

June 2021

Department of Children and Families  
**SPOTLIGHT ON WHAT'S RIGHT**



## A Message from Commissioner Dorantes...



**PRIDE** month is also national **REUNIFICATION** month - both so relevant to the work we do here at the Department of Children and Families.

*Reunification?*

*During a pandemic?*

Since March of 2020, together we have reunified over **700** children with their parents! I have such gratitude to our employees, foster parents and community partners who worked so diligently to provide families the support so children can once again reside safely at home. The pandemic has been a scary, uncertain time. Adults, working in concert with each other, offer the stability

children need in these uncertain times.

This month's "*Spotlight*" puts focus on one father and his story to be reunified with his teen daughter. With a collaborative approach between DCF and the Village for Families and Children, he celebrated **Father's Day** - waking up for breakfast with his daughter, in his own house, for the first time in years.

Inside and outside of the Department, we all have roles to play in achieving the goal of timely reunification. This month we are acknowledging the role our Teachers and Nurses play in the reunification process.

Our newsletter puts focus on a special teacher, **Anna Gawel**, who inspires the youth she serves at the Albert J. Solnit Center North using art. Read her words closely. You will experience her passion and energy to assist each young man in front of her, the ability to reach their potential prior to returning home.

June is  
**National  
Reunification  
Month.**

*What can I say about our Nurses!!!* They strive to ensure children in our care and custody have their comprehensive needs met. We recognize the importance of caring for the whole child. All of the healthcare professionals, across the Department, are owed a debt of gratitude for their unwavering commitment during one of the most challenging times in our history. Read as we "*Spotlight*" **Kimberly Kanaitis, MSN RN** and **Melody Davis, BSN RN** for their work and outstanding service during the pandemic to support our youth!



Lastly, we must strive to affirm the gender identity and sexual orientation of each and every one of our youth and adults in our communities. Please read the powerfully inspiring story of our own DCF employee **Dr. Aissa Williams**, and her story of courage and resilience - making the world a better and more accepting place. She is truly more than any label!

**"Partnering with communities and empowering families to raise resilient children who thrive."** - This is our mission and it has been so embodied throughout this month!

## "The moral of the story is anything is possible"



Christopher, a 36-year-old father from Hartford, experienced a breakthrough the day he realized "the system" was there to help him get his 14-year-old daughter back home with him.

"I was hesitant because I didn't trust the system," he said. "But as time went on, I realized they were actually helping me to get my daughter home with me."

Christopher's 14-year-old daughter, Christinaly, was placed by the Department of Children and Families (DCF) in the fall of 2019. Originally, she resided in a foster home with a family she did not know and then later with her maternal grandmother.

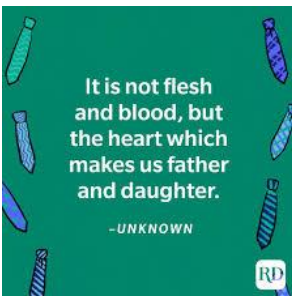
When Christopher was contacted by the Department to say Christinaly was in a foster home, he knew immediately what he must do.

"I was always in her life and talked to her every day," he said. "But when I got the call, I was ready to take responsibility for my daughter." Now he knew he would have to do more.

Working with DCF Social Worker Shacarra Hite and staff from the Village for Families and Children, Christopher completed parenthood and fatherhood programs as well as a substance use evaluation. He said the Village helped him secure housing, furniture, and energy assistance. Village staff also helped him by talking to his daughter about things that fathers may have trouble discussing. "They were great and very hands on. The Village staff really helped a lot."



But above all else, DCF and the Village encouraged him and gave him confidence. A team approach between a state agency and a community partner.



"They motivated me to do better, to get a better job and get my own apartment," said Christopher, who has worked for Town Fair Tire as a delivery man for a year this month. "They helped me push myself to be better. They told me what I needed to do to get my daughter back."

DCF Social Worker Shacarra Hite said Christopher made incredible progress. "At the beginning, Christopher appeared as if he already lost the battle before beginning the fight," she said. "But despite the odds, he always expressed his undying love for his daughter. As months went by, Christopher began to regain his confidence and was determined to reunify with his daughter.

Christopher exceeded all expectations . . . The moral of the story is anything is possible!"

Christinaly moved in with her father in January 2021 just before her 14<sup>th</sup> birthday.

