Staff and Foster Parent Perspectives: Child Protection Roundtable Series

November 5, 2025

Jasmine Griffin (JG): Hello, everyone, and welcome to the third session of the three-part Child Protection Roundtable Series. Hear from the Experts, Staff, and Foster Parent Perspectives. I am Jasmine Griffin, a training officer with Switchboard, and I'll be one of your facilitators today alongside Jenna Christie-Tabron, who is our senior training officer here at Switchboard. I'm so grateful to introduce and be joined by our two roundtable speakers and panelists. They both come with extensive experience and knowledge related to child protection.

Amber Perroud is a licensed foster parent through Bethany Christian Services in Michigan, focusing on welcoming refugee youth, teens, and high-needs children. Amber's fostering journey began in 2020 after leaving a corporate career to open a daycare, revealing a deep capacity to love and nurture children beyond one's own family. Since becoming licensed, Amber has provided a safe and loving home for children with complex needs, including two foster daughters whose journeys have profoundly shaped her growth as both a parent and an advocate. Committed to continual learning, Amber has studied trauma-informed care, dialectical behavioral therapy, complex post-traumatic stress disorder, and reactive attachment disorder.

We also have with us Rosie O'Connor. Rosie is a foster parent, therapist, former international foster care social worker, and somatic embodiment practitioner. With over 10 years of experience in immigrant and refugee mental health, Rosie currently serves as clinical supervisor for the anti-trafficking mental health team at the International Rescue Committee, and operates a private practice, Liberated Legacy Pathways. Rosie holds both a Master of Social Work and a master's in international human rights from the University of Denver.

JG: By the end of the roundtable today, you will be able to describe how foster parents and staff build healing-centered relationships with newcomer youth, identify common caregiver mistakes, challenges, and elements for success, and use trauma-informed tools to help youth develop protective skills, such as boundary-setting and self-advocacy. We want to thank you, before we jump in, so much for all of the thoughtful questions you submitted at registration. We hope that your questions have been answered in the two previous roundtables, and hope that we also will answer any of those other lingering questions you may have in today's roundtable as you hear from our experts.

We've received many great questions related to educators and students. For topics like these, we do encourage you to check out our Newcomer Education Community of Practice, which is held monthly for an ongoing learning opportunity. Finally, we will not be going into mandated reporting in detail today. The guide for this roundtable touches on reporting and includes links to helpful resources. We will drop this link in the chat for you. With that, we'll go ahead and jump in.

JG: For our first learning objective, before we dive in, I'd like us to start with a brief reflection activity. Take a moment to bring one youth or caregiver you've supported

to mind, someone whose story still sits with you. Think about what supporting them has looked like, the good, the hard, the messy parts, maybe moments of connection and progress, and maybe moments that left you unsure or stretched your capacity. Just notice what comes up for you, the feelings, the memories, the lessons. This is for you to ground yourself in why this work matters and who you are doing this for.

Keep that person in mind as we move through today's discussion. We'll come back to this person later in the session as we reflect on how our approaches and perspectives might shift. Throughout this webinar, we will be using an interactive tool called Slido. You can log into slido.com or scan the QR code on your screen. The code is 1665 342. Our first question for you all today is, keeping that person in mind, recall a moment when trust and healing started to grow. What helped make that possible? We'll give you all a few moments to log into Slido, and we'll start seeing those answers trickle in.

JG: All right. I'm seeing people logging in now. "Consistent time together." "When I asked more questions." "Open communication." "Building rapport." "Listening." "Genuine connection." "Active listening to their concerns." "Trust." "Checking in regularly." "Story sharing." "Following through on promises." Trust is coming up quite a bit. Active listening is coming up quite a bit. "Allowing them to feel safe around you." "Listening without judgment." So important. "Engagement." "Feeling safe." "Being in the present, in the critical moment." Absolutely. "Space and time to regulate those emotions."

We do have about 23 people logged into Slido. I'll give it a couple more moments for people to get logged in. You all have some really great answers and are already hitting on some points we'll cover today. “Being non-judgmental”. Awesome. I'm not seeing any new answers come through, so I'm going to go ahead and pass it over to you, Jenna, to get us through this objective.

Jenna Christie-Tabron (JCT): Thank you, Jasmine. I appreciate that. Thank you, everyone, for your wonderful input into Slido. We're going to transition now into understanding the core elements of healing-centered relationship. Healing-centered relationships generally revolve around safety. Safety and recovery begin with being able to provide reliable, supportive caregiving relationships. It's not necessarily about fixing the trauma. It's about creating an environment where youth feel safe enough to begin their healing.

For me, maybe for you, or for others, your colleagues, that may look like showing up consistently, whether it's through silence or even through the setbacks. Celebrating some of those small wins. Being consistent and being present and not trying to fix something that you may perceive to be broken. Even with having brief daily moments of connection, that can help to strengthen attachment. When it comes to healing, it's very important to remember that healing is not necessarily just about what you do. It's about how you show up. How are you just present in your everyday life and your everyday interactions? Everyday routines involve making dinner, sitting through silence, showing up even when they want to push you away. All of those things are where the trust is built. When the youth realize that your care is not conditional, that's when they start to exhale, and they start to open up, and the real restoration of the healing-centered relationship really begins to open up and thrive.

JG: Awesome. Thank you for that, Jenna. We're going to go ahead and bring our panel on. Amber and Rosie, I would love to hear from you both. We'll start with you, Amber. What does a healing-centered relationship look like in your home or your program?

