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Curriculum for Parents of Children in Foster Care Who Are Working to Achieve Reunification Andrea L. Skaflen

A research project submitted to the Graduate Faculty of

JAMES MADISON UNIVERSITY

In

Partial Fulfillment of the Requirements

for the degree of

Educational Specialist

Graduate Psychology Department

Dedication

To all the families that I have seen succeed and fail. May each of your journeys lay the foundation for another family's success.

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1. Reasons for Removal

Introduction

Regardless of the circumstance, a family who is engaged in the foster care system is in crisis and should be considered a special population. There have been a multitude of studies and articles discussing children in foster care and what is needed for them to come effectively through the foster care experience as productive members of society. The benefits of maintaining connections between a child in foster care and the biological family have been well documented. According to a meta-analysis of attachment research, there is a clear connection that links the important parent-child attachment to visitation in foster care (McWey, 2000). Also noted was the importance of involving the child's biological family in the planning process once the child is in care (Kapp & Propp, 2002). However, little research has been done as to what services are effective in assisting biological families achieve family reunification. There have been several studies that have addressed the fact that working intensely with biological parents can lead to successful reunification, but studies that look at the role and experience of a biological parent during this process are rare (Alpert & Britner, 2005). This review considers the reasons for the disconnect between what has been identified as best practice and what is routinely practiced. As well it synthesizes the current data regarding what practices are most effective in working with biological parents of children in foster care in achieving the goal of family reunification to create a curriculum for parents of children in foster care who are working to achieve reunification. This curriculum puts together the information that the parents require to complete their service plan in a way that creates a relationship of respect and an environment of team effort.

The research has shown that there are many factors that can contribute to the successful reunification of a child in foster care to his or her biological family. These factors include family engagement, assessment, case planning, and service delivery ("Child Welfare," 2006). It has also been shown that in order for children to have the best chance at a successful life, it is important to maintain the bonds with the biological family. There are many factors that can contribute to a successful reunification but the overriding theme is that each family is individual and needs the time dedicated to their case that will establish respect, communication and appropriate services. The Parent Skills Enrichment Program will provide professionals with a curriculum designed to meet the skill needs of the parents while establishing a relationship with the parents, which will allow for maximal potential to achieve the goal of reunification.

Overview of Foster Care

Foster Care is a state mandated service, which is provided through a combination of state, federal and local (Virginia Department of Social Services Foster Care Policy Manual, 2006). Foster care services are defined in the policy manual (2006) as,

"a full range of casework, treatment and community services for a planned period of time to a child who is abused or neglected as defined in §63.2-100 or, in need of services as defined in §16.1-228, and his family when a child:

- (I) Has been identified as needing services to prevent or eliminate the need for foster care placement,
- (II) Has been placed through an agreement between the local board or the public agency designated by the community policy and management team and the parent(s) or guardians,
- (III) Has been committed or entrusted to local board or licensed child placing agency (§63.2-905)"

Placement in foster care is intended to be a temporary response to a family situation, which is deemed to be contrary to a child's welfare, and not a permanent answer to the

situation. When a child comes into foster care it is the responsibility of the department of social services, which takes custody, to create a service plan and to identify a goal. According to Virginia Department of Social Services policy, the first goal, that should be attempted to achieve, is "Return to Parent(s) or Prior Custodian". This goal is designed to safely reunify a child with his/her family and his/her community. A service plan must be created and filed with the court within the first sixty days of the child coming into foster care by the department of social services foster care worker. The service plan is a document that addresses the needs or conditions which caused the placement of the child in foster care. These conditions are defined by the child Protective Services Safety Assessment and Foster Care Initial Assessment as needing remediation. Any appropriate service must be made available to a foster child and/or a parent when that service is documented as needed in the child's foster care service plan or individual family service plan (IFSP). As a criterion for choosing and continuing services, the Department of Social Services, is responsible for ascertaining if parents are making "reasonable progress." For the purposes of foster care, reasonable progress has been broadly defined as indications of progress toward the goal of reunification. According to policy, once a goal of returning home has been approved, the custodial agency, the family and the child (if appropriate) should work together to develop the service plan. Not only is it the responsibility of the agency to include the parent(s) but also to work toward preparing the parent(s) for successful reunification (or goal completion). Foster care case workers should support parents in their preparation for reunification by ensuring that they understand the responsibilities of their role as parents in the family, understand the purpose for the services being provided and the importance of their compliance and

participation with services. The caseworker should also support the parents in attending and participating in all staffings and case planning meetings that involve their child. The agency should also hold family meetings with the purpose of communicating with the parent(s) regarding the clarification of progress being made toward the goal, the engagement of/with services and discussion regarding the effectiveness of the service plan.

Based on state and federal requirements, permanency planning, which is defined as the spectrum of social work and legal efforts that are designed to secure "safe, nurturing, life-long families for children in foster care," should commence as soon as the child enters foster care and should be expedited through the services provided (Virginia Department of Social Services Foster Care Policy Manual, 2006). The Virginia Department of Social Services has "guiding principles" for permanency, which include the concepts that both the children and their families involved in the foster care system deserve to be treated with respect, sensitivity and fairness. Both the child and family have the right to understand and know what services are available, what services are being provided, the purpose of the services, as well as the child and family's obligations or responsibility with respect to provided services. The guiding principles also set forth that families should be empowered and that the partnership and teamwork between the birth family, foster parents, local agency and other service providers is an essential element in permanency planning. The services that are to be provided to the parent or guardian from whom the child was removed to support the goal of "Return of Custody," is determined by the standard of "reasonable efforts". The requirements of reasonable efforts are documented attempts to provide services which would aid in remedying the

cause of removal. The only time when reasonable efforts are not required is when a parent falls into one of the following categories:

- previous involuntary termination of parental rights
- conviction for murder or voluntary manslaughter
- felony attempt, conspiracy or solicitation to commit murder or manslaughter against his/her child or a child that resided with him/her or the other parent of his/her child
- conviction for felony assault resulting in serious bodily injury
- felony sexual assault of a child that resided with him/her
- he/she subjected a child to aggravated circumstances such as torture, chronic or severe sexual or physical abuse,
- he/she has chronic and severe mental health and/or substance abuse issues which
 have not responded to treatment in the past and it is not likely that the parent
 would be able to overcome within a reasonable period of time (approximately
 twelve months).

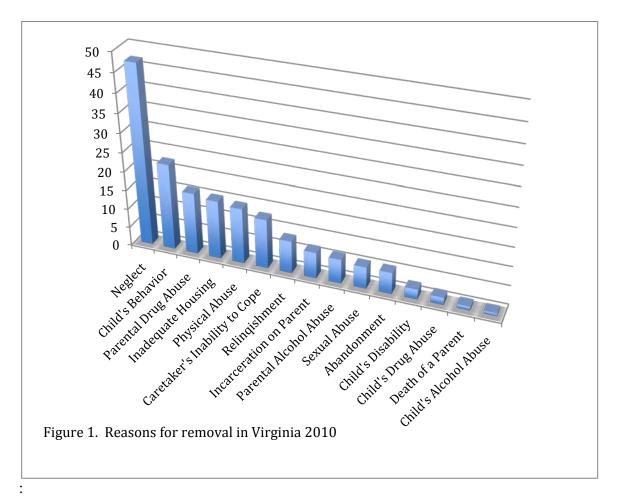
Once services have been determined, the caseworker must choose service providers, such as therapists, in-home workers, or residential facilities, and then present the expected cost of services to the Family Assessment and Planning Team (FAPT). FAPT is the team of local health and human service professionals that has been created through the Comprehensive Services Act for At-Risk Youth and Families (CSA), which is the legislation that creates a system of collaboration between local human service agencies for service and funding that is child centered, family focused, and community based, to

assess the strengths and needs or challenges of children and their families and determine the suitability of services.

A key aspect of working toward the goal of return home is visitation. Policy dictates that parents and their children have the right to visit unless it has been restricted by the court. The social worker, by policy, has the responsibility to facilitate visits between a child in care and his/her family (Virginia Department of Social Services Foster Care Policy Manual, 2006). If the agency, through the social worker, foster care supervisor and agency attorney, determines that visits should be terminated it must have the approval of the court; however, there is no provision for frequency or duration of visitation, policy states that this is to be determined by the social worker and merely noted in the foster care service plan. While there are numerous circumstances that can lead to the determination that parental rights should be terminated, the simple failure of the parent(s) to make progress toward reunification can lead to the decision to permanently terminate the rights of a parent. Policy defines failure to make progress as unwillingness or inability to substantially remedy the conditions which led to the child's removal or created the need for continuation in foster care. Policy provides only vague guidelines regarding successful progress toward goal achievement. The determination of progress is ultimately at the discretion of the custodial agency and the court.

According to the Virginia Department of Health, Department of Social Services, as of May 1, 2010 there are 6313 children in Virginia currently in foster care. Of those children in care, 1819 have a stated goal of reunification. To achieve this goal the conditions due to which the child was removed must be rectified. As of May 1, 2010

children were removed from their parents for the following reasons:



(Snapshot of children in foster care in Virginia, 2010)

According to Virginia Performs, Virginia's performance leadership and accountability system,

"the primary reason children come to the attention of the child welfare system is maltreatment. Child abuse and neglect are not confined to any particular socioeconomic class, race or ethnicity, or religion. However, some situations place children at greater risk for being abused or neglected, including parent history, family violence, isolation and poverty" (Virginia Performs, 2010).

In Virginia, 40.2% of children in care are black, 51.8% of children are white and the remaining nine percent are American Indian, Asian, Pacific Islander, Hispanic, Multi-Race or race unknown (Virginia Department of Social Services, 2010).

