

Families First

a newsletter for Nebraska Families

January/February 2022

N F A P A

RESPECT, DON'T JUDGE, BE FLEXIBLE..” A MOTHER SHARES HER GOLDEN RULE OF FOSTER PARENTING

by Rebecca Lahue

We thank Rebecca for sharing eight lessons she's learned over the last decade as a foster parent and mother of a teenage daughter.

1. Treat the birth parents with respect

The majority of kids in foster care will ultimately be reunified with their birth parents. If you support birth parents and treat them with respect, it helps them and it lessens the trauma of the child when they go home.

2. Be flexible—and even adventurous!

When I started fostering I thought, I'll be firm! Children in my care should be on the honor roll and make their bed every morning! I was wrong. I quickly realized that I needed to bend and meet them halfway—at least. I learned that if one thing doesn't work, try something else. One of our little boys was fascinated with my husband's tools. He kept scattering them all over the house. Asking him to stop got us nowhere. So we bought the little guy his own little set of tools, and that took the tension off. When my teenage daughter was really into styling hair, I had rainbow colored hair. Not because I wanted it, but because getting our hair done was something that we could do together.

3. Use your resources and accept advice

Listen to the suggestions and, yes, constructive criticism you'll hear from workers and counselors. Take every training about trauma-informed care that comes your way—and call for help when you need it! Last month, one of my boys climbed



up a tall bookcase and it fell over. He was not hurt but was hysterical, and I was upset to see all of things I'd collected since I was eight years old lying broken on the floor. I walked out the front door, stood on the porch, and called his counselor. She told me to take a deep breath, realign my tone, and go back in the house to calm him down. It seems like something I could have figured out, but at that moment, I needed help. And it worked!

4. Do not react

For kids in care, so much of the attention they've received has been negative, so that can be what they are looking for. I've had kids try to shock me by telling me about bad things they've done or asking off-the-wall questions they think I won't answer. When I don't get flustered, and I offer an age-appropriate response, it makes them take a step back. And, ultimately, I think it builds trust, so that when they truly do have an uncomfortable question or situation to share, they come to me.

5. Include them!

This is one of my biggest things. When I was growing up, I had foster parents who would leave me at home when they went on vacation with their bio kids and make me buy my own clothes or pay for my own haircut. That was a long time ago. And it sure gave me a good work ethic! But I still see people

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Nebraska Foster & Adoptive Parent Association

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Call NFAPA at 877-257-0176 or 402-476-2273.

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Attention Foster Parents!

Earn Your In-Service Hours While Getting the Chance to Win a Great Prize!

Answer these 10 questions correctly and you will not only earn .5 credits toward your in-service hours, but your name will also be put in a drawing for a prize. For this issue we are offering a \$10 Walmart gift card.

There are a variety of ways to do this. You can email the information to Corinne@nfapa.org, send the questionnaire to the NFAPA office at 3601 N. 25th Street, Suite D, Lincoln, NE 68521 or you can complete the questionnaire online at <https://www.surveymonkey.com/r/JanuaryFebruary2022> We will then enter your name in the drawing! We will also send you a certificate for training credit to turn in when it is time for relicensing. Good Luck!

- List 5. A child who is being emotionally abused may demonstrate behaviors that can be signs of abusing, including:
- Fill in the blanks. A child often believes that they are responsible for the abuse and that it means they are _____, _____, and _____.
- True or False. There are as many reasons for removal as there are parents and kids.
- Fill in the blanks. _____ is also about _____ birth parents to succeed and be a safe place for them to return.
- Fill in the blanks. Teen who participate in _____ (for example, sports, academic clubs, or theatre) are more likely to engage in school and to graduate from high school.
- True or False. In addition to building peer relationships, extracurricular do not provide a way for parents to connect to their teens!
- Fill in the blanks. The key is to actually be interested in what they have to say. _____.
- True or False. "Make a habit of checking in with your teen even when circumstances may appear to be remarkable."
- True or False. Children in my care should be on the honor roll and make their bed every morning!
- List 8 golden rules to foster care.

Name: _____

Address: _____

Email: _____

Phone #: _____

(Continued from page 1)

saying things like “my foster kid” or treating them in ways that make them feel left out or different. And no kid wants that.

6. Acknowledge your limits

You are not a super woman or Superman. It’s OK to have limits, to seek help, to get respite care. You will not be judged. Taking a break, and taking care of yourself, will make you a better parent.

7. Know that you are making a difference

The first time that I had to let a child go, I was crushed. I told an older couple I knew who had been fostering for 20 years that I was thinking about giving up. Their advice opened my eyes, and I’ve shared it with dozens of people since that day. They said: “You will cry for a week, but these children may have cried for a lifetime. You showed them love and instilled something in them that could break the cycle in the future.”

8. When you are planning to adopt, don’t overlook older kids!

People think that if they adopt a teen, they’ll miss out on the family traditions and all of the “firsts” you experience with little kids. I adopted my daughter when she was 14 years old. She embraced the traditions I hold dear, and we’ve shared so many firsts—first boyfriend, first heartbreak, first driving lesson... I’ll be there on her wedding day, and you know what? I’ll be the first person to tell her how beautiful she is.

ABOUT THE AUTHOR

Rebecca Lahue aged out of foster care when she was 19 years old. Since that time, Rebecca and her husband have fostered more than 60 children and adopted a teenage daughter from foster care.

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<https://blog.adoptuskids.org/respect-dont-judge-be-flexible-a-mother-shares-her-golden-rules-of-foster-parenting/>

SUPPORTING BIRTH PARENTS AS A FOSTER PARENT

by Takaya Williams Jackson

Losing the right to parent your child for any reason is painful and scary. If the foster system’s goal is reunification first, we cannot be solely about parenting the struggling child in our home. Reunification is also about supporting the birthparents to succeed and be a safe place for them to return.

This guest post from experienced foster mom Takayla Jackson is a charge to us all to show compassion and care to the parents of children in our care.

Our first foster placement was a little girl. I remember her

face as the social worker took her from the car and walked towards my daughter and me. My husband was at work, but the arrival of foster kids is never perfectly planned. I remember my excitement! We were finally getting a placement, and my husband and I were going to be the best parents this little girl could ask for. We were about to help someone whose parents needed a little extra help and a child who needed a little bit of extra love. This was going to be amazing.

I Thought We Were Ready

We’d been a licensed foster family for almost four months, and I was anxious to help reunite families or adopt, whichever came first. We had been getting mentored, so in my mind, we were ready. I was wrong.

The child approached, and the social worker introduced her. I got down to her level, did my high-pitched “I’m friendly” voice, and introduced myself and my daughter (they were both 3 years old). The little girl would not let go of the worker’s hand. They came inside, and the worker spoke to me briefly about the child – mainly what she knew about her likes and dislikes. As quickly as she arrived, she was gone.

“Please don’t leave me. I wanna go with you. Don’t leave!” the child begged. But the social worker said goodbye, told her she was in a safe home, and left. It broke my heart. I was thinking to myself, “What did I do wrong? Was I not friendly? Was I overly excited? What was wrong?”

