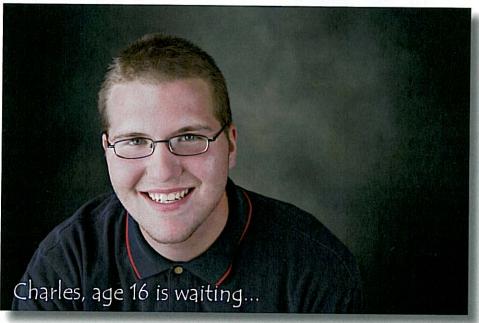


# UTAH'S ADOPTION CHILD AND FAMILY SERVICES CONNECTION

**QUARTERLY DCFS NEWSLETTER** 



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If you are interested in any of the waiting children you see in this publication, please contact The Adoption Exchange at 801–265–0444 for more information.

AUGUST 2009 Kathy Searle, Editor Lindsay Kaeding, Design Director

To submit articles or for a subscription, call (801) 265-0444 or toll free outside Salt Lake County call (866) 872-7212. This publication is funded by the State of Utah, Division of Child and Family Services. The Adoption Exchange prepares and prints the newsletter and the Division of Child and Family Services mails the publication. The mailing list is kept confidential. One can be removed from the mailing list by calling: (866) 872-7212 or 265-0444 within Salt Lake County.

## TWO ANGELS

By Ashlee Jensen, adoptee

Two angels left their Father's arms, one watched the other go first.

But soon there after she left too; to join her friend on earth.

Two angels joined new families and began to love and grow.

To meet again when the time was right but this they did not yet know.

Two angels found each other and they instantly connected,

They did not know, like their Father did, that this was expected.

Two angels took their turns trying out their wings on their own,

They soon found out its easier to stay up when you're not alone.

Two angels felt their Father's arms surround them when they cried,

When they were down they felt the love given from on high.

Two angels left this world behind and each knew that they would miss her.

When their Father welcomed them home they remembered they were sisters.





By Kevin Webb, LCSW and Stanley H. Block, M.D.

On March 19, 2009, during the Utah Adoption Conference held at the South Towne Expo Center in Sandy, Utah, Stanley H. Block, M.D., and Kevin Webb, LCSW met with Adoptive Parents. They presented a unique and new approach to dealing with the challenges of parenting an adoptive child with a sense of well-being and peace of mind and how to transform these challenges into solutions. This approach was developed by Dr. Block and elaborated upon in his book, Come To Your Senses: Demystifying the Mind-Body Connection. It is based on the premise that every individual is fully connected to a wellspring of healing, goodness, power, and wisdom. However, we all have a system in our bodies, the Identity System, that we recognize by a tense body and a cluttered mind. When the Identity System is rested there is a dramatic positive shift in how they live their lives and people become healthier, happier, and deal with their challenges more productively.

Parents were asked to think about the biggest challenges they face with their adopted children. Next, they were instructed to dwell on these challenges and experience their body sensations. They discovered that it is not their challenges that were creating their body tension, it was their Identity System taking their challenges and cluttering their mind and filling their body with tension. Next, they were instructed to try

to keep their challenges on their mind while listening to the background sounds or "white noise." As they tuned in to those sounds, they noted what happened to their body tension. In most cases, parents reported feeling more relaxed, calm, and clear headed. When you "Come to Your Senses" by listening to background sounds, paying attention to things you touch, taste, smell, and see, the Identity System automatically rests and you are Bridging. With their Identity Systems at rest, parents were no longer consumed or overwhelmed by their challenges, providing a more clear perspective on their challenges. This technique is called "Bridging Awareness Practices."

