



# Clearinghouse on Supervised Visitation

The Institute for Family Violence Studies

Florida State University

## JANUARY EPRESS

### QUESTIONS FROM DIRECTORS

*We enjoyed last month's more advanced phone training, but we have had a big turnover in staff lately, and need the beginner version of domestic violence. I don't want to slow down the rest of the state. Can you do a training just for my program on domestic violence?*

Your program is probably not alone in its needs, so let me send out a 30 second survey to directors. **If we did a separate training on domestic violence only, with a certificate for all those who attend, would your program participate?** Please let us know within a week, and we will schedule a separate training and announce it. We will also suggest a few times and see which is the most popular. EVERY SINGLE PROGRAM THAT RESPONDS (either to decline or participate) will be entered into a drawing for a few new free books for your clients. Here is the link. Be sure to write in your name and program address for the drawing.

[https://fsu.qualtrics.com/SE/?SID=SV\\_bEjvMqKtYhb0qkl](https://fsu.qualtrics.com/SE/?SID=SV_bEjvMqKtYhb0qkl)

**Our SV program will lose our funding at the end of June. The CBC is using the money for something else. Is there any additional funding out there that you know of?**

Programs are struggling with funding, and the CBCs must use the federal Access and Visitation dollars for specific activities that increase the access of noncustodial parents with their children. This is a federal requirement. Although I do not know of any additional funding, I encourage you to emphasize to your CBC the federal reporting requirements and the crucial issue of safety, which is the most important service of a supervised visitation program. We have alerted the Court system, the Attorney General's Office, and the Department of Children and Families on multiple occasions of the vital role of supervised visitation programs in this state. We have had many discussions about the tragic loss of funding for these programs. As you know, we have supported multiple failed bills that would have implemented the Minimum Standards that were recommended to the Florida Legislature in 2008. We have emphasized the importance of funding – at a minimum, for security at programs. Without funding, programs cannot provide the important services necessary to keep Florida's vulnerable families and children safe.

# 50 WAYS TO ENCOURAGE A CHILD

1. (Thumbs up)
2. You're on the right track now.
3. You've worked so hard on that.
4. I heard you say how you feel, that's great.
5. Oh, that turned out very well.
6. That's coming along nicely.
7. I'm proud of the way you worked today.
8. You've just about got it.
9. That's the best you've ever done.
10. You stayed so calm during that problem.
11. That's it!
12. Now you've figured it out!
13. That's quite an improvement.
14. I knew you could do it.
15. Congratulations!
16. I love hearing your words.
17. What a super star you are.
18. You solved the problem!
19. Keep working on it, you're almost there!
20. Now you have it!
21. Your brain must be working hard, you figured that out quickly.
22. I'll bet you are proud of yourself.
23. One more time and you'll have it.
24. Great idea!
25. You're amazing!
26. Terrific teamwork!
27. Nothing can stop you now.
28. You have such creative ideas.
29. That's the way to do it.
30. Sensational!
31. You must have been practicing.
32. You handled that so well.
33. I like how you think.
34. Good remembering.
35. You know just what to do!
36. You are really persisting with this.
37. You expressed yourself so well.
38. You did it!
39. I knew you two could figure it out together.
40. Excellent job saying how you feel.
41. I know it's hard, but you are almost there.
42. Fantastic problem solving!
43. I love hearing your ideas.
44. I know that was hard for you, but you stayed so calm.
45. Yes!
46. Look at how you helped each other!
47. You finished faster because you worked together.
48. You kept trying!
49. Excellent try.
50. You are a creative thinker.



# Hazards in the Home

By Lindsay Greene

## Introduction

Parents work hard to keep their children safe from the dangers lurking in the public sphere, but many are unaware of potential hazards present in their own home. Each year, about 2,000 children, 14 and under, die as a result of a home injury. Fortunately, there are steps which can be taken to minimize these risks.

This E-press will help parents gain information on how to address hazards in their homes and promote the safety of their children. After reading this E-Press parents should be knowledgeable about common hazards which pose a risk to children homes and learn ways in which they can minimize the danger of these hazards.