Amber Perroud (AP): Thank you, Jasmine. In our home, a healing-centered approach is about intentionally cultivating an environment and relationship that gives even a space for the youth to have the ability to believe that the possibility of trust and connection, and belonging are possible. Often, they've had many people tell them who the people are and not show them through their actions. What that looks like in our home is being a predictable parent, not only a safe caregiver. These children are acutely attuned to any type of shift in environment and behavior, and facial expressions.

Really, that part, as well as being communicative with them and open, giving them unconditional affirmation and positively affirming their value, even though their behavior or history might be complicated. Definitely celebrating their self-expression, their values, their beliefs in our home as far as decorations, toys and books representing culture. Immersing ourselves in community that is representative of the children. That can look like social activities. Finding certain districts, groups that do have communities reflective of them. They often share a perspective we will never understand.

Inside of that also is having a community for the caregiver to understand difficulties that might match that community and their homes as well. Yes, we're big on collective healing. In your close community, having the guidelines of the protective measures and safety you have for your child so that when they're in each environment, whether they're with you or not, they're able to voice their concerns, have people who know the steps that help them, and always having an advocate for them in each space that they are in.

JG: Awesome, Amber. I love that. I love that collective healing. That's amazing. Thank you for sharing. Rosie, I would love to hear from you as well. What does a healing-centered relationship look like in your home or program?

Rosie O'Connor (RO): Yes. Thanks, Jasmine, and thanks, Amber, for starting us off. I think the big thing that comes to mind for me is a lot of the youth that I've worked with as a social worker, and then now the youth who I have in my home as a foster parent, is informed consent. So many of the URMs that I've worked with are of an older age. Just recognizing sometimes, the fact that they might come in at 16, 17, and they've lived a whole life.

Many of them have gone through a number of experiences that really, they did have a lot of autonomy, and they were making really difficult decisions that were really adult-level decisions that we wish that they didn't have to make, but also really honoring that when they come into this different dynamic of a relationship. Figuring and really being in the conversation of what makes sense and why rules might be happening, or a curfew, why that might happen. The why behind it, and being able to talk through it, and figuring out how they make sense of it, and how we make sense of it.

Again, like some of the points, that's a trust-building exercise. It's also we get to engage with curiosity, and we get to figure out, even programmatically, where we might advocate in the program or on behalf of maybe having a shift to the standard protocol for these youth. Again, the age appropriateness of-- and again, cultural appropriateness. I'm just thinking of, I had a conversation with my son, and it took a couple of times for me to be like, "I'm smelling cigarettes sometimes," and he was like, "Nope, nope, nope." Just being like, "Okay," and then talking about it like, "Maybe hypothetically, if one were to be smoking at 17, that's technically against the rules, and many people do it."

Just how we engage with that in a way that normalizes and leads with understanding, while also opening the conversation for some growth and some other perspectives.

JG: Yes, I love that. Thank you for sharing that example. It's so important to share the why also. I love that you said that, too. You both had great insight and thank you for modeling what this can look like in homes or programs. Jenna, I would love to pass this back over to you so you can take us through the second objective.

JCT: All right. Thanks so much, Jasmine. Yes, thank you to our panelists for the wonderful insights. Yes, please, we'd like to hear from you, from our viewers again at slido.com, typing in that same number, 1665 342, or just simply scanning the QR code with your device. We just would like to know what challenges have you had or seen caregivers face when trying to balance safety, trust, and independence with youth? So much can go into caring for young people in general, even those who do not have such unique challenges, such as those within a URM program. We just would like to know, what have you seen?

"Language barriers and cultural differences." I'd imagine that cultural differences is going to come up so much. "Building trust." Correct. So many youth are coming from environments or situations where they could not trust authority figures. There's an even bigger sense of trying to figure out how do you break down some of those barriers and just be authentic. "Youth taking control." We know that's a trauma response in many situations, or it can be a cultural response as well. "Immigration." "Fear of asking for help." "Expectations." "Hyper-independence." I've always had to just depend upon me. I haven't had that ability to depend on others because it's survival.

"Misunderstandings." Yes, the "current laws." "Foster parents resent youth for spending too much time outside of the home instead of bonding with them." That's very unique challenge. Very unique challenge. "Lack of information about the new community." Okay. "I've seen caregivers speak on behalf of or speaking over the youth." Yes. Sometimes on that hierarchy system that we typically would see within a family culture or a family system, is that I'm the authority, so I talk over the individual or for the individual.

JCT: "Youth confide in foster parents, and then foster parents are sometimes afraid." Yes, because of breaking trust. Exactly. That is a wonderful, wonderful example of trying to find that balance, because all it takes is one very well-intentioned act to essentially break trust. You didn't intend for it to be that way. You didn't mean for it to be that way, but it's all about that perception and cultural norms. All right. Our

responses seem to have slowed down-- Oh, "recognizing responsibilities, roles, and relationships." Yes, that's definitely related to culture. What is expected in the culture of origin versus what is expected within this culture here, the resettled culture.

"Religion-centered expectations over trauma and youth." That's a very big one. I saw even on another slide, somebody mentioned, when they think of healing, and they brought up a religious aspect, because that's very important to people and how they cope and how they process information. "Recognizing responsibilities." "Cultural differences." "Humility or curiosity." Thank you all so much for the wonderful responses. As usual, these responses will still remain open. You're more than welcome to continue adding but thank you for everyone who's contributed to this Slido.

