

The Connection

Family Connections and Grandparent Family Connections

FAMILY-INFORMED TRAUMA TREATMENT CENTER LAUNCHED

University of Maryland's School of Medicine and its partners University of Maryland School of Social Work and Kennedy Krieger Family Center have received a \$2.4 million SAMHSA grant to form the Family-Informed Trauma Treatment (FITT) Center. Over the next four years, the partners will combine their expertise to develop, implement, evaluate and disseminate interventions for underserved urban families and military families experiencing chronic trauma and stress. The FITT Center is part of the National Child Traumatic Stress Network (NCTSN) and one of 15 Category II Centers nationwide. Established in 2000, the NCTSN has raised awareness of the impact of childhood trauma and increased access to effective trauma treatments for thousands of children and adolescents. NCTSN chose the FITT Center to serve as a national expert on the role of families in the lives of children impacted by trauma and to further the availability of effective

family trauma treatments.

The FITT Center's goal is to develop, evaluate, disseminate and put into practice family approaches that promote safety and recovery for all family members. Living in persistently harsh, impoverished and violent conditions erodes a family's ability to attend to the daily tasks of living and taxes resources for coping with daily stress. Traumatic exposures to, for example, domestic, school and community violence or child physical or sexual abuse create significant disruptions in emotional stability for all members. Strengthening coping skills, building relationships and connecting to community resources can help families get "back on track." Skill-based therapies that enhance rituals and routines, improve communication and increase access to community-based services hold promise for supporting family recovery and resilience. The FITT Center aims to increase access to family treatments that are trauma-specific, family-centered and target all members of the family. It is envisioned that adult caregivers

actively working through their own traumas and losses will be better equipped to support child development and recovery, leading to positive outcomes for all family members.

The FITT Center approach will be informed by the voices of local families and youth who have dealt with trauma and also by the experiences of local and national traumatic stress experts. Research convincingly demonstrates that all relationships within the family are impacted by children's trauma experiences and that family response is predictive of child outcomes. A strengths-based FITT model is needed to target safety and recovery for the entire family and help all members meet their full potential. The FITT model builds upon existing evidence-based trauma treatments and introduces three new family interventions aimed at partnering with families to strengthen their coping, recovery and resiliency. The new family interventions are:

Strengthening Families' Coping Resources: A multi-family group developed by Dr. Laurel Kizer at UMB's School of Medicine uses family rituals, (Continued on page 2)

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New Trauma Treatment Center to Open

(Continued from page 1) routines and traditions to support family coping and posttraumatic recovery and growth. This manualized intervention builds coping resources for increasing the family's sense of safety, helping families function with stability and cope with crises, regulate their emotions and behaviors, and improve communication about and understanding of the traumas they have experienced. The model includes family work on storytelling and narration, which builds to a family trauma narrative.

Trauma-Adapted Family Connections is being developed and implemented by a team of clinicians and researchers at the Uni-

versity of Maryland School of Social Work led by Drs. Kathryn Collins and Fred Strieder. This comprehensive family strengthening model builds on 10 years of community-based family intervention and research. Trauma-Adapted Family Connections is grounded in public health and social work perspectives. The program builds on existing Family Connections principles and service components while integrating trauma-focused family assessment and engagement, psycho-education to teach family members about trauma symptomatology, a focus on building safety capacity within the community and immediate environment, trauma-informed parenting practices and communica-

tion, and cognitive behavioral approaches to family therapy.

FamilyLive is a trauma-focused, intensive family therapy developed by clinicians at the Kennedy Krieger Institute Family Center (and being manualized by Sarah Gardner of the Center) in response to the complex needs of urban families affected by traumatic stress. FamilyLive addresses the impact of intergenerational trauma on the adult caregiver's ability to provide safety, predictability and emotional security. FamilyLive targets family communication to create an environment in which traumatized children can learn to manage emotions, regulate behaviors, and develop capacity to narrate positive and negative experiences.

Interview with Dr. Fred Strieder

Editor's Note: The Connection interviewed Dr. Frederick Strieder, Director of Family Connections and Co-Investigator of the FITT Center, about the grant.

The Connection: What do you believe contributed to the FITT Center's selection by the NCTSN for the grant?

