Fostering Hope and Healing – The Role of Resource Parents and Kinship Caregivers in Supporting Family Recovery and Reunification

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NADCP 2019 | All Rise | Better Together
Acknowledgement

This presentation is supported by:

Grant #2016-DC-BX-K003 awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice.

This project was supported by Grant #2016-DC-BX-K003 awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice. The opinions, findings, and conclusions or recommendations expressed in this publication/program/exhibition are those of the author(s) and do not necessarily reflect those of the Department of Justice.
Raising the Bar!

Family Treatment Court
Best Practice Standards

Just Released!

8 Standards & Provisions

Just Released!

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What is Foster Care?

Temporary, out-of-home care for children that have been removed from their birth families due to abuse or neglect. Intended to offer support, safety and well-being for the child until permanency can be achieved through reunification or adoption.
Language Matters
<table>
<thead>
<tr>
<th>Traditional language</th>
<th>Affirming language</th>
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<tbody>
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<td>Foster parents</td>
<td>Resource parents</td>
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<td>Visitation</td>
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<td>Foster child</td>
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<td>Hard to Place Kids</td>
<td>Children affected by trauma</td>
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<tr>
<td>Addicted parents</td>
<td>Parents with a substance use disorder</td>
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<td>Drug addicted baby</td>
<td>Substance-exposed infant</td>
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Foster Families as a Resource

Foster families offer birth families:
• Safety, warmth, understanding, and emotional support
• Model of stable family living
• Skills in child behavior management
• Mentor and model safe and nurturing parenting
• Support family connections through positive interaction
• Knowledge of community resources
• Model use of support systems
• Knowledge of child development and age appropriate expectations
• Experience in planning play activities and positive encounters
Foster Parents as a Resource

Resource for Birth Parents

Resource for Children

Resource for CWS

Better Outcomes

- Treatment outcomes
- Child Well-Being
- CWS Outcomes
Foster Parents as a Factor for Successful Reunification

- Children who were reunified with their parents in 12 months or less were more likely to be successful and less likely to come back into the system.
- **Involvement of foster parents is key** to reunifying families.
- **Mentorship and contact between foster parents** as factors that greatly increases stability in the lives of the children and the likelihood that they will be reunified.
- Frequent visitations with parents and siblings, sometimes **facilitated by foster parents**, and frequent contact from the caseworker also increased the likelihood that children would be reunified quickly.

*(Child Welfare Information Gateway, 2011)*
Language Matters
The psychological stigma associated with being labeled an ‘orphan,’ ‘foster kid,’ ‘ward of the court,’ or ‘at risk youth’ can play havoc with one’s self esteem. The terms used to describe our lowly status say that we are less than other kids: less fortunate, less worthy, less good, less capable, less important, less lovable...less almost anything.

Many of us are so distressed by what happened at home or in the system that we develop behavioral disorders, emotional problems or other mental health issues that compromise our ability to overcome the past and adjust to the future. Still others of us feel ashamed of our youth and spend a lifetime hiding from the past.

At best, the experiences of being separated from family and placed in the care of strangers leaves a bloody scab on the psyche that may never quite heal.

– Walt Brown, PhD (2013)
Outcomes for Transitional Foster Youth

- More likely to commit a crime (Male 4X, Female 10X)
- 25% experience homelessness within 4 years
- 48% male foster youth unemployed
- 5x more likely to develop PTSD
- 7x rate of drug dependence
- 2x rate of alcohol dependence
- 25% graduate are in college (vs 41% general population)
- 33% male rely on government services to meet basic needs
- 75% female rely on government services to meet basic needs

(Source: Foster Club, 2015)
Education & Training
Training for foster parents can improve reunification rates. Children whose foster parents received the KEEP (Keeping Foster and Kin Parents Supported and Trained) training were more likely to be reunified than those whose foster parents did not receive the training (Chamberlain, Price, Reid, & Landsverk, 2008). This may be due to a reduction in children’s behavior problems, which may make reunification more likely.

Question for Guam

+ What kind of training do relative caregivers receive?
+ What areas of training and support are being raised by licensed foster parents and relative caregivers?
The Role of Foster Parents in Supporting Family Recovery and Reunification
Motivations & Expectations

Why do you want to become a foster parent?
Why do you want to become a foster parent?

**Motivations:**
- Rescue child
- Right an injustice
- Fill a void
- Fill our home
- Love and compassion
- Playmate for my child
- Religious reasons
- Want to adopt

**Expectations:**
Why Birth Families & Family Connections Matter
The Importance of the Parent-Child Relationship

• For young children in the child welfare system, early relationships may have been the cause of harm or neglect, with potential negative consequences on their developmental trajectories if we don’t intercede early.

