



Partners

The Newsletter For Wisconsin's Adoptive & Foster Families



A publication of Adoption Resources of Wisconsin

Summer 2012

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Adoption Resources of Wisconsin
6682 W. Greenfield Avenue
Suite 310
Milwaukee, WI 53214-3151
(414) 475-1246
V/TDD (800) 762-8063
Fax (414) 475-7007
Info@wiadopt.org
www.wiadopt.org

Partners is published by Adoption Resources of Wisconsin, dedicated to recruiting families for Wisconsin children in foster care and providing support to foster and adoptive families. The *Partners* Newsletter is written and compiled by members of the Adoption Resources of Wisconsin staff.



Wisconsin Advances Trauma Informed Initiatives

by Ann Leinfelder Grove, Vice President of Strategy and Innovation, St. Aemilian-Lakeside, Inc.

Trauma Informed Care and Therapy is an initiative that is growing across the country. Today in Wisconsin, we have around 6,500 children in foster care and around 8,000 children receiving adoption assistance. In addition, almost 7,000 children have been adopted internationally in the period 1999-2011. Most of these children have experienced trauma in their lives. It might have been from abuse and neglect, the number of times they have moved or other negative experiences in their lives. The Adverse Child Experiences data shows that the more incidences of negative experiences, the more a child may be harmed. If we have over 21,500 children who have probably experienced trauma in our state, we need to find meaningful ways of addressing this issue.

I recently had the opportunity to participate in a meeting of Fostering Futures. A number of experts, including those from the educational, research and therapeutic worlds, were present. As Wisconsin and the nation moves to incorporating trauma informed care into all families connected to the child welfare system, and all providers of services to these families and children, we will make a substantial difference. We hope you learn more from this trauma-focused Partners.

Colleen M. Ellingson, CEO

Energy around the implementation of trauma informed care in Wisconsin continues to build. There are trauma informed initiatives taking place in Wisconsin's Departments of Children and Families, Health Services, Public Instruction and Corrections, as well as in the Children's Trust Fund and dozens of private child and family serving agencies across the state. Almost every day new information and activity comes to light about our state's efforts. The opportunities to involve and engage foster and adoptive families are also growing. It is an exciting and transformational time!

Fostering Futures, a statewide workgroup that includes First Lady Tonette Walker and other public and private leaders, is part of Wisconsin's trauma informed movement, with a goal to raise awareness about trauma informed care and to make sure foster and adoptive children and families receive services and support that are consistent

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Happy Summer Everyone,

Last week I saw an incredible picture of a new wooden bridge being installed in Milwaukee. It was built by craftsmen using their knowledge, their history and their love of wood to create a bridge that will stand strong for hundreds of years because of their investment of time, energy and skills.

I started reflecting about the challenges our children have when they come from chaotic homes, poor orphanages, histories of frequent moves, abuse and neglect. As vulnerable children, they have been traumatized by their history. History plays a huge part in who we are, what we believe and how we act. Children damaged by their past find it especially difficult to move forward if no one understands their past. Scientists such as Drs. Richard Davidson and Seth Pollack of the University of Wisconsin have been leaders in looking at how the brain can be both impacted and changed over time. As scientists continue to learn more and more about the brain and its amazing ability to change and heal, we are starting to understand that we have much more ability to help children heal than we ever thought before.

One of the ways ARW has been able to work on this issue has been the development of the *Our Home Our Family*™ curriculum over the past six years. We knew that we had to address the hurts, the damages, the dreams and hopes of families so families could move forward. Evidence from the research on that curriculum showed that children had fewer fights (as did their parents), and had fewer issues at school that required parent-teacher interventions. Families found that they were functioning better and parents were feeling substantially more able to understand their children as they increased their communication/relationship skills with each other and with their children. Happier kids and happier families – a goal that should be achieved for every family!

Trauma informed care is the newest way of thinking about the children in foster care and adoption. But what does it mean? It really boils down to the essentials – understanding your child's history, being able to take in that knowledge and use your skills as you work with your children to help them heal. Ken Watson, one of my most favorite nationally-renowned therapists, always said that you had to be able to cry with your child to help them resolve their hurts and grief.

