

JUNE 23, 2015

## Childhood Trauma Leads to Brains Wired for Fear

Last week, a report by the University of San Diego School of Law found that about 686,000 children were victims of abuse and neglect in 2013. Traumatic childhood events can lead to mental health and behavioral problems later in life, explains psychiatrist and traumatic stress expert Bessel van der Kolk, author of the recently published book, *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma*. Children's brains are literally shaped by traumatic experiences, which can lead to problems with anger, addiction, and even criminal activity in adulthood. [CONTINUE READING](#)



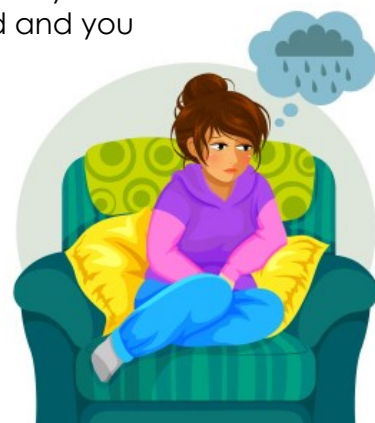
Bessel van der Kolk just did a study on yoga for people with PTSD. He found that yoga was more effective than any medicine that people have studied up to now. That doesn't mean that yoga cures it, but yoga makes a substantial difference in the right direction. [VIEW FIVE KID-FRIENDLY YOGA POSES](#)

## BREAKING THROUGH THE CLOUDS: DEALING WITH REUNIFICATION ANXIETY

One of the primary goals of being a foster parent is to provide a safe and nurturing home and help a child prepare to go back home. Reunification is an exciting time and is often the culmination of many people working very hard for the sake of a child. It can be heart-filling and joyous to watch a child that you have cared for and nurtured be able to reunify with his family. At the same time, as a foster parent, it's common to feel anxious about reunification, even if you know in your heart it is what is best for the child.

Feeling anxious about the plan for the child in your care to reunify with her birth family can be the result of several things. Maybe you are concerned that it is not the right time for reunification to occur. After all, the changes that people have to make are often big ones and it can seem that the process is moving too fast. Sometimes, due to confidentiality, foster parents may not get all the information about a birth parent's progress and that can be scary. When people don't know all of the facts, they tend to make up the worst possible scenario.

Or perhaps you are anxious because you know you will grieve the loss of that child and you aren't quite sure how to care for yourself. Grieving is ok and, in fact, is common when a child leaves your home. Grief and loss can be tough to go through for anyone. And, it is important to note everyone's grieving process is different and there are no timelines assigned to grief. [CONTINUE READING](#)



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## Adventureland Fun Day

SATURDAY, AUGUST 8

IFAPA's Appreciation Day for Iowa's Foster, Adoptive & Kinship Families!

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# CHECK OUT THESE HELPFUL RESOURCES!

Learn the symptoms, statistics and treatment/solutions for ADHD, Sensory Processing Disorder and Autism Spectrum Disorder.

**What is ADHD**  
ADHD is the most common neurodevelopmental disorder. Recent data indicates that up to 9.1% of school-age children meet the diagnostic criteria for a diagnosis of ADHD (Academy of Pediatrics, 2017).

**Types of ADHD**

- Inattentive**: Child exhibits significant inattention and forgetfulness. They often do not seem to listen when spoken to directly.
- Hyperactivity**: Child exhibits excessive activity and impulsivity. They often fidget and have trouble sitting still.
- Combined**: The most common form of ADHD as it includes both inattention and hyperactivity.

**Population that has ADHD**  
ADHD is more common in males than in females. According to community and population surveys, the ratio between males and females is 2:1.

**Inattention**

- Often misses mistakes in schoolwork.
- Often has trouble keeping attention on tasks or on the activities.
- Often does not follow through on instructions and fails to finish schoolwork.
- Often has trouble organizing activities.
- Often has trouble remembering things that are important for a long period of time.
- Often forgets things needed for tasks such as writing assignments, pencils, books, or tools.
- Often needs frequent reminders.
- Often forgetful in daily activities.

