

Who Am I? Why Family Really Matters

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Introduction

The most enriching environment for children is one in which they are loved and cared about no matter what. So many times children's mental health and welfare workers meet children and youth who have journeyed from foster home to foster home, from hospital to residential program, and in and out of juvenile detention facilities. As these individuals travel through various homes and institutions, their identities become lost and confused; they become displaced children without a family, home or neighborhood. Pursuits for kinship placements become dead ends because no information is available or updated regarding the location or investment of family members. Often the initial tragedies in their lives are compounded by repeated experiences that no one cares, that there is nowhere to go that is safe, permanent, and accepting. Over years these children become adolescents that mental health, child welfare and juvenile justice providers know only too well and yet feel least able to help.

At Catholic Community Services of Western Washington Family Preservation (CCS) we believe that children need their families and families need their children. We serve children who are unable to live successfully at home, school, or in the community. As we provide wraparound and therapeutic foster care services, we strive to enrich children's lives through rigorous family searches to reconnect children and youth with their families in whatever form possible. We are seeing miracles happening daily in the lives of these children as they are introduced to people who have inherent connections to them, including grandmothers, grandfathers, aunts, uncles, even second cousins or members of their tribe. Young people are gaining a sense of true belonging, of meaning and value, while families are regaining dignity and hope through meeting the needs of their long-lost children. Of equal importance, we are seeing sustainable behavioral and placement successes. The experience of reuniting with family for many youth has a calming impact that results in significant reduction in distress and disruptive behaviors. Thus, these living situations and relationships are enduring and truly unconditional for children and youth are successful for those who had been thought to be unable to live in a home or outside of institutions.

Scope of the Problem

According to US census information, there were 71.5 million children under age 18 in 1996. The good news is that more than 98 percent of children were living with family or extended family in 1996 (US Census). However, the Center for Policy Analysis reports that more than 600,000 children were in foster care that same year (2001).

Foster care too often becomes a long-term solution rather than a temporary placement. Some research reports that 10 percent of children remain in care for longer than 7.4 years. (Bandow, 1999) One quarter are in foster care for 4.3 or more years, and those who are adopted spend an average of four to six years in care. (Bandow, 1999) Many children in foster care experience disruption, chaos and rejection through multiple placements. According to the National Center for Policy Analysis, 23 percent of children in foster care will have two placements, 20 percent will have 3-5 placements, and seven percent will have more than seven placements. (2001)

Adoptions are also not as permanent for some children as we would hope. Adoption offers many children a stable home environment. However, children who are older or who carry emotional disorders experience less permanence and success in these placements. Ten to 12 percent of adoptions of children aged 3 and older do not continue. (Barth and Berry, 1990) For children aged 6 through 12, 9.7 percent of those adoptions fail, and for adoptions of children of ages 12 to 18, 13.5 percent fail. (Barth,

1988) Of children at all ages with special needs who are adopted, 14.3 percent of those arrangements fail. (Groze, 1986)

Children facing behavioral challenges also may be placed in institutional settings, including hospitals and residential treatment facilities. According to the U.S. Surgeon General, residential treatment centers are highly restrictive, costly, and are not always proven to be effective in treating children with mental health problems. (Surgeon General, 1999) The Report on Mental Health also lists concerns related to this form of care, including “failure to learn behavior needed in the community,” and “difficulty reentering the family or even abandonment by the family.”

Family Story

Charlie is a 12-year-old African American boy who was addicted to cocaine at birth. Charlie was immediately placed in foster care, as his relatives were not deemed appropriate placement options for him. After living in 10 foster homes, Charlie was placed in the home of a single African American woman when he was 8 years old. Charlie’s foster mother, Serena, was consistent with meeting Charlie’s special needs, and has remained committed to him since he came to live with her four years ago. Serena has ensured that Charlie attend appointments with his physician, psychiatrist, therapist, and speech therapist. She has assisted him with his schoolwork, resulting in significant improvement in his performance. Serena considered adopting Charlie, but has been hesitant because her father’s health has been deteriorating over the past few years. Serena anticipated that he would need to live with her so that she could assist him and prevent his need for nursing home care.

