



generating
signals of
safety

Facilitator's Guide to Module Four of TST-FC

APRIL 2017

THE ANNIE E. CASEY FOUNDATION

TST-FC: A TRAUMA-INFORMED CAREGIVING APPROACH

Trauma Systems Therapy for Foster Care (TST-FC) is a skill-building, trauma-focused curriculum for foster parents, including kin and other caregivers. TST-FC was adapted from Trauma Systems Therapy, developed by Dr. Glenn Saxe of NYU's Child Study Center, and written by Kelly McCauley.

TECHNICAL ASSISTANCE

For more information about TST-FC, please contact the Child Welfare Strategy Group at webmail@aecf.org.

© 2017, The Annie E. Casey Foundation, Baltimore, Maryland

contents

I. PREPARING TO FACILITATE	I
A checklist	I
A note about this guide	I
II. FACILITATOR'S GUIDE TO MODULE FOUR	3
Introduction and goals	3
Signals of safety	5
Identifying trusted adults	8
About TST, the child's team and you	13
What is secondary traumatic stress?	16
Identifying supports	21
Developing a self-care plan	22
What keeps you doing this work?	23
III. HANDOUTS	25
Providing children with signals of safety	27
Self-care assessment worksheet	29
Leaf-shaped cards	33

preparing to facilitate

A CHECKLIST

Needed supplies

- Module Four PowerPoint slides
- Question box
- Handouts (located in the back of this guide) — make one copy per participant of the following:
 - Providing children with signals of safety
 - Self-care assessment worksheet
 - Leaf-shaped cards (print these back to back)
- Caregiver post-training survey (in the “TST-FC Survey and Feedback Materials” publication)

Before you start

Ahead of time:

- Make copies of above materials
- Cut out leaf-shaped pieces of paper

Right before the session begins:

- Place on each table copies of:
 - The backgrounder and worksheet
 - The post-training survey
 - Leaf-shaped pieces of paper
- Gather questions from the question box

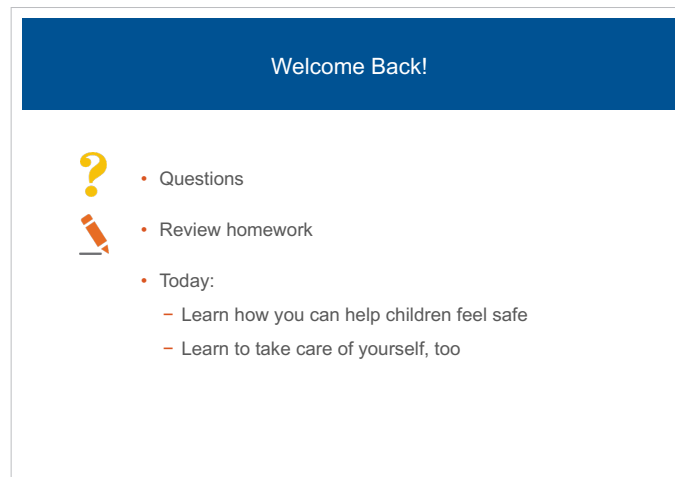
A NOTE ABOUT THIS GUIDE

Generally, text in this guide is written as you, the facilitator, would speak. In some cases, words in italics indicate a note to you, such as *Write responses on flip chart*.

facilitator's guide: module four



INTRODUCTION AND GOALS



SLIDE 1

- **Welcome.** Open the session with a brief greeting.

ACTIVITY: REVIEW BEHAVIORAL GOAL HOMEWORK

TIME: 15 MINUTES, 10 minutes to discuss in pairs, 5 minutes to share with group

- **Pair up.** Take 10 minutes to check in with your partner on their behavioral goal and see if practicing was possible this week. What worked? What didn't work? For things that didn't work, is your partner able to make any suggestions? *If sessions were provided back to back, ask participants to pair up and take five minutes to problem solve any potential barriers they see that could make it more difficult to practice their goal behavior.*
- **Discuss.** Let's briefly discuss what happened as you tried to change your behavior. How did things go for each of you? Were you able to try out new ways of behaving with your kids?
- **Ask.** Before we begin, are there any questions or comments about work we did in any of our previous sessions?

Goals for Today

Participants will be able to

Provide children with signals of safety that match their strengths

Identify the members of a child's team and describe how teams work to support a child's healing

Remember warning signs of secondary traumatic stress and how you can address this kind of stress

Bring home completed self-care plan

Trainers will help you to

Identify signals of safety and adults who can help provide them

Learn about key TST components, such as the child's team, the assessment and planning process and stage-based interventions

Recognize the symptoms of and protect against secondary traumatic stress

Develop personal self-care plan

SLIDE 2

Goals. Module Four helps you understand the importance of creating as many signals of safety in a child's world as possible. These signals add up. They will help the child feel cared for. They will also help a child heal from past signals of harm.

You will also learn about Trauma Systems Therapy or TST. TST helps you understand how to help a child manage survival-in-the-moment states. It helps teams work together on a child's behalf.

TST lessens your risk of secondary traumatic stress. It's hard work to help a child. It's important to develop support networks to care for the child, you and your family. TST reminds you that everyone in your family, including yourself, needs to know how to take good care of themselves and watch for signs that trauma is affecting your emotions and behavior.