Your investment in understanding the effects of trauma, learning the skills of dealing with the behaviors and walls that children have built will make all the difference in their lives. You are the bridge-builders of your child's future. You are the most critical factor in helping them grow to be successful.



And we are always here to help you.



Colleen Ellingson
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with its guiding principles. A primary element of trauma informed care is moving away from a perspective of “what is wrong with you,” that focuses on a child’s symptoms, behaviors, diagnoses and problems, to “what has happened to you” which focuses on support, relationship and solutions.

Mrs. Walker hosted seven listening sessions around the state in April. These sessions were facilitated by Casey Family Programs consultants to encourage participants to discuss the strengths, challenges and potential solutions to implementing trauma informed care successfully.

Listening session participants included many foster parents and adoptive parents. They identified a need for better awareness of trauma informed care among medical and behavioral health providers, legislators and public administrators, schools, and in the general community. They requested an increase in the availability of trauma informed training for foster and adoptive parents and advocated that insurance and Medicaid increase coverage for trauma informed services.

Foster and adoptive families are encouraged to ask questions, seek training and advocate for the perspective shift that occurs in a trauma informed system. Working together we can create healing and hope for the children in our care.



Strategies for Helping your Child Heal

A positive relationship, one rich in understanding, acceptance, affection and consistency, is essential to any successful healing strategy. Children and young adults who have been impacted by trauma and the resulting stress response are challenged to cope with their perception of overwhelming information to process. By remaining calm and providing a safe environment, you can help your child shift into a calmer state. Following are some tips and strategies that will help you build a healing relationship with your child.

- Self-care is important: you have to care for yourself in order to continue to have compassion and empathy for others. (Please check out our tip sheet - The Balance Beam of Life: Caring for Yourself While Caring for Your Kids at: <http://wiadoption.org/Portals/WIAdopt/Tipsheets/TakingCare/SelfCare.pdf>)
- Sensory-based, patterned, repetitive activities that are age- and ability-appropriate guide your child’s healing process. (For activity ideas and suggestions, please see the article entitled *Where to Begin.*)

- In order to help your child’s healing process, try to understand each child, their experience and their triggers. In other words, identify what contributes to making your child feel overwhelmed and what calms him or her down.
- As a caregiver, you need to be a detective. Observe what’s happening around you and your child and see how he or she is responding. Is the situation at hand contributing to healthy functioning or distress?
- Encourage your child to take part in activities that are predictable, use patterned rhythmic activity and that speak to their sensory preferences.

Our thanks to Deb Buchanan of Kids Discover Success Therapeutics, LLC for sharing these tips and strategies with us for this issue of Partners. For more information, please visit www.kidscandiscover.com.

Trauma Informed Care Speeds Reunification

By Linda Steiner, St. Aemilian-Lakeside

When 7-year-old Marie came to live with St. Aemilian-Lakeside foster parent Ruby Hamilton, she had been removed from an in-patient psychiatric hospital that concluded the child was defiant, non-cooperative and doing herself more harm than good. After a little more than three months with Ruby and a daily focus on trauma informed care, Marie was getting along much better with other children and adults, displayed much less anxiety and consequent acting out, and was able to move back home with her grandmother.

"That made me feel good," Ruby said. "It made me feel like I accomplished something with her."

Deb Buchanan, the occupational therapist who helped Ruby learn several rhythmic and repetitive activities that are key to trauma informed care by promoting calming and healing, was surprised – and thrilled – that the case moved so quickly.

"It's very encouraging to know that a caregiver with the qualities of Ruby, matched with trauma informed care information, had such an impact on this girl and she was reunified so quickly," Deb said. "That's really fantastic."

"Ruby provides a sense of safety and acceptance, she is patient, and she has a calm demeanor." All of these qualities contributed to the relationship-building that also is central to trauma informed care.

Ruby said she just kept encouraging and re-directing Marie, who had experienced abuse and neglect by her biological mother. And she worked every day with rhythmic and repetitive activities, some of which she already knew about through trauma informed care training she had received at St. Aemilian-Lakeside. The regimen included bean bag tossing, hula hoops, rope-jumping, running, and ball-playing as well as deep breathing.

