# CHILD AND FAMILY SERVICES **ADOPTION**

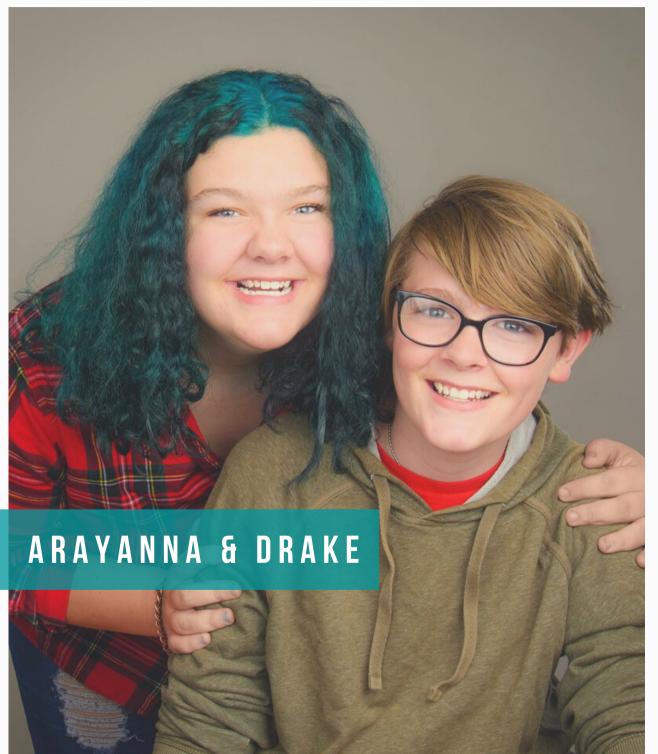


Photo by: Bry Cox, Bry Cox Photography

# CJ (CHADD)

Photography by Kris Doman, KD Portraits

# **04** IMPERFECT PARENTING GROWS

#### RESILIENCE

BY ROBYN GOBBEL AND DR AMY STOEBER

An article about our relationship with our children being more important than having perfect parenting skills.

06

#### HOW CAN WE HELP KIDS WITH SELF-Regulation?

BY CHILD MIND INSTITUTE

An article on how to help children build self-regulation skills.

# 09

#### SELF-CARE OF THE CAREGIVER: Trauma stewardship for adoptive parents

BY SUSAN EGBERT PHD AND SEAN CAMP LCSW Information on the importance of self-care for all caregivers.

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BY MEGAN JENSEN, RAISE THE FUTURE

An article highlighting the importance of play for our children.

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### **Spotlighting Resources** Utah's Adoption Connection Resource Database

Here is what you can expect to find in general resources!

#### The Center on Third - Adoptive Families Coalition

"The Center on Third" will be Adoptive Families Coalition's Utah office, as well as a warm and inviting center to support the healing of children and parents struggling with the effects of trauma and abuse. Along with skilled professionals, they provide art, music, and yoga classes and for children plus training and workshops to help empower parents. They also offer a monthly parent support group and have an expansive lending library of resources. Visit https://centeronthird.org/calendar/ for a calendar of events.

The Center on Third was opened by Adoptive Families Coalition (AFC) in August of 2018, with classes and workshops starting in February 2010. AFC is a nonprofit dedicated to the holistic support of families with adopted children who demonstrate emotional, behavioral, or psychological challenges. AFC fills a gap for post-adoption financial support to help these children receive proper therapeutic treatment. They offer a sponsorship program to assist families pay for the high cost of treatment, often not covered or only partially covered by insurance. All services are free of charge.

#### Type: Mental Health Services, Support Groups Ages: 0-11, 12-18, Over 18 DCFS Region: Northern Region Counties: Box Elder, Cache

#### Peer Connections

Peer Connections is a transition program offered along the Wasatch Front and in St. George, Utah designed to help students ages 14-24 with significant social communication issues establish and enhance their relational skills, while exploring work and career activities. This program fills an existing service gap for these students by providing opportunities for regular social interactions with a peer of similar age during a structured community service activity. They also offer early intervention programs from birth up to 3 months in Provo, and a variety of enrichment classes addressing sensory social skills and occupation therapy for children ages 3 and up.

Type: Support Groups, Transition to Adult Living Ages: 0-11, 12-18, Over 18 DCFS Region: Northern Region, Salt Lake Region, Western Region Counties: Davis, Morgan, Rich, Weber, Salt Lake, Tooele, Juab, Summit, Utah, Wasatch

Both of these and other resources are available at:

#### www.utahadopt.org/resources



#### ON THE COVER Arayanna and Drake

Arayanna has a signature sunny personality! This gal has a set of pipes on her and one of her favorite things to do is share her voice with others. Singing in the school choir is always a delight to Arayanna. Acting is another passion and she enjoys her theater class. Purple is her most liked color and reading minds would be the superpower of her choosing. Aryanna's favorite food is pizza. This social teen seems to be able to get along with everybody. Arayanna's dreams for the future include attending college; she is doing well academically in the tenth grade.