By the end of this module, you will be able to:

- Provide children with signals of safety that match their strengths.
- Identify the members of a child's team and describe how teams work to support a child's healing.
- Remember warning signs of secondary traumatic stress and strategies for addressing this kind of stress.
- Bring home a completed self-care plan.

As facilitators, we will help each of you to:

- Identify signals of safety and adults who can help provide them.
- Learn about key TST components, such as the child's caregiving team, the assessment and treatment planning process and stage-based interventions.
- Develop a personal self-care plan.

SIGNALS OF SAFETY

Signals of Safety

One strategy across four phases




SLIDE 3

Emphasize

- While we discussed numerous strategies for each stage of a child's behavior, there is one strategy that can be used in all four stages to promote regulation. It is what we call signals of safety.
 - Signals of safety are ways of communicating from one person to another that convey warmth, concern, empathy and positive regard. Signals of safety can help children learn to trust adults again.
 - When we think about it, it makes perfect sense. Trauma, for most of our children, occurs within the experience of their relationships: trauma at the hands of parents, peer groups, extended family members and communities. Healing must also occur within the experience of relationships.
-

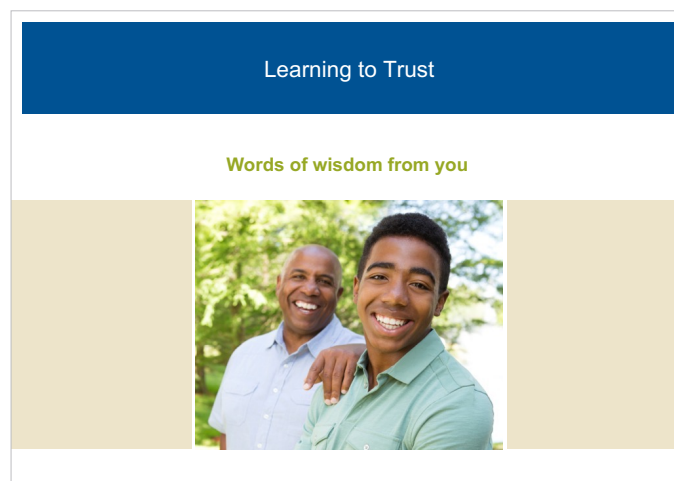
Building Trust Requires Safe and Responsive Caregivers



SLIDE 4

Emphasize

- Infants are dependent on their caregivers to help them move from stressful states to calm states. Infants' needs are met when their signals of distress are heard and responded to appropriately. With countless repetitions of successful parent interactions, the child learns to trust the parent will meet their needs.
- In situations of family trauma, the caregiver is not able to reduce the child's distress and sometimes the caregiver is inflicting harm. For a child to learn how to trust again, adults must keep the child safe and be able to respond to the child's needs in an attuned and appropriate way — time after time, day after day. Not perfectly, just consistently.



SLIDE 5

Emphasize

- Trauma teaches children that environments are not safe and they may not be able to count on caregivers. Children develop a belief about caregivers and how they will be treated based on memories that have been embedded over time. The longer the patterns of abuse have occurred, and the more intense the trauma, the longer it can take for children to learn to trust caregivers.
- Be mindful that while some children may quickly attach or overly attach too easily, this is not a sign of a healthy trusting relationship, but a learned pattern of behavior that can potentially place the child at risk of further abuse.
- While it can be difficult for foster parents to adjust to children being wary of them, it is a healthy thing that children do not just automatically trust us. Healthy trust must be built over time in slow, meaningful ways.

Next Step

- **Briefly discuss.** How have you learned to help a child build trust with you? *Elicit and discuss responses.*

Potential response include: being consistent; following through; being kind; protecting them; sitting up with them; using night lights.

Background: Signals of Safety

One way to build trust is to provide signals of safety. Signals of safety send messages of respect, regard and concern and are conveyed in a warm, nurturing manner. Signals of safety can be provided verbally or can be as simple as a quick fist bump as you pass the child in the hallway.

Signals of safety must be genuine. If a child doesn't believe what you are saying, you may reinforce a child's feelings of mistrust.

Signals of safety are best when provided multiple times throughout the day in short doses. Signals of safety can take as little as 3–5 minutes to give. Our goal is to engage the adults in a child's life to give enough signals of safety to counteract the signals of harm a child has received.

.....

Increasing Signals of Safety			
How to increase signals of safety when a child is...			
Regulated	Revving	Re-experiencing	Reconstituting
Be specific and positive	Stay calm. Remind the child of his or her past successes	Keep it simple; repeat as needed	Same as for children who are regulated. Careful — don't rush the child through this important calm-down period
EXAMPLE: "You did really well following directions in the grocery store today. You stayed right by me in the parking lot. Nice job."	EXAMPLE: "I can hear that you are getting frustrated. Often, to calm yourself, you think about something else. How can I help you do that now?"	EXAMPLE: "You are safe here." Or, "I'm here to help you get through this."	

SLIDE 6

.....

It is important to note that you want to use different signals of safety based on the stage of a child's behavior in the moment.

