

fostering perspectives

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Sponsored by the NC Division of Social Services and the Family and Children's Resource Program

When I become a foster parent . . .

In the writing contest in the last issue of *Fostering Perspectives* we asked children and youth in foster care, "If you were a foster parent, what would you do to help the children living in your home?"



Two things strike me about the dozens of replies we received.

First, these kids understand how hard foster parenting is. Letter after letter talks indirectly about the incredible demands placed on foster parents: to provide food, clothing, and shelter for other people's children. To help those who are behind in school. To love and nurture children who are struggling with their emotions, their behavior, their ability to trust. These kids know that to do this job well demands enormous patience, stamina, and generosity of heart.

The second striking thing is how many of them want to become foster parents. They know from experience just how important foster parenting is. To them, the rewards of foster parenting far outweigh the demands.

These future foster parents can vividly imagine a time when they will have the chance to serve foster children. They are so eager for the opportunity! They dream of teaching children, respecting them, and sustaining connections to their families. They vow to treat all children like their own. They truly believe foster parents have the power to help children prepare for lives of happiness and achievement.

This powerful vision is at once a challenge and a compliment. Few of us can read these letters without a little soul searching, without asking: am I doing everything I can? Am I focusing my energy and resources on the right things, the things that really make a difference for kids in foster care?

Yet I hope you also recognize that the ideal foster parent these children envision is inspired, in part, by you. By your resourcefulness. Your energy. Your generosity. Your love. Your dreams.

May the dreams of these children inspire you to rediscover your own vision of what foster parenting can be.

—John McMahon, Editor

Additional essays from kids in care can be found in the online version of this issue at <www.fosteringperspectives.org>



Erica, age 16

Cherishing them as though they are my own. Understanding their differences. Never giving up although it may get hard. Dealing with behavior issues. Healing them with my

As a foster parent my patience will be at its greatest level!

love shows them how hard I want to share my helping heart. Talking to them. Helping them to believe that life can be great. Encouraging them to hold on because there is someone who is here to show them how to achieve goals. Foster parenting is just a title, but parenting is what I plan to model. That's what foster parenting is all about.

If I became a foster parent helping would become my main motive. I would strive to help all the children that came my way. To achieve my goal as being a person with a helping heart I would: **understand their differences**, meaning understand that they may have problems and a different mind set as far as how much they appreciate life.

Secondly as a foster parent **my patience will be at its greatest level!** I will have patience with dealing with the behavior issues that the child or children may have. As a foster parent I will also have patience with dealing with the time it may take for a child to accept me.

Most importantly **I will love them as if they were my own**, because love can heal broken hearts.

Foster parenting would be something that I cherish. As a foster parent my duties would be met. **Spending time with the children** will be an attribute that I won't forget. I will treat the children like family instead of like jobs. That's what would help the children that enter my life.

Erica's letter won first prize, for which she was awarded \$100



Felicia, age 13

I would love them like they were my own and treat them all the same. I would make sure they were not scared, harmed, or unloved. I would help them prepare for the life that they have coming to them and make sure they succeed in their dreams.

I would help prepare them for the life they have coming to them.

Felicia won second prize, for which she was awarded \$50



Carissa, age 15

When I first entered foster care, I needed help with reading and how to control my feelings. I did not have anyone that really wanted to help me. I moved from foster home to foster home not knowing how to read at all. By the time I was twelve, I was on a second grade reading level and my grades were not good.

If I were a foster parent, I would try my best to meet the child's needs. The child may not always tell you whether they need help in school. The children in my foster home would get the right kind of help that they need . . .

Foster care is not always the best place to be living, but it can be a better place by helping and supporting the children. I hope foster homes will get better at providing and helping with the needs of the children. I plan to do my share. I was a foster child and I made a promise to my adoptive mother to reach back and help another child, so I will be a foster parent. If we all work together we can make foster care safer and better.

Carissa's letter won third prize, for which she was awarded \$25

I made a promise to my adoptive mother to reach back and help another child, so I will be a foster parent.

Danielle, age 14

I would help my children with scrap booking to take everywhere with them. Some kids grow up and don't see their pictures. I'd be sure they had lots of pictures of themselves and of their parents. . . .

They should be able to feel the love and happiness of a family, they should experience joyfulness and happiness that all little kids should, like going to church, going to the park, and learning how to swim. They should also be able to learn how to speak with proper grammar, manners, and someone they feel they can trust. Someone who will always be there for them, no matter what. Someone to love them.

Danielle received \$15 for having her letter published

Donise, age 7

I will take them out to eat for a special dinner just for us. I will help them go to school so they can learn.

At Halloween I will let them go trick-or-treating. At Christmas I will give them presents. I will take care of them when they get sick.

When school is out I will take them on vacation to Africa and London. I will let them see the Queen of England.

I will take them grocery shopping and take them to church and visit their family.

Donise received \$15 for having her letter published



The Queen

Samantha, age 10

I would love to be a foster parent because, having been a foster child, I would know how the child feels and I would be able to help her.

I think that I would be a big help to her in lots of ways because almost all of my life I have been in foster care without my real family and I would be able to help children understand why the incident happened and that no one can replace his or her mother and father no matter what happens and that their real mother and father will love them and never forget them.

Samantha received \$15 for having her letter published

Having been a foster child, I would know how the child feels.

Faith, age 10



"I will try my best to get the child back to his or her real mom if it is God's will."

Faith received \$15 for having this excerpt of her letter published

Photo Illustration
These letters are continued on page 8

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Mission. *Fostering Perspectives* exists to promote the professional development of North Carolina's child welfare workers and foster parents and to provide a forum where the people involved in the child welfare system can exchange ideas about foster care and adoption in our state.

Disclaimer. The opinions and beliefs expressed herein are not necessarily those of the NC Division of Social Services or the UNC-Chapel Hill School of Social Work.

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Shared parenting benefits everyone – especially foster parents!

by Janine Russell and John McMahon

North Carolina is working hard to increase the amount of contact between foster parents and birth parents.

Agencies are encouraging face-to-face meetings between birth and foster parents within the first week of placement. Social workers are urging foster parents to call birth parents on the phone, to request pictures of the child's family to display in the child's room, and to take other steps to bring the presence of birth parents into their homes.

The point of these activities, which are all inspired by an approach to fostering called *shared parenting*, is not just contact between birth and foster parents, but the development of an actual partnership focused on the well-being of the child.

Certainly, the well-being of children is a strong selling point with foster parents: they care very deeply about children, and few would hesitate to take any action they believed would make the children in their homes healthier, happier, or more secure.

Yet in their efforts to convince foster parents of the value of shared parenting, social workers and others sometimes fail to describe the benefits of this approach for one of the most important players in the world of child welfare: foster parents themselves.

We would like to correct this oversight by exploring with you some of the ways we think shared parenting can make the lives of foster parents better. We will begin by looking at one of the most powerful influences on the behavior of children in out-of-home care: the birth family.

Problems with Family Roles

Most of us would agree that the job of parents is to nurture children, teach them, and raise them to be healthy adults. Likewise, most of us would agree that the child's job is to grow, learn, play, and behave like a child.

In most families, the line between these two jobs is clear. However, during times of stress and crisis this line may blur. If the stress is severe enough, for example during a parent's struggle with substance abuse, the child may begin to assume parents' roles and to act as an "adult" in the home.

However, children—especially young children—aren't equipped to worry about health problems, money, substance use, domestic violence, marital conflict, etc. Of course, children rarely tell us in words that they can't manage adult stress. Instead, they do it through their behavior: some withdraw, others act out.

Continued Confusion

When children in this position are placed in foster care, they often have a hard time simply being children. Foster parents offer a safe, stable, loving environment, but the overwhelming responsibility these children have shouldered—caring for mom or dad, caring for a sibling, taking care of themselves—continues to press upon them.

Until the child can trust that someone else will assume this responsibility, his or her ability to do the work of a child—growing, playing, learning—will be undermined, as will the child's well-being.

Sorting Out Roles

One way foster parents can help children let go and become a child again is by working in partnership with the child's birth parents. When children see harmony among the adults in their lives, they relax and begin to return to the child role. They worry less and spend less time trying to "fix" the adults around them.

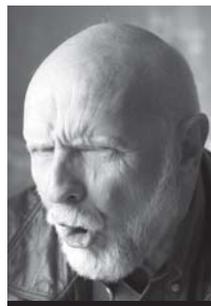
Seeing their birth and foster parents working together can change the way children function. Indeed, when they feel supported, birth families will sometimes work with foster parents to give the child "permission" to be OK in the foster home. Over time, it becomes less important to children to defy foster parents so they can prove their loyalty to their birth family. By reducing that division of loyalty, foster parents can gain valuable ground with the children.

