

REACH

Resource • Education • Advocacy • Crisis • Intervention • Hope

Aspiranet and Tulare County Adoption Support Program



Happy 2020 Families!

Can you believe we have entered a new decade? Did you set any New Year's resolutions for yourself? For your family? I love the idea of leaving the past behind and setting personal and family goals. For our 2020 newsletter, REACH will focus on Trust Based Relational Intervention®. TBRI® is a therapeutic model that trains caregivers to provide effective support and treatment for at-risk children. In this newsletter, we will give you an overview of TBRI® and in subsequent newsletters will focus on the core Principles (Connecting, Empowering & Correcting). We hope you enjoy the journey and find effective parenting tools in the process!

We also want to share an upcoming event with you. Mark your calendars for Saturday, March 21st! REACH will be hosting our 3rd Annual "Journey to Hope: Youth Symposium". Our keynote speaker will be MelRo Potter. MelRo has an incredible story of surviving an abusive childhood, coupled with multiple foster placements, and eventually becoming a professional model. She is an amazing motivational speaker and child welfare advocate. You will not want to miss her. Look for more information to come regarding break-out sessions and youth activities.

JulieAnn

Tulare County
Winter 2020

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Your REACH Tulare Support Team

JulieAnn Jones, MSW

REACH Program Supervisor
jujones@aspiranet.org

Marva Bourne, DMFT, LMFT

REACH Social Worker
mbourne@aspiranet.org

Hortencia "Tencha" Casarez

REACH Social Worker
hcasarez@aspiranet.org

4128 South Demaree Street, Suite B
Visalia, CA 93277

Ph: (559) 741-7358

Fax: (559) 741-7368

www.reachtularecounty.org

NEED HELP? Is your adoptive child exhibiting any of the following behaviors?

- Frequent running away
- Sexualized behavior
- Post traumatic stress disorder
- Aggressive/assaultive behavior
- Oppositional/defiant behavior
- Self-injurious behavior
- One or more hospitalizations in a Mental Health facility
- Substance use disorder
- Fire starter
- Minor criminal behavior
- School behavior/truancy problems
- Beyond control of parents and or primary care adults
- Mild Developmental disorder not recognized by a Regional Center

If so, we can help! The REACH program can connect adoptive families to services that can help. Some of the services available to your family include Therapeutic Behavior Services (TBS) and Tulare County Wraparound. TBS is an intensive one-to-one behavioral mental health service. The service is available to parents/caregivers of children/youth who experience serious emotional challenges. Tulare County Wraparound provides high-risk youth and their families an alternative to group home care. Wraparound is a family-centered, strength-based, needs-driven philosophy promoting the reestablishment of at risk youth and families into community support systems.

Overview of Trust Based Relational Intervention® (TBRI)

By Patti Kasper, MA, MTh, TBRI Practitioner

TBRI is a therapeutic caregiving model for children from hard places which was developed at the Karyn Purvis Institute of Child Development at Texas Christian University. It is effective because it is founded in research and theory, and how optimal development should have occurred. It can be used with children of all ages and from all risk levels, as well as with children with no history of trauma at all.

When learning about TBRI, one first learns the basics of brain development and the effects of trauma upon body and brain, as well as upon the attachment cycle between a parent and child. Many trauma experts, from Karyn Purvis and David Cross (the founders of TBRI) to Daniel Siegel to Bruce Perry, recognize that because complex developmental trauma is relationship-based, so must healing be relationship based. Just as trauma negatively impacts a child’s ability to trust adults, and the world we live in, so too can a relationship with a healthy adult soothe those fears and reset a child’s ability to trust and to feel, finally, that they have a voice in the world, someone will hear their need and lovingly meet it. Just as pervasive abuse “wires” a child to react to everything defensively, trauma informed approaches build healthy connections that had not previously existed, or that were so seldom used that the connections for the most part lay dormant.

TBRI® operates on a set of three interactive sets of principles: Connecting, Empowering and Correcting. Each of these principles has two sets of strategies. Connecting Principles, the bedrock of TBRI®, use either Engagement Strategies or Mindfulness Strategies. Engagement Strategies enhance connections non-verbally (think eye contact, gentle touch and tone of voice) and Mindfulness Strategies develop a caregiver’s awareness of their contributions to each interaction. Empowering Principles use either Physiological Strategies or Ecological Strategies. Physiological Strategies focus on the child’s internal needs, such as nutrition, hydration, sleep and sensory needs (think of hunger, like in the Snickers commercials), while Ecological Strategies focus on the child’s external environment and guide children toward being able to increasingly self-regulate their attention, mood and energy. Think of transitions, routines and rituals. Correcting Principles use either Proactive Strategies or

Responsive Strategies. Proactive Strategies teach social and regulatory skills during periods of calm, while Responsive Strategies are used with children in the moment of challenging behavior.

