



UTAH'S ADOPTION CONNECTION

CHILD AND FAMILY SERVICES

AUGUST 2017

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QUARTERLY DCFS NEWSLETTER



Dominick (DJ), 14 is waiting...
Photo by: Alan Gibby

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AUGUST 2017 EDITION
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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.

Resources Database

www.utahadopt.org

All parents at times need help and resources to parent their children. Different families need different kinds of support, depending upon where the family lives, the family's lifestyle, how the family deals with life's issues, and the nature of the challenges of the child that was adopted. Many people turn to family, friends, religious communities, and neighbors in times of crisis—but there is other help out there. Creating a support network is vital to withstand the pressures put on a family when adopting a child with special needs. Many families think that love will be enough, only to find out that although it is a critically important ingredient, many other things are also needed to truly help children become successful adults. The resource section of the website provides good information for any parent, but is geared towards the issues an adoptive family may face.

Find Resources by Category

<p>DSPD Providers</p> <p>The Division of Services for People with Disabilities (DSPD) promotes opportunities and provides supports for people with disabilities to lead self-determined lives by overseeing home and community-based services for more than 5,000 people who have disabilities. Support includes community living, day services, and supported employment services.</p>	<p>Educational Supports</p> <p>Educational services or school resources are provided to students in the effort to help them accelerate their learning progress, catch up with their peers, meet learning standards, or generally succeed in school. Sometimes additional support outside the school can be extremely helpful in gaining the resources your child needs to be successful at school.</p> <p>Tutoring Resources</p>	<p>General</p> <p>Here you will find basic resources to help provide you and your family answers and support to basic questions and needs you have.</p>
<p>Mental Health Services</p> <p>Private insurance, in conjunction with your Medicaid card, will provide you with access to mental health services. Mental health agencies are developing specialists to deal with specific trauma & adoption issues.</p> <p>After School and School Treatment Programs • Counselors who Specialize in Adoption • Family Focused Treatment • Family Preservation • Home-Based • Residential/Day Treatment • Respond Within 24 Hours to Crisis</p>	<p>Orthodontia</p> <p>There may be orthodontists in your area who accept Medicaid, but they need to send the initial impressions to Medicaid and obtain preauthorization. If your current orthodontist is not a Medicaid provider, you can ask him/her if they are willing to provide the services and accept the Medicaid rate for your child. If Medicaid denies coverage, there are no additional state funds to cover orthodontia.</p>	<p>Respite Care</p> <p>Everyone needs an occasional break from stressful situations. Most parents do not schedule adequate time away from their children who have special needs out of embarrassment or feelings of inadequacy. But in fact, taking time out for yourself is HEALTHY! Time away from the demands of parenting will revitalize you and help you deal more effectively with the challenges of raising children with special needs.</p> <p>1-4 Hour • Day Breaks • Immediate Crisis • Overnight / Weekend</p>
<p>Search and Reunion</p> <p>Utah law permits adult adoptees the right to obtain non-identifying, detailed genetic and social history with regard to their biological family. Adoptive parents should receive the state forms entitled "Birth Father's (and/or) Birth Mother's Non-identifying Information for Adoption Registry" at the time of finalization. Copies of the completed forms may be obtained for a nominal fee from the Office of Vital Statistics.</p>	<p>Support Groups</p> <p>Many adoptive families seek out others whose families are similar to their own to provide friendship and support, and to exchange ideas and information about caring for their children. It is often also helpful for adopted children to spend time talking with other children who have been adopted.</p> <p>Children Support Groups • Cluster Groups • Culture Groups • Social Media • Specialized Groups</p>	<p>Transition to Adult Living</p> <p>The goals of Transition to Adult Living is to provide youth assistance in transitioning from foster care to adult living through a private/public network of support, in order to promote their success. This assistance includes assessment, mentoring, self-esteem building, personal future planning and so forth.</p>



On the Cover

Raylee, age 17

A creative teen, arts & crafts are a fun part of Raylee's life, who likes to go by Dree! Music is a passion of hers and television is a favorite pastime.

This tenth grader loves to learn and has insight on her needs and strengths.

The caseworker prefers a two-parent, LDS family for placement. Dree would like to maintain the positive relationship she has with her mentor. Financial assistance may be available for adoption-related services.

For Utah children, only home-studied families from all states are encouraged to inquire.

Photo by: Mark Bowers

If you are interested in any of the children featured in this publication, please contact The Adoption Exchange at 801-265-0444 or visit www.utahadopt.org.

Trauma's Impact: My Family's Journey

By: Mark Maxwell



Today I know how important it is to understand how trauma can affect children and to be able to see their behaviors through a “trauma lens.” I only wish I knew that six years ago, when I first met “Tyler.” (Tyler isn’t his real name; to protect privacy I’ve also changed some details in this story.)

How It Began

I got a call from Jill, our agency case manager, about Tyler, who was then 12 years old. She said he needed placement immediately because of a problem that occurred in his last foster home. I hesitated when I heard Tyler had had a dozen placements in recent years, but ultimately agreed to provide respite.

Our Family

At that time, we were like many families. We were a two-income, middle class household. I was in graduate school, working on my master’s degree. We wanted children.

Our older child, placed in our home from foster care, had challenges, but like many parents we weathered them. We believed we could make a difference in children’s lives with “love and logic,” and that this

would work with Tyler, too. Before we knew it he was in our home; a smiling, tiny little boy with a love for nature and camping.

Tyler’s File

At my request, Jill shared Tyler’s file with us. It consisted of a hodgepodge of case notes, IEPs (Individualized Educational Plans), report cards, and lots of acronyms, including PTSD (post-traumatic stress disorder), ADHD (attention deficit hyperactivity disorder), ODD (oppositional-defiant disorder), and RAD (reactive attachment disorder).

Now, we were trained as therapeutic foster parents, so it wasn’t the first time we’d seen those acronyms. Naturally, we were concerned.