Other Benefits

Birth parents can also give foster parents precious information and insights about the child. With this information, foster parents may find they can meet the child's needs earlier in the relationship, and more effectively. This, in turn, can ease their own anxiety and frustration.

How many foster parents have been criticized after getting a child's hair cut? Through parent-to-parent visits and other shared parenting strategies, foster parents can prevent many misunderstandings and potential conflicts over daily issues.

When they feel supported by the foster parents, birth parents may even back them up. For example, a child who complains to his birth mother about being put in a child role



Will shared parenting really help me in my role as a foster parent?

(e.g., having consequences enforced) may not find such a sympathetic ear if his mother knows the foster parents are taking good care of the child. Shared parenting can give foster parents allies in what may have seemed to be the least likely places.

Finally, shared parenting can sometimes create a bridge between the two families. When the family recovers and the child returns home, lines of communication sometimes remain open. In this way, the foster parent and the child remain "family" despite living

in different households, having separate ancestry, and having different blood ties. Isn't being family what most of us are really looking for?

Foster parents who don't make children choose their parents will never risk not being chosen. And though they may not verbalize their appreciation, the children will not turn away from you.

Just as parents have love for all of their children, children have love enough to give all of their parents.

Janine Russell is a foster care and child welfare trainer for the NC Division of Social Services in Raleigh. John McMahon is editor of Fostering Perspectives.

Shared Parenting: Potential Benefits for Foster Parents

Creating supportive relationships and sharing information with birth parents may:

- Enhance child development, learning, and well-being by encouraging the child to return to the child role
- Decrease children's defiant behavior by reducing the children's desire/need to demonstrate loyalty to birth family
- Provide information and insights that enable foster parents to meet children's needs earlier and in a more effective way, thus helping children and reducing foster parent frustration
- Reduce conflict with birth parents over various issues (e.g., grooming)
- Increase birth parent support for foster parents by reassuring them their children are being well cared for and that foster parents do not seek to replace them
- Create a positive connection between the foster parents, the child, and the child's family that will not have to end, even if the placement does



North Carolina Foster and

Visit the Association's Web Site at <<http://www.ncfapa.org>>

From the association's new president

My name is Stacey Darbee and I am very honored and excited to be the new president of the NCFAPA!

My Story

My professional background is quite diverse. I spent many years as a contractor in the electro-mechanical design field, leaving that area to become a nonprofit administrator first with a nonprofit that I formed and then with several other agencies in south Florida. I found a passion doing something for a living that also had a positive impact on people's lives.

We moved to Apex, North Carolina in 1999, built our dream home, and began settling in. We didn't realize at the time what kind of chaotic changes were about to befall us!

My husband, Oz Franco, and I became licensed foster parents with Wake County almost five years ago. Since that time we have been active with the Speaker's Bureau and I became certified to train MAPP classes.

As I'm sure most of you understand, we feel that fostering is something we were meant to do. When we began we had one grown daughter and considered our family complete. (Ha! I can hear you snickering at me now!)

Since becoming licensed we have had eight children placed with us and have adopted three children, bringing our total family to six. At this time we also have one foster child who has been with us for nearly a year. As I'm sure has happened to a great many of you, we trained for fostering but not necessarily adoption. We're in a new ball game now, with new things to learn and be concerned about.

We cannot imagine our lives without our chil-

dren. How much they have added to our very existence!

We also cannot imagine how we would do this without support. The support of our friends, families, and church family has been so essential to our success. The NCFAPA has also played an integral part. We have attended every conference since becoming licensed. Each time we have been astounded by the energy and the sense of revitalization we feel when we leave. The tools learned, knowledge gained, and connections made with other foster parents sustain us through the tough times.

Please Join Us!

NCFAPA is a voice for all foster, adoptive, and kinship parents. We advocate for you at every level of state government. The stronger we are as a group, the more influence we yield. We need membership to show that we are a strong group. And we need you to keep us inspired and encouraged so we can ensure the needs of our children and our foster, adoptive, and kinship parents are met. Increased board rates, adoption assistance, more training dollars—these are all things that the NCFAPA has advocated for with a high degree of success. We partner with SaySo, NC Kids, and many other organizations. But we can—and should—do more. We need you to help us achieve for our families and our children what we cannot do alone. As a strong, viable association we can do wonderful things.

Please join us—TODAY!!



Stacey Darbee

SAVE THE DATE

"You Make THE Difference"
A Statewide Training Institute
for Foster, Adoptive, and
Kinship Parents

April 28-30, 2006

The annual training conference of the NC Foster and Adoptive Parents Association will be held April 28-30, 2006 at the Sheraton Imperial Hotel in Research Triangle Park, North Carolina. Be sure you mark your calendars now, and visit our website (www.ncfapa.org) for additional information as we get closer to the conference.

NCFAPA knows that *You Make THE Difference* in the lives of many children in our state. And we want to continue to give you the skills, training, support, and solidarity to continue making differences in more and more lives. We think that this will be the best conference yet and that you will come away with more strengths and knowledge to sustain your journey. You have the opportunity to Make *THE Difference*—to change children's lives. Don't miss this opportunity to change your life!

We always need help securing door prizes, financial sponsorships, committee support, and much more. If you have some time and are willing, please give us a call at 866/623-7248.

NCFAPA Receives Grant

The North Carolina Foster and Adoptive Parent Association is proud and excited to be the recipient of a mini-grant from AdoptUSKids. The award was received in October 2005 and will assist with printing and postage costs related to strengthening membership and keeping foster and adoptive parents informed about educational and training opportunities. NCFAPA will also be able to offer several conference scholarships this year to members in need. Thanks, AdoptUSKids!!

Thanks, Sheryl!

As our outgoing president Sheryl Ewing goes back to her "civilian" life, we want to thank her for everything she has done for NCFAPA. For five years Sheryl has given of herself and her time in efforts to really "Make *THE Difference*" in the lives of children and foster, adoptive, and kinship parents. We are very grateful for her leadership and we wish her continued happiness in life and success in any future endeavors.

Join the Association!

Membership is open to anyone interested in strengthening foster and adoptive services in North Carolina. Send this form, with payment (DO NOT send cash), to: NCFAPA at UNCG, PO Box 26170, Greensboro, NC 27402-6170. Make checks payable to the NC FOSTER AND ADOPTIVE PARENT ASSOCIATION.

Regular membership is open to any foster or adoptive parent and is \$15 for an individual and \$25 for a couple. **Associate membership** is \$25 per person and is for anyone who is not a foster or adoptive parent.

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Adoptive Parent Association

PO Box 26170 • Greensboro, NC 27402-6170 • 866/623-7248 (toll free)



NCFAPA board update

NCFAPA exists to serve all foster, adoptive and kinship parents in North Carolina. You are not alone in your challenges. There are support groups available and people who really want to help you in any way they can. Being a foster, adoptive and/or kinship parent is one of the most rewarding and challenging experiences anyone can ever have.

At our April conference we elected a new Board of Directors. At the subsequent board retreat new officers were elected. Please contact your regional representative today if we can do anything for you, or you have some time to help us with our mission.

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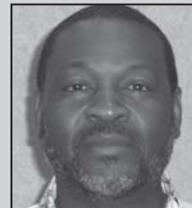
A Few of our '05 - '06 Officers and Board Members



Stacey Darbee



Dee Veerasurla



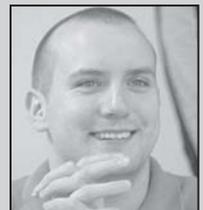
Garry Martin



Wanda Douglas



Ann Levy



Matt Davies

TAX INFO

As you plan for April 15, we urge you to do all you can to take advantage of tax savings that might be available to you as a foster, adoptive, or kinship caregiver. A great place to check before starting your taxes is the website of the National Foster Parent Association, especially their page at:

<http://www.nfpainc.org/ref/taxes.cfm?page=5>

Here you will find links to some of the best foster parent tax information on the web, including:

- Adoption Subsidy Tax Information
- Casey Family Programs' Federal Tax Benefits for Foster and Adoptive Parents and Kinship Caregivers
- TurboTax: FAQ on Foster Family Taxes
- The Internal Revenue Service
- H&R Block

Trauma and children: An introduction for foster parents

It happened suddenly. Sarah and her 10-year-old foster daughter, April, were walking into the grocery store. Out of the blue April shouted, "That's him!" Sarah looked and saw April staring at a man entering the store just ahead of them. The man, who seemed perfectly ordinary to Sarah, took no notice of them.

Yet April's body was rigid with fear. She refused to go any further. In a quivering voice she asked if they could please leave. In the car on the way home she cried quietly to herself, unable to explain what had happened.

It was only later, after she had learned about trauma and its effects, that Sarah understood what went on that day.