Drake thinks having laser eyes would be right up his alley! When he isn't thinking of all the cool things to do with laser eyes, this kiddo is thinking about video games. Drake is fond of computers and would tell you that his favorite time during the school day is lunch. McDonald's is one of his preferred places to grab a bite to eat. To Drake, blue and black are the most rad colors. Those who know him best remark that he is a positive child who does well with adults and peers. He can see himself working with computers when he is grown. Drake is now in the ninth grade.

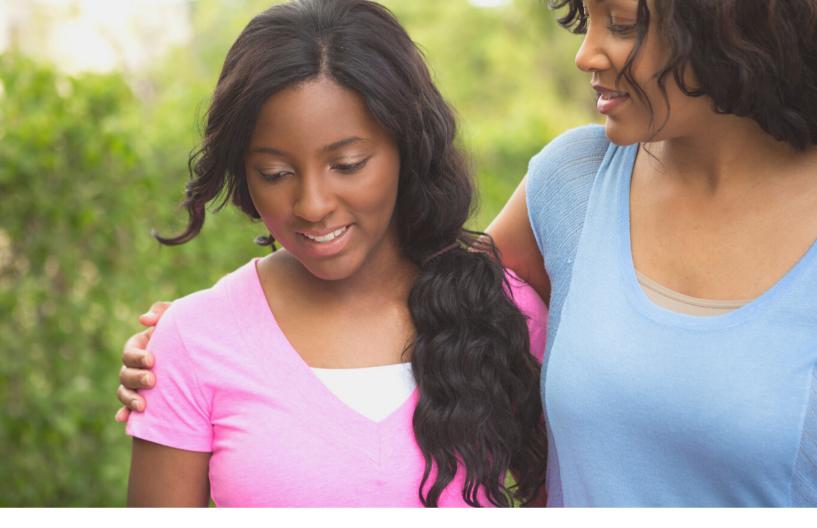
If you can provide Arayanna and Drake the love, connection, support, and permanency they deserve to have together, you are urged to inquire. They have significant connections they will need to maintain following placement. We will only accept inquiries on the pair of siblings, as they will be placed together. Financial assistance may be available for adoptionrelated services.

This is a LEGAL RISK ADOPTIVE PLACEMENT.

For families outside of Utah, only those families who have a completed home study are encouraged to inquire.

#### FEBRUARY 2022 EDITION Kathy Searle, Editor

Lindsay Kaeding, Design Director To submit articles or for a subscription, call 801-265-0444 or email kathy.searle@raisethefuture.org. This publication is funded by the State of Utah, Division of Child and Family Services. Raise the Future 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 emailing amyers@utah.gov.



# Imperfect Parenting Grows Resilience

Relationship has nothing to do with perfection. We are going to mess up. Our kids are going to mess up.

BY ROBYN GOBBEL AND DR. AMY STOEBER

#### Meet Dr. Amy!

Dr. Amy Stoeber is a clinical psychologist in the Portland, OR area. She has a small private practice where she works with kids and families who have a history of trauma and toxic stress. Amy also trains medical professionals on recognizing trauma in their patients and families, and then helps them know how to support the building of strong thriving families and resilient children.

#### Trauma-Informed Resilience

Amy is at the forefront of shifting the conversation around trauma away from "What's wrong with you?" and toward the important conversation on resilience.

As families and professionals develop an understanding of Adverse Childhood Experiences and then a broader understanding of the impact of trauma and toxic stress, the conversation is beginning to focus more on the question of "now what?"

#### What is resilience?

A common definition of resilience is **the ability to bounce-back.** Amy talks about how many survivors of trauma don't resonate with that definition and added that "trauma survivors don't feel particularly bouncy."

Resilience: the ability to overcome and face challenges and be strengthened rather than defeated by them.

But Amy went on to emphasize that resilience isn't the responsibility of the survivor. Relationships, systems, and community all help to co-create resilience. We can all take responsibility for creating experiences that promote resilience within one another and our communities.

#### Buoyancy

A few years ago, I worked with a group of moms and one of the moms stated that she wanted to feel 'buoyant.' She knew that the stress and chaos in her home wasn't likely to change much, and that there came a point where she couldn't really even control that.

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What she was aiming for was to increase her capacity to just 'ride the wave.'

She wanted to be able to ask herself, "What can I do in this moment that could support my nervous system to be more buoyant- so I can ride the wave instead of being taken over by the tsunami?"

Amy and I talked about how resilience isn't about toxic positivity or looking for the good in the trauma. Resilience is about acknowledging the impact of trauma and then finding ways to move forward as a person impacted by trauma.

