

#### Family D.V.



I have been a foster parent for 15 years. Our family currently cares for five children.

Girls L. (8) and L. (7) are sisters from the same family. L. has completed the 2nd grade of elementary school with good academic performance. She has a medical condition—generalized epilepsy—and attends an adapted school program in all subjects. She is quite disobedient and headstrong, and it's difficult to motivate her positively. She often cries, is very nervous, and

Her younger sister L. has completed the 1st grade of elementary school with very good results. She likely will also follow an adapted educational program. She is healthy, has a good appetite, and is cheerful and optimistic by nature. She is obedient both at school and at home, and gets along well with other children. Their parents have mental disorders, and the girls were removed from their care due to severe neglect. They see their parents once a month in person, and speak by phone every Saturday.

**S. (13)** is a boy taken from his mother due to neglect and her prison sentence. He successfully completed the 6th grade of elementary school with good grades. He behaves excellently both at school and at home. Although of small physical stature, he is healthy both physically and mentally. S. plays soccer and is very successful; he enjoys practice and often goes to matches. He has no contact with his parents.

**B. (8)** has been with us since he was a baby. His parents left him in the hospital at birth and signed papers relinquishing him, and we adopted him in 2021. He is very ill—has had four heart surgeries and has twelve diagnoses. He is very thin, small, and eats poorly. Because of his health issues, he is quite spoiled: he immediately cries when he does not get what he wants. This summer he completed the 2nd grade of elementary school with very good results. At school he misbehaves and is often in conflict with others, although his behavior this year is better than before.

**M. (18)** came to us 7 months ago after his father threw him out, claiming he was not his son. He is a good, obedient, responsible, and tidy young man of average height with a healthy teenage appetite. He finished vocational high school for carpentry with good success. He was obedient in school but not fond of studying. We are now helping him find a job and encouraging him to gradually become independent. He is still with us.

#### Family Ž. H.

We care also for two brothers, S. (11) and S. (12). Their father went to prison and their mother remarried. When they arrived, they were severely neglected—they didn't know Croatian, had no hygiene habits, and were very thin and small for their age. They have been with us for 5 years, and have since adopted personal hygiene habits, learned Croatian well, and behave politely toward others.

The older brother is more developmentally advanced but also thinner than the younger. He completed the 5th grade of a special elementary school in the educational center with very good success, and is quite obedient in school. The younger brother underwent surgery 1½ years ago for hearing loss and received a hearing implant. Now he hears better, though during colds his hearing weakens again, but overall it is better than before. He is progressing well in school, finishing the 3rd grade of elementary school with very good success. His behavior in school is not always exemplary, and his teachers sometimes call us to discuss it.



Both brothers behave well at home, are diligent and obedient, and enjoy helping with household chores. Occasionally they are stubborn or get angry—that's normal for children their age. They train soccer, ride bikes, and attend junior firefighter courses. They have no contact with their parents.

#### Family M. O. .



**Boy Đ. (7)** has been with our family for 2 years. Before coming to our family, he spent two years in a children's home, which he struggled with. He was often sad when other children received visits, while he saw his mother or grandfather only once or twice a year. Due to frequent throat and ear infections, he often had to go to the children's hospital while living in the home; he had his tonsils removed, after which his

condition improved. When he arrived with us, we took him monthly for medical check-ups due to developmental delays. After two years, these visits have reduced to routine follow-ups because his health is progressing well. He trains judo and plays a lot of soccer, and over the past two years he has shown significant motor development. He worked actively with a speech therapist and in sensory integration to prepare for school. When he first came, his vocabulary was very limited and he did not form sentences. He has since made considerable progress: he now knows all the letters and can read and write a little. A psychologist recommended evaluation by a hospital team to determine his schooling format. A regular program with an individualized approach was recommended. Đ. is enrolled in kindergarten, and this autumn he will start the 1st grade. He still faces difficulties in communication, expression, accepting boundaries, and performing daily routines (teeth brushing, cleaning up, eating, playing, etc.) both at kindergarten and home. He loves company, guests, traveling, singing, and everything new and unexplored. He and our (8-year-old) son get along like "real brothers" (sometimes very well, playing together lovingly; other times they just argue and challenge each other). Both love soccer, trampoline jumping, and games. Đ. is no longer a sad boy—he now has a smile on his face all the time. He is very warm and caring towards others. The children in kindergarten like and accept him; he fights for belonging in his usual way, though sometimes inappropriately because he still struggles to express himself verbally and lacks patience—but progress is visible even there. He had prominent (protruding) ears that bothered him a lot, so he underwent surgery and correction this year. He did very well and is extremely satisfied with the result. He is very proud to now have ears like everyone else 😊—this has boosted his self-confidence. He looks forward to school, is motivated, and we believe he will continue to progress and be happy. Although his parents could have contact with him, his father does not call or visit, and the mother has come only three times. She usually sends a Saturday text asking how he is. The Social Welfare Center will initiate proceedings to terminate parental rights. Visits with his mother are not good for Đ.—he does not want them because they are rare and very brief. His mother cannot communicate well, and he is confused by the whole situation.