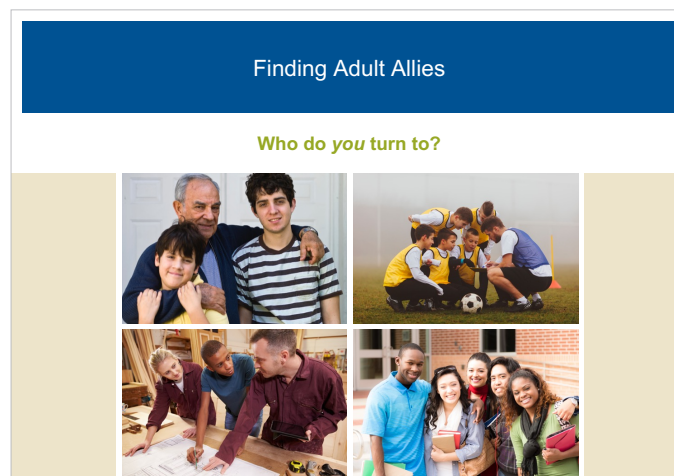
In a regulated state, when children are able to manage their emotions and behaviors, you can:

- Give lots of specific reinforcement for what the child is doing well. Positive reinforcement works much better than punishment at bringing about real behavior change.

- Provide signals of safety that may sound something like this:
 - “Aniyah, I appreciate how well you followed directions in the grocery store. You stayed right by me in the parking lot. Nice job.”
 - “Robert, I want you to know that I will be home late tonight. Carol is going to come eat dinner with you and help you with your homework before you all play a board game. Then she will help you get ready for bed. When I get home, I will come in to check on you and give you a hug goodnight. I will miss you while I’m away, but I will get home as soon as I can.”

When children are revving or re-experiencing, you need to provide different signals of safety. When children are revving, remind them of their past successes using as few words as possible. For a child who is re-experiencing, keep it even simpler. Focus solely on safety. Say things like, “I’m here and I can help,” or “You are safe.”

IDENTIFYING TRUSTED ADULTS



SLIDE 7

Emphasize

- Reaching out to appropriate adults in the child’s life to provide signals of safety is a great way to use the support of extended family and kin. You can also reach out to other adults at the child’s school, at after-school events, in your church, etc.
- Keep in mind that if the child in your home is struggling in school, identifying someone who can spend just a few minutes a day giving the child some positive attention can really help him or her get through the school day. Janitors, secretaries, librarians and kitchen staff have been wonderful sources of signals of safety to many children at school.

ACTIVITY: IDENTIFYING TRUSTED ADULTS WHO CAN PROVIDE SIGNALS OF SAFETY

TIME: 10 MINUTES, 5 minutes to write; 5 minutes to share and discuss

- **Write.** Take just a few minutes to write down some names of people in your child's life who could be asked to provide additional signals of safety.
- **Expand.** If your list is short, get creative. Where can you look for help — perhaps school; church, mosque or synagogue; extended family; cultural community; or neighborhood.
- **Discuss.** Can you share some of the types of adults you listed as potential providers of signals of safety?

Potential responses: Teachers; day care provider; neighbor; my relatives; other kids in the house; family friends; tutor; principal; therapist; school bus driver; religious instructor; teen's employer; respite care provider. Remind participants meaningful signals of safety can be provided in 3–5 minutes.

Joining a Cause

Causes that are part of something bigger can provide a child with signals of safety



SLIDE 8

Emphasize

- From our experience, some of the most powerful signals of safety a child can receive come from working in situations with other adults or youth who are part of “something bigger.” Signals of warmth, respect and mutual regard that come within the context of making a difference in the lives of others or being part of a team can be profound.
- All children need to know their lives have value and meaning and that they are capable of making a contribution to something outside of themselves.
- One word about youth activities. Being part of a team can be great for kids but it is important to match activities to your child. Know your child. Some may struggle with highly competitive teams or with overbearing coaching staff. Will the activity and adults involved build or tear down a child's sense of self-esteem?

- Less competitive activities may work better. Consider general arts programs (like choir, band and drama), community-based yoga, cooking or swimming classes or faith-based youth groups.

Next Steps

- **Discuss.** What have your experiences been reaching out to others to provide children with signals of safety? How have you seen them be helpful? What words of wisdom would you share with others?
- **Emphasize.** Children need to know that people are there for them in meaningful, consistent and lasting ways. As you remember from our first session's introduction activity, everything stands or falls on the quality of a child's relationships.

One Pathway to Healing: Building Resilience

Resilience has three ingredients:

- Relatedness
- Mastery
- Emotional regulation

You can enrich and improve kids' present and future by helping them build resilience

SLIDE 9

Children in foster care often have a lot of healing to do. One pathway to that healing is to help children in your care build, or rebuild, resiliency. Resiliency is the ability to overcome challenges or to “bounce back” from tough times. There are three ingredients to building resiliency:

1. Relatedness
2. Mastery
3. Emotional regulation

With these three ingredients, you can enrich and improve children's present and future by helping them build resilience.

