# CHILD AND FAMILY SERVICES ADOPTION

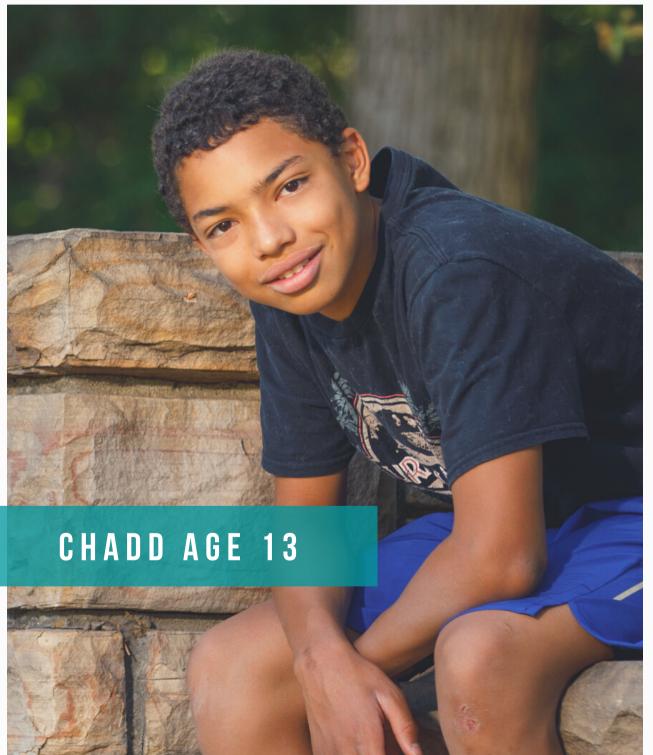


Photo by: Amy Lynn Jensen, Amy Jensen Photography

## CHELSEA, AGE 8

Photo by: Amber Schiavone

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### Raise the Future is adding additional TBRI®Family Support Services

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# The Child Mind Institute is now on YouTube

The Child Mind Institute's **Family Resource Center** offers hundreds of articles to help families support children who are struggling with mental health, behavior, or learning challenges.

We're excited to announce that this same essential information is coming to YouTube, delivered by our expert clinicians straight to your TV, laptop, or mobile device.

You can find the first six videos at the link below, and we'll be posting new videos weekly on topics from behavior and anxiety to screen time and parenting challenges.

Be sure to **subscribe to our YouTube channel** to be the first to know when we release our next video.

### https://childmind.org/resources



#### ON THE COVER, CHADD

Chad, who likes to go by "CJ," thrives when he is in the company of others! Connecting with people is paramount for this kiddo, who falls easily into conversations with those around him. Showing off his karate skills is CJ's favorite, and he appreciates staying active with sports and swimming. He also adores reading and making art. Red is typically his first color choice, and he enjoys eating pizza, French fries, and sour Skittles. When looking for a calm activity, CJ chooses video games. He is also up for some fun board games. CJ has not met a dog he doesn't like, and he is known as an eternal optimist. This social butterfly makes friends as quickly as they flap their wings, and he happily jumps in to play any activity that is happening in the moment.

He is now in the sixth grade. CJ always tries his best and is proud of his grades.

CJ would do best in a family with two dads, a mom and a dad, a single mom, or a single dad family. Financial assistance may be available for adoptionrelated services.

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

November 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

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# The Practice of Gratitude in Parenting

#### BY SAMANTHA, MILWAUKEEMOM.COM

Gratitude is one of the first concepts thrust upon us in our experience of life. Think about it. Was "Thank you" not one of the first words you received in language and passed on to your children? We practice it with our children from before the moment we see their language skills begin to develop, perhaps first introducing it to them with baby sign language if we're extra ambitious. Being only partially ambitious myself, with an extreme aversion to the screech, I was sure to instruct each of my children in three words in baby sign language, "More, please," and you guessed it, "Thank you!"

From Childhood, I Took Two Things from the Practice of Gratitude.

The practice of gratitude is invaluable, maybe even above all else.

The practice of gratitude is a grateful heart.

### I've taken these lessons to make a practice of gratitude that holds myself accountable for being grateful for the moments in life and the life that fills them.

