



# Foster Care Newsletter

## Spring 2012

### Taking Charge of Your Health—A Recommendation to Teens

#### **Does your life move at a hectic pace?**

You may feel stressed from school, after-school activities, peer pressure, and family relationships. Your busy schedule may lead you to skip breakfast, buy lunch from vending machines, and grab whatever is in the refrigerator for dinner when you get home.

#### **Where is the time to think about your health?**

Yet healthy behaviors, like nutritious eating and regular physical activity, may help you meet the challenges of your life. In fact, healthy eating and regular exercise may help you feel energized, learn better, and stay alert in class. These healthy habits may also lower your risk for diseases such as diabetes, asthma, heart disease, and some forms of cancer.

#### **Did you know?**

- From 2003 to 2004, approximately 17.4 percent of U.S. teens between the ages of 12 and 19 were overweight.
- Overweight children and teens are at high risk for developing serious diseases. Type 2 diabetes and heart disease were considered adult diseases, but they are now being reported in children and teens.

#### **Dieting is not the answer.**

The best way to lose weight is to eat healthfully and be physically active. It is a good idea to talk with your health care provider if you want to lose weight. Many teens turn to unhealthy dieting methods to lose weight, including eating very little, cutting out whole groups of foods (like grain products), skipping meals, and fasting. These methods can leave out important foods you need to grow. Other weight-loss tactics such as smoking, self-induced vomiting, or using diet pills or laxatives can lead to health problems.

In fact, unhealthy dieting can actually cause you to gain more weight because it often leads to a cycle of eating very little, then overeating or binge eating. Also, unhealthy dieting can put you at greater risk for growth and emotional problems.

#### **What You Can Do**

This article is designed to help you take small and simple steps to keep a healthy weight. It gives you basic facts about nutrition and physical activity, and offers practical tools that you can use in your everyday life, from reading food labels and selecting how much and what foods to eat, to replacing TV time with physical activities.

The guidelines suggest the number of calories you should eat daily based on your gender, age, and activity level. According to the guidelines, a healthy eating plan includes:

- fruits and vegetables
- fat-free or low-fat milk and milk products
- lean meats, poultry, fish, beans, eggs, and nuts
- whole grains

In addition, a healthy diet is low in saturated and *trans* fats, cholesterol, salt, and added sugars. When it comes to food portions, the *Dietary Guidelines* use the word "servings" to describe a standard amount of food. Serving sizes are measured as "ounce-" or "cup-equivalents." Listed below are some tips based on the guidelines that can help you develop healthy eating habits for a lifetime.

#### **Know your fats.**

Fat is also an important nutrient. It helps your body grow and develop, and it is a source of energy as well—it even keeps your skin and hair healthy. But be aware that some fats are better for you than others. Limit your fat intake to 25 to 35 percent of your total calories each day. Unsaturated fat can be part of a healthy diet—as long as you do not eat too much since it is still high in calories. Good sources include:

- olive, canola, safflower, sunflower, corn, and soybean oils
- fish like salmon, trout, tuna, and whitefish
- nuts like walnuts, almonds, peanuts, and cashews

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Limit saturated fat, which can clog your arteries and raise your risk for heart disease. Saturated fat is found primarily in animal products and in a few plant oils like:

- butter
- full-fat cheese
- whole milk
- fatty meats
- coconut, palm, and palm kernel oils
- Limit *trans* fat, which is also bad for your heart. *Trans* fat is often found in:
  - baked goods like cookies, muffins, and doughnuts
  - snack foods like crackers and chips
  - vegetable shortening
  - stick margarine
  - fried foods

Look for words like “shortening,” “partially hydrogenated vegetable oil,” or “hydrogenated vegetable oil” in the list of ingredients. These ingredients tell you that the food contains *trans* fat. Packaged food products are required to list *trans* fat on their Nutrition Facts.

### **Replenish your body with iron.**

Teen boys need iron to support their rapid growth—most boys double their lean body mass between the ages of 10 and 17. Teen girls also need iron to support growth and replace blood lost during menstruation.

To get the iron you need, try eating these foods:

- fish and shellfish
- lean beef
- iron-fortified cereals
- enriched and whole-grain breads
- cooked dried beans and peas like black beans, kidney beans, black-eyed peas, and chickpeas/garbanzo beans
- spinach

### **Control your food portions.**

The portion sizes that you get away from home at a restaurant, grocery store, or school event may contain more food than you need to eat in one sitting. Research shows that when people are served more food, they eat more food. So, how can you control your food portions? Try these tips:

- When eating out, share your meal, order a half-portion, or order an appetizer as a main meal. Be aware that some appetizers are larger than others and can have as many calories as an entree.
- Take at least half of your meal home.
- When eating at home, take one serving out of a package (read the Nutrition Facts to find out how big a serving is) and eat it off a plate instead of eating straight out of a box or bag.

### **Healthy Eating**

Eating healthfully means getting the right balance of nutrients your body needs to perform every day. You can find out more about your nutritional needs by checking out the 2005 *Dietary Guidelines for Americans*.

Published by the U.S. Government, this publication explains how much of each type of food you should eat, along with great information on nutrition and physical activity.

### **Eat fruits and vegetables every day.**

When consumed as part of a well-balanced and nutritious eating plan, fruits and vegetables can help keep you healthy. You may get your servings from fresh, frozen, dried, and canned fruits and vegetables. Teenagers who are consuming 2,000 calories per day should aim for 2 cups of fruit and 2 1/2 cups of vegetables every day. You may need fewer or more servings depending on your individual calorie needs, which your health care provider can help you determine.

### **Power up with protein.**

Protein builds and repairs body tissue like muscles and organs. Eating enough protein can help you grow strong and sustain your energy levels. Teens need five and one-half 1 ounce-equivalents of protein-rich foods each day.

- Avoid eating in front of the TV or while you are busy with other activities. It is easy to lose track of how much you are eating if you eat while doing other things.
- Eat slowly so your brain can get the message that your stomach is full.
- Do not skip meals. Skipping meals may lead you to eat more high-calorie, high-fat foods at your next meal or snack. Eat breakfast every day.