"It really calms them down," Ruby said. Rhythmic and repetitive activities work on the lower portion of the brain, which controls behavior in a child in the throes of anger or terror. Higher-brain functions such as reasoning and logic – "Why are you acting like this?" – are not even accessible when a traumatized child is experiencing stress and fear.

Ruby also met with Marie's grandmother and re-enforced the need for doing these activities regularly at home.

While living with Ruby, Marie spent half days in day treatment and half days in school. Ruby advocated



Ruby Hamilton
St. Aemilian-Lakeside foster parent

for Marie at her school, telling them that rather than suspending her for perceived bad behavior they should try some of the things that would stabilize her. For instance, she told them to try to give Marie a quiet place and a coloring book, because the child colors to soothe herself when she is anxious and on the verge of a full-blown crisis.

Wraparound Milwaukee and the Bureau of Milwaukee Child Welfare did safety planning with Marie's grandmother to help her understand her granddaughter's needs, and the woman also participated in therapy with Marie.

"Lots of kids in foster care have been traumatized," Ruby said. "And this trauma informed care works. It's a lot of work — you have to keep remembering and reminding the child — but it works!"

Our thanks to Linda Steiner and St. Aemilian-Lakeside for sharing this story with us for this issue of Partners. For more information about St. Aemilian-Lakeside's Trauma Informed Care program, please visit www.st-al.org/trauma-informed-care.

Keys to Keep in Mind when Interacting with a Child who has been Traumatized

Trauma informed care and services are just stepping into the local, state and national spotlight and many parents and caregivers are still unsure about trauma and the effects it has on their children. While there is more still to learn, we would like to thank Dr. Mary Hess, Ph.D., for granting ARW permission to use text from her work, "Concepts for Practical Work with Traumatized Children," in this issue of *Partners*. We hope that the information and suggestions Dr. Hess outlines in this article will help you as you work with, care for or parent your own children.

- **There are three basic functions of the brain:**

- Survival
- Safety – both physical and emotional – and
- The power of our thinking brain that makes us humane.

We can only think logically when we feel safe.

- **Traumatized children cannot regulate their emotions or their behaviors if they are not feeling emotionally safe.**

They do not know how to find safety, so the caretakers need to offer safety and understanding to them, keeping them close and reassuring them. A child who has experienced trauma cannot think clearly if they are not feeling safe. Support is the best type of help we can provide.

- **The issue that causes the conflict, for instance, a child refusing to do something or being disrespectful, etc., needs to be put aside until the relationship with the child and the child's feeling of being safe are assured.**

Once child and caregiver are calm and safe, then a solution to the problem can be discussed. If discussed too soon, the fear will return. The adult who can stay calm and reassuring will be the adult who can calm a distressed child down so they can begin to think straight. Punishment and anger will only antagonize the distress and increase the acting out behaviors.

- **Early in the morning, during transitions and bedtime are prime times when a distressed child needs special contact with loving encouragement.**

Remember that the five senses tell the child if they are safe or not. We need to reassure the child using all five senses whenever possible. If we can anticipate distress before it occurs, then we can prepare the child for it and offer reassurance. Perhaps we can even change some part of a process or routine to make it less difficult for the child.

- **Overstimulation can increase fear.** Crowds, group excitement (groups in general), loud noises, etc. may be upsetting, even if they are fun. Prepare to remove a distressed child early, before he or she loses control, if he or she shows signs of stress and anxiety. The child needs to move near a helping adult who reassures him or her that he or she will stay safe.

- **Saying what you see can help a child feel understood:** "I see that you are getting stressed, should we move over here or get a drink?" "It looks like you could use a helping hand, let's work on this together or take a break." "I hear you saying that this is unfair, I don't like things to be unfair either, let's see if we can figure out what else we can do." **If** you have a supportive relationship with the children, they will usually de-escalate when they see you understand what they are experiencing. Never judge it as right or wrong, just acknowledge it is how they see it. Gently, you can help them see it in a different way, once they are calm and feel cared for.



