NACAC Names Mary Boo as Executive Director

The board of the North American Council on Adoptable Children (NACAC) is proud to announce that it has named Mary Boo as its executive director.

Mary has a keen understanding of the child welfare field, particularly what policies and services benefit children and youth and the families who adopt, foster, or provide kinship care to them. She is an eloquent and passionate advocate for policy reform and empowerment of the children and youth directly affected by foster care and adoption.

During her almost 20 years with NACAC, Mary has held different leadership roles, starting as development director in 1996, becoming assistant director in 2001 and then acting executive director in 2015. She has been actively involved in managing the organization, including budgeting, human resources, fundraising, and board support. Mary’s work has also included research, writing, and program administration on adoption and other child welfare issues. She has a formal education in nonprofit management and social policy.

Mary has been a key member of many of NACAC’s policy efforts. For example, she led the project that helped elevate the voices of birth parents, kinship caregivers, adoptive parents, and youth who were in care to advocate for the Pew Commission’s proposed child welfare financing reforms. The effort included researching key policy issues in target states, identifying and training parent and youth speakers, developing written and video materials to promote the reforms, and leading teams of parents and youth on visits with members of Congress and their staff. Through this work, NACAC and other Pew partners helped secure passage of the Fostering Connections to Success and Increasing Adoptions Act of 2008.

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Yovani

Yovani is a shy and joyful young man with diverse interests. He loves to play soccer, go to amusement parks, and visit flea markets. Now in sixth grade, Yovani’s favorite subject is math.

Yovani would thrive in a home with or without other children. He loves dogs and would do well with a pet. Yovani easily connects with others. He would like a patient, understanding family who will take the time to get to know him and make sure he feels safe and loved. For more information, contact T’challa Jenerson at Children Awaiting Parents: jenerson@capbook.org or 585-232-5110.

photo by Bruce Glenn
Relationships and Sexuality:
How to Support Youth in Foster Care and Adoption

by Kayla VanDyke, NACAC youth engagement coordinator

Kayla was in foster care and uses her experience in a number of capacities to make a difference in the lives of other youth. After graduating from Hamline University, Kayla lead the national It’s Complicated project, which sought to bring comprehensive sexuality and relationship training to youth in foster care. Kayla has served as NACAC’s youth engagement coordinator since April 2015 and, in this position, works to elevate and create opportunities for young people across North America as part of NACAC’s Community Champions Network.

When we imagine success for youth who are or have been in foster care, we often think about employment and educational achievement. As a parent or professional, we acknowledge that the systems put in place for these young people often don’t prepare them with the skills and environment necessary to achieve at the same level as their peers. In instances of education, it’s easy to identify where youth might need added supports and over the years many laws have been adopted to help address these needs. One area that has been consistently ignored or simply mishandled at great cost, however, is sexuality and relationships.

Key Relationship and Sexuality Issues

Negative outcomes related to sexuality and relationships manifest at disproportionate rates for youth who have been in foster care (Taussig, 2002). In one longitudinal study conducted by the University of Chicago, females ages 17 and 18 in foster care had a pregnancy rate of 33 percent, nearly double that of the general population. These young people were also more likely than their peers to experience a repeat pregnancy by the age of 19 (Boonstra, 2011). Previous data from the National Survey on Child and Adolescent Wellbeing concluded that 20 percent of child welfare-involved youth (compared to 8 percent of the general population) had reported having their first consensual sexual experience before the age of 13 (James, 2009).

What research shows is that despite having similar access to reproductive health education, young people involved in child welfare are more likely than their peers to engage in sexual activity early and to experience negative sexual health outcomes. One thing that differentiates outcomes for foster youth is that they are more likely to be faced with unmet relationship needs from their primary caregivers. For many youth it’s the unconscious desire to satiate those unmet familial connections that later motivates their choices around love and dating as adolescents and adults. Unlike most effects of trauma, which can manifest (and thus be addressed) early in a young person’s life, issues around relationships often aren’t expressed and dealt with until much later, when problems have already occurred.

Lacking the personal understanding to assert and maintain proper relationship boundaries with romantic partners can have long-lasting negative consequences for young people, with the most publicized being an increased vulnerability to sex trafficking and sexual exploitation (Kitlra, 2011). Although these outcomes receive the most attention, they are by no means the only potential pitfalls experienced by youth involved in the child welfare system related to their sexual and emotional health. Other problems can include difficulty with trust, willingness to trust or attach too quickly, or changing oneself to please a partner.

At the core of these young people’s vulnerability is the feeling of having been abandoned or the perceived absence of love and value from their biological family. Young people with this trauma typically manifest these insecurities in a fervent drive to be affirmed and find stability through romantic partnerships. Because young people who have been in foster care are more likely than their peers to have a mental health diagnosis, they’re also coming to terms and coping with relationship issues with an added layer of challenges (Taussig, 2002).

In my work as the coordinator for FosterClub’s It’s Complicated Project, I would sometimes get questions from frustrated parents who were at a loss for why their young person’s romantic partner is woefully over-prioritized above all other areas of the youth’s life and relationships. Unlike the support and love endowed to youth from adoptive, foster, and institutional placements, romantic relationships can often appear at first as being unmotivated by necessity and thus more sincere. This sometimes inherent trust allotted to potential partners can be incredibly risky for young people if they lack the
self assurance and positive relationship role modeling needed to identify manipulation and other dangers.

**What Parents and Professionals Can Do to Help**

Dating and forming romantic attachments is a normal part of the teenage experience for most youth. That said, there are a lot of very natural concerns you may have about allowing your teen to date. Are they going to engage in risky behavior? Will it distract them from school and other activities? Allowing a young person to date does not mean that you are permissive of these behaviors, only that you are willing to let them have the space necessary to engage with their peers in an age-appropriate way. The following are a few pieces of practical advice for parents and caregivers hoping to facilitate the development of healthy relationship skills in the young people they care about.

**1: Give them a safe and structured platform for practice**

To some extent, dating is a skill that’s learned over time. It requires us to have a well-rounded understanding of who we are and what we’re looking for in another person. Just as your first relationship was likely not your last, it’s important for young people to be able to practice the skills they’ll need to create and know the difference between healthy and unhealthy relationships. This is something that can be preliminarily learned through observation but must ultimately be practiced through experience.

The key to creating an environment in which your young person can safely learn these interpersonal skills is to establish expectations and a strong sense of trust around communication. Be clear and realistic about the rules you have for dating and allow opportunities for your young person to socialize. This might mean that you only allow dates to happen when there is an adult present or on certain nights that don’t conflict with family time.