### **Read food labels.**

When you read a food label, pay special attention to:

- **Serving Size.** Check the amount of food in a serving. Do you eat more or less? The "servings per container" line tells you the number of servings in the food package.
- **Calories and Other Nutrients.** Remember, the number of calories and other listed nutrients are for one serving only. Food packages often contain more than one serving.
- **Percent Daily Value.** Look at how much of the recommended daily amount of a nutrient (% DV) is in one serving of food—5-percent DV or less is low and 20-percent DV or more is high. For example, if your breakfast cereal has 25-percent DV for iron, it is high in iron.

### **Go whole grain.**

Grain foods help give you energy. Whole-grain foods like whole-wheat bread, brown rice, and oatmeal usually have more nutrients than refined grain products. They give you a feeling of fullness and add bulk to your diet. Try to get six 1 ounce-equivalents of grains every day, with at least three 1 ounce-equivalents coming from whole-grain sources.

### **Plan meals and snacks.**

You and your family have busy schedules, which can make eating healthfully a challenge. Planning ahead can help. Think about the meals and snacks you would like for the week—including bag lunches to take to school—and help your family make a shopping list. You may even want to go grocery shopping and cook together.

### **Jumpstart your day with breakfast.**

Did you know that eating breakfast can help you do better in school? By eating breakfast you can increase your attention span and memory, have more energy, and feel less irritable and restless. A breakfast that is part of a healthy diet can also help you maintain an appropriate weight now and in the future.

### **Bag it! Pack your lunch.**

Whether you eat lunch from school or pack your own, this meal should provide you with one-third of the day's nutritional needs. A lunch of chips, cookies, candy, or soda just gives you lots of calories, but not many nutrients. Instead of buying snacks from vending machines at school, bring food from home. Try packing your lunch with a lean turkey sandwich on whole-grain bread, healthy foods like fruits, vegetables, low-fat yogurt, and nuts.

### **Snack smart.**

A healthy snack can contribute to a healthy eating plan and give you the energy boost you need to get through the day. Try these snack ideas, but keep in mind that most of these foods should be eaten in small amounts:

- fruit—any kind—fresh, canned, dried, or frozen
  - peanut butter on rice cakes or whole-wheat crackers
  - baked potato chips or tortilla chips with salsa
  - veggies with low-fat dip
  - string cheese, low-fat cottage cheese, or low-fat yogurt
  - frozen fruit bars, fruit sorbet, or low-fat frozen yogurt
  - vanilla wafers, graham crackers, animal crackers, or fig bars
  - popcorn (air popped or low-fat microwave)
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### **Eat dinner with your family.**

For many teens, dinner consists of eating on the run, snacking in front of the TV, or nonstop munching from after school to bedtime. Try to eat dinner as a family instead. Believe it or not, when you eat with your family you are more likely to get more fruits, vegetables, and other foods with the vitamins and minerals your body needs. Family meals also help you reconnect after a busy day. Talk to your family about fitting in at least a few meals together throughout the week.

### **Limit fast food and choose wisely.**

Like many teens, you may eat at fast food restaurants often. If so, you are probably taking in a lot of extra calories from added sugar and fat. Just one value-sized fast food meal of a sandwich, fries, and sweetened soda can have more calories, fat, and added sugar than anyone should eat in an entire day. The best approach is to limit the amount of fast food you eat. If you do order fast food, try these tips:

- Skip "value-sized" or "super-sized" meals.
- Choose a grilled chicken sandwich or a plain, small burger.
- Use mustard instead of mayonnaise.
- Limit fried foods or remove breading from fried chicken, which can cut half the fat.
- Order garden or grilled chicken salads with light or reduced-calorie dressings.
- Choose water, fat-free, or low-fat milk instead of sweetened soda.

### **Rethink your drinks.**

Soda and other sugary drinks have replaced milk and water as the drinks of choice for teens and adults alike. Yet these drinks are actually more like desserts because they are high in added sugar and calories. In fact, soda and sugar-laden drinks may contribute to weight problems in kids and teens. Try sticking to water, low-fat milk, or fat-free milk.

### **Physical Activity**

Like eating well, physical activity may help you feel good. Being physically active may:

- Help you control your weight, build lean muscle, and reduce your body fat.
  - Strengthen your bones.
  - Increase flexibility and balance.
  - Reduce your risk for chronic diseases like type 2 diabetes, heart disease, and high blood pressure.
- Physical activity also has possible emotional and social benefits, including:
- Improving your self-esteem and mood.
  - Decreasing feelings of anxiety and depression.
  - Helping you do better in school.
  - Improving your teamwork skills through sports.

### **Be active every day.**

Physical activity should be part of your daily life, whether you play sports, take P.E. or other exercise classes, or even get from place to place by walking or bicycling. Teens should be physically active for 60 minutes or more on most, preferably all, days of the week.

**Websites of Interest:**

<http://www.mypyramid.gov> is your access point for the U.S. Department of Agriculture's (USDA) food guidance system. This website contains general guidance on food and healthy eating, with tips and suggestions for making smart dietary choices. The site also features interactive tools that can customize food and calorie recommendations according to your age, gender, and physical activity level.

<http://www.health.gov/PAGuidelines> is where you can learn about the benefits of physical activity. The *2008 Physical Activity Guidelines for Americans*, from the U.S. Department of Health and Human Services, provides general information on physical activity for teenagers, including how often you should be active and which activities are best for you.

<http://www.fitness.gov>, run by The President's Council on Physical Fitness and Sports, provides regular updates on the Council's activities as well as resources on how to get involved in its programs.

<http://www.fns.usda.gov/tn> is the USDA's Team Nutrition website, which focuses on the role nutritious school meals, nutrition education, and a health-promoting school environment play in helping students learn to enjoy healthy eating and physical activity.

<http://www.healthierus.gov/dietaryguidelines>: Dietary and serving size information based on the Dietary Guidelines for Americans 2005.

This article is courtesy of the National Institute of Health Organization. The link to this article is: [http://win.niddk.nih.gov/publications/take\\_charge.htm](http://win.niddk.nih.gov/publications/take_charge.htm).