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Jose
DOB: 6/2/1999
#7368

Jose is a strong, Hispanic and Caucasian 13-year-old boy who tries to overcome every obstacle given to him. In the past, he has had some behavioral issues but, with a structured environment both in school and in the home, he excels with minimal behavioral setbacks. He is an amazing kid who is constantly smiling and laughing and aims to please the people he is around.

Jose is going into the fifth grade and functions developmentally at the age of a five- or six-year-old. He seems to enjoy all of his classes and has an IEP in place to receive speech and language therapy, along with occupational and physical therapy. Jose is deaf and communicates through sign language. He knows about 200 signs and requires an interpreter in the classroom. He struggles with having friends since his classmates don't know sign language and are unable to communicate with him.

Jose also has a seizure disorder and occasionally will fake a seizure although, when he is told to stop by his foster parent, he will stop. He requires regular medical appointments to check that his medications are helping. He is in need of a family who is willing to learn how to communicate with him through sign language and has the love, patience and understanding to deal with his special needs. He needs a family who will be able to make a life-long commitment to him, since it's not likely that he will be able to live independently.

Jose has a larger-than-life personality and enjoys watching cartoons and sports on TV. He also enjoys playing soccer and basketball and becomes completely enveloped in whatever he is doing. He is a very determined child who tries his hardest at everything he does.

Jose would benefit the most from a two-parent family. However, if a single parent with the experience and resources were interested, Jose's worker would also consider him or her. He would also benefit from being around other children who will set boundaries with him. Jose's worker would like to keep him in Wisconsin, but if the right family were out of state, the worker would be willing to consider them as a forever family if they are willing to make several trips to meet Jose.

Where to Begin

In our article, *Strategies for Helping your Child Heal*, we suggested that patterned, repetitive activities can help guide your child's healing process. Engaging in such activities can empower your child to regulate his or her feelings and emotions and work best when practiced on a regular basis.

When you're thinking of activities for your child or children, remember that it should be something that is familiar to him or her and one that they have or can easily learn mastery of, so as to decrease any feelings of frustration. Whatever activity you chose needs to be a good fit for your child's chronological age, as well as his or her social/emotional age. Below is a list of some suggestions that you can review with your child to see what may be interesting for him or her.

Solo activities for ages 5-11

- Jumping on a trampoline
- Tossing a ball at a target
- Sculpting/molding clay
- Puzzles
- Walking
- Running
- Swinging
- Jumping rope
- Lining up dominoes
- Dribbling and shooting basketball hoops
- Playing a simple instrument, such as a kazoo, harmonica, drum or recorder
- Slow, calm breathing
- Yoga
- Rocking in a rocking chair
- Riding a bike
- Coloring in coloring books

Solo activities for teens/pre-teens

- Any of the above
- Tai chi and martial arts (not competitive)
- Pottery, sculpting or painting
- Writing or reciting poetry
- Playing a musical instrument such as a guitar
- Hitting auto-pitched baseballs or golf balls
- Polishing a car, table or other wooden surface
- Playing Solitaire with a deck of cards
- Listening to music
- Lifting weights
- Journaling
- Walking or running
- Riding a bike
- Arts and crafts projects
- Photography
- Scrapbooking

As you get started, consider spending seven to 10 minutes with your child participating in the activity. Over the course of the day, revisit the preferred activity – or another from the list – another two or three times. To show your support and encouragement while your child is doing these activities, use eye contact, positive facial expressions, a soothing voice and a nurturing posture. Try to build these activities into your child's daily routine in order to provide a consistent and predictable schedule. Over time, these activities should help reduce the number of outbursts, tantrums or feelings of being overwhelmed in your child – and should help you and your child feel more calm.

Our thanks to Deb Buchanan of Kids Discover Success Therapeutics, LLC for sharing this information and suggestions with us for this issue of Partners. For more information, please visit www.kidscandiscover.com.



Emerging Therapeutic Approaches

When ARW resource specialists visit families who have finalized adoptions as part of our Home to Stay program, they hear many heartbreaking stories of the trauma these children suffered in the past, as well as hopeful stories of families moving forward. We bring this information to you to help you make good decisions about when your child needs therapeutic help and what kinds of help are available.

