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Mission...

At the Attachment & Trauma Network, it is our Mission to Promote Healing of Traumatized Children and their Families through Support, Education and Advocacy.
From the director...

Phew – 2016 has been quite a year!
You may be thinking about the events since November, but I can attest that for the Attachment & Trauma Network, our 22nd year in existence has been the wildest ride yet. So many important things have happened, but here are two very important programs that moved forward significantly in 2016.

In June we launched ATN’s Trauma-Sensitive Schools Initiative. Prior to that we had our Think Tank on Facebook (which now has over 300 members) and had produced a very successful Trauma Sensitive Schools Summit (captured as 22 audio recordings). And we’ve written and spoken extensively on the importance of trauma-informed schools. But in June we started direct Professional Development Training of educators and so in the last six months have trained nearly 200 educators in three states. We have several more districts scheduled for 2017. Our TSS Initiative, directed by Melissa Sadin, with Jen Alexander and other ATN members who are both experienced education professionals and in many cases experienced therapeutic parents, is making a REAL DIFFERENCE in schools around the country. To find out more about this movement, visit www.creatingtraumasensitiveschools.org or email melissa@attachtrauma.org

In October we launched Refresh-Renew-Reframe with Chaddock. This education/support-focused retreat is and will become an important offering of our Trauma-Informed Parenting Initiative. ATN has been training Therapeutic Parents for years through our Learning Center, webinars, workshops at conferences, online support groups, crisis call line – and of course, this incredible Journal! The Triple R Retreat is a powerful component of educating and supporting parents as they become more therapeutic and trauma-informed – and continue the crucial work of being the healing agents for their children and their families. Those who attended the retreat highly endorsed it and those who collaborated in its creation are excited about moving forward with this program in 2017.

Riding August’s Roller Coaster
Many therapeutic parents talk about the roller coaster of our children’s emotions and/or behaviors and how to “stay off” the roller coaster when things are bad (but still rejoice at the positive.) Well, in August – right after the publication of our last issue of the Therapeutic Parenting Journal, ATN went on a roller coaster ride:

• We received official announcement that the Attachment & Trauma Network was to receive a 2016 Angel in Adoption Award through the Congressional Coalition on Adoption.
• Days later, we received word that long-time ATN Board member and highly-regarded at attachment & trauma therapist, Lawrence B. (Larry) Smith, LCSW-C had passed away.

Accepting the Angels in Adoption award for ATN was an amazing honor. Doing it without Larry Smith by our sides (especially given he was based in Silver Spring, so would have been at the ceremonies with us) was bittersweet for sure.

So, this issue of the Journal has many of the usual columns, but also reflects this roller coaster ride – with information about our Angel Award trip and an article taken from Larry Smith’s incredible knowledge bank - what he called “Attachment Disorder Parenting” If you’ve not read Larry Smith’s work, it is still available at www.attachmentdisordermaryland.com. His “Oil and Water: the Attachment Disordered Child in School” is a great insight into attachment disorder's impact on a child’s academic life. Larry’s 30+ year practice primarily focused on children impacted by trauma, attachment disorder and FASD. He was an active supporter and advisor of ATN, especially in our efforts to support and education parents.

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Pearls of Wisdom
Therapeutic Parenting Insights from Lawrence B. Smith

By Lawrence B. Smith, LCSW-C, edited by Julie Beem

Editor's Note: Those of us within ATN have known and loved Larry Smith for years, as a constant and consistent voice of wit and wisdom. You may have discovered his writings on the website he maintained, Attachment Disorder Maryland (www.attachmentdisordermaryland). Since his death in August, we have missed him a great deal on our Board of Directors and have heard from several colleagues and former clients who feel the same loss. I was so fortunate to have traveled with him and several board members last June, as we launched our Trauma-Sensitive Schools professional development trainings. It was there, when another professional praised his collection of wisdom about parenting, teaching and treating children with attachment disorders, developmental trauma and FASD, that I was reminded of the treasure trove he had placed on his website. This article is a “compilation of excerpts” from his webpage called “AD Parenting”. We could think of no better way to pay tribute to Larry than to reprint his wisdom here for you. The entire content is much too long to print in entirety, so I pulled the pearls of wisdom that I thought would be the most globally valuable and invite you to visit the Attachment Disorder Maryland website for more. If you'd like to view our memorial page and/or leave a tribute or donation in his memory the link is http://www.attachmenttraumanetwork.org/passing-lawrence-b-smith/ The donations received through the Lawrence B. Smith Therapeutic Parenting Fund will be used specifically for parent training in 2017.

While love and parental common sense are necessary ingredients to successfully parent a child with attachment difficulties, they are rarely sufficient. Most children with attachment problems are too guarded and too distrustful to receive the love and support that parents are offering. Their foundational issue is “felt safety” – without feeling safe, love becomes an unaffordable luxury.

It is the pursuit of safety that leads these children to behaviors that are labeled “controlling”. Often parenting children with attachment disorders is conceptualized as a “battle for control” that the parents must win. But control is not the problem or the goal – it is a symptom. The problem is the lack of feeling safe in the world.

Parents must remember that creating a feeling of physical and emotional safety that their child has not previously experienced is the goal.

With safety in place, a bridge develops across which love can flow. Safety converts the “unteachable” child into a teachable one who can start to learn the lessons of love. The specialized parenting techniques outlined below are aimed at gradually creating that “felt safety”. Even when parents understand and use these techniques faithfully, it can be very exhausting to parent children with attachment disorders. If you have reached the point of feeling ineffective and discouraged, that’s a warning signal that professional assistance is needed.

