

# SPARK A LIFE

GIVE THEM BACK  
THE MOMENTS THAT  
MEAN SO MUCH.



BLUEWATER

FAMILY SUPPORT  
SERVICES INC.

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**It takes one connection to change the pathway for a child. Be the light to a child with a troubled life.**

Your compassion and our guidance enables hope and stability to children facing real life challenges. We develop tailored improvement programs to foster physical, emotional, social and intellectual growth for children in care.

**CALL TODAY!**

## PRINCIPLES of CARE

When a child's early attachment history consists of abuse, neglect, and/or multiple placements, s/he has failed to experience the dyadic interactions that are necessary for normal development and s/he often has a reduced readiness and ability to participate in such experiences. Many children, when placed in a foster or adoptive home that provides appropriate parenting, are able to learn, day by day, how to engage in and benefit from the dyadic experiences provided by the new parent. Other children, having been much more traumatized and compromised in those aspects of their development that require these dyadic experiences, have much greater difficulty responding to their new parents. For these children, specialized parenting and treatment is often required.

For such treatment and parenting to be effective...it must be based on parenting principles that facilitate security of attachments and which incorporate an attitude based on playfulness, acceptance, curiosity, and empathy. The foundation of these interventions -- both in home and in treatment -- must never involve coercion, threat, intimidation, and the use of power to force submission. \*

\*Our 'Principles of Care' were borrowed significantly from the work of Dr. D. Hughes modified from his website, <http://danielahughes.homestead.com/Model.html>

2130 Parkhill Drive  
Parkhill, Ontario. N0M 2K0

519.294.6213 ph  
519.294.0279 fax

[www.bluewatercares.com](http://www.bluewatercares.com)



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The following represents a list of general principles that should be characteristic of the Bluewater treatment and parenting model.

1. Eye contact, voice tone, touch (including nurturing-holding), movement, and gestures are actively employed to communicate safety, acceptance, curiosity, playfulness, and empathy, and never threat or coercion. These interactions are reciprocal, not coerced.
2. Opportunities for enjoyment and laughter, play and fun, are provided unconditionally throughout every day with the child.
3. Decisions are made for the purpose of providing success, not failure.
4. Successes become the basis for the development of age-appropriate skills.
5. The child's symptoms or problems are accepted and contained. The child is shown how these simply reflect his history and how they need not be experienced as shameful.
6. The child's resistance to parenting and treatment interventions is also accepted and contained and is not made to be shameful by the adults.
7. Skills are developed in a patient manner, accepting and celebrating "baby-steps" as well as developmental plateaus.
8. The adult's emotional self-regulation abilities must serve as a model for the child.
9. The child needs to be able to make sense of his/her history and current functioning. The understood reasons are not excuses, but rather they are realities necessary to understand the developing self and current struggles.
10. The adults must constantly strive to have empathy for the child and to never forget that, given his/her history, s/he is doing the best s/he can.
11. The child's avoidance and controlling behaviours are survival skills developed under conditions of overwhelming trauma. They will decrease as a sense of safety increases, and while they may need to be addressed, this is not done with anger, withdrawal of love, or shame....

It is easier to list interventions never to use at home (or in therapy) than to list all of the possible interventions that you might use. A good rule of thumb for what interventions to use is consistency with the principles of attachment and trauma theory and research.

The following interventions are NOT found within our treatment and parenting model:

1. Holding a child and confronting him/her with anger or to provoke a negative emotional response or until s/he complies with a demand.
2. Poking a child on any part of his/her body to get a response.
3. Pressing against "pressure points" to get a response.
4. Covering a child's mouth /nose with one's hand to get a response.
5. Any actions based on power/submission, done repeatedly, until the child complies.
6. Any actions that utilize shame and fear to elicit compliance.
7. "Firing" a child from treatment because s/he is not compliant.
8. Punishing a child at home for being "fired" from treatment.
9. Sarcasm, such as saying "sad for you", when the adult actually feels no empathy.
10. Laughing at a child over the consequences which are being given for his behaviour.
11. Labelling the child as a "boarder" rather than as one's child.
12. "German shepherd training", which bases the relationship on total obedience.



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13. Depriving a child of any of the basic necessities, for example, food or sleep.
14. Blaming the child for one's own rage at the child.
15. Interpreting the child's behaviours as meaning that "s/he does not want to be part of the family", which then elicits consequences such as:
  - a. Being sent away until s/he complies.
  - b. Having to live in his/her bedroom until s/he complies.
  - c. Having to eat in the basement/on the floor until s/he complies.
  - d. Having "peanut butter" meals until s/he complies.
  - e. Having to sit motionless until s/he complies.

Additionally, the CFSA prohibits further caregiver behaviours:

16. Striking a child, directly or with any physical object.
17. Shaking, shoving, spanking or any other forms of aggressive physical contact.
18. Allowing the punishment of a child by any other child or group of children.
19. Requiring or forcing the child to repeat physical movements.
20. Using harsh, humiliating, belittling or degrading responses of any form, including verbal, emotional and physical responses.
21. Depriving a child of what s/he is entitled to or what is necessary or proper development, care or treatment. This includes but is not limited to family visits, food, shelter, clothing or bedding.
22. Extensive withholding of positive emotional responses or stimulation.
23. Placing or keeping a child in a locked room.
24. Requiring a child to remain silent for long periods of time.
25. Using mechanical means or excessive physical restraint.
26. Excluding the child from entry into the home or residence.
27. Assigning unduly physically strenuous or harsh work.
28. Confining a child to bed for a prolonged period of time.
29. Threatening to remove the child from the home.
30. Deliberately destroying a child's property in retaliation of behaviour.