What happens in the brain when a person experiences a traumatic event? Why is it that some people can simply move forward and others struggle to do so? Is there a way to fully heal after experiencing something deeply painful, negative and traumatic? When individuals and parents of children who have experienced trauma are seeking the answers to those – and many more – questions, they often turn to therapy as a way to cope, heal and find the peace of mind that they need.

There are three emerging therapeutic approaches that trauma informed therapists use when working with children and adults who have experienced trauma. Below you'll see brief overviews of a few of these forms of treatment.

Eye Movement Desensitization and Reprocessing (EMDR)

EMDR is a type of therapy that helps the brain process information. When using EMDR, "you would focus your attention on the body sensations, feelings and negative thoughts you associate with some past traumatic event. At the same time, your therapist would move a finger back and forth about twice each second, for up to half a minute, while you followed the motion with your eyes. You would report any changes you feel. Then you would be asked to focus on more positive thoughts while you perform the same eye movements." (From Straight Talk about Your Mental Health by James Morrison, MD)

For more information about EMDR, visit www.emdr.com.

Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT)

TF-CBT is a joint child and parent therapy model for children who are experiencing significant emotional and behavioral difficulties related to traumatic life events. Gradual exposure is included in all components to help children gain mastery in how to use skills when trauma reminders or cues occur.

The components are:

- **P – Psycho-education and parenting skills**
- **R – Relaxation techniques:** Focused breathing, progressive muscle relaxation and teaching the child to control their thoughts (thought stopping).
- **A – Affective expression and regulation:** Helping the child and parent learn to control their emotional reaction to reminders by expanding their emotional vocabulary, enhancing their skills in identifying and expressing their emotions, and encouraging self-soothing activities.
- **C – Cognitive coping:** The child learns to understand the relationships between thoughts, feelings and behaviors, and think in new and healthier ways.
- **T – Trauma narrative and processing:** Gradual exposure exercises including verbal, written and/or symbolic recounting (i.e., utilizing dolls, art, puppets, etc.) of traumatic event(s) so the child learns to be able to discuss the events when they choose in ways that do not produce overwhelming emotions.
- **I – In vivo exposure:** Encourage the gradual exposure to harmless trauma reminders in the child's environment (e.g., basement, darkness, school, etc.) so the child learns they can control their emotional reactions to things that remind them of the trauma.
- **C – Conjoint parent/child sessions:** The family works to enhance communication and create opportunities for therapeutic discussion regarding the trauma.
- **E – Enhancing personal safety and future growth:** Provide training and education with respect to personal safety skills and healthy relationships.

For more information about TF-CBT, visit: <http://academicdepartments.musc.edu/projectbest/tfcbt/tfcbt.htm>

SITCAP-ART

The *SITCAP-ART* program is a comprehensive trauma intervention program, modified from the original *Structured Sensory Intervention for Traumatized Children, Adolescents and Parents (SITCAP)*. *SITCAP-ART* combines cognitive strategies with sensory activities. When memories cannot be recalled verbally, it remains in your senses. To retrieve that memory – to give language to that memory – it must

Continued on next page

be found and brought into the open. *SITCAP-ART* supports moving the child from victim to survivor thinking, allowing changes in negative behaviors and making adolescents more resilient to future traumas.

For more information about *SITCAP-ART*, visit: <http://tlcinstitute.org/PTRC.html>



Your doctor or therapist is truly the best source when it comes to learning about the various types of therapeutic interventions available when working with children who have experienced trauma. We encourage you to speak with your child's therapist for a more in-depth explanation of the benefits and processes of each.

Each of the approaches listed here has been identified by the California Evidence-Based Clearinghouse for Child Welfare (CEBC). CEBC provides child welfare professionals throughout the country with easy access to vital information about selected child welfare related programs. The primary task of the CEBC is to inform the child welfare community about the research evidence for programs being offered. ARW does not recommend any specific therapeutic interventions.

