SAFE (a publication of Fairfax County, VA)
Special Needs Adoption Family Exchange

Presented by Post Adoption Services
Children, Youth and Family Division
Fairfax County Department of Family Services

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Welcome to the thirteenth edition of SAFE (Special Needs Adoptive Family Exchange). This issue has been dedicated to the topics of trauma and attachment. We hope you find SAFE to be helpful and informative.

Proposed Budget Impact on the Post Adoption Services Program for Fiscal Year 2010

In response to the economic downturn and its effect on Fairfax County's economy the Post Adoption Services program may lose a social worker position. This would reduce the number of social workers in the program to two. The effect of this loss would significantly delay responses to adoptive parents specifically regarding requests for services, crisis intervention, and financial reimbursements.

Public hearings regarding the 2010 proposed budget plan will be held in the Government Center Board Auditorium on March 30 at 7 p.m. and March 31 and April 1 at 3 p.m. If you are interested in voicing your concern, even if you are not a Fairfax County resident, please contact the Office of the Clerk of the Board of Supervisors at 703-324-3151 or contact your local Board representative if you are a Fairfax resident.

UNDERSTANDING THE EFFECTS OF COMPLEX TRAUMA AND INDIVIDUAL APPROACH TO ATTACHMENT THERAPY

The post adoption services team regularly attends trainings to help us better serve parents who have adopted children with special needs. We were particularly impressed with two trainings that we attended over the past few months and wish to share some of the information with our adoptive parents.

Some of our local adoptive parents also attended one of these trainings and were impressed by the presentation given by Jane Schooler regarding the impact of child trauma on the family.

Mrs. Schooler speaks internationally on a wide variety of family life issues, adoption issues and other child welfare concerns. As an adoptive parent herself she understands the impact on the family of raising children affected by trauma and she stresses the importance of caretakers taking care of themselves. Below are some excerpts from her presentation.

"When trauma occurs early in life, children do not develop the capacity to regulate their experience…to calm themselves down when they're upset, to soothe themselves, to interact in appropriate ways with other people, to learn from their behavior"– Margaret Blaustein, PhD

There are several domains of impairment in children exposed to complex trauma:

I. Attachment
   - problems with boundaries
   - distrust; suspiciousness; social isolation
   - difficulty attuning to other people's emotional states

- difficulty in perspective-taking

II. Biology
- sensorimotor development
- analgesia; problems with coordination, balance, body tone
- increased medical problems across a wide span

III. Affect regulation
- difficulty with emotional self-regulation
- difficulty labeling and expressing feelings
- problems knowing and describing internal states
- difficulty communicating wishes and needs

IV. Dissociation
- distinct alterations in states of consciousness
- amnesia; depersonalization and derealization
- two or more distinct states of consciousness

V. Behavioral Control
- poor modulation of impulses
- self-destructive behavior; aggression toward others
- pathological self-soothing ; sleep disturbances
- eating disorders; substance abuse
- excessive compliance; oppositional behavior
- difficulty understanding and complying with rules

VI. Cognition
- difficulties in attention regulation and executive function
- lack of sustained curiosity
- problems with processing novel information
- problems with object constancy
- difficult planning and anticipating
- problems understanding responsibility
- learning difficulties; problems with language development

VII. Self Concept
- lack of continuous sense of self
- poor sense of separateness
- disturbances of body image
- low self-esteem
- shame and guilt

The many dynamics of complex trauma in children may be difficult to identify and understand. For this reason, problems may occur between children who have experienced trauma and their caretakers who may have unrealistic expectations of their behaviors. Unrealistic expectations are the primary obstacle for foster and adoptive parents.

TEN COMMON PARENTAL MISCONCEPTIONS

1. Our love will be enough
2. We /I will feel love and connection to this child quickly
3. This child will step into our family system and easily learn how to function within our "rules," goals, and ambitions
4. This child's needs will be just like those of our biological children
5. Our biological children will embrace this new child as a sibling
6. Our child will fit well into our extended family and be welcomed by them
7. My friends and acquaintances will validate my role as parent in our child's life and support us through the adoption process and beyond
8. Our child will see us as his/her family and forget about his birth family and his past
9. We/I can do for this child what was not done for me, or I will not do to this child what was done to me
10. I will never feel any regrets or ambivalence in adopting this child with a traumatic past.

Mrs. Schooler offers the following advice to parents:

1. Understand that the child's behavior isn't about you. Ask yourself "am I taking this personally", if your answer is yes ask yourself how you are going to change your emotional responses to the child?"
2. Continue to study the importance of key elements of healing for traumatized children: a safe environment, establishing boundaries for everyone (private spaces) and the

incredible importance of an established routine.