Moving along now, as we opened up with that Slido question about some of those challenges, I would like to invite our panelists now to reflect on their own experiences that they have had with the youth that have been in their care or those that they have worked with. What does that look like in practice? What are some of those barriers that have caused caregivers to maybe pull back or maybe even doubt themselves? How have you helped them to stay engaged through those moments? I would like to pose this question to Amber first, please, if you could just tell us what are some of the challenges you've faced when supporting youth that have been impacted by abuse, neglect, or exploitation?

AP: Thank you, Jenna. I have two great examples. They're difficult ones because I feel like these are some of the things not all foster parents know how to ask. One of those is that once you create a space of trust and communication, that is when disclosures of abuse, neglect, and exploitation are going to happen. You have to consider to yourself how you are going to react if and when those disclosures are made, or any difficult disclosure that you might have feelings about but need to really support a child.

In those instances, the very first thing you need to do is just love on that child or the youth. Let them know that your feelings about them have not changed at all, the way you view them. You're not angry. You're not disgusted. You don't blame them. Acknowledge them and sit with them in those feelings, first and foremost. Don't react. Ask age-appropriate questions. Ultimately, don't try to fix everything in that moment. Really sit and hear what they have to say. These instances are really difficult, and you actually don't have the ability to just say the right thing to make it better.

They might not want to tell you out of fear that you'll tell their team. I did see that answer on the last Slido. What I have done in those instances is encourage them that they're safe to tell you anything. While there are some things you don't have to tell other people and can keep secret between you and them, there are some very big things that you can't keep secret to yourself. If and when they are ready to tell you that thing, they're welcome to, but you can't keep it a secret if that's what they want you to do right now.

AP: In those instances, make sure you're sitting with them co-regulating, whether that's breathing exercises, doing co-regulation activities like taking a walk together, painting art together. Those are some things that can really bond trust and

communication. The second one I'll speak on a little bit quicker is when the youth or child have an intent to harm someone in the family or themselves. In those situations, also as the first, is to stay calm and validate their emotions. In these instances, definitely avoid any type of punishment. The only important thing at that moment is ensuring the safety of your youth.

Many have heard the fire analogy. I'll share it here. If you have a fire growing in your kitchen, you yell at it like, "Hey, you need to stop. Fire, if you don't change right now, you're going to have your phone taken away. Fire, if you spread to the next room, that's really it." The fire doesn't care. Those are what our children are often experiencing in their brains. Until that fire is actually contained, they can't hear a single thing that you're saying, whether that is they don't care about the phone. A fire is not going to care about the phone. Taking away the phone is also not going to prevent that fire from happening the next time. Our kids are matches, and their PTSD is going to continually light them.

Strategies as far as recognizing the driving factor, what the trigger is. Listen and empathize, if they want you to just sit there or have a solution and work with their therapist and caseworkers, especially if it's something that is very important, the whole team is there to really care and build up this youth.

JTC: That was wonderful. Thank you so much, Amber. I love that prior analogy because that's really what it's about, right? That window of tolerance. When they're outside of it, there's no rationalizing. There's no, "Hear what I'm saying." It's all about, "I'm emotional in this moment." Rosie, what about you? What challenges have you possibly faced when supporting youth impacted by abuse, neglect, or exploitation?

RO: Yes, I think this first bullet point of just saying the wrong thing or making it worse. I think that perfectionism and that feeling of over-accountability of, "I should be able to do something or fix this," I think that gets really activated in pretty much all of my roles, even in friendship, but particularly as a foster parent and a staff person who have worked with URM. I think right now, just the constant stress around various documentation statuses is something that's in the world. I think one of the greatest things that we can offer just as humans is a regulated nervous system or an honest nervous system, for lack of a better word, because we might be escalated too.

Even that can be really affirming to be like, "I'm really pissed too about this. I feel out of control." That can be normalizing to be like, "Oh, it's not just me." Even as I say that, finding that balance is also hard because I want my kid or the youth I'm working with to be able to trust me, but I also want to be honest about what they can trust me about and what I don't know. I think a big piece around the challenge is a little bit like what Amber did is the challenges are often when I get activated around my own powerlessness to do anything.

RO: Building that capacity to sit with the discomfort of not knowing and being able to hold space for that and be with that with the kid and being like, "Yes, I don't know either. You're not alone in this. We get to be in this uncertainty together, and I've got your back in it." I think the other piece of that is also, again, this is off of what Amber said of really centering the client and or the youth when you're working with them and affirming when they disclose something, just being like, "Thank you. Thank you

for sharing what you shared." That can be so meaningful, even if you're terrified by what they shared.

Just to be like, "Thank you so much for trusting me." Then also naming in a way that doesn't make them responsible and being like, "Wow, just hearing that makes me feel really scared or really nervous. What are you noticing right now?" This is very much like the therapist in me, but it has really helped my relationship with my kid and my relationship with my clients to just be able to be like, even in the last point of the youth may minimize or normalize what's happened, I've had youth disclose really terrible things that happened to them in their journey and them minimizing it.

Me being like, "Wow, it's mind-blowing to me that all that you've experienced in your life," and highlighting that, "most 17-year-olds haven't experienced all of that." That's not to be like you had a terrible life, but it's just to be like, "Oh, most of your peers in [the U.S.] haven't run from people with guns, maybe." Just to right-size their experiences.