• Strengthening parent-child relationships can be the foundation needed to repair the harm and improve family functioning.
Why Birth Families Matter

• Positive self-identity is intrinsically linked to parents
• Honoring the relationship - children want to be with their parents regardless of circumstances or what they have been through
• Recognize grief and loss due to separation
• Birth parents and kinship can be a valuable resource about the child and for the child
Why Birth Families Matter

• Part of recovery is restoring the relationship – visitation, counseling
• Positive relationships between foster parents and birth parents reduces stress for children (positive co-parenting)
• Transitional Youth – “I wish my parents got treatment.”
Pause
Common Perceptions of Substance Use & Recovery

- Once an addict, always an addict
- They don’t really want to change
- They lie
- They must love their drug more than their child
- They need to get to rock bottom
- Don’t work harder than the client
- Do it for yourself before you do it for others
ASAM Definition of Addiction

“Addiction is a primary, chronic disease of brain reward, motivation, memory and related circuitry. Dysfunction in these circuits leads to characteristic biological, psychological, social and spiritual manifestations. This is reflected in an individual pathologically pursuing reward and/or relief by substance use and other behaviors.”

Adopted by the ASAM Board of Directors 4/12/2011
What We Know About Substance Use Disorders And Families

Substance use disorders (SUDs) can negatively affect a parent's ability to provide a stable, nurturing home environment. Most children involved in the child welfare system and placed in out-of-home care have a parent with a SUD (Young, Boles, & Otero, 2007).

Families affected by parental SUDs have a lower likelihood of successful reunification with their children, and their children tend to stay in the foster care system longer than children of parents without SUDs (Gregoire & Schultz, 2001).

The lack of coordination and collaboration across child welfare, substance use disorder treatment, and family or dependency court systems has hindered their ability to fully support these families (US Dept. of Heath & Human Services, 1999).
Recovery & Relationships

- Addiction as a disease of isolation
- Addiction affects relationships, including the parent-child relationship
- Recovery occurs in the context of relationships, with particular focus on healing the parent-child relationship and parenting
- Adults identify themselves primarily as parents – their primary motivation is to be with their children
- Family-centered approach recognizes the multiple needs of families to achieve and sustain recovery
Recovery Support Matters

• The use of recovery coaches, who assist parents in successfully completing substance use treatment, has been shown to help families reunify with their children (Ryan, Victor, Moore, Mowbray, & Perron, 2016)

• Recovery coaches support families by conducting assessments, developing service plans, advocating for parents, conducting home visits, and working in partnership with the child welfare caseworker
Trauma
Adverse Childhood Experiences

Traumatic events that can have negative, lasting effects on health and wellbeing

Abuse
- Emotional abuse
- Physical abuse
- Sexual abuse

Neglect
- Emotional neglect
- Physical neglect

Household Challenges
- Domestic violence
- Substance abuse
- Mental illness
- Parental separation/divorce
- Incarcerated parent

People with 6+ ACEs can die 20 yrs earlier than those who have none

1/8 of the population have more than 4 ACEs

4 or more ACEs

- 3x the levels of lung disease and adult smoking
- 14x the number of suicide attempts
- 11x the level of intravenous drug abuse
- 4x as likely to have begun intercourse by age 15
- 4.5x more likely to develop depression
- 2x the level of liver disease

Adverse childhood experiences are the single greatest unaddressed public health threat facing our nation today

Dr. Robert Block, the former President of the American Academy of Pediatrics

67% of the population have at least 1 ACE
ACE’s Informed Approach to Substance Use Disorder Treatment

<table>
<thead>
<tr>
<th># of ACEs</th>
<th>Outcome</th>
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<tbody>
<tr>
<td>4≤</td>
<td>500% more likely to misuse alcohol</td>
</tr>
<tr>
<td>5≤</td>
<td>7-10x more likely to report illicit drug abuse</td>
</tr>
<tr>
<td>6≤</td>
<td>46x more likely to be substances IV users</td>
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</tbody>
</table>
Substance Use Represents Survival

We treat people’s solutions as problems.
- Vincent Felitti, MD
Trauma-Informed Approach: Moving the Question from

What’s wrong with you? What happened to you?

“You stand with the belligerent, the surly, and the badly behaved until bad behavior is recognized for the language it is: the vocabulary of the deeply wounded and of those whose burdens are more than they can bear.”

- Gregory J. Boyle
What Does It Mean to be Trauma-Informed?

