- 7) Culturally and Linguistically Appropriate Services**
- 8) High Fidelity Wrap Around**
- 9) Prevention**
- 10) Youth and Family Partnership**

We will meet in the Hawthorne Room (basement) at the Cornhusker in Lincoln at 8:00am on October 29th for a brief Family Coordination Meeting prior to the conference.

You will work with your local Family Organization on specific details related to getting to the conference. This may include working together to determine transportation and meals. For individuals residing outside of Lincoln, reservations have been made at the Microtel Inn and Suites on 27th Street in Lincoln.

Your role at this conference is to share your voice, when appropriate. You are never expected to share personal information about your family that might damage one of you. Sharing your voice sometimes means that you gently relay your personal experience. An example might be, "In my family's experience, it took 4 months of being on a waiting list to access X service".

The morning will be a series of presentations explaining SOC and next steps. Lunch will be provided and after lunch participants will be asked to break into the subgroups (above) to begin creating some plans for longer term involvement. Your voice is VERY important in these sub-groups!

## **What to Expect From Systems of Care Involvement in Nebraska**

### **Core Strategy Team Involvement**

After being involved in one of the 10 subgroups at the Kick-Off, you will be provided opportunity for longer term involvement. Most of those meetings should be more local or be available to attend via conference call or webinar.

It is important for you to vocalize to your team about other commitments you have and to let them know what works best for future meeting dates. If that means that you can only meet evenings or weekends, you should share this. If it means over lunch via conference call, you should also share that! The team should accommodate families and their schedules!

## **Coordinating with Schools and Work**

Your child's school and/or your work should never be jeopardized to participate in these meetings.

If it is needed, we have provided a form letter that you can use to excuse your child from school. If you are in need of something similar for your employer, let your Family Organization representative know. Again, use your best judgment about absences from work or school as those are priority and should not be jeopardized.

## **Your Local Family Organization**

Your local Family Organization is there to help you in a number of ways. With the SOC planning, they can assist you with coordinating travel and related expenses, as well as help you with information and updates and brainstorming, if desired.

Your Family Organization provides peer services and supports to parents of children with behavioral health challenges and parents that work with the child welfare systems. All the staff at the Family Organizations are Family Members, meaning, they are also parents that have experienced systems with their children! Partnership with your Family Organization can be very helpful. Ask them about support groups, services, resources, and how you can coordinate the Systems of Care project.

***Remember— YOUR VOICE MATTERS!***

		Parent to Parent Network
		<h1>Events</h1>

Federation Retreat

Advocates and the E.D. attended the second annual Nebraska Federation of Families retreat for family organizations. The event was held at Platte River State Park near Louisville, NE. Guest speakers were noted experts in the field of family peer support.

Committee Memberships

Executive Director Robert Gereaux served as Chairman of the Federations financial reports committee, whose purpose was to develop a financial expenditures reporting document to bring about uniformity of reporting such data to the Federation. Gereaux also has served on a number of Federation committees. Tawna Licty continues to serve on the committee developing the Children’s Mental Health Week activities for 2014.

Halloween Party

Our Halloween party held at Poppy’s Pumpkin Patch went off with a bang! We had a great turnout-20 kids and 16 adults. The windy, cold weather didn’t stop several of the kids (and adults!) to arrive festively in their Halloween costumes. Everyone enjoyed hot cocoa and goodies in the barn and got the chance to explore Poppy’s farm either by foot or via train ride! The pumpkin patch had a variety of pumpkins for the taking for each of the children that attended!

System of Care Kick-Off

10 Family members and 3 staff travelled to Lincoln to participate in the initial function as Nebraska initiates its Federal Grant funded process to assist the State to Research and Plan a behavioral health System of Care. An intense, inclusive process will follow, and the State has committed to gathering input from it’s citizens including family members of children with behavioral health challenges. Anyone who wants can provide input in ways discussed throughout this newsletter, or by simply writing the department. Robert Gereaux, Executive Director is Co-Chairman of the “Services and Supports” committee, one of twelve committees formed to be the primary focus where much of the work of gathering and communicating commentary, ideas, and structure to DHHS.

**Open Your Heart And Home To A Teen Today...Become A Foster Parent!**



**Contact Jennifer Buss**  
**888-537-9727**  
[Jennifer.buss@nebraska.gov](mailto:Jennifer.buss@nebraska.gov)  
**Make a difference!**

Nebraska Department of Health and Human Services



## Parent to Parent Network

Parent to Parent Network  
201 Miller Avenue  
Norfolk, NE 68701

### Board of Directors:

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Big Brothers & Big Sisters

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Candace Allen, United Way

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Joel Carlson, Attorney



Parent to Parent Network is affiliated with the  
Nebraska Federation of Families for Chil-  
dren's Mental Health

### Members of:

National Alliance for Mentally Ill (NAMI)

National Federation of Families for Children's  
Mental Health

Parent to Parent Network is a private, non-profit, commu-  
nity based organization devoted to strengthening families  
in Nebraska. Organized in 1998, the program has grown  
substantially through the years, including outreach to sev-  
eral communities in Northeast Nebraska.

We hire people who are or have been primary care-givers  
for children with behavioral health, emotional, or school  
issues. Our Advocates are trained to help, but their  
strength lies in having "been there", and having found  
ways to navigate the systems affecting their child.

We charge no fees for our services. We're members of the  
Nebraska Federation of Families for Children's Mental  
Health and the National Federation with the same name.

Services are provided confidentially. You determine what  
services you want. We may make suggestions, but you  
have the final say!

Advocacy on behalf of the families we serve is an integral  
part of the services we provide. We look upon those to  
whom we advocate as being partners rather than oppo-  
nents. We prefer what we call collaborative advocacy. We  
know that our families are best served when we make and  
strengthen partnerships with other helping organizations.  
Our advocacy is done with regard for one overriding princi-  
ple: ***that the family voice be heard.***

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OUR WEB ADDRESS IS:  
[WWW.PARENT-PARENT.ORG](http://WWW.PARENT-PARENT.ORG)

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### Staff:

**Robert Gereaux, Executive Director**

**Tawna Lichty, Family Services Coordinator**

**JoAnn Pieper, Office Manager**

**Cliff Hogancamp, Information Systems Specialist**

**Kimberly Dye, Family Advocate**

**Amanda Dunbar, Family Advocate**

**Vacant, Family Advocate**

**Maribel Bernal, Office Assistant**