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**Is your child up to date with their vaccinations?**

**It's important to make sure your youth is up to date on their vaccinations.**

To review the Immunizations Schedule for youth and teens go to the link:

<http://www.dhss.delaware.gov/dhss/dph/dpc/immunize.html> or  
<http://www.cdc.gov/vaccines/recs/schedules/default.htm>

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**Brandywine Counseling Presents PRIME FOR LIFE:**

**A Drug and Alcohol Training For Parents**

**PRIME For Life** is an alcohol and drug program for people of all ages. It is designed to gently but powerfully challenge common beliefs and attitudes that directly contribute to high-risk alcohol and drug use. The program goals are to reduce the risk for health problems and impairment problems by:

A primary goal of PRIME For Life is prevention of any type of alcohol or drug problem. This includes prevention of health problems such as alcoholism, or impairment problems such as car crashes or fights. Emphasis is on knowing and understanding risks one cannot change and reducing risks one can change. The program will give parents information on how Drugs and alcohol use may have affected the children in their home and how they can help the children in their care make low risk choices.

**Class Information: Please contact PCAD to register!**

County	Dates and Times	Locations
New Castle County	Saturday, May 5, 2012	Bear Library, Bear, DE in the Community Room
Kent County	Saturday, March 17, 2012	Dover Library (Room to Be Announced)
Sussex County	Saturday, February 25, 2012 10 am to 2pm	Lewes Library (Room to Be Announced)

## **Risky Business: Dealing with Your Teen's Behavior**

Adolescence can be a bewildering time—for both teens and their parents. Yet it can also be thrilling to watch kids grow and change. Learning about teenage development and behaviors can help parents nurture their children's strengths and shepherd them over the rough spots.

Why does adolescence feel so complicated and intense? It all begins with the brain. NIH-funded scientists have been using advanced imaging tools to take a good look at how the adolescent brain functions. They've found something they didn't expect. Although the 18th birthday means legal adulthood, important regions of the brain are still under construction until about age 25. These still-developing brain areas govern judgment, decision-making and impulse control.

The adolescent brain can be somewhat like a rider on a racehorse with no reins. "The problem is that the incentive/reward system matures earlier than the cognitive control system," explains Dr. Lisa Freund, a developmental psychologist and neuroscientist at NIH. In other words, the brain's "that's so cool, I want it now" part develops well before the "stop and think twice" part. That's why adolescents are especially susceptible to the immediate rewards of addiction, sexual experience, risky driving and more. They have trouble controlling impulses and considering the possible long-term consequences of their actions. What worries parents so much is that kids don't seem to realize how vulnerable they are to the risks they face. Take sex. Among U.S. high school students surveyed in 2009, almost half reported that they had engaged in sexual intercourse at least once, and over 400,000 15- to 19-year-old girls gave birth. Of the 19 million new sexually transmitted diseases (STDs) recorded each year, nearly half are among young people who are 15 to 24 years old. This age group is also the fastest-growing group of people living with HIV in the U.S. It's important for parents to take the lead in talking about sex. "Sex is a normal part of life," says Dr. Lynne Haverkos, an NIH pediatrician specializing in health risk behaviors, "but how do you prevent the STDs, pregnancy and negative emotional consequences that can happen in these relationships? Middle childhood is the time to start talking and listening...then, as they grow, adolescents can develop negotiation skills and learn how to recognize and handle risky situations involving sex. Start communicating early, keep going, don't ever give up."

"Communication is absolutely key," agrees Dr. Bill G. Kapogiannis, an NIH infectious disease expert and scientific director of the Adolescent Trials Network for HIV/AIDS Interventions. The network conducts research and provides information on community-based services for HIV-positive youth. "The earlier you initiate discussion—including risk behavior, sex, mood disorders, drugs and academic performance—the better."

Talking about sex may feel uncomfortable to some, but parents don't have to go it alone. You can find helpful resources online and in community and school programs (See our links online). The most effective programs for HIV/STD prevention are taught by trained instructors, are age-appropriate, focus on skill-building and involve parents and health organizations.

You also need to talk to your teen about other behaviors such as drinking alcohol. Alcohol depresses cognitive control and increases the risk for substance abuse and sexual activity. Alcohol and drug use might also lead to situations where teens can be sexually abused.

Teens may not want limits, but they still need them. Throughout late adolescence and early adulthood, they still need guidance. Setting limits is important because it takes years for kids to master the art of making decisions. Adolescents are similar to preschoolers in that activation in various parts of the brain isn't yet mature and interconnected. "This makes adolescents more emotionally reactive, especially around peers," Freund says. As the brain's complex architecture develops, teens do begin to learn from experience and adjust their behavior accordingly. They gain the ability to grasp the wider world in more complex and nuanced ways. This helps them develop their sense of right and wrong, as well as objectivity, empathy and judgment. They may become more motivated by self-esteem and personal achievement.

Parents can help by encouraging their teen's strengths. Talking, listening and channeling an adolescent's ongoing interests can have a powerful positive effect. When talking with adolescents, "the tone has to be nonjudgmental," says Kapogiannis. "Talk it through, and reassure them that whatever happens, you still love them. As long as you have communication, you're gonna get there."

Freund suggests that parents use technologies—such as texting or mobile phone calls—to stay in contact with their teens. Even if you can't be there physically, they should know that you're available and that you care about them. "You're not hovering, but they need to know you're around," Freund says. If you have concerns about your teen, and he or she seems unwilling to talk about it, consider making a call to your child's doctor—ideally, an adolescent medicine specialist. Make an appointment so your teen can talk privately with the care provider.

Adolescence is a stage that does have risks, and some kids may be more vulnerable than others. Yet there's a lot that parents can do to keep their kids safe, make them feel loved, and help them move through the changes. Adolescence is not a disease, but a journey towards independence. It's possible for both parents and their kids to enjoy this time—and even treasure it.

This article is courtesy of <http://newsinhealth.nih.gov/issue/Sep2011/Feature1>

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## **Foster Parents: Welcome to our Refuel and Re-Tool!!! Lunch Seminars!**

### **Refuel the Body and Re-Tool the Mind!**

The lunch seminars will be held from **11am to 1pm** on given dates. During this time, we ask that you bring your lunch and attend our trainings.

