Parental Tool Kit

How to be a Fabulous Therapeutic Parent in 12 Not-So-Easy Steps



Nurture them.

These children need to be held and rocked and cuddled. Be physical, caring and loving to them.

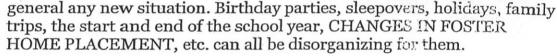
Be aware that for many of the children, touch in the past has been associated with pain, torture, or sexual abuse. In these cases, make sure you carefully monitor how they respond—be attuned to their responses and act accordingly.

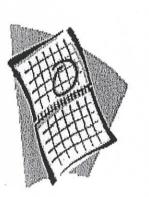
In many ways, you are providing replacement experiences that should have taken place during infancy—but you are doing this when their brains are harder to modify and change.

Therefore, they will need even more loving and nurturing experiences to help develop healthy attachments.

2. Be consistent, predictable, and repetitive.

Children with attachment disturbances are often very sensitive to changes in schedules, transitions, surprises, chaotic social situations, changes in a therapist's office, and in





Be "boringly predictable."

- Foreshadow changes and transitions many days and weeks ahead of time.
- Walk them to and through their new school building before school starts.
- Keep a large, visible calendar at home in a central location where they can easily see upcoming events. Review it weekly.

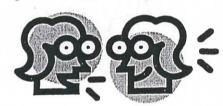
Other children, by contrast, may become anxious with too much foreshadowing, for example, anticipating a visit with a parent at Human Services. Tune in to each child's comfort zone about foreshadowing and modify your plan accordingly.

3. Listen to and talk with them.

Social interactions are an important part of parenting and of the child's healing process. One of the most important and pleasurable things to do is just stop, sit, listen,

and play. When you are quiet and interactive with kids, you find that they will begin to show you and tell you about what is really inside them.

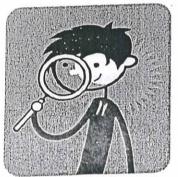
Yet as simple as these sounds, it is one of the most difficult things for adults to do—to stop, quit worrying about the time or your next task and really relax into the moment with a child.



These children will sense that you are there just for them. They will feel how you care.

4. Have realistic expectations.

Children with attachment disturbances have so much to overcome. For some, they will not overcome all of their problems. Others will make great strides. Keep in mind that they have been robbed of some, but not all, of their potential.

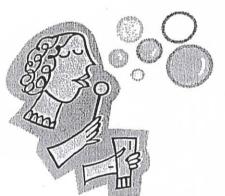


Progress may be slow. The slow progress can be frustrating and many foster and adoptive parents will feel inadequate because all of the love, time, and effort they spend with their child may not seem to be having any effect. But it does. Don't be hard on yourself. It is normal to feel swamped and overwhelmed at times when parenting with these challenges.

Keep in mind that you are planting seeds. Remember to use your "magnifying glass" and "measuring spoons" to gauge progress.

5. Play.

All attachments begin with play. Activities that allow resource parents to playfully interact with children are very important. These activities allow the opportunity for a child to be nurtured and begin the healing process.



Play with bubbles or play-dough or stuffed animals. Dig in the dirt or ride a bike. Just find a way to play with your child. This will provide the child with an opportunity to be a child – which may be a very new experience!

6. Take care of yourself.

This should probably be step #1.

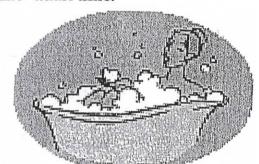
You cannot provide the consistent, predictable, enriching, and nurturing care a child needs if you are depleted. You will not be able to help if you are exhausted, depressed, angry, overwhelmed, or resentful.

Rest. Get support. Use respite care periodically to have some "adult time."

Nurture your own primary relationships with your partner, own children, family, and friends. Have a hobby or take a class or get a massage or have a regular night out.

Understand your needs for caring, compassion, and kindness from others.

Maintain a support network of others who know the work and the challenges involved. Maintain a strong trusting relationship with a therapist or coach. Talk about feelings of despair, sadness, grief or rage when they occur.



Remember to keep your sense of humor, to play and to find joy in the world.

7. Teach Feelings.

All feelings are okay to feel. Teach healthy ways to act when having feelings. Explore how other people may feel and how they show their feelings (development of empathy). Talk about how you and other family members express feelings.