April was having a trauma reaction.

All children enter foster care with a variety of memories: some happy, some sad, some worse than sad.

Some foster children, like April, have had experiences so terrifying and disturbing that the memories of these events are problems in and of themselves. After the event has ended, the experience plays itself out repeatedly in their minds. The thoughts, emotions, and feelings of being out of control and threatened are re-experienced, as is the fear, anxiety, and pain associated with the event (ChildTraumaAcademy, 2002).

These intrusive memories are so awful and overwhelming that children struggle mightily to defeat them, to avoid them, to make them go away.

As foster parents you may see these struggles reflected in a host of challenging behaviors: nightmares, regressive behaviors, depression, acting out—the list goes on. To provide proper care for these children, and to make sure that they respond in an appropriate way, foster parents need to understand trauma: what it is, how it impacts child behavior, and how to respond.

Definition, Causes, and Impact

Trauma is a psychologically distressing event that is outside the range of usual human experience, one that induces an abnormally intense and prolonged stress response.

Despite the fact that they are outside the range of usual human experience, traumatic events are fairly common, even among children. A study of children and adolescents in Western North Carolina found that 25% had experienced at least one potentially traumatic event.

Events that can induce trauma include the sudden death of a loved one, assaultive violence (combat, domestic violence, rape, tor-

ture, mugging), serious accidents, natural disasters, witnessing someone being injured or killed, or discovering a dead body.

Among foster children physical and sexual abuse are common sources of trauma. Other causes of childhood trauma can include animal attacks (e.g., dog bites), life-threatening illnesses, and prolonged separation from caretakers.

Adversities experienced for an extended period after the trauma (such as a series of different placements or separation from a caregiver) and the supports available to children can influence the severity of their trauma reactions.

With informal support, the majority of trauma survivors recover on their own within a few weeks, though some need longer to heal. For a small minority, however, traumatic events trigger various mental disorders, including posttraumatic stress disorder (PTSD), a particularly serious reaction to trauma.

Left untreated, PTSD can put children at risk for school difficulties, attachment problems, additional psychological disorders, substance abuse, and physical illness. Even if they do develop PTSD, however, timely and appropriate treatment often helps to reduce the severity of stress reactions, or to eliminate them altogether.

Typical Reactions to Trauma

Though trauma reactions may last for weeks or months after the traumatic event they usually show a swift decrease after the direct impact subsides (Goodman, 2002).

Foster parents should be able to spot the following reactions; though these are typical responses to trauma, these behaviors may have causes other than trauma (NIMH, 2001):

Ages 5 and younger: may fear being separated from parent, crying, whimpering, screaming, immobility and/or aimless motion, trembling, frightened facial expressions, and excessive clinging. May regress—return to behaviors exhibited at earlier ages (e.g., bed-wetting, fear of darkness). Children of this age are strongly affected by the parents' reactions to the traumatic event.

Ages 6 to 11: may show extreme withdrawal, disruptive behavior, and/or inability to pay attention. Regressive behaviors, nightmares, sleep problems, irrational fears, irritability, refusal to attend school, angry outbursts, and fighting are common. Child may complain of stomachaches or other bodily



Most trauma survivors recover on their own within a few weeks, though some need longer to heal.

symptoms that have no medical basis. Schoolwork often suffers. Depression, anxiety, feelings of guilt, and emotional numbing or "flatness" are often present as well.

Ages 12 to 17: may exhibit responses similar to those of adults, including flashbacks, nightmares, emotional numbing, avoidance of reminders of traumatic event,

depression, substance abuse, problems with peers, and antisocial behavior. Also common are withdrawal and isolation, physical complaints, suicidal thoughts, school avoidance, academic decline, sleep disturbances, and confusion. May feel extreme guilt over his or her failure to prevent injury or loss of life, and may harbor revenge fantasies that interfere with recovery.

What You Can Do

First of all, proceed cautiously. If you observe one or more of the reactions described in the previous section, do not assume that your child is definitely having a trauma reaction. Unless you are a medical doctor, psychiatrist, psychologist, social worker, or other qualified healthcare professional, you cannot make a diagnosis.

If you have concerns, share them with the child's social worker. If he or she has not already done so and thinks it is warranted, the social worker will be able to have the child assessed by a qualified professional.

However, if you already know your child has been traumatized, consider following these basic guidelines for parents of traumatized children. These suggestions are excerpted from the Child Trauma Academy's free online course "Surviving Childhood: An Introduction to the Impact of Trauma," which teaches about the physiological and psychological aspects of trauma, the effects of this trauma on our society, and how you can help.

1. Don't be afraid to talk about the traumatic event. Children do not benefit from "not thinking about it" or "putting it out of their minds." If children sense that caretakers are upset about the event, they will not bring it up. In the long run, this only makes the child's recovery more difficult. Don't bring it up on your own, but when the child brings it up, don't avoid discussion. Listen to the child, answer questions, and provide comfort and support. We may not have good verbal explanations, but listening and not avoiding or overreacting to the subject, and cont. p. 7

then comforting the child, will have a critical and long-lasting positive effect.

2. Provide a consistent, predictable pattern for the day. Make sure the child has a structure to the day and knows the pattern. Try to have consistent times for meals, school, homework, quiet time, playtime, dinner, and chores. When the day includes new or different activities, tell the child beforehand and explain why this day's pattern is different. Don't underestimate how important it is for children to know that their caretakers are in control. It is frightening for traumatized children (who are sensitive to control) to sense that the people caring for them are, themselves, disorganized, confused, and anxious. Adults are not expected to be perfect; caregivers themselves have often been affected by the trauma and may be overwhelmed, irritable, or anxious. If you find yourself feeling this way, simply help the child understand why, and explain that these reactions are normal and will pass.

3. Be nurturing, comforting, and affectionate, but be sure that this is in an appropriate context. For children traumatized by physical or sexual abuse, intimacy is often associated with confusion, pain, fear, and abandonment. Providing hugs, kisses, and other physical comfort to younger children is very important. A good working principle for this is to be physically affectionate when the child seeks it. If the child walks over and touches you, return it in kind.

Try not to interrupt the child's play or other free activities by grabbing them and holding them, and be aware that many children from chronically distressed settings may have what we call attachment problems. They will have unusual and often inappropriate styles of interacting. Do not tell or command them to "give me a kiss" or "give me a hug." Abused children often take words very seriously, and commands reinforce a very malignant association linking intimacy/physical comfort with power (which is inherent in a caregiving adult's command to "hug me").

4. Discuss your expectations for behavior and your style of discipline with the child. Make sure that the rules and the consequences for breaking the rules are clear. Make sure that both you and the child understand beforehand the specific consequences for compliant and non-compliant behaviors. Be consistent when applying consequences. Use flexibility in consequences to illustrate reason and understanding. Utilize positive reinforcement and rewards. Physical discipline is not an option for North Carolina foster parents.

5. Talk with the child. Give them age appropriate information. The more the child knows about who, what, where, why, and how the adult world works, the easier it is to make sense of it. Unpredictability and the unknown are two things that will make a traumatized child more anxious, fearful, and, therefore, more symptomatic. They may become more hyperactive, impulsive, anxious, and aggressive, and have more sleep and mood problems. Without factual information, children (and adults) speculate and fill in the empty spaces to make a complete story or explanation. In most cases, the child's fears and fantasies are much more frightening and disturbing than the truth. Tell the child the truth, even when it is emotionally difficult. If you don't know the answer yourself, tell the child you don't know. Honesty and openness will help the child develop trust.

6. Watch closely for signs of reenactment (e.g., in play, drawing, behaviors), avoidance (e.g., being withdrawn, daydreaming, avoiding other children) and physiological hyperreactivity (e.g., anxiety, sleep problems, behavioral impulsivity). All traumatized children exhibit some combination of these symptoms in the acute posttraumatic period. Many exhibit these symptoms for years after the traumatic event. When you see these symptoms, it is likely that the child has had some reminder of the event, either through thoughts or experiences. Try to comfort and be tolerant of the child's emotional and behavioral problems. Again, these symptoms will wax and wane — sometimes for no apparent reason. Record the behaviors and emotions you observe and try to notice patterns in the behavior.

7. Protect the child. Do not hesitate to cut short or stop activities that are upsetting or re-traumatizing for the child. If you observe increased symptoms in a child that occur in a certain situation or following exposure to certain movies or activities, avoid them. Try to restructure or limit these activities to avoid re-traumatization.