#### Foster mother K.P.

**R. (24)** is a law student. She visits her parents once a week in a Roma settlement. She is a warm, intelligent, caring, and hard-working young woman. She loves cooking and socializing. She has fully integrated into both the city environment and our family. She has a genetic knee problem and will likely need knee surgery.

**I. N. (9)** is a lovely young girl who suffered severe abuse in her birth family. She has many after-effects, including epilepsy. Currently, suitable medication is being sought; she may have up to 20 seizures a day. She completed first grade in



elementary school. She is very warm and affectionate. She adores her older sister, loves school, and especially loves music, the sea, and swimming. Her parents are in prison for abuse. Jako voli svoju stariju senu, voli školu i jako voli muziku. Voli more i kupanje. Roditelji u zatvoru zbog zlostavljanja.

#### Family D.



**S.** came into our family 18 months ago at about 9 months old. She is now 2½ years old. She began attending daycare (creche) and adapted very well—she accepted her group and caretakers quickly. She used to resist any change in caregivers and would cry, but in the past months she has grown secure and no longer resists. Every day when we pick her up from daycare, she lights up—she runs to hug us with a loud laugh. Her joy is so touching.

She is very clever - she absorbs everything around her. Her speech is advanced with a large vocabulary and clear expression for her age. She potty-trained quickly but is still very attached to her pacifier at bedtime, which we expect will be a challenge. Now that she's almost three, she shows a strong character and will. She's a little boss - when things don't go her way, she gets very angry, but after an initial tantrum she wants a hug and quickly calms down and cooperates.

She is social, loves children and people, and is open to everyone. Our older daughters adore her and are strongly attached. We all grow and learn together with her and cherish the blessing and joy she brings. She had contact with her mother only on her first birthday via a brief video call. Since then, her mother has not reached out. This year, my husband and I completed adoption training, and we are waiting to finalize her adoption. We are eagerly looking forward to the day she officially becomes a full member of our family.

#### Family M. N.

**L. (9)** is a boy who came to us through emergency procedure two years ago. He was removed from his family aged 3 due to violence by both parents. He spent some time in a children's home, then in two foster families. When he arrived, he was thin, resentful of the world, and extremely distrustful. I'll never forget our first meeting: I asked, "Can I give you a hug?" and he replied, "I don't know how to hug you, aunty." Now he is cheerful and friendly, loves hugs, learned to swim, trains soccer regularly, and is no longer thin—he has developed a nice, athletic build. When he arrived, he destroyed all the toys, broke two TVs, damaged a garage window, and in school he fought with other children and received reprimands. He completed third grade with very good results. At home, he is now



good, likes helping, loves the other foster children, and as the youngest, has become their favorite. He meets his parents separately under supervision at the social welfare center twice a month. His mother lives in Zagreb with her partner; his father has a new wife. They promise him many things but never fulfill them, so his relationship with them is very distrustful. He has told the social center he wants to stay with us. He loves family trips, especially going to visit "aunt Marina" in Mursko Središće.

**D. (15)** came to us two years ago from Ukraine. His mother brought him over to save him from the war, and then left him. He immediately wanted to become part of our family—many in his family were alcoholics, and the street had raised him. Although he was born by the sea, he didn't know how to swim until we taught him. He plays soccer and quickly learned Croatian. He completed first grade of high school with good results. His mother came a few times; we tried to help her get a job but she relapsed into drinking, lost the job, refused medical treatment, returned to Ukraine, and resumed drinking.