JCT: Thank you so much, Rosie. I think it's very critical, what you said. It's a beautiful reframe in terms of it's not just a regulated nervous system, but an honest system. That helps to really reduce some of that shame when you can say, "Hey, it's okay because you're having this big feeling, this big emotion, and you're not alone in it because I'm also feeling it with you and for you as well." I think that's a really powerful way to look at it. It's not even just regulation. It's just being able to name it, and externalize it, and get it out. Thank you so much for that perspective. Amber, do you have anything else that you would like to add quickly before we move on to our next engagement activity?

AP: Yes. I just wanted to comment on caregivers that are feeling unequipped to safety plan or respond to reactions and report appropriately. I like to say the things that are hard for other foster parents to say, and that is understanding when you are at your limit of being the best option for that youth, or when it is unsafe for yourself or your home. I have been in a different situation where it's just myself and my dog, but you have to consider if there's other kids, what other risk factors are in the home. You may resist that as much as humanly possible.

I would definitely recommend to listen to the care team, the staff within your agency, either within your own therapist or advisor, and accepting that, because you might not see the limit in which it is actually unsafe for you.

JCT: Wonderful point. Thank you. Sometimes we forget all of the different people in the support network that are helping when we're working with any type of youth in this situation. Thanks, Amber. We would like to move forward with another activity for engagement, another Slido. We want to hear from you because you all are in the field. You're working with the youth on a regular basis. How might you support youth and caregivers who are navigating some of these challenges or similar challenges that we've discussed so far today?

Once again, joining on your browser at slido.com, typing in that number, or using your device to scan the QR code to record your responses. How might you support youth and caregivers? "Patiently and carefully." That's really all you can do sometimes, right? Just being very cautious with the words, with your actions, and

just being as patient as possible. It's not going to be a quick fix. "Scripts or role-playing for difficult conversations." That's a wonderful tool to have. "Providing resources for outpatient therapy/counseling." "Sharing resources in their language." That helps with comfort, and that helps with understanding and comprehension.

"Love and care." "Being honest with both informing of separate relationships." Okay. "Building trust to provide a safe environment." "Understanding of their perspective." "Engagement." "Providing support groups and other relevant trainings." Yes, sometimes it's some psychoeducation. It's just being able to provide you, arming you with the knowledge. "Locating community groups." "Youth-focused conversation." Yes, it's about the youth. "Check and ask if they are comfortable with a moderated conversation with the goal of action steps to help the relationship." That's a wonderful strategy. Thank you so much for sharing that. Very detailed.

JCT: Sometimes you just have to check in and ask, is this okay? Can we do this? "Linkages to resources." "Treating everyone as being part of the team." Yes, we're all pieces of the pie, and we're all working towards the same goal collectively. We just have different roles towards that goal. "Create safe spaces for both youth and caregivers that they have access to in a realistic way." Thank you for mentioning being realistic and access. Some things might sound accessible in theory, but in practicality, that may not necessarily be the case. That's wonderful. Thank you all for your responses. I appreciate your engagement.

Moving on to success. We talked a lot about those challenges. Our wonderful panelists, I'd like to draw you back into the conversation again, sharing with us your expertise. What has success looked like for you when supporting youth, Amber? What does it look like? What does it seem like? How does it look in the home? How does it look in the program, with the youth? What do you see?

AP: With the youth, I have seen exponential improvement. That's one of the most fun parts, is when they are walking into their normal life. School, extracurricular activities, sports, what have you. Feeling a sense of self-assurance in different situations that they might have been picked on. Really showing the self-confidence and self-advocacy. Being able to express any big or little instances in which they feel uncomfortable, and seeing how the actions and learned behaviors, and guidance in our home extend to when they are in the public. Saying language like, actually, that's not something that's appropriate to talk about when they're interacting with other children or young ones. Letting us know whenever they're nervous. Then reconciliation. My oldest had to leave for about six months. Well, she chose to. It was consistent bidding for connection and fostering a relationship. Probably weekly or monthly letting her case team know, her therapist, "I really want to speak with her."

It took about six months, but showing her consistently that whatever happened, she is loved and cared for. At the end of that, she chose to come home. She chose that this is her family. It was no longer just a placement. I ended up delivering her baby in April. Just seeing that payoff is really what it's all about.

JCT: That is a very wonderful and heartwarming-- oh my gosh, very heartwarming story. Thank you so much for sharing that, Amber. It's no longer a placement. It's now your chosen family. That's beautiful. Happy that you were able to provide that environment for her, that she felt that she can call you her family. That's wonderful.

Rosie, what about you? What does success look like for you when you've been supporting youth?

RO: I think it's such little moments. Sometimes it's non-traditional. Sometimes it's like a kid dropping out of school. It doesn't necessarily sound like what we think of in dominant society as the successful track. Sometimes that's actually the most affirming path for this youth. That's success because that's what will support this youth on their path. Really opening up to what does success look like in the most expansive way. Some of the other thoughts is increased emotions. I had a dear friend be like, "Oh, I can't wait till your kid gets really pissed at you, because that means he's truly safe." When he can yell at you and get really angry at you, there's a level of safety that that requires.