8. Give the child choices and some sense of control. When a child, particularly a traumatized child, feels that they do not have control of a situation they will predictably get more symptomatic. If a child is given some choice or some element of control in an activity or in an interaction with an adult, they will feel safer and more comfortable and will be able to feel, think, and act in a more mature fashion. When a child is having difficulty with compliance, frame the consequence as a choice for them: "You have a choice — you can choose to do what I have asked or you

Preventing PTSD in Children

Adapted from Goodman, 2002

Parental support influences how well children cope after a traumatic event. Birth, foster, and adoptive parents, kin caregivers, and professionals can help children by:



- Providing a strong supportive presence
- Modeling and managing their own expression of feelings and coping
- Establishing routines with flexibility
- Accepting children's regressed behaviors while encouraging and supporting a return to age-appropriate activity
- Helping children use familiar coping strategies
- Helping children share in maintaining their safety
- Allowing children to tell their story in words, play, or pictures to acknowledge and normalize their experience
- Discussing what to do or what has been done to prevent the event from recurring
- Maintaining a stable, familiar environment

can choose . . ." Again, this simple framing of the interaction with the child gives them some sense of control and can help defuse situations where the child feels out of control, and therefore anxious.

9. If you have questions, ask for help. These brief guidelines can only give you a broad framework for working with a traumatized child. Knowledge is power: the more informed you are and the more you understand the child, the better you can provide them with the support, nurturing, and guidance they need. Take advantage of resources in your community. While each community has agencies, organizations, and individuals coping with the same issues, you may need assistance finding the expertise that can help traumatized children.

To Learn More

This introduction has only scratched the surface of what we know about child trauma. We encourage you to learn more about this complex and important topic. A good place to start is the Child Trauma Academy's free online course, which can be found at <www.ChildTraumaAcademy.com>.

References for this article are available in the online version of this issue at <www.fosteringperspectives.org>

Kids' Page

Words and Pictures by and for Children in Foster Care

Vol. 10, No. 1 • Nov. 2005

"I have come a long way"

by Angela, age 17

I have been in a group home for three years now. Initially I was here for running away and for hurting myself. I used to hurt myself just to numb the feeling of emotional pain. It worked until it was brought to my attention that my so-called "coping skill" was not the best one to have.

I was put in a group home at the age of 14. When I arrived in my first group home I just wanted to crawl into a hole and hide my face from the world forever.

The department of mental health had put me in a group home far away from home, taking me from my family who I love very much, and putting me with strangers who picked on me. Unless you experience it for yourself you cannot know what it feels like to be taken from someone who loves you, put somewhere you hate, and then have the painful knowing in your heart that it is your own fault.

I have come a long way since then. Later my mother had me put in a group home. When I got here I was still a mess. Still hating life, still running away. I had no self-respect until I met people here who helped me. They taught me how to fix myself up and how to dress. They taught me to respect myself and not let anyone push me around. I think the event that changed my view on life was the school I went to. I immediately made friends, lots of friends. They respected me for who I am, not what I looked like. I have also made God my therapist. I have learned that it is OK to cry, it is OK to have feelings, and it is OK to show your true self. Now I am 17 and about to go home with my mom and dad for good. But if it wasn't for this group home, I don't think I ever would have seen how harmful my behavior was.

Now I'm off medications. I am in ROTC, I make the honor roll in school, and I have much more self-respect. The place I once saw as "the end of my life" is now the place that "saved my life."

Angela received \$15 for having her essay published.

The place I once saw as "the end of my life" is now the place that "saved my life."

Drawing by Erica

Erica writes:

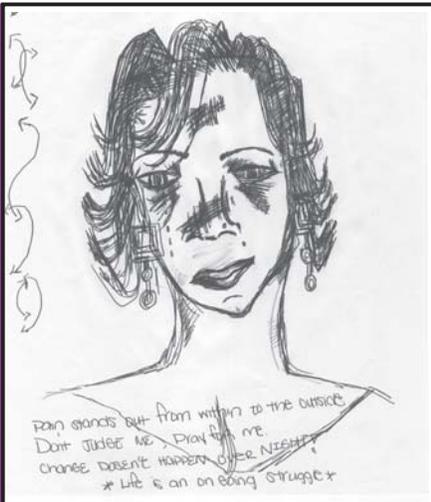
"Pain stands out from within to the outside.

Don't judge me, pray for me.

Change doesn't happen overnight.

Life is an ongoing struggle."

Erica received \$15 for having her work published.



Writing contest *continued from page 2*

Jessica, age 11

... Here are some things that you could do to help your foster kids:

- Try to talk to them to help them sort out their problems.
- Sometimes kids don't come with a lot of clothing so you could help them and buy more clothes for them.
- Also, kids need help with school work.
- Do things to help kids be proud of themselves. For example, give them a reward for doing good on a test.
- Don't do foster care just for the money. You have to want to do it to help kids that don't have a family.

If I was a foster parent, I would want to help teach the kids manners because sometimes the birth family has had so much going on that they didn't get a chance to teach the kids. Make sure that you respect the kids and that they respect you. You can earn the kids' respect partly by really listening to them and trying to understand what's going on with them. It is also important to be honest to your kids so that they will be able to trust you and talk to you. These are my ideas about how you can help be a better parent, no matter what kind of kid you have.

Jessica received \$15 for having her letter published.

Make sure you respect the kids.

Danielle, age 14

I would spend one-on-one quality time with each child. I would also make sure that each of their voices is heard before I make a decision that involves them. I will let them know that they are an important and a very special being who deserves to be happy and safe and loved. I would also make sure each child gets alone time when they or I feel it is needed, and I would respect their privacy. *Danielle received \$15 for having her letter published.*

I'd make sure each of their voices is heard before I make a decision that involves them.

Toni, age 15

I would not make them eat foods they didn't like. I would tuck them into bed and give them a kiss on the forehead. I would wake them up with a delicious breakfast. Then maybe later on I would adopt them over as mine. I would let them live. Because I know how it feels to be away from home. I would show them all the love they never had and give them my heart. And when they leave it would break my heart. It would be like losing one of my own children. And when I could I would go visit them and let them know I miss them.

Toni received \$15 for having her letter published.

SaySo's "Give a Child a Smile" project

Last year the board of directors of Strong Able Youth Speaking Out (SaySo), a youth advocacy group, discovered that at some point during their time in foster care, every one of them had been forced to carry their possessions in a trash bag because they did not have a suitcase. They all found the experience upsetting and demeaning.

In an effort to spare other children this experience, SaySo launched a statewide suitcase and duffel bag collection campaign in conjunction with National Make A Difference Day. And so, the "Give a Child a Smile" suitcase project was born.

On October 23, 2004, SaySo collected 2,284 suitcases and duffel bags at 18 sites around North Carolina. By November these suitcases were in the hands of foster youth across the state. Later SaySo won a national award for its effort! (See the article below.)

Inspired by this success, SaySo has decided to continue the project again this year. If you need suitcases or are willing to distribute bags to youths or families in your area, contact Melinda Medina (800/820-0001; Melinda.medina@ilrinc.com).



Youth in Transition Need Your Help!

As a foster parent or social worker, you are in a unique position to help create a new resource for supporting foster youth as they enter adulthood. And it will take only a moment of your time!

The newly-created NC Alumni Mentor Program matches foster youth who will soon exit care with young adults who have successfully made the transition to independence.

You can help by encouraging the people you know to participate in this program.

- To qualify as a **mentor** you must have aged out of foster care, have been out of foster care for at least two years, and be willing to support your foster youth partner for at least one year.
- To qualify as a **transitioning young adult** you must be in foster care, be between the ages of 17 and 21, and be willing to accept support from your mentor for at least one year.

This program offers rewards to everyone who participates. Foster youth receive a new friend and guide who has really "been there," someone to listen to them, help them learn and practice skills they will need, and to celebrate with them as they travel down the road to success. Volunteer mentors receive the respect and friendship of the foster youth and the knowledge that they are helping to make the world a better place.

This program is coordinated by Melinda Medina. Herself a foster care alumnus, Medina brings a reality-based understanding of what foster youth in transition need to succeed. If you know any eligible foster youth or former foster youth please encourage them to contact her at 800/820-0001; Melinda.medina@ilrinc.com.

SaySo Youth Named Youth of the Year

A SaySo member has been named National Youth of the Year! **Makeisha Williams**, 21, recently was awarded this honor in Atlanta at an awards ceremony held in conjunction with the *Growing Pains Independent Living Conference* at the Westin Peachtree Plaza.

"Keisha" has exhibited her leadership skills and interest in young people since she joined the SaySo board in 1998. After leaving the board, Makeisha won election as one of four youths on the National Independent Living Association (NILA) Board of Directors. Makeisha has served four years on NILA (her second term ends in January 2006).

Keisha has enjoyed representing youth around the country and especially from North Carolina. She is pursuing a career in social work and has a commitment to helping all foster youths register to vote as soon as they are able.

"We have the most at stake and our votes count too," she says.

Previous SaySo recipients of this award include Melinda Medina (2003) and DeVon McRavion (2002).