Tyler’s file explained that he had experienced an average of one move a year since the age of five. The state confirmed he was badly neglected by his biological family. The file stated that he was sexually abused by an uncle and exposed to marijuana. There were remarks within the reams of paper about Tyler “acting inappropriately with younger children” and having issues with boundaries. In addition, the files described his issues with stealing and “compulsive lying.”

After reading all this we were fearful, but wanted to help.

I asked Jill about the family Tyler was placed with for three years. She explained that they wanted to adopt Tyler but the mom returned to school, and his needs proved too much for them.

No Honeymoon

As foster parents we are often told about the “honeymoon period” that occurs just after a child is placed in a foster home. We did not receive one from Tyler.

Shortly after his arrival, we noticed small items missing from our bedroom. Over time, we placed a lock on our bedroom door. Food would vanish only to be discovered hidden and moldy in Tyler’s bedroom closet or under the bed. Items that required double AA batteries never seemed to have a working set. We would find batteries with teeth marks like the ones found in a discarded piece of gum.

Tyler’s toys and personal items were often destroyed with no rationale. We learned over time that giving Tyler a consequence for his actions really meant we were on

lockdown, because that meant we had to supervise him constantly.

At school Tyler would steal from fellow students and teachers. On three occasions he was captured on school surveillance cameras taking property. Each time he denied involvement until images were produced that showed him in action.

A Permanent Home

Through school visits, court hearings, and case management meetings we were encouraged to provide Tyler with a permanent home. We agreed a year later. We believed providing him with a loving, stable home and psychiatric services would give him what he needed to heal from his past.

That's not quite how it worked out. Today we understand that the pain from his past trauma created a pattern of behaviors that Tyler found difficult to manage.

He excelled as a Boy Scout, yet was suspended from school for stealing and banned from community youth activities. When he received a consequence for an action, his response was not to accept it, but to get revenge. This included making false allegations to authorities about the adults around him, including members of the family and school staff.

The school psychologist said to me, "I know

you love this child and want to help him, but because of his past trauma he is severely emotionally disturbed." Those words were written into Tyler's IEP.

He met weekly with a therapist, but refused to take "legal" psychotropic medications. By age 17 his behaviors had earned him time in youth detention facilities, a stay at a wilderness camp (which he ran away from six times during a 10-month period), and an adult criminal felony conviction.

My Advice for Foster & Adoptive Parents

Though the journey with Tyler hasn't been easy, our experiences with our other children have been less extreme, more successful. My family remains engaged with the child welfare system. I'm an active member of the NC Foster and Adoptive Parent Association and I continue to want to give back.

To foster and adoptive parents caring for children who've experienced significant trauma I offer the following suggestions:

Be your child's number one advocate when it comes to requesting and receiving mental health services. Engage in treatment. When it comes to treatment interventions, know there's not a single treatment that works for everyone. Keep looking until you find the one that works for your child.

Educate yourself about trauma. Take classes,

read, and ask questions. Work hard to develop coping skills that will allow you to help your child.

Take breaks and take care of yourself to avoid burnout.

Communicate with the child's support system (teachers, coaches, and others) about your child's needs. The child's community supporters will reassure and empower the child to move forward.

Mark Maxwell is Vice President of Region 2 for NCFAPA. He has four children, three adopted from foster care with his life partner. Mark is a PhD candidate at Walden University.

Tips for Improving Outcomes for Children with Trauma-Related Behavior Problems

Explore evidence-based treatment. Certain treatments have been shown to work well for children who've experienced trauma. Ask your child's therapist about their approach and experience with treating trauma. If your child is not in therapy, ask their social worker about trained therapists in your area.

Build children's healthy attachments. Making sure children maintain and strengthen bonds with important people in their lives can reduce the damage caused by trauma and improve the likelihood of a healthy outcome. Work with your child's team to determine ways to use visits, phone calls, or online contact safely to help keep children connected. Identify "trauma triggers." Most children have certain situations or sensations that make them feel unsafe or remind them of past trauma. These triggers can cause especially difficult behavior. Work with your child's team to identify triggers that may be contributing to challenging patterns of behavior.

Value assessments. Maltreatment can alter the chemistry and the formation of a child's brain. A comprehensive medical and mental health assessment can help identify problems your child may have developed as a result of his early history.

Get moving! Regular physical activity benefits all of us, but it is especially important for children dealing with neurological or emotional challenges. Find ways to fit in time for kids to run, climb, and play--it will pay off for everyone!

Parenting the *Hormonally Challenged:* Foster and Adopted Teens and Sexuality

By: Denise Goodman, PhD



Many parents feel overwhelmed or tentative about the prospect of dealing with their teenager's emerging sexuality. For many foster, relative, and adoptive parents, this task is complicated by the fact that the youth may have been sexually abused as a younger child. The following tips provide a good foundation for parenting teens around sexuality issues:

- 1. Be comfortable with your own sexuality and theirs, too.** Too often, adults are paralyzed when it comes to discussing sexuality with teens. Teens are sexual beings and since birth have been growing sexually as well as cognitively, physically, socially, morally, and emotionally. However, the influx of hormones and the onset of puberty put sexual growth in the forefront of the youth's developmental processes. While there are many "normal" behaviors during this stage, promiscuity, sexual aggression, and gender identity issues may be signals that the youth is dealing with past abuse issues.
- 2. Build trust:** Teens who have been sexually abused often lack basic trust in adults. They may be scared of the dark, the bathroom, the basement, or a medical examination. It is critical that parents be supportive by accompanying the teen to the doctor's office or by installing night lights (without drawing attention to the teen's fear). Teenagers need to know that they can count on consistency, honesty, and support from their parents to make them feel safe and secure.
- 3. Set clear boundaries:** Sexually abused youth have had their basic physical boundaries violated. Foster, relative, and adoptive parents must work to restore them. Clear boundaries that apply to all family members must be set for dress, privacy, and physical touch:

DRESS: Examples for dress are that every family member must be covered when coming out of the bathroom or bedroom, no coming to breakfast in your underwear, and the youth can't see company without proper clothing. Encouragement during shopping trips can assist in more appropriate clothing selections.

