

Beneficiary and victim of the system: Sick child, no support ... but hope



Rasheena Phinisee empties her 20-month-old daughter Assiah's bile bag, a remnant of her liver transplant and subsequent surgeries.

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RASHEENA PHINISEE had come so far - from living under the care of the city child-welfare system to becoming an independent and strong-minded person - and now her world was crumbling around her.

"My life is not what I thought it would be," she said. "All of this just fell on me. My whole world fell apart."

When she was growing up, Phinisee, 24, spent time in the custody of the city Department of Human Services. She eventually managed to live on her own, enroll at Temple University and work successfully in various internships.

But her life began spiraling downhill after her baby was diagnosed with liver problems, and had to undergo a liver transplant last year.

This is an example of a single mother who had grown up under the child-welfare system, but no longer has the support of that system or of her own family.

Without some kind of support, Phinisee will likely continue facing obstacles even though she has been trying to succeed on her own.

Joan L. Benso, president and chief executive officer of Pennsylvania Partnerships for Children, a statewide child-advocacy group, said, "This is sort of a classic story, that she's aged out [of the DHS system] and she has nowhere to go. Her struggles would be monumental for any 24-year-old."

In Phinisee's case, without a traditional nuclear family to lean on for support, "she's alone," Benso said.

Chuck Williams, an assistant clinical professor at Drexel University's School of Education, can relate to Phinisee's situation. He lived part of his childhood in the DHS system, and then aged out without being adopted.

"You try to muddle your way through this life," Williams said. "We all do to try to make sense of it. You're trying to deal with it emotionally."

But with young adults who have been in the child-welfare system, there's the added challenge of having come from a background that involved some sort of abuse, he said.

At a point when Phinisee's still transitioning to adulthood, "people don't see you as a child anymore," Williams said. "They see you as an adult. That creates pressure on anyone. . . . You face all these challenges on your own."

Williams said he thinks that young adults like Phinisee would be well served if they had some kind of mentor in their lives.

Trying to stay afloat

Phinisee quit Temple to take care of her daughter Assiah, now 20 months old. She stopped working at her latest internship. She has had to take Assiah in and out of hospitals. Her bills have been piling up to the point where she almost faced homelessness. It seems as if "no one cares," she said in a recent interview in her Wynnefield apartment.

At age 13, Phinisee was taken into DHS care after allegations that a family member had sexually molested her. She lived in various group homes, then returned to her family when she was 16, but ran away, she said. She re-entered the DHS system when she was 17. After staying in a residential facility, she then lived on her own in a supervised independent living program until she was 21, when she was released from DHS care.

Phinisee said that Assiah's father ended their relationship after she got pregnant.

Richard Gelles, dean of the University of Pennsylvania School of Social Policy and Practice, said he realizes that some people will say that Phinisee "had no reason to go out there and get pregnant."

But, he said, the "hard thing for young women like this is they do get pregnant when they're young. It's a sign in our society of being an adult." He said that the community should care about Phinisee because she was raised in the DHS system and, so, she "is the people's child."

Young adults who come out of the child-welfare system face a "significantly higher" risk of becoming homeless and of ending up on welfare, Gelles said.

Assiah underwent a liver transplant in July. She recently was hospitalized for three weeks because her bile ducts were obstructed. Each morning, Phinisee wakes up at 4 a.m. to give her baby medication, which she continues throughout the day.

Assiah has a tube coming out of her abdomen to drain the bile from her liver into an external drainage bag. Her mother has to empty the bile bag six to 10 times a day and has to flush the drainage tube with saline solution twice a week.

Phinisee and her lawyer, Gil Spencer, contend that Assiah's liver problems - and the need for her transplant - stemmed from the mother's having been prescribed an antibiotic, Macrobid, while she was breast-feeding 6-day-old Assiah in May 2008.

Spencer has filed a claim for damages with the U.S. Department of Health and Human Services on behalf of Phinisee and her baby. The community clinic where Phinisee went, the Family Practice and Counseling Network, in Southwest Philadelphia, receives federal funds, and any malpractice claims would be handled by the U.S. government.

Phinisee has the option to file a federal lawsuit if the claim is denied or not acted upon in six months, which have already passed.

Patty Hartman, spokeswoman for the U.S. Attorney's Office, which would defend the clinic in a possible lawsuit, said recently that her office doesn't "comment on pending litigation."

Phinisee received monetary support from one of the group homes she had lived in when she was under DHS care. The home, in Berks County, had helped pay part of her \$825-per-month rent when she was enrolled at Temple. But when she had to quit classes to take care of Assiah, the money stopped.

Phinisee also quit an internship at Radio One Philadelphia when her daughter's health went downhill. Renard Odrick Jr., promotions coordinator at Radio One, described Phinisee as "a person with a very strong will," and as a "very dedicated mother."

He said that when she worked there, she helped deliver presentations, and was very professional.

"Every time we asked her to do a task, it was always done not on time, but *before* time," he said.

Phinisee receives \$675 a month from Social Security disability benefits for Assiah, but wonders how they will survive on that. She had to apply for food stamps, and also gets \$27 a month of supplemental income from the state welfare system. Medicaid pays for Assiah's medical care.

KenCrest, a private human-services agency, has been helping Phinisee because of her baby's developmental issues. Kim Prendergast, the social worker assigned to Assiah, has gotten to know Phinisee fairly well and has helped put her in touch with a social-services center that is expected to help Phinisee pay her back rent.

"She's just a very compelling, engaging young woman," Prendergast said of Phinisee. "She's just been through so much. She's so resilient. Whatever resource I give her, she follows up right away."

"She's a great mom, too, with a very sick baby."

With all of the hardships in her life, Phinisee still tries to stay positive.

"I just try to remain hopeful that things will eventually change," she said. "I just try to keep myself in that state of mind. That there are people out there who are willing to help."