



# The Fostering Connection

A quarterly publication from the **Onondaga County Foster/Adoptive Parent Support Group**

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## Inside This Issue.

<b>2</b>	Foster Parent Confidentiality Policy
<b>2</b>	Life Books
<b>3</b>	RSV - "Respiratory Syncytial Virus"
<b>3</b>	Open adoption, broken heart

## Email Address Update Request

The support group would like to ask you to make sure that we have your current email address. Frequently, we become aware of information or opportunities that would benefit our foster families but have no method of distributing that information to you other than the newsletter; which is only published quarterly. Email is the fastest and cheapest way for us to reach you. If you receive periodic email from Cathy Dutton in the homefinding, then we have your current email address. If you don't, would you please update your information by sending an email to [debisouthard@twcny.rr.com](mailto:debisouthard@twcny.rr.com) and [Cathy.Dutton@dfa.state.ny.us](mailto:Cathy.Dutton@dfa.state.ny.us) please include your name so that we can update our records. Please remember us when you change your email address in the future.

Thank you.

## Training for 2007

Children's Division is developing the 2007 training schedule for foster parents. As soon as we firm up the information, we will send you a letter with details. Anticipated topics are:

- The importance of placing siblings together
- Adoption in the world of Foster Care
- Legal Issues in Onondaga Family Court
- Preparing youth for post-secondary education
- Understanding the differences between safety and risk
- Saying Goodbye-separation & loss issues for foster parents

A number of foster parents have indicated an interest in CPR training. Please contact your local Red Cross or Fire Department for offerings in your community.

If you have any training topics you would like us to look into, please contact your Homefinder.

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## Starting Anew

*By Jeanette Lomando, President*

*Foster Parent Advisory Council of Suffolk County, Inc.*

As a foster/adoptive parent advocate, I frequently get calls from families who are going through a bad time when children who have been in care for several years move on. The loss is tremendous and we have all been there. As a foster parent myself, I know this can be the worst time for foster parents.

I like to think of it as a house that I'm building and when it's done, a family moves in and I move on. It's hard to think that they will care for that house as I did. I can never believe that they would know the work that went into it. Each block for the foundation was hand picked, hugged and held to perfection. The tears, the love, the joy, and also the fun I had with it. All the while I wanted to believe it would be forever, but instead the master builder had a different plan, and I was to move on to a new location and start construction anew.

Remembrance of the original house, and passing it so often, noticing that wind, storms and all of the rest of the elements have not damaged as it continues to stand solid. The shingles needed repair and it needed paint: windows needed replacing, but the original structure was still intact. I knew then that I did a very good job and that was what kept me going onto the next structure. I will never forget that house I built, but I do know that it will survive, and I'm so happy to be part of it.

I am truly moved by the foster parents who call me and tell me stories of the child that is leaving, and I always wish that I could make it easier. But there is no easy way. Always remember that you will always be in their heart and that you've made a difference in a child's life.

## Articles Wanted

If you come across an interesting article or have an idea about a story or topic of interest, feel free to email either [debisouthard@twcny.rr.com](mailto:debisouthard@twcny.rr.com) or [wgambino@twcny.rr.com](mailto:wgambino@twcny.rr.com) in order for us to share it with all of the Foster Families throughout the county.

## **Foster Parent Confidentiality Policy**

*The following confidentiality policy was developed in response to a foster parent survey in 2005. The results of the survey showed that foster parents wanted a consistent policy from the agency in terms of what case information could be shared with foster parents. A group of agency staff developed the following Confidentiality Policy. Thank you to all of you who made this change happen by participating in the survey.*

*This document is an attempt to clarify what case information should be shared with foster parents. Foster parents are trained regarding confidentiality and are aware that they cannot discuss case information with their friends, neighbors or relatives. Information that the agency provides to them should be factual and shared on a professional basis. Foster parents are vital members of the child's service team as they are the people who meet the child's needs on a daily basis. Therefore, they have a need to know information that would affect their ability to care for the child, work with the parents and assist us in achieving the child's permanency goal.*

**Background:** Foster parents should be informed of the reason(s) that a child is being placed in their home. Let them know if this is the child's first time in care or is the child reentering foster care. Also, is this a move from one foster home to another or a step down from a higher level of care? They should know if the child is in care due to abuse/maltreatment or if the reasons for placement are child centered. You need to provide as much specific information as possible regarding the circumstances surrounding the child's placement in care so that the foster parents are better equipped to deal with the child's reaction to his/her situation.