Foster kid suitcase giveaway gets award

USA Weekend honors Durham's SaySo for helping youngsters smile

By Katie Hagen abc@heraldsun.com; 919/419-6684

In the world of foster care, it's easy to feel forgotten.

But a Durham-based youth organization made a big difference in the lives of 2,284 foster children last October by providing them with something simple — suitcases.

As a result, Strong Able Youth Speaking Out, or SaySo, has won one of 503 awards given by USA Weekend for its "Give a Child a Smile" suitcase project.

SaySo is a statewide not-for-profit organization for people ages 14 to 24 who are or have been in out-of-home care.

There was no question about what SaySo would do for its service project on Make a Difference Day, said SaySo executive director Nancy Carter.

One of the worst things for young people in foster care is having to move their belongings from home to home in garbage bags that often break.

"When you put all of someone's belongings in a trash bag, it sends the message that they're trash and they should be thrown away," Carter said.

SaySo's 284 members all know the humiliation of that experience and wanted their project to benefit foster kids of all ages, not just teens. The "Give a Child a Smile" suitcase project was born.

Carter said that on Make a Difference Day on Oct. 23, 2004, SaySo set up 18 suitcase collection points across the state and held a rally at Holy Infant Church in Durham.

The suitcases were filled with toothbrushes and toothpaste donated by local dentists, teddy bears, T-shirts and even a love note written by SaySo youth.

"The little kids were really happy," said SaySo member Peaches Sanders, 20, who entered the foster care system

"This project made an invisible population visible."

herself while carrying her belongings in a trash bag.

Although the goal was to collect 5,000 suitcases and duffel bags, enough for every foster child in the state, SaySo and 288 volunteers still collected more than 2,000 bags in one day — no small feat.

Carter said that many donors said, "This is such a simple thing. How come we didn't know about this?"

"People have kept this population silent and invisible," Carter said. "This project made an invisible population visible."

Many of the bags were distributed from the collection points the same day. Many foster children came with their families to pick out a suitcase. By Thanksgiving, just one month later, all the bags had been distributed.

The appreciation was astounding.

"Each of our children arrived at our home with their belongings in trash bags ... which upset my husband and myself," said a foster mother in an e-mail to Carter. "The five of them are delighted to have a new carrier," she said.

Carter said that many of the SaySo youth who grew up in foster care believed that people didn't care what happened to them.

This project meant just as much to them as it did to the children who got suitcases.

"They couldn't believe how much people wanted to help," Carter said.

SaySo is planning to do the project again this October and has already formed new partnerships.

"We want to keep that momentum going," Carter said.

Reading this and that by Becky Burmester

Are we as foster parents ever perfect? Of course not. But we can learn more about ourselves and about the experiences children in care have had and will have. The more we learn the better parents we will become. All children need parents who are striving to become better parents.

The Voice of Youth In Care

My favorite source of information is "Represent: the Voice of Youth in Care." This award-winning publication is written by kids who are in or who have aged out of the child welfare system.

These articles are wonderful starting points for conversations with youth in our home. One of our girls read an excerpt from an article while waiting for her ride to school. That evening she grilled me to make certain that I understood that what the article said really reflected how kids feel about the system. It mattered to her that I understand that this magazine got it right.

If you foster teens or are thinking about maybe fostering teens, let your social worker know that you would like to read this magazine. Social workers (and others) can go to <www.youthcomm.org> for more information.

Plenty Good Room

Plenty Good Room is a novel by Cheri Paris Edwards about the "system" and all involved with it. Tamara Britton, the main character, is a social worker and also a survivor of the child welfare system. She takes training to become a foster parent because her agency asks her to and is soon pressed into providing an emergency, short-term placement for a challenging teen. Of course, the placement is not short-term. (Aren't we all familiar with how that works?!)

Plenty Good Room is absolutely on the mark in some areas (length of placement, behaviors of the young person, tension in sharing your home with a stranger) but ties everything together too neatly in the end. Real life—at least my real life—is much messier.

The novel is a faith-based story. Many foster parents will find themselves identifying with the role that faith plays in the story. Most of the foster parents I know find tremendous support and encouragement from their faith communities.

I Can't Get Over It

I Can't Get Over It: A Handbook for Trauma Survivors by Aphrodite Matsakis, PhD is a book recommended to



me by a friend. Matsakis is a specialist in treating posttraumatic stress disorder (PTSD).

This book is not a casual read. It is serious stuff and requires concentrated reading. But don't let that scare you off!

I frequently found myself identifying with examples the author used to illustrate her points. I clearly recognized PTSD behaviors in several of the youngsters who have shared our home. If only I had known then what I know now, we might have been able to help them understand how what had happened to them was impacting their responses to current life events. This book helped me understand where some of the "over-the-top" reactions might have been coming from. I also learned what to look for in a therapist if PTSD is an issue.

Reading Impacts Fostering

Having adopted our second family (we have two adult children), reading time is sometimes scarce. There just are not enough hours in the day or enough energy in this older Mom to read as much as I used to. However, my bookstore browsing continues and I have a large stack of books to read.

Joe and I are now fostering pregnant or parenting teens. Knowing how desperately teen foster homes are needed, we ask ourselves: why are we able to share our lives with teens? What makes it work?

The answers seem to be: working with a very supportive placement agency; having raised two children to adulthood (foster youth can't really shock us); and reading.

See you next issue. Until then, keep reading!

You can contact Becky Burmester at becky.burmester@mindspring.com or 919/870-9968

A reader asks . . .

If you have a question about foster care or adoption in North Carolina, please write, e-mail, or fax your question to us using the contact information found on page 2. We'll do our best to respond to your question either in a direct reply or in a future issue of this newsletter.

Question:

I need respite care, but I am concerned that if I make a request for respite it will impact my foster care license. Am I right to worry about this?



Respite is essential for the survival of all parents and caretakers, including foster parents!

Foster families face an array of demands. The children who enter their homes may be disabled or medically fragile, and many exhibit emotional disturbances as a result of trauma. Each child brings his or her own needs, demands, and experiences into the foster home. All these factors can be very taxing!

The break that respite provides can allow foster parents to renew their energy for parenting, which results in better care and treatment of children. If respite is provided regularly it can help prevent foster parent burnout and exhaustion. This in turn prevents placement disruptions and multiple moves, which research studies and experience have shown to be very bad for children.

Despite these benefits, some foster families share your concerns about respite. Some fear that agencies will interpret a request for respite as a signal that the foster parent is already overwhelmed or unfit to care for the children in their homes. Others fear that asking for help will threaten their foster care license. Another common concern among foster parents is that their foster children will not receive adequate care from the respite provider.

However, it is important to be open and honest with your agency about your needs, which directly impacts the care of the children in your home. Being open about your needs also ensures the longevity of your role in the foster care system. Workers want to support foster parents, and they know they need respite. Some agencies have licensed foster parents dedicated to providing short-term respite. These providers receive the same training and possess the same skills as other foster parents.

Preparation is the key component for successful respite. As a first step, talk with your social worker and make arrangements *before* you need a break. Once a respite family has been identified you will want to take the time to prepare both the child and the respite family for the respite period. Part of this preparation should include a pre-placement visit between the child and the respite family before the actual respite period begins.

Once you have asked for and prepared for respite, don't forget to enjoy it! Do what you can to put worry out of your mind and to see this time to "recharge your batteries" as a critical part of your job as a foster parent.

Response by Beverley Smith, Director, NC Kids Adoption & Foster Care Network

Awaiting adoption in North Carolina

Right now there are hundreds of children in foster care in North Carolina who are free for adoption. These children long for parents who can give them a forever family. Here's a chance to learn about a few of these great kids.