Safety is the top priority. The physical safety of people and property should always take precedence over doing everything else.

Teaching Boundaries. Children with attachment disorders struggle with personal boundaries including things like personal space and ownership of possessions. They often manifest their defensiveness about boundaries as opposition. While the child may present as not caring about others, at the same time they seem to absorb the emotional states of others and project their emotional states on others. Behaviors such as hoarding or being overly reactive to others are all boundary problems, rooted in fear. Consequencing these behaviors doesn’t help. What is needed is repeated, overt instruction in the concept of boundaries to slowly change their internal working model (IWM).

Empathetic Reflection. Parents are taught to be empathetic and to attune to their child. The key to
“being present” with a child is to be able to reflect back their internal state. It requires the parent to be aware of where they are placing attention. For example, if a child expresses that he doesn’t believe his parents love him, the adult may respond by offering reassurance of the parents’ love. But this is not an attuned response. A precisely attuned response would communicate that the adult understands that it’s hard for the child to believe her parents love her, because of all the hurt she feels inside. This response makes no attempt to shift how the child is feeling – just reflect it. This type of reflection has a powerful emotional impact on deeply wounded children and is actually much more soothing than the reassurance often offered. Parents should also become skilled in non-verbal empathy (i.e. voice qualities, body gestures, facial expressions and physical proximity) to help communicate empathy with the child’s internal state.

Rule Setting. While being empathetic and focusing on the child’s emotional state are important healing strategies, all children need structure. Children with attachment disorders need to have behavioral rules that are specific, clear and phrased in a positive way (i.e. what the child needs to do vs. what he should not do or stop doing). By stating the rule positively it helps the child’s subconscious avoid focusing on what is being prohibited. When a child with attachment difficulties is told “no” or “stop” their subconscious may become stuck on the undesirable behavior that then occurs/reoccurs. Rules need to be communicated with the expectation that they will be followed; this is best done ahead of time, with a matter-of-fact tone of voice. Example: “Right after dinner, you will go to your room and finish your homework.” In general the interaction is broken off after the parent has communicated the expectation. (i.e. not reacting to any pleas for negotiations, repeating the directions, or questioning.)

The Intersection of Discipline, Shame & Empathy. When imposing a consequence as part of discipline, parents should offer emotional support (empathetic reflection) for the hardship (negative feelings) that the consequence will cause the child with attachment disorder. By communicating that you understand the humiliation (shame) that the child is feeling internally at being “told no” and then incurring a consequence, you are building this empathy bridge to preserve attachment. Children with attachment difficulties very often respond to correction of their behaviors with shame-based misbehaviors. Parents can help break that cycle by expressing a vote of good faith that the child has the resources necessary to handle the consequence given and will make a good choice even though she doesn’t want to. The parent needs to let go of any anger from the misbehavior that may remain while/after imposing the discipline as quickly as possible, to avoid sabotaging the relational/attachment work that has already been done.

Difference Between Appreciation and Praise. When a child with attachment disorders makes a cooperative choice, appreciation is often the better parental response than praise. Appreciation puts parent and child on the same level for that interaction. Praise can suggest that the one offering the praise (parent) is the more powerful one and therefore able to pass judgment on the less powerful one (child). Praise can be viewed as much as a judgment as a criticism. Parents report that children often “sabotage” situations in which they’ve just received praise, which could be because the children feel the parents are “rubbing it in their faces” that the parent is more powerful and has “won”. Expressing appreciation for the child’s positive action generally will avoid these risks and can strengthen the parent-child relationship. Still, too much positive attention can trigger internalized shame in a child with attachment difficulties and paradoxically the adult can end up being viewed as cruel rather than
supportive. (Editor’s note: This is why we often tell parents that “drive-by compliments” or telling a third-party how much you appreciate a child’s actions are ways to “soften” this while still providing the positive experience to help change the child’s IWM).

**Eye Contact.** As long as a child with attachment difficulties does not have consistently good eye contact with his parents, working on this should be a priority. Good eye contact is the basis for the child being able to “take the parent in emotionally”. Without this, the child is less likely to develop a healthy emotional connection to the parents. Verbal cues, such as “look at my eyes”, sometimes supplemented with hand gestures, may be sufficient. Don’t force eye contact over strong opposition. This sets up a power struggle that will only contaminate the act of making eye contact with tension and conflict. Also remember that extended eye contact in a parent-child relationship can be experienced as a power differential, with one of the participants feeling less powerful and defensive. Do express appreciation when eye contact is given.

**Physical Touch.** Children with attachment disorders are often touch avoidant (due to their early trauma histories). Parents should not let this knowledge intimidate them into rarely touching their child – because touch is the cornerstone of attachment. Always be looking for opportunities for physical touch during calmer moments. Schedule times to hold your child in a nurturing way (like bedtime rituals, for example). Just like eye contact – don’t force it, because this sets up a power struggle that contaminates the physical affection. Children with trauma histories have to be taught how to relax when being touched in a nurturing way, and of course have to feel safe while this is occurring.

**Motivation to Change.** A word of warning: Do Not Care about your Child’s Problems More than She Does! Nothing about your child’s behavior is likely to change if you are more anxious about the situation than your child is. So parents have to be careful to not take on the anxiety that truly belongs to your child for the child to change. As parents, you cannot make your child better; you cannot make your child successful’ you cannot fix them. In the spirit of counterintuitiveness, acknowledging that your child has the freedom and power to throw away opportunities given to her increases the chances that she won’t.