For the Spring session, the following trainings are available:

**Talking with Youth: From the Birds and the Bees to STDs**  
**April 25, 2011 at The Planned Parenthood of DE**  
**Newark Office**  
**140 E Delaware Ave, Newark, DE 19711**

**Taking Care of a Pregnant Teen**  
**May 9, 2011 at the University Plaza DFS Building in the**  
**Large Conference Room**  
**263 Chapman Road, Newark, DE 19702**

**My Child is Sick: Commons Illnesses, and**  
**When to Take Them to the Doctor**  
**May 23, 2012 at the University Plaza DFS Building in the**  
**Large conference room**  
**263 Chapman Road, Newark, DE 19702**



## Children's Health: 5 Serious Symptoms in Children to Never Ignore



Runny Noses. Stomachaches. An itchy rash. These are a few of the typical ailments that occasionally plague children everywhere. But what if something more serious develops, like an extremely high fever or a stiff neck? You may not know whether to rush to the emergency room, call the doctor, or simply wait it out at home. Here are common childhood symptoms that may warrant a visit to the doctor's office or emergency room. If you have a baby, check WebMD.com's article on when to take a baby to the doctor or ER, because the criteria are different for babies than for older kids. And with kids of any age, don't hesitate to ask a health care professional when you're in doubt.

### High Fever in a Child Older than 1

If your child is flushed and hot, your first instinct may be to see a doctor as quickly as possible, but this may not always be necessary. We constantly try to teach parents not to look at the thermometer, but what kids' symptoms are and what they look like." says Schmitt, who created the KIDSDOC app for smart phones from the American Academy of Pediatrics (AAP), a triage system that helps parents figure out how to treat kids' symptoms. A fever is part of the boy's way of defending itself against an infection. If a child has a fever, it means that his immune system is working. A fever, by definition is 100.4 degrees Fahrenheit, taken rectally. You may want to take a toddler's temperature under the arm but be sure to add one degree to it, to get a more accurate number. You can give your child medicine such as acetaminophen or ibuprofen (if the child is more than 6 months old) to reduce their fever. But be sure that's it's truly necessary, and keep close tabs on the dosage of this or any medication in children, whether it's from a prescription or not. Remember, fever reducers don't fight the infection that's causing the fever.

A recent study in the journal Pediatrics found that one in four parents give their children fever reducing medication when their temperature is less than 100 degrees Fahrenheit, but most pediatricians don't recommend treating a fever unless it's above 101 degrees Fahrenheit. And if your child looks well and is eating and drinking, skip the trip to the ER; a high fever by itself doesn't always need urgent care. Most fevers in a child are not medical emergencies and can wait until the office opens to see a doctor, says AAP spokeswoman Ari Brown, MD, a pediatrician based in Austin, Texas. She recommends that you bring your child age 2 or older to the doctor if he has a fever of 104 degrees or higher, if he looks unwell, or if he has a persistent fever for four or more days in a row. A child younger than 2 should be seen by a doctor within 48 hours of a fever.

### Bad Headache

How can you tell whether your child's headache is serious enough to warrant immediate medical attention, or if letting her skip school and sleep it off would help? Minor headaches go away with over the counter pain relievers or rest, Brown says, "Major headaches do not". If your child's headache endures for several hours – or if the pain is so intense that he/she can't eat, play or even enjoy her favorite TV show—call the pediatrician". If its severe enough to incapacitate the child, it needs to be evaluated now, " Schmitt says. "They cannot do any normal activities. All they can do is think about their pain." Headaches can be commonly caused by tight muscles in the scalp, rather than a problem related to the brain, but a headache with neurological symptoms (such as confusion, blurred vision and trouble walking) should be evaluated by an emergency room doctor. Headaches combined with fever, vomiting, confusion or stiff neck should also be evaluated quickly as the child could have a serious infection or illness, such as meningitis, which is a medical emergency. If a child gets headaches often, that needs to be evaluated. Children generally should not get headaches.

### Widespread Rash

Don't be too concerned about a rash on your child's arm or feet; they're generally harmless. If the rash covers the entire body, last for a few days or appears to worsen, though, examine it to see whether you should get medical attention.

“If you touch the red rash and it blanches or turns white, then you let go and it turns red again, you usually don’t have to worry about it.” Sacchetti says. “Most of the virus rashes and allergic reactions, including hives, will do that”. A non-blanching rash—small red or purple spots on the skin that don’t change color when you press on them—can indicate a medical emergency such as meningitis or sepsis, particularly when accompanied by a fever. This type of rash can also appear on the face after violent bouts of coughing or vomiting so it’s not always a sign of something serious.

To be safe, any time your child has small red or purple non-blanching dots appear on a widespread area, it’s best to seek emergency care at once, to rule out a more serious condition.

Another widespread rash which can be a medical emergency are hives, which appear with lip swelling. Hives should be immediately treated with diphenhydramine (Benadryl) unless otherwise directed. If there is lip or facial swelling, the child must see a doctor. If your child’s breathing is labored or your child complains about breathing, call 9-11—the symptoms suggest anaphylactic reaction, which is a serious, life-threatening allergic reaction.

### **Severe Stomach Bug**

When your child has food poisoning or gastroenteritis (the so-called “stomach flu, though it has nothing to do with influenza), monitor how often they’re throwing up or having diarrhea.

Vomiting and diarrhea can lead to dehydration. If it is mild dehydration, your doctor may recommend giving electrolyte solutions at home, though treatment depends in part on the child’s age. If your child seems to be getting worse (not voiding enough or acting sick), you should see your doctor.

Vomiting three times in an afternoon may not lead to dehydration, but eight bouts of diarrhea in eight hours probably will, as will a combination of vomiting and diarrhea. Dehydration needs to be closely monitored and sometimes needs emergency treatment.

“If they’re losing it below and not able to retain the ideal fluid from above, they may need some IV fluids or prescription medication to stop the vomiting,” Schmitt says. “The younger kids are at the greatest risk of dehydration.”

### **Stiff Neck**

A stiff neck can indicate meningitis, a true medical emergency, so parent may panic if they see their child standing rigidly, refusing to look left or right. But a stiff neck by itself is rarely anything more than sore muscles.

“Look at constellation of symptoms, not just one in isolation,” Brown says. “A stiff neck alone might mean you slept funny. Meningitis is a combination of fever with a stiff neck, light sensitivity and headache.”

A stiff neck with a fever might be tonsil inflammation, not meningitis; calling the pediatrician could ease your fears. Of course, if trauma cause a hurt neck, that’s a clear reason to head to the ER.