Serena was aware that it would be very difficult to adequately provide for Charlie and care for her father. As Serena’s attention was diverted to her father, Charlie began having more difficulty controlling anger outbursts at home, at school, and in other places in the community. He threw objects, hit and kicked others, and ran into traffic. He was at risk for encounters with law enforcement and for child protection moving him to another home or to residential care. All who knew Charlie were aware that he would be less successful if removed from this home, as he had not succeeded in foster care previous to placement with Serena. Their bond was significant, and her long-term commitment was a key factor in his success to date. Charlie was referred for wraparound services to provide supports in the home to allow Charlie to grow up with Serena.

Upon receiving the referral, CCS worked with Serena and Charlie’s caseworker to develop a team. The care coordinator encouraged Serena to identify a few individuals who care about her and who might consider offering ideas about how to help her family. The therapist and psychiatrist were invited to participate in planning for Charlie’s care, with the anticipation of including school personnel in the fall. The coordinator also discussed the option of pursuing Charlie’s natural family to seek additional support for him. Team members reported that Charlie had no known family, though they were enthusiastic about CCS looking for kinship options for him. According to child protection records, his mother was an addict when Charlie was born, and there was no information about his father.

In searching through old child protection records, the care coordinator located Charlie’s natural grandmother in a rural community in Georgia. Upon hearing about Charlie, his grandmother was very excited about knowing that her grandchild was safe and cared for. She explained that his mother was in an isolation cell in the local jail. No contact was allowed unless by minister or by attorney. The care coordinator contacted a local attorney, and asked that she convey a message to Charlie’s mother that he is alive and well, and that she might be of help to him. Charlie’s mother wrote Charlie a letter telling him that she thought about him every day, and that she loved him.

Charlie’s natural family lived a very rural life, with many family members living close to one another in a small community. His aunt was a licensed foster care provider, and his grandmother had provided child care through a licensed day care facility for years. Upon learning of their interest in Charlie and the family connections with the community through church activities and the child care system, the team felt comfortable with Charlie developing relationships with his extended family.

The care coordinator accompanied Charlie to Georgia to meet his extended family. The entire community was aware of his arrival, and greeted him with excitement. He immediately befriended an uncle, and felt comfortable in this new environment. Charlie pored over family albums with his relatives, and learned about his heritage of African American ancestors who had lived in the South with great courage.

Following his visit to Georgia, his grandmother came to Washington to see where Charlie lived, and to meet his foster mother. They developed an immediate friendship. She met with the local team and gained their confidence as a potential support for Charlie. Although Charlie felt good about his visit to Georgia, he did not want to leave his foster mother, and was not ready to move so far away. All parties agreed that Washington was his home, and that all efforts should be made to keep him at home while developing his relationship with other adults who sincerely cared about him.

The care coordinator worked with the two teams -- one local and one including the extended family in Georgia. The local team focused on the immediate family needs, adding supervision supports including respite provided by Serena's sister who had been worried about her father and did not know how to help. The team helped Charlie identify activities that he enjoyed and developed plans for Serena's close friends and CCS staff to assist with taking him to community events and activities. Meanwhile, the larger team looked at long-term options for Charlie and his foster mother regarding supports for her needs and his. These options included concurrent plans that offered alternative family placements in Georgia and locally for Charlie. The team considered two scenarios and planned for each in anticipation that one might be more effective or appealing than others when complete:

Charlie's extended family identifying one of their homes in which he could live with holiday and other planned visits to see Serena.

Charlie's grandmother or other family member moving to Washington to live in Serena's home and offer support to both Serena and Charlie.

Charlie continues to live with Serena while making regular trips to develop relationships with his extended family in order to allow for the success of whichever option best suits the family's needs.