Challenge yourself to be conscious of how you talk about difficult issues and make sure your young person feels safe enough to come to you with problems they’re having. The fear of consequences and judgment can be alienating to youth and close them off from being open with you when problems do occur. Remember that everyone makes mistakes and that ultimately what’s most important is that they learn from them.

**2: Be knowledgeable and empathetic to some of the ways youth express their trauma**

Understanding how and when trauma is manifesting itself in the actions of your youth can be incredibly challenging. In times of intense stress or emotional compromise, young people who’ve experienced trauma are often left with a set of tools geared toward mitigating their personal suffering in the short term. Unlike typical youth behavioral problems (which virtually all parents deal with), actions and perceptions rooted in trauma can be maladaptive in ways that can lead to long-lasting negative behaviors.

As an adult supporter, you don’t need to be a therapist to help youth heal and coach them away from negative behaviors. Listed below are a few commonly expressed sexuality and relationship behaviors associated with trauma. Identifying and being empathetic to the potential source of these behaviors is an important step in being able to help your young person cope more constructively.

**Skin hunger and hypersexuality** — the intense desire to relate and connect to people through physical and or sexual contact. Physical contact produces the hormone oxytocin, which is responsible for our feelings of love and connection. It’s thought that normal oxytocin regulation is partially formed by our developmental experiences as a child. If a young person was adopted from an environment in which they were not touched or comforted regularly during their development, then it’s possible for their oxytocin response to be abnormally expressed, which can cause some children and youth to have a stronger response to touch (Uvnäs-Moberg, 2015). Physical contact can also act as a way for youth to soothe themselves against the effects of trauma and feel affirmed in relationships they may otherwise feel are fragile as their past placements. Young people that express skin hunger or hypersexuality may lack appropriate physical boundaries and seek to become sexually active earlier as a complete or partial supplement to feeling secure in a relationship.

How to respond: Instead of isolating these youth from relationships entirely,

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**Jacob**

Jacob is a sweet, inquisitive child who likes to please. Usually quiet and reserved, he enjoys being busy and takes an interest in different and unusual things. Jacob likes to draw, watch cartoons, work with clay, and do other indoor activities. He is interested in electronics, intrigued by water and windmills, and particularly enthralled with ceiling fans and car washes. Jacob’s favorite foods are pizza, mac and cheese, and cheeseburgers.

Jacob is in sixth grade. He will do well in a family who is dedicated to advocating on his behalf and who can provide lifelong support. His family should also help him stay in touch with his grandfather. For more information, contact T’challa Jenerson at Children Awaiting Parents: jenerson@capbook.org or 585-232-5110. ♦
Focus on dating environments that are supervised and keep youth physically engaged in a shared activity. Consider involving your child’s partner in a family game night or alternatively limit their dates to times when you will be home.

If you suspect your young person might become sexually active or already is, it’s important to engage them in an open conversation about sexual health, reproduction, and consent. Young people are easily alienated by these conversations and likely won’t respond positively if your talk is consequence based. Assure your young person that you care about them and acknowledge their own role in keeping themselves safe.

**Life boating** — a term that refers to the survivalist behavior of entering into relationships for support and resources. An example of life boating might include a youth who begins a relationship for the sake of having a place to stay or a family to visit over the holidays. Life boating can also take the form of serial dating and prevent the young person from developing emotional independence. This type of behavior is usually motivated by need and can deliver young people into hazardous dependencies with potential partners.

**How to respond:** This coping mechanism is common for older youth who lack—or perceive themselves as lacking—permanent family connections. To help young people begin processing the nature of their relationships, engage them in a conversation around what they objectively enjoy about this other person and how they are treated in the relationship. You might consider starting the conversation off indirectly by asking them what they think makes a good relationship in general. Create a dialogue by giving your own examples and tie the conversation back into what they perceive as the positives and negatives of their own relationship.

**Relationship testing** — the often unconscious process of damaging or terminating relationships as a way to evaluate the strength or sincerity of a bond. Many youth who have been in foster care have significant issues of trust and identity and may feel insecure about how others feel about them. Creating turbulence in the relationship can give the young person a semblance of power over what they might anticipate is an inevitable rejection.

**Darrianne**

Darrianne is a strong, cheerful, and courageous girl. Funny and engaging, she develops positive relationships with adults and peers alike. Darrianne likes art, journaling, and creating jewelry; she loves to sing and dance to pop and country music; and she enjoys being in the kitchen, baking, and cooking. In school, Darrianne receives academic support and does well in her seventh grade class.

Darrianne would like a two-parent household to help meet her medical needs and she adds, “a home with other kids and pets!” Darrianne is very bonded to the staff at Ashley House where she has lived since she was an infant and it would be comforting for her to remain in contact with them as well as the staff at Seattle Children’s hospital. For more information, contact T’challa Jenerson at Children Awaiting Parents: jenerson@capbook.org or 585-232-5110.

**How to respond:** If you notice your young person abruptly ending or creating drama in relationships that you otherwise perceived as stable, ask them about the specifics of their decision. Choices made through quick emotional outbursts are often unprocessed and based in pain aversion, so talking about it rationally can often illuminate for youth a motivation they didn’t know they had. Be careful when discussing a young person’s choice of romantic partner, though. You don’t want to encourage someone to stay in a relationship that doesn’t feel right.

**The chameleon effect** — changing to fit the desires and personality of a romantic partner. Entering into a new family in foster care or adoption means learning to fit in and adapt to an entirely new home culture. The micronuances—unconscious and recognized—of your last home might not be applicable to your new family, and the burden of fitting in often falls on the young person to figure out. In its more benign form, this might mean a young person participates in an interest common to the family just so they can feel connected.

Sometimes, though, this skill can become so practiced that it actually causes a youth to change his identity to mirror those around them. As a result, young people may never get the opportunity to learn and develop an independent and consistent sense of self. This lack of a stable identity can cause them trouble in nearly every facet of their life and prevent them from being able to identify negative people and behaviors.

**How to respond:** Help your young person develop stability in their identity by being actively interested and supportive of their interests and expression. Give the youth as many opportunities to explore and express their individuality in a reaffirming environment as possible, even if their choices are unfamiliar to you. If you see significant changes in the youth, ask questions about their motivation.

3: Become an example of what it means to be in a healthy relationship with others
A child’s first example of what it means to be in a relationship comes from the adult interactions they observe. In particular, the relationships demonstrated to them by their parents create a foundation of standards and social norms that are likely to carry into their interpersonal relationships.