**Choice, Consequences & Responsibility.** The IWM of children with attachment challenges may contain little or no sense of personal responsibility or may not see choices, instead seeing predominantly victimhood. However even “victims” make choices. So “choice” is a concept that needs to be taught, experientially (not by telling them). To do this, the parent must first establish what the child did and simply define it as “a choice” (giving them responsibility for their behavior). The next step is to make a best effort to establish the reason the choice was made. If the choice was a positive one (the parent’s view) then parents should acknowledge (appreciate) it. If the choice was a negative one (parent’s view) parents should avoid the temptation to encourage better future choices. This is quicksand for parents as they cannot elicit better choices if the child doesn’t wish to make them. A child should be held accountable for the choice and if a consequence is determined to be needed, it needs to be imposed as quickly as possible (no later than the second time the negative behavior occurs). Although many children with attachment disorder will test any consequencing, the process is still worth it because it lays the groundwork for the child taking responsibility for choosing the negative behavior a second time. The linkage between each choice (positive or negative) and its outcome should be made explicit (reminding them each time that their choice was what produced the outcome).
A Couple of Pitfalls

1. Parents as emotional echo chambers. Parents of children with attachment disorders often experience the negative feelings that truly belong to their children but that the children are not acknowledging. If the parent understands this, that can help prevent over-personalizing the reaction to the child’s behaviors. (In other words – it’s not about you, even though it feels personal!) Recognizing that you are like an emotional echo chamber gives you important information about your child’s hidden feelings in the moment. When parents’ reactivity is reduced and there’s greater understanding of the child’s feelings in the moment, the parent can be more therapeutic – reflect empathy and provide a safer, more nurturing response.

2. Emotional contagion. Emotions can be passed from one person to another like colds. This is driven partly by nonverbal mimicry, particularly of others’ facial expressions. This phenomenon occurs in infants as young as a few days old. Once people start mimicking facial stimuli, they often rapidly experience the emotions associated with those expressions. So parents can counteract this by being aware of their expressions when interacting with children who have attachment difficulties (providing positive facial expressions).

One More Advanced Therapeutic Parenting Pearl: Unfairness for Parents. (Editor’s Note: I was curious about this one from the title and it does sound so counterintuitive. But oddly enough, I experienced this with my daughter just last night… and will explain.) This counterintuitive technique can serve to both connect with children with attachment disorders and to disrupt their negative interactions. The task for the parent is to “complain” to the child that she is being unfair to the parent. This complaint of unfairness must be attached to something specific the child is doing or saying. Otherwise vagueness renders this technique ineffective. The parents must also convey this in a neutral way. Irritation in the voice will sabotage the intervention. Since complaints of unfairness are familiar in the child’s IWM, they recognize the parent’s position immediately, and when this intervention works, may actually have a bit of an empathetic reaction.

Last night I saw this pearl of Larry’s in action. Our daughter was mildly rude at dinner with family friends last night. So her dad and I called her on it during the car ride home. Recognizing the potential for humiliation, we remained as matter-of-fact as possible, but she escalated anyway. By the time we were home she was yelling and being very obsessive about the discussion of this rather minor incident. We are still not therapeutic at times, so first we tried reasoning with her (to no avail) and tried ignoring her rants (again to no avail). Frustrated that this had gone on so long, I just said to her (as calmly as possible), “You know, it really sucks for me when I’m in this situation. When you do something rude and don’t recognize it, it’s my job as your parent to try to help you with that. But if I point it out to you, then I have to endure a bunch of ranting and raging either about how stupid I am or about what a failure you are. Neither of those things is true. But it’s really unfair that I can’t just do what mothers are supposed to do and try to help you.”

She was silent for a moment, like it was all soaking in, but went back to some mild ranting about what an awful person she was and eventually went off to bed. This morning, she came into my office as I was working on this article and said, “Mom, I’m sorry last night for getting so upset when you were just trying to help me learn to not be so rude. It’s not fair that I take all my negative feelings out on you. I know you’re on my team.” Wow… it was almost textbook Larry…and was a perfect opportunity for an attachment-building hug!
By Audrey Hokoda, Maria Carmen Rodriguez, María González and Godwin Higa

Editor’s note: There are schools across the country answering the call to become trauma-informed and to support not only their students with early life trauma but their families as well. Principal Godwin Higa of Cherokee Point Elementary school and the San Diego State University have joined forces to create a trauma-informed school. In ATN’s December 2015 Journal we shared about Principal Higa’s work in the school with his students and teachers. In the following article, SDSU and Cherokee Point Elementary staff share how they have worked to grow a community of trauma-informed parents and civic members to further support the students and families at the school experiencing the effects of early life trauma. Whatever the circumstances of the trauma experienced by today’s students, lessons can be learned from this school’s programs.

Here is a story all too familiar in some schools in America:

Lupita and her husband Jose live in a neighborhood with high rates of poverty, as well as domestic and gang violence. Lupita, at 22, has experienced multiple traumas including sexual abuse as a child, dating violence as a teen, and the loss of friends due to community violence. Recently they enrolled their son 5-year-old Jose Jr. and daughter 4-year-old Maria in Cherokee Point Elementary. Jose is juggling 3 jobs and is rarely home. Lupita struggles with English and navigating her neighborhood, and at night she’s scared as she hears patrol cars and ambulances and is alone with her children. Mrs. Lopez from Cherokee Point has been calling because Jose Jr. has been running about his kindergarten classroom, spinning around and kicking classmates. Lupita feels overwhelmed, depressed, tired and lonely.

