PARENT VOICE
AZ

Did You Know?- Shared Parenting
by Teri Hollaway

My partner, Michelle, and I became a licensed resource family about 2 1/2 years ago. It has been an incredible journey, full of life’s ups and downs. I have raised 5 children as a single mom, and I have life experiences navigating child serving systems. My partner has always wanted to be a mom. She waited until her career in accounting was solid before she embarked on this new journey. We talked about what would be important for children and their families in our home, and we settled on a couple of important decisions that led to our experience.

First, we wanted to provide a positive, safe and flexible environment for little ones. We both worked to build up a play room that had a lot of age appropriate learning and fun opportunities. We both received training in supporting little ones who had trauma to compliment our previous experiences. Second, because of my own journey with the DCS system, and the work that I do with families navigating systems, we agreed that we would focus on helping families reunite to the best of our ability. For us, this has been a journey of shared parenting.

We have learned several things along the way. We have built relationships with the parents and extended family of the three little ones we have had in our care. We have included our first little one’s birth family every step of the way. She has a

Parenting Tip

Spend time with your kids!

It really does not matter what you choose to do with your kids, they just want you to spend time with them.

Inside this issue

Did You Know? ............... 1,2
Public Interest Story....... 3,4
Community Resource..... 5
Parent Bio ...................... 6
Shared Parenting by Teri Halloway

great relationship with her paternal grandparents and
parents. Although our first foster child’s parents strug-
gled, her parents have always known we were sup-
portive. We adopted their daughter at their request,
which, continues to be an open adoption. Our daughter
continues to spend time with her grandparents and sib-
lings often. She is almost two and is an amazing little girl.
We talk about her tummy (birth) mommy and daddy, and
encourage their relationship.

Additionally, we foster a four-year old little one,
whose family came to America as refugees. It has not
been an easy journey for them. There were so many bar-
rriers, language and cultural understanding along the way.
We have successfully built a relationship with the family.
In the beginning, communication with the family was pri-
marily via phone. Soon after, we were supervising par-
enting and sibling time, and inviting the family into our home for holidays and birthdays. We have
been active in the Child Family Team (CFT) process and have helped the family to advocate for the
services and supports they needed. To help support the family in reunification, we built a relation-
ship with their DCS case managers. Our foster child has been with us almost exactly one year and
there is a solid plan for her to go home soon.

We also have a 2 ½ year-old little boy. He has also been with us for a year. One of the things
we learned with our other little one was to have a safe place to meet in the beginning of shared
parenting. We chose a neutral and fun place that was familiar to our little one, as well as, a place
his parents were able to meet and play with him. In addition to their court ordered visits, the visits
gave them time to get together without too many expectations and stress. We also facilitate google
duo calls that often help everyone stay connected.

We encourage family engagement and send pictures to the parents often; taking profes-
sional pictures so that parents don’t miss out on big milestones. We offer parenting time in our
home when there is a relationship built and we all feel comfortable. The safety of the children and
our family comes first. It has been such an amazing journey.

In all honesty, there are times when keeping up with everything is difficult. It can be chal-
lenging and heartbreaking sometimes. We work hard to be supportive and kind and to provide a
connection. There have been some setbacks, and many successes. But, despite the many barriers,
including culture, language and other challenges, we all celebrated when the little one we fostered
was reunited with her family in April 2020. Our hope is to continue a supportive relationship, if
and when children are reunited with their families. **Teri Holloway Foster Parent**
Lisa Fojtik and Brent Penman are great examples of how the Oxford House can positively change lives. In the following paragraphs, Lisa and Brent describe how Oxford House made a difference in their lives.

I started using alcohol and illicit drugs at a young age as a way of filling the voids of insecurity, anxiety, and the need to fit in. They were my solution and my escape for 15 years. After my second prison sentence as a result of my behavior while using, I was hopeless. I didn’t know a different way of life, but I was desperate for one. I moved into my Oxford House in December 2017 and was welcomed with loving arms. I was immediately a part of a family. I had a safe, beautiful, and affordable home to begin my new life. I started to create meaningful relationships with the women, something I had strayed from for many years. I learned to be self-sufficient and responsible, which has only empowered me to eliminate personal limits and raise the bar for myself. Oxford House truly saved my life and I will forever be grateful for my experience.
I have now been blessed with the opportunity to give back to the pregnant and parenting women in our houses by connecting them with available community resources during their stay at Oxford House. We are looking forward to opening more women with children homes in the coming years throughout the Phoenix area and other regions across Arizona. There is a huge need for safe and supportive housing for single parents getting back on their feet after active addiction and Oxford House is proud to be able to meet that need!

Lisa Fojtik, Oxford House Resource Coordinator for Pregnant and Parenting Women, Sobriety date: 4/2/18

My name is Brent Penman and I am an outreach worker for Oxford House. I currently live in an Oxford House. After spending my entire adult life addicted to substances, and everything that comes with it, I made a decision to get clean. I learned very quickly that things didn’t get magically easy by eliminating substances. I basically had to learn to be an adult. I moved into Oxford House Crossroads in Topeka, KS in November of 2016 and found exactly what I needed. The 10 brothers in that house showed me love, and accountability. They helped me grow in ways that would’ve been impossible on my own. I learned how to be in charge of finances, clean up after myself, be responsible and, after a few months, I was able to show others the same thing. I fell in love with the organization and got involved in as many ways as I could. After 2 years they gave me a job and allowed me to move back to my childhood home in Phoenix. I’ve opened 3 houses on my own and helped guys turn their lives around much like my own. If you have struggled with substance use and are looking to break the cycle, Oxford House might be right for you.

Source: Brent Penman, Outreach Worker, Sobriety date: 1/13/16
Community Resource – Community Medical Services

Community Medical Services (CMS) is an accredited substance abuse/use disorder treatment center that provides services for adults who have been physically dependent on opiate medications and/or heroin. Based on science and evidence, it is found that medication assisted treatment along with counseling services is the most effective form of treatment for individuals dependent on opiates. Community Medical Services offers an array of services such as; group and individual counseling, peer support, community based services, OB-GYN Services and Medication Management. These services assist in accomplishing Medication Assisted Treatment (MAT) goals such as prevention or reduction of withdrawal symptoms and drug cravings, relapse prevention, restoration toward normalcy of any physiological function disrupted by drug use and blockage of euphoric effects associated with opioid use.

The goal of MAT assisted treatment is to recover from addiction. It provides a safe, controlled level of medication to overcome the use of a problem opioid. It helps people manage their addiction and maintain the benefits of recovery.

The Facts on MAT:

- MAT is treatment for addiction along with other supports
- MAT Programs are monitored with drug screens and participant engagement
- MAT Treatment helps people manage their addiction
- All MAT medications reduce problem addiction behavior
- People can safely take treatment medication as long as needed. (months, years or even a lifetime)

When I see the happiness in my children’s faces, I am reminded of the importance of continually taking care of myself and my family”- Crystal Garduno