

Adoptive & Foster Family Therapy Certificate Program

A series of advanced, evidence-based courses on specialized theories and practices for treating adopted and foster children and their families. Relevant for those working with children and families impacted by adoption, foster care, and relative care, and by child abuse, trauma, and neglect.

Program highlights:

- 70 CEU hours - 6 courses (8 training days) with a 3 hour pre-assignment for each course
- Flexible format - Classroom or Live Video Streaming
- NO COST - Through generous support from Oregon DHS, courses are free of charge for qualifying participants
- Offered twice per year, with cohorts beginning in August and February
- Applications and registration accepted throughout the year

Priority Registration

This program is primarily intended for Oregon mental health professionals who are licensed, in supervision for licensure, or non-licensed therapists who are practitioners in agencies licensed to provide mental health services. Those who provide treatment to the targeted audience and accept Oregon Health Plan (OHP) will have priority seating. The program is available statewide and priority seating is available for those in Eastern, Southern, Coastal, and Central Oregon.

Nationally Recognized Adoption Education



For more program information, visit our website:
cwpsalem.pdx.edu/adoption

Mental Health Professionals

The series provides mental health professionals with the therapeutic skills necessary to:

- Identify & enhance adoptive & foster care families' strengths and resiliencies to support their children
- Treat the mental health issues of children with histories of child abuse, trauma, and neglect
- Guide adoptive and foster families in developing alternate approaches, expectations, and interactive strategies for helping their children thrive
- Provide accessible mental health services to adoptive and foster families

Mental health therapists will receive a Certificate of Completion in Adoptive & Foster Family Therapy upon successful program completion.

cwpsalem.pdx.edu/adoption/mental-health-professionals.html

Directory of Therapists

Mental health professionals who earn the Certificate of Completion are part of a core group of clinicians available to serve adoptive and foster families throughout Oregon. The Directory is available on the program website:

sites.google.com/pdx.edu/therapistdirectory/home

Oregon DHS Child Welfare Professionals

The significant role of the child welfare professional in supporting the success of the child and the family is well recognized. This training series provides child welfare professionals with the advanced training necessary to:

- Recognize and encourage adoptive and foster care families' strengths and resiliencies to support their children
- Recognize the emotional, behavioral, and mental health issues of children with histories of abuse, trauma and neglect
- Support adoptive and foster families in developing alternate approaches, realistic expectations, and strategies for helping their children thrive

Child welfare professionals receive a Professional Certificate upon successful completion of all courses. DHS workers are limited to one course per series.

Registration information is available on our website:

cwpsalem.pdx.edu/adoption/ordhs.html

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SCHOOL OF SOCIAL WORK
CHILD WELFARE PARTNERSHIP
cwpsalem.pdx.edu/adoption

Courses

Building Resiliency and Stability for Adoptive, Foster and Kinship Families

Gary Mallon, DSW. Silberman School of Social Work at Hunter College, New York

Adopted and foster children enter the family with a unique history. This class explores the core clinical issues and examines effective responses to families in crisis, including de-escalating child behavior problems. Learn about the common dynamics in troubled placements, including the stages of disruption, and how to intervene on multiple levels to assist children in developing an integrated, positive sense of self. Learn about the factors that are most likely to cause challenges for children and their families and interventions that promote family functioning and enhancing attachments in adoptive and foster families.

Fetal Alcohol Spectrum Disorder (FASD) and Other Drug Effects: Understanding & Application of a Brain-Based Approach

Eileen Devine, LCSW. FASD Northwest, Portland OR

Professionals and parents must first understand the link between brain development and behavior before they can develop skills to support children who have neurological challenges. Fetal Alcohol Spectrum Disorders and other alcohol-and-drug-related neurological disorders can shape a child's behavior and relationships. This class identifies the common phenomenon of children accumulating numerous DSM diagnoses, which suggests the greater likelihood of underlying brain involvement. Explore the importance of identifying FASD to assist families in reframing behaviors and understanding primary and secondary behavioral symptoms. Learn skills for coaching families to develop accommodations for their neurologically impaired child.