Building Resilience

Increase relatedness by increasing a child's:

- Comfort with others
- Feelings of emotional safety
- Belief that support is available
- Trust that adults are honest and reliable
- Sense that *I am lovable* and *I am loved*

SLIDE 10

Increasing relatedness includes helping children develop:

- Comfort with others.
- Feelings of emotional safety.
- Belief that support is available.
- Trust that adults are honest and reliable.
- Sense that they are lovable and loved by others.

Building Resilience

Increase mastery by increasing children's belief they can do the following:

- Cope with adverse circumstances
- Go from feeling like a victim to believing they can change themselves and their circumstances
- Believe *I am not defined by my past*
- Believe they deserve good things in life

SLIDE 11

Increasing mastery in children refers to increasing children's confidence that they can do the following:

- Cope with adverse circumstances.
- Go from feeling like a victim to believing they can change themselves and their circumstances.
- Believe they are not defined by their pasts.

- Realize they deserve good things in life.
- Believe they are capable of contributing and being successful.

Building Resilience

Increase emotional regulation by helping kids grow their ability to do the following:

- Feel a full range of emotions without becoming overwhelmed or shutting down
- Self-soothe when stressed
- Describe how they feel
- Tune into others' feelings and the environment around them
- Experience the sensation of being relaxed and comfortable

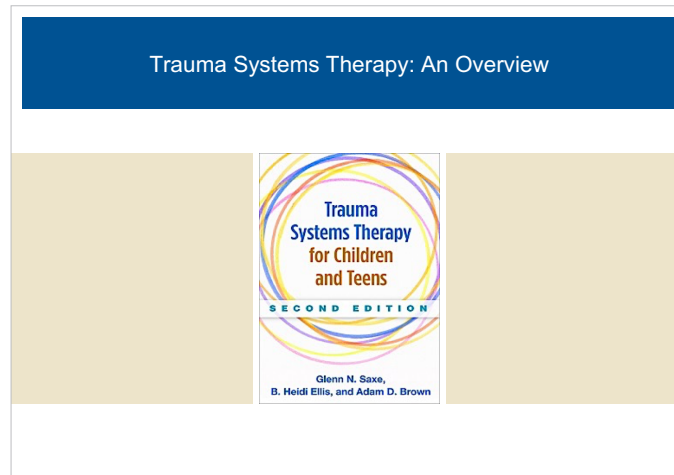
SLIDE 12

As we have discussed, you can help children increase emotional regulation by helping kids grow their ability to:

- Feel a full range of emotions without becoming overwhelmed or shutting down.
- Self-soothe when stressed.
- Describe how they feel.
- Tune into others' feelings and the environment around them.
- Experience the sensation of being relaxed and comfortable.

Being able to overcome difficulties in life is something we all need to learn, and the children in your home can learn this important skill from you.

ABOUT TST, THE CHILD'S TEAM AND YOU

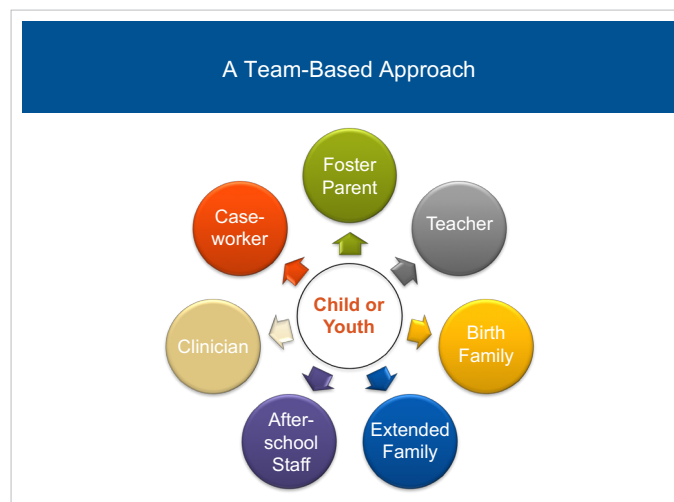


SLIDE 13

Background: About TST, the Child's Team and You

Many of the concepts we have taught so far come from an approach — and a book — called “Trauma Systems Therapy.” While it says “therapy” in the title, much of the model isn’t about therapy at all — it’s about all the things we have been discussing, like finding effective ways for the adults around a child to support that child.

TST is a model for helping traumatized children and the people who care for them.



SLIDE 14


TST works by creating teams that work together to understand why children are responding the way they are and how the team can help. One way to start the thinking process is for you and your caseworker to have a discussion about who is on the child's team. The child's team is built of family, friends, professionals and community members that care about the child. Once the team members are identified, get the team working together to identify what triggers the child's survival-in-the-moment states by completing moment-by-moment assessments, filling out the priority challenge worksheet and developing a short list of things to try both by reducing the cat hair and helping the child to cope.

Also, as a team, make sure to discuss times when you may need to call on each other for additional support. For example, when a child is harming him- or herself or others, or the child is at risk of being suspended from school or day care, or you are struggling to know how to care for the child.

It's better to reach out earlier than later. No one should ever worry alone.

Assessment and Treatment Planning

Be part of the solution:
Reach out, share your knowledge and advocate



SLIDE 15

Emphasize

As you move forward, it can help to understand:

- What goals are most important to you and the child?
- What gets in the way of achieving your goals (your major source of pain)?
- What strengths do you and the child possess?
- Who can you and your child call on for help?