Family Search, Reunification and Support Strategies

Consistent with Wraparound practice, our approach to working with children begins with identifying the underlying needs and strengths of the child and family. We have learned that unmet needs for children in crisis often revolve around being separated from key family members, or from families experiencing isolation and lack of support as they face financial and other social challenges while attempting to provide for their children. Our experience is that problematic behaviors arising in foster home settings often stem from a child's longing for his or her parents. In our exploration of unmet needs and resources we then focus on identifying family members who can possibly offer the child and/or family support, assistance, and even placement opportunities. For some children, parents or grandparents are identified as resources. In other situations, an aunt or cousin may become a key resource that provides support to the child or family. Exploration of resources then focuses on identifying as many relatives as possible that could ultimately result in meaningful family involvement with a child in need.

Family Search

In the search for family supports, the most valuable source of information is often the child. Children are able to tell us names and general locations of family members who have known and cared about them. Other family members (even those who are not able to have contact with the child) can provide critical information about who else can help. A search may also involve researching child welfare records. Initial child protection records typically will have contact names and numbers for other family members who have long since been disconnected from the child's life. An ancestry chart is compiled for both the maternal and paternal family. Once a family member is located, the initial call focuses on gathering information about the strengths of the family member, information about other family members and finally, carefully providing information about the strengths and general needs of the child. The information collected is recorded, analyzed and follow up; face-to-face contact is planned to further develop a supportive connection.

Family Meeting

The initial meetings between a child and family who have been disconnected focus on informal conversations that establish a sense of belonging and identity for the child. Often family members tell stories about the family and the child. In most cases this is a natural process that needs little facilitation by the coordinator. Follow-up meetings begin to reflect a child and family team meeting style in which the family becomes increasingly responsible to brainstorm and develop possible options to meet the child's needs.

Planning for Multiple Scenarios

The focus of team planning is to create multiple contingencies that maximize the potential for successful living for the child and family. As in the family story, the team identified three possible options for Charlie and his mother. Each option is pursued concurrently to ensure that the planning will lead to a successful outcome in the least amount of time possible.

Outcomes

These stabilization efforts have improved outcomes for establishing sustainable placements and reducing risk levels for children and youth served. We have followed outcomes for children served by our Family Access to Stabilization Team (FAST) in which services are provided intensively for up to three months to respond to children and youth exhibiting high-risk behaviors (including suicide attempts, aggression, and running away). Of 200 youth served in a 10-month period, all were at risk of out-of-home placement or were placed outside the home upon referral. Many of these children were at risk for residential or other institutional placements. Intensive services were provided for an average of 50 days. Upon discharge from FAST, 79 percent of the youth were living at home or with relatives, with 21 percent living in therapeutic foster care or independent living settings. Thirty-five of the youth were referred for, or continued in traditional mental health service support upon discharge. Ten percent receive intensive wraparound support to families. As sustainable placement options are realized for children, risk factors that brought them into intensive services lessen. In a study of 74 of these youth (Carr, 2001), it was determined that a significant decrease of risk occurred by the time of discharge from FAST. Additionally, most of the youth exited to home or relatives.

Summary

Every child, regardless of disability, deserves to have a sense of self. In our efforts to provide treatment and services, we often inadvertently disconnect a child from a critical part of self -- family. Assisting a child in gaining a sense of belonging, heritage, and security provides enrichment that exists far beyond the involvement of any service system in the child's life. Building family connections allows the opportunity for relationships that are sustainable, and for potential solutions to emotional and behavioral needs, even placement needs for a child who is being cared for or treated by a formal system. Concurrent planning with extended family is also critical to create flexibility in responding to the needs of a child and family to maximize success and reduce the length and number of out-of-home placements. The children we serve will have many challenges to face throughout their lives. It is our hope that they also have lasting relationships with people who are there to call, to stay with, or to write, people who care about them, no matter what. Who better than family?

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