Cherokee Point Elementary in San Diego provides a trauma-informed community school that not only helps its students with early trauma, but parents like Lupita.

Research shows that more than two thirds of children report experiencing a traumatic event by age 16. More significantly, exposure to trauma is associated with deficits in social-emotional development that may put children at risk for school failure (APA, 2008; Gilliam, 2005; Perry, Holland, Darling-Kuria, & Nadiv, 2011; Qi & Kaiser, 2003). Children from low-income, minority families are more likely to come into school with fewer of the socio-emotional skills needed for school success due to risk factors related to trauma, living in poverty, limited English proficiency, lack of parent involvement, and a negative school climate (Child Trends & Center for Child Health Research, 2004).

Principal Godwin Higa aims to address these needs of the families at Cherokee Point Elementary, and so he strives to make his school a neighborhood learning center, where there is a welcoming school-community environment that facilitates communication and support. The creation of the “Gathering Place”, a parent room next to the preschool classrooms, encourages parents to be actively involved in promoting their children’s education and well-being from the time their children enter the district as preschoolers until they graduate from high school. Parents gather to socialize, and work together.

The program started as part of the Building Healthy Communities (BHC) Initiative and was funded by the California Endowment for 5 years. Promoting trauma-informed and restorative practices within a community school involves building on strengths and relationships, and supporting the active engagement of Parent Leaders, who are empowered to help their children and their families develop solutions for key problems in their community. Following Guiding Principles of Trauma Informed Care from the Substance Abuse and Mental Health Services Administration (SAMHSA), goals include creating a place where the families feel safe, and where there is trust and mutual, collaborative partnerships are developed. The Gathering Place is a space where everyone is cared for, respected, and valued for their strengths. There’s an understanding that healing occurs in relationships, through peer support and self-help.
A model of the Parent Engagement activities was developed by Maria Rodriguez, who as a graduate student served as the primary Mentor for the Parent Leaders at Cherokee Point. Her model, Growing Together “Creciendo Juntos”, emphasizes relationship building and increasing parent involvement and leadership by addressing cultural barriers that specifically hinder Latino parents’ involvement including logistical barriers (e.g., child care concerns), attitudinal barriers (e.g., uncertainty about parental roles in school) and expectations (e.g., feeling judged by their ethnicity or social class) (Durand, 2010; Huerta, 1998; Henderson, Marburger, & Ooms, 1986; Villareal & Barnwell, 1990, respectively).

One goal of the work is to create a community school that implements trauma-informed practices and addresses the above barriers - and many others minority parents face - that prevent engagement in their children’s schools. Another is to create a “sense of community” where interpersonal relationships are communal, cooperative, close, intimate and informal; where there is extensive home-school collaboration; and where the school infrastructure and activities incorporate cultural values (e.g., familismo, respeto, personalismo) that play a central role in parenting and relationships in Latinos (Calzada, 2010) who are living in the Cherokee Point neighborhood.

The Creciendo Juntos Parent Engagement Model consists of 4 levels of parental involvement, with Level One being “reaching out to the parents” through the development of authentic caring relationships as the foundation and prerequisite for success in the other three levels. Luckily, at Cherokee Point, step one had already been implemented by Principal Higa and the teachers in their creation of a warm, welcoming school which promoted trauma-informed, compassionate practices and used restorative circles in the classroom. In addition, monthly “Principal’s Chats” provided opportunities for socialization among parents and a venue for presentations by professionals from the community (e.g., lawyers, police officers) addressing resident concerns (e.g., immigration rights, community safety). The school also built partnerships with agencies and businesses to help with basic needs (e.g., food pantry, clothing donations).

CA Endowment funded the expansion of parent involvement in 2011 with an initial nine months of resident community meetings. These meetings provided an additional venue for the school’s greater community to get to know each other through meals and activities, and where residents provided feedback regarding their priorities for their children, families and community. The parents identified needs that included: how to help their children succeed in school, relaxation/health promotion activities for parents, positive discipline/parenting tips and coping with domestic/community violence.

In addition, as parents voiced their needs, workshops were offered by San Diego State University (SDSU) faculty and students, and community experts (e.g., National Conflict Resolution Center, Center for Community Solutions). For example, Dr. Colette Ingraham, Maria Rodriguez, and other students from SDSU led bilingual parent workshops on helping children with homework, helping children get into college, Common Core State Standards, and differences in school systems in the U.S. versus Mexico.

Moreover, guided by parent feedback, as well as by research on the effects of trauma on the brain and a strong desire to emphasize prevention, early childhood education has been a key focus. With the help of Dr. Shulamit Ritblatt from the SDSU Child and Family Development Department, in collaboration with community partners (e.g., Family Health Centers of San Diego), parents of pre-K children were given over 30 sessions of a First Five program (Pathways to Competence), as well as lessons from the Circle of Education, a school readiness program that includes
music and literacy-based lessons in English and Spanish for parents and teachers (circleofeducation.com). Parents gave feedback and selected lessons and activities that address trauma’s effects, such as positive discipline in dealing with behavioral and emotional challenges, and ways to promote parent-child attachment and social competence (e.g., friendship, cooperation, anger control). I also led trainings on the effects of trauma on children and families, self-care and coping strategies for stress/depression, and positive parenting.