Resources Available

Eye Movement Desensitization and Reprocessing (EMDR)

EMDR therapists in Wisconsin

http://therapists.psychologytoday.com/rms/prof_results.php?state=WI&s6=10

EMDR Books:

http://www.emdr.com/store.html?page=shop.browse&category_id=2

Dance Movement Therapy (DMT)

Child and Family Dance/Movement Therapy Sessions:

<http://hancockcenter.net/index.php?page=child-family-dmt-sessions>

Art Therapy

Wisconsin Art Therapy Association:

<http://wiartherapy.org/>

Music Therapy

Wisconsin Chapter for Music Therapy:

<http://musictherapywisconsin.org/>

Therapeutic Riding:

www.wisconsin-horse.com/therapeutic-riding.htm

Trauma Informed Care Overview:

<http://www.st-al.org/trauma-informed-care/>

The National Child Traumatic Stress Network (NCTSN) has online classes:

<http://learn.nctsn.org/course/index.php>

From the ARW Library:

Analyze This! - A Teen Guide to Therapy and Getting Help by Youth Communication

Beneath The Mask: Understanding Adopted Teens

by Debbie Riley. Working with adopted adolescents is complex. The key to successful therapy and healthy development is to help the adolescent discover and accept the person within.

The Kazdin Method for Parenting the Defiant Child

by Alan E. Kazdin, Ph.D. A lifesaving handbook for parents of children who are occasionally, or too often, "out of control." Includes a bound-in twenty-minute DVD featuring Dr. Kazdin and his staff illustrating key concepts. Kazdin leads parents through every step of the Kazdin Method in action—how to use tone of voice, when and how to touch, how to lead your child

in a “practice” session, how to adjust your approach for different-age children, how to involve siblings and more.

Instinct to Heal: Curing Depression, Anxiety and Stress Without Drugs and Without Talk Therapy by David Servan-Schreiber. Scientific studies prove certain alternative treatments can work as well as or better than medication. There are seven natural approaches to form a treatment plan that builds on the body’s relationship to the brain.

Creative Expression Activities for Teens: Exploring Identity Through Art, Craft and Journaling. Coping with life’s stresses is difficult for everybody, but can be especially challenging for teenagers who feel isolated and misunderstood. Creative expression through art, craft and writing is a very natural and effective way of helping young people to explore and communicate personal identity. This book is bursting with art and journal projects, creative challenges, and miniature projects for personal spaces, all of which help teenagers to understand and express who they are and what is important to them.

Children and Adolescents In Trauma: Creative Therapeutic Approaches presents a variety of creative approaches to working with young people in residential children’s homes, secure or psychiatric units, and special schools. The contributors describe a wide range of approaches, including art therapy and literature, and how creative methods are applied in cases of abuse, trauma, violence, self-harm and identity development.

Getting Past Your Past: Take Control of Your Life with Self-Help Techniques from EMDR Therapy Shapiro, the creator of EMDR (Eye Movement Desensitization and Reprocessing), explains how our personalities develop and why we become trapped into feeling, believing and acting in ways that don’t serve us. Through detailed examples and exercises, readers will learn to understand themselves, and why the people in their lives act the way they do. Most importantly, readers will also learn techniques to improve their relationships, break through emotional barriers, overcome limitations and excel in ways taught to Olympic athletes, successful executives and performers.

Getting Thru to Your Emotions with EFT: Tap Into Your Hidden Potential with the Emotional Freedom Techniques Many people consider the Emotional Freedom Techniques (EFT) a modern miracle. These easy-to-do processes are revolutionizing the field of psychology. By simply tapping on stress-relief points on the body, you can use these techniques to clear stuck emotions and self-defeating patterns, producing profound breakthroughs. It’s usually fast and amazingly effective.

Healing Parents: Helping Wounded Children Learn to Trust and Love by Michael Orlans, M.A. and Terry Levy, Ph.D. gives parents/caregivers the information, tools, support, self-awareness, and hope they need to help a wounded child heal emotional wounds and improve behaviorally, socially, and morally.

The Jonathon Letters: One Family’s Use of Support as They Took in, and Fell in Love with, a Troubled Child by Michael Trout and Lori Thomas. This book gathers together an exchange of letters between Lori Thomas, the foster/adoptive mother, and Michael Trout, Director of The Infant-Parent Institute in Illinois, over the first year of placement of a particularly troubled child suffering from attachment disorder. It’s a story of ups and downs, because that’s how it is with children whose beginnings have been so tortured. But the reader begins to get a sense of the driving energy of this unique family, who somehow bounce back after every regression, and find ways to understand Jonathon’s defiance and rage and to remain connected to their purpose—to help this child heal.