**K. (15)** and **D. (14)** are brothers who have been with us for 13 years. They were removed from their family due to neglect. Their father is unknown, and their mother frequently changed partners and neglected them. They had no contact with her before, but now she calls occasionally. Both finished 8th grade with very good results and enrolled in the first year of culinary vocational school with an adapted program. They have dyslexia and



short-term memory issues. Both train soccer and are very good; other clubs have already noticed D. They enjoy hanging out with friends and traveling.

**J. (13)** and **L. (16)** are sisters from a Roma family whose parental rights were removed; they have no contact with their parents. L. came to us at age 6, unable to speak or walk and with reduced intellectual abilities. She completed the first year of culinary high school with good success. She is an excellent athlete, well-behaved at home and school.

Her sister **J.** has a behavioral disorder. She has received reprimands at school and is close to expulsion. She attends all possible psychological support and psychiatric treatment. She was under evaluation for 21 days, and diagnosed with a severe disorder and intellectual disability. She is still with us because we cannot find a suitable institution for her. She completed 7th grade with good academic results but very poor behavior. Until recently she also trained soccer, but her coach dropped her due to her behavior.

#### Family M. P.



**S.** is a healthy, smart, cheerful, playful, and curious little boy aged 2½. He talks a lot and understands a lot. He sings many songs, especially church hymns by heart. He loves being outdoors, playing in the sand, and driving toy tractors. He enjoys riding a real, big tractor with his dad. He likes helping his dad feed animals and helping us in the garden. He is currently in a potty-training phase. He loves playing hide-and-seek with his younger brother **B.** **B.** is 20 months old and much calmer by nature than **S.** He loves being around people and enjoys all the attention—he is our little cuddle buddy. He prefers company to toys. When he plays, he favors plush toys and likes cuddling with them. **B.** is less active than his brother. According to professional assessment, **B.** is about two months delayed in development.

We take him for regular neurological check-ups every 3–4 months and are waiting for a speech therapy appointment. Raising these brothers is occasionally very intense because they are almost like twins—their ten-month age difference is hardly noticeable, and people often ask if they are twins. We are grateful to God that our church families support and help us so much, and that we can serve God by caring for these children.

#### Family V.B.

My wife and I adopted baby **J.** from a children's home when she was six months old. She is now 4½ years old and developing normally, with regular sessions with a developmental therapist, occupational therapist, and speech therapist. Her progress is evident with their ongoing support. She is enrolled in kindergarten with a personal assistant, trains judo twice weekly, and has adapted well to her environment. All these treatments help her manage her mild ADHD. She has integrated well into our family and feels safe. She has supervised contact with her biological parents once a week for 45 minutes. Following the latest court ruling, her parents have lost parental rights, and adoption proceedings will begin soon. We still don't have her identity card—it is with the biological parents, who refuse to release it—but we hope this will be resolved shortly.



### Obitelj J. G.



**Our L. has just turned 4 years old.** She came to our family directly from the maternity hospital when she was a month and a half old. Her parents were long-term drug addicts. Although she went through neonatal withdrawal after birth, thankfully it left no lasting effects. She is healthy, developing well, and thriving. She is playful—she loves dancing, riding her scooter and bicycle, going to the playground, and is especially fond of animals, particularly dogs.

She enjoys playing with play-dough and “helping” in the kitchen. She regularly attends preschool and socializes with her peers. She likes going to kindergarten, where she’s well accepted, plays, and learns songs. Our entire family has embraced her as if she were our own. We all love, cuddle, and care for her, and she returns that love wholeheartedly. A strong attachment has developed between us, and since her parents refuse to enter treatment, we hope to adopt her soon. We can’t imagine life without her anymore. She rarely sees her parents—dad hasn’t visited in two years, and mom visits only once every two months. After four years, all I can say is that foster parenting was one of the best decisions of our lives. When we started, many were skeptical because we already have our own children. But we made no mistake—our L. has enriched all our lives, bringing so much joy and love. It hasn’t always been easy, but we’ve certainly gained more than we’ve given.