Never once did I think, “This child does not know you. You are a stranger.”

Where’s My Mommy?

Eventually, she settled down, mainly because my daughter was there, and they were playing upstairs with toys. They laughed like they were best friends, almost like they had known one another their entire lives. It was practically magical until it was time for bed. I put her to bed, and she fell asleep – no problem. Until she woke up in the middle of the night, scared and crying.

I jumped out of bed and ran to her. “What’s wrong, honey? Are you okay?” I asked, attempting to comfort her. “I want my mommy,” she cried. “Where is my mommy?” She came into my room, went to the window, and started looking for her.

My daughter woke up then and asked where her mom was. I could not answer either one of them. I did not know what to say. I wasn’t trained to answer that question in a way that makes sense to three-year-olds.

This little girl was in a stranger’s home. She was calling out for her mommy, but her mommy never showed. How do I comfort her? She did not even want me to touch her. She was

so self-sufficient at the tender age of 3 but so delicate.

Facing My Judgments

I wondered what her mom did to lose custody of her. Why was she here with us instead of at home where she belonged? I asked myself what the story was in those teary brown eyes. Why couldn't she have her mommy? I judged her mommy—what had she done to put her child in this awful position.

The stereotype that comes with being a foster or foster-to-adopt parent is that birth parents are incapable of taking care of their children. We commonly believe they have done something awful to lose custody of their children. That often leads to the judgment that birth parents don't deserve to get their children back. Even foster families with the purest intention of reunification can struggle with these complex stigmas.

After years as a foster parent, I've learned that not all birth families abuse, neglect, or live in unsafe environments with their children. There are as many reasons for removal as there are parents and kids. Sure, some have made harmful decisions. Some are selfish, and some have abused or neglected their kids.

Birth parents might also be homeless because they lost their jobs. They might be struggling through a mental health crisis or an addiction. Birth parents can also be victims of false reports of child endangerment.

Whatever the reason they've lost their kids, they are often scared to death about their children being in a home with complete strangers.

Putting Myself In Her Shoes

I tried to imagine being this child's birth mother. How would I feel, not knowing where my baby was going? Will they comfort her the way she needs? There are just as many horror stories about foster homes as there are about birth parents. The parent whose child is removed is probably thinking the worst in those moments.

Birth parents fear and judge foster parents. Foster parents fear and judge birth parents. We often blame each other because the system's adversarial nature has implanted seeds of fear and mistrust. Ultimately, both sides are supposed to be about the safety and security of the child. But those seeds take root and too often choke out the best of intentions and our desire to work together.

Despite my fear and my judgment, I chose to assume the best. I wrote this little girl's mom a letter. I told her that her baby was safe with us. I encouraged said I was rooting for her and did not want to keep her child (meaning adoption), but I would if the child needed me.

Coming Together to Do Our Best For The Child

When we met at the first visitation, the birth mom thanked me for my letter's reassurances. She told me the stories she'd heard about foster parents. I told her the stories I'd heard about birth parents. We decided together to put aside our prejudices for the sake of this little girl. She wanted to do better by her child. Our family committed to helping her do that by caring for and supporting our foster child while she learned.

This little girl ended up returning to her mom, and we were pleased with their reunification. We've maintained a relationship with them even though they've since moved to another state.

Every Child's Story Is Unique

Shortly after she left our home, we were called to take in a newborn baby boy. He came with an entirely different story — one that made me wary of his birth mother. However, I had the chance to speak with her directly when we were at a court date. She cried about her circumstances and loss, and of course, I was empathic.

But I have to admit I was also guarded due to the nature of removal. I spoke to my husband about my reservations, and we reminded each other: we must not regard people with ill intent until they reveal a reason to be concerned. Since then, we share videos and pictures with his birth parents. On his first birthday, we gave them a life book for his first year. They really appreciate all we have done since we've had him in our home. We are now in the process of adopting him.

It Is Always About The Child

As a mother, a foster parent, and a human being, I can only be accountable for the way I treat people. As a Christ-follower, I strive to live my life in a way that honors Him, and to be the best person I can be. My goal is to show love to everyone in the best way I know. It's not always an easy task. But while I'm part of the foster system, I am doing it all for the kids. At the end of the day, that's what being a foster parent is all about.

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<https://creatingafamily.org/foster-care/fostering-blog/supporting-birth-parents-as-a-foster-parent-a-guest-blog/>

WHAT IS EMOTIONAL ABUSE?

by Amy Morin, LCSW

What Is Emotional Child Abuse?

Emotional abuse, which is sometimes called psychological abuse, is a pattern of behavior that damages a child's sense

of self worth and negatively impacts their emotional development.¹ In addition to withholding love and support, the person emotionally abusing the child also may reject, criticize, threaten, demean, and berate the child. They also may humiliate the child, engage in name-calling, and insult them.

Emotional abuse can occur in conjunction with physical abuse, sexual abuse, or neglect and is one the hardest forms of abuse to recognize.¹ Often it is subtle and insidious slowly chipping away at the child's self-esteem.

Like other forms of abuse, emotional child abuse is about power and control. The perpetrator manipulates and controls the child by using words and actions that are emotionally hurtful and damaging.

Signs of Emotional Child Abuse

Although an emotionally abused child might not end up in the hospital with a broken bone or a concussion, the effects of emotional abuse can be damaging and long-lasting. In 2017, 2.3% of children in the United States experienced psychological or emotional maltreatment according to a report prepared by the Administration on Children, Youth, and Families.²

This estimate is likely low because emotional abuse can be harder to detect than other forms of child abuse and typically takes place in the confines of a child's home. There might not be any obvious, outward signs that abuse is taking place. Sometimes, a child's behavior is the only thing that indicates that there are problems at home.

Inappropriate behavior, such as acting very immature or a little bit too mature for their age, can be a sign of abuse, as can dramatic behavioral changes. For example, a child who used to be slightly aloof and did not seek attention might all of a sudden become clingy to non-abusive adults or compulsively seek affection from them.

Identifying Emotional Abuse

A child who is being emotionally abused may demonstrate behaviors that can be signs of abuse, including:

- Anxiety

- Attempts to avoid certain situations (such as going to an activity or another person's house)

- Declining performance at school

- Delayed emotional development

- Depression

- Desire to hurt themselves or other people on purpose

- Desperately seeks affection from other adults

- Developmental regression (for example bedwetting or soiling after previously mastering bladder and bowel control)

- Frequent complaints of headaches, stomachaches, or other somatic symptoms with no known cause

- Loss of interest in social activities or other interests

- Low self-esteem

You might assume that a child being abused in any way wouldn't be attached to the adult caregiver who is abusing

them—but this is not always the case. Children often remain loyal to the parent or caregiver who is abusing them because they are afraid of what will happen if they disclose the abuse.

An emotionally abused child also might think that being called names or denied affection is a normal way of life. They might not tell anyone about the abuse because they believe their experiences represent "normal" family behavior.

