

Meet our Mid-Valley: Chemawa junior Kayla Monte sets sights on college

Natalie Pate

Salem Statesman Journal
USA TODAY NETWORK

This is part of a weekly series introducing readers to individuals who are passionate about our Mid-Valley community.

Kayla Monte found out about the national Lakhani Scholars program only two days before the deadline to apply.

The nonprofit offers \$10,000 worth of college coaching and test prep to "high-achieving, low-income students." Monte knew winning could mean the difference between finding and attending her dream college or not.

Monte — a junior this coming year at Chemawa Indian School in Salem — has dreams of becoming an architect. To get there, she has her sights set on Harvard, Yale or the Massachusetts Institute of Technology.

With the help of an encouraging teacher, Monte completed the application. She was selected as one of three winners across the country and became the first Native American recipient in the program's history.

"When I go to school, I'm going to ask my advisor to give me the hardest classes," the 17-year-old told the Statesman Journal. Her Lakhani coach and she have talked about ways to make her college application stand out; Monte wants to show she took honors classes in every subject.

Monte has attended Chemawa for the past two years. She opted to enroll since both her older brothers attended before her, and she said it felt like a great opportunity "to learn about my culture and other tribes and their traditions."

Though online learning during the pandemic was stressful for many, Monte said it was relaxing for her to set her own schedule. Still, she's excited to be back on campus this fall.

Monte finds buildings and houses — and learning how they're structured — fascinating. She also has aspirations to provide stable, affordable housing to reservation communities across the United States.

Describing herself as a "one-person band," Monte's creativity stretches beyond her dreams of designing commercial or residential properties or working as an interior designer.

"My family is obsessed with music," she said.

Monte herself plays the guitar, bass and drums. In band, she also learned how to play instruments like the timpani and xylophone.

"My mom used to do piano and my father got me on the drums when I was, like, eight or nine," she said. "Ever since then, I've just loved music."

Monte is from Arizona, a member of the Tohono O'odham Nation. She also has connections with the Navajo and Hopi tribes. When word got out she was the first Native Lakhani Scholar, she said "it went viral on Facebook (in) the Native community."

She was surprised by the reaction, but said, "It feels like an honor to represent our culture and how we are just as capable as everybody else in this world."

If you have an idea for someone we should profile for this series, please email Statesman Journal senior news editor Alia Beard Rau at arau@gannett.com.

Contact reporter **Natalie Pate** at npate@statesmanjournal.com, 503-399-6745, [Twitter @NataliePateGwin](https://twitter.com/NataliePateGwin), or [Facebook at www.facebook.com/nataliepatejournalist](https://www.facebook.com/nataliepatejournalist).



Kayla Monte poses for a portrait at Trailside Point Park in Phoenix on Aug. 1, 2021. She attends Chemawa Indian School in Salem. JOSEPH COOKE/THE REPUBLIC

We opened our home to 110 kids in crisis

Alan Gustafson

Special to Salem Statesman Journal
USA TODAY NETWORK

Six years ago, the first crisis respite kid showed up about 11 p.m. at the door of our West Salem home. We were anxious and apprehensive.

Dressed in hospital scrubs, a 16-year-old girl, delivered by Salem's Psychiatric Crisis Center, greeted me and my wife, Nancy, with a bracing question: "You aren't going to hurt me are you?"

Sara walked cautiously into our living room and nestled on a sofa, clutching a blanket. We tried to ease her fear, describing our home as a safe, short-term refuge — part of a new program designed to give kids a break from whatever is getting them down.

Sara listened politely, then shared a little about herself. She hinted at abuse and turmoil causing her to consider suicide. It was almost midnight when we showed her to her room and said good-night.

Sara, a fictitious name used to protect privacy, stayed for a week, quickly settling into a routine revolved around eating, naps and TV. She reluctantly agreed to take part in a Zumba class and Salem Library outing as well.

Occasionally, she asked to be taken for a drive in the country. She would crack a window to let in the warm spring air, then close her eyes and fall asleep. In snippets of conversation, she told us she had been sexually abused and described lingering effects of emotional anguish and confusion, saying she often felt "dead inside."

We offered encouragement, using the limited tools we had to counteract her despair. We hoped a period of sheltered calm would ease her pain, at least temporarily.

Within days, we saw that stabilizing effect take hold. Sara became less agitated. Her mood and demeanor brightened at times. On the surface at least, she made progress.