### Family A. K.

**L. (18)** was fostered just before turning 5 years old. She is from a Roma family and has six younger siblings—she is the oldest. Her father spent most of his time in prison, and her mother lived in extremely poor social conditions—no electricity, no water, no sanitation. Among all the children, L. was in the worst health and was undernourished. After arriving in our family, she was diagnosed with a rare generalized lipodystrophy, which causes a



severe lack of body fat. As a result, she is very thin and requires a special diet, skincare treatments, regular check-ups, and daily injections. She completed the third grade of general high school with very good success. She adapted well into our foster family, although we still face challenging moments that we tackle together. She bonded with our younger daughters, and they enjoy playing together. She loves cooking, is thoughtful, intelligent, curious, fun, and a good friend. She has been playing tennis for six years and is very good at it. She has no contact with her birth parents.

### Udomiteljica A.



I, as a former foster parent of two children, help my former foster girl and her two children. **A.** is an 8-year-old boy, and **S.** is a 4½-year-old girl. A. attends school and S. goes to kindergarten. Both are playful—A. even more so. A. used to be quite restless and disobedient, but he has improved. He loves soccer, is enrolled in a club, and is very happy. I want to thank OAZA for all the help they provide throughout the year—it has greatly supported these children. Often his mother, M., had nothing, but thanks to OAZA’s help, we could cover her needs... sometimes for school food,

kindergarten fees, school supplies, clothes. A. is very active and often tears his pants at the knees, so with your help I was able to buy him several pairs. You've truly been a great blessing in our lives. Thank God first, and OAZA and the donors who opened their hearts to give.

Family M.H.



We are currently caring for seven children and young adults: **M.** is a three-year-old girl who entered our family at one year old with a severe rare genetic condition. We fed her via tube for a year. She now eats independently and is progressing well. With regular sessions at a speech therapist and the Early Intervention Center, she has begun to speak her first words. We maintain monthly contact with her biological parents and have very good relationships with them.

**L.** is a four-year-old girl who came to our family at age two. Despite mild intellectual difficulties and developmental delays, with regular early intervention support she is also progressing beautifully. We look forward to her upcoming adoption by our close and dear friends, which means we will remain in contact after she leaves our home.

**M. (13)** completed 6th grade with good success. We are very proud of him—when he arrived two years ago, he couldn't read. He has made great progress and is very attached to us and happy here. He has monthly contact with his parents and his sisters, who are in other foster families.

**S. (17)** completed the second year of vocational high school for hospitality with good success. Arriving in 5th grade with no ability to read, finishing second year is a major achievement. We hope he can successfully graduate after one more year. We've faced major challenges—shoplifting, lying, using my car without permission, drug issues—but step by step we are overcoming these problems. Graduating from high school would be a tremendous success. He has occasional contact with his father and a sister who is in another foster family.

**M. (19)** just graduated high school as a Road Transport Technician with very good success. He is the seventh child from that birth family to stay with us, and the fourth to graduate high school—a great accomplishment. He plans to complete driver's training and then seek stable employment. Until then, he lives with us. He keeps in touch with his older brothers and occasionally with his mother.

**M. (15)** has been with our family for only one year. However, since her sister E. (16) has been with us since early childhood and was adopted at age 9, M. used to come visit on weekends and holidays. That made her transition very easy. Both sisters completed primary school with good success and enrolled in vocational school to become caregivers. They both speak with their mother by phone and occasionally visit their father and siblings. They fit well into the family, are very sweet, and behave nicely toward the other children.

**N. (33)** is a young man with intellectual disability equivalent to a seven-year-old. We adopted him when he was five, and he is very attached to us. He still attends the Center for Education and Training, where he has many long-standing friends. His health condition is stable, and he does not take any medications. Since he cannot live independently, he has been granted lifelong guardianship.



**Family R. D.** L. (14) has been with us for six years and is fully adjusted. As a baby, she was abused and neglected by her father who was unable to care for her, so she entered foster care with us. She recently had knee surgery because one leg was 3 inches shorter than the other. She has intellectual challenges and attends an adapted school program. She finished 7th grade with very good success. L. is a quiet, reserved child, nevertheless functions well in our family. She sees her father occasionally when he visits for weekends from Germany.