Dr. Strieder: I think the FITT Center offers a perspective that hasn't quite been addressed before. We are looking at intervention strategies that are family oriented and community-based. We conceptualize trauma in terms of families living in the context of communities—poverty, minimal

resources, protracted violence, etc. Also, we were looking at complex or compound trauma, not just single events. Each partner—University of Maryland Child Psychiatry, Family Connections, and the Kennedy Krieger Family Center—adds a unique piece of the puzzle. The development of an interdisciplinary integration of a multiservice network has the potential to facilitate a coordinated responsiveness to community trauma that should lead to better outcomes for families.

The Connection: You mentioned a family-based approach to trauma. How do you think trauma reverberates throughout families?

Dr. Strieder: If you think of our knowledge of family processes, styles, beliefs, structures and communication, you know that anything that happens to one part of a family affects all parts of that family. Just think of what happens when a family member dies...or even when there is a birth. You change your roles and relationships. Developmentally family processes change, and the family's current coping capacities may be outstripped by an event because they just don't have that repertoire or there aren't enough resources to support them. On a broader level, think about the impact of September 11th. People were struggling to reset themselves, to

rethink what life means and their sense of safety. And then, if a traumatic event happens to a child, it reverberates in the parents. Even good things that happen put stress on a family because members have to modify their historical ways of interacting.

Trauma is clearly a relational issue. What does it mean if it was an uncle who abused a child in the family? What does it mean for your relationship with your community if someone was gunned down on your front steps? Another factor that is significant especially for Family Connections is that neglect is a form of trauma and the multigenerational and social context layers of neglect complicate the process in terms of how families can respond and consequently how you work with the family. For example, you can't do a trauma narrative in the same way, although you'd want to have the family tell their story and retell it in a way that changes the scripts and roles of the characters. Also, trauma work assumes that people have access to some inner resilience, but what happens if there are limited internalized positive self images because of your history. You have to consider how these can be rebuilt or built. And of course, that would affect how parents view themselves and their style of parenting.

The Connection: What are some of the forms of trauma you expect to encounter?

Dr. Strieder: Families can be faced with trauma in many forms. A child can be exposed to domestic violence, substance abuse, pa-

rental incarceration or the sudden death of a parent. Then there's the issue of living in Baltimore City with the gang activity and daily shootings. Even if the guns are not directed at them, families just can't feel safe. These scenarios would be appropriate referrals to get assistance. The important thing about this new program is that we always have trauma in our minds and put it forward to the family as something that needs to be looked at. Even when we have to attend to concrete needs such as housing, medical problems, and food first, trauma still needs to be identified as an issue. It affects how people see their world and how they respond in their daily lives. We must always be asking ourselves how we can embed trauma into our thinking to help people restructure how they look at things cognitively, how they manage their own stress and deal with emotions while still focusing on what this program does best—engaging and building strong

helping alliances so that families can be empowered to navigate and negotiate in life.

The Connection: How will this new grant affect the broader Family Connections program?

Dr. Strieder: Family Connections will not change its mission in any way. All the principles and intervention strategies, in terms of working with families who are struggling to meet the needs of their children, will remain the same. Also remaining the same is the referral criterion that there must be risk factors for neglect, even though trauma may be contributing to that risk. In fact, I'd estimate at least 90% of the families we currently serve are dealing with some form of trauma experience. The question is how they are doing now.



Family-Informed
Trauma Treatment Center

Overcoming Trauma: An Uphill Struggle

By Deborah Sarsgard LCSW-C
Faculty Field Instructor,
Family Connections

Black Beauty, as she asked to be called for this article, endured decades of trauma. As a child, she was sexually abused by her father and became pregnant with his child. She ran away from home at 16 and lived on the streets, relying on alcohol to ease her pain. A series of abusive marriages followed; her body still carries the scars of the stabbings and beatings. She thought she had finally found a man who was different, only to discover that at nights, when he claimed to be working, he was staying with another woman. This was followed by years of homelessness--sleeping downtown on the streets with her children with rats running across their covers--and disabling depression.

"I just lost all hope at that point and wanted to die," she remembers. "My mind snapped. I was saying to myself, 'You ain't nothing no more. You'll always be a loser, getting beat up and lied on.'" Black Beauty could not even dream about a future free of abuse.