• Acknowledge role of trauma; presumption of trauma
• Changing the question “what's wrong with you?” to “what happened to you?”
• See challenging or difficult behaviors as trauma responses
• Focus on promoting trust, safety, and acceptance
• Build on individual and relational strengths and capacities
Trauma-Informed Practice Strategies for Foster Parents

• Provide sensory comfort, familiarity, support settling in
• Empathize, connect, try to understand the child’s perspective, but don’t probe
• Support child’s relationships and family connections
• Provide structure, control, inclusion, predictability
• Recognize young children are affected by traumatic events, even though they may not understand what happened
• Seek support and training
• Self-care to protect from secondary trauma
Child Welfare
Timelines & Urgent
Need to Work Together
The Adoption and Safe Families Act

ASFA

(PL 105-89)

Time Clock
There is No Time to Lose

Multiple Time Clocks

Child Welfare –
12-month timetable for
reunification

Parents –
Treatment and recovery
– ongoing process

Children –
Separation can have profound effects on
healthy development

Highest standards of practice and sense of urgency
Family & Parenting Time

- Frequent and regular parent-child visits help children, and parents maintain continuity of their relationships, improve relationships, and help them prepare to reunite
- Provide parents with opportunities to learn and practice parenting skills
- Give caseworkers opportunities to observe and assess family progress
- Children who have regular visits with their families are more likely to reunify (Chambers, Brocato, Fatemi, & Rodriguez, 2016)
Effect of Parenting Time on Reunification Outcomes

Research shows **regular, frequent visitation** between parents and their children:

- Increases the likelihood of reunification
- Reduces time in out-of-home care
- Decreases the likelihood of re-entry to foster care after reunification
- Promotes healthy attachment
- Reduces negative effects of separation

Visits provide an important **opportunity to gather information** about a parent’s capacity to appropriately address and provide for their child’s needs, as well as the family’s overall readiness for reunification.

*Sources: Mallon, 2011; Dougherty, 2004; Hess, 2003*
Family Time as a Right

• Family time is a child and parents’ right
• Family time should not be used as reward or sanction for the parent’s compliance or non-compliance with program requirements
• Instead decisions about parent-child contact should be driven solely by the child’s safety and best interests
Frequent & Quality

- Parent-child contact should be frequent, consistent, and occur at developmentally appropriate intervals
- Children at different developmental stages require different amounts of parent-child contact to create and nurture familial bonds
- Consistent and predictable intervals reassure children that the parent has not abandoned them and that it is safe to invest in the relationship
- Family-friendly locations with opportunities for age-appropriate interaction allow for the development of healthy family interaction
- The setting should be conducive to normal parent-child interaction appropriate to the child’s age and development
Challenges in Facilitating Frequent & Quality Family Time

- Transportation; travel distance
- Involvement of foster parents or relative caregivers to transport and supervise
- Multiple children; siblings sets
- Co-parenting - relationship between the foster parents/relative caregivers and the parent
- Transitions for the child – before and after family time
Key Considerations - Quality Family Time

• Have we created the least restrictive environments?
• If supervised, who will facilitate?
• What are the criteria for deciding whether therapeutic, supervised or unsupervised – and does the parent know how those decisions are made?
• Should we provide materials, books, etc. to facilitate the experience when a parent has no resources?
Key Considerations – Enhancing Quality Family Time

• How will we know how it went? What will be the parameters we use?
• Managing multiple siblings – what can we expect? How can we support a parent with children of different ages?
• Post-visitation debriefs – expect emotionality/sadness/anger
• Be mindful of foster parent or relatives feedback when child returns home
• Visitation with children with special needs
Pause
Co-Parenting

Working Together Matters

- This can be very challenging, particularly for kinship caregivers
- View relationship as adversarial relationship due to perceptions and motivation
- Children benefit and feel reassured when they see parents and foster parents working together
- Recognize the importance of children’s attachment to both birth and foster families
- Foster parents provide support to birth parents before and after reunification
- Explore how foster parents can be a part of child’s life after reunification
Working Together Matters

Co-Parenting

• A good relationship between birth parents and resource parents promotes child safety, permanence, and well-being
• This is not easy to do
• Positive interactions between you and the birth parents can create a sense of safety, security, and support for children
• Positive relationships with birth parents reduces stress of divided loyalties

Facilitating Positive Co-Parenting Relationship

- Provide training on the importance of co-parenting and agency expectations
- Set clear ground rules, limits, and expectations
- Provide ongoing support for foster parents and relative caregivers
- Facilitate activities that foster co-parenting – Ice-Breakers, Family Group Decision Making, Team Decision-Making; parenting time; school and sports events; family celebrations
- Ensure that parent is involved in child’s progress through frequent and clear communication
- Ensure supportive transitions
Support for Parents in Court to Advocate for Improvements or Strengthening of the Relationship with their Child

• Questions every judge should ask?*
  • How are your visits going? How is your relationship with the foster parents or caretakers? Are you able to work together?
  • What are you learning in treatment, counseling, and parent education? Are you able to apply what you are learning during your time with your child? Are there any areas of difficulty or stress related to parenting that you would like more support in?

