

Meeting Developmental Needs: Loss

#### Competencies and Objectives

#### Competencies

Prospective foster parents and adoptive parents:

- Know the categories and types of loss, responses to loss, and the factors that influence the experience of separation, loss, and placement.
- Know the effects of separation and loss on children's feelings and behaviors.
- Know how to help children cope with feelings resulting from separation and loss, and how to minimize the trauma of placement.
- Can apply an understanding of separation, loss and grief to the adoption process.

#### In-Session Learning Objectives

As a result of their participation in this training program, prospective foster parents and adoptive parents will be able to:

- 1. Explain why dealing with loss and separation is very challenging work.
- 2. Explain how reactions to expected losses may differ from reactions to unexpected losses.
- 3. Define and explain the three major categories of loss.
- 4. Identify losses that birth families, foster families, and adoptive families experience because they are involved in the child welfare system.
- 5. Describe the Pathway Through the Grieving Process.
- 6. Provide examples of how children behave and react as they respond to grief.
- 7. Identify ways to deal with behaviors and reactions of children who are responding to grief.
- 8. Identify the eight factors that influence how someone experiences a loss.



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- 9. Identify the losses that children in the adoption process may be grieving.
- 10. Describe the process of developmental grieving and its importance when children are adopted.
- 11. Describe the Loss History Chart, and how it can help people understand loss.
- 12. Explain the importance of teamwork in dealing with separation and loss.

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#### At-Home Learning Objectives

Through reviewing, at home, the information in their PRIDEbook, prospective foster parents and adoptive parents will be able to:

- 1. Describe how losses related to separation and placement affect child growth, development, feelings, and behaviors.
- 2. Identify some ways to help children through the grieving process according to their age and stage of development.
- 3. Describe the importance of understanding a child's loss history.
- 4. Identify issues affecting their ability and willingness to work effectively with birth parents, based on the information obtained from this session's A Birth Parent's Perspective.
- 5. Identify specific ways to support a child's safety, permanence, and well-being.

#### Agenda

#### Part I: Welcome and Connecting with PRIDE

- A. Welcome and Review of Competencies, Objectives, and Agenda
- B. Making Connections from Session Three
- C. Making Connections with Assessment, Licensing, and Certification

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#### Part II: Loss and Grieving

- A. The Experience of Loss
- B. Categories and Types of Losses
- C. Connecting Loss and Grieving to Future Roles

#### Part III: Living With Loss

- A. The Pathway Through the Grieving Process
- B. Factors that Influence Loss
- C. Being a Loss Manager for Children
- D. The Important Role of Teamwork

#### Part IV: Closing Remarks

- A. PRIDEbook Resources
- B. A Birth Parent's Perspective
- C. PRIDE Connection
- D. Preview of Session Five
- E. Making a Difference!
- F. End Session



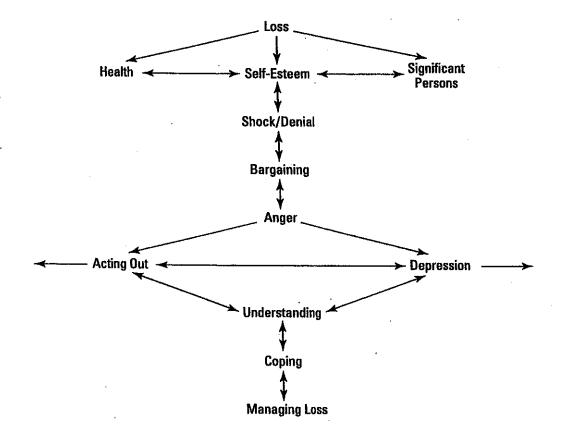
# The Pathway Through the Grieving Process\*

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Note that responses to grief may not occur in orderly progression as outlined above. In fact, many people go back and forth from one response to another, or may even exhibit several responses within the same day.

<sup>\*</sup> Adapted from Pasztor, E.M. Premise #1 Activity: The Pathway Through the Grieving Process. In <u>University of Oklahoma Advanced Training Course for Residential Child Care Workers.</u> Tulsa, OK: University of Oklahoma National Resource Center for Youth Services.