Traits of Perpetrators

There are also signs in adult caregivers that might indicate they are abusing a child. Belittling the child in public, openly admitting to disliking or hating the child, applying severe punishments, having unrealistic expectations, and being emotionally distant or indifferent are emotionally abusive behaviors. Meanwhile, some people who abuse children have a history of violence and aggression or have substance use disorders.

If you believe a child is being emotionally abused, don't automatically assume that the abuse is being perpetrated by the child's parents. While a child is more likely to be abused by a caregiver or family member, any authority figure can be abusive. For instance, a coach, a daycare worker, teacher, pastor, or even an older sibling could be abusing the child.

Types of Emotional Child Abuse

Emotional child abuse can take several forms. At one end of the spectrum are insults or belittling words or actions, while the other end can be total indifference that causes emotional deprivation. A caregiver who is emotionally abusive often uses words, but their actions also can be abusive—and sometimes, it's a lack of action that is abusive.

When a parent or caregiver doesn't show a child love or make them feel wanted, secure, and worthy, these actions result in emotional deprivation. People who are abusive also may withhold physical affection or loving touch—both of which are essential to a child's emotional development.

Any adult in a child's life can be emotionally abusive and the abuse can take many forms. Here are some examples of emotional abuse.

- A babysitter constantly screams at the kids and makes threats.

- A child is exposed to domestic violence at home.

- A grandparent refuses to interact with the children when they visit and instead watches television.

- A parent with alcohol use disorder gets angry when they drink, often yelling and screaming all night.

- A step-parent says that they wish a child didn't exist.

- A teacher makes fun of a child in front of the class when they struggle to read aloud.

- After a divorce, a parent asks their child to lie to a judge about the other parent to ensure that they will gain full custody.

Risk Factors for Emotional Abuse

When it comes to abusive behaviors, there are a number

of different risk factors that increase the likelihood that a person may engage in emotional abuse of a child. Aside from experiencing emotional abuse as a child themselves, here's an overview of things that put people at risk for being emotionally abusive toward children:

- Having a physical or mental illness such as post traumatic stress disorder (PTSD) or depression

- Dealing with financial stress, unemployment, or poverty

- Being socially isolated or separated from extended family

- Raising a child that is developmentally or physically disabled

- Using alcohol or drugs

- Lacking parenting skills or an understanding of child development

- Experiencing a family crisis or family stress such as being victimized by domestic abuse or having marital conflicts³

- Desiring to control a child by using words or actions

- Feeling anger or resentment toward the child or childcare responsibilities

- Experiencing jealousy of the child

Keep in mind that children do not cause another person to be emotionally abusive. Engaging in emotional abuse of a child is a choice that the perpetrator makes. While these risk factors may increase the likelihood that abuse might occur, the person being emotionally abusive still has a choice and can learn to make better, less damaging choices.

Impact of Emotional Abuse

The consequences of child abuse in any form can be severe and can persist into adulthood. A child often believes that they are responsible for the abuse and that it means they are unloved, unlovable, and unwanted. Here are four of the major long-term effects of emotional abuse and deprivation.

Attachment Issues

Emotional abuse can interfere with a child's ability to form and maintain healthy attachments. Attachment issues in early childhood have been linked to insecure attachments in adulthood. Children also might be at an increased risk for poor peer relations, trouble with intimacy, difficulty with conflict resolution, and relational aggression.

Behavioral and Social Problems

Emotional abuse in childhood also has been linked to delinquency and sexually aggressive behavior in young adults.⁴

Repeating the Cycle of Abuse

Without appropriate intervention, people who were abused as children are more likely to abuse their kids than people who did not experience abuse.⁵

Suicide and Mental Illness

Teens who experienced emotional abuse as children are more likely to be diagnosed with at least one mental illness, such as depression or anxiety, which can persist into

adulthood.⁶ People with a history of emotional abuse are also at an increased risk of attempting suicide.⁷

Emotional abuse doesn't just have a negative effect on individuals and families; it also strains society as a whole. The consequences of abuse burden the health and social care systems, and is costly because of increased educational failure, crime, and the need for mental health services.

Not everyone who has a history of emotional abuse experiences lifelong scars, though. The duration, severity, and age of onset of the abuse are influential factors. Having other supportive adults in their lives also can offset the impact.

What to Do

Mandated reporters are people who encounter children through their occupation, including child daycare providers, educators, legal and law enforcement personnel, and medical personnel. These reporters have as much of an obligation to report suspected emotional abuse as they do physical abuse, sexual abuse, or neglect.

Even if you are not a mandated reporter and you suspect that a child is being emotionally abused, report it to child protective services. A child who might be experiencing abuse needs to be evaluated by social services.

Meanwhile, if you're a parent and think your child is being emotionally abused by someone else—such as a teacher, a pastor, or coach—take steps to intervene. You might need to enlist professional help to keep your child safe.

If you have emotionally abused your child, or if a partner is emotionally abusive, it's important for both your mental health and your child's that you ask for help. Working with a therapist can be beneficial for you and your family.

Treatment for Emotional Abuse

If a child is being emotionally abused, the first course of action is to ensure the child's safety. Then, appropriate treatment can begin. The perpetrator might require treatment—especially if it's a parent. Examples of treatment can include individual therapy, parenting classes, and social services.

Those who have experienced emotional abuse can benefit from therapy with a licensed mental health professional. Once they have processed what they went through emotionally, they can learn healthy coping mechanisms, social skills, and conflict resolution.

Coping With Emotional Abuse

Although coping with the effects of emotional abuse can take some time, there are some factors that can have a protective effect, such as having a positive relationship with another adult. For example, a nurturing parent, grandparent, or the support of a teacher or coach can buffer some of the negative effects of emotional abuse.

Speak into their lives by spending time with them, encouraging them, and reminding them of their value and worth. Help them see that they are not defined by the words and actions of the person abusing them. Instead, empower

them to see their strengths and to set goals for the future.

A Word From Verywell

If you know a child who is being emotionally abused, or you suspect emotional abuse, it's important to let someone know your concerns, so that an investigation can be conducted. In the meantime, do what you can to be an encouraging and supportive person in that child's life.

Much of the damage caused by emotional abuse can be offset by the kind and empowering actions of others. Let the child know they are loved and believed in. If they learn to identify what they are good at and set goals, they can learn to offset the negative words and actions of others.

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https://www.verywellfamily.com/what-is-emotional-child-abuse-4157502?utm_source=emailshare&utm_medium=social&utm_campaign=mobilesharebutton2

WHAT HAPPENS WHEN HYPERACTIVITY IS TRAPPED INSIDE

“No one had told me that my ADHD accounted for my hypersensitivities, obsessions, lack of motivation, and sleeplessness. No one told me that visible hyperactivity only manifests in 25% of children and 5% of adults with the condition. I never yelled, rebelled or distracted others, but I internalized the whirring in my brain, kept it from interfering with others, and came dangerously close to hurting myself as a result.”

by Kiki Paroissien-Arc

Like most people with an ADHD diagnosis, I discovered my condition in the context of failing to meet school-related expectations. In third grade, I was lucky enough to have a teacher suggest that my regular inattentiveness might be related to attention deficit hyperactivity disorder (ADHD or ADD). This was shocking and perplexing and life-changing because, at that time, most educators only thought to attribute the condition to disruptive and hyperactive children — not well-behaved, quiet daydreamers like me. I was never oppositional, defiant, or difficult. In fact, I was overly cautious and obsessed with following the rules.