Yours is likely not the first relationship that this young person has seen. When trying to understand the motivations of your young person, consider the potential for their past experiences to shape their actions with others. For a young person who has come to associate abuse and neglect with romantic partnerships, it may be incredibly difficult to identify when they are becoming the perpetrators or victims of mistreatment.

Something you may want to consider is how you can make disagreements between you and your spouse or partner an opportunity for the young people in your home to see what healthy conflict resolution looks like. Wait for a potential conflict to arise or plan one with your partner to showcase the importance of communication and the standard of non-violence in a disagreement. Talk with your teen about how you resolve conflict and what works best for you.

Support Makes a Difference

I began to date at 16, shortly after my sister aged out of our foster placement. I wasn’t allowed to see her and had no other healthy family connections. Retreating into relationships became a way for me to feel loved and supported in the absence of a strong and stable support network. Although I had issues with serial dating and an unwillingness to be alone, in general my experiences helped me gain a better understanding of myself and what I would and should expect in a romantic partner.

Unlike many others, I had the support of an advocacy intervention service to help me process my trauma and learn healthy coping mechanisms that applied to my future relationships. Without the guidance of my mentors and training, however, I too could have fallen into one of the more potentially troubling outcomes too common in the foster care and adoption community such as teen pregnancy and relationship abuse (Courtney, 2001). Regrettably, the type of support I received is not part of the typical menu of resources offered to youth in care as they begin to realize their independence. We owe it to young people to offer them these supports to help ensure that they have the best chance of succeeding in romantic relationships, just as we seek to secure their success in education and employment.

Sources:


CAS Research and Education. “Foster Care & Human Trafficking,” 2013.


Maholchic, Lisa, and Wendy Wheeler. “Providing Relationship Education for Foster Youth.” Healthy Marriage Resource Center


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Manuel

M

anuel is a charming, active, and athletic boy. He loves playing sports; basketball and football are his favorites. Manuel also loves animals, especially dogs and horses, and appreciates farm life and rural settings. In the seventh grade, Manuel enjoys school and does well. He likes to draw and express himself artistically.

Manuel hopes to have a family of his own. He wants to be adopted by a family who is kind, loving, and will always be there for him and help him in any way he needs. For more information, contact T’challa Jenerson at Children Awaiting Parents: jenerson@capbook.org or 585-232-5110.
A Home Within: Supporting Youth Through Relationship-Based Practices

by Dr. Toni Heineman, executive director, A Home Within

A Home Within was founded in 1994 by a group of therapists who recognized that children in foster care need at least one stable adult to provide consistent, ongoing care. Through networks of volunteer clinicians across the country, A Home Within seeks to help heal the wounds of complex trauma and multiple losses by providing free, long-term psychotherapy to young people who are or were in foster care. Learn more about A Home Within at http://abesewithin.org/. View a video that shows the organization's impact on one young person and her family at https://vimeo.com/148138675.

“When your most basic sense of self is in question, it’s as if your whole life has an asterisk next to it.”
—from Flux, a book and training from Foster Care Alumni of America

“I know for a fact right now that without working with [my therapist] Marian, I would either be dead or in prison.”
—Ted, a youth who had been in foster care

The Effects of Trauma

Children and youth most often enter the foster care system because they have suffered abuse or neglect at the hands of their caretakers. Many were born into communities with high rates of poverty and multiple social challenges. Unfortunately, life in foster care—with its own disruptions, instability, and loss—can serve to compound the effects of the original trauma that brought the child or adolescent into the system.

We talk a lot about trauma for children who are or have been in foster care. Trauma refers to an event or experience that overwhelms a person’s capacity to integrate it. Children who suffer trauma can’t fully make sense of what has happened to them. We often talk about traumatized children being “flooded” with feelings—it’s not just that their emotions feel too big to manage, but that the feelings seem to come from nowhere, without warning, and it’s not always clear what about the present circumstances might be triggering the feelings. It is easy to see how overwhelming experiences can distort nearly every aspect of a child’s growth; indeed, trauma is known to have negative effects on physical, cognitive, emotional, and social development.

How Relationship-Based Practices Can Help

Decades of research have shown that sustained, healthy relationships are the most effective means of reducing the symptoms that arise from problematic relationships. The primary principle underlying relationship-based psychotherapy and trauma-informed care is that children who have been hurt through abuse or neglect in the context of a caretaking relationship can only begin to heal in the context of a healthy relationship. Quite simply, relationships heal because relationships matter. In therapy, the relationship between the client and the therapist is ultimately what matters. If there is no solid, trusting relationship with the therapist, the theoretical framework or the specific interventions don’t make much difference.

Relationship-based psychotherapy starts from the premise that behavior has meaning and that discovering and addressing the underlying problem will, in the long run, be more effective than treatment that is focused solely on symptom reduction. Among youth who have experienced trauma, symptoms can manifest externally or internally—from aggression to withdrawal; from recklessness to inhibition and hyper-vigilance. Too often, adults, communities, and systems respond to and focus solely on the behavior that accompanies these symptoms, seeking to bring it into alignment with what’s considered healthy or appropriate. This focus on behavior too often leaves intact the underlying emotional and developmental impact of trauma.

To help children and youth overcome the negative impact of trauma on development and well-being, A Home Within’s therapists offer relationship-based therapy. Relationship-based therapy seeks to:

- transform overwhelming emotions into manageable feelings
- convert traumatic “fight, flight, or freeze” responses into calmer growth-promoting states
- process traumatic experiences so that they can be remembered rather than re-lived
- build trusting and supportive relationships

The far-reaching consequences of trauma are not easily overcome. This is largely because children who have been hurt repeatedly or deeply by someone they trusted are understandably reluctant to trust again. Relationships now seem dangerous. They often withdraw from or lash out at new people who want to help them. Adults who want to help traumatized children and youth often find themselves confused about how to do so.

If they try too hard, or move too quickly to get close, that child or youth might experience them as intrusive, especially if the young person’s boundaries have been violated in the past. On the other hand, if they keep a distance and don’t try to help, the child or youth will never have a chance to learn that relationships can be warm, loving, supportive, and fun. Part of the work of relationship-based therapy is to help children and adolescents recognize the competing needs and desires inherent in any relationship.
What Relationship-Based Therapy Looks Like

Relationship-based therapy begins with the explicit or implicit question, “How are you hoping I can be of help to you?” a question that puts the relationship at the forefront from the very beginning. It makes clear that “this is about you and me.” Although the distinction may seem subtle, this is a very different question from “What brings you here?” which locates the issue in “you” and unfortunately is often heard by foster youth as “What’s your problem?” or worse “What’s wrong with you?” Building the all-important first interaction around problems, places the focus on the power imbalance and implies a goal of solving a specific problem, rather than a goal of building internal resources to manage, resolve, or avoid any problem.