PRIVACY: Examples for re-establishing a sense of privacy are knocking or warning before entering bedrooms and bathrooms and making rules about when it's okay to close doors. Another rule of privacy is that no one listens to another's phone conversations or opens another's mail.

PHYSICAL TOUCH: Parents must approach physical touch with caution, and caregivers should avoid any contact that could be misconstrued as abuse. The parent should gain the teen's permission to hug or touch him or her. Rules for touch should generally be that "ok" touches are above the shoulder and below the knee, and the youth should have the power to decline any physical affection or touch.

- 4. Learn to talk with teens about sex:** To assist youth in dealing with their victimization or to support their normal development, use the correct language and not slang names or euphemisms. Parents who avoid conversations about sexuality force teens to learn from unreliable and inaccurate sources such as their peers, siblings, or the media. Parents can think about the five toughest questions they could be asked and prepare answers so that if the opportunity presents itself, they'll be prepared.
- 5. Educate the youth:** It is important to give teenagers accurate information about sex, sexuality, and human reproduction. This may be difficult for parents who may feel education will lead to sexual intercourse and experimentation. However, teens need information, not taboos. Sexually abused children need to learn about the emotional side of sex, as they have been prematurely exposed to the physical side of sex. Both boys and girls need to learn about birth control and sexually transmitted diseases. Parents can seek help from community agencies such as Planned Parenthood and Family Planning.
- 6. Use the "3 C'S" in an emergency:** It is not uncommon for a parent to encounter a "sexual situation" that involves their teen. Consequently, all parents must be prepared to handle these incidents as therapeutically as possible.

CALM: Remain calm while confronting the situation, even if it requires getting calm or faking calm. When parents are in control of themselves, they are able to use more effective strategies to handle the situation.

CONFRONT: Confront any unacceptable behaviors. This information should be given specifically and gently without threatening or shaming. Too many times parents say, "Don't do that" or "Stop it" without being specific. Teens can become confused or ashamed if they are not confronted directly and supportively.

CORRECT: Since a teen's behavior is purposeful, offer the youth a substitute behavior to use when the need arises. Suggest more acceptable and appropriate alternatives. When the youth uses the alternative behavior, give positive reinforcement.

- 7. Advocate:** Parents must advocate for the needs of their children. Teens who have been sexually victimized may need a variety of services; therefore, the parent should advocate with the social worker, agency, or the mental health center until the services are in place. This may mean that the parent calls every week or even every day and leaves messages. The parent may need to contact managers or administrators to obtain services for their teen. In other words, ask until you get what you need for your child.

Conclusion

Sexuality is a normal part of human growth and development. Every teen, including you and me, struggled to figure out who we were as sexual beings. Today's teens are bombarded with sexual stimuli in music, on TV, in the movies, and on the radio. Coupled with a past history of sexual abuse, it can be a daunting task for a teen to come to terms with who they are sexually. Be supportive and understanding...and remember, a sense of humor goes a long way.

Denise Goodman, PhD is an adoption consultant and trainer with 25 years experience in child welfare, protective services, and foster parenting. She currently conducts workshops and consultations throughout the U.S. on topics related to foster care and adoption. E-mail: dagphd@aol.com.

Helping Children Connect with their Birth Parents

By: **Lori Ross**

I have been parenting adopted kids for 28 years now. I've had the chance to raise 12 children (8 adopted) to adulthood. In addition, I'm connected with dozens of my former foster kids who were reunified with their birth parents. My experiences, especially those of my adult children and their birth families, have led me to consider the concept of openness in adoption in a totally different way than I imagined years ago.

Learning about the Importance of Birth Family

Adoptive families are very different than traditional, biological families. The decision to add members to your family through a court process is similar to the decision to make a permanent commitment to your spouse through marriage. It's making a choice to be family.

For a long time, I believed termination of parental rights was just a court process. Maybe I needed to feel more secure about my role as an adoptive parent. Maybe I had a limited understanding of the depth of the genetic connection between biological parents and their children. Somehow I felt that a termination meant that "those" people were no longer "my" kids' parents.

About six years into foster/adoptive parenting, however, I met a young woman who had been adopted by another family. She confided in me about her conflicted loyalty between the love for her adoptive parents and her need to reconnect to members of her birth family. She wasn't rejecting her adoptive family; she was expressing sadness about having to pick a family. She felt it wasn't okay to belong in both. What hurt her most was her adoptive mother's inability to help her navigate those feelings without taking it as a rejection. She was a sensitive, caring young woman, in large part because of the love and compassion she had learned in her adoptive family. But she had to hide part

of who she was from the people she loved and needed the most.

From that experience, I learned it was my job to help my kids navigate their feelings about their birth families, without making the journey about me. I needed to be secure enough as their mother that I could listen, understand, and support whatever degree of reconnection they decided to have.

Evolution of Thinking

Still I had further to go in my journey toward openness. I was pretty sure there should be some disconnect between birth families and children at termination of parental rights. The act of terminating rights resulted from some failure on the birth parents' part to rectify the circumstances that caused them to abuse or neglect my children. Surely my kids needed time to heal from that trauma in the trauma-free environment of my home. In our early days, I thought we were parenting experts. We'd mastered the skills to meet the needs of children with significant medical and mental health issues. We could parent teenagers with whom we had not shared the early formative years. But with the addition of each new child with significant issues, our trauma-free environment quickly became less peaceful. It eventually became clear we were not exactly offering a trauma-free environment.

Instead, we were hanging on for dear life and hoping that if we hung on long enough, the roller coaster would slow down. The working theory that I'd hung my hat on for so many years was out the door—there was no way to keep the trauma out. It was part and parcel of these kids no matter where they laid their heads at night.