One time, I was very mildly punished because I accidentally stayed outside after recess had ended. Instead of acting out because small infractions like these felt beyond my control, I apologized profusely, cried, and was thoroughly embarrassed. I held my struggles close to my heart and kept them secret. I never told my parents about instances like these, or that I constantly failed to keep myself from blurting out in English in a Spanish-immersion school where that was forbidden.

Regardless, my parents and teachers noticed that I lost everything, daydreamed constantly, and was thoroughly unmotivated to do my homework. I was initially diagnosed

with primarily inattentive ADHD. Though I accepted the diagnosis and felt some relief, it did not help explain the struggles I felt outside of the classroom. No one connected the dots from my ADHD to my chronic lethargy, sleeplessness, ruminating thoughts, or emotional irregularities. My diagnosis explained a lot, but it did not explain the constant hyperactivity I held within myself.

That hyperactivity manifested in quiet ways when I was a child. I chewed on the ends of pencils, bit my sleeves, chewed my hair, ate paper, tapped my foot, felt mildly anxious, picked my scabs, and felt a strange overwhelming need to blow out candles at restaurants. Beginning in middle school, I became increasingly self-conscious of these habits. My ADHD hyperactivity became more and more tortuous as I bottled it up inside.

I became extremely socially anxious, couldn't sleep at night, developed certain obsessions, had periodic panic attacks, and became deeply sad. I eventually started taking SSRIs for generalized anxiety disorder in high school. I could no longer hide the fact that I hadn't slept for three days straight, or that once or twice I called my parents in tears when seized by the terror that I was being targeted by malevolent insects. I developed certain obsessions — like the possibility that my family would die, or that I had done something awful but forgotten about it.

I also became secretly obsessed with discovering what was wrong with me. Did I have obsessive compulsive disorder? Did I have a personality or a mood disorder? Or maybe I was just sad and anxious? I kept ADHD at the back of my mind, but I didn't even begin to relate it to my ongoing struggles.

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NFAPA SUPPORT GROUPS

As Nebraska is opening up with changes due to COVID please contact the RFC in your area to see when support groups will be back up and running or continuing with an online support. Registration is required when meeting in person.

CONTACT A RESOURCE FAMILY CONSULTANT FOR MORE INFORMATION:

Jolie Camden (Panhandle Area): 308-672-3658

- Virtual Support Group at this time. Available for all foster/adoptive parents on the first Tuesday at 6:30 pm (MT). Contact Jolie for Zoom information

Tammy Welker: 402-989-2197

- Virtual Support Group at this time, available for all foster/adoptive parents on the second Tuesday of the month at 7:00 pm (CT). Contact Tammy for Zoom information.

Terry Robinson (Central): 402-460-9177

- One on one support or if you would like one started in your area, please contact

Robbi Blume: 402-853-1091

- FACES-Our online support group. Meets on Facebook Tuesday night at 9:00 pm (CT)

NFAPA Office: 877-257-0176

- Parenting Across Color Lines in Lincoln. Meets the 4th Monday of the month at Connection Point, 1333 N 33rd Street, Lincoln. Note: depending on the COVID Risk Dial, it may go to a virtual meeting. Contact Felicia for information or the NFAPA Office.



12-hour in-service credit!

"Making the Commitment to Adoption"

Sponsored by Nebraska Department of Health and Human Services
Facilitated by Nebraska Foster & Adoptive Parent Association

Spaulding/In-service Training
Offered Virtually!

Friday, February 25, 2022 - 6:00pm-9:30pm
Saturday, February 26, 2022 - 8:00am-5:30pm

The Spaulding program is offered to prospective adoptive families. Spaulding training offers families the tools and information that they need to:

- Explain how adoptive families are different
- Importance of separation, loss, and grief in adoption
- Understand attachment and its importance in adoption
- Anticipate challenges and be able to identify strategies for managing challenges as an adoptive family
- Explore the lifelong commitment to a child that adoption brings

Friday, February 25, 2022 - 6:00pm-9:30pm

1) Exploring Expectations—Defining adoption, the process, and the key players. Participant's hopes and fears about the adoption process are recognized and empowerment strategies are identified to assist them in the process. Participant's explore their fantasies about children they might adopt to become aware of the possible influence on their decision about adoption.

2) Meeting the Needs of Waiting Children—Assist prospective adoptive parents in focusing on the needs of children awaiting adoption. Explore the issues of separation, loss, grief and attachment. Plus the unique issues related to parenting a child who has been sexually abused.

Saturday, February 26, 2022 - 8:00am-5:30pm (with a break for lunch on your own)

3) Exploring Adoption Issues—Identify supports within their family and introduce them to common issues that all adoptive families face. Help develop strategies for dealing with these issues; explore crisis periods in adoption; explore their own strengths, needs and challenges as they consider adoption

4) Making the Commitment—Assist prospective adoptive parents in considering resources they may need, what they need to know, what they need to do, and what they need to explore about themselves as they consider adopting a particular child or children.

Register online at: <https://www.surveymonkey.com/r/SpauldingRegistrationFeb2022>

You will be notified if Spaulding is cancelled due to low registration. Please note times/dates of the training (Central Time). Since this is a virtual training, you must have the ability for audio/visual and to have your camera on during the entire training and be able to see the PowerPoint presentation.

Questions, please call 402-476-2273 or Toll-Free 877-257-0176

Nebraska Foster & Adoptive Parent Association Virtual In-Service Trainings!

Resilience: The Biology of Stress

February 12, 2022

9:00 am-11:00 am (CT)

Adversity in childhood has lifelong effects on health and behavior. *Resilience: the Biology of Stress & the Science of Hope* chronicles the use of brain science to disrupt cycles of violence, addiction and disease. Learn more about treatment and prevention of childhood toxic stress.

Instructor: Christy Prang, Child Advocacy Center

Male Victims

March 12, 2022

(postponed from January 14, 2022)

9:00 am- 11:00 am (CT)

Male victims are largely misunderstood, overlooked and underrepresented despite the fact that 1 in 6 men will be a victim of sexual assault in their lifetime. Attend this breakout session to learn more about the unique dynamics male victims of sexual assault face.

Instructor: Christy Prang, Child Advocacy Center

Registration closes the day before the training.

We will email you the zoom link to log in.

<https://www.surveymonkey.com/r/In-Service2022>

You must
register to
attend!

Questions?

