



Post Adoption Resource Center Newsletter Oakland & Macomb Counties

Medical Subsidy Refresher...

The Medical Subsidy Department of the Michigan Department of Health and Human Services is able to support adoptive families by financially assisting with a myriad of services, inclusive of behavioral aides, temporary out of home placement, tutoring, specialized camps, and orthodontic coverage. Many of these services require pre-authorization and some work done up front, but this department can be a large support to adoptive families. This article with briefly detail some of the services that adoptive families may qualify for.

Behavioral Aide: A behavioral aid is a trained person, identified by the adoptive par-

ent(s), who is able to provide short term training to the child and parents to enhance their skills and modify the child's behavior. Behavioral services are designed to be short term (12 months or less) and are designed to work in conjunction with a child's therapist to put the training provided by the therapist into real life practice.

Temporary Out of Home Placement: Temporary Out of Home Placement is a program designed in conjunction with a qualified practitioner as a means of providing continued



to support to the family. The program requires the completion of treatment plan to describe how the service may be beneficial for the family and allows for the child to be placed with an approved, family selected
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Orchards Children's Services

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2016 Trainings and Support Group Dates

January

Training: 1-5-16
Support Group: 1-12-16 (M)

February

Training: 2-2-16
Support Group: 2-9-16 (M)
2-15-16 (O)

March

Training: 3-1-16
Support Group: 3-8-16 (M)
3-21-16 (O)

April

Training: 4-5-16
Support Group: 4-12-15 (M)
4-18-16 (O)

May

Training: 5-3-16
Support Group: 5-10-16 (M)
5-16-16 (O)

June

Training: 6-7-16
Support Group: 6-14-16 (M)
6-20-16 (O)

July

Training: N/A
Support Group: 7-12-16 (M)
7-18-16 (O)

August

Training: 8-2-16
Support Group: 8-9-16 (M)
8-15-16 (O)

September

Training: N/A
Support Group: 9-13-16 (M)
9-19-16 (O)

October

Training: 10-4-16
Support Group: 10-11-16 (M)
10-17-16 (O)

November

Training: 11-1-16
Support Group: 11-8-16 (M)
11-14-16 (O)

December

Training: To be announced
Support Group: To be announced

For more information on the Post Adoption Resource Center please contact us at

313-530-9746

Or visit our website at



Medical Subsidy Refresher Continued...

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provider, for up to 72 consecutive hours for a total of 16 days per calendar year. This service can be a nice break for both child and family and allow the entire household time to re-focus and re-charge so that the family can stay healthy.

Tutoring: Funds are available to provide tutoring to students 7 or older who are receiving a failing grade and/or who have an IEP or 504 plan and require specific additional help beyond parental assistance.

Specialized Camps: Medical Subsi-

dy has assisted in payment for specialized overnight and day camps in the summer months for children that have a related diagnosis.

Orthodontic Care: With proper medical documentation the Medical Subsidy may be able to cover up to \$3,500 in orthodontic care for adopted children.

These are just some of the services that are available through the subsidy office. As has been noted most of the assistance provided by the medical subsidy office requires prior authorization and some work done up front.

Orchard's PARC is familiar with the services available via the Medical Subsidy Program and is happy to further explain and / or offer assistance in accessing these services to anyone that is interested. For further information and/or more details please contact Jennifer Harmon at 313-530-9746.



History of National Adoption Month & Raising Awareness



In 1976 the governor of Massachusetts, Michael Dukakis, announced an adoption week in his state, later that year President Gerald Ford announced that the respective adoption week in Massachusetts would be celebrated nation wide. As more and more states started to participate in Adoption Week it became clear that more time was needed for holding events and in 1995, President Clinton proclaimed November as National Adoption Month.

Within the month of November there is a National Adoption Day, November 23rd, and courthouses throughout the nation participate by finalizing hundreds of adoptions simultaneously.

National Adoption Month is a time to celebrate family and to bring

about awareness that there are hundreds of thousands of children in foster homes awaiting adoption. States, communities, and agencies hold events during the month to bring the need for adoptive families into public view.

For our part, Orchard's PARC celebrated by enjoying a beautiful cake with families involved in our program during our training event on 11/3/15. The celebration also continued with Orchard's providing education, resources, and activities to new adoptive families in Wayne, Oakland, and Macomb Counties on National Adoption Day.