Furthermore, relationship-based therapy recognizes that, in particular with youth in foster care, adults need to focus first on building a trusting relationship, and that this will take time. Reticence about relationships with new adults is often a part of normal adolescent development, which means that it takes a long time to establish a trusting relationship. And for youth who have been traumatized, it takes even longer, as they have very specific examples from their own experience of when their trust was betrayed.

This is particularly the case for youth who have had a parade of social workers, staff, attorneys, and others pass through their lives, all of whom said they were there to help, and many of whom weren’t able to stay long enough to make a difference. Focusing on the relationship first also recognizes that young people aren’t likely as prepared for therapy as are adults who have gone through a process of recognizing their own needs, trying different strategies, and making an assertive decision to give therapy a try.

The experience of Ruby, a 14-year-old client of an A Home Within therapist, illustrates how relationship-based therapy is built from the very first interaction. Ruby began her first therapy session by slumping into her chair. The therapist said, “I’m glad to meet you. I’ve been thinking about you and been wondering how you’re hoping I might be of help to you?”

“I don’t know. I’m always messing up.”

“Hmm. Really? Is that your idea or someone else’s?”

“That’s what everyone says. That’s why I got kicked out of the last foster home and the one before that, too.”

“Wow. I’m very sorry. That sounds hard.”

“Nahh. That’s just what happens. So what are you going to do?”

“I don’t know yet because I don’t know what you want.”

“I’m just here because I have to come.”

“Okay. Maybe you have to be here, but that still doesn’t tell us what we’re going to do together when you are here.”

“Can you just do something so I can get out of here?”

“I don’t think that I can do anything very useful without your help.”

In this short interchange the therapist is trying to demonstrate that she is interested in what is on Ruby’s mind, not in what “everybody says” or how she “messes up.” She keeps bringing the conversation back to the relationship, to figuring out how they can work together. The purpose of establishing a trusting relationship first is to provide safety, stability, and containment so that children or youth can more deeply work through their traumatic history as they also work with their therapist to identify and address physical, emotional, educational, and adaptive challenges.

Relationship-based therapists pay particular attention to early childhood experiences and how they influence psychological development, including how traumatic experiences have shaped the individual’s identity and relationships. By reviewing and revisiting aspects of the past in the context of a trusting relationship with a therapist, youth can learn new ways to understand their own feelings, thoughts, and actions. These are the internal resources that allow youth and young adults to more effectively address and manage their emotions and thinking, but also to engage effectively with other people. Ultimately, learning to be in a healthy relationship with their therapist allows

Jessie and Andres

Jessie and Andres are polite teens who are very closely bonded. Andres, the older of the two, is reserved and shy, but a great big brother. He loves sports and hopes his forever family will support his desire to play basketball, football, and baseball. Andres loves being outdoors, fishing, playing catch, and listening to music. His favorite type of food is Mexican but he is not a picky eater. Andres does well in school, but sometimes needs support. He would like to play professional basketball or join the Army when he graduates.

Jessie is a caring young man who enjoys playing video games and doing puzzles. He likes to stay busy and active and has a healthy appetite. He is as fond of Mexican food as his brother is. Jessie does well in math and needs a forever parent to support and advocate for him in school. For more information, contact T’challa Jenerson at Children Awaiting Parents: jenerson@capbook.org or 585-232-5110.

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A Home Within...

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a young person to develop and maintain healthy relationships in other contexts.

The Program’s Reach

A Home Within now has Clinical Chapters in 43 communities in 21 states. Each clinician volunteer to provide relationship-based psychotherapy to one current or former foster youth at a time. Currently, 400 volunteer psychotherapists serve more than 300 children, youth, and young adults every year. The average length of treatment is more than three years.

From the beginning, A Home Within has also focused on developing and articulating its clinical model. Since 2001, the Foster Care Research Group at the University of San Francisco has measured treatment outcomes for the youth served by A Home Within, and found evidence that the organization’s clinical work with youth consistently achieves statistically significant reductions in anxiety, depression, problems with peer relationships, dissociative states, and sleep issues. (These findings and the A Home Within model are documented in a series of peer-reviewed journal articles and in founder Dr. Toni Heineman’s five books (http://ahomewithin.org/research/ and http://ahomewithin.org/publications.)

Because the organization can provide direct services in the form of psychotherapy to only a small fraction of those in need, in 2015 A Home Within launched Fostering Relationships, an online platform of trainings and tools that can be used by any adult working with or caring for any child or youth affected by complex trauma (including youth who are or have been in foster care, children of incarcerated parents, some immigrant youth). The trainings distill A Home Within’s decades of experience into an accessible format that can be used by a broad community of caring adults, including foster and adoptive parents, kinship caregivers, CASAs, family court attorneys and judges, educators, caseworkers, and social workers.

Fostering Relationships’ online trainings address the negative impact of trauma on development in infants, young children, school-age children, adolescents, and young adults, and explore trauma’s effects on physical, cognitive, social, and emotional function. The trainings provide specific advice, instruction, and recommendations for how relationship-based practices can be used to promote healing and healthy development. A Home Within regularly adds new trainings on special topics including anxiety, inter-generational trauma, and how psychotherapy works, and will soon add trainings on using photography/visual imagery and writing to help heal trauma.

Relationship-based practices aren’t just for therapists or those who have been through formal trainings. Parents and professionals can use tools such as A Home Within’s Conversation Cards, which are designed to help facilitate conversations on difficult but important topics. Topics include Separations, Transitions, Boundaries, Identity, and Self-Care. Each deck of 16 cards focuses on an issue or approach important in building the relationships crucial to healthy development. The cards provide pictures, quotes, questions, and activities to prompt meaningful discussions with vulnerable children and youth.

Across its 22-year history, A Home Within has matched thousands of youth in care with volunteer therapists who provide free, open-ended psychotherapy. The motto “one child, one therapist, for as long as it takes” perfectly captures the spirit and the purpose of the clinical chapters. By both serving young people directly and by supporting the community that surrounds them, A Home Within seeks to ensure that every young person who experiences foster care is able to heal, grow, connect, and thrive.

Get Involved

Clinicians who are interested in becoming part of A Home Within’s nationwide network can call 888-898-2249 or request an application through www.ahomewithin.org. A Home Within provides free training, the support of a local clinical director, and consultation groups to all of its volunteer therapists.

