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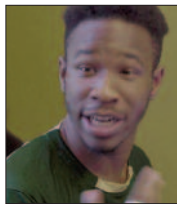


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Finding Sanctuary in a Time of Uncertainty: a Trauma-Informed Response to COVID-19

By **Kristyn Peck, MSW & Brad VanDenend, LMSW**

Foster Focus Contributors

Unified by a shared vision of a child and family service system that promotes resilience to counteract the impact of childhood adversity and trauma, West Michigan Partnership for Children (WMPC) and child welfare system partners in Kent County, Michigan began a three-year process of implementing the Sanctuary Model in October 2019.

Calling ourselves the Kent Coalition for Family Resilience (KCFR), WMPC and our consortium member private foster care agencies; the Michigan Department of Health and Human Services (MDHHS); the Kent County Circuit Court – Family Division; Court Appointed Special Advocates (CASA) of Kent County; and the community mental health provider, Network 180 received a five-day training from the New York-based Sanctuary Institute February 24 –28, 2020.

We chose the Sanctuary Model as it has been effective in communities, systems, organizations, and programs throughout the nation in developing a shared framework for understanding trauma, informing policy development, and influencing behavior change resulting in improved child and family outcomes. The Sanctuary Model is designed to assist human service organizations with creating an organizational culture that promotes healing and recovery from trauma and adversity for those within the organization as well as those it serves.

The model was created by Dr. Sandra Bloom and her colleagues in the early 1980s and is recognized as an evidence-informed practice by the federal government’s mental health organization (SAMHSA). The Sanctuary Model is built on four foundational pillars which include: 1) a theoretical basis in trauma theory that provides a lens for understanding behavior, 2) a philosophy for creating safe environment through adherence to seven commitments, 3) a trauma-informed problem-solving framework, and 4) a set of practical tools known as the Sanctuary Tool Kit.

When we were meeting two months ago, we had no idea we’d be applying the model’s commitments and tools to our community’s response to an international pandemic in just two weeks. Here we are, with our state under an Executive Stay Home, Stay Safe order, trying to balance our mission of ensuring the safety and well-being of our community’s children and families while taking care of our own, and upholding our responsibilities to not contribute to further spread of COVID-19.

Weathering this pandemic is akin to a marathon rather than a sprint. We are still in the midst of ongoing trauma and adversity and likely will be for some time. For many, the unknown that comes from the loss of the ordinary and predictable leads to distress. Many families have lost wages and as their resources are

shrinking their stress increases. As we draw upon theoretical underpinnings of trauma theory, we recognize that trauma pulls us out of our rational prefrontal cortex and activates our primitive survival brain that serves to keep us safe when threat is detected. Thus it is common and expected that we develop increased levels of discomfort, anxiety, fear, detachment, helplessness, and hypervigilance in response to this pandemic. These are all normal responses to the abnormal state we are in. These responses should not be seen as a signal that something is wrong with us, but rather as a natural response to what is happening to us and around us.

As we continue to shelter-in-place and search for a guidepost in navigating the uncertainty that surrounds us, the Seven Commitments of the Sanctuary Model help us attend to the present and illuminate a path toward the future.

The Seven Commitments of the Sanctuary Model are: Nonviolence/Safety, Emotional Intelligence, Social Learning, Democracy, Open Communication, Social Responsibility, and Growth & Change. The Sanctuary Institute teaches that ‘change is loss,’ and we are all mourning a variety of losses – the loss of freedom, income, connections, relationships, routine, predictability and the ordinary—to name a few. Yet, as we lean in and apply the Sanctuary Commitments, we are able to evaluate our current thoughts, feelings, and behaviors and begin to focus on the future and experience growth and hope.

Many have already demonstrated a commitment to Nonviolence/Safety by adhering to the social distancing guidelines set forth by public health experts and elected officials in order to slow the spread of the virus and to keep each other and those most vulnerable safe. Maintaining our physical distance can certainly disrupt our social relationships and connections with others which are also critical for our sense of safety. We are social beings and our natural sense of safety comes from connections with other human beings. Maintaining healthy attachment relationships and social connections while responsibly maintaining our physical distance is critical during the days, weeks, and possibly months ahead.

Social distancing is an important part of our collective Social Responsibility – which recognizes that each person’s actions have an impact on others and therefore requires individual responsibility for our actions. Staying home and avoiding close contact with others can therefore be viewed as a choice rather than a directive, and it’s a choice that has a direct impact on the well-being of others and the long-term outcome of this pandemic.