**Hyperactivity**

- Fidgets with hands or feet or fidget when sitting still is expected.
- Often appears to have more energy than is expected.
- Often runs and climbs when not supposed to and exhausts himself in a way that is not typical for his age.
- Often has trouble playing or sitting still for long periods of time.
- Often "talks the talk" or "runs the run" when he or she is not supposed to.

**Impulsivity**

- Often blurts out answers before questions have been finished.
- Often has trouble waiting for his or her turn.
- Often interrupts or intrudes on others.

**How symptoms affect a child at**

Home	School	Social
<ul style="list-style-type: none"> <li>Difficulty following morning routine.</li> <li>Increase in frequency of arguments with parents/siblings and daily chores.</li> <li>More disagreements.</li> </ul>	<ul style="list-style-type: none"> <li>Difficulty remaining seated in class.</li> <li>Difficulty completing work in a timely fashion.</li> <li>Difficulty organizing materials.</li> </ul>	<ul style="list-style-type: none"> <li>Difficulty regulating behavior with his or her peers.</li> <li>Difficulty interacting with peers in the playground.</li> <li>Difficulty playing time during games.</li> </ul>

**Treatment**

- Pharmacological**: Research indicates that pharmacological treatment is the treatment of choice for ADHD. Focus is on improving attention and behavioral regulation.
- Behavioral Therapy**: Focus is on teaching the child, child, and caregiver strategies to improve the frequency and quality of positive, on-task behavior and decrease disruptive and off-task behavior.
- Parent/Teacher**: Focus is on teaching parents and teachers strategies to manage behavior and create a supportive environment for the child.

For more on ADHD including videos, checklists, webinars and answers to your questions visit [www.ADHDInfographic.com](http://www.ADHDInfographic.com)  
Provided by North Shore Pediatric Therapy, www.NSPediatrics.com (877) 486-4140

**What is SPD**  
Sensory Processing Disorder (SPD) is a brain-based condition that affects the way the brain receives and organizes information from the senses. It is not a learning disorder, but it can interfere with learning. It is a developmental disorder that affects the way the brain processes sensory information.

**In-Put and Out-Put of the Senses**

1. Outside world (environment) enters inside world (body) through the senses (sight, sound, touch, taste, smell, and movement).
2. The info goes then to the brain to be processed.
3. The brain sends info back to the body to be used.
4. One should expect the sensory info to be processed in the brain, then sent back to the body to be used.
5. If the brain does not process the info properly, it can lead to SPD.

**Hypo-reactive nervous system**

- Under-responsive to both and may prefer heavy touch to light touch.
- Under-responsive to sound and may prefer louder sounds to softer sounds.
- Under-responsive to taste and may prefer bland or salty foods to flavorful foods.
- Under-responsive to smell and may prefer strong smells to light smells.
- Under-responsive to movement and may prefer fast movement to slow movement.

**Hyper-reactive nervous system**

- Overly sensitive to touch.
- Overly sensitive to sound.
- Overly sensitive to taste.
- Overly sensitive to smell.
- Overly sensitive to movement.

**Signs of SPD**

- Difficulty staying on task.
- Difficulty staying in line.
- Difficulty staying on task.
- Difficulty staying in line.
- Difficulty staying on task.
- Difficulty staying in line.

**Solutions For SPD**

Home	School	Pediatric Therapy
<ul style="list-style-type: none"> <li>Use visual aids.</li> <li>Use auditory aids.</li> <li>Use tactile aids.</li> <li>Use olfactory aids.</li> <li>Use gustatory aids.</li> <li>Use movement aids.</li> </ul>	<ul style="list-style-type: none"> <li>Use visual aids.</li> <li>Use auditory aids.</li> <li>Use tactile aids.</li> <li>Use olfactory aids.</li> <li>Use gustatory aids.</li> <li>Use movement aids.</li> </ul>	<ul style="list-style-type: none"> <li>Use visual aids.</li> <li>Use auditory aids.</li> <li>Use tactile aids.</li> <li>Use olfactory aids.</li> <li>Use gustatory aids.</li> <li>Use movement aids.</li> </ul>

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**WHAT IS AUTISM**  
AUTISM SPECTRUM DISORDER (ASD) is a diagnosis that describes significant social, communicative & behavioral challenges. People with Autism handle information in their brain differently than typically developing peers.