The thing that tipped me right over the openness in adoption edge was the dawn of social networking. With My Space, Facebook, and constant internet access, it finally clicked that there was no such thing as closed adoption anymore. Twenty years ago it might have been hard for my kids' birth parents

to track us down. But even then it wasn't hard for many of our foster and adoptive kids to find their birth parents when they made the choice to do so, particularly if they were older than toddlers when they came into care. Now, it's not even a contest. We can find anyone we want to find by clicking a few buttons on the computer—and our kids can find them faster than we parents can.

Helping Your Children Learn Their Identity

So it's no longer a matter of if, it's when. It's no longer a matter of will they have contact, it's how will that contact look? As I've taken time to let that realization gel in my brain, it's finally occurred to me that it's really okay.

The biggest issue facing all adopted people is achieving a sense of identity that requires some connection to their biological parents. Understanding where you came from—all of who you are—helps you to be whole.

We've all recognized the need for medical information for adopted youth. They have a right to know what to expect as health issues arise. What we may not have recognized is that they also have a right to know and understand the people from whom they come, whose genes have helped shape their appearance, their sense of humor, their way of processing the challenges they face, and more. While we may think we are protecting our children from hard-to-hear information, we may be robbing them of what makes them who they are.

I still believe that there are valid reasons why some parents should not have custody of their children. I still believe that, for the safety and protection of children, adoptive parents must join with the children and form a new kind of family. But I no longer feel it is my job to protect my children from their birth parents. Now, I feel it's my job to help my children navigate their relationship with their birth parents in a way that makes sense for each

of them at their pace and their ability level. It's my job to partner with birth parents to make the best decisions to support our mutual children. Rather than cutting off the biological family from their lives, it's my job to bring the biological family into my family and to walk willingly with my child into their family as well.

My adopted children have two mothers, two fathers, and sometimes more. The best thing I can do for them is to help them be who they are, not who I want them to be. And isn't that truly what we want for all of our children?

Helping Other Parents Connect with Birth Family

This approach to openness takes hard work and practice. It's full of messy emotions for everyone. At MFCAA, we have been approached by adoptive parents who are pretty upset. Their child has found and reconnected with biological parents, adult siblings, or other family members—usually via social media. They don't know what to do about this intrusion and are desperately afraid the birth family influence will lead their child to harm. This stance has often led to an increasingly strained relationship between the adoptive parents and their child.

In a handful of cases where teens had already connected with their birth parents, our staff have encouraged adoptive parents to engage the birth family in a partnership, with a mutual goal of helping the child make good choices, communicate honestly, etc. In every situation we've seen, the birth parents love the child. There has been no doubt that the adoptive parents love the child. And when the two sets of parents come together with that mutual concern, they are able to mediate an agreement for contact that allows them to work together to support the child in a healthy way.

Helping adoptive parents is usually just a matter of a couple of meetings. First, an MFCAA staff member, who is a licensed clinician and an adoptive parent, facilitates separate conversations with the adoptive parents and birth parents. In these separate meetings, each set of parents identifies old hurts, concerns, and hopes for the child, and goals for a reconnected relationship. We also help them see each other as real, but flawed human beings who care for the same child. Then, the staff member

brings the two sets of parents together for one or more meetings.

While together, the two sets of parents discuss old hurts, talk about their common interest in what is best for the child, discuss what kinds of ground rules for contact will allow them to partner together for the benefit of the child, rather than being triangulated by the child for what he or she perceives to be a benefit. The meetings predict future conflict and establish a plan for how to manage that conflict. Mostly, what the meetings do is create a mutually respectful relationship between adults, with boundaries in place, that can help them begin to share the role of parenting through the rest of that child's life.

After the adults have established their agreements, the child is involved by first meeting with the adoptive parents, then with both sets of parents. During these facilitated sessions, the adoptive parents re-introduce the child to the birth parents, and together the parents explain the boundaries and rules for the new relationship. Both parents demonstrate mutual respect and support, and let the child know that they will be in contact with each other regularly.

In all the cases where MFCAA has provided this service, the goal was to help adoptive parents establish safe boundaries after a teen already reached out to birth family. In a dangerous situation, we would not move forward with the process and would likely recommend counseling and other services to keep the child safe.

One Family's Story

Several years ago, nine-year-old Allie was adopted with three younger siblings by George and Margaret*. Once Allie became a teen, she started to have behavioral problems, including running away. Margaret had remained in distant contact with the birth parents, although she had not allowed Allie direct contact. On one run, Allie reached out to her birth mother and an older sibling. Allie's birth mom let Margaret know she'd heard from Allie, and eventually let her know where she was so that she could pick Allie up.

At that point, Margaret asked for our help in mediating the relationship with Allie's biological mom so that she could ensure the contact was healthy. Margaret struggled with the rejection she felt when Allie contacted her birth mother, but was able to focus on the reality that her daughter was going to have contact with her birth mother, and it was her job to make that contact as safe as possible.

MFCAA's Joe Beck then arranged a series of meetings (like those described earlier) during which he helped the two families establish better communication, guidelines for contact, and a plan for how to resolve future conflict. Over the course of the next year, the birth mother was able to go with Margaret to visit Allie in treatment. After treatment, Allie transitioned back to her home with Margaret and George, while keeping ongoing contact with her birth family.

While this was going on, the other siblings saw their two sets of parents interact positively for the benefit of their sister. They then felt comfortable to bring thoughts and questions about their birth parents to George and Margaret. As a result of having all of the information they needed about their birth parents, these three kids have a more secure sense of their own identity. They know and understand their birth parents, and feel solidly connected to their adoptive family where they belong.

The good news is that this process has worked for others as it did for Allie and her siblings. It's strengthening children's relationships with adoptive parents and birth parents. It's providing them with a sense of security in the knowledge that all of the adults they love can and will work together to do what is best for them. It's preventing triangulation and heartache, and it's allowing adopted youth to feel whole without fear.