Christopher said the experience of getting his daughter home is wonderful. "It means everything to me," he said. "I can guide her to be a better human being and guide her away from mistakes I made." He said it was a relief to get her home. Father and daughter do a lot of things together - from going to the beach, getting her to hair appointments, learning Spanish and baking cookies.

What was that first Father's Day like waking up and knowing Christinaly was home? "It was great to be able to wake up together in the same house and eat breakfast," Christopher stated. That special day entailed visits with extended family, a walk to the park and down to a river.

"She's doing great," Christopher said, adding she is getting straight As in school. And so is Dad.

"Now I have a purpose," he said. "It elevated my mind and my thinking."

## "I love the LGBTQ community. I am them."



Dr. Aissa Williams is a Black lesbian who tells an all too familiar story of facing isolation, bias, and discrimination as a result of her sexual orientation and gender identity.

She is incredibly accomplished. A 21-year veteran of the Department of Children and Families, Dr. Williams currently works at the New Haven Area Office. She has earned her Doctorate in Social Work from Walden University and now serves on two community boards, is a therapist and consultant. Dr. Williams is also an adoptive parent.

"I am more than my label," she stated. "I have to be that role model."

Dr. Williams speaks with such clarity and from a place of strength about her life experiences—those both painful and successful.

Dr. Williams' family relocated to Connecticut from South Carolina in 1969. They settled in the Hill Section of New Haven, surrounded by neighbors, some would become friends; including those who identified as gay and transgender. In the 80's, when society reacted harshly to those who lived a seemingly *different* lifestyle, it was her family who embraced others and their unique identities and expressions.

As an adolescent, Dr. Williams realized her own sexual orientation as a lesbian which she believed was accepted by her family. "My mother knew, and I knew my mother knew," Dr. Williams stated. Yet, her life changed one night when she was "outed" by her own mother while being referred to as a "*bulldagger*," a term which holds a derogatory meaning in the LGBTQ community. It appears the "family secret" was known by others outside the family resulting in a life-altering consequence given to her: teenaged Aissa was kicked out of her house.

"How could my mother reject *me* but be friends with these other people," Dr. Williams would ask herself. Dr. Williams did not speak to her mother for the next seven years. "As a Black person, I had strong connections to the church. I was rejected there as well."

At the age of 18, Dr. Williams now found herself homeless, with limited financial resources and not knowing from where her next meal would come.

Dr. Williams draws many comparisons at this point in her life to those youth involved with the Department, who may face harsh responses from their own families after disclosing their gender identity and sexual orientation. They too may be rejected, become unstably housed, and displaced from their communities. "Parents must be willing to unconditionally support their child," she stated. "Being a parent does not give you the power to control the child's narrative."

Dr. Williams believes our kids need that one stable person who can validate their feelings - just like she was afforded at the time.

Despite this trauma, Dr. Williams' sexual orientation was validated by her grandmother; the matriarch of the family, from whom she gained such inner strength. "Without her, who knows where I would be," Dr. Williams stated.

"You are still my Nene," her grandmother told her. While Dr. Williams and her grandmother never talked directly about being a lesbian, she met Dr. Williams' partners and never questioned her about her sexual orientation. "She was that one person we need for support," Dr. Williams stated with much affection. "I was always grandma's girl."

"She was my courage and my strength."



As a young adult, Dr. Williams was brought to her first job interview by her brother who had been offered a job opportunity but instead he decided to advocate for her to get the job. "This is my sister," she remembers him saying. She was hired and from there her career in foodservice began. She worked her way up from a dishwasher to a chef, even working while attending culinary school in Virginia as a chef in a Japanese Restaurant in Washington, D.C., a Black woman with dreadlocks—advancing her way from dishwasher to chef over the next 12 years.

It was while working that Dr. Williams suffered a near fatal injury. Breaking her neck so severely, hospital personnel told her there was not a valid medical reason why she was not dead. "The doctor told me I was either mean as hell or God has a plan for you," Dr. Williams laughed. During her recovery, she decided to go back to school.

Dr. Williams came back to Connecticut to assist her family in caring for a family member. After starting out at Gateway Community College, she eventually enrolled at Southern Connecticut State University and earned a bachelor's degree in Sociology. She eventually met Toni Ligon, a DCF employee who encouraged her to apply at DCF. Dr. Williams work at the Agency began but she wanted to do more. She received her Master's in Social Work Degree from Fordham University. She was still not done—on to her Doctorate!