**Behavioral:** Foster parents need detailed information about the child's behavior. For example: aggressive behavior, destructive behavior, sexual acting out, toileting issues, sleeping issues, poor peer relationships etc. Be as specific as possible about the behaviors.

**Education:** When placing a child you should provide as much educational background about the child as possible. Inform the foster parents of the child's grade or academic level of functioning and give them a copy of the report card if it is available. Let them know if the child receives special educational services and provide the child's IEP if you have a copy. If the child is changing schools let them know the name of the last district and school. If you know, tell them how the child feels about school and if he/she has any school related behavioral problems.

**Legal:** Foster parents should be given initial and ongoing information on the child's legal status and kept informed of all court proceedings.

**Medical:** The health care needs of the child and the available health history of the child must be shared with foster parents. On a regular basis you should provide them with a copy of the foster child's ENHANCE medical summary. You may also share information about the biological parents' health history when the conditions or diseases are believed to be hereditary or may be a factor influencing the child's future health. This history should include any drugs or medication taken by the child's biological mother during pregnancy.

**Mental Health:** If a child has mental health problems or a history of mental health problems, all available information about the child's condition, treatment and current functioning should be shared with foster parents. You may also provide foster parents with mental health information about the biological parents in cases where the condition is a factor affecting their parenting or if the condition is hereditary. Foster parents should be apprised of the parent's involvement and progress in treatment. You should not provide foster parents with a parent's specific diagnosis unless the child is freed for adoption and the foster parents are interested in adopting the child.

**Services:** Foster parents should be invited to all Service Plan Meetings. They are entitled to participate in meetings unless the client specifically requests that they not be present. During these meetings you may freely discuss client issues, outcomes, services and progress. Foster parents are entitled to information regarding substance abuse and mental health issues.

### **Do you have boxes and drawers of photos?**

### **Are those photos still in the envelopes and stored in drawers?**

### **Ever wish you could get them organized and in photo safe albums?**

I would like to help you with that. Some of you saw my albums at the Foster Parent Appreciation Dinner this past spring. I love keeping track of all the children that come in and out of our home through out the years. With the next kids we get I will be starting album number 2!! I can't fit much more in my current one.

What I would like to do is set a time once a month (or maybe more if we want to) for foster parents to get together and work on preserving the memories of our kids. You may want to make an album for the child or you may decide that you want to make a special album for your home to share. If your children are old enough they may want to make an album of their own.....

It is a lot of fun to work on and it is a few hours out that we well deserve!!!

If anyone is interested please feel free to call me or send me an email.

Thank you,

Kathi Joslyn

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Keeping Memories at it's Best!!

# RSV

## “Respiratory Syncytial Virus”

Respiratory Syncytial virus is a very common virus and causes cold-like symptoms in adults and children. It is a virus that is the leading cause of pneumonia and bronchiolitis in infants. Most infants will have RSV before age 2. RSV causes repeated infections throughout one's life. It is most common from fall to spring but can occur at anytime of the year. Most recover from RSV in 8-15 days. It does account for 125,000 infant hospitalizations in the United States annually with up to 500 deaths annually.

### Risk factors

Risk factors for developing RSV include:

- Premature infants
- Infants born with lung or heart disease
- Infants with low birth weights
- Infants coming in contact with older brothers and sisters with RSV
- Infants that go to Daycare
- Family history of asthma
- Exposure to passive cigarette smoke

### Transmission

RSV is spread by air droplets (sneezing, cough), contact with nasal secretions or by contact with contaminated objects, e.g. kitchen counters, toys, towels, sheets, used tissues, door knobs. It occurs when the infectious material contacts the mucous membranes of the eyes, nose or mouth. RSV can live up to 6 hours on contaminated objects.

### Symptoms

RSV usually causes mild, cold like symptoms (runny nose, cough, fever) however, in those infants at risk symptoms can worsen quickly. Call your health care provider immediately if your infant/child is:

- Wheezing ( a whistling sound when breathing)
- Having trouble breathing
- Breathing rapidly
- Skin color looks blue or grayish (lips, around the mouth)
- Having difficulty eating drinking, sleeping

Depending on the severity of the symptoms a chest x-ray and a nasal culture may be ordered.

### Treatment

For infants or children with mild RSV the only treatment needed is treatment of the symptoms, e.g. medicine for fever, increase fluids for cough. If they are seriously ill they will need to be admitted to the hospital and may require oxygen therapy, medications, and supportive care.