This article is courtesy of Webmd.com: <http://children.webmd.com/features/serious-symptoms-in-children>

## New Castle County Workshops Overview

Key: ♥ Child Care provided ☞ Meets GTF training requirement ☺ Refreshments provided

<p><b>Saturday, January 28, 2012</b> 9am to 12 noon</p> <p><b>Foster Parents: Hope for Improving the Negative Outcomes of Foster Care Youth</b> ☺ Neighborhood House (Progressive Life Center) 1218 B Street Wilmington, DE 19801 Room TBA</p>	<p><b>Saturday, February 11, 2012</b> 9am to 12pm</p> <p><b>Tips for Single Foster Parents</b> ☺  Neighborhood House (Progressive Life Center) 1218 B Street Wilmington DE 19801</p>	<p><b>Thursday, February 23, 2012</b> 6:30pm to 8:30pm</p> <p><b>Inappropriate Sexual Behavior (ISB)</b> ☺  56 West Main St., Suite 203 Newark, DE 19702</p>	<p><b>Wednesday, March 14, 2011</b> 6:30pm to 8:30pm</p> <p><b>Understanding Children with Sexually Inappropriate Behavior</b>  NET offices 287 Christiana Rd. Suite 7 New Castle, DE 19720</p>	<p><b>Wednesday, March 9, 2012</b> 6pm to 8pm</p> <p><b>"Here's to Your Health" - How to Live Longer and Healthier</b>  Children and Families First 809 N. Washington St Wilmington, DE 19801</p>
<p><b>Thursdays, March 15 &amp; 22, 2012</b> 6pm to 9pm</p> <p><b>CARE Trainings</b>  Community Services Bldg. 100 West 10th Street Wilmington, DE Room TBA</p>	<p><b>Saturdays, March 17 (Part 1 and March 24, 2012 (Part 2))</b> 9:00am to 3:30pm</p> <p><b>Becoming a Love and Logic Parent</b> ☺☺♥  Aldersgate Church Rt 202 Wilmington, DE</p>	<p><b>Saturdays, March 17 (Part 1) and March 24, 2012 (Part 2)</b> 9:00am to 3:30pm</p> <p><b>Foster Parent Module 1: The Foundation for Meeting the Developmental Needs of Children At Risk</b> ☺☺♥  Aldersgate Church Rt. 202 Wilmington, DE</p>	<p><b>Saturdays, March 24, 2011</b> 9:00am to 3:30pm</p> <p><b>Crisis Intervention</b> ☺☺♥  Aldersgate Church Rt. 202 Wilmington, DE</p>	<p><b>Saturday, March 17, 2012</b> 9:00am to 3:30pm</p> <p><b>First Aid and CPR</b> ☺☺♥  Community Services Bldg 100 West 10th Street Wilmington, DE Room TBA</p>
<p><b>Thursday, March 29, 2012</b> 6:30pm to 8:30pm</p> <p><b>Crisis Management</b> ☺  <b>Not a GTF Level Course</b>  World Alive Worship Center 707 Pulaski Hwy, Suite 207 Bear, DE 19701</p>	<p><b>Tuesday, May 22, 2012</b> 6pm to 9pm</p> <p><b>What Foster Parents Need to Know About Psychotropic Medications</b> ☺  Community Services Bldg. 100 West 10th Street Wilmington, DE Room TBA</p>	<p><b>Wednesdays, May 23 &amp; May 30, 2012</b> 6:00pm to 8:30pm</p> <p><b>Young Children's Challenging Behaviors</b>  Del Tech Terry Campus Dover, DE Room TBA</p>	<p><b>Thursday, May 24, 2012</b> 6:30pm to 8:30 pm</p> <p><b>Psychiatric Diagnosis &amp; Psychotropic Medication</b>  56 West Main St. Suite 203 Newark, DE 19702</p>	<p><b>Tuesday, June 5, 2012</b> 6pm to 9pm</p> <p><b>Stewards of Children: A Child Sexual Abuse Prevention Program</b>  Community Services Building 100 West 10th Street Wilmington, DE Room TBA</p>

## Sussex County Workshops

Key: ♥ Child Care provided 🇺🇸 Meets GTF training requirement 🍷 Refreshments

<p><b>Saturday, March 3, 2012</b> 9am to 3:30pm</p> <p><b>Working with Birth Families</b> ♥ 🇺🇸</p> <p>Eagles Nest Church Milton, DE</p>	<p><b>Saturday, March 3, 2012</b> 9am to 3:30pm</p> <p><b>First Aid and CPR</b> ♥ 🇺🇸</p> <p>Eagles Nest Church Milton, DE</p>	<p><b>Saturday, March 3, 2012</b> 9am to 3:30pm</p> <p><b>Crisis Intervention</b> ♥ 🇺🇸</p> <p>Eagles Nest Church Milton, DE</p>	<p><b>Saturday, March 3, 2012</b> 9am to 3:30pm</p> <p><b>Young Children's Challenging Behaviors</b> ♥ 🍷</p> <p>Eagles Nest Church Milton, DE</p>
<p><b>Tuesdays, March 20 &amp; 27, 2012</b> 9:00am to 3:30pm</p> <p><b>Sexual Abuse: How We Can Help</b></p> <p>Del Tech Owens Campus Georgetown, DE</p>	<p><b>Monday, March 26, 2012</b> 6pm to 8pm</p> <p><b>Problem Solving with Adolescents</b></p> <p>Del Tech Owens Campus Room TBA</p>	<p><b>Tuesday, April 4, 2012</b> 6pm to 9pm</p> <p><b>Stewards of Children: A Child Sexual Abuse Prevention Program</b></p> <p>Del Tech Owens Campus Georgetown, DE Room TBA</p>	<p><b>Tuesdays, April 10 &amp; 17, 2012</b> 6pm to 9pm</p> <p><b>CARE Training</b></p> <p>Del Tech Owens Campus Georgetown, DE Room TBA</p>
<p><b>Wednesday, April 25, 2012</b> 6pm to 8pm</p> <p><b>Bullying—What to DO?!</b></p> <p>Del Tech Owens Campus Georgetown, DE Room TBA</p>	<p><b>Wednesday, May 8 &amp; 15, 2012</b> 6pm to 9pm</p> <p><b>Brain and Trauma</b></p> <p>Del Tech Owens Campus Georgetown, DE Room TBA</p>		