Again, one of the things that can help is completing some moment-by-moment assessments to learn about your child's episodes of survival-in-the-moment states.

As you remember, we typically look at 3–5 moment-by-moment assessments to look for patterns that can then lead us to steps that can make a difference.

Three Phases		
Safety Focus	Regulation Focus	Beyond Trauma
S.A.F.E.	B.A.S.E.	S.T.R.O.N.G.
S afety establishment A vert survival states F acilitate services E nable caregiver	B uild awareness A pply awareness S pread awareness E nable caregiver's help	S trengthen cognitive skills T ell your story R e-evaluate needs O rient to the future N urture parent-child relations G o forward

SLIDE 16

Define

There are three phases of TST work. *Read through the bullets and describe what foster parents can do to help at each stage. For example, in phase one, foster parents can ensure a child's physical and emotional safety, understand the child's cat hair, begin to address it and ensure the child is receiving needed services. In phase two, foster parents can build a support network for the child and share an awareness with other adults in the child's life about what triggers and helps a child. They can build the child's awareness of his or her triggers and how to manage them by learning to identify and express feelings and use breathing and muscle relaxation exercises. Phase three is when a child can backslide—that is not unusual. Unfortunately, it is also when placement disruptions can occur. By communicating closely with a child's therapist and team, foster parents will be better prepared to understand what the child is working on and understand any changes in behavior or attitude at home or in school. The team can help the child set and achieve goals for the future.*

- Each phase has different activities to help children stay regulated. All of the strategies we have discussed fit into these three phases.
- TST aims to provide you with as many tools for the toolbox as possible.
- As you and your team work together, you will build an understanding of the unique ways trauma affects children in your care, how to work together to address those challenges and how your team can support one another to help the child.

Be Mindful of Secondary Traumatic Stress



SLIDE 17

WHAT IS SECONDARY TRAUMATIC STRESS?

We are so appreciative of the work you are doing to learn about the effects of trauma on children.

We want to assure you that you will not be alone in your work going forward. We all need to do our part as a team to work in a trauma-informed way. And we need you to recognize that, to care for children, you must also learn to care for yourself.

"In the course of providing care to traumatized populations, (caregivers) often must share the emotional burden of the trauma, bear witness to damaging and cruel past events and acknowledge the existence of terrible and traumatic events in the world."

— Bride (2004)

SLIDE 18

Caring for children with traumatic stress can potentially expose you to secondary traumatic stress, which can result from hearing about the trauma experiences of another person while trying to help him or her.

Secondary traumatic stress is common. The more you are aware of it as a risk factor, the more likely you will be to seek help and support if or when you need it.

Burnout and Secondary Traumatic Stress

- **Burnout:** the emotional and physical exhaustion you may sometimes feel when you have low satisfaction with your work and at the same time feel powerless and too overwhelmed to change. It may come from a lack of positive input about your work or too many demands and too little support.
- **Secondary Traumatic Stress:** when you notice your fundamental beliefs about the world and other people are becoming more pessimistic. You begin to lose your compassion and your faith in the goodness of people. It may come from bearing witness to the suffering of others.

SLIDE 19

Emphasize

- Burnout builds over time and is the result of physical and emotional exhaustion that can often be remedied by taking a break such as a vacation or in other cases by changing your job or job responsibilities.
- Secondary traumatic stress is something very different. It is an internal change that occurs when you have been overly exposed to other people's pain. Foster parents affected by secondary traumatic stress begin to take on the same qualities as someone who has been directly affected by trauma. Vacations don't tend to work as you take the actions, beliefs and reactions with you.

What's the Difference?

	Burnout	Secondary Traumatic Stress
Feelings	Physical, mental exhaustion Overwhelmed	Negative world view Lack of compassion Losing faith in humanity
Timing	Builds slowly over time	Can happen quickly
Cause	Too many demands over an extended time	Caring for people who have experienced trauma and feeling their pain
Remedies	A vacation, extended rest, job change or other positive activities	Multiple supports are needed (vacations or rest alone rarely help)

SLIDE 20

Emphasize

- For foster parents experiencing secondary traumatic stress, the interventions or treatment would be similar to those of a child or youth experiencing traumatic stress.

Risk Factors for Secondary Traumatic Stress — and a Lifeline



SLIDE 21

What puts you at risk?

- Your exposure. When you hear about intensely traumatic experiences that happened to your child, or when you keep learning about one trauma after another, it can wear away at you. This is thought to be a primary risk factor.
- Your stress level. Is your work or personal life causing you to feel constantly stressed?
- Your ability to be empathetic. You need to be able to empathize with your child. But that also opens you up to feeling the child's pain.
- Your personal history of trauma. Research tells us that more than 50 percent of people in the general population have experienced some sort of trauma. This means it is likely that more than half of us in this room have some sort of trauma history.
 - If you have a trauma history, you may feel as if you have dealt with it. But keep an eye on yourself. Sometimes people find that instead of handling the trauma, they have simply been very successful at burying it. These same defense mechanisms may also keep you from giving your child the intense nurturing he or she needs. You may struggle to pay full attention to the child. Or you may have unrealistic expectations for him or her.
 - To ensure good mental health for you and the children in your home, you may need to talk with a friend, seek out counseling, keep a journal or talk with a faith-based professional on a regular basis.