Next parents were introduced to the concept of Mapping and taught how to map out their most troubling challenge by completing a Challenge Map. They were asked to write their most troubling challenge in the center of a piece of paper and to then draw an oval around it. They were then instructed to write whatever thoughts or feelings that came to mind and to then write those thoughts and feelings scattered around the outside of the oval on the paper. Next, they were invited to notice the location and intensity of their body tension as they contemplated these thoughts and feelings. Parents were then asked to write the location of their body tension down on a corner of their paper. Body

tension and cluttered thoughts indicate that the Identity System is overactive. Parents were asked to contemplate how they generally act when their Identity Systems are overactive. Then on a clean sheet of paper, parents were asked to again write their most troubling challenge in the center and to again draw an oval around it. However, this time before they started writing their thoughts and feelings, they were asked to pay attention to the background sounds, feel the pen in their fingers, and to notice their seat in the chair until they felt settled. Once they felt settled they were asked to start writing their thoughts and feelings while watching the ink go on the paper, feeling the pen, and continuing to pay attention to the background sounds, once again, scattering their thoughts and feelings around the outside of the oval as before. They were then invited to compare and contrast the two maps, noticing how the first Challenge Map was the same or different from the second Challenge Map. They were also invited to notice how their behavior would be different on the second map when their Identity System is resting. A ready and relaxed mind helps one problem-solve, remain clear and focused. Uncomfortable body sensations don't come from the Challenge, they come from your Identity System. Challenges persist because of one's Identity System interfering with the successful resolution of those challenges.

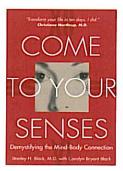
Parents were then taught about the Identity System's two major subsystems or helpers called the Depressor and Fixer. The Depressor captures negative thoughts and generates Storylines, stories that we tell ourselves about our negative thoughts or situations. The negativity from the Storylines creates tension, clutters the mind, and impairs functioning. Through completing a Depressor Map, parents learned that even negative thoughts are natural, and that "a thought is just a thought." Refuting and countering negative thoughts with positive thoughts only makes negative thoughts stronger. It's the Depressor and not the negative thoughts that get us down. Key points for befriending one's Depressor were outlined: 1) Thought Labeling is a tool to defuse the Depressor. For example, "I am having the thought that (fill in the blank), what else is new!" 2) The Depressor uses Storylines as a way to keep itself spinning; and 3) Shinning one's light of awareness on the Storylines, by simply recognizing them as Storylines defuses them or causes them to lose the power to get one down, discouraged, or depressed.

Through completing a Fixer Map, parents learned the difference between the Fixer and Depressor. The Fixer wants to take away that awful feeling (damage) left by the Depressor. The Fixer is busy trying to change, fix, or make things "all better." We may feel restless, pressured, or driven trying to do or be a certain way, in an attempt to make things "all better." The Fixer presses you to be perfect and

the Depressor never approves. This is also known as the viscous Depressor-Fixer Cycle, as this process often goes on and on until one becomes aware of its occurrence.

Parents were taught that what triggers one's Identity System is the non-fulfillment of the Identity System Requirements, "how I or the world should be." When I or the world do not turn out to be the way I think it should, the Identity System clutters my mind, tenses my body, and impairs how I act. Anything that helps one's Identity System to rest is called "Bridging." Recognizing, befriending, and resting one's Identity System Requirements is key in resting one's Identity System. Parents completed a Requirements for My Child Map to help them to recognize the Requirements that they have for their child that not only impairs their own functioning as a parent, but also gets in the way of forming a healthy relationship and attachment with their adopted child. They also completed a How I'd Like To Be As A Parent Map, to help them recognize Requirements that they may have for themselves as parents that may activate their Identity Systems when not met, and consequently impede their ability to parent effectively.

Facing the challenges of parenting an adoptive child with a sense of well-being and peace of mind is made possible as parents become aware of their own Identity System, and how it impedes the connection with one's wellspring of healing, goodness, power, and wisdom. When parents note a reduction in body tension, mind clutter, and an improvement in parenting abilities, they know that their Identity System is resting. Through Mind-Body Bridging they are then able to achieve and experience greater insightfulness into the life of their adopted child, which enables them to develop a stronger relationship and attachment with that child. It is through this parent-child relationship that healing for the child then takes place, as the parent enables the child to experience a connection with their own wellspring of healing, goodness, power, and wisdom.



Come To Your Senses: Demystifying the Mind-Body Connection is available on loan from The Adoption Exchange Lending Library, local public libraries, and on Amazon.com. Questions about Mind-Body Bridging can be answered on the website, bridgingforlife.com.