For program information,
or to apply/register visit us online:
cwpsalem.pdx.edu/adoption

Child Welfare Partnership
626 High St. NE. STE 400
Salem, Oregon 97301

Thank you to our partners!



Impact of Complex Trauma on Neurological and Physiological Systems: Family-Based Therapeutic Strategies to Support Healing [2-days]

Kelly Pratt, LICSW. The Trauma Center at JRI, Brookline MA

Often adopted and foster children exhibit behavioral challenges, learning challenges, and other special needs that defy traditional parenting techniques, tax educational and social services, and exact a toll on the child and family. This session provides a detailed framework for understanding the neurological and physiological impact of complex trauma, drawing on current research findings and integrating current literature. A neurobiological framework for understanding trauma will be used offer participants a framework for understanding clinical behavioral challenges and selecting preferred methods of intervention. Emphasis will be placed on practical ways for mental health providers to consult with adoptive and foster parents on dealing with classic problems such as food issues, eating disorders, lying, stealing, sexually reactive behaviors, bedwetting, encopresis, sleep problems, anger outbursts, fire setting, and parentified behavior. Sessions will focus on understanding behavior problems in the context of the child's history of past exposure to maltreatment, integrating current literature on the impact of complex trauma on the body, and attention is paid to supporting healing in dysfunctional family roles. Numerous case examples illustrate practical interventions to use with a range of clinical presentations.

Treating the Continuum of Attachment Difficulties for Adoptive and Foster Families [2 days]

Robyn Gobbel, LCSW. Grand Rapids MI

Attachment disruptions are inherent for children with a history of attachment trauma, chronic neglect, and early trauma. This course will help clinicians working with children and families translate attachment theory into clinical practice. Participants will review attachment theory as a foundation for understanding attachment theory as a regulation theory. Attachment through the lens of neurobiology and regulation will be explored through didactic teacher, videos, and case discussion. This class will examine how common issues in foster care and adoption, including grief, transracial adoption, and sensory integration, intersect with attachment theory and the development of attachment in foster/adoptive families. Class participants will gain an introductory understanding of the importance of the therapist's self when engaging in attachment-oriented treatment. A parenting-paradigm will be introduced to help clinicians support parents in understanding their child's behaviors as well as practical behavior interventions.

Essential Clinical Interventions for Adoptive and Foster Families

Amy Stoeber, PhD. Clackamas OR

Learn clinical interventions for working with families raising children with complicated histories. Specific focus on engaging families, applying family of origin and cultural background into treatment plans supporting kin, guardianship and adoptive parents, and therapeutic protocols for trauma, loss, and attachment. Learn approaches for family-centered therapy. Apply concepts of stress regulation, connection and systemic support, attachment, and behavioral support into treatment plans. Learn necessary accommodation for children with in-utero exposure to substances, processing/sensory difficulties or learning issues common after severe neglect. Incorporate ethnic identity and cultural identity issues into the understanding of best treatment. Review evidence-based projects that work with Attachment, Trauma and Loss. Learn to re-frame behavior in a trauma-informed way and better address behavioral challenges to help families maintain sensitivity with structure. Apply information on trauma, loss, attachment, and identity through classic cases.

Therapeutic Life Story Work: A Model for Recovery for Youth

Richard Rose, AAP, MBA, BPhil, PGSW, PQCCA, CQSW.
Director of Child Trauma Intervention Services Ltd. London
England

Therapeutic Life Story Work enables children and young people who have experienced the trauma of child abuse and neglect and who are struggling with the pain of their past to reflect, develop compassion for themselves and move on. It is a defined approach, designed to introduce the past as markers for the present. Once these are understood, the child is supported in considering how to move on and make significant changes, as a result of a far deeper understanding and awareness of how their history has been negatively impacting their present. In essence, Therapeutic Life Story Work is not just about the who, what, where, when, and why, but how a painful past, if not reflected on and worked through, can go on to blight the present and future. Instead, if we can help children to think about their history of trauma and loss, to understand its origins and effects, we can identify and understand the 'ghosts of the past' so children are no longer haunted by them.