Synagis, which is an injectable medication, can prevent serious respiratory illness in infants at high risk for RSV. Since it only helps fight the infection for approximately 30 days, infants at risk receive an injection monthly during RSV season. Your health care provider will let you know if your infant needs Synagis and will answer any questions you may have in regards to it.

### Prevention

Since RSV spreads easily from person to person through contact with respiratory secretions it's important to try to prevent the spread by:

- Good hand washing before touching your infant/child
- Keep your infant away from crowds, especially young children
- Keep your infant away from those with colds
- Avoid sneezing or coughing around your infant/child
- Keep your infant home from daycare if not feeling well

- Limit exposure to crowded areas
  - Wash your infants' toys and bedding frequently
  - Not sharing your infant's/child's personal items, e.g. pacifiers, cups, spoons, etc.
  - Keep your infant/child away from those who smoke
- Remember:** RSV spreads easily from person to person through contact with air droplets (coughing, sneezing, and contact with contaminated objects). Good hand washing, not sharing personal items, avoiding contact with those with colds and avoiding exposure to passive cigarette smoking are several ways to prevent the spread of RSV.

*Submitted by Toni Heer, RN, Laurie Ruprecht, RN and Maureen O'Hara, PNP*

*This is a beautiful article, written with honesty and love, exploring the layers of emotion that aren't addressed or acknowledged in open adoption policy/practice discussions and can be deeply felt by adoptive parents.*

## Open adoption, broken heart

**I knew it would be hard for my daughter's birth mother to give her up. I just didn't expect to feel so guilty for taking her.**

*By Dawn Friedman*

[http://www.salon.com/mwt/feature/2006/03/08/open\\_adoption/](http://www.salon.com/mwt/feature/2006/03/08/open_adoption/)  
March 8, 2006 | The first time I met my daughter, Madison, she wasn't mine yet and I wasn't sure she would ever be. I stared into her solemn face and looked shyly at her mother, Jessica.

"Can I pick her up?" I asked.

"Of course," she said proudly.

There was nothing about her that was familiar -- not her round face, her tuft of hair, and the heft of her body. When I gazed at her, I felt enormous tenderness and the quiet stirring of potential love, but I didn't know her. And I was afraid to look too closely because I knew that, just as I had felt the shift and click of my son's life falling into place after his birth seven years before, so Jessica was coming to know Madison. All those months, she had thought she was carrying just any baby when all along it was Madison. She was saying to her daughter what I had said to my son: "Oh, it was you!"

Adoption social workers say that every woman needs to say hello to her baby before she can know if she can say goodbye. But I wanted to say hello to Madison, too. I wanted to let myself fall in love with her. I wanted to unwrap her and examine each little limb, bury my face in her neck, let my fingers trail across her features. But she wasn't mine. I grieved her even as I knew she wasn't mine to grieve.

Three days after Madison's birth I watched my husband buckle her into the car seat, and then I climbed into the back seat beside her. I thought about Jessica, who we'd left sobbing in the maternity ward. I knew her arms were aching for her daughter, the daughter that was now ours.

"She's beautiful," I said to my husband. He glanced into the rearview mirror. "I know," he said. We sped through the gray morning, heading home.

"I feel like a kidnapper," I told him.

"I know," he said.

My husband and I came to open adoption filled with hopeful naiveté. We tried for several years (and several miscarriages) to have a second child, but when our infertility doctor said we might need more extensive treatment, we decided to walk away. A few months later, we began to explore adoption. Foster-to-adopt, we decided,

would be too emotionally risky for ourselves and, more importantly, for our then 6-year-old son. International adoption was too expensive. But when we found domestic infant adoption through a local nonprofit agency, we realized that we had found our way to be parents again.

We knew that our adoption would be at least semi-open. We would be sharing our vital statistics -- first names, ages, religion, as well as carefully chosen pictures -- with birth mothers, as per the agency's requirements. But we wanted more. We wanted a fully open adoption with an ongoing relationship and continuing contact. We wanted holiday visits, regular phone calls and even -- dare we hope -- contact with the extended birth family. We felt our baby-to-be would benefit from knowing his or her origins; we considered it a birthright. We also strongly believed birth parents were due some kind of relationship with their children and with their children's adoptive parents -- if they wanted one.

We weathered the fear-mongering tales of well-intentioned friends and acquaintances, people who had watched nightly news stories of toddlers snatched by their birth parents from adoptive families who had cared for them since birth. We listened as they wondered aloud what kind of woman would have the strength to walk away from her baby and then come back for occasional visits. "What if she kidnaps the baby?" they'd say. "What if she treats you like babysitters?"