I've totally reframed that. I think also another form of that ilk is increased disclosures. In the first couple of months, my kid was still at the three-month mark, a lot of disclosures came. It was hard for me in some ways. I have a lot of experience in this kind of thing, so it was easier than I think the average person. It was a hard moment, and the reframe was often like, "Oh, now he feels safe enough to be talking about some of the hardest moments of the last two years." That's actually a beautiful affirmation and reframe of that. Little things or asking for things. Being in the grocery store and being like, "Oh, can I get a Red Bull?" Again, the safety that's there to be able to ask for things.

RO: I had a client, and this client sticks with me for many reasons. At one point, we were trying to get him to plan. He really wanted to be in independent living. He wanted to live on his own. We were like, "Okay, if you want to do that, great, let's budget. Let's develop a budget so we can figure out when you're going to be there." It was a good six months of doing this with him. We were trying to do it in different ways, and all of these different things. Then, at one point, I was like, "Why don't you want to do this?" He was like, "Rosie, you don't get it. Every time I've ever planned, things haven't gone according to plan, and I've just been incredibly disappointed."

He was in a place where he was able to vocalize that, but that shifted the way I approach the world and working with these youth because it was like, "Oh, right." For me, my conditioning in my life has been, when I plan, I get the thing I planned for. In his conditioning, in his experience, every time he hoped for something or planned for something, he was disappointed, and it was a hard thing to experience. To reshift that to be like, "Oh, it makes sense," you don't want to get your hopes up.

Similarly, it's like, oh, in those moments of having more access to planning, having more access to celebration, is like, "Oh, we did it." It's often really little things, like my kid's birthday was last week, and he was like, "I want it to be a totally normal day." Then he was like, "We can maybe have dessert." I was like, "Cool, win, calling it a win, calling it a win." [laughs]

JCT: Wonderful examples, Rosie. I so appreciate these wonderful reframes that what would have been everyday, normal interactions without this additional context. We might have missed those key moments, missed those key opportunities for celebration. I so love how you mentioned the safety and reframing what safety really looks like, because I remember hearing that from one of my professors in grad school, is that children act out in the environments in which they feel the safest.

It's an honor and a privilege when they come to you with those massive emotions. When we can remember that we know we're doing the right job. Thank you so much for giving us that reminder. All right. I will pivot back over to Jasmine to carry us through our last learning objective.

JG: Yes, thank you so much. All of that was wonderful. I love hearing from our panelists. We're finally at our last learning objective, which is trauma-informed tools to help youth develop protective skills such as boundary setting and self-advocacy. Before we go back to our panelists, I'm going to give you a quick crash course on trauma-informed care. Just some refreshers for you all. Trauma affects more than emotions. As you've heard, it can shape the physical, emotional, and even spiritual well-being of an individual.

For youth who have experienced loss, violence, or displacement, their body and mind may still be responding to past danger, even in safe environments. That's why trauma can show up in so many ways, through behavior, relationships, family dynamics, or how someone engages with their community. What we see on the surface often has a much deeper story underneath. A trauma-informed approach focuses on building those relationships that are restorative, not corrective, helping youth experience what safety, trust, and care can look like again.

It also reminds us to see the whole person, not just their case file or their behaviors, but to understand how culture, identity, and context shape their experience of safety and healing. Finally, it asks us to be mindful of potential triggers, whether that's our tone, the setting, or routine, so we can create environments that help youth and caregivers stay regulated and open to connection. With that, we're going back to our panelists again. Rosie, I would love to hear from you first this time. How has using a trauma-informed approach changed the way you support youth in building protective skills?

RO: I think the big piece that I will focus on is how we show up with trauma-informed care for ourselves. I think a lot of the time when we think about trauma-informed care, it's other-focused, and it's like, how do we model taking care of ourselves in our role as foster parents? Again, I'm speaking more for foster parents here or for staff supporting foster parents. It's like, how do we recognize where we are and what we can and can't offer in this moment?

I think, again, a concrete example is, a while back, I had a fight with a dear friend of mine, and I came home and was feeling really pressurized to hide it from my kid. I walked in and he said, "Mom, how are you?" and I burst into tears because I'm not very good at hiding my emotions. It was actually a really beautiful opportunity where, first, he was like, "Okay, I'm going to kill him." Then I was like, "Well, actually, he didn't do anything wrong. He did something. We both hurt each other, and we're both hurting because we hurt each other because we just missed it."

[Visualizing] the way that I moved through my emotions, that I needed a good cry, and that no one is bad because we hurt each other. Again, opening to being able to model and be with my own emotions with him and process that with him was just a really beautiful way. Again, intentionally, it wasn't about him, so that was helpful to maybe not have it be with him. That's one way to show how I manage my own emotions really openly with him.

JG: Yes, I think it's so important to also show the youth that it's okay to show your emotion. It's okay to cry. You modeling that for him to show what you're feeling, I think that's so valuable. Thank you for sharing that example. Amber, would love to hear from you as well. How has using a trauma-informed approach changed the way you support youth in building protective skills?

AP: Yes, thank you. One of my examples and points is understanding that they're doing the best they can with the skills that they have, the things that they've been taught, the access to those things, the knowledge, and communication. Understanding allows the opportunity to address the root cause of building protective skills with them. An example is my youngest. I made spaghetti one night on the stove. She wanted to heat it up. I said, "Yes, just put some in the microwave." 10 minutes later, the microwave is blowing up and sparking because she just put the entire pan into the microwave.