After over 5 years of mentoring, relationship building, and weekly meetings, Parent Leaders continue to increase their engagement in collaborative work with school-community partners to provide services for children and families. Using a Train-the-Trainer model, Parent Leaders are supported as they facilitate bi-monthly meetings, plan and present at Principal’s Chats and workshops, and help coordinate/recruit other parents to volunteer at Principal-led community-building activities (e.g., food distribution, school clean-up, Cinco de Mayo celebrations). Trained on evidence-based trauma-informed care and parent leadership skills, Parent Leaders then individualized their workshops, using stories from their own families, and created interactive small group activities tailored for the families they know. They have led workshops on topics such as: Recognizing Trauma Effects in Children and Families, Self-Care, Positive Discipline/Communication, Depression, Family Values and Resilience.

They have also led Circle of Education lessons that correspond to lessons led in preschool classes, and they have hosted “cafecita sociales” for new parents to meet Principal Higa, teachers, and Parent Leaders. Via this work, new parents are drawn into the ever growing trauma-informed community and provided information about parenting classes and resources. Parent Leaders have also supported other events (e.g., parenting classes by SAY San Diego and Jewish Family Services, City Heights Community Walks with Mid-City Police). Additionally, the influence of the Parent Leaders has broadened beyond their school as they have been asked to present at other schools, community conferences, and to professionals visiting from around the U.S. (e.g., Harvard University, Johns Hopkins University, Echo Parenting of Los Angeles) among others (see www.acesconnection.com).

The Parent Engagement Model at Cherokee Point follows guidelines from San Diego’s Trauma Informed Guide Team; establishing recovery from trauma is a primary goal and the Parent Leaders have been educated about the impact of trauma on their children and their own coping skills. We emphasize safety and developing trusting relationships, and use an empowerment model, in which Parent Leaders’ strengths (e.g., personal-style, warmth, artistic talents, commitment to families) are embraced. Parent Leaders are equal collaborative partners. Parent Leaders guide workshops, outreach and activities, individualizing lessons for their culture and life experiences.

Remember Lupita? You may still be wondering how specifically does being in a trauma-informed community school like Cherokee Point help a new mom like her. Lupita was stressed and embarrassed to come to school after receiving numerous calls from Ms. Lopez, Jose Jr’s teacher. However, as she drops off Jose Jr. and Maria in their classrooms, Mrs. Lopez approaches Lupita in a friendly way and invites her to the Parents’ “Gathering Place” and tells her about the parenting classes that are being offered. The next day, one of the parent leaders invites her personally, and Lupita decides to go. At the “Gathering Place” Lupita finds the aroma of freshly made coffee, a vibrant room full of parents and toddlers, and everyone is chatting and greeting each other. She notices the photos of parents like herself decorating the colorful walls – pictures of baby showers, birthday celebrations, and workshops. She also sees fliers and community resources that until now she didn’t know existed. She has opportunities to learn about how to help her children and to meet supportive and fun friends. Two Parent Leaders – Nancy and Ale - approach her with a smile to welcome her, and Lupita feels a sense of belonging.
About the contributors: Audrey Hokoda, holds a doctorate in clinical psychology and is a professor in the Department of Child and Family Development, College of Education at San Diego State University and serves as Parent Leadership Facilitator for Trauma Informed Community Schools (TICS) at Cherokee Point Elementary in San Diego. Reach her at: ahokoda@sdsu.edu.

Maria Carmen Rodriguez, B.S., is in a masters program at San Diego State University (SDSU), where she specializes in counseling and mental health services for young children and families. She has been the Parent Leader Mentor working at Cherokee Point Elementary for the past 5 years.

María González is the mother of 3 children who have attended Cherokee Point Elementary, and she has been an active Parent Leader with the Trauma Informed Community Schools program for over 5 years. She has helped lead dozens of community presentations on trauma, resilience-building, depression and early childhood education.

Godwin Higa is the Principal at Cherokee Point Elementary School in San Diego. Previously he served as a teacher for the San Diego Unified School District, was named Teacher of the Year in 1997, and served as a language arts consultant for the state Program Quality Review committee. Currently he serves as a Commissioner of the San Diego City Citizens’ Review Board, and is a member of the Hispanic Alliance Community Association.
The Attachment & Trauma Network is a 2016 Angels in Adoption Recipient! We learned in mid-August that we’d be one of 130 Angels being honored in Washington DC on September 19-21. Board President, Lorraine Schneider and Executive Director, Julie Beem traveled to DC to accept the award. ATN was recognized for 21 years of supporting and educating adoptive parents about trauma and attachment disorders through online support groups, a crisis line, educational programs and continuing advocacy. The Angels in Adoption® Program is hosted by the Congressional Coalition on Adoption Institute (CCAI), and ATN was nominated by Rep. Chris van Hollen of Maryland.

The program included three days of meetings, exhibits, touring the Capitol, an awards luncheon and visits to congressional offices. The trip ended with a fabulous gala at the Ronald Reagan building, hosted by The Little Couple from TLC.

“We’re honored that ATN is being recognized by the Congressional coalition and by the national adoption community for the important work of supporting families in their quest for trauma-informed, attachment-focused resources and care,” said Julie Beem, ATN’s Executive Director. “This award really belongs to the countless volunteers – parents and professionals – who, over the last two decades, have passionately and compassionately given of their time and experience to bring awareness to the plight of children impacted by early trauma and to support the families helping the children to heal.”