We said our goodbyes when a CA, short for crisis associate, picked her up and took her back to the Psychiatric Crisis Center. There, she met with a caseworker and family members before going back to her home.

After Sara left, Nancy and I breathed a sigh of relief. We had worried about what we were getting ourselves into. Now, with the first placement behind us, we thought, "Ok, maybe this crisis respite job might be doable."

Since that first placement in 2015, we have taken in 109 more kids through this innovative program administered by Marion County Mental Health. But our work as paid crisis care providers -- \$2,000 a month, plus \$100 per night for each stay -- is winding down.

As grandparents in our mid-60s, we are planning for retirement, travel and new experiences. We look forward to passing the respite baton to replacement providers this summer.

Raising awareness about the little-known program partly explains why I wrote this essay, soliciting Nancy's input and advice along the way. It's aimed at providing a candid look at the ups and downs we have experienced on our journey.

We believe in the program because we often see tangible results.

Kids who arrive in crisis have been rocked by sexual abuse, family chaos, bullying, suicidal thoughts and other torments. They tend to be scared, shaken, fragile, confused and hopeless. But in many cases, they stabilize rapidly.

Some start to see glimmers of hope. Some get hooked up to counseling, therapy and other support systems, bolstering their prospects.

Taking stock

As we near our stopping point, it seems fitting to take stock of the experience and answer some salient questions. Did we provide a useful service? Was it a good experience for us? Would we recommend it to others?

Our review highlights a mixed bag.

On the plus side, playing a part in something larger than ourselves is rewarding. And while kids placed with us tend to have similar diagnoses and issues, it's uplifting to see the distinct nature of each personality emerge.

We benefit from the "honeymoon effect," as kids tend to be well-behaved during short stays. We appreciate the breaks between those stays so we can recharge, spend time with our three adult children and three grandchildren, and handle other work duties.

We receive financial compensation that exceeds the usual rates for foster care and therapeutic foster care, both of which we've done in the past.

Serving as foster parents and respite providers also sets a good example for our children and grandchildren.

Finally, we have leaned on each other during placements, drawing us closer. Our shared experience will always be etched into our marriage, memories and legacy.

However:

We've learned a lot about the devastating toll trauma takes on kids. We've seen firsthand how it shatters lives.

Being available 24/7 means living with uncertainty, apprehension and schedule changes. We never know when



Crisis care providers Alan and Nancy Gustafson pose for a portrait at their home on Aug. 14, in West Salem. ABIGAIL DOLLINS/STATESMAN JOURNAL

How to help

Oregon's toll-free child abuse hotline is 1-855-503-7233. Callers can report abuse of any child 24 hours a day, seven days a week.

Child protection workers respond to reports of child abuse and neglect. If a child cannot be safe at home, a foster care placement is made.

The state Department of Human Services has a certification process that all applicants must go through to be approved as foster parents.

For more information about foster parenting or adoption, call 1-800-331-0503.

a placement call might occur. We've taken kids at Thanksgiving, Christmas and the day my dad died.

We sometimes become frustrated with lack of information about an incoming child's background, behavioral issues and mental health.

We deal with emotional strain and recurring worry about keeping kids safe. Sometimes, we wonder about personal liability. Thankfully, no disasters have occurred on our watch.

When kids leave, we feel a bittersweet mix of relief, satisfaction and loss. We often wonder how they are faring, but there are no follow-up reports available, which leaves a nagging void.

Opting for diversion

The pathway to our house is lined with harrowing traumas.

Typically, kids get sent to us after cutting themselves, overdosing, threatening or attempting suicide, and winding up at the Salem Hospital Emergency Room.

Kids are referred to the Psychiatric Crisis Center for screening, and, if deemed appropriate, placement in our home. In all cases, access to the program is offered as a voluntary option for youths and their parents or guardians.

The shift from hospital to home is known as Emergency Department diversion. These diversions provide a two-fold purpose: free up hospital emergency beds and shift kids to a home atmosphere for spells of rest, recovery and renewal.

From the start, we have been adamant about not accepting kids with histories of sexual offenses or violent attacks, in part because our grandchildren are frequent visitors. We also have a friendly black lab, so we don't take kids who've abused animals.

We've turned down placements we didn't think were appropriate for a home without security cameras, locked windows and alarm systems. Thankfully, we've never been hit, kicked or otherwise harmed, nor have our grandkids and dog.