It was just a small realization like, "Oh, she hadn't used that." Seeing everything as a learning opportunity for them, we're teaching children in our homes how to be in the world. Observing their triggers and changing them, I learned early on that if my voice goes over a certain level, she is immediately triggered by PTSD. We've talked about it before. Really admitting to your fault, "Hey, that is absolutely nothing that I want to do or something you ever deserve. Please tell me, what can I do different next time? Is there something you need from me?"

AP: Then, going over what worked, what didn't, what should we do next time? Acknowledging their small things. You took responsibility for that. That really shows growth. I know that was hard. I'm even more proud of you when you tell me the truth than when I find out later. A rule in my house is if you tell me the truth, you're not going to get in trouble. You have to tell me. As long as I'm not finding out and I find out from you, we'll work on a skill, we'll work forward.

Following through with that, they can actually trust that that is the case. Another rule that we have is if I am talking out of my character in a conversation, when we recap the conversation, I ask if I have a consequence. Oftentimes, I will have to do my children's laundry or do their chore or whatever. It also helps to keep me in check and them seeing that even though there's a child-adult dynamic, each person deserves respect.

A big one in our house is also co-regulating through relationship with them. Activities, breathing together, walking together. Things that show them that their emotions can be managed safely, even in the presence of other people, in proximity to other people or events, and that they don't feel like they need to go away for that thing. Yes. One example I want to give is my youngest also had a real need for leaving the house. She didn't necessarily want to run away, but she had to know that she could get out of the place.

That would happen at any time of night or morning. I tried for a while to stop it, put all the safety things in place. The more I did that, the more she found ways that were more unsafe to get out of the house. Rather than controlling that behavior, working with her, of, "Okay, how can we make this work?"

Eventually, that was the doors are unlocked, the beepers are on. I can hear when she goes out. She can stand in the yard at any time of day or night and ground out there, but she cannot leave the property. It made her feel more restricted and out of control if she just had to stay in the house. I was like, "This isn't safe. We're not going to do it." We had to really work with what a safe way was to work with her on that.

JG: I love that, Amber, both of those examples. I think the biggest thing I'm taking away is that debrief and reflection after a stressful time, or event happens, that you're going back over about what went well, what didn't go well. What can we do better next time so that we're not blowing up the microwave again or something like that. Thank you so much for sharing those examples. All right. We have another Slido, and we would love to hear from the audience again.

Which of the following are examples of protective skills youth can develop? This is a multiple-choice where you can choose multiple answers. Recognizing when a situation feels unsafe or uncomfortable. Setting and communicating personal boundaries. Identifying trusted adults and reaching out for support. Asking for help or reporting unsafe behavior. Using coping skills to manage strong emotions, and lastly, avoiding all social interactions to stay safe. I'll give you all a few minutes to select.

[pause]

JG: It looks like we have a lot of participation on those first four, which is great. I'm not seeing anyone select avoiding all social interactions, and I'm happy to see that, because that is a wrong answer. It's not one that we want to select here. When we talk about protective skills, we're really talking about the tools that youth use to protect their safety and advocate for themselves. For newcomer youth, this includes recognizing unsafe situations, setting boundaries, and knowing who to turn to for help.

It's not just about reacting. As you heard from our panelists, it's about giving youth the confidence and the skillset to make safe choices before something happens. The guide also that accompanies this series tells us that youth safety education works best when this is done with our youth. I think it was mentioned before that this isn't about us, it's about our youth. For newcomer youth, this may be the first time they've been experiencing or encouraged to make decisions or to say no.

Our job is to model and to practice those skills in safe supportive ways. Thank y'all so much for participating in this Slido. You all nailed it. We're going to jump back over to our panelists again, and we have our last question before we jump into the Q&A. Rosie, we'd love to hear from you first. How can caregivers and staff help youth practice protective skills in daily life? We've seen what the protective skills look like, so we'd like to talk more about how we build and practice them.

RO: I think the biggest thing, for me, is thinking about or asking them how they make the decision. They're making decisions all the time. How do they know what they're saying yes to, and what they're saying no to, and what's their why? Again, it's more of the process of it than the answer, even. I put this in the chat, but I think there is also a lot of harm reduction pieces to this, where it's like-- I think our primary role, and it's amazing that it got to here for me to say this, but I think our primary role as

adults in youth's lives are giving them the information so they can make an informed decision about how they want to move.

It is not our role, whether staff or parents, to make the decision for our kids, for the youth in our lives. We are here as someone who's been around the block a few times, and we get to be like, "Well, this is what I've seen," and give them the information that they may or may not have. Then be like, "What do you think about that? Where does that put you?" and be in that process with them, and be like, "Oh, right. It's putting you in this path. Have you thought about this?" Not, "You shouldn't go there because of this."

RO: I think that's being in the decision with them. Again, short anecdote, kid came home and was like, "Mom, I have something to tell you." My heart starts beating, being like, "What's about to come out?" He's like, "A girl asked me to be her boyfriend." [chuckles] I was like, [sighs] "All right, we're good." Then he was like, "I don't want to." I was like, "Okay. Well, why don't you want to?" Talking through it, and then based on that, figuring out what he could say to her that felt in integrity for him, honest, not a lie.

We got to be in that process, and I got to be fully present with him as he moved through that. I just asked questions to help him understand where he wanted to go with it.

JG: Wow, that's great. That trust that you've built with him was able to curate that relationship and that conversation, so I love that. Thank you. Awesome. All right. Ms. Amber, I would love to hear from you. How can caregivers and staff help youth practice protective skills in daily life?