While this is a worthy notion, life with my children has taken me to a deeper understanding of the practice of gratitude, a truer understanding, I believe.

#### The Practice of Gratitude I Know Now:

Comes from the Same Place of Joy and Devastation I Knew as a Child.

I am responsible for carrying on for all of us now. This is a weight I could never have imagined before, a weight that is, frankly, too much for me, too often. My joy and my devastation alike are all the more overwhelming because of it. And my gratitude is all the more real for it.

#### Is Rooted in the Coming and Going of Seasons.

In my young children, I've seen for myself that every season is but a breath. Some breaths are more like birthing a child into the world. Others are like those of the fresh air on an Autumn stroll. They each are a breath, all the same. It is encouraging to know that no struggle will last, and humbling that the best of life is not mine to keep.

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#### Is Simply Present in the Moments of Life.

The smile upon the face of any one of my children, let alone for me, or better yet for each other, fills my heart past what I ever thought it could have held. It's in these moments that I've realized the practice of gratitude is not a matter of willing ourselves grateful. By all means, we should be intentional, but it's a matter of being present where we are, honestly present. It's telling the truth when it's uncomfortable or less than desirable, but being open to what is still valuable there, simply by remaining present. It is being at peace with the truth that this moment will pass, and forgiving ourselves when we aren't. The practice of gratitude is getting back up to try again. It's a commitment to reaching our potential and venturing forward regardless of whether or not we have all the answers, because this is where life is, and it matters.

### If this still sounds too epic for you, remember that the practice of gratitude is just that, a practice.

Here are Some Practices I've Adopted that Have Made my Practice of Gratitude Mine Again.

#### Breathe.

Breathe deep. Breathe through the pain. Breathe in the goodness. You, too, might be surprised at how often you hold your breath.

#### Tune In to Yourself.

You're in a world filled with others. But you're here. What do you see? What do you want to see? Where do you want to be? What do you enjoy? Turn on that song or playlist on repeat. Belt it at the top of your lungs. Set aside time for what you enjoy. Pick up the book. Get out in the wild. Sip that warm spiced cider—light a candle. The ambiance is life-changing, and there isn't enough time in a day to be asking yourself again if it still smells like feet in here (That can't just be me).

#### Break Life Into the Moments It Is.

You don't have to have it all together all the time. Whether or not you're sure you have it all, you can undoubtedly have all a moment has to offer, one moment at a time. Let it go when a moment has gone wrong or gone to waste; consciously, let it go. Look into the eyes of your baby. Smile. Tell that special someone you love them. Do the chore that makes someone's day lighter. Speak the words that make someone's heart brighter. Pull your loved one close. Listen to the story for the seventy-seventh time. Dance. Twirl with abandon. Make the mess. Learn something new. Get lost in the game. See the adventure come to life, there, in that one moment.

This is where your practice of gratitude is. You'll be forever grateful you found it, right there, in a moment.





# How to Reduce Your Child's Exposure to Shame

#### GENERATION MINDFUL, REPRINTED WITH PERMISSION

# Shame eats away at a child's core emotional need to feel loved and connected, leaving them feeling small, unworthy, flawed, and unacceptable. As we learn to heal our shame wounds, we give our children chances for a healthy and happy emotional life. Here are 3 shame-free discipline tactics.

Shame has long been a weapon wielded to modify a child's behavior. We see it when parents and other caregivers use public shaming and humiliation as a form of discipline. For example, posting something embarrassing on social media, like that ghastly "Get Along T-Shirt" trend where parents put feuding siblings in an oversized shirt until they learned to "get along."

But shame also creeps into the quieter, everyday discipline we commonly use, like punishments, lectures, and criticisms. At times, our language is laced with shame, and even our facial expressions can drip with it. It's something we've probably all experienced as children, and its toxic effects likely linger with us even now, running the critic in our own heads. Sometimes this is the reason why we continue the cycle of shame on our own kids.