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Laws & Policies, including information on Federal laws and a database of State Statutes: www.childwelfare.gov/systemwide/laws\_policies

Statistics, reports, databases, and other sources of demographic data on children, youth, and families in the United States: www.childwelfare.gov/systemwide/statistics

Logic Model Builders, for use in planning evaluations of postadoption services and child abuse and neglect prevention and family support programs: http://toolkit.childwelfare.gov/toolkit

Workforce, including tools and resources on organizational culture, recruitment, and retention: www.childwelfare.gov/systemwide/workforce

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# Teens and "Sexting"

By Adam J. Schwebach, Ph.D. Neurology, Learning and Behavior Center schwe@hotmail.com 801-532-1484

#### "Sexting"

What is Sexting? Why are teenagers doing it? What can we do to prevent it?

"Sexting" is a term commonly used among teens that describes the act of sending sexually explicit photos electronically, primarily between cell phones. It is practiced by young adults, though it is known to occur amongst children as young as middle-school age. Sexting was reported in the general press as early as 2005 in the Sunday Telegraph Magazine. It has since become a widely used term and has been described as taking place worldwide. This issue has become more popular in the press and becoming much more problematic in the lives of our teenagers.

A recent study estimates that 1 in 5 teenagers in the United States have done this over their cell phones. Sexting has become another epidemic spreading at U.S. schools which worries parents and educators. Furthermore, A survey last year by the National Campaign to Prevent Teen and Unplanned Pregnancy in the U.S. revealed 22 percent of girls and 18 per cent of boys have sent nude or seminude images of themselves and 48 per cent had received them.

According to the U.S. National Center for Missing and Exploited Children, 24 per cent of the 2,100

child victims of pornography the center has dealt with initially sent the images themselves.

The Consequences of this behavior can be devastating both legally and socially. Recent incidents of texting have led to felony criminal charges among teens. Just this year alone, teens in Washington, Pennsylvania and Virginia faced felony charges for distributing child pornography after sending nude pictures of themselves to peers through their cell phones. This month in Ohio, a 15-year-old girl had to appear in court and plead to a felony charge of contributing to the delinquency of a minor after sending a nude picture of herself to a boy at her high school. In another case, an 18-year-old female reportedly committed suicide after nude pictures of herself were distributed to hundreds of people via cell phone.

#### Why are teens Sexting?

An extensive review of the literature to date has not revealed one clinical study that focuses primarily on sexting behavior. It is believed that some of these incidents of sexting are the result of peer pressure, need for acceptance and seeking attention from members of the opposite sex.

One hypothesis is that the use of electronic devises such as a cell phones or computers creates a "barrier" making it easier for teens to engage in behavior that they would not otherwise perform if they were face to face with another person. More research clearly needs to be done why teens are enticed to do this.

#### What Can We Do to Prevent It?

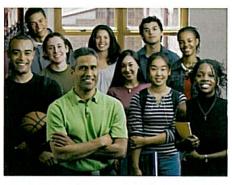
Unfortunately, across the country little has been done by state legislators to make changes to current law that addresses this issue. Utah, however, has been a leader in this area. This year House Bill 14 reduces the penalty for first time offenders under the age of 18 who engage in this type of behavior to be charged with a misdemeanor, rather than a felony. Utah is taking a step in the right direction recognizing the need for a rational approach to helping these teens make better decisions. Regardless of legislative change, little has been proposed how we must address this new epidemic amongst our teens. Dr. Schwebach and Mr. Schwebach propose a three tier approach to preventing this behavior among Utah teens.



#### **Primary Prevention**

In the summer of 2009, "Quick Tips for Parents: Sexting, What you need to know and how to talk to your teen about it." Will be published.

This parents guide published by Adam Schwebach, Ph.D. and Derek Schwebach, LCSW will be available to parents in both English and Spanish. This parents guide will help educate parents on what sexting is. It outlines the ramifications of this behavior, gives them tips on how they can talk to their teens about it and what is more important, coaches them on how to teach their teens to build and maintain healthy relationships.



#### **Secondary Prevention**

A supplemental educational manual will be published this summer by Schwebach and Schwebach. This manual can be distributed to educators, school counselors and mental health professionals. This curriculum can be taught in school classrooms as a supplemental lesson plan, presented by school counselors or adapted by mental health professionals to educate all teens ages 12-16 about sexting. The main goal of this program is to help teens think about the consequences of their actions and how to build healthy relationships.