See also Pasztor, E.M., and Leighton, M. (1992). Helping Children and Youth Manage Separation and Loss, Homeworks #1 (At-Home Training Resources for Foster Parents and Adoptive Parents). Washington, DC: Child Welfare League of America, 13.

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	Help received	
	Effects on Child/Youth	
	What Happened? (What are the circumstances of the loss?)	
Loss History Chart	Type of Loss (Remember that losses can include an important person, health, or sense of safety and well-being.)	
Child's L	Age at Time of Loss	

Kevin's Loss History Chart

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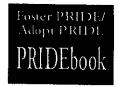
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Age at Time of Loss	Type of Loss (Remember that losses can include an important person, health, or sense of safety and well-being.)	What Happened? (What are the circumstances of the loss?)	Effects on Child/Youth	Help received
<b>c</b> c	Self-esteem and health; Physical abuse	Kevin's mother used drugs and whipped him with a belt and baseball bat resulting in bruises and lacerations	Kevin blamed himself and worried about who would take care of his mother	Child protection worker talked to Kevin and referred him to counseling to help him to understand the abuse
œ	Significant other; separated from mother	Child protection worker took Kevin from school; Kevin was very scared	Kevin worried about his mother, was very angry in the foster home	Same as above
ത	Significant other; separated from foster family Self-esteem and well-being; separated from school	Return home was planned	Kevin had very conflicting feelings about leaving the foster family and going home to his mother	Foster care team implemented planned transition; Kevin continued counseling; school personnel helped him move to new school
6	Significant other; Separated from mother	Mother was unable to continue in her drug treatment and Kevin re-entered care	Kevin blamed himself for his mother's relapse	Child protection worker talked to Kevin; Kevin continued counseling
10–12	Significant others; left shelter and foster families Self-esteem and well-being; cultural affiliation	Kevin had planned moves from shelter to foster home, and to his preadoptive family; each move involved a new school system Kevin's placements did not always reflect his cultural heritage	With each move Kevin had more difficulty making the adjustment; he continued to worry about his mother.  Kevin denied that there was any effect, he asked not to continue with the Big Brother	Counseling continued Kevin had an African American Big Brother for a short period

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Help received	No help; Kevin refused to continue counseling; school adjustment counselor tried to help	Social worker and preadoptive family talked to Kevin, arranged for letters and telephone	Unknown	Mobile health clinic provides medication; Street Worker from local church befriends Kevin; police connect Kevin back to agency when he is arrested for sexual solicitation
Effects on Child/Youth	Grades in school went from excellent to failure	Kevin began to skip school and abuse substances contact	Kevin began to engage in high risk behaviors	Kevin in denial about the consequences of his behavior; he readily agrees to go live with another foster family; Kevin very agreeable to services and presents as motivated
What Happened? (What are the circumstances of the loss?)	Legal delays and an appeal by Kevin's mother resulted in the preadoptive family questioning if they could continue with adoption	When mother lost the appeal the court terminated visits	Kevin ran away a month before the adoption finalization	Kevin makes money through prostitution; injured on several occasions and repeated STDs (Sexually Transmitted Diseases)
Type of Loss (Remember that losses can include an important person, health, or sense of safety and well-being.)	Self-esteem and well-being; delays in the adoption process	Significant other; visits with mother ended	Significant other; Kevin ran away from preadoptive family	Self-esteem and well-being and health; Kevin engages in sexual solicitation
Age at Time of Loss	12–15	٦ <u>٢</u>	<u>2</u>	15-16 0

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#### Putting It Together

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Instructions:

Consider Nathan's situation, described below. We learned about Nathan earlier in our video, *Making a Difference!* 

- What losses has Nathan had to grieve? Of these losses, which will he need to continue to grieve and why?
- How might the team help Nathan now with his past and present losses?
- What supports may Nathan continue to need in the future from his foster family or other members of a helping team?