## Flat Screen Televisions

- **The Risk:** Almost every home has at least one television, but often these televisions are not mounted or anchored to walls. With televisions becoming larger and thinner each year they pose an increasing risk to children. Frequently placed atop furniture such as dressers or entertainment centers, there is a risk that a child will attempt to reach the television by climbing the furniture or grabbing at the screen causing the television to topple. Between 1998 and 2007, it was found that U.S. hospitals reported 42,000 TV-toppling injuries. Toddlers are at the greatest risk for toppling television's as they spend an average of 32 hours per week in front of them and are most vulnerable to injury.
- **How to reduce the risk:**
  1. Children should be supervised when in the room with a non-secured television. If this is not possible, be sure to restrict the child's access to the television, to ensure that they cannot get to it.



Every 24 minutes a child is admitted to the emergency room because of a TV and/or a furniture tipover.

2. Anchor it! Mount the TV to the wall, anchor it to the wall with straps, or secure it to the furniture it is on. Wall anchor straps for TVs can be found at Walmarts, Home Depots, and Targets and for all size TVs.
3. Place TVs on furniture that is meant to hold them and set the TV far back on the furniture to make it more difficult for a child to reach. Also, keep TV stands low, so that they are more balanced.

## Sleep Practices

- **The Risk:** Each year thousands of infants die in their sleep. Most of these deaths are attributed to either suffocation or Sudden Infant Death Syndrome (SIDS). Unintentional choking or suffocation is the leading cause of infant death -- and 60 percent of these tragedies occur in beds or cribs. The practices with which a baby is put to sleep can greatly reduce the risk of the infant succumbing to death during the night.
- **How to Reduce the Risk**
  1. Avoid bedding that is too soft. Pillows, blankets, and bedding which are too soft poses a risk to a helpless infant who will be unable to prevent choking or suffocation.
  2. Keep the crib uncluttered. Be mindful not to leave toys or stuffed animals in the crib with an infant as these may become suffocation or choking hazards.
  3. Do not have an infant sleep in the parent's bed. One cause of infant suffocation is the result of parents rolling onto their infants while asleep. It is recommended, however, to have infants sleep in their own crib or bassinet in the same room as their parents.
  4. Put infants to sleep on their backs. Infants who sleep on their backs are at a lesser risk for SIDS than children who are placed to sleep on their tummies or sides.

## Baby Walkers

- **The Risk:** Parents work diligently to help their child to take their first steps, and, for a long time, baby walkers were considered to aid this. The research shows, however, that baby walkers are detrimental, not only in delaying a child's motor skills, but also in causing a multitude of injuries. In 2004 more than 3,900 kids under the age of 4 were treated in the emergency room for baby-walker-related injuries. Equipped with a baby walker, babies are able to move at a faster pace than they would naturally be able to, which hinders parents in being able to act quickly enough to prevent an injury to the child. For this reason, 80% of injuries in baby walkers occurred under adult supervision! Effectively mobile and higher in their walkers, babies are more likely to roll into something dangerous, such as a

pool or stairs, get burned by grabbing a cup of coffee off of a table or a pot off of a stove, or even be poisoned by reaching toxic materials on tables.

- **How to Reduce the Risk:**

1. Avoid baby walkers for your child. Research shows that baby walkers are detrimental by delaying children's motor development and expose them to an increased risk of injury.

## Drowning

- **The Risk:** Drowning is the leading cause of unintentional injury-related death among children ages 1 to 4. Many risks exist within the home which can lead to a child drowning. From pools and baths, to buckets and toilets, children can drown in as little as one inch of water. Momentary lapses in supervision of children result in 90% of drowning deaths which occur.

Children drowning in pools and kiddie pools account for about 300 child deaths each year.

- **How to Reduce the Risk:**

1. Always remain within arm's reach of children when they are in the bathtub. This way parents, or the adult present, are prepared to step in if the child slips beneath the water and needs help to get up.
2. Be careful of bath seats and rings. When the suction cups on these seats and rings loosen they can tip over, slide, and even trap a child underwater.



