

# Fostering Family

TRAUMA-INFORMED PARENTING STUDYGUIDE

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**Wholeheartedness:** We are committed, passionate about what we are doing, and purposeful about why we are bringing children into home. We are here to support them in spite of the adverse childhood events that have occurred.

**Thriving:** Our goal is to help our children thrive, now and when they move into adulthood.

**Positive Emotion:** Children with a lot of adverse events tend to see things through the eyes of negativity—what's not possible. We want them to be able to experience a full range of emotions, including positive emotions.

**Engagement** refers to the ability to participate in positive activities that are fulfilling. What activities do children have that make them feel rewarded?

**Relationships** are critical for wellbeing. A lack of emotional management can make them a struggle.

**Accomplishment** is a sense that we contribute. We want our children to be able to define and fulfill the goals that they have for themselves.

**Self Regulation** is the number one predictor future success and wellbeing.

**Adverse Child Events (ACES):** Adverse childhood events effect brain development and behavior.

**Chaos & Neglect** have a profound effect on brain development and detachment.

**Trauma:** An event is traumatic if it is extremely upsetting and at least temporarily overwhelms our internal resources, experiencing intolerable feelings.

**Exposure:** "The brain of a child will become exactly what it was exposed to," is a core principle in understanding the impact of trauma. For example: children are not going to be exposed to English and end up speaking French, unless they are exposed to French as well.

**Ask The Right Questions:** Not: "What's wrong with you?" A better question is: "What has happened to you?" If we understand what has happened, then we can plan and predict our responses to behaviors.

**Attuned:** Be attentive, positive, and engaging.

**Effects Of Trauma:** Children with multiple chronic adverse events have a three-times higher risk for cancer and heart disease, and 20 year shorter life expectancy.

**Amy & Tommy:** Amy got everything she needed for healthy development and healthy attachment. Her caregiving was patterned, predictable, repetitive, and attuned. Tommy's father was very domestically violent during his mother's pregnancy. His mother was a meth user, and Tommy was born addicted. His life was chaotic.

**Brain Maps** If we did an MRI on Amy, the lower part of the brain would look fully developed, the middle part of the brain is where it should be for a five-year-old. The frontal cortex is our problem solving part of the brain, and is the last part to be fully developed. Tommy's lower part of the brain, even the brainstem at five years old, is not fully developed. The middle part of his brain is underdeveloped for a 5-year-old. Sadly, these two children are showing up to kindergarten and being expected to function at the same level. Tommy doesn't have the ability to pick up social cues. He lacks self regulation. This is like putting a 2.5-year-old in a kindergarten class and expecting them to function. These children are going to be disruptive. They cannot manage their emotions. They lack the attention needed to sit and learn. By the time they get into 5th grade you can see a trajectory of failure and exclusion.

**Stress & The Brain:** The more regulated we are the more calm we are the more our neural pathways are in the upper part of our brain. The more triggered we are emotionally or with physical threat the more we are going to be in the middle or lower part of our brain (fight or flight).

**Triggers:** Common triggers include unpredictability and transitions. Children like Tommy are very lonely. They feel a lot of shame around failure. They are borderline-triggered all day long. Amy can deal with that stress because she is living a life of predictability, pattern repetitive, ritual, and routine. She shows up in a regulated state. When stressful things happen, she can manage. When it's over, she might be tired from it, but she can regulate.

**Internal Working Model** refers to a child's core belief about the world. How does the world see them? How do they see the world? Is it conditional belonging: "I have to be a certain way in order to be loved and belong?" Or secure belonging: "I am worthy of love, people love me for who I am?" Do they function through a lens of vulnerability or resilience?

**Amy is resilient** She believes she matters to the people around her. "I am worthy, I am hopeful. I have an ability to manage myself. I know my emotions and thinking is not out of control. I trust the motivations of other people, I have no reason not to, because I haven't been violated."

**Tommy is vulnerable:** "I don't believe I matter or that I am really wanted here. I am not worthy. I do not belong. You are just one more person that is going to reject me. You don't really want me here. You say you care about me but my experience is you really don't, and when I get too disruptive you're going to send me away."

**Disconfirming Stance:** Look at what's the internal belief of this child—that's what we are working with. Give them messages: They do matter. They do belong here—no matter what. A few weeks or months later, nothing may have changed. It takes a lot of repetition for them to learn and trust a message other than, "I don't belong."

**Regulation regulation regulation.** Their regulation, our regulation, and our co-regulation. Kids like Tommy can trigger us as adults. They are very disruptive. They will say things that they know will push your buttons. They are testing you.

**Connection** is feeling seen, that they matter, and that they belong.

**Optimism** is not ignoring challenges or barriers, but believing we can make a positive impact. It will be slow. It will take time, but you will make a profound impact on this child's trajectory.

**Empathy:** Logic will not calm them down, but empathy will. Empathize first. Self-regulate first. Acknowledging what it is that they are experiencing and dealing with. Get them to calm down, then later, if you need to talk about what would have been a better thing to do or there may need to be consequences. Don't offer consequences until they are calmed down and regulated, otherwise you are going to have more of a meltdown.

**Flexibility:** Clear, consistent, predictable structures with some flexibility are needed. Over-rigidity will only cause a lot of reactivity.

**Intervention:** There is no more effective neurological intervention than a safe relationship.

**Showing Up:** Sometimes the bravest and most important thing you can do is just show up. It takes courage show up day in and day out. Over time we make a difference, so trust that you are making that difference.

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