V. (10) has been with us for two years. She was removed due to family addiction. When she arrived, she was not socialized, used to hit other children, and had difficulty adjusting to responsibilities, but today that has improved greatly. We have regular psychiatric visits, but otherwise she has no major health issues. She



doesn't like school, which makes her hard to motivate. She finished 4th grade with very good success. Every other weekend she visits her mother, but sometimes she refuses to go.

D. (5) has been with us since birth. He was initially fostered and adopted three years ago. His biological family was dangerous and frequently intoxicated. Because of prenatal substance exposure, D. now has health issues—primarily ADHD and difficulty with naming words. Emotional outbursts and inability to express wants lead to challenging behaviors. In kindergarten, he struggles with attention and peers, so we expect he will receive an assistant this autumn. As an adopted child, he has no contact with his birth parents.

Family D. A.



**Our N.** came to us two years ago. During that time, she has made progress in every area—physically, emotionally, and intellectually. Her heart is always ready to help and comfort her sister, parents, and friends. Her presence has brought our family much joy, playfulness, and cooperation. Inspired by this experience, my husband and I decided to consider further fostering. The Lord clearly called us, and unexpectedly OAZA granted us two houses in Opstje, which we've been renovating for months, demonstrating His faithfulness each day.

We're inviting volunteers, seeking donations, and organizing labor—and everything we need comes to us. These days and months have truly been a miracle. Each day, our N. and biological J. are with us at the houses, planning activities for the children who will arrive this summer. Thank you for every bit of help. The costs are enormous, the work is even more, but every effort is worth it for each child's life, because the kingdom of heaven is among us.

Family A. D.

The fostered girl D., aged 5, came to us from a home for neglected children. The social services removed her from her parents because they couldn't provide even the most basic living conditions. She was neglected and had motor difficulties. She recovered quickly with us and became a cheerful and happy child of normal build, who loves playing with her toys. Her father has relinquished parental



rights and supports her adoption, while her mother visits once a month despite the court ordering biweekly visits. The parental rights termination process is currently underway.

Family A.J.



**A. (12)** and her sister **A. (16)** have been in our family for over ten years. The younger sister came first in 2013 at just six months old. Removed by emergency order due to severe neglect and starvation that nearly killed her, she spent until age 3 in a special clinic to recover physically. However, the real challenges began at school because her fight for survival and her mother's alcoholism affected her emotional development. Specialists at the hospital confirmed she was behind 2–3 years emotionally. This affects her most in peer relationships at school. She completed 6th grade of a Czech elementary school with very good results. **A. (12)** and her sister **A. (16)** have been in our family for over ten years. The younger sister came first in 2013 at just six months old. Removed by

emergency order due to severe neglect and starvation that nearly killed her, she spent until age 3 in a special clinic to recover physically. However, the real challenges began at school because her fight for survival and her mother's alcoholism affected her emotional development. Specialists at the hospital confirmed she was behind 2–3 years emotionally. This affects her most in peer relationships at school. She completed 6th grade of a Czech elementary school with very good results. She doesn't like studying—our biggest challenge—but she wants to pursue agritourism and become a police officer. Currently, her great passion is cooking. She loves music, acting, sings beautifully, completed 3rd grade of violin in music school, and trains in karate.

Her older sister came through her mother's request in 2015, at age six. She was entering first grade with no knowledge of Croatian, so she worked hard to learn the language and basic hygiene/social skills—like toileting, handwashing, tidying up—and to respect the rules. She completed the second year of vocational high school for hotel-tourism technician with very good success. She loves drawing, socializing with peers, and music, and she is enrolled in high school music school for cello. She just finished first year of music school. She has a heart condition and is under regular supervision, avoiding strenuous activity. She has exemplary behavior at school. Both sisters test boundaries at home, but at the end of the day, we resolve everything. Here they have far more chances to succeed than if they had remained in their birth family. They have no contact with their parents except the older one occasionally talks to her mother by phone.

Family G.M.