3. While parents have buckets out and around the house for cleaning, painting, etc. be sure that children are either being supervised or secured in their cribs or playpens. It is possible for children to drown in buckets.

4. Be sure to keep a fence around all pools and kiddie pools. Often, people will not realize that a small wading pool or kiddie

pool poses a risk, however, children drown in them every year.

Furthermore, when in any type of pool be sure that there is adult supervision.

## Poison

- **The Risk:** Nine out of ten poisonings of children happen in the home and, of these, 40% are due to medications. Things in the home which may seem benign to an adult can be a danger to a child. Cleaning supplies, an open dishwasher, medications, and vitamins can put children at risk of being poisoned when not properly managed.

- **How to Reduce the Risk:**

1. Ensure that all cleaning supplies are inaccessible to children and out of sight. A high shelf or a locked cabinet can be a quick way to keep these out of the hands of a child.
2. When doing the dishes, make sure that your child does not get ahold of dishwashing liquid or packets which they may ingest. Afterwards, be sure that these are locked away or out of reach of a curious child. Also, but mindful that while doing the dishes a child may be able to grab knives or other sharp objects in the dishwasher.
3. Keep medicines and vitamins stored in a secure space which a child cannot access. A locked cabinet or childproofed cabinets are suggested for ensuring a child does not manage to obtain these potential poisons.

## Stairs

- **The Risk:** Stairs can be a looming hazard in the home that many parents, while proofing their homes for children, will frequently overlook. Although many will remember to put a baby gate at the top of the stairs to prevent a child from falling down them, it is a common oversight to forget to secure one at the bottom of the stairs. Children can climb up the stairs and then fall down them in this way.

- **How to Reduce the Risk:**

1. Be sure to secure a baby gate at both the top and bottom of staircases.
2. Prioritize the use of wall-mounted gates, as opposed to pressurized gates. As gates which rely on pressure to remain secured can weaken over time and fall or be pushed over.

From 1999 to 2008 nearly 100,000 children each year were taken to a hospital for injuries sustained on a staircase, usually in the

## Stoves and Ovens

- **The Risk:** It is not uncommon for a curious child to grab for things on top of the stove or reach into an oven. Young children have thinner skin than adults and as a result are more vulnerable to being burned. When a child reaches for a pot of hot liquid on a stove they can accidentally tip the pot onto themselves and be scalded. Children may also touch an active burner on a stove or attempt to open or grab something in a hot oven.
- **How to Reduce the Risk:**
  1. Whenever possible try to use the back burners of the stove, so as to reduce the risk that a child will be able to grab a pot or pan, or touch a hot burner.

2. Keep childproof covers over knobs for stove and oven, so that a curious child cannot turn them on and possibly burn themselves. Secure oven door, so that it cannot be opened by a child when it is not in use.
3. Always keep the door of the oven closed when it is not actively being used and be careful when opening the door of a hot oven, so that a child at oven level does not get a face of hot air.
4. Consider keeping baby gates in front of the cooking area to reduce the risk of a child being burned.

## The Family Pet

- **The Risk:** Each year, about 100,000 children aged 10 and under are treated in Emergency Rooms for dog bites. In the majority of these cases children were bitten by familiar dogs owned by friends or their family. With preparation and education of children on how to properly interact with animals you can minimize risks of a dog bite.
- **How to Reduce the Risk:**
  1. Before a child is even brought home for the first time, a parent can begin preparing the family pet for a new addition to the family. Allow the dog to sniff the nursery and bring home blankets or clothes with the child's smell, so that the dog can become comfortable with the scent.
  2. Teach your child early that they should never tease, pull on, or corner a dog. They should also be taught to leave the dog alone when it is eating and not wake it when it is sleeping.
  3. Model appropriate interactions with the dog with calm and gentle pats.
  4. Never leave young children alone with a dog. Whenever the dog and child are in the same room they should be supervised by an adult.



## Conclusion

It is impossible to prepare for all hazards which may present themselves in the home, but with information gathered over time parents can take steps to prevent accidents in their homes. By taking steps to make your household a secure space for your child they will be able to thrive in a home where they can play, explore, and grow safely.