According to world-renowned shame researcher and author, Brené Brown, shame is the "intensely painful feeling or experience of believing that we are flawed and therefore unworthy of love and belonging." And this, folks, is why it is so powerful. This is why it seems to work quickly to bring a child into line, making it all the more tempting when times feel desperate. It works because it is excruciatingly painful, and it cuts to the bone. It eats away at a child's core emotional need to feel loved and connected, leaving them feeling small, unworthy, flawed, and unacceptable. When felt consistently, it sinks down into a child's self-worth, poisoning it slowly until they can no longer recognize their inherent goodness – their enoughness. And if it is not properly healed, that same child will battle their shame gremlins for a lifetime.

#### Healing Your Inner Child from Shame

As I said, we all experienced shame in childhood at some point, if not at the hands of our parents, then perhaps from a teacher, a bully, a coach, or a peer. If you're lucky, you only experienced mild shame on rare occasions, but for many children, shame was a constant companion throughout childhood, and their wounds run deep.

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The shame you experienced in childhood inevitably helped shape who you are. As a result, you may now struggle with any of these effects:

- Self-loathing
- Anxiety
- Depression
- Harsh inner critic
- Self-harm
- Self-sabotage
- Lack of boundaries
- Busyness
- Anger
- Poor self-esteem
- Suppressing emotions
- Feelings of worthlessness
- Social anxiety
- Perfectionism

I'm sure there is much more that could be added to this list, but the point is that your inner child could use some extra love to heal your shame wounds, both for your own well-being and so that you do not repeat the cycle with your own little ones.

The key to healing old shame wounds is compassion, both self-compassion and compassion from others. Because shame occurs relationally, it makes sense that it can be healed relationally by being heard, seen, and valued by another. Brown says, "If we can share our story with someone who responds with empathy and understanding, shame can't survive." Just by sharing our stories with a friend who gives us empathy and compassion, we can bring our shame to light and let it go.

Of course, compassion for yourself is also crucial. You can begin to say the things to your inner child that you so desperately needed to hear all those years ago. "You are safe. You matter. You are loved." Spend a few minutes each day meditating on these phrases. Imagine holding that little you in a great big hug of warmth and acceptance. Notice when you feel shame and offer yourself the compassion you've always deserved. Once you shine a light on your pain and meet it with empathy, it begins to heal.

#### **Reducing Shame in Your Child's Life**

In Montessori, the role of a caregiver is to help each child develop inner discipline by teaching them to think about the causes of their actions. Rather than affecting a child's behavior as result of blind obedience driven by fear or shame, Montessorians strive to teach children why certain behaviors are helpful and necessary and others are not. Young children who cannot yet fully understand cause and effect learn to trust their caregivers and follow their lead because these caregivers create an environment of order and boundaries in which children can grow.

Of course, you cannot control the actions of everyone who comes into contact with your child. He or she may still experience shame outside the home, but what a gift to have the home as a safe haven where they will be free from shame – where they can come to heal.

#### Try these shame-free discipline tactics:

1. Use concrete language and when-then statements. This helps children identify cause and effect. For example, "When you put your shoes on then we can leave to get ice cream." "When you pet the cat, pet her gently like this, then she will nuzzle up to you." "When you clean your room, then your friends can come over."

2. State the problem without blaming or criticizing. For example, rather than "You forgot to turn in your homework again? Why can't you ever remember anything?" try "You forgot to turn in your homework. Let's figure out a way to help you remember next time."

3. Validate emotions while holding boundaries for behavior. Many children are shamed for having certain emotions that they must then learn to stuff or conceal to be accepted. Those stuffed emotions always cause trouble at some point, though. By accepting and validating your child's emotions, you will help them feel seen and heard. All emotions are valid as they are part of the human experience. Learning to regulate those emotions so that they don't dictate your behavior is a key life skill.

As your child grows, you can also begin to teach them the same tools you are using to heal your inner child – meditation, selfcompassion, mindfulness, affirmations, etc. This will help them to clear out their baggage early so that they don't have to lug it around for years. By providing a safe haven at home and tools for healing the shame they encounter outside of home, you are greatly increasing their chances for a healthy and happy emotional life.