Nathan is 14 years old. He has lived with the Hanson foster family for the last three years since coming into the agency's care. For his first 11 years, Nathan lived with his mother and father. His father, an alcoholic, was sober off and on. When Nathan's father was drinking, he would occasionally verbally abuse Nathan and his mother. During those times Nathan's mother also worked long hours to support them. Nathan was frequently alone at home. Because of his father's drinking and the problems it caused, Nathan's extended family on both sides cut ties with the family.

Nathan's mother was killed by random gunfire one night on her way home from work. Nathan was 11 at the time. His father began drinking heavily and couldn't care for Nathan. Nathan began staying home from school to care for his father during the day. At night he ran with a group of boys who were aggressive and destructively acting out. After his arrest on a juvenile charge, the agency investigated, and removed Nathan from his home. Nathan's relatives were unwilling or unable to care for him. Nathan's father has made significant progress, and feels ready to take his son home. Nathan will be leaving the Hanson's soon, after three years in their home.

#### **Key Points**

#### Purpose of Discussing Loss and Grieving

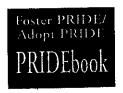
- All children who are attached to a parent or caregiver will experience a
  crisis when they are separated from that person. Even if the parent or
  caregiver was abusive, an attachment usually remains.
- Separation from that attachment typically is a serious loss for the child.
- Children placed with foster families and adoptive families have changed families at least once or twice and, in too many cases, more often. The feelings that children have about this loss will cause them to behave in ways that indicate they are angry and sad.
- While the child's feelings are appropriate, the behaviors may be harmful to the children themselves, to others, and to property.
- Foster and adoptive parents need to understand feelings and behaviors associated with loss. This is part of protecting and nurturing children, meeting developmental needs, and addressing developmental delays.
- Finally, loss is what we call an "equal opportunity employer." Each of us probably has experienced some kind of personal loss. Therefore, our own experiences probably will affect the way we help children with theirs.

#### Challenge of Working with Loss and Grief

- · Separation, loss, and grief are painful experiences.
- It makes us uncomfortable to be with children who are sad and angry.
- · Other people's grief can remind us of our own painful experiences.
- Our own painful experiences can help or hinder the way we help others.
- · Dealing with painful losses can take a long time, sometimes a lifetime.

#### **Defining Loss**

Losses generally fall into two categories: those that are an expected part of the human life experience, and those that are unexpected, that we hope won't happen to us.



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 Unexpected losses are often more painful because they are not seen as a normal part of the life course.

Loss can also be divided into three types:

- First, there's loss of health, both physical and mental.
- Second, there's the loss of a loved one, whether through death, or divorce, or infertility because of the baby one could never have.
- Third, there's the loss of self-esteem, when we feel shame or hurt.

Circumstances that bring children into family foster care or adoption are unexpected losses which have serious effects. They often involve loss of health (from abuse or neglect), loss of loved ones (their parents, brothers and sisters, other extended family members), and loss of self-esteem (children blame themselves, thinking they have been bad, and so their parents have rejected them).

#### **Developmental Grieving**

Even though we identify stages of grief, in reality, most of us find we move from one stage to another and back again while the loss is still fresh. In other words, we go back and forth along the pathway.

We may also find ourselves grieving again, at a later time, even after we understand what happened, have developed some coping skills, and are managing fairly well. This is called developmental grieving.

Here's an example: Perhaps some years ago you were in love with someone, and then the relationship ended. You didn't want it to end, and you were very sad for a long time. Then you got over it. In fact, you have been happily married to someone else for many years. Then, one day, you hear a song on the radio that was your special song with that other person. And, suddenly, to your surprise, you feel sad again.

Developmental grieving can be "triggered" by anniversaries, holidays, birthdays, songs, and foods, or even meeting someone who resembles the person we miss.

Developmental grieving, and moving back and forth along the pathway is very common, especially for children. Children may seem to forget their pain for a while, and then suddenly become very angry or sad.

Once we reach the stage of understanding or coping, we might think we have resolved our loss. Of course this doesn't mean we are happy about it. It just means we are able to continue our lives, and may even have learned more about ourselves and others as a result of the loss experience.