There are many ways to honor adoption day and to help raise awareness about adoption. Here are just a few:

- ◆ Share facts about adoption on social media
- ◆ Ask your local library to create a special adoption month display
- ◆ Donate age-appropriate adoption

books to your child's classroom

- ◆ Make a meal for a newer adoptive family.
- ◆ Mentor a new adoptive family.
- ◆ Create lifebooks for your children, or read the lifebooks you've already created.
- ◆ Hang a special adoption saying or verse in your room.
- ◆ Babysit for another adoptive family.
- ◆ Purchase an adoption themed book or movie and watch it as a family.
- ◆ Invite a family interested in adopting or fostering over for dinner.
- ◆ Donate time to an agency that is connected to foster care or adoption.

Information in this article adapted from the articles "History of National Adoption Month" by Carrie Craft, Adoption/Foster Care Expert and 25 Ways Adoptive Families Can Celebrate National Adoption Month by Rachel Garlinghouse

Upcoming Events...

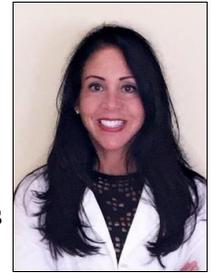


On January 5, 2015 at our Southfield Office we will have author Sara E. Crutcher do a talk about her experience with adoption, things she's learned along the way, and suggestions that she may have for adoptive families. Sara is the author of "Heart Picked, Elizabeth's Adoption Tale" Sara's book is about how six-

year-old Elizabeth tackles the explanation of explaining what adoption means to her classmates before her adopted father visits the school for family week. The Detroit based author indicated that she couldn't find any children's books on adoption featuring black parents who've adopted black or mixed raced children aside from one book from the 1970s. Sara indicated that "You have books where kids can see families that look like theirs or a main character that might look similar to them or even just knowing that, hey, that kind of looks like my mom or my dad. I think it helps children in the process to see something that looks similar to them and to be able to relate to that." Sara will have books available for purchase at the event on January 5th.

Information adapted from, This woman Wrote An Awesome Book to Encourage More Black Families to Adopt, by Taryn Finley.

On January 12, 2015 at our Macomb Office we will be hosting Gretchen Perry, FNP-BC, NP-C Fundamental Healing, P.C. who will be discussing the importance of "what's at the other end of the fork." Ms. Perry works for Fundamental Healing where a holistic is used to heal the body in the most natural means possible. The mission of Fundamental Healing is to help patients achieve the highest expression of health and they work to achieve this through the investigation of many factors based on a Functional Medicine Model. Functional Medicine addresses the underlying causes of disease, using a systems-oriented approach engaging both the patient and practitioner in a therapeutic partnership. By shifting the traditional disease-centered focus of medical practice to a more patient centered approach, Functional Medicine addresses the whole person, not just an isolated set of symptoms. Functional Medicine practitioners spend time with their patients, listening to their histories and looking at the interactions among genetic, environmental, and lifestyle factors that can influence long term health and complex, chronic disease. For additional information, please visit, www.functionalmedicine.org.



This Season's Highlights



November and December are busy months at Orchards Children's Services and within the PARC Program. On November 23rd over 300 families received a turkey with all of the Thanksgiving Day trimmings, many of whom were PARC families. This is a day that means a lot to all of us as there is nothing that is more generous than parents making the decision to become foster and adoptive parents, and this is a simple way to give something back. Orchards was also lucky enough to have players from the Li-

ons Organization come and help us hand out the baskets, which really shows a commitment to the families we serve not only at the agency level, but also at the larger community level as well.

Speaking of Lions, in addition to assisting the agency in giving out Thanksgiving dinners to our families, they also took many of our Orchards children, inclusive of a number of PARC, families shopping in an effort to ensure that the children had the opportunity to purchase items for the special people in their lives. One of the children pur-



chased a flower for his mom, and another bought he and his dad matching footballs and fuzzy socks for his mom! It was an awesome time and fun was had by all!



On December 13 the agency hosted our annual holiday party where over 70 PARC people were able to eat, dance, do crafts, and take pictures with Mr. and Mrs. Claus! This is an event that is always a huge turnout for PARC and something that our families look forward to all year long!

Parenting a Child Who Has Experienced Trauma

“Children who have experienced traumatic events need to feel safe and loved. All parents want to provide this kind of nurturing home for their children. However, when parents do not understand the effects of trauma, they may misinterpret their child’s behavior and end up feeling frustrated or resentful. Their attempts to address troubling behavior may be ineffective, or in some cases, even harmful.”