## Kent County Workshops

Key: ♥ Child Care provided 👉 Meets GTF training requirement 🍷 Refreshments

<p><b>Thursday, February 16, 2012</b> 6:30 pm to 8:30pm</p> <p><b>Inappropriate Sexual Behavior (ISB) 🍷</b></p> <p>Pressley Ridge Office 846 Walker Road Unit # 32-1 Dover, DE 19904</p>	<p><b>Tuesdays, February 28 &amp; March 6, 2012</b> 6pm to 9pm</p> <p><b>CARE Trainings</b></p> <p>Del Tech Terry Campus Dover, DE Room TBA</p>	<p><b>Tuesdays, March 13 &amp; 20, 2012</b> 6pm to 9pm</p> <p><b>Working with Birth Families 👉</b></p> <p>Del Tech Terry Campus Dover, DE Room TBA</p>	<p><b>Thursdays, April 5 &amp; April 19, 2012</b> 6pm to 9pm</p> <p><b>First Aid and CPR 👉</b></p> <p>Del Tech Campus Dover, DE Room TBA</p>
<p><b>Wednesday, April 11, 2012</b> 6pm to 8pm</p> <p><b>Bullying— What to DO?!</b></p> <p>Del Tech Terry Campus Dover, DE Room TBA</p>	<p><b>Monday, April 30, 2012</b> 6pm to 9pm</p> <p><b>Depression and Suicide in Children and Youth 👉</b></p> <p>Del Tech Terry Campus Dover, DE Room TBA</p>	<p><b>Tuesdays, April 24 &amp; May 1, 2012</b> 6pm to 9pm</p> <p><b>Brain and Trauma</b></p> <p>Del Tech Terry Campus Dover, DE Room TBA</p>	<p><b>Thursday, April 26, 2012</b> 6pm to 8pm</p> <p><b>Problem Solving with Adolescents</b></p> <p>Del Tech Terry Campus Dover, DE Room TBA</p>
<p><b>Tuesdays , June 12 &amp; 19, 2012</b> 6:00 p.m. - 8:30 p.m.</p> <p><b>Young Children’s Challenging Behaviors</b></p> <p>Del Tech, Terry Campus, Room TBA</p>	<p><b>Thursday, May 17, 2012</b> 6:30pm to 8:30 pm</p> <p><b>Psychiatric Diagnosis and Psychotropic Medication 🍷</b></p> <p>Pressley Ridge Office 846 Walker Road Dover, DE 19904</p>		

# PCAD Training Descriptions Listed Alphabetically

Key: 👍 Meets GTF training requirement    🎧 Refreshments provided    ❤️ Childcare provided

## **Becoming a Love and Logic Parent (12 Hours) - Level 2** 👍🎧❤️

Would you like to have more fun parenting? Would you like to have fewer power struggles with your children? Learn the Love and Logic way to parent. This program was developed by Foster Cline M.D. an internationally renowned child psychiatrist and the father of birth children, an adopted child and several foster children. The principles you will learn in this class will help you raise foster children who are self-confident, motivated and ready for the real world. Your foster children will win because they'll learn to solve their own problems while gaining the confidence they need to meet life's challenges. And you'll win because you'll establish healthy control-without anger, threats, nagging or exhausting power struggles. *Facilitator: Kellie Turner, Prevent Child Abuse Delaware*

## **Brain and Trauma (6 Hours) - Supplemental Training**

Brain development researchers have made leaps and bounds during the past ten years in helping us understand how the brain develops and the impact that childhood experiences have on development. This workshop will give participants a basic understanding of brain development and how adults can help a child's brain develop in a way that allows that child to reach his or her full potential. Additionally, foster parents will learn about the devastating impact severe or chronic trauma has on the brain. *Facilitator: Kellie Turner, Prevent Child Abuse Delaware*

## **Bullying—What To Do?!- Supplemental Training**

Unfortunately, bullying is a problem that many children face every day. Come learn some basic facts about bullying as well as ways to help your children deal with this issue. *Facilitator: Niagia Williams, MSW, Prevent Child Abuse Delaware.*

## **CARE Training—6 hours) - Supplemental Training**

Child-Adult Relationship Enhancement or **CARE** training provides individuals who work with young children (up to age 7) general behavior management skills designed to build positive relationships so children feel more connected to the adults who care for them and, as a result, are more likely to demonstrate positive behaviors. The basics of the CARE skills are taught a group setting and the majority of the time is spent coaching and providing feedback to trainees as they actively practice the skills. CARE training does not cover extreme disruptive behavior or aggression. *Facilitator: Mindy Webb, LCSW, Clinical Lead, Delaware's BEST for Young Children and Their Families, DPBHS and Niagia Williams, MSW, Prevent Child Abuse Delaware*

## **Crisis Intervention (6 hours) - Level 5** 👍🎧❤️

Foster parents working with children, youth and families must understand the importance of being safe while ensuring the safety of others. Many harmful incidents can be avoided if individuals recognize and respond appropriately to potentially volatile situations. Through participation in this workshop, foster parents will understand the inter-relationships between themselves and others and learn strategies to de-escalate crisis situations. *Facilitator: Nicole Cunningham, Division of Family Services*

## **Crisis Management (2 hours) - Supplemental Training** 🎧

This training goes into details about what to do in crisis situations in relation to foster children. It addresses the best methods which can be utilized in most emergency situations. This training will also identify resources, strategies, and techniques when one is in a crisis situation. This training does not meet the GTF Level requirements for the State of Delaware. This training is supplemental only. *Facilitator: Jenelle Birthwright, MSW*

## **Depression and Suicide in Children and Youth— Level 4** 👍

This presentation will address symptoms of Depression, warning signs for increased risk of suicide, and ways foster parents can help ensure treatment for children. Format will include lecture and group discussion. *Facilitator: Vince Giampeitro, Children and Families First*

# PCAD Training Descriptions Listed Alphabetically

Key: 👍 Meets GTF training requirement 🔄 Refreshments provided ❤️ Childcare provided