Sometimes adults, and especially children, appear to have accepted a loss, but in reality, they have simply not dealt with it. They have bottled up their emotions and not allowed themselves to feel the pain. Unfortunately, these strong feelings remain and may erupt later.

Some people seem to be bombarded with loss. Before they can grieve one loss, they experience another. Continuous losses, especially without the opportunity to grieve, result in each new loss triggering all the strong yet unresolved emotions from previous losses.

Children and youth coming into care are all being separated from the families and the environments they know. They will be grieving. This is true even when the children have run away or asked to be taken away. Remember, most children do not want to leave their families, no matter how inadequate or abusive the family has been.

Many children in care have suffered many losses. They experienced the death, desertion, or disappearance of significant people in their lives. They experienced loss of trust when their parents failed to meet their needs or abused them. Some have lived with several different families. Pain from loss and separation is another type of trauma that can cause children to become stuck at one level of development, or even regress to an earlier level.

Adoptive parents hope that placement will be a joyful event for the child they are adopting. In reality, most children, no matter how well prepared and how much they want to be adopted, are experiencing loss and anxiety about the future, so placement is a time when children are grieving new losses and old losses. Loss and trauma for Indian children may be intergenerational. Their history and present status may add a level of distrust or grief that can manifest in behavioral difficulties or incongruities (acting out, silence, passive defiance, etc.).

Losses that children who are in the adoption process may be grieving include the following:

- The finality of the separation from their birth family.
- · The loss of their foster family.
- The loss friends, neighbors, teachers, coaches and others who they knew when they were living with their foster family and/or birth family.
- The loss of the hope that they might return to their birth family.

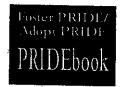
In working with children, we should expect their past life experiences to be a significant factor in the present. They may have learned behavior patterns that helped them survive neglect or abuse, but the community may view these behaviors as inappropriate or disruptive. They are often angry, depressed, or hostile because of the loss and pain they have suffered. We call this "the pain beneath the rage." In other words, whenever you see anger, look for the hurt! Other children seem too good to be true, or appear to be charming and carefree. This is their way of coping, by hiding the pain that will eventually surface.



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They need families that will, temporarily or permanently, provide them with care and the consistency as they deal with the pain, to learn more appropriate behaviors, grow, and develop.

### The Important Role of Foster Families and Adoptive Families

The children who will be placed in your care usually have experienced all three major losses: health, significant others, and loved ones. If you recall our discussions about why children come into care, what causes their developmental delays and their attachment problems, you begin to see all the losses these youngsters have endured.

Sometimes we may wonder, since these children have had so much trauma, how can we possibly make a difference? But every day, hundreds of thousands of foster parents, adoptive parents, and social workers do make a difference in the lives of these children, and for their families. We should remember that many losses experienced by the children also affect their parents.

What can a foster parent or an adoptive parent realistically do?

- Recognize that by the time children who have been physically abused, sexually abused, neglected, or emotionally maltreated get to foster parents or adoptive parents, they may have very confused ideas about parent-child relationships.
- Know that it will take a team of persistent and skilled foster parents or adoptive parents, social workers, and perhaps therapists to help children change their ideas and form healthy attachments.
- Demonstrate to children, 24 hours per day, seven days per week that:
  - their needs and feelings are important.
  - they are going to be cared for.
  - their needs can be expressed and met in positive ways.
  - parents and other adults can be consistent, and can be trusted.
- Talk honestly, openly, and directly with the child's social worker about concerns and problems.