Other adoptive parents we knew chose to go abroad in part because they were alarmed by the trend toward increasing openness in domestic infant adoptions. "Won't you feel jealous?" they'd ask. "Won't it confuse the child? What if your child likes her more than she likes you?"

I dismissed their concerns with all of the blind optimism of someone who had waited through four years of infertility for a baby and now finally thought she might get one. "Don't be surprised if you get placed quickly," our social worker told us. "Most adoptive parents aren't ready to be that open, and it's something a lot of birth mothers look for."

Our agency asked that each hopeful adoptive family put together what they called a profile and other adoption professionals sometimes call a "Dear Birth Mom" letter. (The reason they call it a profile, our agency explained, is that a pregnant woman considering adoption is not a birth mother; she is an expectant mother and should be respected as such.) When a woman came to the agency saying she was considering placing her child for adoption, they gathered at least five profiles to share with her. The profiles were pulled on the basis of any requirements that she might have. If a potential birth mother said she wanted an adoptive family where one parent was a teacher, only the teacher profiles would be pulled. If none of the profiles appealed to the woman, she could ask for more.

The profile contained information about us, about our path to adoption and our intentions as adoptive parents. And the profiles are usually printed out on pretty paper.

"Pretty paper?" I asked Denise, our social worker, when she gave us the instructions.

"It matters," she said. "You'd be surprised."

It was a lot of pressure to take to the stationery store. My son and I spent a long time analyzing our choices. I rejected the pastel baby feet as too pushy, the blue sky and clouds as too ethereal. I finally decided on white with a tasteful abstract green border. We made a dozen copies and dropped them off at the agency.

While our agency allowed "matches" as early as the seventh month, they stressed to us that a match was nothing more than a woman expressing her right to consider an adoption plan. It was not the promise of a baby; it was not a guarantee that we would be parents again.

"There is always a 50 percent chance that a woman who chooses you will change her mind," Denise made clear. "A real baby changes things and no matter how sure she is while she's pregnant, she will need to make that decision again once she has the baby." It was a common refrain from the agency during our wait: "Guard your heart," they told us. "The baby isn't yours until the papers are signed."

Seven months after completing our adoption homestudy, our social worker called. "There's a woman who seems like a good fit for you, and

we would like to share your profile with her."

Jessica was 19, they told us, and African-American. The birth father, whom was choosing not to be involved, was white, like us. The baby was healthy -- Jessica's prenatal care had been good. "And it says here what she's having," Denise added. "Do you want to know?"

We did. A girl, she told us, due April 4. A week later we got another call. Jessica wanted to meet with us.

Our agency facilitated our first meeting at a downtown restaurant. Jessica brought three of her closest friends, and we all sat across from each other fidgeting awkwardly. Jessica was polite, guarded but not shy, and greeted us with sonogram pictures of the baby she was carrying. She was due in two months and feeling good.

I liked Jessica right away. I liked her confidence and sense of humor. I liked her wide smile. And I liked how direct she was with us. "I'm going to name the baby Madison," she told us. "You can change it later but that's the name I'm going to give her."

When it was time to go we exchanged phone numbers and last names. Over the next few weeks she and I talked regularly -- not just about Madison but about other things, too; Politics, music, Jessica's plans to travel and go to school. One day I hung up the phone after a particularly long conversation and told my husband, "If she decides not to place Madison, she'll be a good mother."

We talked about the adoption, too, about what her plans were and why she chose us to be part of it. Those reasons are complex and not ones I feel I can share here.

"You already had a son," she said. "I liked knowing Madison would have a brother. I also liked what you said about including me. And the paper, I liked your paper. It was tasteful."

At the first meeting at the restaurant, Jessica told us that she knew she would want to be alone with Madison for the three days before she could legally sign the surrender. We said we understood. But the morning that Madison was born she called to say that she had changed her mind and wanted us to come in.

"I need to see you with her," she said simply.

Even after we arrived home with Madison, I could not get Jessica's tears out of my mind. I felt numb. I didn't know how to answer when people congratulated us. They saw only the happy event, but each time Madison cried I felt sure that every one of her ordinary infant sorrows was magnified by the separation from her birth mother. This was not the gauzy, soft-focus motherhood I had envisioned.

Jessica was everywhere because she was in my daughter. The shape of her brown eyes, the curve of her face -- they became mixed up in my mind. During every diaper change I'd gaze at Madison's small body and imagine how Jessica must have looked at one week old. They mirrored each other; the vulnerability of the mother who had given up her child and the child who had lost her mother.