Emphasize

To take care of stressed children, you need a social support network. Just as children need to know who will be there for them, so do you. It is important to have a varied group of support people in your corner. This may include people who can provide:

- Practical assistance like child care, transportation or assistance with meals.
- Emotional support in the form of hugs, listening or empathizing.

- Informational support, such as advice, resource or factual information.
- Opportunities to build your confidence, be reminded of your strengths and find encouragement.

Signs of Secondary Traumatic Stress

- Avoidance or numbing
- Hypersensitivity
- Re-experiencing
- Loss of faith or belief in ability to be effective

SLIDE 22

Emphasize

If you begin to struggle with secondary traumatic stress, your behavior may look similar to the behavior of your children. For example, you may experience:

- Avoidance and numbing. Pay attention if you find yourself avoiding or distancing yourself from people or situations that remind you of your challenges. You may distance yourself from your children or your traditional sources of support. You might find yourself providing answers that are vague or dismissive, such as “I’m fine.” Your emotions may become narrow or shut down; you may pull away, even from people or activities you enjoy or you may find it difficult to experience joy or simple pleasures.
- Hypersensitivity. You may find that slowly or all of a sudden you have no tolerance. Your challenges are too hard and so are those of the children in your home. You may become irritable, react too strongly to constructive criticism or push away attempts to help. You may feel on guard, easily attacked or insulted or easily startled. You may struggle to concentrate.
- Re-experiencing. Can’t get to sleep? Can’t stay asleep? You may be worrying about or reliving bad things that happened to you or your child. You may have nightmares. Troubling thoughts or feelings may interrupt your thinking or actions. You may be engaging in frequent worrying about the children in your home to the point that it interferes in their ability to do normal kid things or to have healthy space. You may find yourself easily distracted by past events. You might even feel as if you are reliving your own trauma.
- Loss of confidence in your ability to be effective. Many foster parents have reported that sometimes they begin to question their ability to be effective. They become hopeless about a particular child’s situation. Or they begin to wonder why they became a foster parent and doubt their ability to

continue fostering or to be helpful. It is also not uncommon to begin to lose faith in others or in the goodness in the world.

If you experience any of these things, please reach out for help. Our staff are here to support you. Please do not suffer alone.

What to Do About Secondary Traumatic Stress?

- **Develop sources of support.** Talk with other foster parents, your worker, your family and friends; ask your agency for more support; reach out to a mental health professional or spiritual leader
- **Find enjoyment in other areas of your life.**
- **Limit your exposure.** Listen to your child but avoid upsetting newscasts, real-life dramas or traumas that don't concern you
- **If possible, take some breaks.** Accept respite care, take time off, schedule more time alone or with a partner or friend
- **Do you have a trauma history?** It may be time to work through it

SLIDE 23

Emphasize

Intervention for foster parents looks very similar to how we have been working to help children and youth affected by trauma. In addition to the strategies listed on the slide, you will likely want to:


- Talk with close friends and family about what your triggers are and what steps you can take and they can take to help you reduce those triggers.
- Develop your own emotional regulation skills so that you can more effectively manage those strong feelings when they come up.
- Be open to talking with a counselor, therapist or pastor so that you have a safe place to talk honestly with someone who can offer suggestions.

IDENTIFYING SUPPORTS

Let's Talk

Break into pairs

- Share who you rely on for support and what makes their support so helpful
- Think about a saying, a memory or an action that helps when things get tough for you and share that with your partner



SLIDE 24

ACTIVITY: IDENTIFYING SOURCES OF SUPPORT

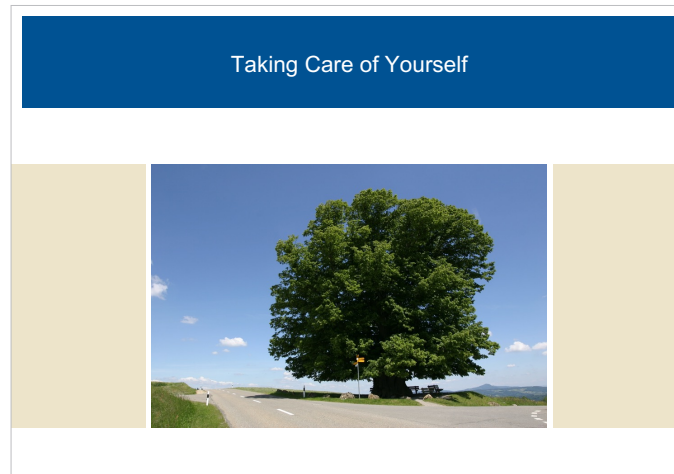
TIME: 15 MINUTES

- **Pair up.** Let's have you break up into groups of two. It may be helpful if partners separate and work with another participant. I would like you to:
 - Develop a list of sources of emotional support you have found helpful in the past; you will have five minutes. *Let five minutes elapse.*
 - List sayings or stories that have given you strength during difficult times. I'd like a story or saying from each person, if you can. For example, "My grandmother used to say, 'This too shall pass.' This reminds me that even during my most difficult challenges, things will eventually get better." Take five minutes to do this.