**First Aid and CPR (6 hours) - Level 1** 👍🔄❤️ - *Lunch and Childcare provided on April 16th only*  
 Participants will learn how to manage illness and injuries of adults and children in the first few minutes until professional help arrives. Topics include: First Aid Basics, Medical Emergencies, and Injury Emergencies. If a cardiac arrest happened in your home, would you know how to perform life-saving CPR? Surprisingly, the vast majority of Americans do not know how to do CPR, which can double a victim's chance of survival? Foster parents will learn how to perform this important lifesaving technique. *Facilitator: Your Training Solution*

**Foster Parents: Hope for Improving the Negative Outcomes of Foster Care Youth—Supplemental Training** 🔄

The adverse statistics for children who grow up in, or age out of, our American foster care system are astounding and discouraging. Nationally, disproportionate numbers of foster care youth continue to experience higher rates of physical illness, mental health issues, poverty, homelessness, incarceration, suicide, teen pregnancy, substance abuse, high school drop out, shorter life, and other less positive quality of life indicators. Several major and collective changes are required to bring about all the needed fixes and improvements for our American foster care system. However, individual foster parents are one of the best “instruments” in our national “tool box” for “repairing” the “broken” lives of some of our most vulnerable youth. This training will offer suggestions and discussions on possible ways to improve the quality of life and outcomes for youth placed in your care.  
*Facilitator: Carolyn Morgan, LCSW*

**Foster Pride Module 1: The Foundation for Meeting the Developmental Needs of Children at Risk (12 hours) Level 1 - All foster parents are required to complete this module.** 👍🔄❤️

One of the biggest challenges foster parents face is learning how to help badly abused and neglected children build their shattered self-esteem. Foster parents will learn to assess the self-concept of children who have been abused, neglected and separated from their families. Participants will become aware of the connection between self-esteem and behavior and will practice communication skills that nurture children and promote healing and growth.  
*Facilitator: Karen DeRasmo, Prevent Child Abuse Delaware*

**Here's to your health: How to Live Longer and Healthier (2 hours) - Supplemental Training**

In this training you will learn what tests to have done at the appropriate time of your life; and what the tests mean.  
*Facilitator: AnnaMarie Breeden, RN*

**Inappropriate Sexual Behavior (3 hours)—Supplemental Training** 🔄

Working with children who have been identified as having inappropriate sexual behaviors within the foster care home. *Facilitator: Georgia Pollard, MA, Therapist & Daniel Moore, BA*

**Childhood Illnesses & When To Take Your Child To the Doctor—(2 hours) - Supplemental Training**

In this class, the discussion will be based on common childhood illnesses and what signs indicate that the child should be seen by a doctor. *Facilitator: Dr, Amy Renwick, MD, Nemours Hospital for Children.*

**Problem Solving with Adolescents (2 hours) - Supplemental Training**

Working with teens can be challenging! This workshop will focus on how and why children don't know how to solve problem. Participants will learn a compact kid friendly system they can use with and teach kids to use to solve problems. *Facilitator: Vincent Giampeitro, Children & Families First*

**Psychiatric Diagnosis & Psychotropic Medication—(2 hours) - Supplemental Training**

Assisting foster parents with understanding children's psychiatric diagnosis, and the prescribed psychotropic medication used for treatment. This class does not fulfill the GTF level requirements for Moderate Level 2 Foster Parenting. *Facilitators: Georgia Pollard, Therapist & Daniel Moore, BA*

**Sexual Abuse of Children: How We Can Help (6 hours) - Level 3** 👍

There are 60 million people in this country who have been victims of sexual abuse. This means it is very likely that a foster parent will provide care to a child who has been a victim of sexual abuse. This interactive workshop will focus on ways to care for a child who has been sexually abused. This workshop will allow foster parents to practice techniques and discuss any current concerns they have about a child in their care or behaviors they are facing.

## PCAD Training Descriptions (continued)

Key: 🍷 Meets GTF training requirement 🍷 Refreshments provided ❤️ Childcare provided

### **Stewards of Children – A Child Sexual Abuse Prevention Program (3 Hours) - Supplemental Training**

Stewards of Children is a revolutionary interactive prevention program developed by Darkness to Light, a national child sexual abuse prevention organization. The program educates adults to prevent, recognize and react responsibly to child sexual abuse and to take proactive steps to protect children. Participants will hear stories from survivors, learn the “7 Steps to Protecting Children”, receive a workbook detailing simple principles to child protection and be challenged to take responsibility for the safety of children. *Facilitator: Kellie Turner, M.Ed, NCC, Prevent Child Abuse Delaware*

### **Taking Care of Your Pregnant Teen (2 hours) - Supplemental Training**

This is part of the “Refuel and Re-tool” lunch seminar trainings from 11am to 1pm on specific dates. Please see page 7 of the newsletter for more information. Please bring your lunch as it is not provided. Christiana Care will be sponsoring the training. *Facilitator: Deanna Benner, OB/GYN Nurse Practitioner, Christiana Care*

### **Talking with Youth: From the Birds and the Bees to STDs (2 hours)—Supplemental Training**

This is part of the “Refuel and Re-tool” lunch seminar trainings from 11am to 1pm on specific dates. Please see page 7 of the newsletter for more information. Please bring your lunch as it is not provided. This interactive parent workshop will include a comprehensive overview of sexually transmitted diseases (STDs), effective parent-child communication strategies, tips on how to answer sex questions, and facts and stats about Delaware teen sexual health today. Facilitators: Rebecca Roberts, Education & Training Manager, Kate Randall, Educator/Trainer and Bryce Komaroff, Education & Training Assistant.