3. Understand the concept of vicarious trauma (which refers to taking on your child's emotional pain).
4. Any adoptive parent who finds himself/herself isolated from family or friends, who does not ask for help, or who believes that he or she has failed, is at risk for vicarious trauma.
5. Signs of vicarious trauma include lack of energy, unclear thoughts, nightmares, despair/hopelessness, impatience, cynicism, negativity and irritability.
6. Be attuned to the reality of the above symptoms, regularly examine and explore what is happening to each member of the family especially mom, make sure one parent is not carrying the load, and above all take good care of yourself physically, emotionally, mentally, spiritually – because you so deserve to do so.
7. Join support groups and talk to people who understand.

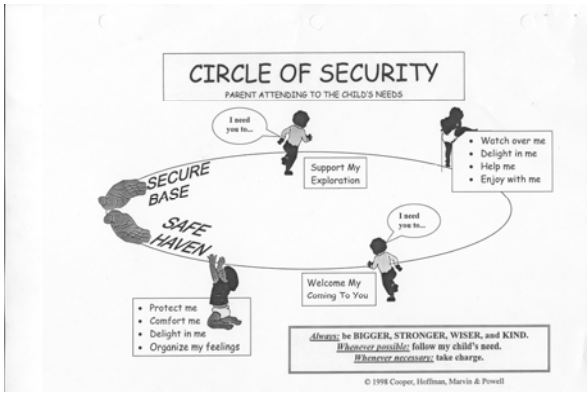
For further reading see: *The Whole Life Adoption Book: Realistic Advice for Building a Healthy Adoptive Family* by Jayne E. Schooler and Thomas C. Atwood (Paperback - Jun 15, 2008)

CIRCLE OF SECURITY

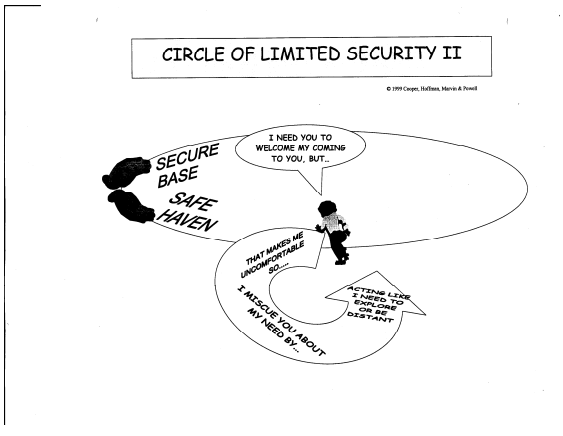
The other training was given by Dr. Bob Marvin of the Mary Ainsworth Child-Parent Attachment Clinic, Charollettesville, VA. who described a unique therapeutic approach based on the concept of the Circle of Security (COS). COS is based extensively on attachment theory from the work of John Bowlby and Mary Ainsworth and current affective neuroscience. It integrates over fifty years of attachment research into a video-based intervention to strengthen parents' ability to observe and improve their caregiving capacity. The use of a clear differential diagnosis for each parent/child dyad allows the clinician to focus on precise personal strengths and diagnostically significant struggles, rather than relying on a more traditional "one-size-fits-all" approach to intervention. Attachment theory, taught in this way, gives each parent an individualized parenting "road map," a clear pathway to providing a secure relationship for her/his child.

According to Dr. Bob Marvin "the most important parental skill is his/her ability to read the child's cues accurately and to respond quickly and appropriately in a manner that leads to the child and parent co-regulating the child's feelings and behavior".

The circle of security describes what happens when parents appropriately respond to their child. By providing a secure base, the child feels safe enough to go out and explore their world. As they explore, the child wants the parent to be present to delight in their findings, but also to be available to help when needed. After some time, the child needs to be recharged and goes back to the parent for that security and needs the parent to welcome the child and help the child to feel safe again. This cycle continues throughout a child's life time and as the child matures, the time of exploration gets longer.



However, when a parent does not consistently respond to a child's cues – which often happens in chronic abusive situations - the child will learn to send a cue that does not match what they really need. For example, a child needs to be welcomed back after a time of exploration but because the child's needs are unmet, leaving the child feeling uncomfortable, the child may act like they need to keep exploring or be distant to keep from being rejected – many traumatized children continue to act like this until they begin to trust their significant caregiver.



These patterns that are developed in childhood continue to exist as the child becomes an adult and These miscues, can then become the pattern between a parent. Thus, the particular blueprint can continue to the next generation as the now parent tries to meet the child's needs according to their level of comfort. Consequently, it is of great benefit for parents to assess their attachment styles to determine what works well and not so well.