TBRI® is the theme for our 2020 REACH newsletters, so stay tuned to learn more. You can also learn more information about TBRI® through reading the book, *The Connected Child*, by Drs. Purvis and Cross. If opportunity arises, you can attend a TBRI® training event, or an Empowered To Connect event, which is the faith-based sister program to TBRI®. You can visit the websites for TBRI® – <https://child.tcu.edu/> or <https://empoweredtoconnect.org/> Or, you can access several of KCICD’s videos and animates on YouTube if you search the site for TBRI®.

Activity

One of the best tools to help you start implementing TBRI® is to begin tracking challenging behaviors. Doing so will help you determine the “Why”. When we begin to understand the meaning behind our children’s behaviors, we can start reacting to the need rather than the behavior.

Tracking Challenging Behaviors

What was the behavior?	Who is in the room/to Whom is the behavior directed? Where does it usually occur? When? (Weekly, daily, hourly)	What do you think is the possible meaning behind this behavior? (Why?)

Trauma and the Brain

By Carrie Ontiveros, M.A.

As most of us in the world of foster care and adoption are aware, trauma impacts brain development and functioning. Trauma in children can be the result of abuse, neglect, witnessing domestic violence or separation from loved ones. It can also be related to accidents and natural disasters. The negative impacts from trauma are more significant when an event happens multiple times, multiple stressors are involved, a child is young when the trauma occurs or has few healthy relationships or coping skills. Because the children we parent, work with, and love have likely experienced trauma in their history, it is important for us to understand how trauma affects the brain, the resulting effect on development and behavior and what parents can do to minimize the negative impact of trauma and facilitate healthy brain development.

Research has demonstrated that trauma, such as prenatal exposure to substances, abuse, neglect and toxic stress, can alter the structure and physical development of the brain. For example, certain areas of the brain are smaller in those who have experienced trauma than in those who have not had such experiences. Additionally, other areas of the brain have increased or decreased activity or impaired connections. To summarize, the brains of children who have experienced trauma are different than the brains of children who have not.

The result of this altered brain development is reflected in various ways in a child, from behavior, to learning, to social and emotional functioning. Children may not develop physically or emotionally at the same pace as their peers. A child who has experienced trauma may have a difficult time switching between tasks, have tantrums or want things done their way, all of which may be the result of hyperarousal or being “triggered” by an event, memory or emotion. Learning may be challenging for a child with a trauma history due to difficulty with attention and memory. Socially, altered brain development can make social interactions more difficult. For example, a child may misread social cues or facial expressions and misinterpret a peer’s intentions, causing social challenges.

So, what can parents do to support a child who has experienced trauma? One of the first places to start is to be educated on the impact of trauma on brain development. Having an understanding of the

physical changes in the brain can help a parent better understand and support a child. Another important step for a parent is to have realistic expectations for a child as their social, emotional and developmental age may not match their chronological age. The behavior and abilities of a child may not be the same as their peers. Additionally, providing a child with an established routine and structured environment as predictability and stability allow for a sense of safety and security. Environment is an important influence on development and repeated experiences in a safe environment help a child develop a sense of trust and help them learn appropriate responses to various situations. Finally, consistent nurturing from a parent who has been educated on trauma-informed parenting may provide the best opportunity for a child with a trauma history. REACH offers parenting training and support in a variety of settings. Please contact your REACH office for additional information or any needed education and support.

Article source: Child Information Gateway. For more information and learning, please visit the Child Welfare Information Gateway website at

<https://www.childwelfare.gov/>

Video Review

What is TBRI®? Want a quick overview in less than 4 minutes? TCU has a new video resource that quickly answers your question. This TBRI® Animate video can be used to inspire parents and professionals to bring deep healing to vulnerable children. Please click the following link and enjoy the animated video!