"You need to move on," friends said. "You need to let Jessica move on. Quit taking her phone calls. Step up and be Madison's mother!" But no one could tell me how to be her mother when she already had a mother. I could care for her -- rock her, feed her, and sing her to sleep -- but something would not allow me to claim her.

Was it the phone calls? Jessica called about once a week to hear how Madison was doing and to tell me what was going on in her life. I kept my stories sweet and lively. She was working hard to put her life back in order and was forthright with me about her struggles. She missed Madison, she told me. The decision was the right one but oh, she missed her. I welcomed our talks even as I shrank from them. I felt it was my duty to hear her cry. It was the least I could do, I thought, because I had her baby. My guilt was a necessary purgatory, an inadequate payment for my privilege.

Each time, I would hang up determined to embrace Madison as my own. Jessica wanted me to be Madison's mother, didn't she? She chose me. She signed the papers. She had released her to me, and now I was failing her trust.

So I went through the motions. I sang to Madison so she would learn my voice. I strapped her to me and walked in circles so she would learn the rhythm of my movements. I hoped proximity would breed devotion. But I felt like a liar when we went out and people said what a pretty baby I had. Not my baby, I wanted to tell them, anxious not to take Jessica's credit.

"She even looks like you!" some gushed. Of course this wasn't true. Her smooth coffee-with-cream skin is nothing like my own rosy complexion. Such was their strong determination to fit her to our family.

"She looks just like her birth mother," I'd reply. I wanted them to see Jessica, to acknowledge her. I couldn't stand to have her obliterated, even in casual conversation. It was if they were trying to deny the truth of Madison, the fact of who she was beyond being my adoptive daughter. I didn't want to pretend that she came to us without her own history. But at the same time, polite society seemed to want to dismiss her origins. Per United States law, Madison's post-adoption birth certificate even listed me as the woman who gave birth to her.

The next time Jessica called, I tentatively told her how I was feeling. "I can't stop thinking about you and how hard this must be," I said, my voice cracking. "I know how sad you are..."

"I don't want you to feel guilty," Jessica admonished me. "I want you to love her. I need you to love her and be happy."

"But how can I be happy when you're hurting so much?" I asked. "It's easier when I think of you cherishing her," she said. "I need you to do that for her and for me, too. I don't regret this."

I wanted it to make better sense. We didn't find Madison languishing in a destitute orphanage. She didn't come to us with a history of abuse and neglect. I didn't know how to justify this great gift of her presence in our lives at the expense of her mother. If there just something I could hang it on, an obvious reason that Madison was better off with us -- but there wasn't. There was just the word of her first mother who said, "This is what I need to do."

In my lowest moments, I would browse the list of adoptive parents on our agency's Web site. One night, I happened upon a profile of a fantastic family; African-American professionals who ran a newspaper and had a daughter the same age as my son. They should have gotten Madison, I thought. They were better educated than me, had better jobs -- and could give Madison the one thing I never could: a connection to the black community.

My friend Elisabeth, who used to do patient support at an abortion clinic, took me to task.

"This is a choice issue," she told me. "You keep telling me how strong and smart Jessica is, but you're second-guessing her. That's not fair."

"I just want us to both be winners in this," I said.

"There is more than one way to be a winner here," she replied. "Stop denigrating Jessica's decision."

I had been picturing the two of us balanced on opposite sides of a tipping scale. If one of us was the real mother, then the other one was not. If one of us was happy, then the other must be sad. But when I hung up with Elisabeth, I realized that I couldn't ease Jessica's struggle by taking it on as my own. Besides that's not what Jessica wanted; she did not want her sorrow to color these first months of Madison's life. It was my guilt that betrayed her, not my love for Madison.

When I stopped feeling so consumed by what Jessica had lost, I was able to find joy in what I gained, the everyday pleasures of parenting again -- dressing my daughter, giving her a bath. Certainly, with that joy came vulnerability and the insecurity my worried friends predicted. Sometimes I don't want to share Madison. Sometimes I want to feel that I am the only mother she has and will ever need. But even at it's most challenging, I still believe in openness. How much easier it will be for our daughter, I think, to never have to search for her roots. She will never have to wonder why her first mother chose adoption; she can

ask her.

Jessica lives in our city and visits when her busy life allows, which ends up being about once a month, and we e-mail and phone more often. A few weeks ago she came over and made us jerk chicken with mango salsa; she is studying to be a chef. We joked that now we know where Madison gets her enthusiastic love of good food. After dinner I shared the beginnings of this essay with her and we cried a bit together.