#### How Do We Build the Buffering?

Whether a child has had a traumatic history or not, relationship builds the buffering. This is true about all kids, actually. A history of trauma definitely makes it more challenging to build resilience but it's the same path- safe, stable, nurturing, and consistent relationships.

Within those relationships, children need unconditional love.

#### What is Unconditional Love?

Unconditional love means that children can feel that their caregiver's love for them persists even when they have challenging behaviors.

Unconditional love, Amy says, is our ability to separate our kids from their behavior. Kids will always challenge us as adults- they are supposed to test boundaries! Kids with a history of trauma can have extremely challenging behaviors. Unconditional love is a clear message to a child that no matter what, you aren't going anywhere. Amy clarified that unconditional love doesn't mean we always like our kids' behaviors or even just like them in general. Unconditional love isn't about being a perfect parent; it's about communicating to kids that we aren't going anywhere.

#### Understanding the 'Why' Behind Behavior

Amy and I talked about my love for teaching parents the theory behind behavior. I have found repeatedly and consistently that when adults understand why their children are acting the way they are- whether it's because this is developmentally normal boundary-pushing behavior or it's a behavior that has emerged from their trauma history- they are able to stay more regulated and communicate this experience of unconditional love.

If we understand that our child's attachment trauma is contributing to their bizarre behavior, if I can make sense of that behavior, then I as the adult can separate my child from their behavior.

I can also separate myself from their behavior- not take it personally!

And...I can set a boundary more effectively.

This all helps us anchor back into unconditional love- which brings us back to resilience.

#### Hope versus Expectation

Amy and I laughed a bit about how I wrote about hope versus expectation in my series on attachment.

All of us hope to receive unconditional love in relationships. Many of us, because of our own history in relationships, also have the expectation that we won't receive it- so we behave in ways that make it more likely **we will receive what we expect as opposed to what we hope.** 

As parents, if we can understand this, we can again soothe ourselves and stay connected to our children's hope for unconditional love even when they are acting in ways that seem to say they don't want any connection.

#### Self Compassion

This is hard!!! Amy and I are professionals who live and breathe practicing this and we don't always get it right- in both our personal and professional lives.

So of course the parents we work with aren't always going to get it right and definitely our children aren't going to always get it right. Luckily, none of us have to get it right all the time- and this brings us back to **self-compassion**.

We all mess up. A lot. We all had parents who messed up. Maybe a lot. When we know this is normal and can let go of our expectation to be perfect, we can make a repair when we mess up.

#### The repair matters and it matters a lot.

Ruptures are going to happen in relationships. It's impossible to avoid a rupture and even if we could, we wouldn't want to.

#### Rupture & Repair

In the interview, Amy and I get a little geeky with excitement about rupture and repair. I am a rupture and repair fangirl because:

- It's a learnable skill
- It can be scaffolded

For so many parents, repairing a rupture feels so vulnerable. It feels like an impossible task.

#### It's not!

Repair can start with a tiny gesture and not an overt repair or apology. The vulnerability of repair can be titrated and tolerated over timepromise!

#### **Imperfect Parenting is Perfect**

Relationship has nothing to do with perfection. We are going to mess up. Our kids are going to mess up.

Attachment research shows us attunement happens in securely attached relationships about 33% of the time. **The rest is just rupture and repair.** Repair, of course, requires attunement which brings the percentage up to about 70% attunement. Ruptures make repairs possible- they aren't bad, we just have to follow up those ruptures with a repair.

Robyn Gobbel, LMSW-Clinical, has over 15 years of practice in family and child therapy experience, specializing in complex trauma, attachment, and adoption. Robyn is a therapist, trainer, and consultant who recently relocated to Grand Rapids, MI from Austin, TX. Robyn's has integrated her diverse clinical training, including in-depth study of attachment theory and the relational neurosciences, to create an attachment-rich, sensory-sensitive, and relational.





# How Can We Help Kids With Self-Regulation?

#### BY CHILD MIND INSTITUTE, REPRINTED WITH PERMISSION

If you're a parent, chances are you've witnessed a tantrum or two in your day. We expect them in two-year-olds. But if your child reaches school age and meltdowns and outbursts are still frequent, it may be a sign that they have difficulty with emotional self-regulation.

Simply put, self-regulation is the difference between a two-yearold and a five-year-old who is more able to control their emotions. Helping kids who haven't developed self-regulation skills at the typical age is the goal of parent training programs. And many older children, even if they're beyond tantrums, continue to struggle with impulsive and inappropriate behavior.

#### What is self-regulation?

Self-regulation is the ability to manage your emotions and behavior in accordance with the demands of the situation. It includes being able to resist highly emotional reactions to upsetting stimuli, to calm yourself down when you get upset, to adjust to a change in expectations, and to handle frustration without an outburst. It is a set of skills that enables children, as they mature, to direct their own behavior towards a goal, despite the unpredictability of the world and our own feelings.