*names have been changed

Originally published in NACAC's Adoptalk in 2013

Lori Ross is the parent of 26 children, 21 through adoption and 5 through birth. She is Executive Director of FosterAdopt Connect, a multiservice foster care and adoption agency in Missouri. This article was adapted from an open letter Lori wrote for her organization's newsletter. To learn more, please contact Lori at lori@fosteradopt.org.

A young boy with short brown hair is sitting on a white beanbag chair, looking thoughtful with his hand to his chin. He is wearing a grey long-sleeved shirt and blue jeans. A woman with long dark hair, wearing a white sweater and blue jeans, is sitting on a yellow pouf next to him, looking at him attentively. The background is a playroom with colorful chairs and a hula hoop.

Your Child is Misbehaving, *Are you Listening?*

By: Heather T. Forbes, LCSW

When reviewing records of many of the children with whom I work, I am forever perplexed at one particular notation I continually see written by therapists and counselors. Under the list of negative traits of the child, it is often written, "Child exhibits attention-seeking behaviors." I strongly believe that children seek attention because they NEED attention. Nature has designed children to be completely dependent on their parents at the moment they are born. A baby crying is the signaling to the parent the baby has a need, a need that the baby cannot satisfy on his own. The baby is indeed exhibiting attention-seeking behaviors.

The natural flow of the developmental journey of a child is to gradually release this need for attention, moving from a state of dependence to a state of balanced independence. The time period for this is about 18 years. We are the only animals in the animal kingdom that have our children under our care for this length of time. Expecting our children to not need our attention or to view it as a negative behavioral issue during these 18 years goes against our biology.

When children do not know how to verbally express their needs (which is predominantly the case during early childhood), they "speak" through their behaviors. In other words, behavior is a form of communication. When a parent can stop, pause, and "listen" to the behavior of a child, it can become quite obvious what the child is saying. Looking at the behavior from an objective perspective also unveils the logic behind the child's behavior. Here is a list of ten behaviors along with an interpretation of each behavior to demonstrate this:

1. Slamming Doors. When a child begins slamming doors, it is an indication that he does not feel like he is being heard. By slamming a door, he is making loud noises, hence forcing the parent to "hear" him. He is essentially saying, "I need to have a voice and I need you to listen to me now!"

2. Cursing. Most children know that they should not curse. They use profanity to jar the parent's nervous system into listening. It is a way to get a parent to respond to the child, even if the response is negative. The child's fear of not being good enough for the parent to pay attention to him, is also playing out in such a scenario.

3. Shutting Down. A child who shuts down, refuses eye contact, walks away, or gives the parent the silent treatment is a child who is overwhelmed. We have tradition-

ally labeled a child like this as defiant. This is a child who is saying, "Life is too big to handle. I'm shutting down my world in order to survive."

4. Hitting Sibling. Sibling rivalry is more about the relationship between the child and parent than it is between two siblings. If a child is not feeling secure in his relationship with his parent(s), he will perceive the sibling as a threat to this relationship with the parent(s). Reacting against the sibling is the basic game of "King of the Hill" in order to win the attention of the parents. The child may receive negative attention from the parent ("Billy, stop picking on your brother!") but to a child, especially a child with a trauma history, any form of attention, whether positive or negative, is love.

5. Challenging Authority. A child who challenges authority is a child who has lost his trust in authority figures. Look back into the child's history and you will likely see a child who was abused, neglected, or abandoned by someone who was supposed to care for and nurture the child. A child who fights having someone else in charge, is a child saying, "I can't trust anyone. It is too much of a risk."

6. Saying, "I hate you!" Such hurtful words directed towards a parent from a child are simply a window into the child's heart. The child is projecting his self-hatred and self-rejection back onto the parent. What he is communicating is, "I hate myself!" It is easier to hurt someone else than it is to feel the internal hurt within one's own heart.

7. Arguing About Everything. A child who argues about everything and anything is keeping the parent looped in a conversation in order to keep the parent attuned to him. He feels that if the parent were to stop talking with him, he would cease to exist. Arguing is his way of staying connected. It is a negative form of attachment.

8. Laziness. Describing a child as being "lazy" is like calling a child crying in a crib a "cry baby." It is a gross misinterpretation of the child. Laziness is typically a sign of a child who experienced helplessness early in his childhood; it is a learned behavior. Neglect happens when a child tries to elicit attention from his caregiver and the result is nothing. No attention. No help. Zilch. The child learns that his energy does not produce results and as he grows older and

gets challenged by life, he will simply shut down and do nothing. He is saying, "My efforts don't produce results so therefore I won't even try."

9. Pushing Every Boundary. Many children have such intense behaviors that the adults around them in the past demonstrated a lack of ability to handle them or an unwillingness to stick with them. When parents find the child pushing every boundary, every rule, and every limit, the child is asking, "Can you really handle me?" and "You say you're my parent, but I need to know you're not going to give up on me so I will test you to make sure you really are committed before I put any trust into you!"

10. Becoming Unglued During Transitions. Trauma happens by surprise and when it happens, there is typically a major change in the child's life. It is transitional trauma. The aftermath of such traumatic experiences is that the child becomes fearful of EVERY transition, whether large or small. A child's belief around transitions becomes, "Something bad is going to happen. Guaranteed." Past traumatic experiences create the black and white thinking that "All change equals pain." When a parent sees a child's negative behaviors intensifying during a transitional time, the parent needs to remember that the child is saying, "I'm so scared that my entire world is going to fall apart in a flash just like it did in the past!"

When parenting a child with challenging behaviors on a day-to-day basis, it is easy to lose sight of the idea that behavior is the language of a child. Negative behaviors are tiring! Keep taking care of yourself and keep your cup filled so that you have enough space inside of you to keep looking beyond the behaviors and listening to the behaviors instead of reacting to the behaviors.

The parent/child relationship is a dyad - a two-part system. Remember that your behavioral response also signals a communication to your child. Thus, it is imperative for you to stay mindful and attuned. Give enough attention to yourself as to stay in a place of love so you are always speaking the language of truth, love, and acceptance to your child in return.