Throughout September, ATN commemorated this award by posting “ATN Angel” blogs daily – featuring a few of the many volunteers who have made a difference for children and families throughout ATN’s two decades. If you’d like to read the blogs on our many ATN Angels, you can find them at blog.attachmenttraumanetwork.org
REFRESH-RENEW-REFRAME

Retreat helps parents shift to therapeutic parenting. Oct 7-9 ATN & Chaddock held the first Refresh-Renew-Reframe Therapeutic Parenting Retreat in Stone Mountain, GA. Over two and one-half days, parents from 7 states learned about evidence-based therapies and parenting strategies from trauma-informed, attachment-focused therapists and experienced therapeutic parents.

The weekend included time to connect with other parents for support, rest & relax, practice new parenting and self-care tools – and ice cream & fireworks!!! The weekend was funded in part by a grant from the Atlanta Braves Foundation.

Caption of photo: Triple R Retreat Training Team. Front: Jared Ransom & Karen Buckwalter, Chaddock. Back: Mark Brown, Pathways for Healing; Julie Beem & Tif Junker, ATN.

Trauma-Sensitive Schools trainings “take off”!

ATN’s Trauma Sensitive School (TSS) Initiative launched Professional Development trainings in June. We have trained over 150 educators in three states in the last 4 months: New Jersey, New York and Iowa.

The TSS Initiative includes the ability to do introductory workshops or 1-day/2-day training and follow-up consultation. Teacher (Educator) cards that outline the basic trauma-sensitive tenets for educators are available.

We’re booking now for Spring/Summer of 2017.

Visit our TSS website: creatingtraumasensitiveschools.org. Melissa Sadin heads this program, and can be reached at Melissa@attachtrauma.org

ATN’s Board Plans 2017 Retreat with New Board Members

In January, ATN’s Board of Directors will convene in Orlando for our annual board retreat. Three new board members will begin their terms on the board then: Thomas Ahern, Carl Young and Neil Van Rossum

Thomas Ahern, MA is a senior vice president at Calo, an adult adoptee and a former school psychologist. Thomas is an outspoken advocate for adoptees and works tirelessly to advance society’s sensitivity, knowledge and compassion for those experiencing the effects of early childhood adversity. He is a sought after speaker on the local, state and national levels and is a competitive endurance athlete and fly fisherman. He resides in Connecticut with his wife Belinda and their therapy dog Nando.

Carl Young is an adoptive (and biological) dad and adult adoptee from North Dakota. A former college instructor, Carl is active in state advocacy – serving on the North Dakota Behavioral Health board. He supports other parents of traumatized children and blogs about his family’s experience and his advocacy efforts.
Neil Van Rossum has been in the mental health field since 1976. He provides trauma-informed therapy to children and adults through private practice as well as through the Dept of Human Resources and school districts in Wisconsin. Neil is well versed in ACEs research and Dr. Siegel’s interpersonal neurobiology strategies, and uses music, poetry and humor as healing tools in his practice.

Dr. Burroughs Retires from ATN’s Board

With deep appreciation and a definite twinge of sadness, we announce that Bob Burroughs, PhD is retiring from ATN’s Board of Directors on December 31. Bob has been a wise leader and board member, bringing his experience both as an adoptive father and as an educator, specializing in educating children and teens in a residential treatment setting. Bob has worked with ATN’s Educational Work Group on our therapeutic parenting and trauma sensitive schools initiatives. He was also very active in development and in helping shift ATN’s fundraising culture. Thanks Bob for all you’ve given to ATN!

More Money = More Children Served

Candidly- We Need Money

While we’ve grown and reached farther in 2016, ATN’s revenue hasn’t. ATN is a frugal organization, stretching all donations to go as far as humanly possible. At the Angels Award celebration I heard from several other Angels how valuable and well-respected ATN is. We truly are impacting SO MANY! But you know as well as I do, there are thousands (dare I say, millions) more who need the trauma-informed, attachment-focused programs ATN has.

If you’ve given to ATN in the past – THANK YOU! If you’re planning year-end giving, it’s quick and easy online: http://www.attachmenttraumanetwork.org/get-involved/donate/. Or you can mail donations to: Attachment & Trauma Network, Inc., P.O. Box 79181, North Dartmouth, MA 02747. ATN is a registered 501(c)3 non-profit organization.

Are You #Onein1000? If you’re looking for an ongoing way to make a difference, ATN’s new recurring donation campaign is asking 1000 people to give monthly to ATN. If 1000 people gave $20 a month to ATN our infrastructure could grow to reach thousands more. You can get in on the early stages of this campaign and help us continue to make a big difference in 2017!

Join the MOVEMENT! attachtrauma.org

Be #Onein1000
Donor Profile

Linda Wesseler is an ATN member, wife and mother who lives near Cincinnati, OH. Linda and her husband, Mike, found ATN about three years ago when looking for resources as their daughter, adopted from foster care, was reaching adulthood.

“What we like about ATN is how the organization supports families and really understands what parents of traumatized children are experiencing. The people of ATN really get what it’s like to parent children with attachment disorders through all stages, whether they’ve healed significantly or not.”

Linda gives to ATN to help other parents find resources earlier and to prevent even more traumatized children and struggling families. “We’ve been there and know it’s important that ATN grows so we can reach more families who bring children with trauma backgrounds into their homes. Early intervention of resources and support are critical.”

“ATN’s support groups are safe places for parents, who often experience their own traumatic stress, to be able to honestly share and feel supported. There’s so much you’re not able to say to other parents in your local community because they misunderstand both trauma and adoption – and while they often sympathize with the children from hard places…the public rarely understands what the family needs to build healthy attachment.”

