PRIDE Link

The PRIDE Model we follow stresses the need for foster parents to address the competency of “Supporting relationships with birth families”. This can be hard as a caregiver when one knows about the trauma a parent my have inflicted onto their child. With that being said, it is important to keep in mind that the child’s parent may also have some unresolved trauma from their youth or early adulthood. “Unresolved trauma can negatively affect parents’ coping, parenting, and the ability to interact effectively with the child welfare system” (NCTSN). The National Child Traumatic Stress Network has created an online course developed for individuals who work with birth parents involved in the child welfare system, and will focus on child welfare activities such as removal of the child from their home, visitation, court hearings, reunification, and termination of parental rights. “The primary goal of the course is to increase understanding of the impact that parents’ own unresolved trauma can have on their capacity to engage with child welfare personnel, negotiate different aspects of the child welfare system, and safely parent their children. Addressing the issue of birth parent trauma will ultimately have a positive impact on overall child welfare goals of safety, permanency, and well-being” (NCTSN). The link provided will require you to register and create a login; however, there is no cost to the training.

Suicide Awareness

Teen Suicide is a growing health concern. It is the third-leading cause of death for young people ages 15 to 24, surpassed only by homicide and accidents, according to the U.S. Centers for Disease Control and Prevention (CDC). It is also thought that at least 25 attempts are made for every completed teen suicide. Learning the warning signs can be critical to help provide safety for the youth in your care. Stop Suicide Today provides a tool in the link below to help “empower individuals to help loved ones who are concerned about or feel suicidal”.

ADHD or Child Traumatic Stress

Symptoms of Attention Deficit Hyperactivity Disorder often overlap the symptoms of Childhood Trauma. With that being said, it can sometimes become hard to discern what is ADHD and Child Traumatic Stress. The National Child Traumatic Stress Network has created a guide that provides “definitions of child traumatic stress and ADHD, explains how symptoms can overlap, and summarizes some of the differences between the two.” We encourage you to take the time to read through this lengthy article and share with your child’s healthcare provider to assure that the child in your care is receiving the most appropriate and effective treatment.

Working with Parents Involved in the Child Welfare System

Learn to ACT

It is ADHD or Child Traumatic Stress? Clinicians Guide
Health Care Coverage

Many former North Dakota foster youth don’t know they could have health care coverage. Help spread the word.

A provision in the Affordable Care Act makes Medicaid coverage available to young adults who age-out of North Dakota foster care until they reach the age of 26. This assures that young people who leave foster care with no legally binding tie to a family can have the same access to affordable health care as their peers.

All former foster youth who turned 18 while in North Dakota foster care and had North Dakota Medicaid coverage while in the custody of a public agency such as a county, Department of Human Services, or an Indian tribe, qualify for traditional Medicaid (not Medicaid Expansion) until they turn 26, regardless of their income.

Medicaid provides medical, vision, and dental coverage and pays for services like behavioral health treatment, counseling, and other health-related care.

Individuals must be currently living in North Dakota to qualify. If they live outside North Dakota, they need to contact the Medicaid program in the state they live in to see if they qualify for that state’s Medicaid program. Some states have chosen to provide coverage to all former foster youth, regardless of the state in which they aged-out of.


Young adults, who have aged-out of foster care and are not yet age 26, may not be aware they qualify for Medicaid. Once they leave the child welfare system, locating them can be challenging as they tend to relocate often to pursue education, find jobs, or reunite with family. Your help is needed!

Here’s how:

♦ **Connect** with young adults who turned 18 while in foster care and are not yet age 26 to **inform** them that they may qualify for Medicaid and support their efforts to apply. Encourage foster parents, group homes and facilities, schools, social service agencies, community-based service providers, and others who knew them while they were in care and may still be in touch with them.

♦ **Advocate** by sharing this information with community partners who are likely to come into contact with former foster youth. These include clinics, hospitals, churches, community health and behavioral health centers, colleges and universities, county social service offices, homeless shelters, and other programs for young adults.

Continued on the next page.
Make current foster youth who are preparing to age-out of foster care in North Dakota aware of their eligibility, and help them understand the enrollment process and annual renewal requirements. When a youth applies for Medicaid, it is important that he or she tells an eligibility worker that they are a former foster youth who aged-out of foster care in North Dakota.

Continue to **educate** social service agencies, schools, foster parents, and other community providers about this Medicaid coverage option.

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**How to Apply**

First, ask these three questions to the former foster youth:

1. Were you in foster care in ND when you were 18 years old?
2. Were you on Medicaid when you left foster care?
3. Do you live in North Dakota?

If they answer yes to these three questions, they should qualify for Medicaid until they are 26!

**Next Steps:**
They need to contact their local county social services office to apply and tell them they are a former foster youth!

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Continued access to health care is essential to helping youth in foster care successfully transition to independent adulthood. Medicaid is an important resource for providing that access to care, so please help ensure current and former foster youth are informed and aware of this benefit!

By Dawn Pearson, Independent Living/Licensing Administrator, North Dakota Department of Human Services’ Children and Family Services Division