"I didn't know it was so hard for you," she said.

"Well," I shrugged, helplessly. "I didn't know how to tell you."

Last summer Jessica and I took a trip to Washington together so Madison could meet her extended birth family. Jessica was hoping, in part, to show them that it had all worked out OK and that her decision to place Madison with us was a good one. As an interracial family already, the transracial aspect did not grieve them; it was the loss of this wondrous first grandchild to strangers. "When they see us together, how things are, they'll understand," Jessica assured me. Still we were both nervous. The family reunion took place at a country club on a beautiful cool summer evening. It was amazing to meet people who looked like Jessica and thus just like Madison, too. I kept my camera ready. Madison, open and sunny, charmed everyone, and several people took me aside to thank me for making the trip. "It's my pleasure," I said honestly.

"She looks like her mother," said someone admiringly, and I felt the discomfort the comment left in the room. "Yes, she does," I rushed to say. "She has Jessica's beautiful smile." And they were generous with me, too. "Better ask your mommy," said Jessica's father when Madison reached for another slice of cake. Then he handed her to me although I know it pained him.

When the party spilled outdoors, Madison and Jessica wandered away to play in one of the sand traps on the club's golf course. I stood on the edge and snapped a series of pictures -- first Madison and Jessica crouching together to poke at the sand. Then Madison with her head thrown back to look up at Jessica while Jessica gazed down at her, smiling with great tenderness. Then a shot of Madison laughing and running away. Running toward me.

About the writer

Dawn Friedman lives and works in Columbus, Ohio

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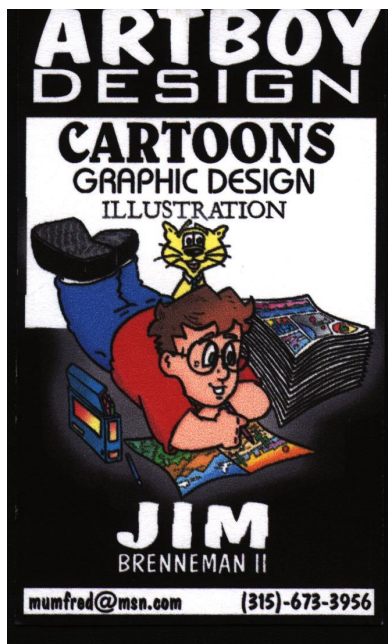
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A Special Thanks to ARTBOY Design For donating the new cartoon for each Newsletter! Thanks Jim!!

## Who we are...

The OCFAPSG was founded for the benefit of all foster/adoptive parents and children in their care. You are the group, the organization, the members that make the OCFAPSG what it is. If there are any questions, concerns or comments regarding this organization, please feel free to contact any of the Board members listed below.

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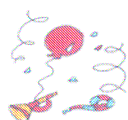
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445.1086

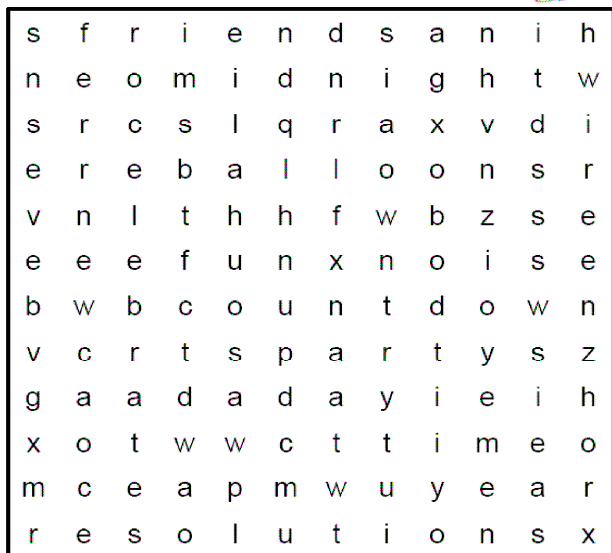
If you have an article or tidbit that you would like to submit for upcoming issues, please forward to Debi Southard at the above email or mail to:

Debi Southard  
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Nedrow, NY 13120

## The Kids Corner



### New Year Word Search



- |       |           |             |         |
|-------|-----------|-------------|---------|
| party | year      | countdown   | time    |
| eve   | midnight  | day         | new     |
| fun   | celebrate | resolutions | friends |
| noise | balloons  |             |         |



The clown has lost one of his balloons! Can you help him find it?