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- Stanford Children's Hospital. (2015). Accident Statistics (Website). Accessed from: <http://www.stanfordchildrens.org/en/topic/default?id=accident-statistics-90-P02853> - Each year, about 2,000 children ages 14 and under die as a result of a home injury. Unintentional home injury deaths to children are caused primarily by fire and burns, suffocation, drowning, firearms, falls, choking, and poisoning.
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# Developing Protective Factors: Nurturing and Attachment

By Lisa S. Panisch

## Introduction

Nurturing and attachment have been identified by researchers as being one of the top six protective factors which will reduce the likelihood of violence that occurs within families. Nurturing and attachment are important factors for the process of developing healthy bonds between parents and children. Parents strengthen their emotional bonds with their children by developing nurturing relationships with them which emphasize compassionate and supportive behaviors. Through these nurturing relationships, children become attached to their parents through trust and security. Nurturing and attachment play a crucial role in a child's social, emotional, and psychological development.



## Tips for Working with Parents

### 1) *Observe interactions between parents and children*

Observing how parents interact with their children can equip social service providers with opportunities to educate parents about the importance of nurturing and attachment.

When observing interactions between parents and children, social service providers should be particularly aware of the following key factors:

- How do the parents talk to their children?
  - ✓ Do they use age-appropriate language?
  - ✓ What is their tone of voice like?
  - ✓ Do they encourage their children to share their feelings?



- How do parents respond to their child when they are upset?
  - ✓ Do they acknowledge and validate the child's feelings?
  - ✓ Do they attempt to soothe them?



- What is the parent's non-verbal communication style like?
  - ✓ Do they make eye contact with their children?
  - ✓ Do they use touch?
  - ✓ Does their body language appear to match their words?

**2) Educate parents about the importance of nurturing and attachment**

It is helpful for parents and caregivers to understand the important role of nurturing and attachment in healthy child development and in forming strong parent-child relationships.

**Here are some of the key reasons why:**

<i>Children with secure attachments are more likely to:</i>	<i>Children with insecure attachments are more likely to:</i>
Be curious and explore their environment, as well as to enjoy learning new things.	Be more anxious, resistant to change, and mistrustful of adults.
Focus and perform well in school.	Experience problems with grades and behavioral issues in school.
Learn how to soothe themselves and regulate their own emotions.	Suffer from symptoms of psychiatric disorders.
Adapt to social situations and form close friendships throughout childhood and adolescence.	Cave in to peer pressure and have difficulty in developing healthy relationships.

### **3) Provide parents with strategies to help them develop nurturing relationships with their children**

In addition to offering information, it is important to provide parents with practical strategies. Here are some examples of ways that parents can develop strong attachment bonds with their children:



attachment bonds with their children:

- Smile, make eye contact, and frequently interact with children in ways that express warmth, care, and love.
- Be consistent. A child feels secure when they know that their needs will be met in a regular, predictable way.
- Learn to respond to children's cues in an "attuned" manner. When a child smiles, smile back; if they are upset, soothe them by talking to them in a soft voice, holding them, and/or finding other ways to comfort them.
- Encourage children to explore and be curious. Read to them, and allow them to explore the world through self-directed play.
- Notice when a child becomes overstimulated. If this happens, provide the child with a quiet and peaceful environment where they can relax and calm themselves.

### **Conclusion**

As one of the protective factors for families, positive nurturing and attachment can help lead the way for healthy, strong families. Visitation monitors can share the information in this Epress with parents and encourage parents to develop their skills in nurturing and attachment during visitation. These minimal tasks can help families in building their protective factors in the face of stress and violence.

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# What Does Poverty Look Like?

By Caroline Johnson

## Introduction

There are currently 46.7 million people living in poverty in the United States. With many misconceptions of what it means to live in poverty, it is important for supervised visitation providers to understand what it truly looks like to live in poverty. Monitors must also understand how families living in poverty may affect the supervised visitation process.