Beth



Nicholas



Billie



Quintaeza



Brittany



Shawn



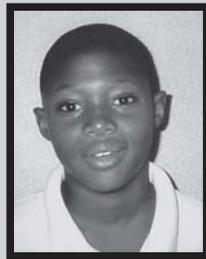
Javé



Shebra



Justin



Tareic

Beth (d.o.b. 5/9/91)

Beth has a pleasant and bubbly personality. She is active in her church's drama and dance ministries. Beth's grades are above average and she has the potential to always make the honor roll. Sports have been an excellent match for her energy and a positive way to express her feelings. For Beth, college is not an option, it is a necessity. Beth responds best to structure and clearly defined guidelines. She wants family that is active, supports her participation in sports, and goes to church regularly. (NC #081-206)

Billie (d.o.b. 9/25/88)

Billie is full of energy and laughter, with an engaging personality and wonderful sense of humor. She is a joy to talk with and loves to dress up and fix her hair. Billie enjoys school and does very well in her occupational track classes. Counseling helps Billie deal with her feelings and recognize and manage stress. She would like an energetic, patient, nurturing family that will guide her toward a successful life. Billie needs a strong, loving, adoptive mother as a role model. (NC #029-2285)

Brittany (d.o.b. 6/11/93)

Brittany is likable, attractive, insightful, and has an unbelievable thirst for life. She is a terrific gymnast and swimmer. Brittany attended summer session at a private school where the smaller class setting allowed her to excel in subjects in which she had previously struggled and improve her attitude and conduct. Brittany needs adoptive parents who will provide her with structure, consistency, and clear boundaries. Her charisma and joy for life are sure to be a blessing. (NC #073-2331)

Javé (d.o.b. 12/16/90)

Javé is a sweet boy who enjoys listening to all of the sounds around him. He likes listening to cartoons and hearing his foster mom talk to him. Javé also enjoys playing his battery operated guitar. He receives speech, occupational, and physical therapy. He is able to eat and has a feeding tube for supplemental nourishment. Javé needs an adoptive family that can provide the time to meet appointments for his health and care. They must accept that Javé; will always require total care in every area of his life. (NC #060-549)

Justin (d.o.b. 7/8/92)

Justin likes to ride his bike and play sports. He is talented at drawing and would like to learn karate. Justin's foster mom says she likes that he can discuss a variety of subjects. He gets good grades in his resource classes and a community aid works with him on social skills, expressing his feelings, and maintaining acceptable conduct. Justin needs an adoptive family that is considerate and knowledgeable of characteristics of children in foster care. (NC #060-1958)

Nicholas (d.o.b. 11/20/88)

Nicholas is charming, sociable, amusing, and likes being the class clown. He loves to ride his bike, swim, play basketball, and jump on the trampoline. Nicholas is on an occupational track at school. He needs to learn to be more protective of himself, physically, and understand the consequences when he is not careful. Nicholas' parents will need to receive training regarding his medical conditions. They will need to be loving, honest, patient and provide a structured environment (NC #082-2190)

Quintaeza (d.o.b. 3/23/96)

Quintaeza is a friendly and attractive little girl. She enjoys going to the beach, playing putt-putt, shopping, and playing house so she can be the "mama." Quintaeza attends regular classes at school where she works hard to stay focused. She needs to remember to let other children have the lead sometimes. Adoptive parents for Quintaeza need to accepting of the issues that bring children into foster care. They need to provide a structured and nurturing home where Quintaeza will feel safe and loved. (NC #041-1716)

Shawn (d.o.b. 6/16/89)

Shawn is a caring and compassionate young man with a witty personality. He loves deep-sea fishing, camping, and basketball. Shawn is a bright student whose major goal is to graduate. He is a member of a school club that encourages him to participate in community service, leadership seminars, and fundraisers for charitable organizations. Counseling is helping Shawn improve his self-image and develop more effective communication skills. As with most children, Shawn will benefit from parents who provide structure, consistency, love, and security. (NC #005-2309)

Shebra (d.o.b. 6/30/90)

Shebra is an athletic young woman with a terrific imagination. She loves sports and hopes to try out for the school's basketball team. She would also like to play drums in the school's band. Special education services allow Shebra to be successful and work on her own level in school. She is making significant progress in all areas and continued success is anticipated. Shebra's adoptive family must understand her needs and advocate for her in school and in the community. (NC #073-1829)

Tareic (d.o.b. 9/3/91)

Tareic is athletic and enjoys playing almost any kind of ball game. He loves animals and likes to read about them. Tareic is always offering to help anyone who needs it. Special education classes at school allow Tareic time to grasp new information and ideas. He attends counseling to learn to make positive relationships and better methods of expressing his feelings. Tareic will do best with a family that provides structure and clear, consistent expectations and consequences. (NC #065-386)



For more information on these children or adoption in general, call the NC Kids Adoption and Foster Care Network at 1-877-NCKIDS-1 <www.adoptnckids.org>

My second look at “advice for foster parents” by Elizabeth Cassedy

I’m going to be leaving DSS in a few months. Lately I find myself reflecting on my experiences with foster parents, especially on the advice I gave earlier in my career as a licensing social worker, and the advice I would give now. Of course, my reflections are tempered by my recent experiences as a foster/adoptive parent. Here are some of the observations I have made during this “second look” at advice for foster parents.

Consequences. A long time ago, I would advise parents to use stickers, charts, rewards, consequences, grounding—the usual. Then a few years ago Dr. Katherine Leslie gave me wonderful advice about teaching your child consequences. She advises that when you are faced with a situation—for example, you ask your child to do something and she flat out refuses—you only have to say, “That’s okay, I’ll remember the next time you ask for . . . [fill in the blank].” In my family, we use the expression “the gimmes,” as in, “We won’t get the gimmes when we go to Target.”

This approach works beautifully, but you have to remember to follow through! You also have to remember to be very matter-of-fact when you are doing this.

Food. I strongly believe in not using food to control behavior, so strongly that I don’t ever do it. Of course your kids must eat their dinner, but don’t ever make getting a yummy dessert the reward for good behavior.

Adoption Transitions. Many families I have worked with have made the transition to adoption, just as my family has. Many of those families have endured the appeals process, just as my family is doing.

I wish I could say that in the past I offered comfort to those experiencing this process. However, the assurance that “DSS will take care of this” is not comforting. Really what I have had to learn is that there are no magic words that will get you through or make it easier.

I continue to be awed by the grace with which many foster families endure the loss of children they have cared for, children they expected to adopt but whose plans were changed.

Foster Parent Training. When I first began MAPP training, and it was a LONG time ago (I was in the first training in 1986), I would tell families that “this will prepare you to be a foster parent.” Families would always tell me that while the class was helpful, meeting and talking to foster parents gave them a better picture of what foster parenting was really like. In the past two years I’ve asked all of the parents to help me with MAPP classes. They have graciously volunteered, and their real-life experiences have made a difference in how prepared new families are.

Listening to Kids. I’ve learned that it can be better to listen and not try so hard.

I used to always tell foster parents that their children needed to hear positive words about their birth parents. I have tried really hard to bring up positive past experiences for my kids, but I have learned that saying something nice about birth parents is not always possible. Sometimes it’s better to continue to be a good listener and not say anything.

Cultural Sensitivity. I used to preach, “Always be sensitive to your child’s cultural issues.” I’ve learned how difficult this can be, particularly if your child has been so victimized that she negates everything about her identity. Now I advise families, “Take your cues from your child, listen with an open heart.”

My daughter is quick to put down everything about her culture. I always try to temper her comments. When she says, “The women in my family are too stupid to drive (or go to school, get a job, be safe—the list goes on)” I listen and hope I make the appropriate comment.

Therapy. Now this is a big one. I’ve got to say I may have encouraged families to be active in their kids’ therapy before, but now I stress that in my family, it’s right up there with church attendance. It may look like they are only playing, but it’s a process, it takes time.

It is important for your child to go to therapy **especially** when he complains that it’s boring, not fun, not necessary. Complaints that therapy is useless often mean



Elizabeth Cassedy

that something is really happening. Therapy for the child is also for us as the foster parent. There have been times when I needed the therapist as much, if not more, than my children did.

Attachment. I still get creepy feelings when I hear a GAL or social worker express concerns that a child is getting too attached to a foster family, or that a family is too attached to a child. Foster care is not a normal or natural situation. We’re fortunate when a child can feel safe enough to attach and care for the family he or she is living with.

People have told me any number of times that my children are lucky. Maybe they are, but I always think, if they had been really lucky, they would never have entered foster care.

The paradox of this is that their loss has become our gain. Loving them as we do, I can honestly say I would never have wished those early experiences for them, regardless of the joy they have brought into our lives.

Elizabeth Cassedy is a licensing social worker for Chatham County DSS. She and her husband are also foster and adoptive parents.

Family Support Network of North Carolina



Promoting and providing support for families with children who have special needs

- Does your child have special needs?
- Do you need help finding information, resources, and services?
- Do you want to know more about a special need, disability, or diagnosis?

Hablamos español

- ¿Su niño tiene necesidades especiales?
- ¿Usted necesita ayuda para encontrar información, recursos y servicios?
- ¿Usted desea saber más acerca de alguna necesidad especial, discapacidad o diagnóstico?

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- Information & Referral
- Parent-to-Parent Support
- Education & Outreach
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Family Support Network of North Carolina
The University of North Carolina at Chapel Hill

Fostering children whose parents struggle with substance abuse

Parental substance abuse is a huge factor in the child welfare system in the U.S. Studies have shown that at least one out of every three child maltreatment cases involves substance abuse. In a 2001 survey, 85% of states identified substance abuse as a major problem in families suspected of child maltreatment.