"I can't stop. In order to be seen other than just a Black, lesbian woman, I need goals and have to accomplish them."



"I can't measure the pressure," Dr. Williams responded when asked about her thoughts on how others view her. "When I step into a room, I represent Black, lesbian women and have to be mindful of how I dress and interact with others." This starts with her morning routine. "I check myself in the mirror and question how the world is going to see me. If I don't make a good impression, I might be dismissed at the start."

Dr. Williams recognizes she does not fit society's perception of a woman, which has resulted in her developing particular strategies to offset the negative connotations associated with labels which may impede her success.

In college, a professor pointed out to Dr. Williams that he observed her taking over the space in the classroom by arriving early and establishing a commanding presence. "I have learned how to navigate the room over the years," Dr. Williams confirmed. This means before entering a room she will anticipate who will be present, where she should sit and how to conduct herself, so a favorable impression is left.

Dr. Williams is an inspiration. What she has accomplished in her life and what she represents to those around her, has and will continue to influence lives in the future. That inner drive will remain to educate others leading to a more accepting society.

"I want people to see me as a person who is compassionate and has something to offer. I can help to improve the lives of others who are marginalized," Dr. Williams emphatically stated.

"There is so much more to our community than just how we express ourselves. I love the LGBTQ community. I am them."

---

## **"There is so much good in these boys, I want to expose their talents"**

For over two years, Anna Gawel has dedicated her career to teaching adolescent boys at the Albert J. Solnit North in East Windsor. "I strive to break the stigma of art rigidity," she explained. Having had first-hand experience with how important and pivotal a role the art teacher plays, she remembered her High School Art Teacher with a depth of fondness and gratitude. "She saw a natural talent, that I wasn't able to see. She took me under her wing, encouraging me to explore a career in the arts and I did just that. I hope to inspire other youth the way she inspired me".



After receiving her Bachelor of Fine Arts, Anna pursued work in the commercial field but soon realized that the work didn't define her purpose. "I like the clinical setting," she said, adding, "I can infuse therapy in the arts."

Anna teaches boys, ages 12 to 17 years. The students are required to attend Art Class every day for 45-minute sessions. When they sense a lack of authenticity, it is unlikely these students will connect with their teacher. Their trust is one of the most important things a teacher can ask for and receive. "The biggest barrier I find initially is knowing where the kids come from and then building that trust. We spend time trying to figure one another out," she added. Anna attributes her positive classroom environment to ensuring consistency, setting expectations and being respectful of one another.

The art projects have no deadlines. "I love to watch their minds create the work. The kids fascinate me," she said. "I had one student who would use different supplies like popsicle sticks, paper, glue and other art elements and create a masterpiece," she explained, adding, "their creativity is endless. Once I taught a student who no doubt was a genius. He had a sharp engineer-type mind, creating art through robotics. He had no idea how brilliant he was."

The classroom dynamics can sometimes be challenging for Anna and her students. Often the social pressures and stressors that happen outside of her class, spill into the art room. "On their off days, ripping up paper or scribbling for 45 minutes is still a successful day." Other kids may find the artwork to be a distraction from those social pressures, using their creative expression as an outlet.



Anna said that her work is supported by her school principal Don Slater. "He always has my back and supports my ideas," she stated. Mr. Slater feels that Anna is an asset to Solnit. "Ms. Gawel is a teacher with the amazing gift of teaching. She lights up her classroom with inspiration. She is an energetic and motivational teacher who consistently and constantly works to build meaningful relationships with students encouraging them to be positive contributing members of our school community. Ms. Gawel goes beyond interacting with students on an instructional level and works to make sure their physical and emotional needs are met. She has high expectations for all her students. She uses a student-centered approach to teach art, always trying to improve student outcomes. She makes times for each student, collaborates with other teachers and is always looking to become a better teacher. She has made many of our students' artist and/or better artist because of her great teaching," he said.

"Art can be intimidating for some students," Anna explained. Not every student feels that they can be artistic, and some may not have a true understanding of what art really is. Anna finds that some students are terrified of making a mistake. "I create alongside my students. They see me draw and erase and begin again. This shows them that it's ok to not get it right the first time," Anna said.