According to the United Nations, **income poverty** is when a family's income fails to meet a federally established threshold that differs across countries. For families in the United States, this threshold is dependent upon how many individuals live in a home. Each year, the U.S. census bureau estimates the poverty threshold for various family sizes. This estimate does not include taxes, capital gains, or non-cash benefits (public housing, Medicaid, food stamps). For a family living in poverty, the effects are different for both the children and the parents. Supervised visitation providers are sure to encounter families living in poverty, which is why it is important to understand how poverty affects families in visitation.

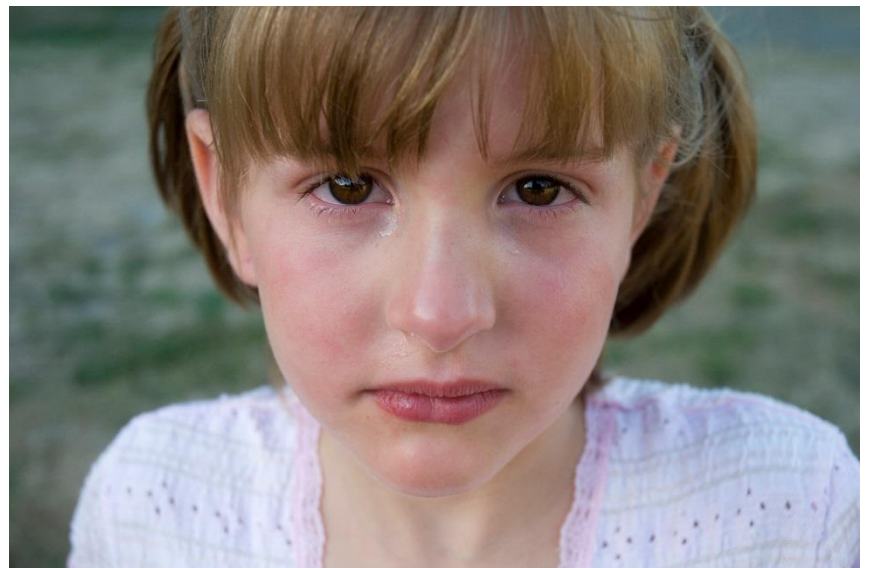
## Objectives

This E-press will present research and information about poverty. Monitors should use this information to develop an understanding of poverty and its effects on families in supervised visitation. This E-press will help monitors:

- Understand what the definition of poverty is as well as what it looks like for families
- Understand several misconceptions on poverty
- Learn about how as a supervised visitation provider, poverty affects both children and parents

## Misconceptions of Poverty

In today's society, there are many myths about poverty and these myths cause stigma, bias, and misunderstanding of those experiencing poverty. It is vital for supervised visitation providers to understand the myths that exist and how to



move towards understanding. Below are common myths about poverty. Information is provided to dispel those myths and encourage understanding.

1. **Those living in poverty are lazy.** Many believe that individuals could get out of poverty if they just worked harder. However research shows that many of those living in poverty were caused to be there for many other factors other than their work ethic. These other factors include unemployment, physical or mental disability, or familial problems. According to UC Berkeley Center for Labor Research and Education, 73% of those who receive benefits from government assistance live in a family where one adult earns money for the household. Parents can become overwhelmed by the lack of resources such as a working car, medical care, child care, and safe housing.
2. **Families are okay if they are not “officially” poor by government standards.** The truth is that the federal poverty line and poverty itself are different. Many would agree that living off of \$25,000 for a family of four would be difficult, however this amount is considered to be above the poverty line. Poverty is more than just how life is below the poverty line. Poverty includes many factors such as dealing with financial stress and burden.
3. **Families can live easily when receiving welfare.** On average the Supplemental Nutrition Assistance Program (SNAP) allots for \$1.50 per meal for one person monthly. In the United States, living off \$4.50 per day for all food expenses is difficult. Temporary Assistance for Needy Families (TANF), commonly known as welfare, has a limit of 5 years for an individual’s lifetime. The goal of welfare is to help families who are in need so that they may eventually support themselves.



