



Hundreds of vulnerable children losing permanent caregivers

Hamilton Spectator

Hamilton's foster children will be taught an important lesson about adults next month.

The Children's Aid Society of Hamilton is being forced to shut down its innovative Family Medicine Clinic. And that means 600 of the most vulnerable children in our city will lose the kind of consistent, effective, high quality health care they depend on to thrive.

Ontario's Ministry of Children and Youth Services, which administers child welfare, has slashed the Children's Aid Society of Hamilton's budget by nearly \$5 million over the next three years. Among the programs the agency must cut is the Family Medicine Clinic.

For the past five years, my colleagues — a small team of family physicians, dentists, health aides and family practice residents — and I have been building a successful program to bring a special health service to foster children in the care of the CAS of Hamilton. ▶

Why a specialized clinic? Because vulnerable children have complex health needs that will never be adequately met by the usual kinds of services available in our city. These kids need the same person to co-ordinate their care, follow them as they grow, be ready to take them on for the long term.

The reality is that Hamilton's family physicians have full practices. Few are prepared to take on new patients, and even fewer are willing to care for foster kids with complex and never-ending health problems.

Before the CAS Family Medicine Clinic came along, case workers and foster parents had to scour the city whenever a foster child needed health care, ending up wherever it was available — and it was seldom the best place. Immunizations were administered in emergency departments. Prescriptions were renewed in busy walk-in clinics. The close, consistent followup care these children needed was rarely available.

Even worse, the kind of time-consuming, careful medical help needed to treat these kids' most persistent medical issues was hardly ever at hand. For most kids, medical help to stop smoking, treat drug addiction or diagnose mental illnesses simply wasn't available.

And then the CAS Family Medicine Clinic opened.

Our first successful work was on immunizations, gradually bringing kids' shots up to Canadian standards. We began gathering together each child's medical record, which for some children formed the only record of their life story. Finally, we worked on understanding the health problems, becoming the family physicians who looked after teen pregnancies, prescribed and reviewed effective medications and asked the kind of tough questions needed to bring together the right treatment for mental illness or alcohol addiction or drug abuse.

Babies stopped having to go to a different walk-in clinic physician for every checkup. Two-year-olds who couldn't speak started to get co-ordinated services from specialists. Young women who never had anyone to ask about birth control suddenly had the help they desperately needed.

As a bonus, the clinic took on the training of new doctors from McMaster, encouraging the next generation of physicians to look after the health needs of foster kids.

For the children, the clinic became one of the only places to go where the same doctors — time and again — were there to listen, to believe, to show an interest in their problems. This was their clinic. We were their doctors.

Giving these children permanent caregivers might have been the clinic's biggest success of all.

Most of these children and young adults come from disrupted families, where fathers are nonexistent and where mothers try to be good parents but struggle with illness or the results of poor decisions or just to make ends meet: not the best adult models.

The kids end up in foster homes. But foster homes and foster parents change often. Many kids the CAS cares for will live in six to 10 foster homes before they turn 18. That means lasting relationships are interrupted by moves to a new house in a

new neighbourhood, with a new school, new friends and a new set of parents.

And kids have to do it all alone. Some say they don't bother unpacking their backpacks because before they know it, they'll be moving on.

But they knew they never had to move on from the CAS Family Medicine Clinic because we said we would always be there for them.

But not any more. At the end of June, their clinic will close, their doctors will move on and grown-ups will have let these kids down once again. Another disappointment, another broken promise.

A child might think that no adult really cares.

And who could blame her.

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