#### What does emotional dysregulation look like?

Problems with self-regulation manifest in different ways depending on the child, says Matthew Rouse, PhD, a clinical psychologist. "Some kids are instantaneous — they have a huge, strong reaction and there's no lead-in or build-up," he says. "They can't inhibit that immediate behavior response." For other kids, he notes, distress seems to build up and they can only take it for so long. Eventually it leads to some sort of behavioral outburst. "You can see them going down the wrong path but you don't know how to stop it."

The key for both kinds of kids is to learn to handle those strong reactions and find ways to express their emotions that are more effective (and less disruptive) than having a meltdown.

#### Why do some kids struggle with self-regulation?

Dr. Rouse sees emotional control issues as a combination of temperament and learned behavior.

"A child's innate capacities for self-regulation are temperament and personality-based," he explains. Some babies have trouble self-soothing, he adds, and get very distressed when you're trying to bathe them or put on clothes. Those kids may be more likely to experience trouble with emotional self-regulation when they're older.

But the environment plays a role as well. When parents give in to tantrums or work overtime to soothe their children when they get upset and act out, kids have a hard time developing selfdiscipline. "In those situations, the child is basically looking to the parents to be external self-regulators," Dr. Rouse says. "If that's a pattern that happens again and again, and a child is able to 'outsource' self-regulation, then that's something that might develop as a habit."

Children with<u>ADHD</u> or anxiety may find it particularly challenging to manage their emotions, and need more help to develop emotional regulation skills.

#### How do we teach self-regulation skills?

Scott Bezsylko, the executive director of the Winston Prep schools for children with learning differences, says that acting out is essentially an ineffective response to a stimulus. The parent or teacher needs to help the child slow down and more carefully choose an effective response instead of being impulsive.

"We approach self-regulation skills in the same way we approach other skills, academic or social: isolate that skill and provide practice," Bezsylko explains. "When you think of it as a skill to be taught — rather than, say, just bad behavior — it changes the tone and content of the feedback you give kids."

The key to learning self-regulation skills, says Dr. Rouse, is not to avoid situations that are difficult for kids to handle, but to coach kids through them and provide a supportive framework — clinicians call it "scaffolding" the behavior you want to encourage — until they can handle these challenges on their own.

Imagine a situation that can produce strong negative emotions, like a frustrating math homework assignment. If a parent hovers too much, they risk taking over the regulation role. "Instead of the child recognizing that the work is frustrating and figuring out how to handle it," Dr. Rouse explains, "what they feel is that the parent is frustrating them by making them do it."

Scaffolding in this situation might be helping the child with one problem, and then expecting them to try the rest. If they feel frustrated, they might get up and get a drink. They might use a timer to give themselves periodic breaks. The parent would check in on them at intervals, and offer praise for their efforts. If a child is prone to melting down when they're asked to stop playing a video game, scaffolding might be practicing transitioning away from the game. "You'd want to practice with a game in which they're not overly invested — you don't want to begin with high-stakes," Dr. Rouse explains. "Have them practice playing for two or three minutes and then handing you the game. They get points towards something they want every time they do it."

#### **Practice runs**

Dry runs are another way to scaffold self-regulation. For instance, if you've had trouble with a child reacting impulsively or having a tantrum in a store, make a short visit when you don't need to do serious shopping. Have them practice walking with you, keeping their hands to themselves. They get points towards some goal every time they are successful.

Dr. Rouse says that often parents get discouraged when things don't go well the first time they try skill-building, but consistency and starting at a level that is appropriate for your child are key. Rather than giving up, try paring down the activity so it is more doable, and slowly give your child more and more independence to handle it.

For instance, if brushing their teeth is a problem for your child, you might start by focusing just on putting toothpaste on the brush, and respond with positive feedback and rewards when they do it. Once they've practiced that a few times, add the next step in the chain.

Similarly, if getting out the door in the morning is causing meltdowns, target one step at a time. First, say, getting dressed by 7:15. Once they've mastered that, set a target time for breakfast, and add that. Breaking the chain into small steps allows them to build self-regulation skills in manageable increments.

#### Help kids become self-reflective

Bezsylko stresses that when parents or teachers approach impulsive, inappropriate behavior calmly and give them time, kids can learn to choose better ways to respond to that situation. The feedback kids need is non-judgmental and non-emotional: what went wrong, and why, and how they can fix it next time.

"When kids are part of an environment that's reflective and analytic as opposed to emotional and fast-paced," Bezsylko explains, "they can learn to make better choices." Slowing down allows children to become more thoughtful, reflective and selfaware. "We need to slow down and model self-reflection and selfawareness and self-regulation for our kids," he notes, "but it's also helpful and good for us, too."