## Defining Poverty

There are multiple definitions of poverty. The UN provides three different definitions for poverty; **absolute poverty, relative poverty, and extreme poverty.**

- Absolute poverty is a measure of poverty in relation to the amount of money necessary to meet basic needs such as shelter, food, and clothing.
- Relative poverty is poverty in relation to the economic status of other members of society: people are living in poverty if they fall below the standards of living in a certain community.
- Extreme poverty is defined as living off \$1 or less per day.

2015 Poverty guidelines for the 48 contiguous states and the D.C. area:

Persons In Family/Household	Poverty Guideline
1	\$11,770
2	\$15,930
3	\$20,090
4	\$24,250
5	\$28,410
6	\$32,570
7	\$36,730
8	\$40,890

For Families with more than 8 people, add \$4,160 for each additional person.

### What to Know as a Supervised Visitation Provider

Supervised visitation providers are constantly in contact with families who are all facing different battles. Research shows that children living in poverty are at more risk for maltreatment, showing that providers will likely interact with a family who is currently living in poverty. Supervised visitation providers need to understand what it looks like for a family to be experiencing poverty and what implications poverty may have on their services.



Children under 18 years represent 23 percent of the population, but they comprise 33 percent of all people in poverty. Among all children, 44 percent live in low-income families and approximately one in every five (22 percent) live in poor families” (NCCP, 2014).

## During a supervised visitation a child might:

- Complain about hunger because he or she has not had anything to eat. Providers should consider having healthy snacks available. In addition, be able to connect families to resources such as SNAP.
- Talk about being tired and how his or her family takes the bus everywhere.
- Compare themselves to their peers at school. For example, how other kids at school have cell phones, cars, nice clothes, nice houses, etc.

**It is important to remember as a supervised visitation provider to be aware of the child's potential for being neglected. As mandated reporters, monitors must always keep safety in mind.**

## During a supervised visitation a parent might:

- Be late to the scheduled visitation time due to transportation difficulties.
- Discuss their financial troubles and appear overwhelmed.
- Be disengaged or distracted during visits due to the stress of his or her financial situation.
- Use punishment in severe or unproductive ways. “Economic hardship experienced by lower-class families is associated with anxiety, depression, and irritability. With those qualities may come a tendency on the part of parents to be punitive, inconsistent, authoritarian, and generally nonsupportive of their children. The strain of poverty may also promote the use of disciplinary approaches that take less time and effort than approaches such as reasoning and negotiating. Spanking and forms of physical punishment are quick; they may relieve frustration and they don't demand much thinking in the midst of multiple worries and stress.”  
**Supervised visitation providers can offer parents ways to manage their own emotions and suggest alternatives to physical punishment.**

A third of all families headed by single women were in poverty last year – approximately 15.6 million households.



## Conclusion and Resources

It can be difficult to see poverty clearly and this is why it is crucial for social service providers to have an understanding of what it actually means to be poor. Social Service providers can provide resources to those who are experiencing poverty to try and lessen the financial stress with some families. By recognizing signs of poverty, social services can maximize their efforts to help families who are affected and strengthen the supervised visitation process.

### Help Connect Families to Resources

- **Use the guide created by the Clearinghouse to connect families to resources: [http://familyvio.csw.fsu.edu/wp-content/uploads/2014/09/SIP\\_Replication\\_Plan.pdf](http://familyvio.csw.fsu.edu/wp-content/uploads/2014/09/SIP_Replication_Plan.pdf)**
- Most areas in Florida can use the 211 helpline to identify resources for families.
- Caseworkers are well informed about resources in the community. Ask them for help in dependency cases.
- Child support is an essential resource. Help parents get child support from noncustodial parents by connecting them to the local child support office.
- Look for low-cost or free Community Center activities and/or support groups - they often have drop-in programs for kids
  
- Explore different faith-based resources in and around your community - many of them offer helpful programs throughout the year (free medical clinics, Christmas baskets)
  
- [Freecycle](#) and other sites exist to keep things out of landfills. Ride the environmental movement & find free stuff.

<http://www.bandbacktogether.com/poverty-economic-struggles-hardship-resources/>

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