Creating Loving Attachments: Parenting with PACE to Nurture Confidence and Security in the Troubled Child, by Kim S. Golding and Daniel A. Hughes. All children need love, but for troubled children, a loving home is not always enough. Children who have experienced trauma need to be parented in a special way that helps them feel safe and secure, builds attachments and allows them to heal. Playfulness, acceptance, curiosity and empathy (PACE) are four valuable elements of parenting that, combined with love, can help children to feel confident and secure. This book shows why these elements are so important to a child’s development, and demonstrates to parents and carers how they can incorporate them into their day-to-day parenting. Real life examples and typical dialogues between parents and children illustrate how this can be done in everyday life, and simple stories highlight the ideas behind each element of PACE.

PLEASE NOTE: ARW’s role is to provide you with complete, up-to-date information on available forms of therapy and not to endorse any of those options.

Home to Stay – Complete

Written for this issue of Partners by adoptive dad Chris Pritzl.

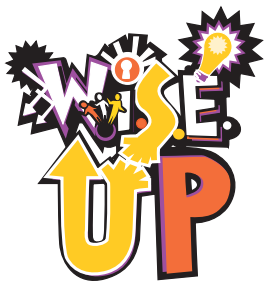
In 2009 my wife Rebecca and I became licensed foster parents. For the first few months, several teenagers spent time in our home and in our care. Then, in February 2010, we met twin 13-year-old boys, Josh and Joe, and had two weekend pre-placement visits. Only a few months later, on April 6, the boys moved into our home for foster care with the possibility of adoption.

Josh and Joe began school here in Kenosha where they both received comprehensive IEPs (Individualized Education Plans). As a result, we could work with the school to measure their educational growth each quarter. Josh quickly became active in football, basketball, track and field, and boxing. Joe also participated in football and track and field. They seemed to fit right in, as our family keeps active and involved with a variety of community activities and sports. This past school year, Joe placed first in Kenosha City Track and Field with the 200 meter run and long jump. In June, Josh won Title National Championship, 132# weight division, 15–16-year-old group and advanced to the Junior Olympics USA boxing in Mobile, Alabama.

We became a forever family in on November 4, in Kenosha with the support of our friends, family and the boys' maternal family. Just this April, we traveled together to visit our new family through the boys in Memphis, Tennessee. We continue to grow together as a family and enjoy the addition of new family members that the boys bring with them. As parents, Rebecca and I can't remember what life was like before Josh and Joe came in our lives. The best way to describe it is to say that, now, we are complete.

The Pritzl family is just one example of a Jockey "Home to Stay™" family. Before their Home to Stay visit, personalized backpacks were created for their children containing books, games, blankets and other goodies to help the family further celebrate adoption finalizations. If you have recently completed a special needs adoption and would like to take part in the Home to Stay program, please contact us at 414-475-1246 or 800-762-8063.

Jockey being Family® and ARW are teaming up for two special events!



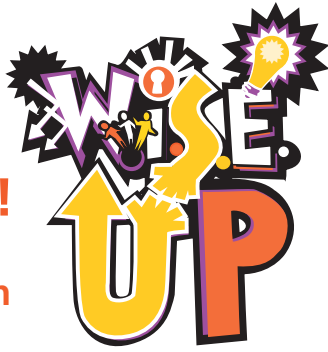
Jockey Being Family® (JBF) and ARW have offered several W.I.S.E. Up the World about Adoption trainings in Kenosha, Milwaukee and Wausau. We are very excited to bring this curriculum to Eau Claire on September 22nd. This is a great half day event which helps kids learn how to talk about their unique "adoption story," as well as to help families increase their children's comfort level. We will be partnering with the Post Adoption Resource Center (PARC) operated by Catholic Charities for this event.

For the first time, ARW and JBF are helping with the annual Umoja conference October 26-28th in Green Lake. The UMOJA: The Black Heritage Experience conference gives parents and children an incredible opportunity to spend several days together around their African American heritage. From learning to deal with racism to celebrating the music of Africa, there are age-appropriate activities for all ages of children, as well as educational forums for parents. We are glad to be partnering with UMOJA and two of the other PARCs – Family Services of NE Wisconsin and Catholic Charities-Madison – to support this event.