The Attachment Clinic, located in Charlottesville, Virginia, is one resource that can provide support in helping assess the parent child attachment pattern and make changes. You can read more about the Circle of Security on their website: http://www.circleofsecurity.org If you are interested in having an assessment with the Attachment Clinic, please contact your subsidy social worker.

USEFUL RESOURCES

"Complex Trauma in Children and Adolescents", *The National Child Traumatic Stress Network*, 2003, 8. Alexandra Cook et al. eds http://www.nctsnet.org/nctsn assests/pdfs/edu materials/ComplexTrauma All.pdf

Healing Trauma: Attachment, Mind, Body and Brain. 2003. Marion F. Solomon and Daniel Siegel. W.W. Norton and Co. Research and theory on attachment and trauma.

Helping Traumatized Children to Learn- http://www.massadvocates.org/helping_traumatized_children_learn

ADOPTION TAX CREDIT

Some of you may have already filed your taxes. For those of you who are waiting for the April 15 deadline, here is a reminder about tax benefits you are eligible for. This information is provided by the Northern American Council on Adoptable Children and the National Foster Parent Association.

The law permits adoptive parents to claim a credit against their federal tax for up to $11, 650.00 for tax year 2008. The adoption of a "Special Needs" child does not require the taxpayer to have qualifying expenses.

Qualifying expenses are defined as reasonable and necessary expenses directly related to a legal adoption. Examples include adoption fees, court costs, attorney fees, medical expenses, travel expenses, and other expenses related to the adoption of an eligible child.

Form 8839 is the form you need to file.

Adoption assistance payments and related subsidies for child care or other special needs that are paid by government child welfare agencies for adopted children are excluded from taxable income. These payments are considered public assistance and should not be reported on your tax return.

If you finalized an adoption of a child with special needs in 2003, 2004, or 2005 and you did not claim the federal Adoption Tax Credit you should consider amending your tax return so you can take advantage of the credit**.**

For further questions, you can contact NACAC at 651-644-3036 or info@nacac.org You can also access additional information on their website: www.nacac.org (click on Public Policy).

SERVICES AVAILABLE THROUGH ADOPTION SUBSIDY

Do you know what services are available to your family through your adoption subsidy?

- **Counseling**
- **Therapeutic Recreation**
- **Residential Treatment**
- **Speech and Physical Therapy**
- **Tutoring**
- **Respite**
- **Information and Referral**
- **Crisis Management**
- **Home Based Services**
- **In service trainings**
- **Scholarships for conferences**
- **Medical Equipment not covered by insurance**

In order to be eligible for these types of services, please contact your social worker. All services must be pre-approved and will require documentation to support the need of the proposed service to your child. As with all requests, family insurance, Medicaid and community resources will need to be explored first and if approved, a parental contribution toward the service will be expected, if possible.

SUPPORT GROUPS

United Methodist Family Services has support groups and services for adopted parents throughout Virginia under a grant from Virginia Department of Social Services.. Their goal is to keep at risk adoptions intact, but they offer services to all adopted parents. For more information call 703-941-9008.

Center for Adoption Support and Education, Inc. (CASE) offers groups for families and kids in Virginia and Maryland. They can be accessed via www.adoptionsupport.org.

VIRTUAL SUPPORT GROUP

If you would like to be a member of the post adoption services virtual support group please send an e-mail to tiffiny.alhakim@fairfaxcounty.gov In order to participate, you must be willing to share your e-mail address with other adoptive parents in the network. The information you share will be at your discretion

HELPFUL WEB SITES

National Adoption Information Clearinghouse at http://naic.acf.hhs.gov/ This website gives lists of resources for adoptive and birth families.

About Our Kids at http://aboutourkids.med.nyu.edu is an educational site primarily for parents focusing largely on child mental health. This web site is the place to go when a doctor or therapist gives you a diagnosis that you don't know. They also have useful articles addressing many parenting issues.

The Association for Treatment and Training in the Attachment of Children (ATTACh) at http://www.attach.org/ gives information about the latest research on attachment disorders. Their newsletter, available on subscription, is particularly informative. The organization also sponsors a yearly conference, which last year addressed everything from ethics to outcome research to helping parents to handle insurance, teachers and self-care.

The Attachment Disorder Network at www.radzebra.org was originally formed by adoptive parents but has since grown into an organization providing training at national and regional conferences and is a major parent support system for those raising attachment-disordered children. Their newsletter, available on subscription, is particularly helpful to parents.

Post Adoption Services Social Workers

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Fairfax County is committed to a policy of nondiscrimination in all county programs, services and activities and will provide reasonable accommodations upon request. To request this information in an alternate format, call Mary Adamchak at 703-324-7660; TTY 703-222-8452