<https://www.youtube.com/watch?v=FWScSJKj1A>

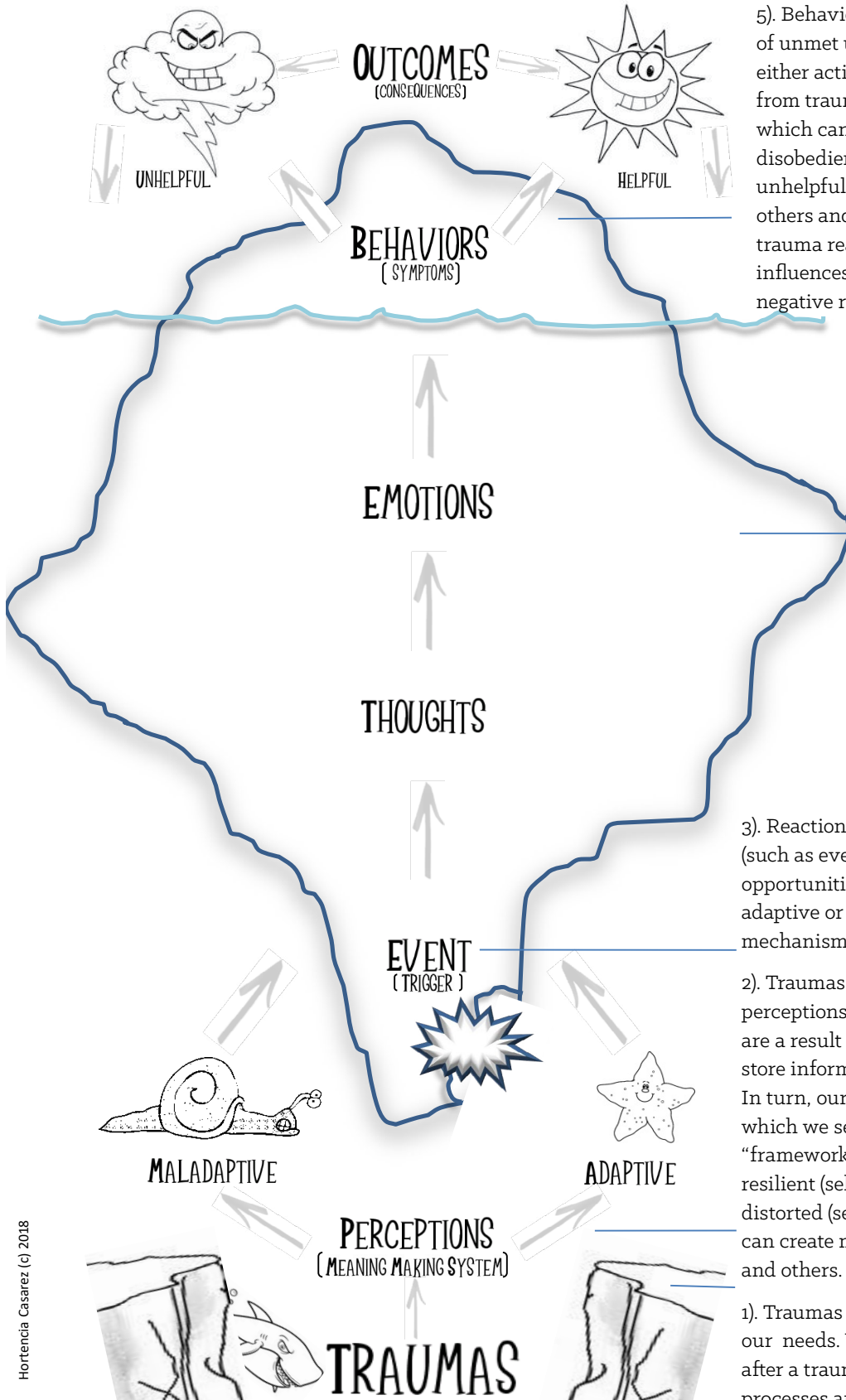
Want a deeper understanding of TBRI®?

There is a 35 minute video on YouTube that explains the principles and concepts behind Trust-Based Relational Intervention®. The video discusses how trauma can impair language, sensory processing, and coping skills, and can lead to perplexing behaviors that are often mistaken for aggression or mental illness. This video features world-renowned experts who share research that documents how consistently positive experiences with loving caregivers can re-wire a child’s brain for lasting change. Watch more at

<https://www.youtube.com/watch?v=T43zJDgTNPA>

TRAUMA AND THE BRAIN

ICEBERG MODEL



5). Behaviors can be thought of as “symptoms” of unmet underlying needs. They can present as either actions or inactions. Behaviors stemming from trauma are involuntary survival reactions which can easily be misidentified as willfull disobedience. Behaviors can create helpful or unhelpful consequences and also influence others and the environment.; however, when trauma reactions are misunderstood, these influences all work together to develop a negative response cycle.

4). Trauma affects our thoughts, emotions, and ultimately, how we react to events.

3). Reactions to environmental influences (such as events, triggers, stimulus, change, opportunities, loss, etc), are influenced by adaptive or maladaptive perceptions and brain mechanisms.

2). Traumas and life experiences influence our perceptions of the world. These perceptions are a result of the way our brains interpret and store information; a meaning-making process. In turn, our perceptions are the lenses through which we see the world. These subjective “frameworks of reality” can be adaptive and resilient (self-empowering) or maladaptive and distorted (self-defeating). Importantly, trauma can create maladaptive perceptions of the world and others.

1). Traumas are actual or perceived threats to our needs. What occurs before, during, and after a trauma influences the way our brain processes and develops perceptions; ultimately influencing our thoughts, emotions, and behaviors.