Social Responsibility also looks like caring for those in our community who are most vulnerable during this pandemic, by providing groceries and meals if we are well and able, by donating to organizations that provide for basic needs if we have the means to do so, and by checking in by phone and webconference to maintain social connectivity.

While stressful times can put us in a scarcity mindset, leading to decreased creativity and risk-based decision-making, Social Learning focuses us on collaborative thinking and problem solving through exposure to other's perspectives and ideas. Recognizing that none of us are as smart as all of us, learning from and with each other may just be what gets us through this unprecedented time.

Social Learning can spur innovation in the workplace as organizations must adapt to the new normal. Social Learning looks like social media pages full of creative things to do at home with your children, and virtual get-togethers with family and friends. So share ideas, big and small, and don't be afraid to borrow from the creativity of others.

During times of stress and uncertainty our active minds can fill the spaces created by the unknown with our deepest fears and worst-case scenarios. We can look to the principle of Democracy which requires active participation for everyone's voice to be heard. This looks like frequent and transparent communication within organizations, teams, and within your family to provide space for everyone to share what's on their mind and discuss current realities. The community created by practicing Democracy reminds us that we are all in this together.

Trauma and adversity can lead to helplessness and isolation. Emotional Intelligence is about managing our emotions so we don't hurt ourselves or others. The stress and uncertainty of this worldwide pandemic have led to a range of emotions and certainly periods of discomfort. It is common to avoid uncomfortable emotions, opting instead to keep busy and create as much predictability and normalcy as possible. While this is an important coping skill, those of us who are 'helpers' are often inclined to

push through while neglecting our own thoughts and emotions. In the spirit of Emotional Intelligence, find time to pause and acknowledge your thoughts and emotions. Your feelings are all normal responses... so be compassionate with yourself. Don't hesitate to Openly Communicate with a trusted loved one, friend, or co-worker and resist the silence, secrecy, and shame that often accompanies trauma.

What may feel vulnerable to you just might be received as a strength and/or permission for the other person to also be vulnerable. It is often the awareness and recognition of our emotions that keeps us from getting stuck and overwhelmed and allows us to create responses that truly meet our needs.

We are in the midst of a collective trauma and all experiencing varying degrees of loss and disorientation. We can empathize with each other because we are in this together. We understand the collective feelings of stress, distress, isolation, loneliness, and fear because we feel them ourselves. Perhaps this understanding will lead to an increased aware-



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ness of what youth served in the child welfare system have experienced – often all on their own – in secret and in isolation. And perhaps this awareness will lead to a collective growth in how we support and care for these youth. This pandemic will come to an end and life will again resemble the ordinary we once took for granted. And while the hurt of trauma occurs in the context of relationships, so the healing occurs within relationships.

While we are craving relationships in the midst of this pandemic, our youth are also desperate for healthy relationships to foster healing, hope, and growth.



Kristyn Peck is the Chief Executive Officer of West Michigan Partnership for Children (WMPC), a nonprofit organization piloting a performance-based model for foster care that is the first of its kind in the state through a contract with the Michigan Department of Health and Human Services (MDHHS). As the first employee, Ms. Peck led all start-up activities necessary to launch WMPC as a nonprofit child placing agency. Ms. Peck motivates a high-performing leadership team and provides overall direction to 19 staff; oversees an annual budget of approximately \$35 million; decisions around the placement and care of more than 800 children in foster care in Kent County at any given time; and the continuous quality improvement of more than 40 sub-contracted private providers of child welfare services.

Ms. Peck moved to Grand Rapids, Michigan in April 2017 for this role after working for more than thirteen years in human services on behalf of unaccompanied refugee and immigrant children and victims of human trafficking in Washington, D.C. Ms. Peck earned an M.S.W. from the University of Maryland-Baltimore and a B.A. in Journalism from the University of Maryland-College Park.

Brad VanDenend is WMPC's Clinical Liaison, increasing access of children and youth in foster care to mental health services and supports. Mr. VanDenend understands the complexity of community mental health resources and has developed and delivered trainings on secondary traumatic stress in the workplace. Mr. VanDenend has more than 16 years of experience working with children and families and before joining WMPC in March 2019 served as a Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) Supervisor at D.A. Blodgett – St. John's. He is personally called to WMPC's mission having grown up with foster siblings, five adopted siblings, and four biological siblings. Mr. VanDenend has a Master's in Social Work from Grand Valley State University and a Bachelor's in Social Work from Calvin College.



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