Effects on Children

According to Breshears and colleagues (2005), when a child's primary caregiver abuses substances:

- Home life may be chaotic/unpredictable
- Parenting may be inconsistent and there may be a lack of appropriate supervision
- Substance-abusing adults may provide inconsistent emotional responses to children, or they may provide inconsistent care, especially to younger children
- Parents may have abandoned children physically and emotionally
- Parents may emphasize secrecy about home life
- Parental behavior may make the child feel guilt, shame, or self-blame

Because of these experiences, children may have developed feelings such as:

- Believing they have to be perfect
- Believing they have to become the parent to the parent
- Difficulty trusting others
- Difficulty maintaining attachment
- Difficulty achieving self-esteem
- Difficulty achieving self-autonomy

- Extreme shyness or aggressiveness

Parental substance abuse can also significantly impact children's development. According to the National Center for Substance Abuse and Child Welfare (2003), children of substance-abusing parents often do not progress as easily through the normal child developmental milestones. The experiences described above can interfere with typical physical, emotional, and educational development, and may make it harder for them to move on to the next developmental task.

A Foster Parent's Question

If you are a foster parent, most of this is probably not news to you. During your pre-service training you learned that drugs and alcohol were a concern. If you have been fostering a while, you may have seen with your own eyes the devastating impact parental substance abuse can have on children and their families.

A question that may linger for you, though, is: Am I doing everything I should to help the children in my care heal and grow? The following section, which describes common needs of these children, may help you answer this question.

Responding to Children's Needs

When a child's primary caregiver has a substance abuse disorder, he or she often needs:

- To be screened for developmental delays, medical conditions, mental health

problems, substance abuse problems, and appropriate follow-up needs to be provided

- Counseling or support groups
- Consistent, ongoing support and caregivers who keep them safe and help them recover over the long period of time.
- The opportunity to identify and express feelings with a safe and trusted adult
- Information about substance abuse and the disease of addiction so that they know they are not to blame

Child welfare social workers will take the lead in identifying and responding to most of these needs. However, as the person looking after the child 24 hours a day, seven days a week, the foster parent should know about and follow up on these items. For example, if the placing social worker does not tell you whether the child has been screened for developmental delays and other issues and you know substance abuse is an issue in the child's family of origin, ask about this.

As a foster parent you should also be ready to talk to a child about his or her parent's substance abuse. To guide these discussions, you may wish to use the following talking points from the National Center for Substance Abuse and Child Welfare (2003):

- **Addiction is a disease.** Your parent is not a bad person. She has a disease. The alcohol or other drugs cause your parent to lose control. When they drink or use drugs, parents can behave in ways that do not keep you safe or cared for.
- **You are not the reason your parent drinks or uses drugs.** You did not cause this disease. You cannot stop your parent's drinking or drug use.
- **There lots of children like you.** In fact, there are millions of children whose parents are addicted to drugs or alcohol. Some are in your school. You're not alone.
- **Let's think of people whom you might talk with about your concerns.** You don't have to feel scared or ashamed or embarrassed. You can talk to your teacher, a close friend, or to an adult in your family that you trust.

Want to Know More?

Much of the information in this article was drawn from "Understanding Substance Use Disorders, Treatment and Family Recovery," a free online course about alcohol and drug addiction. Although the course is geared toward child welfare workers, foster parents can also benefit from the valuable information contained in this course. To take this course, go to <www.ncsacw.samhsa.gov/tutorials>.



Nothing But Silence by Ashley, age 12

People all around me
Calling out my name
But no I cannot hear them
For my heart is filled with shame

Nothing but silence

But only till the break of dawn
Will I be feeling sad
For wandering out on the streets
Are my birth mom and dad

Why'd she do this to her and me
With this we'll have to cope
But while she's clean you never know
There still could be hope

But in the perfect world I know
There's no harmful stuff
But now I've come to realize
It's just a bunch of bluff

Nothing but silence

Sitting by the window sill
A tear rolls down my cheek
Although it hurts I can't express
My heart is just too weak

Nothing but ache

It's funny what one pill can do
To a mother or a kid
And now I know that for a fact
I won't do what she did

Nothing but ache

Now I live a better life
And drugs...I wouldn't dare
Away from all the harmful things
With a family who cares

Nothing but love

I know it hurts, it sure hurt me
And that's why I'll remain drug free

Nothing... but hope

Foster care placement disruption in NC by John McMahon

By age 10, Amanda had joined 13 families.

She and three younger brothers entered the foster care system in 1992 because of parental neglect. By December 1999, Amanda had lived in 11 foster homes and had been removed from one adoptive family because of abuse. Combined with the removal from her birth parents' home, Amanda had moved on average once every nine months for the first 10 years of her life.

Her brothers had fared little better. One had been in nine foster homes; the other two in eight.

— Indianapolis Star Editorial
Feb. 11, 2000

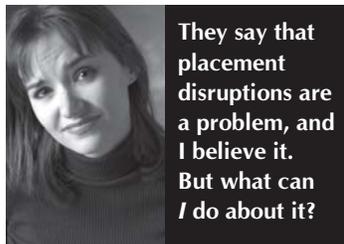
Though Amanda's story takes place in the Midwest, we would be wrong to think that children do not have experiences like this in North Carolina. This article will outline what we know about foster care placement disruption and tell you what you can do about it.

Why Does Disruption Matter?

Before we begin it is important to acknowledge that moves for children in foster care are sometimes positive. If a placement is stable and yet failing to meet a child's needs, agencies should make every attempt to meet that child's needs within the context of that placement. If these attempts do not succeed, a move may be in the child's best interests (Schofield, 2003).

In general, however, foster care moves seem to do children more harm than good. The possible effects of placement disruption on child development are described in the sidebar on this page. Other ways in which children are affected by placement instability include:

Behavior. A large study of foster children found that the number of placements children had could be used to predict behavioral problems 17 months after they entered foster care. Other



They say that placement disruptions are a problem, and I believe it. But what can I do about it?

studies have linked placement instability to children's aggression, coping difficulties, poor home adjustment, and low self-concept. Children may also experience behavioral difficulties if they think their placements won't last (Harden, 2004).

Attachment. Attachment, the enduring emotional bond between a child and a primary caregiver, is key to healthy child development. Because of maltreatment and inconsistent or inadequate parenting practices in their families of origin, some children enter foster care with attachment problems.

Many experts believe that the experience of moving from placement to placement can also cause attachment difficulties or make existing ones worse. Indeed, in 1994 the American Psychiatric Association specifically cited "foster care drift" as a cause of reactive attachment disorder in its

Diagnostic and Statistical Manual of Mental Disorders.

Long-term Outcomes. Pecora and colleagues (2005) recently examined outcomes for 659 young adults who had been placed in family foster care as children. They found that among these young adults:

- More than half had clinical levels of at least one mental health problem
- Only 2% had earned a BA or higher (compared to 24% in the general population)
- 20% were unemployed (compared to 5% for the general population)
- 33% had household incomes at or below the poverty level
- 33% had no health insurance
- 22% were homeless at least one night

These researchers concluded that many of these negative outcomes could be eliminated or reduced by increasing the stability of foster care placements.

Is Disruption Common?

The longer a child remains in foster care, the more likely it is that he or she will experience multiple placements. For example, data indicate that between 33% and 66% of placements disrupt within the first two years (Harden,

2004). In fiscal year 2002, 73% of the children in the U.S. who were in care longer than four years had 3 or more placements (USDHHS, 2005).

The federal government considers foster placements to be stable in a state if, of all children who have been in foster care for less than 12 months, 86.7% or more have had 2 or fewer placements. In FY 2002, most states achieved or came close to meeting this standard: the national mean was 84.1%.

In North Carolina, however, only 57.7% of children who had been in care 12 months or less had experienced 2 or fewer placements. This percentage is the second lowest in the U.S.

What Contributes to Disruption?

System-Level Factors. According to an analysis by the National Resource Center for Foster Care and Permanency Planning (2004) the Child and Family Services Reviews (CFSRs), which the federal government used to evaluate the child welfare system in every state, identified the following as common obstacles to placement stability:

- *Insufficient support* cont. p. 15

How Does Placement Disruption Impact Child Development?

There seems to be a link between foster care placement instability and poor developmental outcomes. However, we do not know enough yet to say whether children's existing developmental delays lead to multiple placements, whether these delays are a consequence of multiple placements, or some combination of the two (Harden, 2004).

When they ask her about the impact of placement changes on kids in care, Nancy Carter tells foster parents that they should think about it in the following terms:

For every move a young person makes in the substitute care system (including the first move from their biological family), assume they lose one year developmentally and academically. Therefore, a 17-year-old who has experienced 5 moves may respond emotionally and behaviorally much like a 12-year-old. They are able to catch up developmentally once they feel safe and secure in a placement with caring adults who provide experiences for them to grow self-sufficiently. Academically, every effort needs to be made to maintain a young person's school placement.