#### **Tertiary Prevention**

This eight week program is designed for adolescents who have been specifically identified by the courts and have been charged under state law with a misdemeanor crime. The program is designed to be implemented by a mental health professional. The intervention provides a structured researched based standard curriculum that can be implemented individually by a therapist or in a group. It requires parental involvement, structured lesson plans, pre and post testing and active participation by the adolescent. The goal of this program is to prevent the likelihood of future offenses.

## Reduction in State Funded Adoption Assistance Program

Changes in the economy in the past year have lead to significant reductions in the state's revenue. This translates to fewer resources for public programs. The legislators have the challenge of how to fund crucial services for the Department of Human Services. This will likely reduce services for those who adopt children from foster care. It is anticipated that in fiscal year 2011, there will be approximately \$2 million less in state funds for adoption assistance and post adoption treatment and support services.

The following are facts and data from federal law, research and financial analysis.

Children in foster care who cannot safely return to their families become orphans of the state unless a family is found who will adopt them. These children most often have significant challenges from living chaotic lives filled with loss and trauma. If these youth "age out" of foster care at age 18, without the benefit of a permanent family, their chances for success are compromised.

The Pew Charitable Trust\* research found many studies nationally that documented that the outlook for foster youth who age out is often grim:

- 1 in 4 will be incarcerated within the first two years after they leave the system.
- Over 20% will become homeless at sometime after age 18.
- Approximately 58% had a high school degree at age 19, compared to 87% of a national comparison group of non-foster youth.
- Of youth who aged out of foster care and are over the age of 25, less than
   3% earned their college degrees, compared with 28% of the general population

Utah State Department of Human Services conducted research completed in 2006 called Assessing Outcomes for Youth Transitioning from Foster Care\*. They found the following statistics for youth within 3 years of exiting foster care:

Employment	54%-69% were below the federal poverty level with annual incom	
500 500	of \$2,076 -\$5,145 per year.	
Arrests	37% had been arrested for a felony or misdemeanor.	
Early Pregnancy	31% experienced pregnancy: 3 times higher rate than general	
	population of the same age.	
Public Assistance	58% received public assistance: 9 times higher than in the general	
	population for the same age.	
Mental Illness	57% had major mental illness diagnosis. Depression was 2.5	
	times higher than the general population for the same age.	
*1-11	the state of the s	

<sup>\*</sup>http://www.dhs.utah.gov/pdf/AssessingOutcomesofYouth\_oct%203.pdf

The Federal government established the adoption assistance program in 1983, commonly called adoption subsidy, to address financial barriers that prohibit families from adopting children who are in foster care. In an endeavor to find adoptive families for all youth in foster care whose parents have lost their parental rights, monthly adoption subsidy funding and Medicaid <u>may be made available</u> for families who adopt children from foster care, <u>if the children qualify</u> as children with special needs. The definition of a child with special needs, for the purposes of adoption subsidy, is a child who is:

- Five years of age or older; or
- Under 18 years of age with a physical, emotional, or mental disability; or
- Member of a sibling group placed together for adoption.

<sup>\*</sup> The Pew Charitable Trusts, an independent nonprofit, is the sole beneficiary of seven individual charitable funds established between 1948 and 1979 by two sons and two daughters of Sun Oil Company founder Joseph N. Pew and his wife, Mary Anderson Pew.

Currently in Utah, 62% of children who receive adoption subsidy are federally funded (this includes state matching funds). However, for 38% of children who receive adoption subsidy, the subsidy funding is from Utah state tax revenue.

Adoption subsidy is based on the child's special needs and the prospective adoptive parent's ability to meet those needs. [See Utah's subsidy guidelines at <a href="www.utdcfsadopt.org">www.utdcfsadopt.org</a>.] Adoption subsidies can never exceed the maintenance reimbursement costs if the child was to remain in foster care.

Funding adoption subsidy costs taxpayers substantially less than keeping a child in foster care. More importantly, permanent adoptive families are significantly better for children.