The foster care system is complex and, at times, overwhelming. Parents who are attempting to maneuver this system rely on the professionals that are working with them for guidance. The interactions that these parents have with the professionals can greatly affect the course that the foster care case may take. The following case study provides an example of how the interaction between the professional and the parent can affect the case.

Case Study

*The following case study is fictional. Any likeness to actual events or real individuals is unintended

Sarah, age 3, and her sister Ella, age 2, were removed from their home due to lack of supervision. Sarah was found by a motel employee, filthy and wearing only a diaper, while wandering in the parking lot of the motel where she and Ella lived with their mother. The police were contacted by motel management when after about thirty minutes the children's mother was not found. When the police arrived, they found Annie, Sarah and Ella's mother, asleep in her room. Ella was found playing in her crib; she too was in a soiled diaper and had dirt on her face, hands and caked under her nails. Annie explained to the officer and the Child Protective Services (CPS) worker, who had accompanied the police officer to the motel, that she had worked the overnight shift at the factory where she was employed and that she thought that a friend who lived with her was watching the children while she slept. Annie stated that she was working as much as

she could to move out of the motel where she was living. Annie added that she was so tired that she forgot to ensure that her friend was there before she went to sleep. When questioned regarding the cleanliness of her children, Annie stated that she bathed them regularly but that the children liked to play outside and that they would get dirty. Annie justified her position by making a comment about her children just being kids and kids like being dirty.

The CPS worker interviewed the motel employee who had found Sarah; the employee stated that this was not the first time that Sarah or Ella had been found outside unattended. The motel employee explained that Annie usually realized after several minutes that one of the kids had wandered outside, but that the motel employee had phoned authorities this time because Annie never came looking for Sarah. When the CPS worker asked the motel employee about what he had seen of Annie's parenting, the man hung his head. He stated that Annie was a nice young girl but that she was really struggling. The motel employee stated that Annie worked a lot to try and care for her children, but she left them with random friends while she worked and while she slept, which seemed to be the majority of the time. The motel employee clarified that he knew Annie's behaviors based on his experience of going to her room to collect rent or do inspections. The employee stated that when he went to the family's room, Annie was always sleeping and the children were playing on their own. Based on the reports of previous supervision issues and the element of danger surrounding Sarah being unattended in a parking lot for such an extended period of time, the CPS worker determined that immediate removal was warranted.

The CPS worker presented the facts to the judge who agreed that it was "contrary to the child's welfare" to remain with Annie (Virginia Department of Social Services Foster Care Policy Manual, 2006, p. 11). Over the next week the CPS worker and a foster care worker met with Annie to discuss possible relatives with whom Sarah and Ella could be placed. Annie explained that she had moved from Pennsylvania to the area with Sarah and Ella's father, John, the previous year but that he had been convicted of drug possession several months ago and was currently incarcerated. Annie stated that she had no family in the area and that John's family had never liked her and had little to no interest in Sarah or Ella. Annie provided the workers with the contact information for her family in Pennsylvania as well as John's family. The workers contacted both families, but neither was interested in taking custody of Sarah and/or Ella.

Annie attended her first court hearing within the week of removal at which time the judge was presented with the facts that supported the emergency removal. The judge determined that the removal was warranted and upheld the decision to transfer physical and legal custody of Sarah and Ella to the Department of Social Services. After the initial hearing, Annie met with her foster care social worker, Tammy, who explained that she would be working with Annie over the course of Ella and Sarah's stay in foster care. Tammy explained that within the next sixty days she would have to file a foster care plan with the court, which would state the reasons for removal, identify the services that Annie and the children would be provided, and clarify the goals and objectives that Annie would have to accomplish for her children to return to her custody. Tammy stated that Annie would be served a copy of the service plan before the next hearing and that she should call Tammy with any questions regarding the document Annie agreed. Annie

questioned Tammy regarding when she would be able to see Sarah and Ella; Tammy stated that she would arrange weekly one hour supervised visits at her office for Annie to visit with her children.

The following week, Tammy contacted Annie and provided her with the visitation schedule. Annie explained that the scheduled time would not allow for her to sleep after she got off work and that by the time she was to return home she would only get three hours of sleep before having to return to work. Tammy explained that she had given Annie the time that had worked for everyone else involved and that it would not be altered. Annie agreed to the visitation as scheduled. Annie attended her weekly visitation with Tammy, watching her as she interacted with her children. Each week after the children left, Tammy would take several minutes to critique Annie's interactions. Often Annie would be criticized for being lethargic and not interacting with the children with enthusiasm.

When Annie received her service plan, her responsibilities were as follows:

- Will attend all scheduled visitation with Sarah and Ella on a consistent basis and act appropriately during said visits including, but not limited to, accepting feedback or suggestions for alternative parenting techniques as recommended by professionals
- Will initiate, participate and cooperate with a psychological evaluation and follow through with all recommendations from such
- Will initiate, participate and cooperate with a substance abuse evaluation and treatment, including fully disclosing all past and current use of alcohol, illegal

- drugs or prescription medication and follow through with all recommendations from such
- Will attend individual counseling on a regular basis to address her childhood, the
 loss of her children to foster care, parenting issues, relationship issues, anger
 management, substance issues, as well as anything else professionals involved
 assess as a need
- Will attend, participate in and complete an appropriate parenting class
- Will obtain and maintain appropriate independent housing for her family,
 including keeping it clean and having age appropriate safety measures for her children
- Will obtain and maintain consistent full time employment to help financially support her family upon approval from medical and psychiatric professionals.
- Must provide written verification to confirm that she is allowed or disallowed to work from medical and psychiatric professionals.
- Will obtain a full physical evaluation to determine if all medical needs are being
 met as well as to obtain appropriate diagnosis of medical conditions. Written
 reports are to be provided to social worker and any tending psychiatrist.
- Will initiate and cooperate with a psychiatric evaluation to determine appropriate medications for her mental health needs and follow through with all recommendations.
- Will initiate and consistently follow through with medication management,
 including attending all appointments and taking medication as prescribed.

- Will request a case manager through the local Community Services Board to determine if she would qualify and if so cooperate and participate in this service.
- Will cooperate with any groups that professionals determine to be beneficial to her.
- Will submit to random drug screens; including urine, blood and hair; in the allotted time given.
- Will provide social worker with any relative who may be interested in having
 Sarah and/or Ella in their care.
- Will cooperate with any services and service providers for Sarah or Ella.
- Will keep up to date signed consents for any professional involved to communicate with one another or to obtain information they deem pertinent to their work with her; including medical, mental health and substance abuse, financial, etc.
- Will cooperate with any other recommendations by professionals.
- Will attend all meeting and court hearings as requested.
- Will inform involved professionals of any changes such as residence,
 employment, initiation or completion of any service.
- Will inform social worker of any party that lives with or regularly stays at the residence.
- Will refrain from criminal activity.
- Will refrain from using illegal drugs, alcohol, or misusing prescription medication.
- Will refrain from violence, threats against others and outbursts of anger.

- Will cooperate with required background checks, including finger prints.
- Will arrange/ensure consistent transportation to all necessary appointments for herself and/or her children.

Annie felt overwhelmed and confused with the services required within the plan. She was unsure of how she was going to meet all the stipulations that had been presented to her in order to regain the custody of her children. Annie attempted to contact Tammy by phone or to meet with her at her office in an effort to understand and meet the expectations of the service plan. Unfortunately, these attempts would often end in Annie getting upset and yelling at Tammy which would then result in Tammy ending the conversation with Annie and/or not returning Annie's calls. Annie struggled to attend appointments with social services or other professionals which Tammy scheduled for her and to meet the requirements set for her as she understood them.

At the six month foster care court review, Annie was chastised for her lack of progress in meeting her goals and objectives of the service plan and for her attitude toward Tammy. Annie's goal was transitioned to concurrent return home and adoption, which meant that Tammy was now actively working the "back up plan" of terminating Annie's parental rights and making Sarah and Ella available for adoption. Annie felt defeated.

Review of the Literature

The United States Supreme Court, in *Quilloin v. Walcott*, stated that the state does not have the authority to "force the breakup of a natural family over the objections of the parents and their children, without some showing of unfitness and for the sole reason to do so was thought to be in the children's best interests" (Wulczyn, 2004). The

foundation that child welfare policy is built on is that children are best served when raised by their natural parents. Reunification is deeply rooted in law and practice in America and is likely to continue as the most common way for a child to exit foster care.

In 1997, the Adoption and Safe families Act (ASFA) was passed in response to continuing reports that prolonged periods in foster care contributed to the psychological deterioration of children (Alpert & Britner, 2005). ASFA created timelines for two of the important roles of foster care so that children would no longer be able to linger for undetermined amounts of time in the system. A timeline was established for the state's development of a permanency plan for the child, as well as a timeline for the termination of parental rights. These timelines have contributed to the slowing rate of reunification during the 1990's (Wulczyn, 2004).

It is important to consider what services are effective to achieve family reunification not only to assist more families in achieving this goal, but because it is the most common goal for children in foster care and also the most common outcome (Child Welfare, 2009). In the recent past, the patterns of reunification have changed in the sense that reunification takes longer than it once did and adoption occurs more quickly (Wulczyn, 2004). Wulczyn (2004) notes that reunification services have attracted very little attention, this has resulted in a thin evidence base for successful reunification programs.