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The Science of Parent-Child Relationships: *Parental Openness Can Help Children Learn to Trust*

By Jonathan Baylin, Ph.D. and Daniel Hughes, Ph.D.

Children who experience early trauma learn to survive by not trusting their caregivers or the world around them. They become naturally defensive and face the daunting task of learning to trust once they are in the care of trustworthy parents. Caregivers face the huge challenge of keeping their minds and hearts open despite repeated experiences of what feels like rejection from a mistrustful child.

The neuroscience of parenting and attachment is deepening our understanding of challenges faced by both these children and their parents. New knowledge from brain science provides a better understanding of how and why the most loving parents can lose touch with their good intentions and develop what we call “blocked care” when they don’t receive caring responses from a child. With blocked care, brain systems that support empathy start to shut down to protect parents from rejection, and parents may feel angry or upset, or take children’s behavior personally. Painful parenting can cause actual wear and tear on parents’ brains, making it harder to be loving and nurturing.

If parents understand why their child has become mistrustful and how it affects the child’s behavior, they are less likely to react defensively when a child does not reciprocate love. They can then begin to embrace parental actions that promote trust—playfulness, acceptance, curiosity, and empathy (PACE). When parents can regulate negative feelings, accept the whole child—mistrust and all—and employ actions like PACE, the child can gradually feel safer and the parent-child bond improves.

Whole Brain Parenting

A brain-based caregiving approach helps parents stay open to untrusting children, embracing the whole child rather than shifting into defense. Parenting calls upon at least five different brain systems that enable us to:

- stay close to our kids without getting too defensive;

- derive pleasure or joy from caring for and interacting with our kids;
- attune to kids’ inner lives using powers of empathy and understanding;
- construct rich stories about being parents; and
- regulate negative, uncaring reactions most of the time.

When a parent can keep all five systems up and running, a child gets to interact with an open-minded, empathic adult in ways that enhance a child’s brain development.

Learning to Mistrust

Children who start life with people who can be volatile learn to avoid getting too close to these adults. A complicated dance of approach and avoidance becomes the child’s template for relating to others and surviving. Even very young infants learn from their experiences with caregivers whether it is safe or dangerous to interact with adults. These early experiences are stored in the child’s brain as their first social memories, and these memories are easily triggered again by facial expression, tone of voice, or movement. When frightening memories are triggered later in life, they may act like flashbacks, the kind of memory in which the child’s brain cannot tell the difference between now and then. In the midst of this kind of reaction, a child does not distinguish between former adults who were hurtful and current ones who aren’t.

Learning to trust after first learning to mistrust is hard work for developing brains. Unlearning a strategy of basic mistrust involves two types of learning—called “reversal learning” and “fear extinction”—that depend heavily on the prefrontal cortex. Since early exposure to high levels of stress can suppress prefrontal cortex development, many children may have a hard time letting go of defensiveness. They are likely to do the same old defensive things over and over with new caregivers. As a result, learning to trust is often a slow and repetitive process requiring understanding and patience from all adults involved.

Learning to Trust in Stages

As children gradually transition to trust, one of the crucial stages is beginning to question their own feelings of mistrust. Being conflicted about trusting a parent is progress, big progress, over automatically mistrusting. Caregivers and therapists should take heart when a deeply defensive child begins to question her mistrust, asking: Are you being mean or nice? Can I trust you or should I stick with mistrust and know I won’t get hurt again?

Parents who are able to see the child’s lack of trust as a natural outgrowth of early experiences are more prepared to welcome opportunities to help a child verbalize mistrustful feelings. For example, if a child looks upset when a parent says something positive, the parent could ask the child what she is feeling and encourage her to talk about her reaction. The goal is to make it safe for a child to bring her hidden strategy of mistrust into the light of day, where it’s safe to speak about it, be curious about it, and begin to change it.

The parent can also play detective, exploring why the child learned to mistrust. Curiosity can help construct a new narrative, a coherent, engaging story that contradicts untold stories of being a bad kid who didn’t deserve parental love. By taking responsibility for being a trust builder, a parent can hold on to her own good intentions. Realizing that a parent is and will be in the trust building business can go a long way toward preventing blocked care.

Safe to Be Sad

An important step in helping a child learn to trust is enabling the child to risk feeling sad around their parent. Building opportunities for comforting a sad child who usually resists any offer of comfort is vital to promote the development of more secure attachment. Parents must look for opportunities to help children experience the sadness of their early

experiences and losses, not just the anger, alienation, or numbness.

Sadness calls out for help, for comfort. Sadness comes from the cingulate, the part of the brain that generates cries for help in young mammals separated from their caregivers. When caregivers hear these distress sounds, their cingulates light up in response, urging them to find, retrieve, and comfort the lost baby. Effective attachment-focused treatment awakens the cingulate and activates this call-and-response system between parent and child. Therefore, feeling emotional pain can be good, allowing the child to experience a parent as caring and the parent to feel effective and empowered.

Parents can build chances to activate this vital distress system by watching for subtle signs of a child trying to suppress tears or hold back the need for a hug. Using a soft, caring voice at these times may help the child accept and feel the emerging sadness, and create a safe space to express this scary emotion. Children who are finally able to cry and be comforted often seem to find great relief in this reciprocal interaction with their parents.

The Element of Surprise

Another essential component of change involves surprising the defensive child with unexpected playfulness, acceptance, curiosity, and empathy (PACE). Indeed, there can be no change without surprise as part of the parent-child relationship. Parents have to violate the child's negative expectations to help the child's brain start to see and feel the current signs of love and safety. In therapy lingo, creating a "therapeutic conflict" in the child's mind is an essential ingredient of change. When we detect a conflict between what we expect and what is actually happening, the brain's anterior cingulate cortex (ACC) becomes more active. ACC activity signals us that something important is going on and we need to pay attention so we can understand what's happening. This internal conflict helps put the brakes on old automatic ways of feeling, thinking, and acting, and thus serves as a gateway to change.