# **GRANDfamilies Program** Children's Service Society

GRANDfamilies is celebrating its 20th anniversary as a program of Children's Service Society this year. Since the first services were offered in Salt Lake County in 2002, GRANDfamilies has since been able to open doors in Davis, Weber, Cache, and Washington counties. The expansion of services across various parts of the State would not be possible without the passion and dedication that Family Advocates bring to the program and to kinship families across the State. Their Family Advocates bring personal and educational experience that builds a strong foundation from which kinship families can feel supported, receive needed resources, and find connections among other families with similar lived experiences. What started out as a small team of two staff, has grown to a team of 16 who desire to provide the best support possible for caregivers and the relative children in their care.

Family Advocates are available to meet in-person, over the phone, or through a virtual platform. An initial intake is completed to help the advocate gather necessary information to better assist caregivers in accessing resources.

Common resources Family Advocates help with are guardianship, medical and financial assistance, school admission, clothing and shelter resources, and support groups. Using the protective factors framework, Family Advocates are trained in identifying needs of families within the five different areas and help to strengthen these protective factors.

In addition to ongoing case management services, Family Advocates facilitate a 10-week psycho-educational class. These classes are available in three separate groups for caregivers, adolescents, and children. A new curriculum has been written for caregivers using the most-up-to date kinship research and data and was released in September 2022. To learn more about this new curriculum, see Chloe Weilenmann's article in this newsletter!

These classes provide a safe space for kinship to learn, feel supported, and make connections with other kinship families in their local community. At the completion of the 10-week class, families are invited to attend monthly Friend 2 Friend activities which range from picnics, holiday parties, guest presenters, giveaways, and more.

Family Advocates are ready and willing to support. Services are available to anyone currently raising a relative's child or close family friend and can be accessed at any stage in the kinship journey. Whether your kinship journey just started yesterday, or you've been doing this for 10+ years, Children's Society can help!

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Children's Service Society

#### FIND A GRANDFAMILIES LOCATION NEAR YOU:

#### **GRANDFAMILIES IN SALT LAKE COUNTY**

Children's Service Society of Utah (CSS) Grandfamilies

655 East 4500 South, Suite 200 Salt Lake City – UT – 84107

Main: 801-326-4409

#### **GRANDFAMILIES IN DAVIS COUNTY**

CSS-Grandfamilies

129 South State St., #130 Clearfield, Utah 84015

Main: 801-614-1020

#### **GRANDFAMILIES IN WEBER COUNTY**

CSS-Grandfamilies 3340 Harrison Blvd. Suite #130 Ogden, Utah 84404

Main: 801-564-6460

#### **GRANDFAMILIES IN CACHE COUNTY**

CSS-Grandfamilies 95 W 100 S, Suite 385 Logan, UT 84321

Main: 801-707-0052

#### **GRANDFAMILIES IN UTAH COUNTY**

Sara Terry 801-373-4765

saraterry@wasatch.org





# Talking to Your Adopted Teen About Racism

#### BY LIGIA CUSHMAN

I'm tired. Honestly, I'm exhausted from having these conversations with Jay. It's not fair that we've been having them since he was five years old.

Racism is Trauma...

I'll never forget the day a kid at summer camp called him the "N" word when he was just seven. It broke my heart. Why?

He had no idea what that word meant.

We didn't want to have "that" conversation with him yet.

It's funny how the world forces you into conversations that you aren't prepared to have. How it demands our children of color experience additional trauma that we can't control. But we can prepare for. As his parents, we couldn't just explain the word without explaining the origin, definition, and history of a word that breaks many hearts. Including his...he cried that night. That was eight years ago. Before the pandemic forced us all to lean heavily on news and social media. Before George Floyd changed the world and before more of the world got woke.

Today, as we prepare for Jay to get a learner's permit I am TERRIFIED. Terrified that he will meet the wrong police officer, on a random day and that will be the last time I see him. This fear is real and justified by our own experiences. This fear is not mine alone. It belongs to a village of black, brown, and multiracial families across our nation.

Recently on my IG, a white transracial adoptive mom said "but I don't want to traumatize my (black) daughter about racism." That comment got me thinking...are we as a transracial adoption community doing the hard work to understand that racism is trauma and that not talking about it neglects the survival needs of our black and brown children?

We are better than we were but truly we have a long way to go. So, where can transracial adoptive parents start to do the work? Here is what we did as a family that helped:

Do the work – it is our responsibility to understand the politics, laws, institutions, and systems that will impact our children negatively. Challenge these systems by reading, writing, and let your teen know you are their ally.