#### Costs for Keeping Children in Foster Care

In Utah there are currently (May 2009):

- 440 children in foster care who need an adoptive family.
- 263\* of these children are older than 5 years old.
  - > 203 youth are in family-based care at an average cost of \$10,002 per child per year.
  - > 60 youth are in residential treatment at an average cost of \$35,434 per child per year.
- Total cost of care, if the same 263 children stay in foster care for another year, will be \$4,163,446.

#### **Costs of Adoption Subsidy**

- 263 of these children 5 years old and older with a permanency goal of adoption (as above).
  - > \$325\* is the average monthly adoption subsidy for a child older than 5 years old.
  - \$3,900 is the average yearly cost of adoption subsidy per youth older than 5 years old.
- Yearly costs for the same 263 youth to be in an adoptive family with an average subsidy would be \$1,025,700.

Based on the 263 children in foster care in May 2009, the average yearly costs of keeping them in foster care, compared with the costs of placing them with permanent adoptive families who receive adoption subsidy is as follows:

\$4,163,446 total average costs of keeping 263 children in foster care for a year - 1,025,700 total average costs of adopting 263 children with adoption subsidy

\$ 3,137,746 costs saving to the State in one year's time.

The taxpayers in **Utah could potentially save approximately 3 million dollars per year** if appropriate adoptive parents can be found to provide a permanent family for the 263 older youth in foster care.

<sup>\*</sup> This information is based on the number of children in paid foster care settings, over the age of 5, who have a permanency goal of adoption in May 2009.

<sup>\*</sup> Average costs for State funded subsidy for children 6 -18 years old in 2009.

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PROCEEDS FROM THIS EVENT BENEFIT THE ADOPTION EXCHANGE



From Spring 2009 Adoptalk

By Angela Mackey

Though she was first adopted at age two, Angië experienced a rough start in life. Last year, at age 18, Angie was adopted a second time and finally has the caring and trustworthy forever family she always wanted.

Melissa and Chuck, my biological parents, divorced when I was a toddler. After they both gave up their rights, my older brother Danny and I moved in with our maternal grandma and great-grandma. Grandma adopted us.

We somehow managed, but it wasn't easy. My grandma worked a lot and my great-grandma was in her mid-80s trying to care for two little kids. The job got even more challenging after Melissa gave birth to Brandon and then Cristen. Both had ADHD and were hard to manage.

When I started grade school, I missed a lot of days. If Grandma or Great-grandma were sick, I would stay home to help take care of them. I also helped out when it came to taking care of my siblings. These kids, now 14, 16, and 20, kept me going and mean the world to me!

Unfortunately, Grandma went along with whatever her daughter said. Melissa moved in and out of the house like it was a revolving door. Then she, Michael (a guy she met on the Internet), and his son moved back in. There were nine of us in a three-bedroom house with 10 animals. Melissa and Michael lied to Grandma about paying rent and the owner kept threatening to kick us out. Though Grandma and Michael worked, there was never enough money.

Great-grandma died in 2001, and the family was never the same. We had even less money and there were more arguments, so I started using drugs and alcohol to escape the madness.

After I started middle school, I met Ashley, an older girl who quickly became my best friend. Ashley's family was as crazy as mine, but they took care of me and I looked up to them. Even so, Ashley and I got into a lot of trouble. We did drugs and made other bad choices. Before long, I was selling Grandma's pain pills to buy drugs and get supplies (food, clothes, etc.) for my siblings.

Though I didn't know it until much later, sixth grade was also a positive turning point in my life. Like Danny, I had Mrs. Mackey for science and she was the greatest. I LOVED HER! For the first time I could talk to an adult about anything and everything. She was always there, and though I knew she didn't know what to say sometimes, Mrs. Mackey always seemed to find the right words. We grew very close.

The next year I started working for a carnival with Melissa. I loved the work and that I could make and save my own money. But during eighth grade, Melissa took me out of school and brought me to live with her and Michael. Instead of enrolling me in a new school, Melissa had me work at the carnival and I failed eighth grade. Melissa also stole all the money I had been saving up for my brothers' and sister's Christmas presents.

