

# Shining Bright Family Camp 2022

Based on Trust Based  
Relational Intervention® (TBRI®)

**Family Connections Christian Adoptions**



Dear Prospective Camp Family,

We are thrilled to be planning to offer the Shining Bright Family Camp in 2022, and are excited for the prospect of your family joining us. Our camp focuses on helping families and their children who struggle with emotional regulation. Our campers are between the ages of five and eleven years and who have been in their permanent home for at least nine months. At our camp, we learn through playing and doing. Our camp format has changed. Camp will consist of six parent education sessions on Mondays evenings with Bridget Wilson and two three-day weekends of camp where kids attend with parents. Our campers will be matched with a one on one buddy who will engage the campers in healthy play while practicing life skills. Our parents will learn skills, prior to the weekend camp days and during camp with our parent educators. At the end of each day of camp the parents and children will reunite to share what skills they have learned.

Our camps are based on Trust Based Relational Intervention® (TBRI®), the work of Dr. Karyn Purvis, Dr. David Cross, and the Karyn Purvis Institute of Child Development at Texas Christian University. This model serves as an intervention for a wide range of childhood behavioral problems. Our basic premise is to teach through humor and play. We will also be using techniques from Hand in Hand Parenting, Nurtured Heart Approach®, and The Whole Brain Child by Dr. Dan Siegel.

TBRI® is a therapeutic parenting program that is designed for children who have come from a hard place. Research has found that a 'hard place' can be caused by abuse, neglect, trauma, a difficult pregnancy, a difficult birth, early medical trauma or prematurity. For many years, Drs. Purvis and Cross have been implementing and evaluating the TBRI® model, and their strategies have proven extremely effective in creating healing environments for children who have come from hard places. This is a parenting philosophy for life, which families will adopt and continue to learn and change as they more deeply integrate the TBRI® techniques into their parenting. The TBRI® model emphasizes the integration of the following intervention principles:

- **Empowering Principles** (felt safety, safe touch, nutrition, sensory issues, and emotional regulation)
- **Connecting Principles** (attachment, attunement, acknowledgement, engagement, and playful interaction)
- **Correcting Principles** (life value/skills scripts, non-punitive correction, proactive teaching, and respect)

We look forward to The Shining Bright Family Camp. It is our goal to offer connection and healing for our children from “hard places” and assist families in implementing a solid intervention model at home. This camp can serve as a shining light on the long arduous journey of healing children from hard places. We firmly believe that there is hope for every child. To help ensure this outcome, details of the expectations for camp are provided below.

Sincerely,

*Karen Wood*

Camp Co-Director  
Intervention/Education Social Worker  
Family Connections Christian Adoptions



*Jenessa Bell*

Camp Co-Director  
Adoption Social Worker  
Family Connections Christian Adoptions



# **Logistics, Training & Expectations for Parents**

## **Camp Location:**

**Family Connections Christian Adoptions**  
1120 Tully Rd, Modesto CA  
209 524-8844

## **Mandatory Parent Education Monday Evenings with Bridget Wilson**

(In person in Modesto or if you live out of the area you can attend by zoom, but we strongly recommend in person attendance.)

August 15, 22 and 29, 2022 from 4:00-6:30pm  
September 19, 26 and October 3, 2022 from 4:00-6:30pm

## **Camp Weekends for Child and Parents with Our SBFC Crew**

(In person in Modesto. A family must commit to attend all six sessions.)

Friday September 9, 2022 & October 7, 2022 from 3:45-7:15  
Saturday & Sunday September 10 & 11, 2022 & October 8 & 9, 2022 from 9:00-12:30

## **Camp Cost:**

\$300 (Scholarships Available)

Snacks & drinks are provided for the Monday Night Parent Education Classes

Dinner will be Provided Friday Nights for the Campers

Healthy Snacks will be provided on Saturdays and Sundays

## **Application Due Dates:**

**May 1, 2022**

**Prior to Applying: Please watch the following video, to ensure the TBRI philosophy is one your family is willing to adopt. <https://www.youtube.com/watch?v=T43zJDgTNPA>**

## **After Being Accepted As a Camp Family:**

- 1) **Participate in a Pre-Camp Home Visit, if determined is necessary.**
- 2) **Attend Parent Education Monday Night Training Sessions.**
- 3) **Attend Both Weekends of Camp**
- 4) **Actively Participate in All Parent Activities & Complete All Camp Homework.**
- 5) **Complete Camp Evaluation at the end of camp & three month Evaluation.**

It will take a huge commitment from all of the volunteers to bring this camp to your family and we are asking for the same commitment in return. By applying to camp, you are making a commitment to fully participate in all aspects of the camp and a commitment to implement the techniques learned in your home. If you are interested in being considered for camp, please complete the Family Application & Camper Profile by the due date. We will accept only five to six families to attend camp. You can email your application to [jenessabell@fcadoptions.org](mailto:jenessabell@fcadoptions.org) or you are also welcome to mail the application to:

**Attn: Jenessa Bell**  
**Family Connections Christian Adoptions**  
**1120 Tully Road**  
**Modesto, California 95370**

If you have any questions, please do not hesitate to contact me at [jenessabell@fcadoptions.org](mailto:jenessabell@fcadoptions.org) or (209)524 8844.