Parents who experience the foster care system often face grief, depression, hopelessness, confusion, fear and rage (Alpert & Britner, 2005). In examining inputs from parents of children in foster care, Kapp and Propp (2002) claim that the foster care system is one field where the voices of clients are routinely ignored. There have been

numerous studies which point to a "studied indifference" in regards to the needs of parents attempting to maneuver the foster care system, despite the abundance of information citing these same parents as an important aspect of successful care of the foster child. Alpert and Brisner (2005) asserted that while attempting to create permanency for children, ASFA creates an environment that "is often unsupportive of parents' efforts to be permanent resources for their children" (p. 35). ASFA creates financial incentives and program development to increase adoptions through foster care but no such enticement is in place to support family reunification. There have been many professionals in the social work field who have stressed the need to readdress the biological family as a resource due to the gaps left by ASFA. It has been hypothesized that part of this disconnect arises out of conflicting values: on one hand there is the concept of "rescuing" the child from the biological family that was somehow deficient in caring for him or her, while on the other hand there is the concept of family centeredness (Kapp & Propp, 2002). A separate study found that the effectiveness of the services provided to parents could also be hindered due to the negative attitudes of the professionals towards the parents (Alpert & Britner, 2005). Thus, even professionals who are genuinely trying to assist the parent can be triangulated in a way that leads to a negative outcome.

The relationship between the biological family and the caseworker is paramount. Not only should the caseworker be respectful of the family, but he or she must also be in frequent contact (Child Welfare, 2009). One study, which focused on determining effectiveness of reunification programs, cited the quality of the staff as a key element to a successful program (Family Reunification, 2002). In fact, it has been shown that family

reunification is promoted by more frequent contact between the family and the caseworker (Child Welfare, 2009). One study went so far as to assert that reunification could not occur without a working relationship between the parent and the caseworker (Family Reunification, 2002). Although it can be difficult for the parents to trust the caseworker and share information or establish rapport, the interpersonal relationship between the caseworker and the family has been cited as the strongest predictor of family reunification and thus imperative (Child Welfare, 2009).

To support reunification, the caseworker must establish an open line of communication built on honesty, consistently turn to the family for feedback regarding their child and the foster care process, and provide instruction and reinforcement for the performance and completion of tasks and services that are assigned to the parent through the case plan (Child Welfare, 2009). Simply training workers to work with biological families regarding the care of their children may not be enough. The workers' personal perceptions regarding the clients may by affecting the effectiveness of the services that they are providing; however, there may be some workers that can provide effective services despite an ideological conflict (Alpert & Britner, 2005). Any training and logistics related influences may also impact the workers' attitudes and therefore the effectiveness of the services provided. All these factors must be taken into consideration when addressing an issue as serious as the out of home placement of a child.

Several themes emerged during a study by Kapp and Propp (2002), in which parents of children in foster care were placed into focus groups to discuss their satisfaction with the service provided by the foster care system (2002). The themes that developed highlighted the concerns and frustrations that the parents had with the foster

care system. The areas of concerns that were addressed by participants are as follows: communication, availability, respect, parent caregiver involvement and rights (Kapp & Propp, 2002). Communication developed as a key theme for the parents, citing frustration at the lack of communication with every aspect of the process in every level of service. Specifically, the parents cited frustration with the lack of responsiveness from case managers and inconsistent communication from professionals, and even between professionals, as well as the consistency of what was said. One parent was quoted as saying, "Well, I've almost thought that maybe I need to record what they say. So that when you say, 'Well, you told me this' or—and then they'll say they didn't, you know. They'll use it against you" (p. 234).

Availability was the second theme that developed from the focus groups, which the parents linked to worker turnover and work overload (Kapp & Propp, 2002). Parents empathized with workers who they saw as overworked, but stated that the constant turnover made it difficult to develop a working relationship with the person responsible for their case. Other studies have also included staffing issues as a barrier to successful reunification including high rates of turnover, inexperienced staff, and high caseloads (Child Welfare, 2009). These staffing issues can be directly related to insufficient worker visits with both the child in foster care and the parent, insufficient monitoring and support for the services being provided to the parent and the parents' progress toward their goal, and longer timeframes to achieve reunification goals as each new worker starts.

The third theme that developed during the focus groups was respect, including how the parents felt the professionals working with their case treated them (Kapp & Propp, 2002). When an agency has taken custody of a child from a parent who had to

unwillingly relinquish that child, the relationship understandably begins on adversarial terms. It is the responsibility of the professionals working with that parent to provide the opportunity to develop a positive working relationship. During the focus groups, parents often stated that they felt stigmatized as a "bad parent." One parent was quoted as saying, "...you're really emotionally upset, and when they're rude to you, then that's going to set you off. They do not work with you. They do not communicate with you. They treat you like you're dirt under their feet" (p. 236). This lack of respect and development of frustration leads parents to feel helplessness and hopelessness with little motivation to continue to try to achieve reunification. In this relationship the caseworker has all the power and the parent has no other alternative than to work with the caseworker. For this reason, it is the responsibility of the caseworker to maintain a relationship with the parent in which the parent feels empowered and valuable; a relationship that the parent wants to maintain through an environment of respect and affirmation (Alpert & Britner, 2005).

Professionals must be able to maintain a balance between being supportive to the parent and not being overly permissive. There must be a balance in which parents are given the opportunity to excel in the process without the professionals in the process being the force that propels the parent through; in other words, the professionals can not be allowed to put more work into the parents' success than the parent (Alpert & Britner, 2005). If parents are expected to be the resource that studies have shown they can be, then a relationship that encourages empowerment and skill building is required rather than a relationship in which the parent is treated as inferior.

Parent and caregiver involvement developed as the fourth theme from the focus groups. When a child is in the foster care system, the state becomes the child's legal guardian and affords the caseworker the right to make all decisions regarding the child. The participants in this study discussed feeling left out of all the decisions regarding their child (Kapp & Propp, 2002). A parent must instantaneously transition from being the person responsible for all decisions regarding his or her child, to a person who can be left out of all decisions. Although it is well established as best practice to involve parents as much as possible in planning and decision making regarding their children, the parents in this study stated that they had little contact much less involvement in planning with the case manager once their child was placed in foster care. For optimal success, parents must be given the opportunity to choose their own goals as well as the methods that will be utilized to support them in achieving those goals (Alpert & Britner, 2005).

Unfortunately, there can be a disconnect between this theory and the practice. One parent in the study described the juxtaposition between theory and reality stating, "It's theoretically set up that way. Because when you do the case planning, you have the parents there. You have the therapist that you want there. You know, school people are there. They are there. So theoretically, this is a group project to help figure out the best plan for the child. But it's all a theory. There's no practice to it" (Kapp & Propp, 2002, p. 237). The parents in the focus groups also stated that they felt unable to compete with the foster placement and the material items that their children were being provided while in care.

The last theme that arose was the concept of rights, meaning the rights of the parents of children in care. Many of the parents in the study were able to connect their

frustration with the process to the lack of information that they received and the lack of their ability to be involved in the process, which subsequently made them question what their rights were (Kapp & Propp, 2002). The parents discussed ways to empower one another through information gathering and understanding of their rights to assist in feeling more supported through the process. Several of the parents raised the concern that if they asserted their rights to their worker then there would be retribution. One parent gave an example of this concept stating, "If you criticize or say the wrong thing they cut your visits with your kids. You have no rights whatsoever. You can't say how you feel or anything, because if you do, they'll keep your kids even longer" (p. 240). Understandably, some parents have developed such an intense fear and distrust of the foster care system that they are unable to see the way to any possible improvements. In summary, the main concept that was developed throughout this study was that parents want to be heard and involved in the care of their child.

In addressing what makes family reunification successful, Alpert and Brisner (2005) pointed out that, "continued parental commitment depends critically on the social exchange relationship between parent and caseworker. Fair exchange between these two parties is imperative for the parents' completion of the service plan and reunification" (p. 39). Parents are most likely to be successful and satisfied with their experience in the foster care system if "...they perceived that the social worker was (i) working with them to get their child back, (ii) had clear expectations of them, (iii) prepared them for meetings, (iv) stood up for them in meetings, and (v) respected their cultural background" (p. 40). One study found that the amount and duration of contact between the caseworker and the biological family was directly related to the success of the reunification and that

continued and consistent contact would facilitate the process long-term (Wulczyn, 2004). A program that is family focused will not only increase the rate of reunification but the rate of stability within that reunification (Alpert & Britner, 2005).

Current research suggests that there is not only one way to successfully engage parents in the foster care process but several methods that could be utilized by professionals (Alpert & Britner, 2005). One method is the relationship between the client and caseworker; a positive correlation has been found between the attitude of caseworkers towards the parents and the parents' behavior and functioning. The following factors have also been determined to have a positive correlation with achieving the goal of reunification: foster care placement stability; visits with biological family (including siblings in other foster care placements); appropriately identifying the needs of the child and family then assigning services to address those needs; the involvement of the child and family in the case planning; and worker visits with the child and parent (Child Welfare, 2009).

It is critical to engage biological families in the foster care process if there is any hope of an actual change occurring within the family that would allow for family reunification (Child Welfare, 2009). Engagement can be achieved through active participation and inclusion. For maximum success children should be viewed as an extension of their family and the family as an extension of the community from which they come (Family Reunification, 2002). Effectively engaging the biological family in the process includes making them a part of decision making, encouraging foster parent support, and facilitating visits between the child and the biological family (Child Welfare, 2009). If the caseworker can identify, enhance and build on the natural strengths of the

family when creating the service plan, then the biological parents will be encouraged and have ownership of the plan, which will then lead to improved compliance (Wulczyn, 2004). The use of family team meetings, which involve the family in the team meetings of the professionals regarding the decision making for their child, can be used to promote the involvement of birth parents and extended family in the decision making process (Child Welfare, 2009). It is important that professionals involved in family meetings and case plan development be trained in how to recognize and activate family strengths (Wulczyn, 2004). Foster parents should also be encouraged to support as much appropriate contact between the child and his or her biological family as possible, as well as give the biological family positive support while the child is placed with the foster family (Child Welfare, 2009). There are positives outcomes for children in which the biological family, foster family and foster care agency work together as a team (Family Reunification, 2002).