Autism affects each person in different ways and can range from very mild to severe. People with autism share some similar symptoms, such as problems with social interaction, difficulties with communication, and repetitive/sterotyped behavior.

**RED FLAGS OF AUTISM**

A person with autism may:

- Not respond to their name by 12 months of age.
- Not point at objects to show interest prior to an airplane flying over by 14 months.
- Not play "pretend" games (pretend to feed a doll) by 15 months.
- Avoid eye contact and want to be alone.
- Have trouble understanding other people's feelings or talking about their own feelings.
- Have delayed speech and language skills.
- Repeat words or phrases over and over (echolalia).
- Give unrelated answers to questions.
- Get upset by minor changes.
- Have obsessive interests.
- Flap their hands, rock their body, or spin in circles.
- Have unusual reactions to the way things sound, smell, taste, look, or feel.
- Repetitively line up objects.

**WHO CAN DIAGNOSE A CHILD WITH AUTISM**

- Neuropsychologist
- Child Psychologist
- Behavioral Pediatrician
- Neurologist

**CURRENT AUTISM STATISTICS**

Boys vs. Girls

[View the ADHD Infographic](#)

[View the Sensory Processing Disorder \(SPD\) Infographic](#)

[View the Autism Spectrum Disorder Infographic](#)

## UPCOMING TRAININGS

### L.E.A.N Start - Lifestyle, Exercise, Attitude, Nutrition

A comprehensive prevention plan to help children reach their optimal level in four pillars of health. The LEAN start program is based upon scientific research and designed by Dr. William Sears, "America's pediatrician" as well as other experts in the field of children's nutrition, health and fitness. These four areas work together to make families healthier - at any age and any stage of life. *Trainer: Christine Trocheset*

**July 11 (9am-4:30pm) Council Bluffs**

### Putting a Stop to Elimination Disorders - Enuresis (Wetting) & Encopresis (Soiling)

This course will discuss the diagnoses of enuresis and encopresis. We will explore factors that can lead to each condition and the role that trauma can play in these disorders. After discussing the different causes of these disorders we will identify different treatments including, behavioral, cognitive, dietary, and pharmacological. *Trainer: Joann Seeman Smith, Ph.D., LMHC*

**July 11 (9am-12:15pm) Waterloo**  
**Aug. 29 (9am-12:15pm) Cedar Rapids**

### Grrrr... "I am Just so Mad!" - Helping Young Children Deal with Their Anger

This course will specifically focus on helping young children (ages 2-5) deal with anger appropriately. We will discuss how anger is most commonly expressed by young children, how to handle when children are being inappropriate in their expression of anger, and explore coping skills to teach fundamental skills to deal with emotions appropriately as they age. *Trainer: Joann Seeman Smith, Ph.D., LMHC*

**July 11 (1:30pm-4:45pm) Waterloo**  
**Aug. 29 (1:30pm-4:45pm) Cedar Rapids**  
**Sept. 12 (9am-12:15pm) Ames**

[VIEW IFAPA'S FULL TRAINING SCHEDULE](#)

CALL 800.277.8145 OR [REGISTER HERE](#)

## 3 Ways To Earn You Child's Trust: A Mother's Memoir Through Reactive Attachment Disorder

Early on, I assumed if I raised my adopted sons the way I was raised that they could overcome and heal from their wounds of early neglect. My husband and I gave them caring affection, strove to help them build their moral compasses, and provided consistent structure and lots of opportunities for family fun. We gave them what we had growing up.

By the time they reached early adolescence, I began to recognize the flaws in my assumption. My boys were defensive and over-reacted to even the slightest gesture of parental discipline or control. In school, they had continual troubles. One son overtly challenged teachers and school authority. The other son was more passive but quietly did things his way without regard for the rules.

When I found the Institute for Attachment and Child Development, I learned so much about my boys. When I reflect upon those years through the lenses of what I now know, I understand the reasons for the way my boys behaved. [CONTINUE READING](#)