Anyone who’d like to refer a youth who is or was in foster care for free, open-ended individual psychotherapy can submit their contact information through the website.

Adults who work with or care for traumatized youth can explore A Home Within’s trainings and tools at www.fosteringrelationships.org.

Dominick

D ominick is a charming and outgoing child. He has a creative mind, and enjoys taking things apart to see how they work. An open child, Dominick is not afraid to share his feelings. He is intelligent and always thinking. Dominick likes being active and making complex toys out of scraps. His favorite food is pizza, and his favorite school subject is math.

Dominick would like to go into the military when he completes school. For now, he would like a family who does things together, can teach him things, and who goes out to dinner. For more information, contact T’challa Jenerson at Children Awaiting Parents: jenerson@capbook.org or 585-232-5110.
Partnership for Permanency: Building a Family Support Model for Ontario’s Adoptive, Kinship, and Customary Care Families

by Pat Convery, executive director, Adoption Council of Ontario

Pat Convery is a social worker who has worked in adoption and child welfare practice since 1975. In 2007, Pat became the executive director of the Adoption Council of Ontario (ACO). In her role with the ACO, Pat is able to direct her passion and energy toward the critical work of connecting Ontario families with waiting children and supporting the lifelong connections that are made through adoption. The Adoption Council of Ontario exists to provide education, connection, and support to all who are touched by adoption in Ontario. Learn more at www.adoption.on.ca.

We have all heard the expression “It takes a village to raise a child.” But this isn’t true—it only takes a family to raise a child. It does take the village, however, to wrap support around the family and ensure a successful adoption. When a child has experienced the trauma of abuse, neglect, and loss, we must ensure that the village is built on strong foundations and is available whenever needed and with the appropriate timely services to support and sustain the family on their lifelong journey.

For nine years, the Adoption Council of Ontario (ACO) has helped children in need find permanent, loving, adoptive families through the AdoptOntario program (www.adoptontario.ca). But this was not enough. A paradigm shift was needed to ensure that not only are families found for children, but also that adoptive and kinship families receive the ongoing support they need.

Over the last five years, ACO has built its vision of a comprehensive support program for adopted children and youth and their families. In partnership with the Ontario Ministry of Children and Youth Services, local Children’s Aid Societies, children’s mental health agencies, and the families and youth themselves—and with the support of NACAC’s Community Champions Network (funded by Jockey Being Family™)—ACO created Partnership for Permanency, a family support model for Ontario’s adoptive and kinship families.

The Need

In Ontario, there are 17,000 children in care, including almost 6,000 crown wards (children who are in permanent foster care). In 2013 and 2014, about 3,000 children and youth left Ontario foster care to join adoptive and kinship families. There were programs to support some adoptive families in some situations, but there was no comprehensive support model for families struggling to help their children heal. Geographical, funding, and program boundaries had become barriers to building sustainable, readily available, community-based programs for all adoptive and kinship families.

In the Donaldson Adoption Institute’s Keeping the Promise: The Case for Adoption Support and Preservation, Susan Livingston Smith highlighted the need for a wrap-around approach to providing permanency supports for families:

The title phrase ‘Keeping the Promise’ reflects the covenant that is made between parents and children when adoptions take place—to be a permanent family. But the commitment is also by agencies and state or federal governments to the adoptive families they help create. When these families struggle to address the developmental consequences of children’s early adversity, they should be able to receive the types of services that meet their needs and sustain them. In other words, the covenant should not be solely to create families, but also to enable them to succeed.

As Ontario sought to create this covenant, the first step was to survey adoptive families about their experiences and recommendations. In less than two weeks in 2012, 445 families and 91 professionals responded. Results such as the following suggested a particular need for adoption competent mental health services:

• 64% of respondents thought their child had mental health issues
• 77% believed their child did not receive adequate professional services prior to being adopted
• Only 33% of families found it easy to get help; 70% were put on a waiting list
• 53% have had to change service providers at least once
• 44% did not believe their professional was adoption competent
• 87% believe it is very important that professionals be adoption competent if they are treating families who have been touched by adoption
• 91% think there are not enough adoption-competent professionals in Ontario

It became abundantly clear that specialized training was needed for professionals who work with adoptive and kinship families due to the unique and complex dynamics in their families. Mental health professionals and even some child welfare professionals are not trained on the core issues and, as a result, families are left trying to figure these issues out on their own or, worse yet, given advice that causes greater harm.

...continued on page 10
Offering Adoption Competency Training

Using the evidence gathered from the survey to make the case, ACO sought funding to develop a comprehensive adoption competency curriculum for mental health and child welfare professionals. In addition, we gathered funds to seek input from across the diverse province. Funding from the Ontario Trillium Foundation and the Zucker Family Fund enabled ACO to:

- Develop a roundtable model that brought together more than 80 Ontario child welfare and mental health professionals in four regions to advise and guide the project. The roundtables included initial face-to-face meetings to gather input, an introductory workshop, and ongoing review of project materials.

- Develop a one-day workshop called “Looking through an Adoption Lens: Understanding the Complex Mental Health Needs of Children, Youth, and Their Families.” Piloted in four Ontario communities, this successful workshop is now available to agencies and professionals for a fee that covers ACO’s costs to deliver the training.

- Complete research on and purchase the exclusive Ontario license of two curricula—one for child welfare and mental health professionals, and one for parents and other caregivers. ACO selected the Kinship Center’s Adoption Competency Training (ACT) curriculum for child welfare and mental health professionals and the Pathways to Permanence 2 curriculum for parents and other caregivers who are raising children who have experienced trauma and loss.

- Deliver the two curricula, beginning in the fall of 2015. ACO recruited, trained, and now supports 22 professionals with significant child welfare, mental health, and adoption experience to be trainers of ACT and Pathways 2. Before they began to teach the curricula, each of the trainers went through an eight-day training program.

Government Support Creates Ongoing Services

Although private funding enabled ACO to get started, maintaining and growing the program required government support. In her 2014 mandate letter, the Ontario Premier, Kathleen Wynne, set out the priorities for the Ministry of Children and Youth Services. Chief among them was that “every child and young person in Ontario has access to the right supports and opportunities needed to make positive choices, reach their full potential and seamlessly transition to adulthood.”