There are more details about each of these events in this issue of Partners.

W.I.S.E. Up! The World About Adoption Conference



Saturday, September 22, 2012

9am-1pm

First Congregational UCC

310 Broadway Street

Eau Claire, WI 54703

8:30-9:00am

Registration

9:00am-12:00pm

Parent Workshop:

Parents will participate in a workshop that will provide an in-depth understanding of what children understand, think and feel about adoption as they grow. The common questions, fears and concerns adopted children face will be addressed. We will also explore the dynamic between non-adopted peers, extended family and even strangers.

Children's Workshop:

This program has spread across the country as children have embraced its simplicity and power to address the consistent challenge of explaining adoption and their adoption stories to peers, neighbors and even strangers. W.I.S.E. UP!® is a tool to empower children to handle questions and comments about adoption from others. This program helps children realize that they are not alone with this task. Children will learn the program, create Powerstix and role play various scenarios.

12:00-1:00pm

Lunch Provided

REGISTRATION

Cost: \$20 per person/\$30 per twosome
\$10 per youth (1st-7th grade)

Registration Deadline: September 9, 2012

Register Online at:

<http://wiseup2012.eventbrite.com>

or call 414-475-1246

UMOJA

A BLACK HERITAGE EXPERIENCE

Umoja: A Black Heritage Experience

October 26-28, 2012

Green Lake Conference Center, Green Lake, WI

Costs: Conference Fee Before August 1st

Optional Hair Care workshop \$40 per person

\$80 per age 12 and up

\$55 per child ages 4-11

Free for children 3 and younger

Conference Fee after August 1st

Optional Hair Care workshop \$50 per person

\$100 age 11 and up

\$65 per child ages 4-11

Conference Fee covers programming, meals and a souvenir t-shirt. This year there will be a Friday afternoon optional hair care workshop where braiding, twists, add-in extensions and other styling techniques and tips will be taught. It is a hands-on workshop and participants will have a chance to try their hand at styling hair.

Hotel costs vary by room type. See registration form for details

Umoja registrations opens at 4PM on October 26th.

Families can arrive at Green Lake any time that day. Green Lake offers a beautiful setting for hiking and relaxation. On Friday, participants can enjoy a meal from 5-6PM in the Kraft Lodge. At 7PM there will be a cultural experience for the entire family. Families arriving later in the evening will be directed to the location we are gathered by signs in the hotel lobby. The registration form and last year's program booklet can be downloaded from the web site at www.umojabhe.com.

http://www.youtube.com/watch?v=CXqWQ_tT7BU

<http://youtu.be/gUUctsDtsYA>

<http://www.youtube.com/watch?v=ETndoippy20>

SAVE THE DATE

A Place in My Heart Conference

November 3, 2012

Featuring: Richard Delaney

3-D View of Foster, Kinship and Adopted Children

4th Annual
**Homes for Kids
Golf Outing**

To benefit:



8.23.12



Sponsored by:



Click **here** to register or learn more about sponsorship opportunities.

Annual Adoption Celebration at the Milwaukee County Zoo

Register online at

<http://adoptioncelebration2012.eventbrite.com/>

or call us at 414-475-1246

Don't miss our annual Adoption Celebration where all types of adoptive families meet up to connect through music, conversation and lots of fun! Admission includes ticket to the zoo, parking, unlimited soda and an ice cream per person. Children two years old and under admitted for free. If you already have a zoo pass, please purchase \$5 tickets and we will send you wrist bands for soda & ice cream.

Bring your own lunch this year and break bread with your adoption community. We will provide the soda and ice cream for everyone.

11:30 a.m. –2:00 p.m.

Little Oaks Picnic Area

(this is a new location from years prior)

DISCLAIMER: Please note that a photographer will be present. It is your responsibility to alert an ARW staff member if photos of you or your family should not be taken. Please also feel free to approach the photographer and politely request that he or she not photograph your family.

We would also appreciate it if you would sign a release form upon arrival allowing us to use images from this event in our publications and materials.