After five minutes have elapsed:

- **Share.** As you heard your partner share, what were some of the sources of support that came up in your discussion? What were your favorite strengths-focused stories or sayings? *Allow five minutes for discussion.*

DEVELOPING A SELF-CARE PLAN



SLIDE 25

Introduce

- **Review.** Take a look at the self-care assessment worksheets on your tables. Part 1 is an assessment. It asks you to assess yourself in a number of categories, from physical and spiritual self-care to work/life balance. Part 2 helps you identify your strengths and needs. All of this will help you plan how to grow and develop.

ACTIVITY: DEVELOPING A SELF-CARE PLAN

TIME: 20 MINUTES

- **Instruct.** Please:
 - Take some time to complete the assessment and fill out your plan for your three areas of growth.
 - Get a leaf-shaped piece of paper from the center of the table. On a leaf, list the three areas of growth you have chosen for yourself. These may be things you rated as a 1, 2 or 3. You'll have 15 minutes to complete your self-care assessment and plan, and to write on your leaf.


Allow 15 minutes to elapse, then:

- **Share.** These leaves, which list your personal goals, represent the turning over of a new leaf. They provide each of us with an opportunity to grow, change, redirect and recommit. Is there someone who feels comfortable sharing one of your goals and what you think would support you to reach that goal?

WHAT KEEPS YOU DOING THIS WORK?

What Keeps You Doing This Work?

Break into groups of three, discuss and report out



SLIDE 26

ACTIVITY: WHAT KEEPS YOU DOING THIS WORK?

TIME: 15 MINUTES

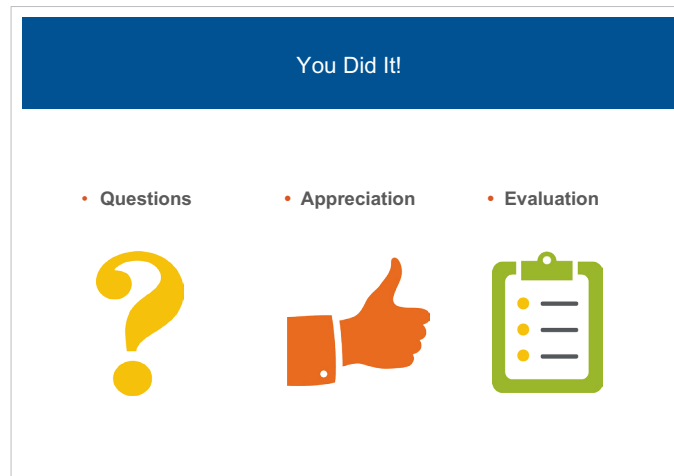
- **Discuss.** Please get back into your groups of two. I would like each of you to share why you decided to become a foster parent. Do these reasons still ring true for you? What strategies do you use to keep your commitment from fading? Take 10 minutes to discuss.

After 10 minutes have elapsed:

- **Share.** Does anyone feel comfortable sharing strategies your table discussed for keeping your commitment alive?

Emphasize

- Participants often share strategies from every aspect of their lives — strategies that help with physical, emotional or spiritual health, or approaches from their social or work lives. Just as secondary traumatic stress can affect all areas of our life, interventions to stay healthy and committed must also be holistic.



SLIDE 27

- **Questions.** Any closing questions or comments?
- **Appreciation.** *Thank participants for their hard work and numerous contributions toward the success of the training. Follow any closing ceremony plans you developed as you planned these training sessions.*
- **Evaluation.** Please complete the post-training survey located in the center of the table. We would very much appreciate your feedback. Leave the completed forms in the center of the table.



handouts

The next several pages contain the following handouts:

- Providing children with signals of safety
- Self-care assessment worksheet
- Leaf-shaped cards

PROVIDING CHILDREN WITH SIGNALS OF SAFETY

Using signals of safety is a great strategy for helping children regulate their emotions and behavior.

Signals of safety are one-on-one interactions that show warmth, concern, empathy and positive regard. Signals of safety are powerful: They can help a child learn to trust adults again. They remind a child that you notice and appreciate him or her and can be trusted.

To provide children with signals of safety:

- **Catch them being good.** Use specific, detailed words and a warm, nurturing approach to describe what a child did well.
- **Provide other kinds of positive feedback,** such as a quick fist bump or a thumbs up.
- **Be genuine.** If you don't believe what you are saying, children will pick up on your lack of sincerity and you may reinforce a child's mistrust.
- **Keep it up!** Sprinkle signals of safety in short doses throughout the day. Make sure children know they can count on you.
- **Engage other trusted adults** in providing signals of safety.
- **Start** where the child is.
- **Understand** how a child feels when you choose how to provide signals of safety.
- **Ask** yourself, in which stage (which of the 4 R's) is the child?