# Shining Bright Family Camp 2022

## Family Application

(This will be shared with your child's Buddy)



### CAMP CRITERIA

- |  |     |    |
|--|-----|----|
| • Will your camper be between the ages of 5-11 by the start of camp?           | YES | NO |
| • Will your camper have been living in your home for nine months?              | YES | NO |
| • Are you and your family willing to be photographed and videotaped?           | YES | NO |
| • Can you commit to participate in all pre-camp, camp, and post camp sessions? | YES | NO |
| • Are you willing to sign a release of liability waiver?                       | YES | NO |

### FAMILY INFORMATION:

	First Name	Last Name	Age	Cell Phone	Email
Mother					
Father					

	Education Level	Occupation	Travel for Work?	Work Schedule	Tee Shirt Size
Mother					
Father					

	Street Address	City	State	Zip Code
Address				

### CAMPER INFORMATION

	First Name	Date of Birth	Birth, Adopted, Foster Child?	Tee Shirt Size & Two Favorite Colors
Camper				

**SIBLING INFORMATION**

	First Name	Date of Birth	Birth, Adopted, Foster Child?	Is this a biological sibling to the Camper ?
Sibling 1				
Sibling 2				
Sibling 3				
Sibling 4				

**FAMILY DYNAMICS:**

What does your family hope to gain from coming to camp?	
What experience does your family have with TBRI®?	
What are your family's major strengths?	
What are your family's major challenges?	
Describe any challenges that siblings have.	Sibling 1
	Sibling 2
	Sibling 3
	Sibling 4

<b>Mom: As a parent, what are your major strengths?</b>	
<b>Mom: As a parent, what are your major challenges?</b>	
<b>Mom: Please list 3 goals you have for yourself in regards to your relationship with camper</b>	1.
	2.
	3.
<b>Dad: As a parent, what are your major strengths?</b>	
<b>Dad: As a parent, what are your major challenges?</b>	
<b>Dad: Please list 3 goals you have for yourself in regards to your relationship with camper</b>	1.
	2.
	3.

# Shining Bright Family Camp 2022

## Camper Profile

(This will be shared with your child's Buddy)



### CAMPER INFORMATION

First Name	Last Name	School	Grade

Does This Child Attend Therapy? If so, how often? \_\_\_\_\_

Therapist Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**IS THIS CHILD ADOPTED?**     YES     NO    Date of Placement: \_\_\_\_\_

Type of adoption?     Foster     Domestic     International (which country?) \_\_\_\_\_

Previous Care (if applicable)

List Care Environments Prior to Your Home	Type of Care (foster care, orphanage, group home, relatives home, birth parent, etc.)	Age at Entry	Duration of Stay	Age at Exit
Care Environment 1				
Care Environment 2				
Care Environment 3				

Please provide a brief description of the camper's history prior to being placed in your home? \_\_\_\_\_

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**HAS THIS CHILD EXPERIENCED:**

	YES	NO	UNK	If Yes, Explain
A Difficult Pregnancy				
A Difficult Birth				
Early Hospitalization				
Neglect				
Physical Abuse				
Sexual Abuse				
Loss of a Primary Caregiver				
Other Trauma				

**STRENGTHS & INTERESTS:**

What are this child's major strengths?	
What does this child like to do in his/her free time?	
What scheduled activities is this child involved in?	
What foods does this child like to eat for snack and dinner?	
What foods does this child not like to eat for snack and dinner?	

**MEDICAL HISTORY:**

	<b>YES</b>	<b>NO</b>	<b>If Yes, explain</b>
Does the child have any medical or physical diagnoses?			
Does the child have any known allergies (including latex) or food restrictions?			
Does this child have any limiting physical difficulties?			
Has this child received any psychological diagnoses (ADD /ADHD, Autism, RAD, ODD, etc.)?			
Has this child ever been hospitalized (broken bones, head trauma, bleeding)?			
Has this child ever been hospitalized for a significant illness (pneumonia, asthma, etc.)?			
Has this child ever been hospitalized for behavioral or emotional problems?			
Is this child currently on Medication? If so what and why?			



**CONCERNS:**

	<b>YES</b>	<b>NO</b>	<b>If Yes, explain</b>
<b>Does the child have behavioral difficulties? Including aggression</b>			
<b>Does the child have emotional difficulties?</b>			
<b>Does this child have educational difficulties? IEP Services?</b>			
<b>Does this child have sensory difficulties? Include touch, sounds, smells, etc.</b>			
<b>Does this child have social difficulties?</b>			
<b>Have you ever worried about the physical safety of your child or others around your child?</b>			
<b>Has your child ever seriously harmed or attempted to harm another person, animal or himself?</b>			

**FAMILY INTERACTIONS:**

Please describe your child's schedule during the day/week?	
What Scripts do you use at home with this child?	
What calming techniques does this child use?	
Please describe your child's default response to stress. Flight, fight or freeze?	
Mom: Please describe the emotional bond that you have with this child.	
Dad: Please describe the emotional bond that you have with this child.	
Please list three goals you have for this child during camp.	1.
	2.
	3.

**RETURN COMPLETED APPLICATION  
BY May 1, 2022**

**EMAIL: [jenessabell@fcadoptions.org](mailto:jenessabell@fcadoptions.org)**

**MAIL: Attn: Jenessa Bell  
Family Connections Christian Adoptions  
1120 Tully Road, Modesto, California 95350**