Our family now includes five fostered children of Roma nationality. The oldest brother, **A.**, returned to his biological family after turning 18. He stayed nearly 3 years with us; his sister and brother remain here. Two months ago, he visited us several times, which made everyone happy. He completed the first year of high school with very good success. His main issue was school absences: while with us he had only 25 missed hours, but since leaving he's had 161 hours. His class teacher said his absences were excused last year, but they won't be tolerated next year. After returning to his birth family, he lives disorderly and has returned to old habits. His sister **A. (15)** has been with us for 3 years. She completed 7th grade in a special program and, although schoolwork is hard for her, she finished the year with excellent success. In her free time she reads books and retells them. She likes helping in the





kitchen, especially baking. Her relationships with other family members are good, though younger kids often irritate her. She loves to talk and frequently invents stories about school. At home, she behaves politely, but if she's upset she threatens to leave—then apologizes once calm. She has no contact with her parents, saying she doesn't want to see those who tried to sell her. She's often angry with her parents and the world.

Her younger sister **E. (13)** also completed 7th grade in a special program. They are in different classrooms now, which has helped, as they argue less without constant proximity. They often fight over friends and refuse to share. E. learned the material well and finished with excellent results. In physical education she often refused to participate and thus received a grade of 3. Near the end of the year we discovered she wasn't attending volleyball—though she was equipped for it on Tuesdays—choosing instead to remain outside. She helps with housework, especially in the kitchen. She and the younger members sometimes clash physically—she might hit her brother—but then retreats to a quiet corner for her “time-out”. She has no contact with her parents due to a restraining order—unlike her sister, she says she loves her parents and would like to see them and return home.

Their younger brother **A. (8)** has been with us for 3½ years. He is cheerful and very bright, talkative though his mood swings often, crying and exaggerating when upset—crying is his defense. He finished 1st grade in regular program with excellent performance—straight A's. We are very happy! He gets along well with sisters and cousin; they tease each other both physically and verbally but make up quickly when unsupervised. He has no contact with his sexual parents due to court restriction, but he hopes to return home. Recently an uncle met him after school and called his parents via video—he spoke with his mother, who told him they'd soon return home and asked him to say he wanted to go home if asked by the Center. He was very sensitive and tearful after that. He loves cuddling and playing with cars and robots.

**B. (9)** has progressed significantly in the past year with us. At the beginning of the school year he couldn't read or write—he scored only 3 points in Croatian at the initial test. Now he finished 2nd grade in regular program with very good success. We encourage him to work hard—though he often lacks ambition, he enjoys successfully completing tasks. He used to think he didn't need to memorize multiplication tables, but now he does very well with regular practice and no longer complains. He enjoys school more now, though at first he didn't understand why he had to go every day. He reacts strongly if he loses a game or feels injustice—stomps and screams—but now this happens less often. He eats more and has gained weight. The court approved supervised visits with his parents once weekly for an hour, but they often miss them, citing appointments or doctor's visits. In the meantime, his mother gave birth to an eighth child, who was immediately fostered after birth. Recently in a video call, his parents showed the children they rented an apartment and said they would all return home. B. is happy about that.

Her brother **L. (7)** will start school this autumn. He attended preschool and loved interacting with new friends; now he can hardly wait for school. At enrollment, everyone praised his knowledge. The doctor even showed me his self-portrait from last year—it was just scribbles, not even a limb, clearly not ready for school. This time he drew himself extremely well with every detail. He was happy—and so were we. We worked with him every morning while other children were at school and saw progress that is now obvious to everyone. His drawing, writing, and reading are age-appropriate. He is physically active and talented in sports, and he enjoys playing and socializing. Occasionally he physically fights with his sister or cousin, after which he has “thinking time” in a quiet corner, but that happens less now. He enjoys visiting his parents and asks if they will come; he was happy when they showed him over video call their rented house and asked to see his room.

The children's parents in both families are related. They asked whether the children are being held back a grade, showing their level of thought, while we strive for children to achieve their best and master the material. We thank Jesus for the strength and joy in this calling and everyone who helps foster families in any way.

### Family I.K.



**Our daughter S.**, age 20, came from a family with seven children, where the father spent his life in prison and the mother was illiterate and alcoholic. She lived under very harsh conditions—no water or toilet—in a tiny room. She was almost 7 when she arrived, just in time to start school, knowing no Croatian and with severe developmental delays. Through much effort, discipline, and sacrifice, she has mastered Croatian. She is a wonderful, joyful, positive young woman. This year, she successfully completed her first year of Teacher Education with strong responsibility and discipline.