Increasing the visit frequency with the biological family is also a crucial step in the reunification process. This step also decreases re-entry into foster care (Child Welfare, 2009). A lack of parental involvement through case planning and decision-making, as well as poor caseworker communication and unclear expectations of the caseworker for the parent, has been identified as having a negative correlation with successful reunification (Child Welfare, 2009). It has also been determined that problems with the delivery of family services, such as caseworkers with too high of a caseload, staff turnover and insufficient regulation of reunification, can directly hinder successful reunification (Family Reunification, 2002).

The needs of the individual child and family must be addressed during the foster care planning process. It is critical that there be clearly defined and mutually agreed upon goals for the family to meet (Child Welfare, 2009). A caseworker must effectively plan to build on the strengths of the biological family while simultaneously addressing the needs of the family through appropriate services. It is also important the caseworker be flexible and comprehensive when determining appropriate goals and services (Family Reunification, 2002). An effective assessment will develop an, "individualized, familycentered understanding of a child and family's circumstances, environment, and potential in order to identify each family's unique needs, determine the extent of risk to the child, and construct an appropriate intervention plan" (Child Welfare, 2009, p. 7). Ideally, these assessments can identify the strengths of the family, such as healthy social supports and access to employment, public assistance and/or childcare and a sense of the parents' empowerment. The caseworker can then find a way to incorporate all these strengths into the case plan (Wulczyn, 2004). Initial assessments have been linked to successful reunification in several states when the assessments are used to design appropriate interventions (Child Welfare, 2009). Specifically, risk and/or safety assessments have been used to ensure safe and timely reunification as well as minimize harm and re-entry to foster care. One study that looked at 62 failed reunifications found that in 42 of those cases there had been poor assessment and/or decision making on the part of the professionals involved with the case, again justifying the importance of including an assessment in the foster care planning process.

Case plans have been found to be most effective if they address the specific needs of the family and provide clear objectives that the parent can understand (Child Welfare,

2009). It is critical for the successes of the case plan that professionals follow the guidelines provided by service providers and assign services that meet the needs of the client and the family (Evaluation of Family Preservation and Reunification Programs, 2001). Once the need for services has been established, it is critical that the services are coordinated and made available so that the biological family can utilize them effectively. Services should be designed to create and encourage an environment to which a child can be returned safely and that can be maintained post-reunification (Child Welfare, 2009). The needed services not only involve things such as psychological (evaluation and/or treatment), in-home or substance abuse services, but, concrete services that address the basic necessities that families have such as food and shelter. It has been found that the most effective services are cognitive behavioral, muti-systemic, skills focused services that address behavior and skill building in areas such as home, school and community. In order to achieve the greatest level of success, it is not enough for appropriate services to simply be assigned, but there must be arrangements to ensure availability, accessibility and transportation to the services for the services.

The caseworker ultimately gets to make the decision regarding family reunification and when that can occur. One study surveyed social workers to inquire about what factors led the workers to decide to reunify the family or keep the child in the foster care placement (Wulczyn, 2004). Workers from the study stated that the factors that they weighed most heavily to make that decision were: whether the family has fully participated in and utilized the services that had been made available to them, whether there had been a positive change in behaviors; the parents level of involvement in the child's daily life (did the parent engage in the child's schooling and take interest in the

child's daily life); has the home been made safe for the child's return; has the parent regularly attended visitation with the child; and has the problematic behavior that led to the child coming into foster care been corrected. Researchers have cited parental ambivalence regarding the family reunification as a significant barrier to success.

It is also critical to success of reunification that services do not abruptly end once the child is returned to the biological family. Families need to be provided services to help them anticipate and understand the challenges that they will face throughout the reunification, as well as provide them with skill training and psychological support on how to respond (Wulczyn, 2004). Post-reunification services have been identified as a key aspect of long-term stability and reduction of re-entry into foster care (Child Welfare, 2009). Throughout the 1990's, between 20% and 30% of children who exited foster care re-entered the system over the next ten years (Wulczyn, 2004). Maintaining contact between the biological family and the caseworker may create a challenge, as some families may be resistant to the ongoing presence of the worker in their lives, but could help to facilitate long-term success in the reunification. The length of the postreunification services is debatable with some stating that the need can be as brief as three months, while others assert that it should continue for as long as needed (Child Welfare, 2009). It should also be noted when considering the length of time of services, families with multiple children in care require a longer period of intervention and support to be successful. For most localities it is not possible to continue services indefinitely; therefore, it is important to also teach families how to access community resources so they have the ability to help themselves in the future. The availability of community based resources and the coordination of services with families exiting care has been

identified as a facet of successful reunification (Family Reunification, 2002). It is important to keep in mind that reunification is not a one-time event, but instead a process that involves reintegrating a child into a family that may have changed significantly from the family that the child left (Wulczyn, 2004).

There are also systemic issues that can contribute to the success or failure of reunification. For example, required funding to support the appropriate services for reunification has been cited as a systemic issue (Child Welfare, 2009). It has also been noted that the courts have a direct relationship with the success of reunification. When the court has the ability to cooperate with child welfare agencies and effectively track the permanency timelines for reunification, as well as monitor families after reunification, then there is an increased level of success in reunification. Conversely, crowded dockets and court delays, as well as judges who extend the timeframe for reunification beyond the ASFA guidelines or return a child home before the family is ready, have been determined to have a negative impact on long-term family stability and reunification. It is important that the timeline for reunification be used as a guideline but also be fluid; some families may take longer that the national standard to complete their reunification. Allowing this fluidity to timeframe has been found to result in fewer re-entries into foster care.

The attachment and bond between a parent and child during the foster care process is something that should be tended and nurtured in order to ensure the healthy survival of the existent bond. Research has shown that children who had visitation with their parent were as much as ten times more likely to be successfully reunited (Child Welfare, 2009). Visitation is generally accepted as the most important contributing factor to successful reunification (Dougherty, 2004). For visits to be effective, they should

consist of more than just scheduled time in a room for the parent to be with the child; visits should provide biological parents with the opportunity to build their parenting skills and improve their parent-child interactions (Child Welfare, 2009). Optimally, visits should occur in the parent's home or the home of the foster family and allow for the parent to participate in some of the more challenging childrearing times of the day, such as mealtime and/or bedtime. The ability of parents' capacity to have meaningful visits with their children and know how to appropriately interact with them is often overestimated (Family Reunification, 2002). Therefore, visitation has been found to have a higher correlation with successful reunification if there is an element of education included for the parent. The elements of effective visitation are: formulation of visit ideas around the child's age and interest, assessing parental capabilities, determining areas of overlapping interest for parent and child, picking safe and public places to meet (the department of social services offices are often depressing and have a negative connotation for families), structuring the visit with activities, and providing the parent with a review of the visit and offering suggestions for improving interactions. Parents should not only be allowed but encouraged to participate in school activities, doctor appointments and other out of the home activities (Dougherty, 2004). It is important for visits to be supervised by a professional with clinical knowledge and skills so that there can be a therapeutic focus (Child Welfare, 2009).

Review of Interventions

There have been several previously designed interventions which have had limited success. Of these interventions comprehensive and theory-based interventions have had the most success in effectively addressing the myriad issues that face the

children and families involved in the foster care system (Wulczyn, 2004). One of the studied interventions is Multidimensional Treatment Foster Care (MTFC), which is said to, "target multiple settings and determinants...is delivered in the community...and emphasizes the importance of parental (or other caretaker) role in providing the youngster with consistent close supervision, limit setting, and emotional involvement support" (Wulczyn, 2004, p. 109). Another intervention that has had some success is Multisystemic Therapy (MST), which takes place within the natural setting of the family and their community and highlights the ability of the parent through their role as a primary caretaker (p. 109). This program uses an intensive training protocol, which includes, "orientation, booster training, on-site supervision, and integrity checks". This combination is important since research has proven that for interventions to be successful they need to have "thoughtful implementation of comprehensive and holistic approaches to addressing the needs of family and children in foster care" (p. 109). None of the previously designed models had comprehensive success in rehabilitating families to reunification.

Family preservation services was another program type that was very popular in the late 1980's and early 1990's, but has received some mixed reviews in later research (Evaluation of Family Preservation and Reunification Programs, 2001). Family preservation services are designed to improve the functioning of children and their families and are intended to reduce maltreatment of children and their placement into foster care. The concept is that parents who function better and who have better relationships with their children are at a lower risk of abuse or neglecting their children. The National Family Preservation Network described intensive reunification services as

the following: available staff 24 hours a day seven days a week, two to four family caseload for each worker, contact between the family and the reunification worker within three days of referral, five to 20 hours a week of intensive services, availability of services in the evening and on the weekends, and a limitation of services from 60 to 90 days (Dougherty, 2004). These services are designed to provide parents with hands-on learning opportunities to develop skills such as meal planning, housekeeping and parenting. The goal is to provide the parents with skills-based training that will allow them to be more effective in their parenting. This model has been questioned due to its short-term intensive style; families who are engaged in the child welfare system have typically had longstanding issues with child welfare, which signifies a more complex problem and not a short-term crisis (Evaluation of Family Preservation and Reunification Programs, 2001).

About this Program

The Parent Skills Enrichment Program utilizes the core principles of positive interactions with professionals to assist parents in beginning the journey of acquiring the necessary skills to allow family reunification. This program provides the Department of Social Services as well as private agencies an effective way to interact with parents who are actively seeking family reunification. The goal of the curriculum is to provide parents with necessary information in order to be successful in their service plan.

Program Implementation

The program is designed for parents or caregivers who are actively working a "return home" goal on their service plan. It may be a good idea to also include parents who may not be a likely candidate for family reunification but would be taking an active

role in the child's life; such as if the child was being placed with a relative and a continued relationship with the parent was intended.