In September 2015, the honorable Tracy McCharles, Minister of Children and Youth Services, announced that Ontario was making it easier for children and youth in the care of Children’s Aid Societies to find forever families, while providing more support to adoptive parents. The commitment included several initiatives, including:

- Funding up to 15 targeted adoption recruiters in partnership with the Dave Thomas Foundation for Adoption’s Wendy’s Wonderful Kids program
- Expanding the targeted adoption subsidies program by extending the age of eligibility (it is now open to children and youth ages 8 to 21; it was 10 to 18) and updating the income threshold and subsidy amount to reflect current Statistics Canada data
- Investing in a province-wide post-adoption family support program
- Encouraging greater use of culturally appropriate placement options for First Nations children and youth

Government investment in a provincial family support program also enabled ACO to roll out the Pathways to Permanence 2 eight-session series in six communities beginning January 2016 with a view to developing a robust plan of offerings throughout the province in the next fiscal year.

A key component of the Pathways training is the launching of ongoing community parent support groups with the leadership and support of ACO’s parent liaison coordinator who will:

- Attend session eight of each Pathways course to educate participants about ongoing support group opportunities and identify an action plan with the group about how to develop ongoing programs in their community.
- Support one or two group leaders in each community and help them launch local parent support groups, develop youth programs, respite programs, and community fundraising initiatives.
- Assist in the editing and distribution of a newsletter for parent support groups to further expand and strengthen the parent-to-parent support network in communities and throughout the province.

Corporate Partnerships Enable Extra Supports for Families

To be successful, parent-led support groups need guidance, encouragement and assistance in the form of resources and program development support. The ACO’s most recent partner—Jockey Being Family™—has a lot of experience in this area. Jockey Being Family™ helps support adoptive families and children by partnering with leading nonprofits that provide services to adoptive families. (Ontario has benefitted from NACAC’s Jockey-funded Community Champions Network partnership since 2006, building from community forums and consultations to realize the multi-faceted Partnership for Permanence described here.)

Since joining the Pathways to Permanence effort, Jockey Being Family™ has provided funding, employee volunteers, and in-kind donations to support services to help
adoptive families remain strong and stay together—forever. Jockey’s latest commitment to ACO and the adoptive families of Ontario is the Home to Stay Backpack Program, though which every child who is involved in Pathways to Permanence will receive a backpack with a blanket and a teddy bear. Families will receive a backpack full of resources and materials that help them access community services, connect to the expanding parent support network, and find support for their ongoing journey of adoption.

**Conclusion**

After listening to families and other experts in the field, ACO developed a vision of what supports for families should look like. With a host of partners, we have systematically built the foundations for a sustainable and comprehensive family support model that is accessible to all kinship, adoptive, and customary care families in Ontario.

As a result, families will no longer be alone. They will be provided with specialized training and have the opportunity to stay involved with parent support groups, peer mentoring, youth networks, and respite programs and have access to a web-based database of support resources. Professionals in the mental health, child welfare, education, and justice systems will have specialized training that will allow them to create a professional wraparound system of support for families and their children.

Over time, we expect the program to yield positive outcomes for children, their families, and Ontario society as a whole, including:

- Increased permanency rates
- Reduced disruption rates
- Increased psychological health of children and youth and their families
- Reduced numbers of youth aging out of care without a lifelong family connection
- Decreased rates of homelessness and juvenile justice involvement of youth who had been in care

- Increased educational and job prospects for youth who had been in care
- Reduced risk of repeating the cycle of foster care in the next generation
- Reduced social costs to the Ontario government

To make sure the program accomplishes these goals, the University of Toronto will help ACO evaluate the effectiveness of ACT and Pathways, thanks to a three-year research grant funded by long-time supporters of the ACO. The team will measure the ongoing effectiveness of both curricula from the perspective of professionals and the families and children they serve.

At the ACO, we are well on the way to accomplishing our vision for a sustainable, community-based family support model that maximizes the benefit of a network of parent-led programs and competent professionals who are committed to the lifelong journey of helping children heal from past trauma and losses.

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**What Parents Are Saying**

“[It’s so validating] because parents in a support group don’t look at us like we have our clothes on inside out.”

—Parent of a four-year-old

“To connect with other parents who ’get it’… the joys, the struggles, the accomplishments. A safe place to share concerns, learn from others, and offer support. I don’t attend often as family life is busy, but I know the group is always there without any judgment.”

—Parent of siblings

“Parenting our children is vastly different from parenting birth children. If you have not experienced it, you will not understand. It is extremely important for our health as parents to be able to vent, share ideas, shed tears, laugh, remove the isolation, network, all without judgment. We become better parents with this support.”

—Parent of a 15-year-old

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**Dravyn**

**Humorous, affectionate, and playful,** Dravyn gets along well with others. He likes dogs, football, swimming, roller skating, and horseback riding. Dravyn also enjoys playing video games and chess and going to the library. He collects Magic cards and is very knowledgeable about them. Dravyn is doing well in school and might like to be a police officer some day.

Dravyn is eager to find his forever family. For more information, contact T’challa Jenerson at Children Awaiting Parents: jenerson@capbook.org or 585-232-5110.

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Adoption-Related Resources

Resource Guides and Reports
A Child Welfare Leader’s Desk Guide to Building a High-Performing Agency

Every Kid Needs a Family: Giving Children in the Child Welfare System the Best Chance for Success
Annie E. Casey Foundation. 2015. This Kids Count policy report addresses the need for families for the 57,000 children living in residential care, the personal and financial costs associated with having children in congregate care, and what family services are needed to get some of our most vulnerable children out of congregate care and into loving and supported families. Access at http://www.aecf.org/m/resourcedoc/aecf-EveryKidNeedsAFamily-2015.pdf

Kids Count Data Book

The Resounding Resilience of Grandfamilies: Financial Stories of Older Relatives Caring for Children in Low-Income Communities
Generations United. 2015. In the U.S., 2.7 million grandparents are raising grandchildren. Of these, 21 percent are below the poverty line and 37 percent are age 60 or older. Based on interviews from 20 grandparent caregivers, this report puts a face on the personal and financial sacrifice many grandfamilies make to keep grandchildren out of the foster care system and addresses some ways to improve the financial lives of grandfamilies. Access at http://tinyurl.com/obygbsu

Resources for Prospective Parents with Disabilities
AdoptUSKids has compiled resources related to prospective foster and adoptive parents who have disabilities, including advice from an adoptive parent who encountered barriers during the adoption process. Access at http://tinyurl.com/q8xz92q

Understanding Children’s Sexual Behaviors: What’s Natural and Healthy
Toni Cavannah Johnson. Updated 2015. A booklet to help those who work with and care for children better understand the range of children’s sexual behaviors and how to get help for problem behaviors. Purchase at www.tcavjohn.com

Books
In Their Voices: Black Americans on Transracial Adoption
R bonding Moorda. 2015. In the fourth book of her In Their Voices series, Ms. Roorda—herself a transracial adoptee—examines the history of transracial adoption, social attitudes, and federal policy in the U.S., and provides the wisdom and diverse perspectives of adoptees of color raised in white households. Included are useful strategies for transracial adoptive families to recognize and nurture healthy racial identity.