Validate your child's experiences. I'll never forget when Jay came home and was being made fun of by a peer at school because he had an afro. We not only validated his experience but we then took action and contacted the teacher.

Look at your community. Where can your child go to get what they need when it comes to racial survival skills. Does your close village include people of color?

Watch the news with your teen. I think this is a great way to have intentional conversations about race, while at the same time helping your teen begin to develop their worldview.

Love = Action. Once we exposed Jay to what was happening in the world and ways we can help, he asked if we could go to a protest as a family. Now for the record, hubby and I had never been to an actual march. But we did it. We exposed him to the truth and he found something he was passionate about.

I know the points above won't work for all families. I also know we are not doing enough to validate the needs of our children. I'm still terrified for Jay to drive. I also know he needs time to fully understand what it means for him to drive as an afro mohawk-wearing mixed-race young man. We will do the work to provide survival skills. We will pray God's grace and that he cover him and we step into this scary right of passage.

#### LIGIA CUSHMAN

LIGIA IS A DOMINICAN AMERICAN WRITER. BORN IN NEW YORK CITY. SHE SPENT MANY SUMMERS FALLING IN LOVE WITH THE WARM SANDY BEACHES AND MANGÚ OF THE DOMINICAN REPUBLIC. ALL WHILE READING EXQUISITE FANTASY ROMANCE NOVELS.

THOSE EXPERIENCES INSPIRE WORLDBUILDING IN HER NOVELS. GRADUATING WITH TWO MASTER'S DEGREES IN COUNSELING AND HUMAN SERVICES DRIVES HOW SHE BRINGS HER CHARACTERS TO LIFE. LIGIA IS LOCATED IN TAMPA, FL, WHERE SHE ENJOYS BRUNCH AND TRAVEL WITH HER HUSBAND, SON, AND THEIR TWO MINI AUSSIES, JAKE, AND OLLIE.





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Blocked Care: How to Regain Compassion for Yourself and Your Child

BY MELISSA CORKUM & LISA QUALLS

REPRINTED WITH PERMISSION FROM THE ARCHIBALD PROJECT Tricia and Sam loved being parents. When they learned about the need for foster parents in their community, they talked with their kids and decided to become licensed to foster. After their first few placements, their social worker approached them about two little boys available for adoption. Tricia and Sam were thrilled to be selected as a permanent placement. They finally had the large family they'd always dreamed of.

They knew the boys had experienced adversity in their short lives. Fortunately, they had read all of the recommended books and attended training events for adoptive and foster parents. When the boys first arrived, it seemed everything was going pretty well, with the exception of sleep. Tricia was perpetually exhausted. As the weeks went on, things began to get worse. Her son was getting very upset over seemingly small things. His crying turned into meltdowns unlike anything she'd seen before. He became aggressive towards his siblings. Tricia felt like she had entered a war zone.

She pulled out the adoption books looking for help. She posted in a Facebook group and got lots of encouraging advice. Tricia understood her son wasn't a bad kid. He was acting out of fear due to early adverse experiences. She knew she had to keep working hard to build trust with him and help him heal.

Tricia was working harder to parent than she ever had before. She continued to be loving toward her son even though he seemed to reject her over and over. When he was upset, he said he hated her, and it seemed to be true.

As the months passed, the angry words from her son hurt less. She became used to his verbal assaults; in fact, she seemed to let them roll off of her. She wouldn't let them pierce her heart. When she tried to give him affection, and he pushed her away, she told herself it didn't matter. Sometimes Tricia found herself cringing when she heard his footsteps on the stairs. She still hoped one day everything would be better. She fed him well, participated in therapy, and met with teachers. She took good care of him, but her heart just wasn't in it anymore. She found herself counting the years until he would graduate from high school and go away to college.

Sometimes Tricia wondered who she had become. How could a mother not like her child? Surely nobody would understand, so she kept these thoughts to herself. She felt ashamed that she just wanted him to go away.