The program consists of 10 sessions including the introduction section. All of the sessions are in group format but there is the option for individual or small group break-off sessions should that become necessary. Each group session is scheduled to be one hour and thirty minutes. If at all possible it is preferable that the groups be held at a location other than the Social Services building as this location holds stigma for many participants. The setting would preferably be more neutral and welcoming. If possible it is also suggested that light refreshments be served during the program to ease the interactions. There is a recommended group size of ten to fifteen participants. Please note that participants are actively encouraged to participate throughout the sessions but should never be required to share anything that they do not wish to share.

Referral Process

Department of Social Services Foster Care Social Workers would refer any parent who is actively working a service plan with the goal of return home or any parent who the social worker anticipates having a role in the life of their child in care. The lack of any other admittance criteria leads to a diverse group whose strengths and weaknesses can be utilized to support one another's growth.

Session One-Introduction/Overview.

Resource Materials:

- -Court Timeline (Example provided in Appendix A)
- -Service Plan Template
- -Resource Folders

- -Resource Books
- -Question Box

Session Objectives:

- -To establish group guidelines
- -To identify appropriate ways to interact with professionals
- -To educate the parents on service plans
- -To educate the parents on the Court Timeline

Steps of Session:

- -Introductions
- -Establish Group Guidelines
- -Hand Out Resource Folders
- -Overview of Session Objectives
- -Court Timeline Education
- -Service Plan Education

Introduction. Facilitators introduce themselves and give background information. Facilitators also provide parents with the opportunity to introduce themselves if they choose. Roll is taken and it is explained that the foster care social workers will be updated regarding attendance so that parents get credit for their participation.

Establish group guidelines. The establishment of group guidelines should be a collective activity where the facilitators guide the participants through the development of appropriate guidelines. It is important that parents be allowed some confidentiality regarding their children and the circumstances under which the child(ren) came into care.

Parents should never be required to participate in a way that would require disclosure of personal information. During guideline development this is an important concept to be covered. A question box should be available for parents to ask personal questions that should not be discussed in the session. The question box can be introduced when this concept is discussed during guideline development.

Hand out resource folders. Each participant should be given a resource folder to store all handouts that are provided during the sessions. Each folder should also contain a notepad for the participant to record any notes, a pen, and contact information for the facilitators.

Overview of session objectives. Facilitators should provide parents with the structure of the session. Through demeanor and instruction the facilitators should maintain a casual tenor to the group.

-It is important to validate the parents in the difficulty and frustration of the foster care process. There should also be acknowledgment that there are some aspects of the foster care process to which there may be no good solution. The facilitators should be candid with the parents regarding their ability to provide access to resources and to advocate for the parents but should also be forthcoming regarding the limitations of their role.

I may not be able to answer every question that you have but I will certainly be able to either provide you with a resource that will be able to answer your question or contact someone who can.

-Introduce parents to the Resource Books-a compilation of local resources available at each group for parents to utilize.

The resource books will be on the back table during every session and they are for your use, please feel free to look up any information about local resources. If you know of a resource that we have not included we would appreciate you letting us know about it so that we can offer it to others that we work with.

-Provide education on how to understand the service plan requirements and which sections will provide key information.

There are sections of the service plan that will be the exact same from the first to the last plan written, then there are sections that have vitally important information, we will help you understand which sections are which.

-Provide information regarding the court process of foster care and what to expect at each hearing.

During this process you will have to attend many court proceedings. Some are very quick in and out check-ins with the judge while others are proceedings which will include testimony. We will provide you with a timeline and description of what each proceeding will entail.

Court timeline education. Use a timeline prepared by the department of social services attorney or another attorney who is familiar with the court timeline of the foster care cases in your area. There is a sample timeline included but it may not be correct for every locality. Each hearing should be described as to the purpose and timeframe. Parents should be empowered to ask questions about each proceeding and be instructed on the appropriate time for questions. Parents should also be given information regarding who to expect in the courtroom and the role of each participant in the hearing. It may be

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helpful to have a professional come in as a guest speaker for this portion, to answer

questions about the legal proceedings.

Service plan education. Use a blank template for the service plan to discuss each

portion and what information it would include. Parents should be educated on which

sections will remain the same throughout the lifetime of the service plan. Parents should

also be directed toward the sections which have the service plan requirements for each

parent and the child. It would also be beneficial to discuss what rights the parent has in

your locality regarding input toward the service plan and the expectation of input.

Question and answer. Parents should be allowed to ask questions throughout the

session; however, at the end of the session the floor should be opened to allow parents to

ask any remaining questions, give reactions or provide feedback.

Session Two-Mental Health Options and Resources.

Resource Materials:

-Mental Health Resource List

Example: http://www.sdsheriff.net/jailinfo/discharge_referral_handout.pdf

-Resource Folders

-Resource Books

-Question Box

Session Objectives:

-To provide a brief overview of mental health

-To educate the parents on mental health services available in the community

-To empower parents regarding their mental health options

Steps of Session:

- -Introductions
- -Overview of Session Objectives
- -Mental Health Overview
- -Mental Health Service Availability Education
- -Mental Health Optionns

Introductions. Facilitators introduce him/herself and provide parents with the opportunity to introduce themselves if they choose. Roll is taken.

Overview of session objectives. Facilitators should provide parents with the structure of the session. Through demeanor and instruction the facilitators should maintain a casual tenor to the group.

-Mental Health can be a very loaded portion of the service plan because often parents have pre-conceived ideas about mental health and what that means. It is important to address these ideas before discussing services

What does mental health mean to you? What type of people do you think need mental health services?

-Each community has a variety of mental heath resources available. Parents should be familiarized with what is available in their community and how to access different providers.

The local CSB is the only provider in our area that uses a sliding scale so if you do not have access to insurance it would be your best option. We have brochures that discuss all the services that the CSB provides and we will discuss the intake process and how to begin.

-Parents should understand that they have options regarding their mental health requirements in their service plan.

If your social worker refers you to a provider who you are uncomfortable with it is important that you discuss this with your worker. Ultimately, your worker would not have referred you for the service if they did not believe that you would benefit from it and it will be most beneficial if you and the provider are a good match. Call your worker and let them know your concerns regarding the provider. This doesn't guarantee that they will switch the provider if they are paying for the service but if you can interact with your worker and let them know your concern then that will be most beneficial for you.

Mental health overview. Many people come into the sessions with preconceived ideas about mental health services and what type of person would utilize these services. It is important to dispel any myths about mental health and normalize the experience. It is not important for parents to be provided with any specifics regarding mental health disorders. Due to the high prevalence of mental health services in a service plan it is important to normalize the experience and address the comfort level of the participants with the mental health services. It may be helpful to have a professional come in as a guest speaker for this portion, to answer questions about mental Health.

Service availability. Each community has various mental health services available. Parents should be offered a handout with as many local providers as possible with a specific intent for the providers to be diverse in services, payment options and scheduling. If local service providers are willing to provide brochures for their available services then these can be disseminated to participants with the understanding that the offering of brochures does not indicate an endorsement only an offering of information.

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Mental health options. The relationship between individuals and their mental

health professional is paramount. Parents should be empowered to express their desires

regarding mental health referrals and express their displeasure with service providers. If

a caseworker has arranged for funding of the service then they have the ultimate say

regarding to whom the service is referred. However, parents should be encouraged to

contact their case worker and express their concerns if they are in some way unpleased

with their provider. Ultimately, the caseworker referred them for the services because

they felt that it would be beneficial. A provider is going to provide the most beneficial

service if they are a good match for the client. This is a time to readdress the appropriate

interactions with professionals that was covered in the first session. A role play of a

parent calling their caseworker to express dissatisfaction with a referred service would be

a good way to demonstrate how to talk to your caseworker in a way that your concerns

can be heard and not be muffled by inappropriate interactions.

Question and answer. Parents should be allowed to ask questions throughout the

session; however, at the end of that least two ae session the floor should be opened to

allow parents to ask any remaining questions, give reactions or provide feedback.

Session Three-Housing Resources.

Resource Materials:

-Housing Resource List

Example: http://www.parkslopechurch.com/mediafiles/general-housing-

rent-or-buy-resource-handout.pdf

-Resource Folders

- -Resource Books
- -Question Box

Session Objectives:

- -To educate the parents on housing resources available in the community
- -To educate parents on the expectations for housing

Steps of Session:

- -Introductions
- -Overview of Session Objectives
- -Housing Expectation Education
- -Housing Resource Education

Introductions. Facilitators introduce him/herself and provide parents with the opportunity to introduce themselves if they choose. Roll is taken.

Overview of session objectives. Facilitators should provide parents with the structure of the session. Through demeanor and instruction the facilitators should maintain a casual tenor to the group.

-Appropriate housing will always be a key portion of any service plan that has a reunification goal. Many parents may not have a clear understanding regarding what would constitute appropriate housing. Facilitators should educate parents regarding the housing expectations and the timeframe for the housing to be considered stable.

Living with a friend can not be considered stable housing. No matter how good of a friend that you think they are, they can make you leave at any time. You need to have a written lease for your housing and any roommate must be pre-approved by your caseworker.

-Each community has a variety of housing resources available. Parents should be familiarized with what is available in their community and how to access different resources.

In our community we have two apartment complexes that have income based rent.

We have the applications for those complexes here and we will discuss the qualification guidelines.

Housing expectation education. Appropriate and stable housing will be a required portion of every reunification service plan. It is therefore important for parents to clearly understand what would constitute appropriate and stable housing. Parents should be given the opportunity to state what they think constitutes appropriate and stable housing and then the facilitators can assist in developing guidelines that adhere to agency standards. It should be clear to parents what the agency policy's are regarding number of bedrooms required, roommates, length of time required for stability to be established, cleanliness, and other aspects of housing that the agency considers critical.

