Tamara Grigsby

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Laurel Hoffmann Friday, May 3, 2019 3:53 PM Tamara Grigsby Written testimony

Hi Tam! How does this look? If you think it is finished, I will plug it into that letterhead and send along. I saw Amie's email and I won't be able to go next week, sadly. Will you?

Thanks! Laurel

Chair Keny-Guyer, Vice-Chairs Sanchez and Nobel, and Committee, thank you for this opportunity. My name is Laurel Murphy Hoffmann and I am a pediatrician at OHSU Doernbecher Children's Hospital. I am writing in support of the Family First Prevention Services Act because I take care of children in the foster care system or at risk of becoming involved in the system. The latest research in child development and the neurologic impacts of trauma shows that all children, especially these children who have experienced trauma, need parents and caregivers who provide three key strengths: compassionate, predictable availability. Here are three examples from my clinical experiences that show ways Family First can support compassionate, predictable availability for children and families.

First, here is an example of what I call "compassion coaching". My 5-year-old patient came in for his check-up before starting kindergarten and his mother asked to speak with our behavioral health consultant about her son's tantrums. While the consultant was in the exam room, I reviewed the chart to find that the family came to our clinic many times throughout his toddler years to address these tantrums. The behaviors were so severe and aggressive that he was removed from his daycare center and was harming his siblings. Next I saw that as a newborn, the patient was placed in foster care while his birth mother completed an addiction treatment program throughout his infancy. His severe tantrums were typical of children who experience early trauma. But when the consultant came back from the room, she reported that the family didn't really need new advice. The mother reported the tantrums at home had virtually stopped and she was able to share successful coping strategies with the child's current preschool teacher. She was looking for strategies to help her son if new stressors arose at his new school. This high-risk family benefited consistent, accessible support and with Family First, such positive parenting education could be even more widespread and available throughout diverse communities.

Predictability can also come from parental coaching programs. Two sisters in my clinic were living in a chaotic household, missing appointments, and doing poorly in school. At one visit, they arrived with an older aunt because they had been placed in kinship care. As I asked how things were going, the aunt reported "Well the girls would tell you I run a tight ship!" She explained that the first few days were a tough transition for the children stick to a routine. They came home from school, ate a snack, and did homework before playing. Every night, bedtime started at 8:00 pm and it was lights out at 8:30 pm sharp. Children need boundaries and predictability from their caregivers in order to thrive. If the girls' birth parents had been supported in firm, but kind approaches to parenting, the family would have a better chance at a successful reunification. Family First could fund peer-supported coaching and in this case, the aunt, who had raised children of her own, could have coaching these children's birth parents on these basic but effective techniques.

Finally and unfortunately, many of our children lack available parents. I discharge newborns from the hospital into DHS custody on a regular basis. Their mothers have often struggled with homelessness, untreated addiction, and limited or absent prenatal care. Parents are less available to their children when they don't have a home or are not receiving medical treatment for their own significant health issues. Programs like Project Nurture and others support parents through medication assisted therapy for substance use disorders and coordinated care that keeps birth families

together. Family First can support these programs and strengthen the quality of foster care when children do indeed need placement outside of the home. Birth parents or foster families must be compassionate, predictable, and available and Family First can translate this child development vocabulary into real policy to improve the lives of children and families.