Phone: 402-476-2273

Toll Free: 877-257-0176

Email: Corinne@nfapa.org

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Parent Association

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ARE YOU INTERESTED IN VOLUNTEERING?

The NFAPA Board is looking to fill several volunteer board positions in the Central and Western service areas. Please contact Felicia at the NFAPA office at 402-476-2273 and send a bio of why you would like to be on the board to: Felicia@nfapa.org

(Continued from page 7)

I never considered talking to my doctor about experimenting with different ADHD medications or dosages, though I always suspected that my medication had little to no effect on me. Medical professionals suggested that I required a very low dosage, since my lack behavioral problems was equated with having ADHD of lesser severity. What's more, I had outgrown my previous academic struggles in elementary school — at least outwardly. Though I procrastinated constantly, couldn't bring myself to study for exams, and often skipped boring classes, I got mostly As. I quickly gave up on reading Shakespeare when my attention wandered, but I used sparknotes and was a strong writer. I loved more ADHD-friendly literature and was obsessed with mathematics, therefore had no issues excelling in those areas. Since I no longer performed poorly in school, everyone considered my ADHD treated. For the longest time, I thought that ADHD was a learning disability, not a mental illness. Therefore, I vaguely suspected the diagnosis was a mistake all along, or that I had simply outgrown it.

When my brain wouldn't give me a break, I felt terminally broken, confused, and sick. I constantly searched for answers but couldn't find them. Why did I exhibit strong OCD symptoms, but then seemingly move on from them for months at a time? Why was I selectively misophonic — driven to rage or anxiety by certain noises, but only if I was already uneasy or trying to focus on something? Why was getting out of bed in the morning so hard? Why was I so avoidant and afraid of failing?

I swallowed these questions whole because I was still foolishly ambitious and felt optimistic about college. I grossly overestimated what I was capable of handling in college. I enrolled in the honors college at my university and tried double majoring in English and Physics — all while pursuing my somewhat promising dream of being a successful musician. I had also entirely underestimated the role my family played in keeping me on track in high school. Left to my own devices, I floundered miserably. As I tried to keep my head above water, I quickly realized that I had to drop the honors college and only pursue one degree if I was going to survive.

I began seeing a therapist to address my disturbing obsessive thoughts and deep sadness. My therapist reasonably posited that I may be dealing with untreated OCD and suggested that I talk to my doctor while she helped offer strategies to deal with my obsessions. I readily accepted her prognosis and became optimistic again. I ignored the suspicion that the new diagnosis didn't account for the fact that my obsessions tend to inexplicably fade away for long periods of time before materializing once again. Or that, though they kept me up at night, the obsessions didn't seem to be the root of my issues during the day. Still, it was easier to believe OCD had been the root of my problems; it was, at least, an answer that validated the pain I felt.

I also re-evaluated my medication, and with a doctor's

approval, started taking bupropion as a substitute for my ADHD medication and SSRIs. Bupropion is a norepinephrine-dopamine reuptake inhibitor (NDRI), which can sometimes help treat ADHD as well as mood disorders. I didn't believe my ADHD was very severe at all, so I figured that forgoing stimulants would be a non-issue. The doctor I spoke to briefly on the phone enthusiastically agreed.

I didn't feel any better, but I kept faith in bupropion and kept upping my dose until I wasn't allowed to increase it any further. I then lied to myself and my doctors, and told them I was seeing an improvement in my symptoms. Meanwhile, I lost my previous ability to precariously balance my academic responsibilities. I managed to maintain allowable grades, but I was at the brink of hurting myself. I continued to spiral downward, while frantically protecting the facade that I was doing well.

I was late to work and class every day, and sometimes completely forgot to go. I quit my job because I suspected that I was about to be fired, and I lied to my professors about struggling with migraines when they expressed concern over my absences and apparent sudden disengagement in class discussions. I felt overwhelmingly ashamed, guilty, and lost as I tried to reconcile the high expectations I've always had for myself with my helpless lack of motivation.

The end of my freshman year came to a boiling point when I found myself having to write 10 pages of a 12-page research paper the night before it was due. I created an extremely dangerous strategy to kick my dopamine-starved brain into action; the night before an essay was due, I would sacrifice sleep, drink about seven cups of coffee, and tell myself that I only had two options: finishing the assignment or ending my life. I made it to the end of the year, but confessed to my parents that I wasn't sure I could handle going back, which took them by complete surprise. My parents found me a therapist, while strongly advising me to create a resume and find a job to keep myself active. Without the school-related anxiety, I couldn't even bring myself to write a resume during those three whole months, let alone get a job. My self-esteem was at an all-time low and I felt like a huge disappointment.

That summer, I rummaged through my parents file cabinet and, in a desperate search to discover what on earth was wrong with me, reconnected with old documents related to my ADHD diagnosis. I read school reports dating all the way back to preschool in which teachers expressed that I was well-behaved but did not grasp material as quickly as expected and was always staring out the window. I then went through a psychoeducational evaluation that documented clear inconsistencies and divergences in the way my brain operates. Although my visual sequencing skills were reported above the 99th percentile, my visual memory was reported in the 0.4th percentile as a result of my inability to concentrate. I have clear strengths, but I struggle to efficiently utilize them with my serious deficiencies.

I felt a sudden wave of cathartic relief and frustration. I don't just have ADHD, I have REALLY bad ADHD! No wonder life is hard for me. I'm living with what I've learned to accept as a beautiful and unique but hilariously inefficient brain. I did further research into the condition I almost thought had fallen upon me by accident or mistake. The explanation for my difficulties that I so desperately yearned for had been there in plain sight since I was 9 years old.

No one had told me that my ADHD accounted for my hypersensitivities, obsessions, lack of motivation, and sleeplessness. No one told me that visible hyperactivity only manifests in 25% of children and 5% of adults with the condition. I never yelled, rebelled or distracted others, but I internalized the whirring in my brain, kept it from interfering with others, and came dangerously close to hurting myself as a result. I became deeply frustrated by the fact that many people (including educators and medical professionals) still believe that hyperactivity from ADHD is only a problem when it's socially disruptive.

At the same time, I found peace with myself, stopped searching for answers, and started accepting my endlessly annoying brain with loving compassion. My sophomore year, I started taking Adderall in conjunction with SNRIs for generalized anxiety and mood disorder. Adderall almost immediately helped me see the forest through the trees and envision a non-disastrous outcome for my life. I remember calling my dad to tell him that I finally felt healthy, engaged, and optimistic again. I no longer felt like I was constantly driving a car that was leaking steering fluid and had no brakes. When I hung up the phone, I burst into actual tears of joy. I was so relieved to finally believe it when I told my parents that I felt happy, and that they don't have to worry about me.

I still struggle daily with my ADHD, but I also recognize the color it adds to my life — the unique and valuable way it makes me approach problems; the resilience it forces; and the passion and focus it reserves for the things I care about.