Gradually, however, Black Beauty did build a life for herself. She is raising her daughter's two children and about to move upstairs to a larger apartment. She has a stable job. She is married to a man who does not abuse her. "It's not perfect," she admits, "but we're working things out." She adds, "I've learned that I have to believe in myself before others can believe in me and hold firmly to the thought that I am a good person. My older daughter

said to me today, 'Mom, you raised us. We saw how you struggled, you are raising two grandchildren, working full-time.' I can't listen to that part of my brain that tells me I can't do this."

Despite these victories, Black Beauty's life still has its dark moments—the cruel legacy of so much trauma. At one point, she turned to this interviewer and asked worriedly, "Is it normal for me to keep thinking about the past?" The flashbacks can come when she sees a program on television about sexual abuse or passes a homeless woman on the street. She thinks of her trauma as a ghost. "It keeps coming back to me.



"But I had to say, oh no, go forward, strive, strive, strive! I am starting to see this new, stronger part of me, and it feels good. That part of me is going to be a good foundation, going to help me keep striving until I reach that mountain top and scream, HALLELUJAH!"

I'm always afraid it's getting ready to start up again. I ask myself why it still hurts so much. I blame myself for making myself crazy." It is an ongoing struggle for Black Beauty to see those decades of trauma as part of the past, as early chapters in a book that is moving toward a different ending.

She described a revelatory experience with her younger daughter—the mother of the grandchildren she is raising. "I saw me in my daughter. I could see the good parts of myself and her, but she is worn, worn down. I saw the pain in her. It was like I was looking in the mirror. But I had to say, oh no, go forward, strive, strive, strive! We switched and I am starting to see this new, stronger part of me, and it feels good. That part of me is going to be a good foundation, going to help me keep striving until I reach that mountain top and scream, HALLELUJAH!"

Black Beauty uses self-talk to pull herself up--and out. "Every day I tell myself I am a strong Black woman. I am the Queen. I am a survivor. I've got these grandchildren I have to raise until they are 18. That keeps me going now. I can do this. I gotta keep going."

Eventually Black Beauty would like to write a book about her life. She would call it "Me, Myself and I." Her pocketbook is full of scraps of paper with notes she jots down for the time she is ready to begin writing. She hopes that other women will read her book and think, (Continued on page 6)

Intern Experience: Shannon Herman

By Shannon Herman LGSW
Family Connections Intern, 2006-07

[EDITOR'S NOTE: Each year 12 interns from the University of Maryland at Baltimore School of Social Work do their field placement (internship) at Family Connections. Not only do they provide essential services to families, many are irrevocably changed by the experience. The following is excerpted from a presentation Ms. Herman gave to the 2007-08 interns at a panel during their orientation to the program.]

When I entered graduate school, I was fresh out of college and as sheltered and naïve as could be. I was so excited to start my field experiences and knew this would make or break my decision to become a social worker. When my second year rolled around and I was placed at Family Connections, I was beyond excited. The thought of being in a community setting with a group of other students sharing our experiences was a once-in-a-lifetime opportunity to really delve into true social work.

Over my two years at UMB, I became passionate about the type of work I believe social work to be: truly helping vulnerable populations. Working in the Harford County foster care system [as a foundation student] broadened my understanding of the child welfare system, but it was my Family Connections experience that really showed me what I hope to do in my career. It taught me that an open mind is a necessary tool in this business. It showed me how much I do not know or even understand in this world, but that I can work with all

types of clients dealing with a spectrum of issues.

Someone could go through all the schooling in the world, sit in a classroom and study clinical theories or federal and state programs, but nothing beats rolling your sleeves up and diving into this work in a direct way. No textbook gives you that feeling of walking out of a home visit with a smile on your face because you know you just made a difference in someone's life. I bottle up those breakthrough moments so when I may be struggling with another client or another issue, I just go back to that place and time and remember why it is I am doing what I am doing.

I will never forget my first visit with my first case at Family Connections. Debby [my field instructor] drove me to my new client's home, a run-down row house in a fairly dangerous neighborhood. I was really horrified at what I saw, terrified to put my bag down on the floor or even sit on the furniture. I drove home that night questioning my choice of this line of work. I wondered if I could really handle it. I dreaded the next home visit, but once I got there a pressure was relieved. I met these amazing children who were warm and friendly and smart. The mother of the family was so open and accepting of any help I was willing to give. I made a vow to myself that I was going to join this family in a way I would have never believed even possible prior to this experience.