Thanks Linda for your generosity and devotion to ATN’s mission and to “paying it forward” for others! If you’d like to join Linda and other members who are giving back to help grow ATN, you can donate through our website. http://www.attachmenttraumanetwork.org/get-involved/donate/

Join our One in 1000 campaign and help us grow consistently throughout 2017. See the back cover of this Journal for more information or visit: http://www.attachmenttraumanetwork.org/get-involved/onein1000/

ATN’s 2016 Board of Directors

<table>
<thead>
<tr>
<th>Name</th>
<th>City, State</th>
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The holidays are a joyous time of year when we get to take a break from the rat race of life and spend some quality time with family and friends. We may nibble on treats and sweets, sleep a little late, and kick back discarding the daily routine in favor of impromptu events. Often we deck the halls within an inch of their lives, shop until we drop and cook feast upon feast. If we are below a certain age, we sit in Santa’s lap and tell him our desires; we have sleep overs with friends, and swap school time for sledding and extra screen time. Then when the fun has finished and the days are past, we snap it all up tight until next year and jump back into the daily routine. Back to school and work we go, slipping back into our schedules warmed by the memories.

That is, unless we are children who struggle with attachment and early trauma issues. For us, the holidays are often too much. Too much noise and light. Too much sugar. Too much fellowship. Too much zipping here and there. Too much stuff. And holidays can also be filled with too little. Too little down time. Too little structure. Too little time with those who make us feel safe and secure, day in and day out. Too little sleep. Too little normality.

We at ATN wanted to acknowledge the struggles our kiddos have around this time of year, both with the holidays themselves as well as with getting back into the routine after the holiday break is over. In this issue, we are featuring a few tips from ATN members. We also will be talking about this topic over the next coming weeks on our support groups in Yahoo Groups and Facebook. Check them out, pick up a few tricks and suggest a few. Together we can help our children, and ourselves, enjoy this season in the way it best works for our family.

From Sandy Davis, ATN Board Member and 2012 Angels in Adoption Congressional Award Winner:

THE HOLIDAYS...yes, using ALL CAPS is necessary to highlight this major time in our lives each year! While THE HOLIDAYS are promoted as the most wonderful time of the year and everyone greets you with a smile as you walk down the city sidewalks, there are some of us who just DO NOT feel that way most days during the season of good tidings! Children who have experienced trauma, who have started life in hard places can’t regulate, can’t accept joy, can’t give and most of all, can’t feel the love and gratefulness that is expected. It is important to remember these simple truths, most especially during this season.

In our family, it took a few years for us to understand this. Although a baby when adopted, our daughter melted right into my version of the holidays...the cutest Christmas photos, everyone giving her gifts and toys, candy and sugar to the extreme! After all, it’s THE HOLIDAYS! Fast forward a few years when school started and we had to break her schedule for Thanksgiving, followed by school parties, extra free time in class, then Christmas break and then returning to school as if nothing had happened. After a few years and lots of up & downs of seeing THE HOLIDAYS through her eyes, I changed my/our vision.
of what **THE HOLIDAYS** needed to be for our family. While it was not always possible to avoid the school parties, family gatherings, extra sugar rushes, I was able to be proactive! I knew my girl! I knew too much of anything was not good for her and would impact her (as well as me since I was her main caregiver) in some way. So, I made sure to attend her school parties in order to keep an eye on her: eating too much, getting too loud, and getting dysregulated were all within the realm. And when I saw it was time to go, it was **TIME TO GO!**

I applied the same rules to family gatherings. When my step-kids were young, we could arrive at a family gathering and off they went...never to be seen until it was time to go home. Not so with my girl. While I may not have stayed by her side or hovered over her (especially as she got older and didn’t want me around), I was nearby and watching...and sometimes waiting for **THE MELTDOWN! TIME TO GO!** I had to be strong! I had to be able to disregard the other family members who always had opinions as to my parenting and know I was doing what my daughter needed me to do as her Mom. Quite frankly, they weren’t the ones who saw the triggers, understood them, and had to live with the aftermath.

Now that my girl is nineteen and understands so much more about herself, she knows her triggers, she knows what to eat and not eat; she knows when it’s too noisy. She will say to me, “It’s **TIME TO GO!**” And I’m not surprised when she comes to me, because I am still watching for those triggers, keeping an eye on her, ready to suggest where she can go for some quiet time away from the festivities. My advice for surviving **THE HOLIDAYS**, look at life through the eyes of your child and it’s amazing what you might see! Oh, and enjoy the Eggnog!

**From Laura Dennis, ATN Blog Manager**

Being the parent of three children of various ages and stages I like to keep things direct. It also helps my mom brain! Here are a few of my best tips amassed over more than a decade of parenting children with trauma and attachment issues:

1) **KISS** Keep it simple, stupid.
   If the “S” word offends you, then try this alternative, “Keep it simple and small,” which boils down to the same thing. Whichever you choose, repeat after me: whatever it is, you don't have to do it. I don't care if you have been going to the family-themed Christmas Eve at the local megachurch since 1995. If crowds, rock bands, and a bewildering panoply of sweets on the cookie buffet are going to overwhelm your child, you do not have to go. You don’t have to paint individual handcrafted ornaments; you don’t have to bake five kinds of cookies. Heck, you don’t have to bake even one cookie. If it is all you can do to put a bowl of cereal on the table, then that is what you will do. And guess what? It will be okay.