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8 COMMON SIGNS YOUR TEEN IS STRUGGLING WITH THEIR MENTAL HEALTH (& SOME NOT-SO-COMMON)

by BDG Studios

I'm pretty sure we can all agree that the last couple of years have been, um, rough. And while living through These Times as an adult is mentally taxing (to say the very least), for teens it just adds to the existing stress of growing up, says Crystal Burwell, PhD, LPC, CPCS, BC-TMH, Director of Outpatient Services for Newport Healthcare Atlanta, one of several evidence-based healing centers for adolescents and families struggling with mental health issues, eating disorders, and substance abuse.

Burwell says that, according to Erik Erikson, a famous developmental psychologist, teens are in an intense phase of psychosocial development as they figure out who they are and where they belong in the world. "Arguably, the human brain isn't fully developed until ages 21 to 26," says Burwell. "And the current environmental climate threatens the process of normal development."

Teenagers living through 2020 and 2021 have witnessed riots, homicides, historic trials, and domestic terrorism — all of which could unfortunately lead to a sense of helplessness, hopelessness, and threaten their sense of safety. On top of that, teens' mental health is also impacted by social media. Thanks to those powerful algorithms, teens using social apps might be more prone to comparing themselves to their peers, feeling depressed or anxious, or even self-harm or suicide.

In the Before Times it might have been easier for parents to be a stable source of reassurance for their teens, but it's even more important to do so now.

Besides providing a constant sense of security, parents can also keep a close eye on their teens for signs that something is up. "Make a habit of checking in with your teen even when circumstances may appear to be unremarkable," says Burwell. "Every teen processes their experiences differently, and your child may be struggling emotionally at times you may not expect."

When they seem off, make sure they know it's OK to be vulnerable, sharing their feelings and emotions (obviously, this goes for kids of all genders). From there, you can ask open-ended questions, like the ones below.

What three words best describe how you're feeling right now?

What would you like to have less of in your life right now?

What would you like to have more of in your life right now?

Tell me about the best thing and the worst thing that happened to you this week.

What's the hardest part about being you right now?

How can I support you better?

The key is to actually be interested in what they have to say. "Talk less and listen more," says Burwell. That means holding back on giving advice until they ask for it, she adds. "They



might just want to be heard or maybe even weigh their options as they discuss them with you.”

Common Signs Your Teen Is Struggling With Their Mental Health

It's also worth noting that if these conversations aren't normal for you both, it's less likely they'll feel comfortable opening up no matter what you ask. If that's the case for you, make a habit of looking out for non-verbal signals your teen is struggling with their mental health, like these:

- Sudden disinterest in things once enjoyed

- Decreased social interaction with friends and extracurricular activities like sports, clubs, or church groups

- Withdrawal from family, increased time isolating

- A drop in grades

- Fatigue, lack of energy, excessive sleeping

- Trouble concentrating

- Physical manifestations like headaches, stomach pains, or signs of self-injury like scars, scabs, and cuts

- Changes in eating habits

Sure, some of these could be normal-ish teen behavior, but if you see multiple issues from the list above pop up, know that you have options for professional treatment. Start by visiting your primary care provider to learn about which treatment options are best for your teen, whether that be a referral to a therapist, or learning more information about treatment centers.

Less Common Signs Your Teen Is Struggling With Their Mental Health

While those signs above are super common indications that your teen is going through something, you should also watch for less common, more nuanced red flags, such as:

- Increased irritability, anger, or emotion

- Describing feeling alone, despite being surrounded by people.

- Swift changes in how they present themselves to the outside world, versus their internal presentation.

- Emotional exhaustion and compassion fatigue (This happens when teens have extended beyond their emotional bandwidth or ability to access coping skills.)

- Your teen's emotional response is significantly disproportionate to the precipitating event. (This occurs when unhealthy emotions build up without an appropriate release.)

- Overcompensating for feelings of depression by making self-deprecating jokes. (It's very common for teens to use humor as a way to mask uncomfortable emotions.)

- Expressed feelings of hopelessness, worthlessness, shame, anxiety, or depression.

Again, if you notice multiple instances of these signs and you have a strong relationship with your teen, it's OK to bring up your concerns in a non-judgmental way, says Burwell. "Just tell them you are concerned and that you love and support them," she adds. If they refuse to talk about it with you or share that their mental health is in a bad place, it might be time to seek professional help.

How To Seek Help For Your Teen

When it comes to finding the right resources, look for therapists that have experience working with teens and

training in young adult mental health. They should be licensed and credentialed, and ideally have expertise in a variety of evidence-based modalities.

If you find that regular therapy sessions aren't enough, consider outpatient therapy. This treatment involves more frequent sessions while the patient lives at home and goes to school. Another option is residential treatment, where teens temporarily stay at a care facility where they focus on their mental health for 30 to 45 days.

No matter what type of therapy you decide is best, or if a heart-to-heart is what they need, keeping an eye out for these signs of a mental health struggle will help you support your teen — even if they don't realize you're doing it.

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<https://www.romper.com/parenting/common-uncommon-signs-your-teen-is-struggling-with-their-mental-health>

FACEBOOK DOESN'T CARE ABOUT YOUR KIDS: WHAT PARENTS CAN DO

by Devorah Heitner, PhD

Does Instagram Hurt Kids?

Parents ask me all the time: Does Instagram hurt kids? Is social media bad for kids? My answer...It depends. Based on my own research as well as other published research, we know that connecting online with friends via texting, games or social apps can be positive for many kids.

On the other hand, most of us who study this stuff believe social media can turn up the dial on self-doubt, feelings of exclusion, or worries about physical appearance. Social media is not necessarily the sole cause of these feelings for kids. Still, new revelations add to parents' concerns about how Instagram effects young people's mental health.

Recently, a whistleblower from inside Facebook has exposed some very concerning internal research about Instagram (which they own), showing that as far back as 2019 if not earlier, they recognized that Instagram was particularly toxic and harmful for some teenage girls.

Many of the parents and educators in my network feel like these internal documents, first shared in the Wall Street Journal, confirms what they already long suspected about kids' experiences with Instagram. The current Senate hearing is asking Facebook to respond to these revelations by clarifying what they knew and what they did about it. Anyone who cares about kids and teens and their welfare should pay attention to what comes out of this hearing. Will Facebook make sweeping changes to be sure their platform doesn't harm children? Don't hold your breath for a huge transformation.

Despite all of this, I don't recommend that parents shut kids off from all social media until they are 18. Teaching kids the ropes of social media is going to be more effective than preaching abstinence-only. As tempting as it is to just try to

keep kids off of social media, for many kids the pleasures and possibilities will outweigh the risks and harms.

But we need to mentor, support and listen.

Teens themselves are telling researchers that their experiences on Instagram lead to eating disorders, suicidal ideation and other threats to their health and well-being. Kids who already have a risk factor are especially vulnerable. Right now many children and adolescents are at heightened mental health risk due to the ongoing pandemic, so we can consider almost all kids to have at least one risk factor right now.

Kids are exposed to negative messages like unrealistic and unhealthy body “ideals” before they even get to social media. If social media exacerbates that exposure, and if a teen, tween or child is already vulnerable after a setback (like say being home for a year, or a negative series of social interactions, or just being a teenager in these times) that could mean that social media, if used in certain ways, can put them at risk.

