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Reintegration Work: Parental Support in Foster Care

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Introduction

As of September 30, 2012, there were an estimated 399,546 children living in foster care in the United States, with the average age being just over 9 years old.¹ 251,764 of those children began foster care that year, leaving 145,358 children who had already been in foster care for at least a year.¹ Only 53% of these children have a case plan goal of reunification with their parents and 5% do not yet have a case plan goal established, meaning roughly 176,180 children will never return home with their biological parents.¹ Only 28% of children in foster care in 2012 were placed with relatives.¹ Of the estimated 241,254 children that exited foster care in 2012, 12% spent more than 2 years, 9% spent 3 to 4 years, and 6% spent 5 years or more in foster care.¹

As a Family Support Worker for a child welfare agency in Kansas, I know firsthand that these are not just facts and statistics. These are very real children and very real situations. These families are oftentimes in constant crisis and do not know how to support themselves. Alongside my Case Manager, we are responsible for coordinating and monitoring all needs of a child in foster care, as well as the biological parents' needs. Children in foster care, and their parents, have needs exceeding that of families not in foster care. These families generally have more medical needs, more mental health needs, and more educational needs. In

addition, the biological parents usually are in desperate need of parenting classes and financial assistance.

The high number of children coming into custody each year combined with the average length of time a child remains in custody results in an ever-growing caseload. More children are coming into custody than are exiting custody.¹ These increasing numbers stretches the workload of child welfare staff, making it difficult to ensure the highest quality of care for each family. No day ever goes according to plan. Something unexpected will occur every day, multiple times a day. Workers have to be able to drop what they are doing, deal with the situation at hand, and then return to complete what they were working on. This sense of organized chaos oftentimes makes it difficult to remember these are actual people and families, not just “new referrals,” names on paper, and voices on the phone.

Children in Foster Care

Children enter foster care for a variety of reasons, all of which can be categorized into either abuse or neglect. The Child Abuse Prevention and Treatment Act defines child abuse and neglect as: “any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act

or failure to act, which presents an imminent risk or serious harm.”² Most states recognize the following as the major types of maltreatment: neglect, physical abuse, psychological maltreatment, and sexual abuse.² In 2011, Child Protective Services (CPS) received an estimated 3.4 million referrals, which were estimated to include 6.2 million children.² Of these referrals, 78.5% were neglected, 17.6% were physically abused, and 9.1% were sexually abused.² Of the 3.4 million referrals, 2 million receives a CPS response and 134,000 received foster care services. Most children coming into foster care have experienced or witnessed more than one type of abuse or neglect, which results in an overlap of varying child abuse and neglect.

The average amount of time a child will remain in foster care is 22.7 months.¹ Over 25% of children in foster care change placements three or more times a year.³ Changing placements does not just mean moving down the street; everything about a child’s life is disrupted when they change placements. This includes a new family, new town, new school, new friends, new doctors, and new mental health providers. When a child changes placement they are often moved further away from their family and any connections they grew up with. However, the changes do not stop there. During those 22.7 months, a child’s foster care workers will also change a countless amount of times; their schedule for seeing their

parents, if they get to, will never be consistent; they will be constantly involved in the court systems; their mental health will always be questioned and assessed; and every aspect of their lives will be meticulously monitored by everyone around them, except their own parents and family. A move with one's family is incredibly disruptive to a child's life, but these effects are exponentially more impactful when the child continually moves but the family does not.

Biological Parents in Foster Care

Alongside foster children's trauma, but easy to forget, is that we encounter biological parents who have typically endured their own significant trauma. Just like it is important to remember that children's behaviors are usually correlated to personally experienced trauma (not just being a "bad kid"), it is equally important to remember that parents' actions are often a result of their own personally experienced trauma. Typically, parents do not abuse or neglect their children because they are mean and hateful, but because they are overwhelmed and do not have appropriate coping skills. These issues can be related to a variety of reasons: the parents may suffer from drug and/or alcohol dependency, mental health problems, or personal trauma as a child themselves that was never addressed appropriately. A few parents truly were in the wrong place at the wrong time. However,

parents who have experienced trauma or difficulties must prove their ability to properly care for their children before regaining custody. But, these parents do not need to be punished – these parents need help and the proper tools to prevent them from repeating their mistakes. These parents need someone who is there to support and guide them because most of them do not have their own support system. A parent experiences a whole new trauma by having their child taken away. If these parents want to secure custody and provide a safe, stable home for their family, they will need a lot of support.

Providing Support

Case Plan Meetings

Providing support to parents is vital to their success. Once a child comes into custody, an initial case plan meeting is scheduled within 20 days of the child entering custody. The case plan meeting is focused on the plan of action so that the child can return home. Tasks are assigned to the child, the biological parent, the foster parents, and the case team. The biological parent generally has an extensive list of tasks necessary to complete, all of which are intended to ensure successful reintegration. While these tasks are meant as support and training for the biological

parents, they can often result in the parent feeling overwhelmed or even attacked.

Depending on the reason for referral and history of the parent, these tasks can include mental health and parenting evaluations, parenting classes, individual therapy, family therapy, drug and alcohol assessments and treatment, and finding stable housing and employment. Oftentimes, biological parents need to complete the requirements for pending criminal cases as well. The case team provides resources and assistance, but ultimately it is the parent's responsibility to follow through. In 2012, only 122,173 (51%) children were reintegrated with the caretakers they were originally removed from¹; therefore, while many parents successfully bring their children home every year, it does require commitment and resourcefulness.

Stability and Parenting Skills

Some of the biggest struggles for these biological parents are stability and parenting skills. Financial stability is a significant struggle for many biological parents. While agencies can offer substantial assistance with paying for therapy and other services, and oftentimes helping with past bill balances, these parents need to find a way to be consistently financially stable. For example, the agency may pay a single overdue electric bill so

that the family can get their power turned back on, but the biological parents will be responsible for paying the following monthly bills. While poverty should not be a reason for a child to be in custody, the biological parent must be able to provide safe and stable housing. However, the biological parents are also required to pay child support for their child(ren) in state custody.

The case team will assist the biological parents in locating services, such as companies that help with writing resumes and applying for jobs, budgeting, government assistance, and food pantries. The case team will also assess the biological parent's parenting ability and will then refer them to appropriate classes. These classes can be general parenting classes (often based on the child's age), or they can be anger management, domestic violence, etc. The type of class referred usually depends on the reason for referral. For example, if a child comes into custody because of their own behavior problems a parent would most likely be referred to a general parenting class to help them address the child's behaviors; but if a child came into custody because their parents were arrested for a domestic violence situation, the parents would probably be referred to an anger management and/or domestic violence class. If the agency is requiring the parent to take certain classes, they will usually assist in paying for them. Although, many communities offer free

classes or payments based on income. The agency is responsible for providing the parents with a list of organizations that provide necessary classes, but the parent is responsible for signing up and attending. A parent's willingness to participate and complete the classes shows how hard they are willing to work for their children, and gives the case team a good idea of the case's success.

Ensuring Long-Term Success

Ensuring the long-term success of a family is the main goal. For every child that comes into custody, the initial goal is reintegration with the family. However, at some point you must reevaluate what will be best for the child. Can a family be so dysfunctional or unstable that it outweighs the negatives of breaking apart a family? It is a very fine line and there will never be one clear, deciding factor. Every family is unique, with their own strengths and weaknesses. Some parents do not want their children back home and will give up quickly, while others will never be mentally stable enough to have custody of their children but will fight to the end. It is not just about who can take care of their child today, it is about who can provide them with a safe and stable home long-term. With the instability of the families we encounter, this is a very difficult outcome to determine.

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