Using PACE, parents can promote the reversal learning and fear extinction that help defensive kids shift from mistrust to trust. PACE helps children see, hear, and feel the difference between the new sensations of being truly cared for and the negative sights, sounds, and touch associated with previous experiences and caregivers. Parents can highlight the element of surprise by using a surprised voice: "Wow, I get it! You thought I was being mean when I said you've really been showing your feelings lately. I guess it's

still hard for you to know how much I love you!"

Playfulness promotes engagement by keeping the defense system off. Just as receiving comfort soothes the stress response system, playful interactions can shift brains from defensiveness to pleasurable engagement. Playfulness can make a child forget to be mistrustful for a while. For example, when a child gets a bit silly, a parent might join in the silliness, taking care to monitor the child's response and match the child's energy without going overboard.

Acceptance—especially when a parent accepts the full range of a child's feelings while also setting limits to ensure safety—helps a child learn to feel safe with her own feelings and thoughts without having to suppress parts of herself and her experience. Deep acceptance is crucial in helping a child question her deeply engrained experience of feeling bad or unlovable. Parents of mistrusting kids have many opportunities to show acceptance of their child's negative feelings. One of the best times for showing parental acceptance is when a child is angry and expecting the parent to get mad in response. When the parent acknowledges the child's anger without being defensive, the child gets to feel safe expressing anger. This can help the child feel heard and seen in a way that can reduce the likelihood of escalation into prolonged rage. Feeling safe with negative emotions is crucial for learning to regulate these emotions.

Curiosity promotes a search for meaning, for incorporating new aspects of our experience into our knowledge base. When parents are curious about what's going on inside a defensive child's mind, they might jiggle the child's brain out of defense and get the child interested in why she feels what she does. A parent can use curiosity with a child about a negative interaction after the heat of the moment has passed, wondering out loud with the child what happened and what the child experienced. This is a great way to help a child reflect on her and her parents' actions instead of just moving on.

Empathy, in which parents mirror a child's emotions while still being a parent, helps parents attune to the child's experience and connect more deeply with the child. Fortunately, we have mirror cells in our brains to help us do this. When the brain's empathy system is on, the defense system is off. Parents of mistrusting kids do well, at times, to picture their child as an

infant learning to be defensive without even knowing she was learning. This imagery can help the parent empathize with a child who is behaving defensively now.

PACE for Parents

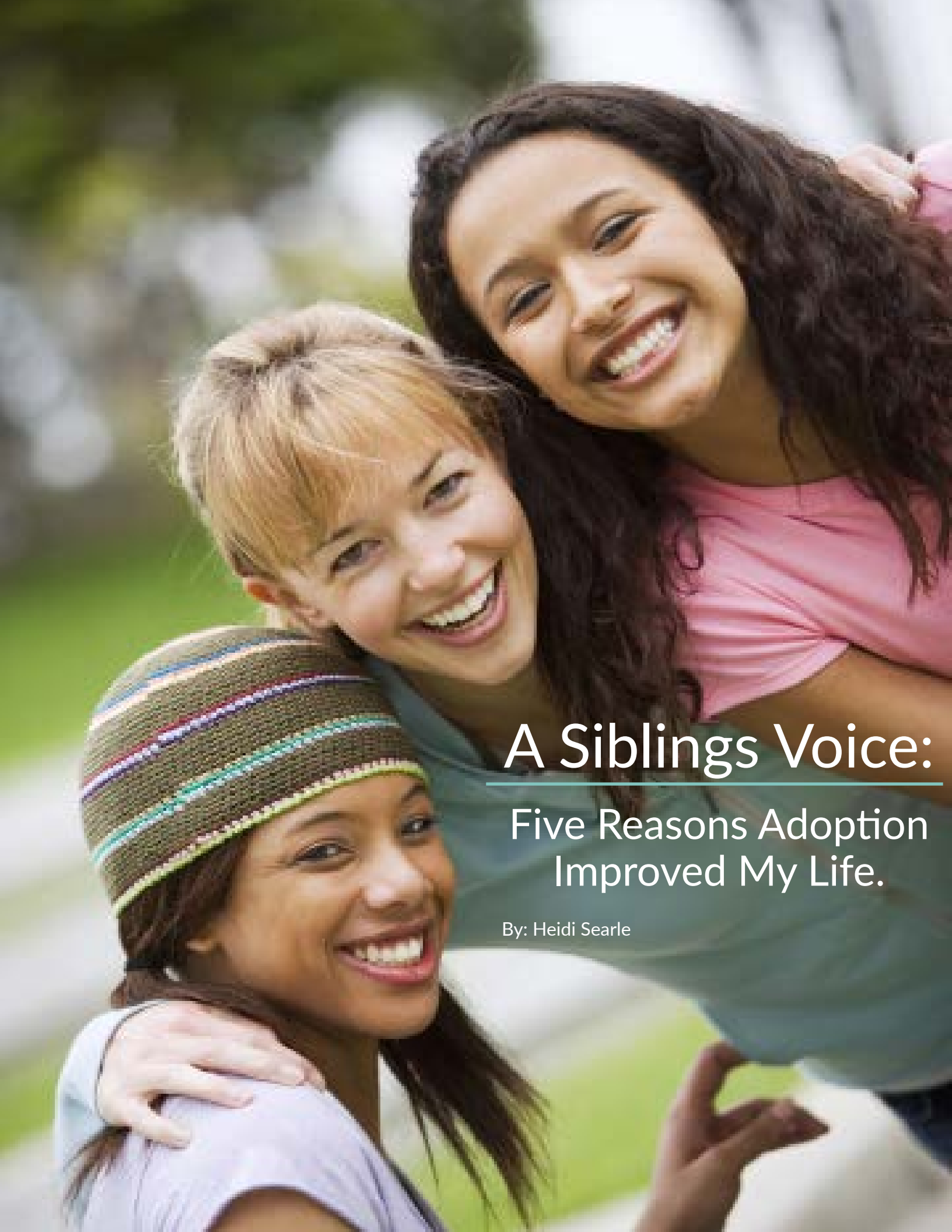
In brain terms, parenting is a pretty complex process. Keeping the parenting brain healthy and working well takes self-care and supportive connections with other adults. Tending to the wellbeing and brain health of parents is one of the best investments we can make as a society. We need to understand as deeply as we can what it takes to parent well and how we can support parents, especially those who are experiencing extreme stress and are at risk of developing chronic blocked care.