#### The Important Role of Teamwork

According to Dr. Vera Fahlberg, who has decades of experience in working with children, youth, and families involved in fostering and adopting, loss is never completely resolved. It may recycle in a variety of ways, but it need not threaten successful adoption. Nor should the loss and grief issues of children

jeopardize their experience with a foster family. In fact, the child's new family, foster or adoptive, is not supposed to be the source of the problem, but instead the source of the cure.<sup>1</sup>

Foster PRIDE/ Adopt PRIDE PRIDEbook

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This is important work, and we need to have reasonable expectations for progress children can make and for the help we can give. One way to have reasonable expectations is to understand the factors influencing a child's ability to move through the pathway through the grieving process.<sup>2</sup> These factors are:

- · Nature of the loss—loved one, health, or self-esteem.
- Age at the time of each loss.
- Degree of attachment to the persons from whom the child is being separated.
- Ability to understand why separation took place. For example, an 8-year-old who was sexually abused can understand a foster parent who says, "What your Daddy did was against the law. He can't see you until he learns that it was wrong to touch you like that. And your mother has to go learn how to protect you and keep you safe. It is okay to feel mad, bad, and sad about being here. You will be safe here until your parents learn how to take care of you." But a 2-year-old can't understand that information; she or he will need a soothing tone of voice, appropriate touch, and consistency.
- Emotional strength.
- Cultural influences affect how children are taught to express their grief.
   Children who are taught not to cry will hold their grief inside.
- Circumstances causing the loss.
- Number of previous separations.
- · Help given before, during, and after the separation.

Even if you have a child for a short time, as a foster parent, you can:

- · Help the child feel safe and cared for.
- · Let the child express his or her feelings.

<sup>&</sup>lt;sup>1</sup>Interview with Vera Fahlberg. (Spring 1991). In: <u>Adoptalk.</u> St. Paul, MN: North American Council on Adoptable Children, 4–5.

<sup>&</sup>lt;sup>2</sup> Pasztor, E.M. (1983). <u>Preparation for Fostering: Preservice Education for Foster Families (A Training Manual).</u> Ft. Lauderdale, FL: Nova University.



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 Help the child get from one stage of grieving to another, i.e., from shock or denial to anger; or teach appropriate ways to express; and help the child learn to understand what happened to his or her family.

What adoptive parents can do:

- Help the child feel safe and cared for.
- Encourage the child to express feelings.
- · Be patient with the child.
- Understand that, as the child grows and develops, all the steps along the pathway may need to be expressed over and over again. After all, your 18-year-old will understand differently than an 8-year-old, and you will have had many years to develop solid attachments.

#### Teamwork is Essential

Helping others with their losses is probably the most challenging and most rewarding experience of fostering and adopting. As we said in Session One, the issues we have to deal with are especially emotionally charged. Not only is it okay to ask for help, it's a good idea. And if we can talk openly and honestly with each other, together we can make a difference for fragile children and families.

As prospective foster parents and prospective adoptive parents, you need to carefully consider the extent to which you are, or can be, a loss manager for children and families who may be very wrapped up in feelings of shock and denial, anger, or depression.

Being a loss manager is a challenge because:

- The losses that children have may remind us of our own. If one of us was sexually abused, it might be hard to work with a child who has been as well.
- Losses related to abuse, neglect, and maltreatment may make us angry with the parents, even though these tragedies are losses for them, too.
- A child placed with us may remind us of the child we weren't able to have.
- A child's developmental grieving, even long after placement, may make us sad or frustrated. After all, we're the ones who have loved the child.

 Our loss of control (our inability to have children, our need to qualify to be foster parents and adoptive parents through an agency) can make us feel angry and sad. Foster PRIDE/ Adopt PRIDE PRIDEbook

So it's important to talk honestly, openly, and directly with the Family Development Specialist to identify your strengths, concerns, and the supports you need.

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It is critically important to have loss managers on the team because:

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- We need the energy to help those in our care, instead of being "stuck" in stages of shock/denial, anger, or depression due to our own losses.
- Our own experience of growing stronger from losses gives us some ideas about how to help others.
- · We can continue our opportunities for personal growth.

Do you recall in the *Making a Difference!* video how the rosebush finally blossomed? Well, the rosebush had to do its own growing, but it took the team of Emma Hanson, Nathan, and later, Vernon, to create the environment in which it could grow. In fact, once Nathan and Vernon were able to understand and cope with their own sad and mad feelings, they could be loss managers for that rosebush.

You can see why teamwork is essential.