Social media algorithms can harm a child’s mental health by sending harmful and misleading content to users based on even one or two clicks in that direction. For example, when researchers created accounts as 15 year old girls and liked “a single post from a sportswear brand about dieting” and followed one other account dieting related account and these actions were enough to crowd her “explore” feed with “content relating to weight loss journeys and tips, exercise and body sculpting.” The researchers noted the images in her explore feed started to feature “noticeably slim, and in some cases seemingly edited/distorted body shapes.”

We can ask ourselves, why do some kids keep going back to spaces and sites that hurt them, even if they realize, at some level, that it hurts? Of course many adults do the same thing. Social sites have features (such as the ‘like button’) that make them hard to quit. And we are social animals—we go where our friends are.

All of us, adults and teens, need to cultivate self-knowledge and self-regulation to identify when our use of apps may be hurting more than they are helping. But the apps also need to rethink algorithms that send toxic content to users—especially children.

And yes, kids under thirteen aren’t supposed to use apps like Instagram, and waiting til you don’t have to lie about your age to use an app is certainly the best practice. As anyone who has been thirteen knows, thirteen is by no means the age of complete reason and waiting til that age alone is not enough to protect kids from harmful experiences.

Take your own emotional temperature

As parents, we can work hard to get our kids to recognize that something might be making them feel worse, not better. Talking about our own experiences with social comparison can help. Teachers, scouting leaders, athletic coaches and other adults that have influence with young people need to take every opportunity to check in about these issues with adolescents and share strategies to help teens and tweens learn the best strategies. I like to remind kids to be sure they are running their devices and not letting their devices run them.

That means unfollowing accounts that spew harmful images and ideas, and regularly reality-checking what they see online with other sources including as much in-person social interaction as life in a pandemic allows. We should strive to give teens agency in how they use these apps, while doing our

job to prepare them for the risks inherent in them.

Every App is Special

Getting to know apps one at a time and focusing on the culture and features of that app and how it makes you feel is important. Facebook’s own research found the culture of Instagram was especially risky for teen girl’s body-image while Tik Tok and SnapChat have some factors that mitigate (somewhat) that particular risk. On the other hand, Tik Tok can serve up images promoting alcohol and drugs to minors, and has other content we might want our kids to avoid. And Snapchat streaks--ongoing volleys of communication that you lose if you skip a day— can stress kids out and make it hard to unplug. Every app has its own special perks and it’s own pitfalls.

We can encourage our children to skip the “explore” feature on Instagram and focus on what their actual friends are posting. We can remind them to unfollow peers who only post things that make them feel bad and not to post things that will hurt other people. For adults and kids, it is good to remember that if spending time on a certain app makes you feel bad, try to allocate your time accordingly, or experiment with taking a break from the app by taking it off your most frequently used device.

The teens I talk with say that interest-based social groups in spaces like Discord are less stressful than social media in general because it is about connection and affiliation and not about performing a perfect version of yourself. Yet even these spaces can have drama and conflict. There is no perfect place to hang out on the Internet!

7 Ways Parents Can Help

We can MENTOR and not simply MONITOR. We can discuss our own experiences with social comparison. Remind kids that we’re only seeing a sliver of other people’s lives. That all of us are greater and more complex than the sum of our posts

Remind kids they can CURATE content and feeds for protection of their mental health. We can encourage our children to be smart about the algorithm, follow positive posters and add contacts mindfully (and don’t just focus on the numbers!)

Remember and model good HABITS like choosing certain times of day to use social apps carefully and only scroll when they are feeling emotionally grounded. Remember to unplug and get enough sleep. Keeping devices out of bedrooms at night can help.

Remind kids to REALITY CHECK what they see. Remember people are using this as a space to perform. Check sources on news stories and updates. Talk about what you are seeing with others.

Encourage kids to PRIORITIZE face to face contact, hobbies they love, and work that meets their life goals over social media time.

SHARE thoughtfully and encourage kids to do the same. Be intentional about being part of the solution.

Teach good BOUNDARIES You can model great boundaries by remembering to check with your kids before sharing images of them or news about them. Save super personal news for trusted friends.

Given that Facebook and other social media companies have shown us that profits and growth are more important

to them than the safety and well being of users, we need to focus on harm-reduction and helping kids learn to navigate these spaces in ways that benefit them or, at minimum, does the least amount of harm while preserving access to the social opportunities for connection that bring us to these apps in the first place.

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EXTRACURRICULAR ACTIVITIES: BENEFITS AND BALANCE

by *Ettya Fremont/Success in School & Life*

With in-person school back up and running again, so too are many sports, academic groups, and clubs — often referred to as extracurricular activities. For teens, getting back into the classroom, completing their schoolwork, and catching up with friends, comes with the added option to participate in extracurricular activities. These activities come in a variety of forms including sports teams, academic or arts clubs, and volunteering or working in the community. As a researcher, I often write about the science and studies surrounding the benefits of extracurricular activities, but I also wanted to capture what matters to parents and their teens. So I checked in with two of my colleagues, Eden Pontz and Jacques Louis, who have high school-aged teens of their own for a bit more perspective. Read on to find out more about the benefits of extracurricular activities, balancing those benefits with their drawbacks, and how parents can use these activities as a way to relate to their teens!

Benefits of Participating in Extracurricular Activities

Participating in extracurricular activities can benefit your teen in a lot of ways. Here are (sometimes surprising) examples of some key benefits.

Improve Academic Abilities:

Teens who participate in school-based activities (for example, sports, academic clubs, or theatre) are more likely to

engage in school and to graduate from high school. They may also have better attendance and standardized test scores. Not sure where to start? Participating on speech and debate teams helps teens develop research, communication and critical thinking skills. Similarly, participating in theatre can improve reading comprehension— including youth who have learning disabilities. Teens who get involved with music education may find they're improving their math skills!

Expand Possibilities for Identity Development:

Adolescence is a time when youth are rapidly exploring and developing their identities. Participating in a variety of activities throughout adolescence exposes them to different types of people with a range of interests. This exposure to new experiences and people can help teens find answers to big questions such as “What do I like to do?”, “Who am I?” and “Where do I fit in?” Being part of a club, team, or group gives teens an opportunity to form positive connections with peers and other supportive adults.

Bolster Personal Growth:

Extracurricular participation may also help young people feel more empowered and increase their self-esteem. These benefits may even extend beyond high school! Participating on sports teams not only provides a way for teens to connect with peers and positive adult role models (e.g., coaches), but it is a way for teens to experience social acceptance and body satisfaction. Research shows that the combination of these benefits from playing sports in high school may reduce risk for depression and boost mental health in early adulthood.