Bezsylko notes that mindfulness and meditation are good for everyone, but especially for children with self-regulation challenges. And Dr. Rouse mentions the many parent training programs available to help them become better coaches for their kids. For older kids, dialectical behavior therapy (DBT) is also an option, as it focuses on distress tolerance and emotion regulation.

At the end of the day, though, nothing can replace the work of the parent. "It seems to me," says Dr. Rouse, "that the family environment is the most important piece."

#### About the Child Mind Institute

Millions of children – as many as 1 in 5 – struggle with mental health or learning challenges. Fully 70% of U.S. counties do not have a single child and adolescent psychiatrist. Due to stigma, misinformation, and a lack of access to care, the average time between onset of symptoms and any treatment at all is over 8 years. Our children deserve better. That's why the Child Mind Institute was created.

We're dedicated to transforming the lives of children and families struggling with mental health and learning disorders by giving them the help they need. We've become the leading independent nonprofit in children's mental health by providing gold-standard evidence-based care, delivering educational resources to millions of families each year, training educators in underserved communities, and developing tomorrow's breakthrough treatments.

#### Together, we truly can transform children's lives.

#### www.childmind.org





www.AdoptionLearningPartners.org

#### Meet Adoption Learning Partners (ALP)!

For almost twenty years, AdoptionLearningPartners.org has offered education and support for people preparing to adopt, foster & adoptive families, and professionals working in areas of adoption.

#### Some of our most popular courses and webinars taken by families:



Adult adopted people reflect on critical junctures in their childhood and teen years. Stories are supported with clinical insight and tips from our expert.

#### Connecting Your Family Inside and Out

In this webinar, expert Dr. Dan Hughes shares family-centered strategies on how to connect to a child. With Lynn Wetterberg, former Executive Director of ATTACh.



Four courses to help you understand and manage the impact a difficult beginning has on a child.

#### We're Home! Now What?

Designed to address immediate concerns after an international adoption, there are two versions: one for those who adopted toddlers and one for school-aged children.

#### Some Reasons to Use ALP:

- Entirely web-based no special platform needed.
- Self-paced and available 24/7.
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- Take just what you need when you need it.
- Prices range from \$10 to \$45 for a single course or webinar.
- · Automatic package and volume discounts.
- Certification available for most courses and webinars.

#### **Get Started Today!**

info@AdoptionLearningPartners.org

### Self-Care of the Caregiver: Trauma Stewardship for Foster and Adoptive Parents

"The expectation that we can be immersed in suffering and loss daily and not be touched by it is as realistic as expecting to be able to walk through water and not get wet."

~ Rachel Remen, Kitchen Table Wisdom: Stories That Heal

It is an inescapable fact that the children in our care have all been exposed to some form of trauma. Simply being brought into care is a traumatic process that involves the loss of everything with which the child is familiar; in addition, the experiences that lead to children coming into care – abuse/neglect, domestic violence, substance abuse, etc. – add to their trauma burden. As caregivers, we are exposed to these difficult stories on a daily basis, and we feel their impact profoundly as we parent children whose moods and behavior reflect the pain they feel. In this way, their trauma becomes our stewardship.

Trauma stewardship is a term introduced by Laura van Dernoot Lipksy and Connie Burk to describe the practice of being self-aware and intentionally caring for oneself in order to remain effective and to prevent becoming overwhelmed by the challenge of caring for others. For foster parents, this means helping the children we serve manage their suffering without taking it on as our own.

When we do not acknowledge or address our own trauma stewardship we place ourselves at risk for burnout, compassion fatigue, and vicarious trauma.

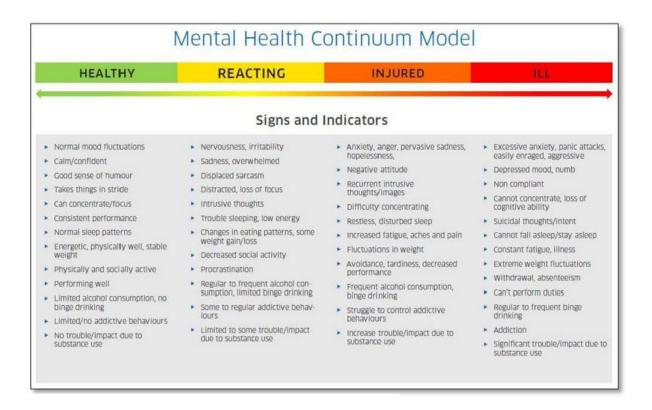
<u>Burnout</u>: a feeling of physical and emotional exhaustion resulting from prolonged stress and frustration leading to a depleted ability to cope with demands and feelings of powerlessness.

<u>Compassion Fatigue</u>: a deep erosion of our compassion and our ability to tolerate and care about the strong emotions and difficult stories of others.

<u>Vicarious/Secondary Trauma</u>: a change in how we view the world that results from repeated exposure to the traumatic experiences of others.