"I am so honored. There is so much good in these boys, my story will hopefully expose their talents," Anna recently commented after being recognized during Teacher Appreciation Month. She displays the artwork of her youth in display cabinets on site. Some kids choose not to display their work until they see the accolades that their peers experience and then change their mind and agree to have their work displayed. "When the kids leave us, they get to take all or none of their artwork," she said. "I encourage them to keep their work but sometimes they leave it behind, and we continue to celebrate their creativity."



Anna hopes that the students she has taught over the past few years will remember her long after their placement at Solnit. "My hope is that they will remember something I did or something I said that made a difference. I hope that for every time I reminded them, I'm not going to give up on you, ever—that they truly believed me".

---

## The Nursing Team!

"The role of the nurse in DCF Health and Wellness Division is unique and different than that of the traditional direct care role," explained **Jane MacFarlane, RN MSN**—DCF Director of Nursing. "But no less important to the health and wellbeing of the individuals the department serves. Our nurses provide the essential function of the health and medical oversight of the children in care whether these children are residing in their home, a foster home, or a congregate care setting. We are very excited to spotlight two of our nurses who have gone above and beyond."



**Kimberly Kanaitis, MSN RN** is a Clinical Nurse Coordinator for the Regional Resource Group. "I was in tears. I was completely honored," Kimberly stated when asked to speak about her role. "I hoped the article would also recognize **all** agency nurses; I am just a part of a team." With Kimberly's previous nursing experience being community based with a focus on pediatrics, she was inspired to work for the Department. "For the past nine years, I feel like I am a liaison between the community, the staff and our families. I work to change the perception of the Department. So much good work is happening here."

Kimberly explained that it was a difficult transition to leave community nursing to work for the Department. "I tried hard not to overstep in a social work environment," she stated. "My focus here is to educate our social work staff, our families, foster families and help those understand and interpret data." Kimberly is also responsible for developing a medical plan for children in foster care and providing medical care support to biological families, kinship families and foster families, especially those who focus on medically complex levels of care.

When asked if she has seen a shift in the Department's philosophy over the years, Kimberly stated she has seen many positive changes. "I have seen such a change in the Department's permanency goals. We now work as a team to go above and beyond to ensure all possible barriers of reunification are lifted. Kids belong home when it is possible. This job is hugely rewarding, especially when I can help a child get to a point where they are medically able to reunify."

Kimberly shared that the Covid-19 Pandemic greatly impacted the work. "We scrambled as a team to provide timely and accurate information to our families and implemented protocols with educational tools and resources," she explained. "I am pretty proud of our division. We nailed it! The Department gave us all the tools we needed to get this it done. The Division is now so much further ahead. We have accomplished so much over the past year, and, as staff, we are so much closer with more interaction and communication."



For the past nine years, **Melody Davis, BSN RN** has been a Nurse in the Regional Resource Group. "Part of a team that is makes connections, providing resources and empowering our families and our children to advocate for themselves." She stated adding, "when I first started my work here, I saw how hard the social workers were working to help families and make connections. I was so inspired by their work."

Reminiscent of a case that she shadowed during her training period, she recalls the positive impact that teamwork between the social work staff, the birth family, pre-adoptive family, and hospital staff had on the medical planning and health of the little girl involved.

"There are so many moving parts when it comes to working with a family who becomes involved with DCF," Melody explained. "A nurse's involvement may be delayed in some cases due to

caregivers or parents' resistance to sign releases or share necessary information about the children. Nursing will often find themselves as the liaison for the children when there is a critical barrier in communication between medical providers."

When asked how the COVID- 19 Pandemic impacted the day-to-day work, Melody was clear. "We needed to understand the virus and disseminate the information timely. We never worked alone, we worked together as a team with Jane and Dr. Taylor's oversight and support. We increased our communication through consistent phone call check-ins, attending virtual appointments and follow-ups."

Melody feels that the nursing staff were able to provide relief and comfort during a very frightening time. "This will absolutely change the way we do our work going forward."

"This has been a particular challenge for all the nurses during the pandemic", explained Jane MacFarlane. Explaining "in addition to their normal busy workload, they have also been involved in monitoring all children in care who have been exposed and/or tested positive for COVID-19. They **ALL** deserve recognition for their hard work and dedication, especially over the last 15 months"