Mrs. Mackey went on medical leave at the end of eighth grade, and gave me her home phone number. She told me to call if I ever needed anything. A few days later I did. Mrs. Mackey and I talked often from then on, sometimes for hours, about stuff at home or nothing in particular. The fact that she took time out of her day for me showed me that, unlike Melissa, she genuinely cared about me and didn't expect anything in return.

When she learned that I was behind in school, Mrs. Mackey offered to be my personal tutor. I went to her house twice a week or more so she could help me finish eighth grade. She helped with homework and my science project, and even worked with me to help me get into a charter high school rather than the public school.

In my personal life, however, things were falling apart. The summer before ninth grade was blur of running around with Ashley and her older sister. I don't remember much more than that because we were always high. I even started taking Grandma's pain medication in secret.

By the time I started ninth grade, I was addicted to pain pills. I had been staying with Mrs. Mackey and her husband for a little while, but they left for a month-long trip to Europe just a week after school began. While they were away, I stayed with Ashley, avoided school, and did drugs. Every couple of days Mrs. Mackey called to check in. She could sense that everything wasn't really "fine."

Shortly before the Mackeys got home, I came close to dying. I had no idea that pain pills mixed with antibiotics could make me so sick, but after taking two pain pills and my antibiotic, I kept passing out and ended up in the hospital. The doctor told me that if I had taken any more pills, I could have overdosed.

After Mr. and Mrs. Mackey got home, I confessed everything that had happened. Mrs. Mackey gave me no choice and told me to move in with her. Not knowing what to do, I agreed. After living with the Mackeys for more than three years, I decided to let them adopt me. I waited until I was 18 so my grandma wouldn't have to sign papers. The adoption was finalized on June 5, 2008.

The Mackeys are Mom and Dad, and I couldn't have asked for better parents. They alone supported me through all the ups and downs. Mom and I spend a lot of time together and I tell her everything. Dad is my protector. He's extremely funny and can always make me laugh. They are the only people I trust and I know they will be there for me no matter what.

The downside is that I have lost contact with my little brother and sister. Melissa won't let me see Brandon or Cristen, and she plans to move away with them. Still, I know that no matter how far away they are or how often we meet, my siblings will always be my motivation to better myself. Fortunately, I still see Danny and his son once in a while, and have hope that my other siblings will someday come back into my life.

Because I went through so much and am now so happy with Mom and Dad, I want to help other youth. For my high school graduation project, I created an online support group (http://sites.google.com/site/adoptedteens/) for teens who were or are about to be adopted, as well as youth in foster care. In my experience, it's much easier to get through tough times knowing that you're not the only one in the world who has to go through it.

<sup>&</sup>quot;From Adoptalk, published by the North American Council on Adoptable Children, 970 Raymond Avenue, Suite 106, St. Paul, MN 55114; 651-644-3036; www.nacac.org."



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## CALL YOUR POST- ADOPTION SPECIALIST

Northern Region:

**Aubrey Myers** 

(801) 395-5973

Salt Lake Region:

Linda Vrabel

(801) 264-7500

Western Region:

Am. Fork/Lehi

Rachel Jones

(801) 434-7181

Orem/Lindon

Cassie Beck

(801) 376-3056

Provo/Heber

Dan Wheatley

(801) 368-5123

Spanish Fork/Nephi

John Worthington

(801) 794-6731

Southwest Region:

**Rick Clements** 

(435) 867-2760

Susan Goodman

(435) 867-2760

Fred Butterfield

Eastern Region:

Blanding /Moab Price/Castledale Vernal/Roosevelt Al Young Greg Daniels

(435) 678-1490 (435) 636-2367 (435) 722-6561

UTAH'S ADOPTION CONNECTION

## LENDING LIBRARY

CHECK IT OUT! YOU WILL BE GLAD YOU DID.

RECENTLY MANY UNRETURNED ITEMS HAVE BEEN REPLACED AND NEW TITLES ADDED. ALSO MANY TITLES FROM CASSETTE TAPES HAVE BEEN TRANSFERRED TO CDS.

GO TO:

#### WWW.UTDCFSADOPT.ORG

THEN CLICK ON

#### ADOPTIVE FAMILY RESOURCES

TO PLACE YOUR ORDER.