Everything You Ever Wanted: A Memoir
Jillian Lauren. 2015. This book is a candid memoir about infertility, international adoption, attachment, and raising and loving a child with special needs.

Relational Treatment of Trauma: Stories of Loss and Hope
Toni Heineman. 2015. Illustrated with stories from her own clinical experience with children in foster care, Dr. Heineman’s book covers loss, anxiety, trauma, and hope, and provides insight into understanding and helping traumatized youth.

Embracing the Adoption Effect: 29 Stories of Families Touched by Adoption
Barbara Taylor Blomquist. 2015. This book captures the personal adoption stories of 29 adult adoptees, birth parents, and adoptive parents and sib-

Report Highlights How to Make Shift from Congregate Care
In January, Chadwick Center and Chapin Hall released “Using Evidence to Accelerate the Safe and Effective Reduction of Congregate Care for Youth Involved with Child Welfare.” The brief provides empirical guidance and points to an array of evidence-based approaches that will help reduce congregate and meet children’s needs in families. While the use of congregate care has dropped by 20 percent in recent years, states’ figures vary widely. The brief reports suggest that children and youth in congregate care and therapeutic foster homes have significantly higher levels of behavior problems than those in traditional foster care.

As a result, jurisdictions will need more access to services that effectively address internalizing and externalizing behaviors, safely reducing the use of congregate care. Several programs—including Coping Power Program, Multi-Systemic Therapy, and Parent-Child Interaction Therapy—have been shown to improve behaviors, although they need to be studied with children living with foster families. Find the report at http://www.chapinhall.org/sites/default/files/effective%20reduction%20of%20congregate%20care_0.pdf.

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ings—providing a thoughtful 360-degree window into the experience of all members of the adoption triad.

Three More Words
Ashley Rhodes-Courter. 2015. The sequel to her 2009 memoir Three Little Words about her years in foster care, Three More Words chronicles Ashley’s life after foster care including difficult experiences with her birth family and becoming a foster and adoptive mom.

Article
If You Move, You Lose: The Interstate Medicaid Obligation to Special Needs Adopted Children
Shannon McCartney, Vicki Blohm, and Daniel Pollack. 2015. This article, published in the Northern Illinois University Law Review, discusses the practice of denying Medicaid to youth with an adoption assistance agreement from another state. Currently, 41 states provide Medicaid to all children who live in the state who have state-funded adoption assistance agreements (regardless of the state in which the agreement originated), five states provide Medicaid only to resident children with whom they have created an agreement, and five states provide Medicaid to all children with state-funded agreements unless they are from the five states that do not provide Medicaid to children from other states. Access at http://www.niu.edu/law/_papers/law-review/issues/full_issues/35_2/3_McCartney.pdf

Toolkits
Going Beyond Recruitment for Older Youth: Increasing Your System’s Capacity to Respond to Prospective Parents and Prepare Older Youth for Adoption
National Resource Center for Diligent Recruitment. 2015. This agency resource provides a variety of strategies and tools to prepare both prospective parents and older youth for successful adoption. Access at http://tinyurl.com/p2zw7vo

Trauma and Post-Trauma Well-Being Assessment Tool
National Family Preservation Network. 2015. This assessment tool was designed for professionals to use in conjunction with the North Carolina Family Assessment Scale to assess the impact and severity of trauma on mistreated children and youth in order to better provide family support. Access at http://www.nfpa.org/assessment-tools/trauma-assessment-tool

President’s Budget Would Increase Support for Children
In February, President Obama released his fiscal year 2017 budget proposal. In its report Federal Budget 2017—Increasing Opportunities and Addressing Disparities: Supporting Young Children through the Budget, the Center for the Study of Social Policy highlights a number of proposals with connections to child welfare:

- $1 billion dollars to address opioid addiction, including funds to increase access to treatment
- $11 million to offer comprehensive services to youth in the child welfare system, including those who are or may be affected by human trafficking
- $15 billion for home visiting programs

As the report notes, “In a country with widening income inequality and consistently poorer outcomes for children and families of color, the federal budget—and the resource decisions that flow from it—provide a concrete vehicle to shift policies and programs toward investments that address inequalities and improve outcomes for young children.”


QIC-AG Launches Catalog of Support Programs
The National Quality Improvement Center for Adoption/Guardianship Support and Preservation (QIC-AG) recently introduced the QIC-AG Intervention and Program Catalog. The catalog was developed as a tool for child welfare service providers and agencies to identify evidence-informed programs and promising practices that can be used to address pre- and post-permanency needs of families formed through public, private, and international adoption and guardianship. The catalog includes almost 150 interventions and programs that can be searched by title, age range, relevance to adoption and guardianship, level of evidence, and pre- or post-permanency population.

The web-based catalog can be accessed at www.qic-ag.org.
Come to NACAC’s 2016 Conference in Nashville • August 3–6

You Are Not Alone:
Building a Community to Support Permanency

Co-hosted by Harmony Family Center and the Tennessee Department of Children’s Services

Adoptive, kinship, and foster parents, child welfare professionals, adoptees, foster care alumni, and other child advocates, this is the conference to attend! The sessions inspire, inform, and encourage all members of the adoption and foster care community.

The conference—held August 4–6, with a special preconference session on August 3—offers 80+ workshops on topics such as core issues in adoption; post-adoption services; parenting children with disabilities and challenges; issues in adoption therapy; race, culture, and diversity; and recruitment and pre-adoption services.

Pre-Conference Session

On August 3, Elizabeth Warner, PsyD, and Ken Huey, PhD, will present a full-day session: “Healing from Trauma: Therapeutic Services, Tools, and Techniques.”

Dr. Warner will introduce Sensory Motor Arousal Regulation Treatment (SMART) a playful, active approach to therapy, which uses basic sensory integration tools to address the problems of emotional and behavioral dysregulation. Caregivers create new rhythms of engagement with their child and increase attachment security. Attendees will see examples of therapy sessions and gain tools easy to use at home and in the field. Dr. Warner is a psychologist and project director at the Trauma Center, a program of the Justice Resource Institute in Brookline, Massachusetts.