#### WHAT IS BLOCKED CARE?

Like Tricia, many parents we work with through The Adoption Connection get to this place of apathy towards their child. They still love them, but liking and enjoying them has become difficult. When we prompt parents to be honest, and they realize they can trust us, they will put words to it. But most of the time these parents stay silent and withdrawn. The shame they feel is overwhelming. This leads to isolation and feelings of despair.

One mom told us, "I once was a happy mom but now I grieve for my old life. Most of my time, energy, and thoughts are consumed by how I will survive raising this child."

Why does this happen? Why does a mom, who loves her kids and is doing her very best, find that her heart has simply shut down toward her child?

Since both of us had experienced these confusing and discouraging feelings, we wanted to understand them more. Thankfully, we found answers rooted in brain science.

#### WHY A CHILD DEVELOPS BLOCKED TRUST

Let's go all the way back to what children may experience before joining a family:

- Prenatal stress or harm
- Difficult labor or birth
- Early hospitalization
- Abuse
- Neglect
- Trauma
- Change in primary caregiver

A child who is exposed to any of these risk factors develops coping strategies focused on self-preservation and identifying the next potential threat. These protective behaviors may continue after joining their new family. Parents know their children are safe now, but their children do not.

These children are survivors and the skills served them well when they were unsafe. But experiencing those risk factors can activate a premature defense mechanism that may put them in a chronic state of survival, resulting in what Dr. Daniel Hughes has termed blocked trust.

Now enter the foster or adoptive parents eager to love their new child. Their brains are primed for connection, and they continually make attempts to connect with their child and build attachment.

When there is no reciprocity of relationship and the child consistently does not respond to efforts of caregiving, parents may begin to feel ineffective and experience a sense of failure. Rejection from their child activates the defensive systems of their brain and caregiving begins to shut down. They are still meeting their child's needs, but their heart is no longer in it. The parent's brain signals them that they are fighting for survival. They cannot manage complex thinking which hinders their ability to see the need behind their child's behavior. They lose a lot of creativity and problem-solving skills, which starts a cycle of learned helplessness.

A mom wrote, "I rest some days now in where I am, yet the angst inevitably returns. Aching to like, to feel something more positive than I do, to be released to love as I was designed to love. But nothing helps—I've lost hope."

Another mom said, "When he is acting out, and I am at my worst, I can hardly be in the same room with him. It is not fair to him, but I don't know how to repair it. I never thought I would be in this position. How could anyone not like a child?"

Brain imaging has shown that the emotional experience of being rejected activates the same pattern in the brain as physical pain. When a parent approaches a child anticipating a positive response and instead gets a negative reaction, the parent may respond to the experience the same way they would respond to physical pain, by drawing away and protecting themselves. The gut reaction a parent has to a child's rejection is likely to grow stronger and reduce their capacity for empathy. Eventually, a parent experiences blocked care.

#### SIGNS OF BLOCKED CARE

We've identified ten signs of blocked care parents may experience:

- 1. They are caught up in coping with their child's behavior and lose curiosity about the meaning behind it.
- 2. They feel defensive and guard themselves from rejection.
- 3. They feel burned out, chronically overwhelmed, and fatigued.
- 4. They feel resentment toward one or more of their children or their situation as a whole. They may even regret adopting or fostering.
- 5. They feel irritable with other family and friends.
- 6. They isolate themselves.
- 7. They become cynical about helpful ideas.
- 8. They feel they have lost compassion which leads to shame.
- 9. They experience a crisis of faith or challenge of a personal belief system.
- 10. They do not feel real pleasure in parenting.

A mom wrote, "I don't get as excited about things as I used to. I'm more cynical and less confident. I don't even know if I'm capable of feeling love like I used to."

### WHAT PARENTS NEED TO OVERCOME BLOCKED CARE

Because blocked care involves the suppression of caring feelings, a parent's community may view them as uncaring and nonempathetic. It is vital to remember that what they're observing is not a character flaw but a treatable condition. Parents experiencing blocked care have fragile nervous systems that are closed off and protective. Even well-intentioned advice from a therapist, teacher, or friend can feel insensitive and judgmental which pushes parents deeper into the trap of shame. How can a parent overcome blocked care and regain compassion for their child? Interestingly, they need just what their children need: nurturing. Parents need a support person to care for them, calm their defensive nervous system, and help them regulate their emotions. This person can be a professional or a support person who genuinely cares for the parent and is willing to be part of the healing process.