Cultivate Character Development:

Tweens and teens who take part in activities may gain positive social skills. For example, by providing youth with things to do and a space to do them they develop positive relationships with adults and other teens, and are less likely to bully others. Theatre participation may help young people develop empathy as they portray how their character thinks, feels, and behaves. (As a bonus for caregivers, watching those live theatre performances may also increase empathy by allowing audience members to imagine themselves in the life stories of the characters!) Participating in a variety of activities during high school may even lead some kids to be more actively involved in their communities throughout adulthood.

Build Relationships:

Having a range of activities provides unique opportunities for teens to form and strengthen relationships with their peers and their parents. Extracurricular activities also provide a way for teens with similar interests to connect to each other. Research reveals that teens who participate in an activity together are almost 2-3 times more likely to form new friendships with one another than with someone who does not participate in the same activity. This same study also showed that teens who participated in activities together were more likely to maintain their friendships than teens who did not participate together. In other words, these activities are a great way for teens to form new friendships and maintain old ones!

In addition to building peer relationships, extracurriculars also provide a way for parents to connect to their teens! Not only can parents talk with their teens about what they like and dislike, they can also use them as a springboard to discuss deeper issues. Jacques uses his sons' activities as a backdrop for critical conversations with his sons about colorism, class, privilege and empathy. For example, Jacques asks his sons "What does privilege, empathy look like [in this setting]?"

Part-time Work and Volunteering

Volunteering is another way for adolescents to learn skills and develop positive characteristics while giving back to their communities. Beyond just feeling good when they help others, volunteering can also increase self-esteem, self efficacy, and contribute to better mental health and greater satisfaction with life. Volunteering is a great way to meet new people, and can help teens develop empathy for those who are different from themselves. Teens who volunteer are also more likely to graduate from high school.

Some teens may have summer jobs, or even work part-time during the school year. Just like involvement in different sports or clubs, having a job is another way for teens to interact with new people and develop skills. Part-time work may help teens become more effective at interacting with adults and allow them to develop professional and personal skills as they transition into adulthood. For Jacques' teenage sons, part-time work has been a way for them to learn "work-ready marketable skills [such as] getting up early and having to go to work at a specific time, and [learn about] performance reviews." Similarly, Eden said that holding a part-time job at a restaurant gave her daughter a chance to "really interact with adults – not just young people." Another benefit Eden added was that it gives teens "exposure to how businesses work." Both parents said that part-time jobs were a great way to help teens learn financial literacy (e.g., learning to budget and save). Part-time work can also contribute to adolescent character development. For example, research shows that adolescents view their part-time jobs as a way to help others. This is important because the positive feelings associated with helping others show teens that work can be more than about a paycheck!

However, just like with sports and clubs, holding a job part-time takes time. Working too many hours may lead teens to have lower expectations about finishing school, be less engaged in their schoolwork, struggle to pay attention in class, or use substances. These are some of the reasons why it's important for caregivers to talk to adolescents about balance.

Balancing Extracurricular Activities with Life

Beyond the personal, social, and academic benefits of extracurricular activities, some teens may see participation in a wide range of activities as critical for getting into a good college. They may be tempted to take on a lot of activities to impress an admissions committee. It's up to caregivers, parents, and teachers to remind teens that being overwhelmed is not healthy, emotionally or physically. Stress can damage grades, decrease motivation in school, and increase the chance that a teen turns to substances. While college admissions committees may

appreciate an applicant's hard work, they also recognize that teens need to eat, sleep, and remain physically and emotionally healthy. For more suggestions on how to choose activities, check out these tips from the Princeton Review.

As caregivers, we have our own opinions about which activities teens should pursue. Some parents may want their children to choose an activity because they'd done it themselves when they were younger. Other times, parents might want to take their child out of an activity due to concerns about safety or the amount of time required. While these concerns may be very real, it is important to remember that there are risks and benefits with every activity. Given that participation increases positive characteristics such as school engagement and confidence, there may be unintended consequences of taking teens out of an activity they enjoy, such as decreased enthusiasm for school or lower self-esteem.

Another concern that parents and teens might have is the amount of time an activity requires. Commutes, practices and meets consume hours in teens' (and often parents'!) schedules. For Eden's daughter, the opportunity to take a once-weekly course for college credit directly conflicted with soccer practice and meets. Eden explained, "We talked to her about it, to say, 'Let's take a look at the full landscape...maybe you can play pickup soccer on the side.'" In this case, the tradeoff proved beneficial: "She made the decision, and now as a result of her taking that class, she thinks that's an area she might want to study in college."

Is it Okay to Quit an Activity?

With all of the options available for extracurriculars, it may be difficult to figure out which ones to pursue and which ones to drop. Both parents emphasized that it is critical to consider whether their teen is enjoying their choices. When deciding on whether to continue an activity or not, Eden reminds her daughter that extracurriculars are a way to "figure out things you like and you don't like." Sometimes determining whether an activity is enjoyable takes time, so Eden also encourages her daughter to "give it a try at the beginning, and don't give up right away." Similarly, Jacques makes sure to check-in with his sons, asking "Are you happy"? And if the answer is "no" then "we're done." Conversations such as these help teens develop their own voice. When you listen to your teens' concerns, you empower your teen, and give them the chance to strengthen their decision-making skills. Here are some more ways you and your teen can make decisions together.

Discoveries Made Through Extracurricular Activities

Extracurricular activities are a great way for teens to learn about themselves. Participating in a variety of activities can help youth discover where they fit in, what they like, and what they do not. They can help teens develop critical skills as they transition to adulthood. Two-way discussions between parents and teens are critical to ensuring that the benefits of participation outweigh any risks, and a great way for caregivers to have conversations about difficult topics.

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Benefits

- Ongoing trainings/conferences at local and state level
- Networking opportunities with other foster families, adoptive families, and relative caregivers
- Opportunity for all foster families, adoptive families and relative caregivers to be actively involved in an association by serving on committees and/or on the Executive Board
- Working to instigate changes by alertness to legislation affecting the child welfare system
- An advocate on your behalf at local, state and national levels
- 25% of membership dues goes toward an NFAPA Scholarship

Thank you for your support!

Please mail membership form to:
**NFAPA, 3601 N. 25th Street, Suite D
Lincoln, NE 68521.**

Questions? Please call us at 877-257-0176.

NFAPA is a 501c3 non-profit organization comprised of a volunteer Board of Directors and Mentors.

Name(s): _____

Organization: _____

Address: _____

City: _____ County: _____

State: _____ Zip: _____ Phone: _____

Email: _____

I am a Foster/Adoptive Parent. I have fostered for _____ years.
(circle one)

I am with _____ agency.

I wish to join the effort:

- Single Family Membership** (a single foster or adoptive parent), \$25
- Family Membership** (married foster or adoptive parents), \$35
- Supporting Membership** (individuals wishing to support our efforts), \$75
- Organization Membership** (organizations wishing to support our efforts), \$150
- Friends of NFAPA**, \$5 billed Monthly

My donation will be acknowledged through Families First newsletters.

- Gold Donation, \$1,000 Silver Donation, \$750
- Platinum Donation, \$500 Bronze Donation, \$250
- Other, \$ _____