### **Tips for Single Foster Parents—Supplemental Training 🍷**

Single parenting poses unique circumstances, and single foster parenting can add additional challenges. This training offers effecting coping and functioning suggestions for single foster parents balancing various individual and child-rearing roles. We will take a look at the “different hats” single foster parents wear, and learn how to “adjust the fit” for the “best styles” of the non-traditional American family. *Facilitator: Clytia Charles, YWCA Home Life Management Program*

### **Understanding Children with Sexually Inappropriate Behavior (2 hours) - Supplemental Training 🍷**

Common myths and facts associated with children who exhibit inappropriate sexual behavior will be reviewed. Attendees will learn about the various types and causes of sexual misbehavior exhibited by children and adolescents while also identifying methods for intervention. Topics, such as the deviant cycle, cognitive distortions, and relapse prevention planning will also be discussed. Emphasis will be placed on the development of family safety planning and implications for foster parents. *Facilitator: Michael Lavetsky, MA, LPC*

### **What Foster Parents Need to Know About Psychotropic Medications (3 hours) - Level 2 🍷**

Many children in foster care take medications to moderate their behavior or their mood so they can function in a family or school setting. During this training, foster parents will have an opportunity to find answers to frequently asked questions including: When should a child be evaluated for medications? What information do foster parents need to help the physician evaluating a child for medications? What medications are prescribed for children and what do these medications do? What are the benefits and risks? What are the side effects? What observations and information from the foster parent helps a physician monitor a child on medications? *Facilitator: Craig Strickland, PH.D, Program Director at the Behavioral Health Training & Education Network*

### **Working with Birth Families (6 hours) - Level 2 🍷🍷❤️**

It is not easy for foster parents to work with birth parents who have abused and neglected their children or who continue to disappoint their children. But a child’s bond with his/her parent is powerful and, no matter what happened, the child often still wants to be connected in some way with his/her biological family. Who are these birth parents anyway? Come learn how foster parents can share the parenting role with birth parents in a way that holds the best promise for a child today and tomorrow. *Facilitator: Joyce Webb, Prevent Child Abuse Delaware*

## PCAD Training Descriptions (continued)

Key: 👍 Meets GTF training requirement 🍷 Refreshments provided ❤️ Childcare provided

### Young Children's Challenging Behaviors (6 hours)—Supplemental Training

All behavior has meaning and purpose. Come learn how to prevent and address young children's challenging behaviors. This workshop will address behaviors of children 2- 8. Facilitator: Kellie Turner, M.Ed, NCC, Prevent Child Abuse Delaware

## Registration Information for PCAD Trainings

- ◆ **REGISTRATION IS REQUIRED FOR ALL CLASSES.** Please call Prevent Child Abuse Delaware, our foster parent training contractor, at **425-7490** (New Castle), **1-866-925-7223** (Kent & Sussex) to register. The phones in the Kent and Sussex offices will often have a recording on which you may leave your registration information.
- ◆
- ◆ You will receive a postcard confirming your registration.
- ◆ Childcare and lunch are offered at Saturday trainings. **Please pre-register the children you will be bringing because space is limited to the first 50 children registered.**
- ◆ **Please do not bring children to a class when childcare is not offered.** The content of the classes is not for children and children cannot be left unsupervised in another room.
- ◆ Central office will issue monthly reports to coordinators alerting them to foster parents who were no-shows for the previous month. A no-show is defined as someone who is registered for training, but did not attend, and did not alert PCAD to this fact ahead of time.

## Look What's Happening at Delaware Technical and Community College!

Here are just a few classes being offered by Delaware Technical and Community College

### Understanding Adolescents \$85

Instructor: Sonya Jodoin

**Session Start Dates:** Jan 18 | Feb 15 | Mar 21 | Apr 18 | May 16 | Jun 20 |

### Guiding Kids on the Internet \$85

Instructors: Christine Gee and Katherine Emmons.

**Session Start Dates:** Jan 18 | Feb 15 | Mar 21 | Apr 18 | May 16 | Jun 20 |

### SAT/ACT Preparations Part 1 \$85

Instructor: Scott Hatch and Lisa Zimmer-Hatch

**Session Start Dates:** Jan 18 | Feb 15 | Mar 21 | Apr 18 | May 16 | Jun 20 |

### SAT/ACT Preparations Part 2 \$85

Instructor: Scott Hatch and Lisa Zimmer-Hatch

**Session Start Dates:** Jan 18 | Feb 15 | Mar 21 | Apr 18 | May 16 | Jun 20 |

Delaware Technical and Community College has over 50 online classes that you can take while in your home!  
You can explore their catalog at <http://www.ed2go.com/dtccwilm/>.

### Training Requirements of Delaware Foster Care Model

The Delaware Foster Care Model was developed by the Foster Care Task Force appointed by Governor Minner in January 2001. One of the major recommendations of the Task Force was that foster care board payments be linked to the skills, training and services provided by a foster parent rather than paying according to the level of care of the child. The hope is that the child can be matched with the foster parent with the skills, training and ability to provide the child with services the child needs. The Division has been transitioning to the Model since its inception.

The Delaware Foster Care Model sets out training requirements (at the present time for DFS foster parents only) for each level of the model:

**Basic Level 1:**

Foster PRIDE pre-service training	27 hours
Module 1: Meeting the Developmental needs of Children at Risk	12 hours
First Aid & CPR Certifications	
* Supplemental training per year	5 hours

**Moderate Level 2:** All Requirements for Level 1 plus

Parenting With Love and Logic	12 hours
Working with Birth Parents	6 hours
Educational Surrogate Parent Training	2 hours
What Foster Parents Need to Know about Psychotropic Medication	3 hours
Specialized Training as Needed	
* Supplemental training per year	12 hours

**Intensive Level 3:** All Requirements for Level 1 and 2 plus

Sexual Abuse: How it Affects Our Children and How We Can Help	6 hours
Specialized Training as Needed	
* Supplemental training per year	15 hours

**Intensive Level 4:** All Requirements for Level 1, 2 and 3 plus

Depression in Children and Adolescents: From Sadness to Suicide Warnings	6 hours
(or)	
Mental Health in Children -Part 2	6 hours
Specialized Training as Needed	
* Supplemental training per year	20 hours

**Intensive Level 5:** All Requirements for Level 1, 2, 3 and 4 plus

Crisis Intervention	6 hours
Specialized Training as Needed	
* Supplemental training per year	20 hours

If you have questions about your current GTF (Governor’s Task Force) level or how the GTF leveling system works, please contact your coordinator.

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Foster Care Program Manager

John Bates

Vivian Rapposelli, Secretary  
Department of Services for Children  
Youth and Their Families

Spring 2012

NETWORK NEWS

FOSTER FAMILY

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## The Department of Services for Children, Youth and Their Families

*Division of Family Services  
Delaware Youth and Family Center  
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Wilmington, DE 19805  
370630*

*"Official Business, Penalty for Private Use \$300"*

Our Children. Our Future. Our Responsibility.