When you sense that the child is clearly feeling something, wonder out loud about the feelings: "I wonder if you're feeling sad that your Mom didn't come to visit" or "I wonder if you feel angry when I say no."

Draw pictures of feeling faces together, or find pictures in magazines of different feelings. Use a digital camera and take pictures of each of you "putting on" different feeling faces, or practice making feeling faces in the mirror. Label and give words to different feelings and situations in which those feelings are common.

Help the child pay attention to body messages.

8. Help the child to self-regulate.

A child needs adults to help them learn to regulate and stay calm. Teach a child that

they are safe and protected, and that they don't have to expect the worst. Provide calming, reassuring interactions. Help them to self-soothe and self regulate.

Observe the child at different times during the day and in different situations, and be prepared for how the child will respond. Show parental "strength" and capacity to keep the child safe and calm during those difficult situations.

Don't give a child more stimulation than he/she can handle—even fun activities.

Find out what helps a child calm down, and make a plan with the child about what to do when you're not with him/her.

9. Parent these children based on emotional age.

Children with attachment disturbances are often emotionally and socially delayed. Whenever they are frustrated and fearful, they tend to regress. They may also engage in reenactments.

These are the times to avoid telling them to "act their age." If they are tearful, frustrated, overwhelmed, and responding like a two-year old, parent them as if they were that age. Use soothing no-verbal interactions. Hold them. Rock them. Sing quietly. This is not the time to use complex verbal arguments about the consequences of inappropriate behavior.



Invite children to play at both their developmental and chronological ages.

Children may also need **supervision** that is more appropriate for their developmental age than their chronological age.

10. Understand behavior before punishment or consequences.

The more you can learn about attachment problems, bonding, and moral development, the more you will be able to develop useful behavioral and social interventions.

When a child hoards food, for example, it should not be viewed as "stealing" but as a common and predictable result of being food deprived during early childhood.

The child may be "testing" based on real past experiences. Think about the message you want to give to your child, and create a consequence according to that insight.

Take time to give consequences if you need it. Only give consequences

that are enforceable.

Take time to "re-attune" following consequences.

"Time In" versus "Time Out" helps a child to "stop the action" without feeling rejected by having to leave the presence of the caregiver.

Avoid control battles/power struggles by providing the child with two acceptable choices whenever possible.

11. Use AFFECT as a primary parenting tool.

Attachment disturbed children need an abundance of WARM, SINCERE PRAISE when they've done something well, and CLEAR DISPASSIONATE CONSEQUENCES when they've

misbehaved.

PRAISE means:

- positive affect in body, voice, and facial expression
- attending to the simplest positive or neutral behaviors and praising them;
- 6:1 ratio of praise to correction (minimum);
- praise for doing; praise for being.
- make positive comments to other adults

DISPASSION means:

- fewer words;
- soft, firm voice;
- matter-of-fact tone of voice;
- low affect:
- tolerating your own reaction and not letting it bleed through;
- calm body, calm voice, and calm face;
- repetition if necessary

RE-ATTUNE following completion of consequences

12. Model and teach appropriate social behaviors.

Children with attachment disturbances often do not know how to interact well with adults or other children. Model positive behaviors yourself and realize that they are watching you to see how you will respond to different situations. Become a play by play announcer: "I am going to the sink to wash my hands before dinner... I take the soap and get

my hand soapy, then..." They will see, hear, and imitate your

coaching.

Do not be assured they know how to play or how to share feelings. Help them practice skills in both areas.

Physical contact can be problematic with children who have attachment problems. They often don't know when to hug, how close to stand, when to establish or break eye contact., what are appropriate contexts to pick their nose, touch their

genitals, or do grooming behaviors. They often initiate physical contact with strangers, which adults can interpret as affectionate... it is not. Gently guide the child on how to interact differently and address it every time it occurs.

From

"How to be a Fabulous Therapeutic foster Parent in 10 Not-So-Easy Steps" Jennifer Wilgocki, MS, LCSW James G. Ven Den Brandt, LCSW, ACSW

And adapted materials from:

Child Trauma Clinic Baylor College of Medicine Texas Medical Center, Houston TX and Casey Family Services Center for Effective Child Welfare Practice