Helping parents embrace this model of brain-based parenting, a model of parenting the "whole brain child" as Siegel and Bryson put it, may be the most powerful intervention mental health professionals can use with families raising mistrusting children. Depending upon the parent's background and adult attachment status, this process can be straightforward or complex. Parents who have not resolved their own unfinished business from childhood will need to experience PACE from therapists in the early stages of treatment. Just as children need to be surprised by PACE, parents who expect to be misunderstood need to experience the opposite. They have to feel safe to share their darkest feelings about themselves and their children if they are going to trust the professional as a guide toward a better parent-child bond. Professionals can also help parents examine their own familial relationships and look for triggers in their own parenting.

To build attachment and enhance the parent-child relationship, we need to employ a whole brain approach for both parents and children—a model that addresses how a child's early experiences affect not only the child but also the parent's ability to provide loving care. By helping parents learn to respond positively and proactively to their children's learned mistrust, we can create a roadmap for helping them teach their children to trust.

Originally published in NACAC's Adoptalk newsletter in 2013

Dr. Baylin and Dr. Hughes are co-authors of *Brain-Based Parenting: The Neuroscience of Caregiving for Healthy Attachment*, published in 2012 by Norton Press.



A Siblings Voice:

Five Reasons Adoption
Improved My Life.

By: Heidi Searle

I have eight siblings through adoption and two biological sisters. Family is everything to me. I wanted to share five reasons why adoption has improved my life.

1. It's taught me to look beyond appearances. My adopted siblings have African heritage or Colombian heritage, both come with extreme prejudice and stereotype. I have seen the looks and heard the hurtful words. I have seen glimpses of a racist society through the shadows of my siblings. I've heard the backlash of not acting like the stereotype; I've heard blaming of being exactly like the stereotype. They can't win. I've seen a life destroyed by trying to be what society thought they should be. I've seen the reflection of a world of fear, fear for siblings of not being physically safe, something I take for granted. I've seen the pain in my parents' faces when ignorance won and hurt their child. Firstly, adoption taught me to meet someone and judge by their actions not looks and without any expectations. In the past, I hid behind my ignorance and I teased and labeled my siblings thinking I was funny. I see now how putting a label before a person hurts the person and highlights my own white privilege; transracial adoption has taught me this.

2. Adoption taught me to have empathy. I am the middle child, well kind of; I was displaced so many times that I show qualities of the youngest, middle, and oldest. I was a shy child and I didn't mind being in the back of the room, sometimes I preferred it and often played by myself. I believe this was helpful because I could watch and listen. I watched my parents work together as a team to help the children they adopted. I watched siblings act out because all they wanted was to feel loved. Sometimes I was scared, but today I'm glad that I got to see and experience what I did because it's made me more empathetic to others' needs. I know my parents love me as much as their adopted children even though sometimes I felt like I didn't get any of their attention.

3. Adoption has taught me that you can overcome anything. You are not your past; my siblings are not their biological parents. Most of my siblings have broken the circle of drug addictions and trauma due to broken homes. Most of my siblings are the complete opposite of where they came from. With the help of my parents and their own persistence and determination, they have chosen to be exactly who they want to be and achieve what they want to achieve. I am so proud of them for breaking such a hard cycle and choosing to go beyond a society's stereotype and be themselves. One of my favorite quotes is, "You are YOU and that is your power." I'm not sure who wrote it, but my siblings have found their power and have overcome so much.

4. Adoption has taught me to give and then give more. My parents are a team, I know things were hard and I know sometimes things are still hard. They gave their time, their home, their hearts, and their lives to change and save eight children; I respect them so much for that. I tend to cut toxic people out of my life and I seem to give up on people; they don't and I don't know how they do it. They never give up. So in a way they taught me to give and never give up on anyone; this is such a hard thing for me.

5. Adoption taught me to be easy going and get along with almost everyone. I know that the number of siblings I have has something to do with this as well, but nonetheless it's a quality I cherish. Now don't get me wrong, there are some people no matter how hard I try I've had to just let go out of my life because I cannot get along with them. But, I can honestly say I get along with just about everyone and I love that being raised in chaos has allowed me to be this way.

So if you're questioning adoption and you're not sure how it will affect your biological kids or the kids already in the home, I hope this was helpful. Adoption cannot be seen with rose-colored glasses on, but it also isn't a nightmare. Adoption changes more lives than just the child being saved, getting a home, and getting love – it affects everyone involved; but in the end through all the pain and hard times, it is for the better.

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HONORING EXCELLENCE *Ben Bjarnson*



Ben Bjarnson has worked at the Department of Child and Family Services a little over a year now in Price, Utah. He works primarily with youth ages 14 and older, and currently has one case with The Adoption Exchange, Wendy's Wonderful Kids Team.

Ben likes to bring humor into his work and tries to get his clients to laugh as often as they can. Ben enjoys his work, and it shows by the way he treats those he works with. He does his best to help his youth feel safe, cared for, and ultimately happy with their situations.

Ben wants to make a difference in the lives of all those he comes in contact with. He will often go the extra mile and even work late to make sure that deadlines are met. He is very goal oriented, and will push for things that will make himself and his clients grow. It is strange, but Ben also enjoys criticism.

Ben wants every youth that he works with to have a "forever home." He hopes that you can help him.

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