After weeks of working with the family I felt a change in myself. I began looking at the world in a whole new light. I began to understand that more often than not our fates are

shaped by factors such as class and race. The father of this family worked extremely hard to provide for his family, but he was not highly educated and did not make enough money to support his family without help from cash assistance and food stamps. In the culture this family grew up in, education was not a priority when the main concern was getting food on the table. I felt ignorant. I had never once considered that I am really only a result of the opportunities that have been handed to me. Sure, I worked hard to get to this point in my life, but what if I had been born into an inner-city family plagued with disabilities and little hope of ever moving?

(Continued on page 6)



Notes from a Family Connection Experience

(Continued From Page 5) Would I have had a drive in me or the tools to make something more of myself? This scares me because I do not think I would. It was hard for me to leave my client's home where they budgeted out their food stamps to survive and head toward my nice apartment and pick up some take-out along the way because I did not feel like cooking. I started questioning things more than I ever have. Questioning life; questioning why these people and not me; questioning God.

My time with this family also helped boost my confidence in my family work skills and piqued my interest in play therapy. I will never forget the night I succeeded in conquering the chaos in the household and getting the family to focus and talk about their feelings with each other. I will never forget my last session with the family when the quiet father said he comes out of his room more and spends more time with his family since we started our work with them. I will not forget the time the mother asked me to put my handprints on their family Christmas tree skirt. I will not forget the trust the family placed in me to help them and their belief I could be of use even when I was not sure of this myself. In the beginning of my work with this family I wondered how I would ever meet this family where they were when I did not understand in the least where that was. I let the family guide me and in turn joined with them and did some good work with them. As terrified as I was the day I walked in and they said a rat was loose, as sad as the

roaches crawling everywhere made me feel, this was a loving family

I no longer assume things just by looking at people and I really try and hold back any and all judgments I may have once felt. Everyone has a story. Nobody woke up one morning and said they wanted to live in a roach-infested house. No one wishes to become a person living on the streets. Everyone has a journey and we all choose the wrong paths here or there. Along with the choices we make, we are born into a random hand of luck or misfortune. Some of us have loving families, some rich with money and lacking in love, and still others with no familial support and no money. Whatever the scenario, everyone deserves a chance to live the best life they can. I want to take the opportunity I was blessed with and the knowledge base from my experience and my education to assist others in achieving their life goals. I can live my best life by having a hand in helping others live their best life.

In summary, Family Connections provided me with a very deep and fulfilling experience that taught me more about

people and life than any other experience I have had thus far. I took so much with me from this field placement. I feel much more confident in the work that I know I can do. I am much less fearful about working in inner-city neighborhoods. I have seen people overcome adversities most never have to deal with. This work has put everything into perspective for me. I've learned that no matter how bad things seem, there is always some strength to be found. I feel like I am a much better person because of recognizing my ignorance and trying to learn from it and keep opening my eyes and my mind to the truth that surrounds us all, but so few are willing to accept. I am so thankful for this experience and I know that I will take so much of this with me wherever I wind up in my career and in life. The best thing about social work is that it is not just knowledge to use when at work; it is really a way of life.

Overcoming Trauma Continued...

(continued from page 4) "If she could survive all that, I can too." She adds, "I would tell them to keep pushing and climbing that ladder until they reach success...and the stars. We will be millions of survivors from all over the world on this train together just moving up and up, adding others on at every stop."

Black Beauty ended the interview by reflecting, "I've spent a lifetime bouncing back. I've been like one of those

trick birthday candles you blow out and it bursts back into flame. Now it's time to go forward. I have to bounce ahead, not just bounce back. I am going to show my grandchildren how I made it! I am my own cheerleader tonight. I am hooraying myself! Right now I feel so good. I feel like I can express myself. I feel like even the walls are listening to me. I can tell my story. I am a survivor."

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Grandparent Family Connections has gone city-wide. We are now providing services to grandparents who are raising grandchildren (at least one of whom must be between the ages of 5-11) anywhere in Baltimore City. Our former and current clients are our best referral source and we appreciate your efforts in promoting the program. If you know of grandparents in your extended family, in your neighborhood, or in your church who might benefit from some extra support, please refer them to our program.

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