#### You Need to Know!

#### Separation and Loss: Responses and Needs

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The grieving process:

- Is a normal part of life for most people, and certainly for the children in your care.
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- · Influences feelings which, in turn, direct behavior.
- Requires that foster parents, adoptive parents, and social workers cooperate to help children manage feelings and behaviors so they can make the most of their foster or adoptive experience.
- Ellicits different responses:
  - Shock, denial, or protest
  - Bargaining
  - Anger (acting out)
  - Depression (anger turned inward)
  - Understanding and coping

There is a pathway through the grieving process which begins with a significant loss. This loss typically falls into one, two, or three categories. The children in your care usually have experienced all three of these losses:

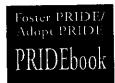
- Loss of health from being abused or neglected.
- Loss of significant persons (parents or siblings) to whom they felt a strong attachment.
- Loss of self-esteem from feeling worthless, inadequate, and unable to control the events in their world.

As children move through this pathway, there are signs indicating which response the child is experiencing. Children also have specific needs related to each developmental stage.\*

<sup>\*</sup> From Pasztor, E.M. and Leighton, M. (1992). <u>Homeworks #1: Helping Children and Youth Manage Separation and Loss.</u> Washington, DC: CWLA, 13.

#### Understanding and Helping Children with the Impact of Separation and Loss

Age	Developmental task	Effect of separation and loss	Help to minimize trauma
Infant	Infants develop a sense of security and trust from day-to-day experiences. Their primary job is to develop a sense of trust in others. By 7–9 months they know family members and fear others. Their dependency on mother decreases as trust develops.	They react to difference in temperature, noise, visuals. They may lose their sense of being able to rely on the environment and the individuals within it. May become less flexible. Rebuilding trust in adults is major task.	Be attentive to needs. Keep changes in daily routine to a minimum.
Toddler	They separate from their mothers, begin to develop self-confidence and self-esteem, and begin to feel capable of doing things themselves.	Damages their sense of independence, self-confidence, and self-esteem. Toddlers may regress to younger behaviors.	Need help developing independence, or a balance between dependency and independence. Tolerate clingy behavior, as they do not trust adults will be there when they need them. May behave like they want to parent themselves. Need opportunities for trust and autonomy, and opportunities to control their environment. Be aware of all events surrounding the separation or loss, as similar events will reawaken memories in the future.
Preschooler	Become good at self- care at home, typically ask a lot of questions, become more individual and more independent. Show tremendous interest in and excitement with the world. Develop language skills. Unable to understand cause	World is confusing, fear abandonment, susceptible to misperceptions as to the reasons for moves, and will blame selves.	Listen for odd or peculiar statements for clues suggesting a child's misperceptions about the reasons for the placement. Be attentive to the child's development. Language delays are common in children who have been abused or neglected. Need consistency and predictability to regain sense of trust and control.



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# Understanding and Helping Children with the Impact of Separation and Loss (continued)

Age	Developmental task	Effect of separation and loss	Help to minimize trauma
Six-to-ten year-old	Learning in school, developing motor skills, and same-sex peer relationships are important. Moral development includes a heightened sense of right and wrong. Become more assertive; the issue of fairness is very important. Increased ability to understand and conceptualize.	Interferes with ability to learn and develop friendships. Regression to earlier stages is common.	Need help to reason out loss.  Need information about their past to help them with identity issues.  Need help with peer relationships, poor school performance, and identifying and managing angry feelings. Children who have been sexually abused need nurturing in nonsexual relationships.
Adolescent	Need to be accepted by peer group versus need to belong in family. Must cope with abundant sexual and aggressive impulses. Beginning to find place in the world. Want independence from family; control battles common.  Developing intellectual and reasoning abilities. Sense of belonging and peer relationships are very important.	Loss is intensified due to adolescent's emotional instability and impulsivity. Loss complicates issues of identity and selfesteem. Separation from family at a stage of desiring independence confuses the anger	Need to be full participants in the helping plan. Need to feel their desires are considered at all times. Need help acknow-ledging and managing sad and angry feelings, and low self-esteem. Need to be acknowledged for responsible behaviors. Need help in resolving sexual issues in nonsexual relationships. Need support in peer relationships; for example, help to manage peer pressure.