Support Groups & Events

January

- 6** Youth Leadership Meeting (March Symposium)
6:00 pm – 8:00 pm (Dinner Provided)
Fresno Pacific University, Visalia Campus
- 7** Tulare REACH Parents Corner
6:30 pm – 8:30 pm
Congregation B'nai David, Visalia
- 10** Trust Based Relational Intervention® Overview
8:30 am – 2:30pm (Lunch Provided)
COS Visalia, Room Pending
- 14** Kings REACH Adoption Support Group
6:00 pm – 8:00 pm
South Valley Community Church, Lemoore

February

- 3** Understanding the Impact of Parenting
Traumatized Children
6:00 pm – 9:00 pm
COS, Hanford, Room Pending
- 4** Tulare REACH Parents Corner
6:30 pm – 8:30 pm
Congregation B'nai David, Visalia
- 11** Kings REACH Adoption Support Group
6:00 pm – 8:00 pm
South Valley Community Church, Lemoore
- 20** Adolescent Stuck Spots in Adoption, Foster Care
& Guardianship
6:00 pm – 9:00 pm
COS Visalia, Room Pending

March

- 3** Tulare REACH Parents Corner
6:30 pm – 8:30 pm
Congregation B'nai David, Visalia
- 10** Kings REACH Adoption Support Group
6:00 pm – 8:00 pm
South Valley Community Church, Lemoore
- 21** Journey to Hope: Shame is Not My Name
Time Pending
Tulare County Office of Education
6200 S. Mooney Blvd., Visalia CA 93277

Tulare County REACH Parents Corner

This group is designed for new and experienced adoptive parents as well as others touched by adoption. Training hours provided. **PARENTS MUST RSVP FOR CHILD CARE.** Infants are welcome to join parents/caregivers.

Where:

Congregation B'nai David,
Education Building
1039 S Chinowth Street
Visalia, CA 93277

When:

1st Tuesday of the month 6:30 – 8:30 PM
January 7th
February 4th
March 3rd

Contact: Marva Bourne at (559) 741-7358 ext. 4511 or email at mbourne@aspiranet.org

Kings County REACH Adoption Support Group

This group is designed for adults thinking about adoption, parents awaiting adoptive placement and parents of adopted children. Training hours and childcare provided. **PARENTS MUST RSVP FOR CHILD CARE.**

Where

South Valley Community Church
1050 W. Bush Street
Lemoore, CA 93245

When:

2nd Tuesday of the month 6:00 – 8:00 PM
January 14th
February 11th
March 10th

Contact: Hortencia Casarez at (559) 741-7358 ext. 4513 or hcasarez@aspiranet.org

College of Sequoias Foster & Kinship Program

The College of Sequoias Foster and Kinship Program offers training of interest to foster and adoptive parents at no charge in Visalia and Hanford. For a complete list of classes, Google the key words COS Visalia Kinship. Register for classes with Miriam Sallam at (559) 737-4842 or email miriams@cos.edu. Classes are available in English and in Spanish.

Trust Based Relational Intervention® Overview

Friday, January 10th
8:30 am – 2:30 pm (Lunch Provided)
COS Visalia, room to be announced

Understanding the Impact of Parenting Traumatized Children

Monday, February 3rd
6:00 pm – 9:00 pm
COS, Hanford, room to be announced

Adolescent Stuck Spots in Adoption, Foster Care & Guardianship

Thursday, February 20th
6:00 pm – 9:00 pm
COS Visalia, room to be announced



Aspiranet

151 Canal Drive
Turlock, CA 95380

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U.S. POSTAGE
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Stockton, CA
PERMIT NO. 451

Visalia Aspiranet

4128 South Demaree Street, Suite B
Visalia, CA 93277
Phone: (559) 741-7358
Fax: (559) 741-7368
reachtularecounty.org



REACH and Tulare County Adoption Support Services

Resource: We provide 1) telephone support and referral to local services 2) referral to local adoption related community trainings 3) linkage to local therapists with experience working with adoptive families 4) lending library and website access 5) quarterly newsletter which includes book reviews and relevant adoption related information.

Education: Educational support groups and meetings are regularly held and offer a variety of topics pertinent to adoption. In addition, access to the lending library and website offer many opportunities to learn more about adoption and the impact of adoption on all members of the constellation.

Advocacy: We are here to help navigate common issues facing adoptive families. We assist adoptive parents with advocating for the assistance needed in working with educational, legislative and community partners to best meet their children's needs.

Crisis Intervention/Case Management: Participants are eligible to receive short-term therapeutic services, free of charge, by master's level social workers who are trained and experienced in adoption-related issues. Families are also eligible to receive in-home case management services as needed. Spanish translation services are provided.

Hope: We utilize our agency values of Respect, Integrity, Courage and Hope (RICH) to guide our work with adoptive families. Our goal is to promote safe, healthy and stable adoptive families through access to our services.