Foster caregivers are especially vulnerable to vicarious trauma because we naturally become attached to, protective of, and concerned for the children we serve and support, often for extended periods of time. It is normal for us to struggle with concern for these children, the frequent reminders of the obstacles they face, and the human desire to relieve their pain. Over time these struggles can overwhelm us. Without realizing it, we may become hopeless, detached, and exhausted rather than resourceful, connected, and energetic.

Warning signs of vicarious trauma/compassion fatigue include a sense that one can never do enough, hyper-vigilance, diminished creativity, an inability to embrace complexity, physical ailments, difficulty listening, and deliberate avoidance. The Mental Health Commission of Canada offers a Mental Health Continuum Model that suggests a range of well-being with two extreme ends. It is normal for foster caregivers to find themselves at various places on this continuum, depending on the stressors we experience and our ability to cope.



By engaging in the practice of self-care through trauma stewardship, we can avoid time spent in the "red zone" when dealing with situations that threaten our own well-being and sense of balance.

#### Self-Care with Intention: The Practice of Trauma Stewardship

The following personal self-care strategies, adapted from the book *Supporting the Wounded Educator: A Trauma-Sensitive Approach to Self-care* by Hendershott and Hendershott, are good suggestions that apply to foster caregivers who are feeling the impact of parenting children with traumatic experiences.

**#1: Journal.** Journaling is a safe place for us to decompress negative emotions and situations, as well as to create a space where we can realize that there is hope amid chaos and stress. Use writing to "download" and process your experiences as a foster caregiver.

**#2:** Choose Your Words Wisely. It seems to be human nature to criticize ourselves, especially in difficult parenting situations. Be aware and fight this tendency; be intentional with your positive self-talk.

**#3: Know Your Triggers.** There is strength in understanding how we react to situations that upset us and cause us emotional distress as parents. Allow yourself to feel what you feel, learn to understand *why* you are responding the way you are, and know that you have the skills and experience to manage triggering situations.

**#4: Unplug.** The quantity and quality of time invested in our devices (media, gaming, social media, etc.) often leaves us in a worse emotional space than when we started. Be mindful and hold yourself accountable for the impact time and mental energy spent is having on your own sense of well-being and parenting effectiveness.

**#5:** Learn to Say No. It is necessary for us to create healthy boundaries by declining requests that create anxious, burdensome feelings. Be sure your "yes" to other people is not a "no" to you that drains away the mental and emotional resources you need to care for yourself and others.

**#6:** Learn to Say Yes. Sometimes natural helpers and caregivers are the slowest to accept help from others. Be willing to say "yes" when someone offers their time or resources to ease your burden.

#7: Be Intentional with Kindness Toward Others. Acts of kindness are self-renewing for us as the giver as well as for the receiver. Look for opportunities, no matter how simple or small, to make someone else's day brighter.

**#8:** It's Not a Competition. Brené Brown is quoted as saying "comparison kills creativity and joy". Stop measuring yourself and your parenting gifts against what you think others bring to the table; your situation is uniquely your own.

**#9: Laugh.** "Against the assault of laughter nothing can stand" (Mark Twain). Laughter really is the best medicine. Learn to see the humor in the situations being a foster family brings, find your inner child – and don't go a day without laughter.

**#10:** Know When to Say When. Those of us who do this difficult work care deeply about the children we serve and often exhaust ourselves by burning the candle at both ends – continuously. No one can keep this up forever. You don't need a justifiable reason to take time for yourself; give yourself permission. Keep allowing space for the best version of you to be at the forefront of your days.

In addition to personal strategies, it is important that foster caregivers have connections to other parents and professionals who understand our situations and the unique challenges we face. The following self-care suggestions are useful when considering our relationships and interactions with others as we do this critically important work.

**#1: Be a Trusted Colleague.** We all need a colleague who knows how to listen, to laugh, and to offer constructive feedback. Be a safe and supportive resource for other foster caregivers and professionals.

#2: Avoid Negative Interactions. "Everything influences each of us, and because of that I try to make sure that my experiences are positive" (Maya Angelou). Don't allow negativity to overly influence your perspective and change the way you view your work.

**#3:** Be A Mentor – Find A Mentor. The greatest benefit of mentoring is relationships; healthy, honest, mutually renewing relationships. Seek out other foster caregivers to learn from and then pay it forward by sharing your experiences and wisdom with others.

#4: Forgive. In the heated and stressful environment of foster care, there are often intense moments and painful interactions in which we are not always our best selves. Forgive others for these inevitable episodes and recognize they are only human; and don't forget to grant yourself the same compassion.

#### Conclusion

When we view the trauma of the children we serve in terms of stewardship, we remember that we are being entrusted with their stories and often their very lives. We recognize that this is an incredible honor as well as a tremendous responsibility. No work is more important than that of being a foster caregiver. Committing to our own self-care with planned strategies makes us more effective and reduces burnout, compassion fatigue, and vicarious trauma.