* Recommended Resource: Visitation with Infants and Toddlers in Foster Care: What Judges and Attorneys Need to Know.
Role of FTCs in Facilitating Frequent & Quality Parenting Time

• Parenting time should be discussed regularly in pre-court staffing and in-court reviews
• The FTC should regard family status as the starting point in every review of FRP cases
• The FTC should employ professionally accepted tools to assess whether the family is ready for reunification and to assist in identifying the family’s strengths and weaknesses
Typical Family Time Dynamics

• Evaluation of parenting time should be informed by an understanding of typical visiting dynamics

• A child may be emotional after a visit because she is worried about when she will be able to see her parent again, not because seeing the parent is upsetting to her.

• A parent’s difficulty in interacting with her children may result from not being aware of developmental expectations.
Discussion:
Decide What You Can Tackle First

• Examination of all aspects of visitation options (e.g., availability, costs, locations, facilitators): What are the strengths and gaps?
• Examination of your community of care’s views about co-parenting: Can you make it work incrementally?
• Examination of interventions for families and inclusion of parent-child component: Who will monitor and with what instruments or tools?
• How do parents advocate for their progress in court in terms of their relationship with their child? What questions should judges ask?
Q&A and Discussion
Resources


• Supporting Successful Reunification (October 2017)
• How the Child Welfare System Works (February 2013)
• Parental Substance Use and the Child Welfare System (October 2014)
• Kinship Caregivers and the Child Welfare System (May 2016)

The National Child Trauma Stress Network – www.nctsn.org

Call to Action

If not now when?
Family Drug Court Learning Academy

Fostering Hope and Healing – The Role of Resource Parents and Kinship Caregivers in Supporting Family Recovery and Reunification

Visit: www.cffutures.org/fdc-learning-academy
CALL TO TAKE ACTION GUIDE
The Role of Resource Parents in Supporting Family Recovery & Reunification

TAKE A NEXT STEP
Here are some possible steps as you take what you have learned and put it into action. Please contact us if you have any questions or need further assistance.

1 GIVE RESOURCE PARENTS A VOICE
- Conduct focus groups with resource parents, kinship caregivers, and birth parents to get their feedback
- Invite resource parents and kinship caregivers to FTC Sessions or include updates as part of FTC Staffing discussion
- Invite foster parent association or staff from foster care unit to be part of Steering Committee
- Establish a workgroup or advisory board that focuses on the role of resource parents and kinship caregivers
- Listen!

Resource: Resource Families Supporting Reunification - https://www.amcinca.org/content/Educate/administrative/child_law/ParentReunification_Supporter, Article2andchecked.pdf

2 EDUCATE, TRAIN AND INCREASE AWARENESS
- Invite birth parents and members of the FTC team to the next foster parent training
- Conduct case presentations to examine current practices
- Provide training about the following essential topics:
  - Substance use disorders as a brain disease, including lapse and relapse
  - Trauma and trauma-informed approach
  - Grief, loss, and separation and effects on child development and family relationships
  - Attachment and importance of family connections
  - Factors for successful reunification
  - Federal legislation and local initiatives that will affect the role of resource parents
  - Skills including reflective listening and non-judgemental


Team Discussion Guide
The Role of Resource Parents in Supporting Family Recovery & Reunification

After viewing the video presentation “The Role of Resource Parents in Supporting Family Recovery and Reunification” use this Discussion Guide to facilitate further conversation within your team. Feel free to discuss the questions that are most relevant to your program. At the conclusion of the discussion, finalize and assign specific action steps as a way to move forward.

1 REACTION
Discuss the video presentation, including the story of the birth and resource mothers. What did you hear that surprised you? What further questions do you have about their story?

2 PRIORITIZE
Review the following list of key strategies shared during the presentation. Select 2-3 strategies where your team or jurisdiction are doing well. Then select 2-3 principles in which you are struggling or need to improve. Write down any strategies that were not mentioned that you are doing or would like to improve?
- Facilitating quality and frequent parenting time
- Cross-system training on SIB and trauma to resource parents
- Giving resource parents a voice
- Building rapport between resource parents and FTC members
- Building a community of reunification support, which includes resource parents
- Other

3 PRESENT CASE AND DISCUSS
For upcoming staffing, identify and discuss two cases in your FTC – one in which the resource parent or kinship caregiver is working well together and another in which the resource parent or kinship caregiver is struggling. Discuss contributing factors in both cases and potential solutions.
Learn More! Peer Learning Court Program

Visit the Model of Family Treatment Courts

@ Exhibit Hall
Booth # 414 and 416