AP: Thank you, Jasmine. One of the biggest ways is showing them what you say. One of the rules in my house is anybody that comes here is welcomed as they are, full of love. We don't make anybody feel uncomfortable. Showing them, you do the same thing. There's been family members or something that I felt have said something that might impact the youth or their history, and it's showing them, in real time, asking them to leave. That is just something we don't accept in our house.

Trusting and believing them when they're feeling uncomfortable, creating the space. My daughters, if they say, "I don't feel comfortable being here," or "I don't feel comfortable around that person," we just leave. I'll ask them questions later. Showing them that I am prioritizing that when they ask for something, especially when it involves safety and protection, that that's going to happen.

As far as discussing real-world examples, my youngest is now in middle school. She loves the game that became controversial for its access to children. Explaining to her also about how that works, how even sometimes adults don't understand technology, and we have to know what we're keeping them safe from and giving them alternatives to doing those different things. Definitely hearing them and seeing them and modeling what you're saying and following through with it each time.

JG: Awesome. You really touched on that point, encouraging the youth's voice in safety, and those routines. I love that. Thank you so much for sharing. We're going to go ahead and move on to our reflection activity. Before we jump into Q&A—I

promise you it's coming—we would like to invite you to have one final reflection. Take a deep breath and think of the youth or caregiver whose story has stayed with you.

Someone navigating safety, healing, or trust after loss or harm. Maybe it's a young person who's learning to rebuild safety after exploitation or neglect. Maybe it's a caregiver who's learning to stay present through a youth's hardest moments. Hold that person in your mind for a moment. Picture their face, their story, what they've taught you. Now with them in mind, let's reflect together with our final Slido, asking you to fill in the sentence that's on the screen.

JG: After today's roundtable, I want to support their safety and healing by? How would you fill in that blank? Holding their journey in mind, what new mindset or approach or way of showing up will you carry forward to better support their protection and healing? Just take a few moments to think about what comes up for you. “Never making promises that I cannot keep”. It's huge.

“Being a safe space for them”. “Listening”, “Reframing challenging behaviors as acting out in a safe place”. “Being present”. Sometimes being present doesn't require us to say anything; it's just our physical presence. “Continuing to allow them to take space and meeting them where they are mentally and emotionally”. Absolutely. “Creating a safe space and being calm in their presence”. “Taking care of your own emotions”. We talked about that early on. It's so important.

“Through meditation and other practices to prevent burnout”. Yes. “Listening and guiding and supporting”. “Recognizing your own feelings and not being afraid to ask difficult questions”. We don't have all the answers, and sometimes our youth have those answers. “Raising the strengths and skills that survival has taught them”. That's such a powerful statement. “Allowing them to share and being safe and empathetic.” These are great. Really great.

I'm not seeing any new answers pop in. I want to thank you all so much for sharing. It's really powerful to see how each of you have taken what we've explored today and grounding it here in real relationships and stories. That makes it so meaningful. I'm going to go ahead and pass it over to Jenna to take us through our Q&A.

JCT: Thank you, Jasmine. Thank you all for your participation. These are some wonderful responses. I'm just in the background like, "This is great. I love it." In the interest of time, I first wanted to say thank you to everyone who submitted questions ahead of time. Unfortunately, we will not be able to get through all of them before the roundtable ends today. We will be happy to follow up with you all with a brief little Q&A, little cheat sheet for you that you can take and you can refer to later with your practice.

For Amber and Rosie, we have two that we would love to get your insight on. First, Amber, followed by Rosie, if you could just answer for us, what advice would you give to other foster parents or those considering fostering?

AP: My advice would be that time will heal most things. While you can't love the trauma out of a child, you can walk side by side with them through it as long as that takes for them. My oldest once asked me what it was like being a foster parent. I

said it's like being at Cedar Point and you're about to go on the top thrill dragster, and you realize your seat belt's not buckled and your harness didn't come down, and it counts down and you shoot off and you just hold on tightly as you can through all of the twists and turns.

In the end, you will be laughing with each other, looking like, "Holy heck, we made it." It's going to take a long time to get there. It's going to seem like it's happening and it's going to stop happening for a while. Yes, just seeing the inner child in them and knowing that you're building that adult version back up.

JCT: Great responses. Rosie, what about you?

RO: Yes, I think that I echo and affirm all of what Amber was saying. Also, just zooming out, it doesn't have to happen now. It's a lot of micro-moments. It's like Brené Brown's building trust thing. It's a lot of little marbles, and you don't know what those little marbles are. It might just be remembering their sibling's name, but that's building the trust. Also, it's going to be hard, but it's a beautiful hard in a way that it's a whole magnificent portal. You can do it, and you have support.

JCT: Wonderful. Thank you for that. It's a beautiful hard. It's so much all about just your perspective and how you approach it. Rosie, since I have you, I wonder if you could respond to our next question, and we'll toss it over to Amber. What has been the most helpful support you've received from a case manager or service provider to maintain a collaborative relationship while supporting you?

RO: I think being able to really be on a team, feel like we're on a team. I think this is true in my foster parent role, but also as being in the staff role. There are some really hard things, and sometimes, again, in the same way of being with your kid and being like, "I don't know," it's just being able to be with somebody. I'm a solo parent. I'm a non-traditional parent. There's so many pieces that show up for me, and feeling like I'm in it all alone. It's really beautiful to just be able to be in the unknown, be in the quaking, be in all of it with other people that care about this kid, too.