**Sean Camp, LCSW** has 17 years of university teaching experience and 27 years in clinical practice in the field of foster care and adoption. Sean specializes in working with LGBT youth and adults, abused/neglected children, and child sexual behavior management. He currently serves as the Clinical Director for a local treatment foster care agency.



# The Importance of Play

BY MEGAN JENSEN, RAISE THE FUTURE

I have worked in the field of early childhood for over 25 years. Working with children is what I know and simply the best way for me to "fill my cup." As a previous preschool director in both public and private settings, I was asked the same question year after year: "All they do is play here – what are they learning?"

Each time this question was posed to me, I would take a deep breath and begin a well-memorized verse: "It's clear that education is really important to you and your family. I would love to fill you in on a secret that most adults don't know. The very best way your child is going to learn mathematics, science, literacy, language, and how to become a good human in general is through PLAY!" It's very easy for me to talk about the importance of play when it comes to learning and it's even more powerful when I transfer this knowledge to the power of play as a tool for *healing*.

Life in the United States is hard right now. It's hard to exist in a space of worry, it's hard to be cooped up in your home and have all the activities you have been anticipating taken away from you, and it's *really* hard to exist in a world with so much social injustice, particularly with regards to race. While not everyone has a trauma history or lives with a child who has experienced trauma, **it can be argued that we are** *all* **experiencing varying degrees of trauma right now**. It's critical to remind ourselves of that little secret once more: **The VERY BEST way for us to heal and become good humans is through PLAY!** 

You might be wondering how I can even think about playing with all that is going on right now. You might be thinking that to go out and play is frivolous or even borderline insensitive. Perhaps you're simply overwhelmed and cannot think of adding anything to your plate, as too many people are relying on you to be stable amid all the chaos and uncertainty. I, however, would argue that **we all (especially our children) MUST find and reserve the time for simple, joyful play.** 

Play is not frivolous. It is not a luxury. It is not something to fit in after completing all the important stuff. Play is the important stuff. Play is a drive, a need, a brainbuilding must-do.

> Jeff A Johnson & Denita Dinger (Let Them Play)

At Raise the Future, we use the trauma-informed model called TBRI® (Trust Based Relational Intervention®), developed by Dr. Karyn Purvis and Dr. David Cross. Dr. Purvis explained, "Play disarms fear, builds connectedness, and teaches social skills and competencies for life." Through TBRI®, we have discovered that children cannot heal from their trauma until their stories have been acknowledged and discussed. For various reasons including age, mastery of language, and brain development, talk therapy is not necessarily an effective way to address unresolved trauma for our youth. Play, however, magically bridges this gap and helps children begin the journey of deeper healing.

Research also tells us that when we experience joy, our brain releases the good chemicals (serotonin and dopamine) throughout our bodies. These chemicals directly boost our immune system, fight stress and pain, and promote a healthier lifestyle in general. It is important to note that when a child is in a state of fear, they cannot engage in play without help from adults. This makes it even more imperative that we pause and preserve a space to play with the precious children we love and care about.

At this moment, we all have a choice regarding how to move forward during a global pandemic and a world grappling with the reality of longstanding racial inequity. The good news is that play is accessible to all of us – regardless of color, social class, or status. Play is a language that transcends ages, cultural backgrounds, and linguistic barriers. Best of all, play doesn't need to be extravagant or complex to give our bodies the benefits it provides; you have the power to create this scenario in your home right now! Try putting down your phone and looking at your child with kind, warm eyes; draw someone close and give them a playful hug; get down on the floor and play a game of rock-paper-scissors; get dressed up and have a photo shoot; turn on some music and just dance in the kitchen!

Today, I am presenting a challenge for all of us: Put down your to-do list, disconnect from technology...and JUST GO PLAY!

Megan Jensen M.A. Early Childhood Education Family Support Services Professional at Raise the Future

Megan Jensen has worked with Raise the Future since 2018 in our Post Permanency prong of service in Colorado. She holds a Master's Degree in Early Childhood Education and worked in the public and private school system for 20 years prior to joining Raise. She has extensive experience working with children birth to 18 years old, but holds a dear place in her heart for children aged birth to five years old. She holds an Infant and Toddler Endorsement with the State of Colorado and recognized early in her tenure how beautifully Trust Based Interventions used with children exposed to adverse early childhood experiences compliments educational best practices for all children.

#### **Claiming the Federal Adoption Tax Credit for 2021**

For adoptions finalized in 2021, there is a federal adoption tax credit of up to \$14,440 per child. The 2021 adoption tax credit is NOT refundable, which means taxpayers can only use the credit if they have federal income tax liability.

The credit applies one time for each adopted child and should be claimed when taxpayers file taxes for 2021.