In the afternoon, Dr. Huey will discuss what happens to the brain when someone is traumatized at a young age and will delve into proven therapeutic and family interventions that heal trauma. Early childhood trauma has far reaching effects on physical and emotional development but the treatment world frequently misunderstands behavioral and emotional dysfunction that has trauma at its roots. Unhelpful therapy and some behavior modification may actually create more problems than they solve. Dr. Huey, a therapist and adoptee, serves as CEO of Kaizen, a residential treatment center for adolescent boys.

The pre-conference registration fee is $110 U.S./$150 Cdn.

Keynote Speakers

For Thursday’s general session, Denise Goodman will present “Now What? The Need for Post-Adoption Services,” a wise and inspiring call to action to ensure families have the support they need to succeed: a strong, accessible continuum of post-adoption services.

Friday’s keynote session, “I Have a Voice,” will feature young adults who were adopted or have experienced foster care. They will emphasize the importance of empowering young people to speak up about their foster care and adoption journeys. This session will also serve as a reminder for adults to take the time to truly listen to young people and to ensure that youth have the opportunity to make decisions about their own lives.

Sue Badeau, internationally known consultant, child welfare advocate, and NACAC board president, will give the closing session at Saturday’s luncheon. Her talk, “You Are Not Alone: Let’s Be Brave Together,” will precede the awards ceremony, which honors the contributions of those making a difference in adoption.

Location and Accommodations

The conference will be held at the Sheraton Music City Hotel (777 McGavock Pike, Nashville, TN). The Sheraton has a complimentary airport shuttle and free parking. Discounted guest rooms are $154 per night (plus tax and a city assessment fee).

To make a reservation, call 888-627-7060 or visit https://www.starwoodmeeting.com/Book/2016nacac. Availability extends until all rooms fill or until July 2, whichever is first.

Workshop Sessions

Each year, we add new sessions to the conference line-up. Many sessions are advanced, so even experienced parents and professionals will benefit. Scheduled workshops include:

• Post-Adoption Education and Support: How to Reach Adoptive Families

• Am I OK Now? One Adoptee’s Personal and Professional Recipe for Healing Adoption Trauma

• Tangled: Hair, Race, and Identity

• Following the Love: A Strategy to Find a Permanent Parent for Every Youth

• Parenting Kids from Hard Places: An Introduction to Trust-Based Relational Intervention

• For Better or Worse—Relationship Refresher for Couples Parenting Traumatized Children

• Shifting Our Mindset to Parent Therapeutically

• Advocating for Your Child in School
The U.S. State Department Responds to Unregulated Custody Transfers

The State Department’s Office of Children’s Issues is concerned about the unregulated custody transfer (often called “rehoming”) of adopted children. Ambassador Susan Jacobs, Special Advisor for Children’s Issues, convened a working group to study the issue of unregulated custody transfer soon after the 2013 publication of Reuters’ “The Child Exchange.” Comprised of the Departments of State, Justice, Health and Human Services, and Homeland Security/U.S. Citizenship and Immigration Services, as well as the Association of Administrators of the Interstate Compact on the Placement of Children and the attorney general of Utah, the group is seeking a fuller picture of the breadth of the issue and working on strategic initiatives aimed at intervention and prevention.

Collectively and individually, the working group:

- Monitors state and federal legislation on unregulated custody transfer, including:
  - The proposed federal Protecting Adopted Children Act (HR 2068)
  - Existing state laws — The National Association of Attorneys General completed a survey in June 2015 that revealed that all 50 states have existing child welfare or adoption laws that could be used to address unregulated custody transfer.

- New state laws specifically related to unregulated custody transfer in Arkansas, Colorado, Florida, Louisiana, and Wisconsin

- Explores ways to improve pre-adoption training and post-adoption supports for families adopting through intercountry adoption.

- Raises awareness about unregulated custody transfer through outreach to Congress, adoption stakeholders, child welfare professionals, and the general public.

- Facilitates communication and information-sharing among those who are working on the issue.

What Can the Adoption Community Do?

- Email adoption@state.gov with observations about unregulated custody transfers involving children originally adopted through intercountry adoption.

- Consider how you can include intercountry adoption issues and families in your work on domestic adoption issues. Children adopted through intercountry adoption have more in common with children adopted through foster care than ever before.

- Distinguish between unregulated custody transfer and secondary placement. Unregulated custody transfer refers to when a parent or parents place their child into the custody of another parent or family without the involvement and oversight of appropriate authorities who can assess the best interests of the child and take steps to ensure the child’s safety and welfare.

- Discuss unregulated custody transfer as an activity that places children at risk.

- Share information by emailing adoption@state.gov about state and local resources that are accessible to all adoptive families—including international adoptive families—who are experiencing difficulty.

Registration and Fees

Full registration fees include workshops, general sessions, Saturday’s luncheon, and membership for non-members. Parent couples can register together at a discounted rate. One-day fees will be offered. The pre-conference session has a separate fee.

Discounted registration rates are available until June 24:

- NACAC members: $300 U.S. / $400 Cdn.
- Non-members: $360 U.S. / $480 Cdn.

After June 24, these registration rates increase by $50 U.S./$70 Cdn.

Advertise or Exhibit

Individuals and organizations can advertise in the registration booklet and final program. Exhibitors have tabletop exhibits in a designated area near the registration desk, workshops, and refreshment breaks. Space is assigned on a first-come, first-served basis, so apply early.

Email conference@nacac.org or download an application from www.nacac.org/conference/Advertise ExhibitPkt.pdf.

Additional Information

In April, NACAC will publish a booklet with workshop descriptions, registration details, and other information. To request a copy, send your name and address to info@nacac.org. Registration information will also be posted on www.nacac.org. To receive regular email updates from NACAC, sign up for News from NACAC at www.nacac.org/signupform.html.

If you have questions, contact us at info@nacac.org or 651-644-3036.
promote increased funding on post-adoption services. NACAC’s efforts were successful in ensuring state funding of such services for the last six years.

Nationally, Mary serves as an active member of the Adoption Tax Credit Working Group, particularly in the group’s social media and web site efforts to lobby for a refundable adoption tax credit. She has also led teams of foster and adoptive parents on Congressional visits to promote federal investment in family-based care, including better preparation and support of caregivers.

The board is excited to see Mary’s bold leadership of NACAC into the future. Together, we can continue to fight to ensure that all children and youth have a permanent, loving family and every family has the support they need.

For more information, contact NACAC board president Sue Badeau at badeaufamily@gmail.com or Mary Boo at maryboo@nacac.org or 651-644-3036 x19. ✪