Also, just really being in my emotions in it, especially in my foster parent role, but also even when I was in a social worker, in some of the hardest cases that I have, being able to be in my own stuff with the foster parent to be like, "This is scary," or "This is hard." Of course, we care about this kid and letting ourselves bring that human part about it.

JCT: Excellent. I love the acknowledgement of that this is hard, [chuckles] this is difficult, but it's manageable. It can be done. Amber, what about you?

AP: I'm going to do my best not to get too emotional through this one. No, it's already happening. There's many, but in two instances with both of my girls. My oldest, it was a short time in that I found out her first caseworker with Bethany Christian Services was still around. Carlyn Sperling was on the last series roundtable. She created the IRM program here in Grand Rapids. I found out through her involvement that she was still around, and I invited her to my oldest graduation, as well as some of the caseworker team, therapists, previous respite families.

She had an entire section sitting there for her when she graduated a year early. I ended up being involved in-- Then with my youngest, her original caseworker internationally has kept her very much in her heart as far as updates, letting me know things that have happened there that might benefit her continual care. Then throughout these people, our team at Bethany, the refugee team, has been incredible, even when the caregivers have changed or the caseworker, anybody on the team has changed.

AP: Each person that has come in is just as incredible, as well as the respite families that we have. We typically use the same ones. My oldest, when she was expecting this year, I threw her a baby shower and invited previous families, caseworkers, people involved, and over half of the room was packed with them. Previous foster siblings, and I could see the whole community that had really raised her and brought her along in the whole way and the fact that they were still there and still present for the next generation was just wildly touching. Those are my examples.

JCT: Those are wonderful examples. So happy to hear that people showed up and showed out. It was the village. That is so, so beautiful. Thank you so much for sharing those wonderful stories. I think we have time. We can slip in one more question. This one actually came through during our webinar today. It says, what are some ways that you have successfully explained or helped build coping skills for situations like emotional hijacking for youth who come from backgrounds where it is not culturally appropriate to discuss strong emotions or emotional reactions?

What are some ways that you've helped build those coping skills in those situations? How do you cross over some of those challenges? Rosie, would you like to tackle this one first? Thank you.

RO: Yes. I think one of the first things that come up for me is Dan Siegel's concept of flipping the lid, which is just like, basically, when you're in that emotional hijacking place, it's like you aren't thinking with your frontal cortex. You're not online. Normalizing that as that is something that when we get activated, that happens, and we won't be able to get back online with our choice and with our forward thinking until we get out of fight, flight, freeze space. There's that psychoeducation piece. Then there's also another piece of how do you build in more light-touch, easy ways to open into that and let off some steam there.

The thing that I've implemented with my kid is when we touch base when he gets home from school or when I get home from work, I say, "What was the best thing in your day and what was the hardest thing in your day?" That just starts a conversation. We don't have to go into it, but it's an opening for like, "What happened, and where are we today?" Now he starts to do it to me, too. It's a cool check-in of like, "What's our mood? What's the best thing that happened today, and what was the hardest thing?" To get a lay of the land when we're coming back into community with each other.

JCT: Wonderful. Thank you. I love it. I love how you modeled it so much, and now it gets used on you. That's excellent. Amber, do you have anything that you'd like to add before we close out our roundtable in a few?

AP: Yes, I would just say modeling and reflection are two of the biggest ones. Knowing that their amygdala is completely offline, ensuring safety first and foremost until there is regulation. My youngest, "I don't want any of my Christmas presents." Not reacting to the things that they're saying at that point in time. Then later, when there is reconciliation and repair, you go, "I know you said this and you really didn't mean it. That was a reaction."

Sometimes our bodies feel things before our brains do, and we have to practice our skills where our brain has more skills and has more knowledge than our bodies do. Yes. My youngest is from another country where the idea is women cannot raise their voices to men. There was a time I had to get stern with someone over something I didn't feel was right or safe. She said, "I don't think you're allowed to do that." I said, "You are allowed to advocate to anybody or for yourself to anybody, whether that's adult who you don't feel is safe or treating you properly." Again, modeling and then reflection with them, too. Really digging in.

JCT: Excellent strategies. Thank you. Thank you. Thank you so much, both of you, for lending your expertise and your knowledge and your experiences with us. To our wonderful learners, thank you so much for joining us today. We hope that by the time that we've reached the end point of our roundtable, that you are now able to describe how foster parents and staff build healing-centered relationships with newcomer youth, how to identify common caregiver mistakes and challenges, and elements for success.

Finally, we hope you're able to use the trauma-informed tools to help youth develop protective skills such as boundary setting and self-advocacy. We would like for you all to help us help you. Please, before you go, scan this QR code or click the link that's going to go into the chat to access our feedback survey. It is only five questions. It takes less than a minute to do. We just ask that you would please help us to improve our future training and technical assistance offerings here at Switchboard.

I'll give you a moment to get that done. [silence] Do not be dismayed, we will be providing you with recommended resources, but Switchboard has a wonderful resource library, inclusive of webinars, tip sheets, e-learning videos, and other blogs and written resources to help you provide the best care to your youth or your adult clients, whomever it is that you're working with. Be on the lookout for those links to come through so that you can always continue to be an active learner as you work with your clients.

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