Resource availability. Each community has various housing resources available. Parents should be offered a handout with as many local resources as possible with a specific intent for the providers to be diverse in services, payment options and scheduling. Not only should types of housing be represented but local services for housing payment assistance should be included. Parents should be given contact information for agencies that can provide financial assistance for housing when needed. Local shelter information should also be provided. A shelter can be a step to stability in certain circumstances. If local housing developments and housing services are willing to provide brochures for their available units and/or services then these can be disseminated

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to participants with the understanding that the offering of brochures does not indicate an

endorsement only an offering of information.

Question and answer. Parents should be allowed to ask questions throughout the

session; however, at the end of the session the floor should be opened to allow parents to

ask any remaining questions, give reactions or provide feedback.

Session Four-Sexual Assault Awareness.

Resource Materials:

-Sexual Assault/Abuse Prevention Resources

Example: http://www.D2L.org/atf/cf/{64AF78C4-5EB8-45AA-BC28-

F7EE2B581919}/7%20Steps%20to%20Protecting%20Our%20Children.pdf

-Sexual Assault Pre-test/Post-test

-Sexual Assault/Abuse Pamphlets

-Resource Folders

-Resource Books

-Question Box

Session Objectives:

-To educate the parents on ways to protect children from sexual assault

-To educate parents on resources in the community for sexual assualt

Steps of Session:

-Introductions

-Overview of Session Objectives

-Sexual Assault/Abuse Education

-Sexual Assault/Abuse Resource Education

Introductions. Facilitators introduce him/herself and provide parents with the opportunity to introduce themselves if they choose. Roll is taken.

Overview of session objectives. Facilitators should provide parents with the structure of the session. Through demeanor and instruction the facilitators should maintain a casual tenor to the group.

-Sexual assault and abuse awareness is an important skill set for any parent. Parents of children in foster care need to be especially educated as their child becomes more vulnerable to a perpetrator due to the circumstances of their lives. A child who is in out of home care can be at an increased risk due to the unnatural support system and likely desire of the child to find solace in another person.

As children transition from their family to an out of home placement they are vulnerable. This is a time of crisis in that child's life no matter the circumstances of removal. This vulnerability creates an opportunity for a perpetrator to attempt to groom a child. We want to understand how to speak to our children about sexual assault and abuse and look for the warning signs.

-There are a variety of different sexual assault and abuse services available. Parents should be familiarized with what is available in their community and how to access different resources.

In our community we have an agency that provides counseling, group education, and advocacy for victims of sexual assault or abuse and their families.

Sexual assault and abuse education. Some children may come into care due to sexual assault or abuse; others may have no experience with the subject. As parents of

children in foster care it is important to be educated on how to talk to his/her child about sexual assault and what to look for as warning signs that a relationship may be inappropriate. It is also important to stress the need for parents to step outside his/her comfort zone and to be open with their children regarding this subject. Sexual assault and abuse are not easy topics for anyone to talk about so it is a key objective of this session to increase the comfort level for each parent. At the beginning of the session it is helpful to administer a pre-test with common misconceptions regarding sexual abuse, then at the end of the session the test can be re-administered to assure that parents have been provided all the necessary information. This pre-test/post-test can be created by picking out relevant concepts from the pamphlets and resources. This is a complex topic; if there is an agency or individual who would be willing to speak on this topic that would be suggested. If there is no expert available please take the time to prepare and be educated regarding this topic. Parents should also be advised that due to the complex nature of some of their situations that any concerns should be addressed with their case worker and their child's therapist; but, that they need the tools to be able to respond to their child in the moment should they disclose any alarming information. An example of this would be if a child disclosed inappropriate touching by a foster parent; this should be addressed with the caseworker but the parent needs to be appropriate in the moment of the disclosure with the child.

Resource availability. Communities may have various sexual assault and abuse services available. Parents should be offered a handout with as many local resources as possible with a specific intent for the providers to be diverse in services, payment options and scheduling. Local shelter information should also be provided, for any sexual assault

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or abuse situation where there may be imminent danger and the need for relocation for

safety purposes. If local sexual assault and abuse service providers are willing to provide

brochures for their available services then these can be disseminated to participants with

the understanding that the offering of brochures does not indicate an endorsement only an

offering of information.

Question and answer. Parents should be allowed to ask questions throughout the

session; however, at the end of the session the floor should be opened to allow parents to

ask any remaining questions, give reactions or provide feedback.

Session Five-Employment-Getting a Job and Keeping a Job.

Resource Materials:

-Sample Resume

Example: from http://www.sampleresume.cn/wp-

content/uploads/mechanic_resume.gif

-Pictures of appropriate interview attire

Example: http://www.career.unm.edu/forms/interview_dress.pdf

-Employment Resource List

Example: http://www.sandiego.gov/public-library/catalog-

databases/ewresources.shtml

-Keeping a Job

-Resource Folders

-Resource Books

-Question Box

Session Objectives:

- -To educate the parents on ways to successfully attain employment
- -To educate parents on maintaining employment

Steps of Session:

- -Introductions
- -Overview of Session Objectives
- -Obtaining Employment Education
- -Retaining Employment Education

Introductions. Facilitators introduce him/herself and provide parents with the opportunity to introduce themselves if they choose. Roll is taken.

Overview of session objectives. Facilitators should provide parents with the structure of the session. Through demeanor and instruction the facilitators should maintain a casual tenor to the group.

-Employment will commonly be a service plan requirement. Parents must be able to prove that they are gainfully employed and can support their child. Often parents need assistance in obtaining employment due to a lack of knowledge regarding how to appropriately navigate the process. Parents should be provided with information that would be useful in obtaining employment.

Many employers now want you to fill in an application online. This does not allow you the benefit of making a good impression in person, it is often the best practice to go in person to the establishment the following week to follow up on your application.

-Once someone has been hired by an employer, it is important that they be able to maintain that employment. Parents should be advised on what makes a good employee and the benefits of job stability.

For most appointments being five minutes late is not a big deal, but, if you are consistently five minutes late for work it can be a very big deal. Punctuality is important to an employer because they need to be able to rely on employees being there when they are scheduled to be so that there is always appropriate coverage to complete the work.

Obtaining employment education. Each parent will be required to have gainful employment (unless there is a medical waiver) in order to establish their ability to provide for their child upon reunification. Often times there will also be a requirement of stability in employment to assure longevity of the ability to provide. This session should be very interactive, parents can be real assets to one another in describing successful experiences in finding employment (past or present). Parents need to be educated on every step of the process to obtain a job: job search, resume's and cover letters, applications, and interviews. Parents need to be given resource sheets for where to look for employment locally. Giving each session participant a mock application can prepare them for what information that they will need to provide and facilitators can assist parents in providing the information in a professional manner. Sample resume's and cover letters can also be provided and discussed. Role Play activities work well so that the facilitator can set up a mock interview and prepare participants for a successful experience.

Retaining employment education. Finding a job is only the first step of successful employment. There are many attributes that can make an employee an asset and others that can be an employer turn off. Participants should be taught the importance

of: self-image, dress, attitude, appropriate communication, behavior, timeliness, following the work schedule, attendance, and responsibility. Allowing participants to describe the perfect employee's attributes is a great way to start this activity.

Question and answer. Parents should be allowed to ask questions throughout the session; however, at the end of the session the floor should be opened to allow parents to ask any remaining questions, give reactions or provide feedback.

Session Six-Food Resources.

Resource Materials:

-Eating Healthy

-Food Resource Education

Example:

http://www.valleyaidsnetwork.org/resources/Food+Assistance+in+Harrisonburg+\$26+Rockingham+County.pdf

- -Resource Folders
- -Resource Books
- -Question Box

Session Objectives:

- -To educate the parents on healthy eating
- -To educate parents on resources in the community for food

Steps of Session:

- -Introductions
- -Overview of Session Objectives

- -Healthy Eating Education
- -Food Resource Education

Introductions. Facilitators introduce him/herself and provide parents with the opportunity to introduce themselves if they choose. Roll is taken.

Overview of session objectives. Facilitators should provide parents with the structure of the session. Through demeanor and instruction the facilitators should maintain a casual tenor to the group.

-Parents are required to demonstrate that they can provide healthy nutrition for their children. This can be difficult with limited understanding of healthy eating as well as limited food resources. Teaching parents how to eat healthy on a budget provides them with the skills to meet this service plan requirement.

Kids' behavior is sensitive to what they eat. If you fill your child with sugary processed foods then you will not only see an effect on their health but also their behavior.

-There are a variety of different food resources available. Parents should be familiarized with what is available in their community and how to access different resources.

In our community we have several churches that offer weekly food pantries, soup kitchens, food stamps and WIC available. We will talk about how to access these resources and how to best utilize them to make healthy meals for your family.

Healthy eating education. A parent's ability to provide appropriate nutrition for their child will be paramount in the family's reunification. Participants should be provided with information regarding basic nutrition for children of all ages. Handouts that have guidelines for age appropriate nutritional requirements would be appropriate. A

guest speaker who can go over healthy meals that can be prepared on a budget would be a great addition to this session. If the facility allows then the speaker could even go through the steps of preparing one of the meals. Participants should be provided with recipes for any of the meals discussed. It is important that any meal demonstrated be affordable for the participants.

Food resource availability. Communities may have numerous food resources available. Parents should be offered a handout with as many local resources as possible with a specific intent for the providers to be diverse in services and availability. Local food bank information should be provided as well as soup kitchen and the local department of social services. It would be helpful to have a food stamp and WIC application on hand to go over with the participants. If local food pantries and soup kitchens are willing to provide brochures for their available services then these can be disseminated to participants with the understanding that the offering of brochures does not indicate an endorsement only an offering of information.

Question and answer. Parents should be allowed to ask questions throughout the session; however, at the end of the session the floor should be opened to allow parents to ask any remaining questions, give reactions or provide feedback.