To be eligible for the credit, parents must:

- *Have adopted a child other than a stepchild* A child must be either under 18 or be physically or mentally unable to take care of him or herself.
- **Be within the income limits** Income affects how much of the credit parents can claim. In 2021, families with a modified adjusted gross income below \$216,660 can claim full credit. Those with incomes from \$216,660 to \$256,660 can claim partial credit, and those with incomes above \$256,660 cannot claim the credit.

#### The Amount of Credit to Be Claimed

Families who finalize the adoption of a child with special needs in 2021 and fulfill the eligibility requirements above, can claim the full credit of \$14,440 whether or not they had any expenses. (This doesn't mean they will actually receive a refund—claiming is different from being able to benefit.)

Example — A woman adopts three of her grandchildren from foster care, and the state paid all of the fees. All three children receive monthly adoption assistance benefits and thus are considered special needs. Because the grandmother earns less than \$216,160, she can claim the full credit of \$14,440 per child for a total of \$43,320

Other adopters can claim a credit based on their qualified adoption expenses, which are the reasonable and necessary expenses paid to complete the adoption that have not been reimbursed by anyone else. If the expenses are less than \$14,440, the adopters claim only the amount of those expenses. However, if the expenses exceed \$14,440, the adopters can claim up to, but no more than, \$14,440 per child.

#### When to Claim the Credit

Parents who adopt a child with special needs and are not basing their request on expenses should claim the credit the year of finalization. Parents who adopt internationally cannot claim the credit until the year of finalization. Parents who are adopting from the U.S. and claiming qualified adoption expenses can claim the credit the year of finalization or the year after they spent the funds.

#### **Qualifying as Special Needs**

Families who finalized the adoption of a child who has been determined to have special needs in 2020 can claim the full credit of \$14,440 regardless of their adoption expenses. The credit for all other adopted children is based on the family's qualified adoption expenses.

Basically, a child with special needs is a child in U.S. foster care who receives adoption subsidy or adoption assistance program benefits (which can include a monthly payment, Medicaid, or reimbursement of nonrecurring expenses). The instructions for the 2020 tax credit explain that to be considered a child with special needs, the child must meet all three of the following characteristics:

- 1. "The child was a citizen or resident of the United States or its possessions at the time the adoption effort began (US child).
- 2. A state (including the District of Columbia) has determined that the child cannot or should not be returned to his or her parents' home.
- 3. The state has determined that the child will not be adopted unless assistance is provided to the adoptive parents. Factors used by states to make this determination include:
  - The child's ethnic background and age,
  - Whether the child is a member of a minority or sibling group, and
  - Whether the child has a medical condition or a physical, mental, or emotional handicap."

Just because a child is disabled does not mean the child is considered special needs. No child adopted internationally is considered special needs for the adoption tax credit. Not even every child adopted from foster care is considered special needs (about 10 percent of children adopted from care do not receive adoption assistance support). Those who do not receive any support from the adoption assistance program are likely not to have been determined to have special needs.

Bottom line, if your child does not receive adoption subsidy/adoption assistance benefits, you will need to

have qualified expenses to claim the credit.

#### Interaction with the Child Tax Credit

The Child Tax Credit changed in 2021 to be fully refundable regardless of earned income for children up to age 17 years old. Unlike tax years 2018-2020, none of the child tax credit will be used to reduce the tax liability. This means that more families will be able to use adoption tax credit this year.

#### How Much Taxpayers Will Benefit

How much, if any, of the adoption tax credit a parent will receive depends on their federal income tax liability in 2021 (and the next five years). In one year, taxpayers can use as much of the credit as the full amount of their federal income tax liability, which is the amount on line 18 of the Form 1040 (for 2020) less certain other credits. Even those who normally get a refund may still have tax liability and could get a larger refund with the adoption tax credit. Taxpayers have six years (the year they first claimed the credit plus five additional years) to use the credit.

People who do not have federal income tax liability will not benefit this year. We encourage them to claim the credit and carry it forward to future years since the credit may become refundable again in the future.

#### **Claiming the Credit**

To claim the credit, taxpayers will complete a 2021 version of IRS Form 8839 (available at irs.gov in early 2021) and submit it with their Form 1040 when they file their 2020 taxes. Most tax software will create this form for you. Before filing, taxpayers should review 2021 Form 8839 instructions (will also be available at www.irs.gov) very carefully to be sure that they apply for the credit correctly and to see if anything has changed. The instructions are needed to calculate how much of the credit will be used.

The instructions state that taxpayers may e-file their tax return to claim the adoption tax credit—there is no requirement to paper file the return. There is also no requirement to submit documentation in 2021 at this time.

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All children need to know they are precious, unique, and special, but a child who comes from a hard place needs to **KNOW IT MORE DESPERATELY.** 

-Dr. Karyn Purvis

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