HOW TO INCREASE SIGNALS OF SAFETY WHEN A CHILD IS...			
Regulated	Revvig	Re-experiencing	Re-constituting
Be specific and positive EXAMPLE: "You did really well following directions in the grocery store today. You stayed right by me in the parking lot. Nice job."	Stay calm. Remind the child of his or her past successes. EXAMPLE: "I can hear that you are getting frustrated. Often, to calm yourself, you think about something else. How can I help you do that now?"	Keep it simple; repeat as needed. EXAMPLE: "You are safe here." Or "I'm here to help you get through this."	Same as for children who are regulated. Careful — don't rush the child through this important centering period.

Create a network

Children who have experienced trauma need a support network of caring, reliable adults. Look for trusted people in the child's:

- **Extended family.** Is there an aunt or grandfather who has always had the child's best interests at heart? Ask these family members to suggest and provide signals of safety.

- **School or activities.** Is your child struggling in school or elsewhere? Identify someone who can spend just a few minutes a day one on one with the child to help him or her get through the day. Janitors, secretaries, librarians, kitchen staff and coaches have been wonderful sources of signals of safety to many children.

When you talk to other adults, let them know that providing signals of safety is simple. All it takes is regular, one-on-one, positive interaction with the child. Adults can do a world of good by letting a child know they are reliably in the child's corner.

Brainstorm

Make a list of people in your child's life who could be asked to provide additional signals of safety. If the list is short, think about who you could go to get some help, such as the child's school, church, mosque or synagogue. What about other places in your neighborhood, such as a community or cultural center or the library? What about the child's extended family — who might be able to help?

YOUR SELF-CARE ASSESSMENT WORKSHEET

Part I: Assessment

Rate the following areas in frequency:

5 — frequently 4 — occasionally 3 — rarely 2 — never 1 — it never occurred to me

Physical self-care

I make sure to:

- _____ Eat regularly (breakfast, lunch, dinner)
- _____ Eat healthily
- _____ Exercise
- _____ Get regular medical care when needed
- _____ Take time off when sick
- _____ Get massages
- _____ Dance, swim, walk, run, play sports, sing or some activity that is fun
- _____ Take time to be intimate and/or sexual
- _____ Get enough sleep
- _____ Wear clothes I like
- _____ Take vacations
- _____ Take day trips or mini vacations
- _____ Make time away from telephones

Psychological self-care

I make sure to:

- _____ Make time for self-reflection
- _____ Have my own personal psychotherapy, spiritual director, mentor
- _____ Write in a journal
- _____ Read literature that is unrelated to my work
- _____ Do something at which I am not an expert or in charge
- _____ Decrease stress in my life
- _____ Notice my inner experience (listen to my thoughts, judgments, beliefs, attitudes and feelings)
- _____ Let others know different aspects of me
- _____ Engage my intelligence in a new area

- _____ Practice receiving from others
- _____ Be curious
- _____ Say no to extra responsibilities sometimes

Emotional self-care

- _____ Spend time with others whose company I enjoy
- _____ Stay in contact with important people in my life
- _____ Give myself affirmations and praise
- _____ Love myself
- _____ Re-read favorite books, re-view favorite movies
- _____ Identify comforting activities, objects, people, relationships, places and seek them out
- _____ Allow myself to cry
- _____ Find things that make me laugh
- _____ Express my outrage in social action, letters, volunteerism, donations, etc.
- _____ Play with children

Spiritual self-care

I make sure to:

- _____ Spend time with nature
- _____ Find a spiritual connection or community
- _____ Be open to inspiration
- _____ Cherish my optimism and hope
- _____ Be aware of non-material aspects in my life
- _____ Try at times not to be in charge or an expert
- _____ Be open to not knowing
- _____ Identify what is meaningful to me and notice its place in my life
- _____ Meditate
- _____ Pray
- _____ Sing
- _____ Spend time with children
- _____ Have experiences of awe

- _____ Contribute to causes I believe in
- _____ Read inspirational literature, listen to talks, music, etc.

Workplace or professional self-care

I make sure to:

- _____ Take a break during the workday
- _____ Take time to chat with co-workers
- _____ Make quiet time to complete tasks
- _____ Identify projects or tasks that are exciting and rewarding
- _____ Set limits with colleagues, students, clients, etc.
- _____ Balance my workload so no one day or part of a day is “too much”
- _____ Arrange my work space so it is comfortable and comforting
- _____ Get regular supervision, consultation, etc.
- _____ Negotiate for my needs
- _____ Have a peer support group
- _____ Develop a non-work area of professional interest

Balance

- _____ Strive for balance within my work life and work day
- _____ Strive for balance among work, family, community, relationships, play and rest

Part 2: Plan

Here are three strengths from my assessment (responses with 4s or 5s):

Here are three areas of potential growth from my assessment (responses with 2s or 3s):

What I would like to begin doing to build these three areas of potential growth:

For growth area 1, I plan to:

For growth area 2, I plan to:

For growth area 3, I plan to:

Adapted by Kelly Young from Saakvitne, K. W., Pearlman, L. A., & the Staff of the Traumatic Stress Institute/Center for Adult & Adolescent Psychotherapy LLC. (1996). *Transforming the pain: A workbook on vicarious traumatization*. New York, NY: W. W. Norton & Co.

LEAF-SHAPED CARDS

Make enough copies so each participant has one leaf. Cut and fold leaf in half.