Session Seven-Transportation Resources.

Resource Materials:

-Transportation Resources

Example:

http://www.gorgetranslink.com/documents/RegionalTransportationResourceList.p

<u>df</u>

- -Children's Car Seat Safety regulations
- -Resource Folders
- -Resource Books
- -Question Box

Session Objectives:

- -To educate the parents on different means of transportation available within the community
- -To educate parents on Children's Car Seat Safety Regulations

Steps of Session:

- -Introductions
- -Overview of Session Objectives
- -Transportation Education
- -Children's Car Seat Safety Education

Introductions. Facilitators introduce him/herself and provide parents with the opportunity to introduce themselves if they choose. Roll is taken.

Overview of session objectives. Facilitators should provide parents with the structure of the session. Through demeanor and instruction the facilitators should maintain a casual tenor to the group.

-While there is no requirement regarding transportation for reunification there are many required appointments. Parents must be able to maneuver through multiple appointments and therefore maneuver transportation.

A lack of transportation is never going to be an acceptable excuse to miss any appointment, visit or hearing so we need to educate ourselves on what is available that is affordable.

-Part of transporting any child is being sure that the child is being transported safely.

Awareness of laws and guidelines regarding child safety seats is vital.

Who here knows when a child should transition from a forward facing car seat to a booster seat?

Transportation education. There are many ways to get from here to there.

Educating parents on transportation in the community can empower them to attend appointments. There are many different forms of transportation which can all be addressed. Different forms of transportation which can be addressed are: public buses and trains, ride share, personal automobiles, bicycles and walking. Participants can get involved in this session by discussing forms of transportation that they have utilized and the experience that they had with the specific method. Facilitators should be practical and realistic when discussing the benefits and disadvantages to different types of transportation. The objective is to empower the parents regarding transportation options and to reduce anxiety regarding the ability to have transportation to the many required appointments. Facilitators should also research the community resources to determine whether there are any not for profit agencies that assist in transportation or transportation

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related costs; if this type of agency is available parents should be provided with

information regarding available services and eligibility requirements.

Transportation Safety. Different types of transportation require different safety

measures for children. Parents should be provided with all applicable transportation

safety laws and guidelines for the locality. Children's car seat regulations, bike safety,

and pedestrian safety are several topics that may be applicable to this group. A firefighter

who has been trained in children's car seat safety would be an excellent speaker for his

session. A firefighter would be able to discuss the seat requirements as well as proper

installation.

Question and answer. Parents should be allowed to ask questions throughout the

session; however, at the end of the session the floor should be opened to allow parents to

ask any remaining questions, give reactions or provide feedback.

Session Eight-Budgeting/Money Smart.

Resource Materials:

-Budget Guide

Example: http://www.wihed.org/eep/pdfs/Budgeting%20Handouts.pdf

-Understanding your credit score handout

Example: http://www.csaj.org/documents/53.pdf

-Resource Folders

-Resource Books

-Question Box

Session Objectives:

- -To educate the parents on budgeting
- -To educate parents on understanding credit scores

Steps of Session:

score information.

- -Introductions
- -Overview of Session Objectives
- -Budget Education
- -Credit Score Education

Introductions. Facilitators introduce him/herself and provide parents with the opportunity to introduce themselves if they choose. Roll is taken.

Overview of session objectives. Facilitators should provide parents with the structure of the session. Through demeanor and instruction the facilitators should maintain a casual tenor to the group.

-Budgeting is a life skill that can be utilized by anyone. Parents of children in foster care can be scrutinized regarding their expenditures. It is important that parents can establish a budget which demonstrates financial stability for reunification.

While it may not be the business of your caseworker what you spend your money on, it is her business to determine whether you can be financially stable. Unfortunately, sometimes proving stability means that you have to sacrifice some of your privacy.

-Credit scores are now used for anything from employment to housing. It is important that participants be educated on what affects their credit score and how to access credit

Who here knows anything about their credit score? How it is determined? What affects the score? It can all seem like a pretty complicated system that is really difficult

to understand. We are going to try and break it down to be a little more understandable for everyone.

Budget education. Poverty is not a reason for children to stay in foster care but a parent's inability to provide basic necessities such as food, clothing and shelter can be. It can be difficult for any individual's to disclose financial information. It is important that this session be facilitated so that all information is provided in generalities and participants be discouraged from sharing their personal information. This can be framed within the boundaries of privacy and safety. A general budget with percentages of total earnings that should be allotted for each expense will be the most practical way to approach this topic. Each participant can be provided with a blank budget sheet and fill in their personal information on their own. It is important when using a mathematical concept such as percentages that it be thoroughly explained to the participants in the beginning of the exercise. A mock budget can be prepared by facilitators to be used as a guide for participants.

Credit score education. The uses for the credit score are expanding. No longer is it used solely for lending purposes; but, now for housing and employment. There are many factors that affect the credit score: debt, income, payment history, employment and previous bankruptcy are some of the contributing factors. Due to the fact that this can be a complicated and confusing topic it is best addressed by a professional who specializes in credit. Many credit unions and banks have community representatives who specialize in presenting information about building, maintaining and repairing credit. Research what is available in your community and have a guest speaker. If local banks, credit unions or other credit service providers are willing to provide brochures for their

available services then these can be disseminated to participants with the understanding that the offering of brochures does not indicate an endorsement only an offering of information.

Question and answer. Parents should be allowed to ask questions throughout the session; however, at the end of the session the floor should be opened to allow parents to ask any remaining questions, give reactions or provide feedback.

Session Nine-Interpersonal Skills.

Resource Materials:

- -Resource Folders
- -Resource Books
- -Question Box

Session Objectives:

- -To educate the parents on Interpersonal Skills
- -To educate parents on Assertive versus Aggressive

Steps of Session:

- -Introductions
- -Overview of Session Objectives
- -Interpersonal Skill Education
- -Assertive versus Aggressive Education—Empowering parents to advocate for him/herself

Introductions. Facilitators introduce him/herself and provide parents with the opportunity to introduce themselves if they choose. Roll is taken.

Overview of session objectives. Facilitators should provide parents with the structure of the session. Through demeanor and instruction the facilitators should maintain a casual tenor to the group.

-Good interpersonal skills are not something that comes naturally or easily to many people. Participants should be educated on social norms and expectations of interpersonal skills.

We only have one session left after today so you have spent nine weeks with us in this group. Let's talk about the groups experience of the facilitators. How has the way that we have interacted with you been different from the way that other professionals have interacted with you?

-Reunification is a process in which a parent needs to be able to advocate for his/her self. It is important that participants learn how to be assertive without being aggressive so that they can be heard by the professionals involved in their child's case.

When you call one of the professionals involved in your child's case to discuss a concern and you don't hear back for days and days, it's frustrating. But if you keep calling and calling and leaving angry messages your concern will never be addressed. The professional that you are trying to work with to advocate for your child will most likely be lost in your behavior and unable to really be attentive to your concern regarding your child.

Interpersonal skills education. The way that each parent behaves with each professional involved in the case of their child is important. When considering reunification case workers will often push parents and require them to comply with many different services. If the parent behaves in a way that is inappropriate with any of the

professionals then it gets reported back to the caseworker and can be raised as a concern regarding that parents ability to provide appropriate guidance for their child and to deal with the daily stresses of parenting. Parents therefore need to be taught the expectations of their behavior. This session is best addressed by creating scenarios and having the parents provide their reactions to each situation. The facilitator can then provide direction and feedback regarding the best way to maneuver each scenario.

Assertive versus aggressive education. It is important that each parent be able to advocate for him/her self. The reunification process is difficult on its best day and parents need to be able to talk to professionals and point out the progress or sacrifices that they have been able to make. It can be the tendency of some professionals to focus on the negative aspects of the parent; it is important that the parent be able to acknowledge their struggles but also speak to their strength. What often happens is that the parent becomes defensive and instead of asserting their strengths they become angry and aggressive in their response. When this happens the strengths that the parent was attempting to highlight are completely overshadowed by their response to the situation. By discussing and practicing tone, body language and word choice parents can learn to present as assertive and not aggressive. One great exercise for this is to take ambiguous statements and have participants read them in assertive and aggressive voices to note the different meanings.

Question and answer. Parents should be allowed to ask questions throughout the session; however, at the end of the session the floor should be opened to allow parents to ask any remaining questions, give reactions or provide feedback.

Session Ten-Parenting and Child Development and Program Evaluation.

Resource Materials:

-Basic Child Development Handout

Example:

http://sde.state.ok.us/Programs/ECEduc/pdf/ChildDevHandout.pdf

- -Evaluation Tool (Appendix B)
- -Resource Folders
- -Resource Books
- -Question Box

Session Objectives:

- -To educate the parents on basic child development
- -To educate parents on general parenting techniques

Steps of Session:

- -Introductions
- -Overview of Session Objectives
- -Child Development Education
- -Parenting Education

Introductions. Facilitators introduce him/herself and provide parents with the opportunity to introduce themselves if they choose. Roll is taken.

Overview of session objectives. Facilitators should provide parents with the structure of the session. Through demeanor and instruction the facilitators should maintain a casual tenor to the group.

-It is virtually impossible to have appropriate expectations for a child's behavior if you do not understand where that child is developmentally. Parent's need to have a general understanding of their child's mental and physical development in order to develop appropriate expectations of their child's behavior.

Would you expect a newborn to walk? No, because you understand that a newborn is not developmentally able to walk, that's easy to understand. Did you know that it is just as ridiculous to expect your two year old to share?

-A brief overview of parenting techniques will engage participants to discuss parenting styles. Many parents only have their family and friends to reference when it comes to what is appropriate parenting. Providing parents with some basic techniques and resources for parenting can open the door to better parenting choices.