A move/loss is a time of high anxiety and discomfort for children. Being aware of all their feelings, and responding in a helpful way can support the attachment process between the child and the new family

This chart is a composite of information found in a collection of work by Vera Fahlberg called, "Putting the Pieces Together," which includes the book: <u>Attachment and Separation</u>. The collection, "Putting the Pieces Together" was originally published in 1982, and republished and distributed in January 1988 by Spaulding for Children, Michigan.

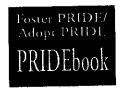
#### The Importance of a Loss History Chart

Children coming into family foster care or joining an adoptive family:

- Bring with them their individual history, including every significant loss throughout their lifetime.
- Have reacted to these losses by moving through the various stages of the grieving process.
- Are now experiencing the pain of losing a significant other.
- Will move at different times from one stage to another and back again.

Knowing the child's loss history will enable the foster parent or adoptive parent to understand the child's current needs, and to help the child deal with his or her losses. The Loss History Chart must be completed by the foster parent or adoptive parent, and the child's social worker. The success of the Loss History Chart will depend on:

- Teamwork among the foster parent, adoptive parent, and social worker.
- The availability and documentation of the loss history.
- · Recognition of the child's progress through the grieving process.
- The stability of the child's present family situation.



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### A Birth Parent's Perspective "They Tell Me I Need to Let Her Go"

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I started hearing the voices before Susan was born when I was about sixteen years old and in school. It was very confusing then and they only got worse. Bill, Susan's father, and I were dating and when we were sixteen I was pregnant and we got married. At first I thought the voices were just the stress. You know, not enough sleep, lots of money worries, a baby, all that stuff.

All along the voices told me to do things and sometimes people said they worried about Susan. Somebody sent a social worker who helped for a while. But around the time Susan was seven, I went into the hospital for a whole year. I missed her eighth birthday. I knew they were all ashamed of me, but it was tough in the hospital too. The social worker and some neighbors helped me go home.

Six months later, Bill was taken seriously ill. Within two years' time he was dead. I had no money, no family, my own medical problems, no job and an eleven-year-old daughter who was a nervous wreck all the time.

I asked my aunt to help. For a while she helped care for Susan for weeks at a time, taking her to school, feeding her, etc. I still had no job and money was getting tighter and tighter.

I often forgot to take the pills they gave me. Susan looked scared sometimes when I said things. Then one day we got evicted. Next thing I knew Susan was in foster care and I was on the streets. Homelessness takes it all away. I know Susan needs to live in a house and go to school, have friends and live with people who can care for her. But I'm not there.

They tell me I need to let her go. But she's all the family I have left. I write her cards all the time and send her money to that court place. I sure hope they give it to her so she knows I care even if I'm not with her. Maybe she can save up and come visit me someday.

I only visit her once a year. That's the agreement. But I get excited every time! She's OK and getting so tall. I wish things weren't like they are but she seems happy and OK with this. That is something important to me.

# PRIDE Connection Loss History Chart

In training you learned how difficult life experiences can delay child growth and development. These may also be viewed in terms of loss:

- The loss of physical or intellectual ability by genetic or parenting conditions, disabilities, or accidents and trauma.
- The loss of physical and emotional safety by physical abuse, sexual abuse, or neglect.
- The loss of self-esteem and nurturance by emotional maltreatment.
- The loss of positive social interactions because the children are learning from adults who model or teach inappropriate behaviors.

You've learned how children feel about these losses, how loss can affect their behaviors, and how adults can help children who have had these experiences.

Many potential foster parents and adoptive parents have experienced such losses themselves. Think about the losses you experienced in your early life, what happened, how you felt at the time, and what help you received from others.