Trauma can occur as a result of many different experiences, some, as described in the article *Parenting a Child Who Has Experienced Trauma* (<https://www.childwelfare.gov>) include abuse (physical, sexual, or emotional), Neglect, effects of poverty (not having enough to eat, or homelessness), being separated from loved ones (i.e. entering foster care), bullying, witnessing harm to a loved on (or even a pet), natural disasters or accidents, and unpredictable parental behavior.

Trauma impacts each person in different ways, but some factors can help to identify how an individual may react to their trauma and/or cope following their traumatic experience. The younger a child is the more vulnerable they are to experience the effects of trauma. “Even infants and toddlers who are too young to talk about what happened retain lasting ‘sense memories’ of traumatic events that can affect their well-being into the adulthood.” Additionally, the more times trauma is experienced, the more harmful the effects of trauma are likely to be. Lastly, the more danger a child perceives themselves to be in, at the time the traumatic experience occurs, the more lasting effects the trauma (is likely) will have on them. It is important to remember that children that have positive relationships with healthy adults are (typically) able to recover easier, nevertheless, every child is an individual with varying levels of sensitivity and should never be compared to another, especially as it relates to experiences with trauma.

Understanding Your Child’s Behavior

“When children have experienced trauma, particularly multiple traumatic events over an extended period of time, their bodies, brains, and nervous systems adapt in an effort to protect them; this may result in acting out behavior that has been designed as a means of survival.” Here is a chart of symptoms by age that may be demonstrated by the traumatized child:

Young Children (Ages 0–5)

Irritability, “fussiness,” startling easily or being difficult to calm, frequent tantrums, clinginess, reluctance to explore the world, activity levels that are much higher or lower than peers
Repeating traumatic events over and over in dramatic play or conversation, delays in reaching physical, language, or other milestones

School-Age Children (Ages 6–12)

Difficulty paying attention, being quiet or withdrawn
Frequent tears or sadness, talking often about scary feelings and ideas, difficulty transitioning from one activity to the next
Fighting with peers or adults, changes in school performance
Wanting to be left alone, eating much more or less than peers

Getting into trouble at home or school, frequent headaches or stomachaches with no apparent cause, behaviors common to younger children (thumb sucking, bed wetting, fear of the dark)

Teens (Ages 13–18)

Talking about the trauma constantly, or denying that it happened, refusal to follow rules, or talking back frequently,
Being tired all the time, sleeping much more (or less) than peers, nightmares, risky behaviors, fighting, not wanting to spend time with friends, using drugs or alcohol, running away from home, or getting into trouble with the law

“Sometimes trauma symptoms overlap with mental health diagnoses, and while medication may help, treating the underlying cause by addressing the child’s experience of trauma will be more effective in the long run.” Here are some other ways that you can help your child who may have experienced the effects of trauma:

Identify trauma triggers. Something you are doing or saying, or something harmless in your home, may be triggering your child without either of you realizing it. It is important to watch for patterns of behavior and reactions that do not seem to “fit” the situation.

Be emotionally and physically available. Some traumatized children act in ways that keep adults at a distance (whether they mean to or not). Provide attention, comfort, and encouragement in ways your child will accept. Younger children may want extra hugs or cuddling; for older youth, this might just mean spending time together as a family.

Respond, don’t react. Your reactions may trigger a child or youth who is already feeling overwhelmed. (Some children are even uncomfortable being looked at directly for too long.) When your child is upset, do what you can to keep calm: Lower your voice, acknowledge your child’s feelings, and be reassuring and honest. **Avoid physical punishment.** This may make an abused child’s stress or feeling of panic even worse. Parents need to set reasonable and consistent limits and expectations and use praise for desirable behaviors. **Don’t take behavior personally.** Allow the child to feel his or her feelings without judgment. **Listen.** Don’t avoid difficult topics or uncomfortable conversations. **Be consistent and predictable.** Develop a regular routine for meals, play time, and bedtime. Prepare your child in advance for changes or new experiences. **Be patient.** Everyone heals differently from trauma, and trust does not develop overnight. Respecting each child’s own course of recovery is important. **Allow some control.** Reasonable, age-appropriate choices encourage a child or youth’s sense of having control of his or her own life. **Encourage self-esteem.** Positive experiences can help children recover from trauma and increase resilience.

Information taken from and adapted from the article Parenting a Child Who Has Experienced Trauma via the Child Welfare Information Gateway. For more tips and information please contact Jennifer Harmon at 313-530-9746.