Let's talk about discipline. What comes to your mind when I say that word?

Child development education. Reunification will often mean that the parent is back in he role of providing discipline for the first time since the child went into care. Parents must be provided some information regarding basic physical, emotional and mental development to be able to provide appropriate boundaries and have appropriate expectations. Due to the fact that the participants may have a vast range of ages for their children in care parents should be provided with a handout of general developmental expectations for every age group. It may be helpful to have a child development specialist give a short presentation and be available to answer specific questions regarding child development.

Parenting education. Communities may have various parenting classes and services available. Parents should be offered a handout with as many local resources as

possible with a specific intent for the providers to be diverse in services, payment options and scheduling. Due to the time constraints of this session it will only be possible to give a very brief sampling of parenting techniques. Parents can be given different scenarios regarding child rearing and asked to provide their response. Facilitators can then provide guidance and alternative parenting techniques in order to address each scenario. It is important to link the techniques with the scenarios so that parents can better understand the practicality of the techniques.

Question and answer. Parents should be allowed to ask questions throughout the session; however, at the end of the session the floor should be opened to allow parents to ask any remaining questions, give reactions or provide feedback.

Conclusion

For too many parents the reality of the foster care system is that they are provided with disjointed services that are ineffective in assisting the family navigating an immensely complicated system. This curriculum will not answer every problem that a family may have in traversing the difficult terrain of the foster care system; but, it will allow parents to enjoy an environment that promotes respect and values their strengths. The facilitating staff hold the key role of providing these families with a corrective experience to the chaos and disrespect that many have encountered while being engaged with the foster care system. Allowing the parents to have a space where their difficulties are acknowledged and their strengths embraced. Having a child placed in foster care will most certainly be one of the most devastating experiences that a parent could experience and needs to be addressed as such if the family is expected to succeed.

Appendix A

TIMELINE & INFORMATION FOR PARENTS OF CHILDREN IN FOSTER CARE

Your child's custody has been awarded to HRSSD by Court Order. The Court could have awarded your child's custody to HRSSD for any one of the following reasons:

The child is a danger to himself or others

The child was abused or neglected

The child was not going to school

The child was a habitual runaway.

You entrusted your child to HRSSD, either temporarily or permanently.

You ask the Court to take custody of your child.

Your child was delinquent.

In each case, in order for the Court to award custody to HRSSD, the Court had to find that it was "contrary to the child's welfare" to remain in your home- in other words, that it was not safe for the child to remain in your home, either due to your behaviors or home environment, or the child's behaviors.

THE FOSTER CARE PLAN

Once a child is placed in foster care, HRSSD has 60 days from the date of custody to file a foster care plan.

The foster care plan sets forth what is expected of the parent and of HRSSD. It is the blueprint for the case.

The goal of the foster care plan is usually return the child to the home from which the child was removed- "Return Home".

Only in certain circumstances will the Court approve a goal other than return home at the beginning of the case. Some of the circumstances are as follows:

- The parent has been convicted of killing or conspiring to kill a child in his care or the other parent of the child.
- The parent's rights to another child were previously involuntarily terminated.
 - The parent was convicted of felony assault resulting in serious bodily injury or felony sexual assault of a child residing with him or her.
 - The parent subjected a child to aggravated circumstances- torture, chronic or severe sexual or physical abuse.
 - The parent has chronic and severe mental health or substance abuse problems, has not responded to past treatment, and it is not likely that the parent can overcome the addiction or mental health problems within a reasonable period of time (12 mos.+-).

Sometimes the foster care plan will have concurrent goals- such as Return Home to the parent from whom the child was removed and Placement With Relative- placement with the biological parent who did not have custody of the child at removal.

The Foster Care Plan describes why the child came into Foster Care, the services the agency will offer the parent and child, and what the parent must do. HRSSD identifies the problems the parent/prior custodian/ relative must fix in order for the child to be safely placed with the parent/prior custodian/relative. HRSSD lists services it will offer to the parent and child to help them fix the problems.

The most important paragraph for a parent is Paragraph 7 of the Foster Care plan. Paragraph 7 lists the services HRSSD will offer <u>and the parent must complete</u> in order for the child to be safely Returned Home, (or if RH is not the goal, to achieve the other goal).

(Paragraph 7 should be posted on the refrigerator of the parent's home, etc.)

PARENT/PRIOR CUSTODIAN HAS 12 MOS. TO ACHIEVE GOALS OF FOSTER CARE PLAN

A parent or prior custodian has **ONLY 12 mos.** to complete the services listed in the foster care plan and to show the child can be safely placed in the parent/pc's home.

This is not a long time for a parent to, for instance, get stable housing and employment, kick a drug or alcohol habit, get rid of an abusive significant other, or work on relationship and parenting of child, etc. Parent is being asked to make major life changes in just 12 mos.

(If the Court finds that substantial progress is being made, the time for the goal to be achieved can be extended to 18mos. This is only done where a parent is cooperative, is working diligently to achieve the plan goals, and the parent has made substantial progress toward having the child safely placed w/him/her.)

THE HEARINGS

1. Initial hearing at which child is removed.

CHINS
Preliminary Removal Hearing
Delinquency
Relief of Custody
Entrustment
Etc.

2. Initial Foster Care Plan

Hearing to review and approve the initial foster care plan

Takes place within 75 days of removal.

At this hearing, the Court reviews the initial foster care plan to see if the goal is appropriate and if the services to be offered to the parent/prior custodian are adequate.

3. Foster Care Review Hearing

Takes place within 6 mos. of Initial Foster Care Hearing

The Court reviews the progress being made toward the goal of the foster care plan. The Court can address any issues re visitation, etc.

4. Permanency Planning Hearing

Within 11 mos. of Initial Foster Care Hearing (about 13 mos. after child removed.)

This buck stops at this hearing. The parent has had twelve months to fix his/her problems and to show can safely parent the child. At this hearing, the twelve months are up. The Court should make a permanent decision about where your child should be placed.

IF THE COURT FINDS AT THE PERMANENCY PLANNING HEARING THAT THE CHILD CANNOT BE SAFELY PLACED WITH A PARENT.

- 1. If the Court finds at the PPH that the child cannot be safely placed with a parent, the Court will approve another goal for placement of the child.
- 2. The next goal, after Return Home/ PWR bio parent, is Placement with a Relative.

In order for this goal to be achieved, the relative must pass a home study and background checks, and relative must be committed to providing a safe and permanent home for the child. The relative must want and be able to raise the child.

- 3. If no RH or PWR, then Court must choose goal of Adoption (unless not in BIOC, cannot be achieved due to child's age....).
- 4. If no RH, PWR, or adoption, then Permanent Foster Care or Independent Living (for child 16+).
- 5. APPLA- Another Planned Permanent Living Arrangement May not want to discuss w/ parents as this will be n/a in most cases. This is the goal where due to a severe and disabling physical, emotional, or neurological condition, a child requires residential care, and no other goal can be achieved until the child no longer needs residential care. Where this goal is

approved, the timeline stops running- because no other goal can be achieved while the child is in that condition.

TERMINATION OF PARENTAL RIGHTS

In order for child to be adopted by new parents, the biological parents' rights must be terminated. Parental rights can be terminated by a court voluntarily or involuntarily- meaning at the request of the parents' or over the parents' objection.

a. Voluntary Termination

If a parent realizes that he she cannot safely care for a child, and it is not in the child's best interest to be placed with a relative, the parent may agree to voluntarily terminate his/her parental rights to the child so that the child may be adopted. The parent would sign an agreement with HRSSD, and the Court would have to approve the agreement and termination of parental rights.

b. Involuntary Termination

Where HRSSD believes that child cannot be safely RH or PWR, parent does not want child to be adopted, HRSSD must petition Court requesting Court involuntarily terminate parental rights.

HRSSD must prove by clear and convincing evidence that termination is in the child's best interest, that HRSSD has sought out relative placements and been unable to place the child with a relative, and that the child cannot be safely placed with the parent whose rights it seeks to terminate (because parent has failed to remedy conditions which caused removal).

Clear and convincing evidence is a very high standard of proof, like beyond a reasonable doubt in a criminal case.

The Court will set a trial on the petitions to involuntarily terminate parental rights. This trial may take place at the Permanency Planning Hearing or shortly after the Permanency Planning Hearing.

A parent is entitled to subpoena witnesses and present evidence as to why his or her parental rights should not be terminated, and to a full hearing on the evidence.

A parent or HRSSD may appeal the decision of the Juvenile Court to the Circuit Court, where the parent or HRSSD has a right to a new trial.

RIGHT TO COUNSEL

The parent of a child in foster care has a right to counsel, and may apply for Court appointed counsel at any time. The Court will appoint counsel if the parent's income is below a certain amount such that the parent cannot afford to hire counsel.

To apply for court-appointed counsel, the parent should go to the JDR Clerk's Ofc. during business hours and request court-appointed counsel. The Clerk will give the parent a financial statement which the parent must sign and return to the Clerk's Office.

Phone # 564-3370.

A parent should receive a notice in the mail with the name of the court-appointed attorney. The parent should immediately call to schedule an appointment with the attorney and should maintain contact with the attorney while his/her child is in foster care.

RIGHT OF APPEAL

A parent may appeal (almost) any decision of the Juvenile Court regarding a child in foster care to the Circuit Court, where he/she is entitled to a new trial.

(K. Gutterman, personal communication, March 2, 2010).

Program Evaluation

1. How many sessions have you attended?
2. Which session did you find to be most helpful?
3. Which session did you find to be least helpful?
4. Do you feel that each group facilitator treated you with respect?
5. Were there other topics that would have been helpful to include?
6. Do you feel that this program has contributed toward your effort for reunification?
Thank you for attending our program and giving us the opportunity to get to know you

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