A Loss History Chart is attached to this PRIDE Connection. It will help to illustrate the information you are being asked to think about now. When you meet with the Family Development Specialist for a mutual family assessment, you will discuss the Loss History Chart together and how you grieved some of these losses. You and the Family Development Specialist will work together to assess the strengths or needs related to the foster parenting or adoptive parenting role that result from your experiences.



Session Four:
Meeting
Developmental
Needs:
Loss

Resource 4-J

Name: Date: Family Dev	Name: Date: Family Development Specialist:			
Age at Time of Loss	Type of Loss (Remember that losses can include an important person, health, or sense of safety and well-being.)	What Happened? (What were the circumstances of the loss?)	Effects of the Loss on You	Help You Received
		·		

Pasztor, E. and Leighton, M. <u>Homeworks #2. At-Home Training Resources for Foster Parents and Adoptive Parents. Helping Children and Youth Develop Positive Attachments.</u> Washington, DC: Child Welfare League of America.

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#### Making a Difference!

Mike was just two years old when he came to live with us. He was the youngest of seven children. His mother, barely out of her teens and overwhelmed with sole responsibility for her babies, had left them, never to return. His absentee father reentered the children's lives when they were all in foster care, and began working to regain custody of them, one by one.

It took several weeks for Mike to smile for the first time, longer to accept our love. After all, he had lost his mother and his siblings at a very vulnerable age. Trust, and a feeling of security did not come easily. But his second family embraced him, giving him four additional brothers and sisters to play with, fight with, and love—a safe place to be.

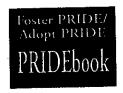
His father began visiting in our home almost immediately, coming from the city on the train several times a year. Mike would often hide in his room, angry and unwilling to accept this stranger who reminded him of days he barely remembered, and who disrupted the fragile sense of security he was forming. Occasionally, Poppa would bring one of Mike's sisters to meet him, further confusing him, while at the same time, striking a chord of familiarity in him.

Two of Mike's brothers, twins, were with another foster family, and during the summer the boys would get together. It must have felt confusing for Mike to gaze into faces so like his own, yet virtual strangers to him.

By the time Mike was 10 years old, Poppa had regained custody of six siblings. The four older sisters were absorbed more easily in the extended family. The twin boys experienced much difficulty, however, having to leave their foster family after eight years. The move did not work, and unable to return to their foster parents, they spent their teen years in a boy's home, maintaining close ties with the foster family.

When Mike was told his father now wanted him to return home, he replied he would run away to us. When told he would again be sent home, he said he'd stay with his father, but when he was 18, he would come back to us to be adopted. Poppa then realized it would be wrong to move him, and agreed to let him stay with us, though he would not agree to adoption.

Visits continued, and as Mike grew older, he would go to Poppa's house, sometimes staying overnight, meeting his relatives, and getting to know his siblings, While this was a good thing, it also left Mike feeling he belonged nowhere, that he was between families, truly attached to neither. He felt no sense of security, and had a fear of being moved that caused him much anguish, and delayed his psychological and emotional maturity.



Session Four:
Meeting
Developmental
Needs:
Loss

**Resource 4-K** 



Session Four:
Meeting
Developmental
Needs:
Loss

Resource 4-K Page 2 Finally when he was 17, Mike was adopted into our family. Poppa signed surrender papers, and Mike was legally and forever joined with us, at last one of "the kids." Never again did he have to fear losing us. It was a most joyful day. Finally, Mike felt secure in his position firmly anchored to us. The adoption also allowed him to reach out to his birth family, knowing it was now safe to do so.

Mike feels a part of both families, and draws his self-assurance as a person from both sides. He knows he belongs to his birth family because he looks like them, he has certain inborn reactions to life like them, he shares a common heritage with them that is undeniable. His artistic talents come from them. He must have wondered all those years why he looked at life differently than his adopted siblings, who tend toward math and logical order, while Mike sees life in a flash and lives it that way!

But Mike knows he belongs to his adopted family as well. He shares our values, our strong sense of family, the knowledge that we are always there for each other. He shares our commitment to "DYB"—Do Your Best! But mostly he shares our love.

Jim and Judy Johnsen, Adoptive Parents Illinois/Arkansas