2) **JSN** Just say no.
   This is related to #1. You don’t have to go to Midnight Mass. You don’t have to bake five kinds of cookies, even if Aunt Betsy just raves over your chocolate crinkles.
You don’t have to go to Cousin Christa’s Yuletide Tea or sledding with Cousin Chuck. Perhaps you are afraid that someone will judge. As the song says, let it go. One of two things will happen. 1) They won’t. They will have too many fish of their own to fry to worry about you and your decisions. 2) They will. Guess what? People like that are probably going to judge you anyway. You can’t change that, so live the life your children need you to lead.

3) YDY You do you.
This could look like any number of things, depending on you, the composition of your family, and your child’s particular trauma and triggers. For us, it means dates matter less than experiences. For example, my trauma child’s birthday is January 16. I don’t think we’ve ever celebrated on that day. He’s having a great day January 13? We go ahead and celebrate it then. And by celebrate I don’t mean go off the deep end into the pool of excess. No themed parties, no six-layer custom cakes. Just family and maybe a friend or two, and a handful of favorite foods. One special gift from each guest, and we call it a day. If “friends” or family try to guilt me with tales of crowds of kids and piles of gifts, I just walk away with “you do you” in my head, if not my mouth.

4) EIEO ease in ease out.
Doing all these things not only helps keep me and especially my child somewhat closer to sane during the holidays, it also makes it easier to settle back into life-as-usual once the hubbub is over. If your child is anything like mine, though, he might need a little more, so we add the extra step of easing into and out of the holiday season.

We don’t start the holiday rounds the minute school is dismissed for break, and we intentionally settle school to do nothing at least 3-4 days before school resumes. Well, not nothing. But we don’t go out unless it’s to the doctor or some other necessary errand, and we rebuild something resembling a schedule for eating, sleeping, work, and play. We switch back to simpler foods cooked mostly from unprocessed ingredients, we drink plenty of water, and we turn off the screens. It doesn’t eliminate the struggle, but it certainly eases it. All that said, this might not work for you, so just remember: keep it simple, just say no, you do you and ease in ease out. I have faith in you!

From Jane Samuel. ATN Communications Director

The holidays have been a learning experience. With the addition of each child we have had to alter our expectations and plans, but none so much as with our youngest. Not unlike other families, at first we approached the holidays in the traditional way. Our concerns remained mainly around avoiding too much food, getting enough sleep and trying to curtail the number of presents my mother was buying for the girls.

However, as our youngest grew (and we received training in understanding her needs), she began to share more deeply her grief and her yearning to feel safe and secure, we learned to curtail the festivities. We limited the number of parties we attended with her and the length of time away from home. We also tried to keep to a schedule of daily sensory work – even when traveling away from home. Time in the hotel pool or a nearby park helped keep her sensory seeking behavior – driven by dysregulation – at bay.
Most importantly, as she became more able to voice her needs we listened rather than discounting them as the words of a child. Most children, including our kiddos, are more in tune than we give them credit for. They may not always be able to tell us with words – hence the sensory-seeking behaviors, disrupted sleep, and general dysregulation – but if we pay attention we will see they are showing us that all is not well.

By listening – really listening – we heard her fears, her needs, her desires, and we talked about them. She told us that she didn’t want Christmas to come and why. “Too many gifts, and too much to open,” she said. “I am so afraid of not getting what I want,” she also said. “I am afraid of growing up, and when Christmas comes and goes it means I am getting older,” was a most telling statement. She also told us what she needed. “I don’t want to open my gifts,” or “I want to wait until later to open them,” or “I want to open only one today.” There was even the time she asked us to take all her gifts back, saying she didn’t deserve them and her family in China didn’t have such nice things.

Finally, despite push back from family – even her own sisters – we stuck to our convictions on what was best for her, even when that meant altering how we did our usual gift opening on Christmas morning. If she felt that opening all her gifts would be too overwhelming then so be it. In the end what did it matter? They were just material items and her feelings of safety and security trumped all that.

What’s Coming Up in the Attachment and Trauma World

Jan 12-16 – Orlando, FL
ATN’s 2017 Board of Directors’Retreat

Mar 3-6 – Orlando, FL
Beyond Trauma and Attachment (BeTA) Retreat – Orlando, FL
http://momsfindhealing.com/

Mar 4-7 – Savannah, GA
National Youth at Risk Conference
http://10times.com/nyar

Apr 5-8 - Atlanta, GA
American Adoption Congress
http://www.americanadoptioncongress.org/

Apr 28-30 – Chicago, IL
Parenting in SPACE
http://parentinginspace.com/

Jun 12-13 – St. Louis, MO
Trauma-Informed Schools Conference

July 19-22 - Atlanta, GA
NACAC Conference
http://www.nacac.org/conference/conference.html

Oct 12-14 – Denver, CO
ATTACH Conference
The following are ATN Professional Members. They are therapists, educators, and other child specialists who believe in ATN’s Mission to Support, Educate and Advocate for Traumatized Children and Families.

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• Joseph McGuill
"The Attachment & Trauma Network saved our family!"

Our Executive Director, Julie Beem was told this by a parent recently — Life-Changing, Family-Saving work! Since 1995, ATN’s volunteers have been passionately and compassionately helping traumatized children and their families. But its not enough... we can’t reach every child and every family who needs our help.

Won’t you join us? Sign up below to donate $20 a month. If 1000 people joined us at that level, ATN would be fully funded and able to help thousands more. If $20 isn’t right for you, please give what you can — more or less.

To donate or learn more, visit:

attachmenttraumanetwork.org/get-involved/onein1000