Verbal outbursts have been rare. Much of the emotional venting has come from kids who were upset, some sobbing, because they missed their loved ones. A few kids have pleaded or demanded to go home, persuading us to pull the plug.

Length of stays have ranged from one night to 26. Two or three nights is typical. Most of our guests have been teenagers, but we've had visitors as young as 5.

Most kids take prescribed psychiatric medications. We follow bottle-label directions in dispensing the meds at the right times in the right doses.

Some kids have attended school during their stays, others have not due to suspension, expulsion or dropout.

Coming up with things for them to do can be a task, more so during the pandemic. We often go out to parks and playgrounds. Before COVID, we also routinely took kids to a theater, library, museum or athletic event.

Though most kids soon go back to their own homes, some take a different route, moving from respite care to residential treatment facilities such as the Children's Farm Home in Corvallis or Albertina Kerr's Crisis Psychiatric Care program in Portland. However, secure beds are hard to come by, so some youths have had stays extended while they waited.

Overcoming despair

At times, we've struggled to handle emotional outbursts and public meltdowns. Other times, we have been buoyed by our charges' resilience, cooperation and smiles.

We have seen hope flourish among youths yearning for fresh starts amid bleak circumstances. Here is a small sampling, gleaned from notes taken during each placement, with names changed to protect privacy:

Lily's story

Lilly, 17, arrived with suicidal thoughts and recent history of cutting herself. She was withdrawn, depressed, almost mute. Seeming disoriented, she hid behind her hair, which she kept in front of her face.

Lilly remained quiet and shy, but eventually opened up about her family history and despair. She had never attended school, had no friends except a man she met on the Internet, felt trapped because she had to babysit relatives all day in unsanitary conditions and viewed herself as totally inadequate in most aspects of daily life.

We provided Lilly with numerous activities. She enjoyed doing new things, including picking blueberries, petting animals at Friends of Felines, checking out books at Salem Library, visiting antique shops and a comic book store, touring the Hallie Ford Museum and browsing at The Fussy Duck gift shop. We also took her to get her hair cut, which made her smile.

Lilly took pride in her drawing, saying that she hoped to become a cartoonist. She beamed at our compliments. When Lilly left, she gave us big hugs and said she wanted to stay in touch.

Less than a month later, Lilly returned for a second stay after another blowup at home triggered a suicide threat. Upon arrival, she was even quieter and more subdued than during her previous stay.

On the day scheduled for her to go home, Lilly broke down in tears, telling us she dreaded a resumption of unbearable routines. We encouraged her to open up during talks with her counselor and family members and advocate for desired changes. She vowed to try.

Eva's story

Eva, 16, described detailed conflicts that resulted in multiple hospitalizations for suicidal thoughts and behavior.

Vigilant monitoring was part of the daily routine with her, as she was often negligent about her diabetes care. She said it was "because I don't care if I live."

Our deep concerns about Eva's diabetes care lingered throughout her several-weeks stay. We constantly worried about her health and safety.

Late one night, we learned she had gone out her bedroom window onto the roof. She provided no explanation, but we later found cigarette butts on the ground.

In a positive development, Eva told us that she liked to read because it eased her anxiety and took her mind off negative thoughts. We took her to Salem Library several times and she spent many hours reading books she selected.

Our final activities with Eva included a family get-together for Christmas and a visit to the Riverfront Carousel with our daughter and grandchildren. Eva was upbeat during these outings. We told her that it was nice to see her smile and praised her for going home with a positive attitude.

A 5-year-old

Kari, 5, came to our home for a stay aimed at "stabilizing aggressive behaviors."

We quickly learned she required constant supervision, as she tended to wander off in fearless fashion. She also had a habit of approaching strangers with a simple question: "Do you want to be my friend?"

Kari is strong-willed and full of energy. During a trip to Riverfront Park, she roamed around at a fast pace on a hot day, conducting her own kind of meet-and-greet adventure.

"Can I hold your baby?" she asked one couple. She later attached herself to another couple with two children in tow, checking out their bicycles and honking the horns as they tried to leave. Then she ran to the water-spray fountains, biting at the spray and chatting up everyone who came into her orbit.

While Kari's friendly behavior was endearing, it could also be worrisome and draining. Keeping tabs on her wasn't easy, as she honored no boundaries.

Alan Gustafson is a former Statesman Journal reporter.