Empirical data does not completely support this notion. For example, when researchers with the National Study of Child and Adolescent Well-being examined the well-being of 727 children who had been in foster care for more than 12 months, they found that children in care were behind in their cognitive and social development when compared with other children, but not to the extent Carter's framework would suggest.

Carter's framework may still be useful for you, however. Carter, a foster parent trainer and Executive Director of Independent Living Resources, says that her concept has helped many foster parents understand their children's behavior. She says, "I have had foster parents come up to me after training and say they had planned to ask a social worker to move their teenager but after hearing this, they have decided to work with the teen a bit longer. That is a glorious moment! And this has happened more than once."



Carter

The National Foster Parent Association's Position on Moving Children in Foster Care

Children are traumatized by separation and loss. Since children in the foster care system have already experienced trauma, special care must be taken by service providers not to compound it. The attachments children form with their parents and other caregivers should be recognized and respected.

Children in foster care often develop strong attachments to their foster parents; at times these are as strong as the bonds they have with their biological parents. The younger the child and the longer the placement, the greater the impact of moving that child from the foster parents to whom the child has become attached.

It is sometimes necessary to move a child because of imminent danger. However, moving a child from a successful foster care placement should be done only as a last resort, after support and services have been offered to the child and family to prevent the move. If a child must be moved, there should always be a transition plan for the child, developed with the child's age and attachment needs in mind, as well as the depth of the child's attachment to the foster parents and foster siblings. (Source: www.nfpainc.org)

for foster parents. The CFSRs frequently found child welfare agencies did not provide enough services to foster parents to prevent disruptions.

- **Too few foster homes.** The CFSRs found that in many states there is an inadequate number of foster homes, forcing child welfare agencies to make placement decisions based on what is available rather than on what is appropriate for the child. The result can be poor matches between child needs and caregiver strengths.
- **Use of emergency shelters and temporary placements.** The CFSRs noted that many states use these resources as initial placements and after a disruption occurs. Using them drives up the numbers of moves children must make.
- **Lack of specialized placements.** The CFSRs found a scarcity of appropriate placement options for children with developmental disabilities or behavioral problems. This leads to inappropriate placements and subsequent moves.

Foster Family Factors. According to Schofield (2003), foster parents say a placement is more likely to disrupt when:

- The foster parents dislike or reject the child
- Foster parents are concerned about the impact of the foster child on the rest of the family
- Stressful events occur in the life of the foster family prior to and during the placement
- Child welfare-related problems occur, such as allegations of maltreatment in the foster home or previous disruptions

Other Factors associated with placement stability include:

- **Child age.** The CFSRs found that placements for youth aged 13 to 15 were the least stable (NRCFCPP, 2004)
- **Child traits.** Children with severe emotional or behavioral problems are more likely to experience placement disruption

What Prevents Disruption?

Findings from the CFSRs suggest that foster care placements are more stable when (NRCFCPP, 2004):

- Children are placed with kin
- Children, parents, and foster parents receive more services
- Children and parents are involved in case planning
- Workers have more frequent contact with birth parents

Of course, the qualities of foster parents influence placement stability, too. In a study of placement stability in Illinois, caseworkers reported that children in stable foster placements received more attention, acceptance, affection, and overall better care from their foster parents. The skill and ability of foster parents to accept and manage oppositional/aggressive behavior was especially important.

Schofield suggests the following foster parent qualities also influence placement stability:

- Sensitivity towards the child
- Accepting the child for who he or she is
- Responding to the emotional age of the child
- Sensitive and proactive parenting around birth family issues and contact
- Active parenting regarding education, activities, life skills
- Boundaries: firm supervision yet promoting autonomy
- Enjoying a challenge!

What Can You Do?

As an individual foster parent there are some factors that contribute to placement disruption—such as the use of emergency shelters—over which you have no control. There are things you can do, however:

Ask for help. Social workers report that adoptions sometimes disrupt because adoptive families wait too long before they seek help. Ask for help before you are past the breaking point.

Use respite. Respite care

should not be reserved for emergencies. Respite allows foster parents to renew their energy, which can enhance the quality and the longevity of placements.

Learn. Research suggests that foster placements are more stable when foster parents have a clear and realistic understanding of the issues their children are struggling with, and when they have the knowledge and skills needed to successfully parent their children. In particular, foster parents should take steps to learn all they can about:

- Trauma and other mental health issues that affect children
- Their children's right to receive mental health and educational services
- How to advocate effectively for these services
- Appropriate discipline techniques, especially for children struggling with trauma, mental health issues, and oppositional/aggressive behavior

Maintain family connections for the child. Sustaining connections between children and their siblings, friends, and other family members can add to their sense of stability.

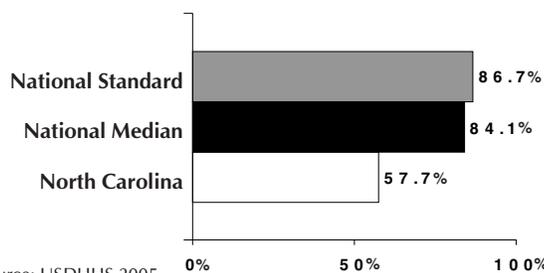
Build and maintain your own support system. Keep strong connections to your family, friends, faith community, other foster parents—all the resources you need to stay healthy and keep fostering.

References for this article are available in the online version of this issue at www.fosteringperspectives.org

Foster Care Placement Disruption in North Carolina

In a recently released federal report, North Carolina received low marks for the stability of its foster care placements. In our state in 2002, 42.3% of children had more than 2 placements during their first 12 months in foster care. This was the second highest rate of placement instability in the Nation.

Percent of Children in FY 2002 Who Experienced No More than 2 Placement Settings During their First 12 Months in Foster Care



Source: USDHHS 2005

Writing Contest

Send us a letter or short essay
in response to the following:

What person has had
the most influence on
your life?

Deadline: February 4, 2006

Anyone under 21 who is or has been in
foster care or a group home can enter.
Mail your letter to:

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NC Division of Social Services
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Candler, NC 28715

Include your name, age, address, social security number (used to
process awards only, confidentiality will be protected) and phone
number. In addition to receiving the awards specified above,
winners will have their work published in the next issue. Runners-
up may also have their work published in *Fostering Perspectives*,
for which they will also receive a cash award.

We're Also Seeking Artwork

Submissions can be on any theme. Submission requirements
described above also apply to submissions of artwork. Artwork
should be mailed flat (unfolded) on white, unlined paper.



FIRST PRIZE: \$100
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THIRD PRIZE: \$25

Get in-service training credit for reading this newsletter!

Enjoy reading *Fostering Perspectives* and earn credit toward your relicensure. Just write down the answers to the questions below and present them to your social worker. If your answers are satisfactory, you'll receive 30 minutes of credit toward your training requirement. Questions about this method of gaining in-service credit? Contact the NC Division of Social Services at 919/733-7672.

In-Service Quiz, FP v10#1

1. Name three of shared parenting's potential benefits for foster parents.
2. When school is out on vacation, where does Donise plan to take her foster kids?
3. Name two reasons you should attend the NC Foster and Adoptive Parent Association's Statewide Training Institute for Foster, Adoptive, and Kinship Parents on April 28-30, 2006.
4. Name one person you know who would be eligible to participate in the NC Alumni Mentor Program and describe how you might convince that person to apply.
5. What are the three things that help sustain Becky and Joe Burmester's energy for foster parenting?
6. What is the most helpful advice Elizabeth Cassidy has received about choosing consequences for children? How would this work in your family?
7. What are the four main points described in this issue for talking to children about their parents' substance abuse?
8. What does Nancy Carter tell foster parents to help them understand the impact foster care placement disruption has on child development? Does this fit with your experience?
9. What are the typical ways a 10-year-old child might react to a traumatic event?
10. Name three things you as a foster parent can do to help prevent foster care placement disruption.

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North Carolina ETV (Education and Training Voucher)

The North Carolina Education and Training Voucher (ETV) Program offers grants to foster youth and former foster youth to attend colleges, universities, and vocational training institutions. Students may receive up to \$5,000 a year for four years as they pursue higher education. The funds may be used for tuition, books, or qualified living expenses related to post-secondary education.

- Students must have aged out of foster care at age 18 or been adopted from foster care with adoption finalization after their 16th birthday
- They must be under age 21 to enter the program
- They must be enrolled in or have been accepted into an accredited college or vocational training program

Additional program information and an online application can be found at:

www.statevoucher.org

Questions?

Send an e-mail to etv@statevoucher.org

The NC-ETV Program is administered by the Orphan Foundation of America • www.orphan.org • 800/950-4673



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