Driven by her great wish to work with young children, she has enrolled this academic year in Early and Preschool Education studies. In her free time she practices guitar, sings, and loves entertaining others. She plays drums (cajón) in the church group. She is attentive, gentle, and compassionate. Sara feels at home in our family—it is the only family she knows. She rarely contacts her birth family, usually only calling two sisters in another foster family. Her parents have never reached out.

### Family M.S.

**We send warm summer greetings from the suburbs**, where we live with our three beautiful, God-given children who enjoy daily swimming in our pool in front of the house, surrounded by the scents of fruit and vegetables growing nearby, from which they choose what and when they'd like to eat. They are well-developed, advanced, and very active, each according to their age and interests. They joyfully welcomed the holidays, with more time together, lots of play, and rest. This summer, we will again spend time on an island, where the children, just like us, love spending time swimming, boating, and doing a bit of fishing. Each of them has their own small chores and responsibilities, which they usually take part in gladly.



They usually get along well, except when they want the same thing at the same time—then they have their own tactics for getting what they want, and of course, they complain when it doesn't work out.

They are very physically skilled—riding bikes, rollerskating, skating, swimming—from a young age. They're also musically gifted and have been involved in music from early childhood, exploring different instruments. They protect and support one another when needed, like real siblings.

Our eldest boy, **N. (10)**, is an excellent student, although he likes solving tasks in his own way. He attends music school and enjoys participating in all our family activities. **D. (7)**, the younger boy, often copies him, which is sometimes fun but can also be annoying to N. **Little sister B.J. (3)** observes and learns everything—both the good and the less good.

They are playful and joyful, often full of energy, which can be a bit much for us parents, so we're grateful to have a young and healthy grandma who helps us occasionally. On my husband's side, our extended family is quite large, so the children regularly experience a warm, big family environment with different age groups, closeness, and acceptance.

Our children are a great gift from God and came to us in the best possible way, at the perfect time. Thank you from the heart for everything you do for us, and we thank our good Lord for sending you to us.

Sending warm greetings and a big hug.



Foster mother Lj. G.



**I. (20)** is a young man of good physical build. He is generally healthy, considering he has mild intellectual disability and autism. He came to us at 2.5 years old from a hospital for children with special needs and has made excellent progress since. He now behaves well at home, has matured a lot, and is obedient. Previously, he had issues with certain people and would become impatient when things didn't go his way, but he has improved in this area. He often goes with me to visit my son, and we take care of my grandchildren together. He enjoys working on cars with my son **D.** He has completed the second year of a vocational training program in a special school with descriptive grades indicating partial or full achievement and can attend for one more year. He has learned uppercase letters and numbers, and on Thursdays during home economics, he enjoys cooking with others. He's good in physical education. At home, he knows how to load laundry, goes shopping using a list which he hands to the store clerk, and independently goes to get milk from a milk vending machine. His daily functioning is stable. He enjoys cycling and attends handball training. I believe that GOD will provide the right job for him in due time. He is thankful for the summer holiday and for spending time with other children in Rovinj, which he fondly remembers.

Family N.V.

**N. (9)** is a healthy girl of normal build. She completed the second grade of primary school with very good success. She has made great progress in learning and studies independently with occasional help. She follows a modified curriculum, but only in two subjects. She behaves well at home and with other family members.

She now visits her mother every other Saturday for two hours and talks with her by phone once a week. She is also in contact with her grandmother weekly, but the grandmother manipulates her and tries to turn her against us with false promises. N. tells us everything her grandmother says.

**A. (7)** is a slim and healthy boy. He completed the first grade of primary school with good success. He finds school challenging and needs help studying. He behaves well at home, except that he sometimes runs into the street without telling anyone. His parents have lost visitation rights and he is currently in the adoption process.

**K. (5)** is a healthy boy of smaller build. He behaves very well at home and plays nicely with the other children. His father has

supervised visitation rights once a week, and his mother twice a week. He is not yet attending kindergarten due to lack of available places.

**N. (1 year and 6 months)** is a healthy toddler of slightly larger build. He joined our family in February of this year. He is a cheerful and playful child who gets along well with all the other children in the family. His parents visit once a week, but are not very consistent—his father visits more often.