What parents really need is acceptance, curiosity, and radical compassion to overcome blocked care. Acceptance is simply believing what a parent shares about how their child behaves and how they experience the child. Because of attachment challenges, a child may act differently at home than at school, therapy, or other community settings. When a parent's experience is questioned, they tend to further withdraw into shame and blocked care. Often, parents need a safe place (without the child present) where they can speak freely about their experiences and build a compassionate understanding of their child's defensive behaviors.

Curiosity is different from questioning the reality of what a parent shares or trying to change their mind. It is the genuine desire to better understand the parent's experience. Curiosity is non-judgmental and puts aside assumptions and expectations. It ultimately can help parents be more aware of their inner thoughts and emotions.

Parents need radical compassion and permission to care for themselves. All too often, parents have shelved their own needs to meet a child's high demands resulting from trauma. Many therapeutic parenting principles require great effort, energy, and patience. A support person can encourage parents to find regular respite, go on date nights, and connect with other parents in similar situations.

#### A NOTE TO PARENTS EXPERIENCING BLOCKED CARE

If you're reading this and thinking, "Wow, this sounds just like me," we want to assure you that you're not alone. Even better, there are simple practices you can do to begin the process of overcoming blocked care.

You need to nurture yourself by caring for your internal world, your external world, and your relational world. By addressing these three areas of your life, you'll begin the process of regaining compassion for yourself and your child. You may feel hope for the first time in ages.

We know how it feels to be so overwhelmed you can't imagine adding one more thing to your life. So we created the resource we wish we would have had. It's a gentle, self-paced course called From Apathy to Empathy: How to Regain Compassion for Your Child and Yourself.

Through daily emails, we help you understand what has happened in your brain and body, and give you simple tasks designed to keep you open to connection.

When asked what aspects of the course were most helpful, this is what some of the participants had to say:

"Before the course, I was feeling burned out and hopeless in my situation with my daughter. I felt alone and full of shame. After these 30 days, I have renewed hope! I really appreciated the short daily lessons that were manageable to read or listen to and apply immediately."

"At the beginning, I was feeling tired and worn down and very, very negative in my thoughts. The 30-day format allowed me to absorb a little bit of information every day, ponder it, and apply it before moving on to the next thing. I am still tired and a little fearful of the future, but my negative thoughts are nearly gone."

#### CONCLUSION

The good news is that parents can regain compassion. There is hope.

To the people reading this, you are so important. When you nurture parents you offer them a chance to heal, changing the course of their parenting journey. When a parent experiences you as a nurturing presence, their capacity to pursue their own healing and stay the course as a parent is radically increased.

And to you parents, our hearts are with you. We have walked this road and know the challenges. In fact, not much surprises us. We know there is hope for you and your family. You are a good parent, doing good work.



RAISE THE FUTURE 7414 SOUTH STATE STREET MIDVALE, UT 84047



# CONTACT YOUR POST Adoption specialist

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Davis/Weber Counties	Erma Hawker	801-668-0339
Box Elder/Cache/Weber	Emily Rodríguez	385-395-6765
SALT LAKE REGION:	Adoption Helpline	801-300-8135
WESTERN REGION:	Jill Backus (A-L)	801-717-7336
	Megan Hess (M-Z)	801-921-3820
SOUTHWEST REGION:		
Richfield/Cedar City	Shandra Powell	435-590-2299
Richfield/Cedar City St. George/ Cedar City	Shandra Powell Krystal Jones	435-590-2299 435-767-8774
-		
St. George/ Cedar City		
St. George/ Cedar City EASTERN REGION:	Krystal Jones	435-767-8774
St. George/ Cedar City EASTERN REGION: Price/Castledale	Krystal Jones Breanna Powell	435-767-8774 435-650-4986

#### The hunger center of the brain is set in-utero. If a fetus is malnourished during that time, "hungry" will be imprinted on the brain.

Hoarding can be connected to control, trauma, or hunger center imprint. Allowing some control with food will increase felt safety as this is a basic/survival need.

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