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# Mini MAPP



*Model Approach to Partnerships in Parenting (MAPP)*



## Center for Development of Human Services

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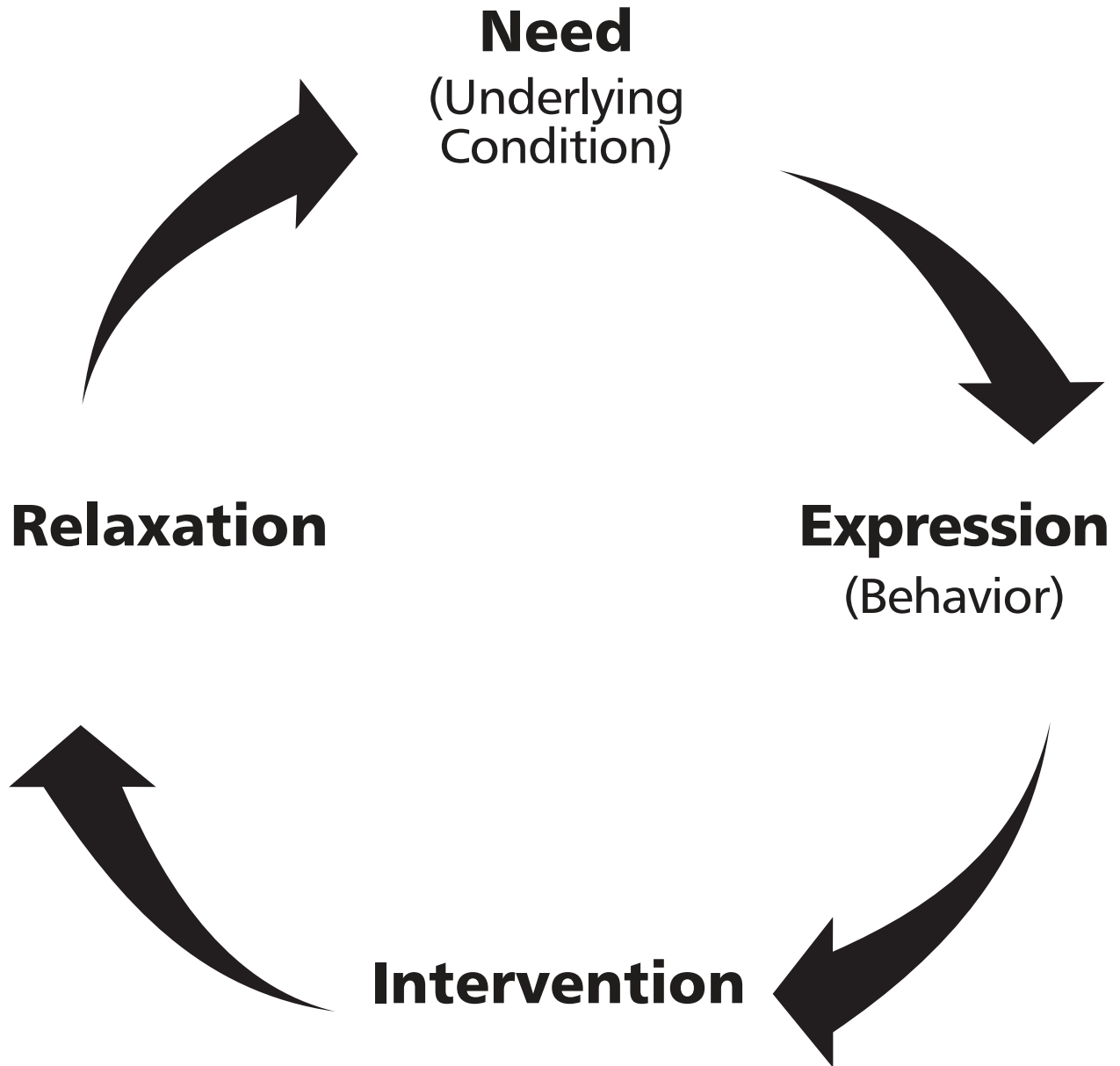
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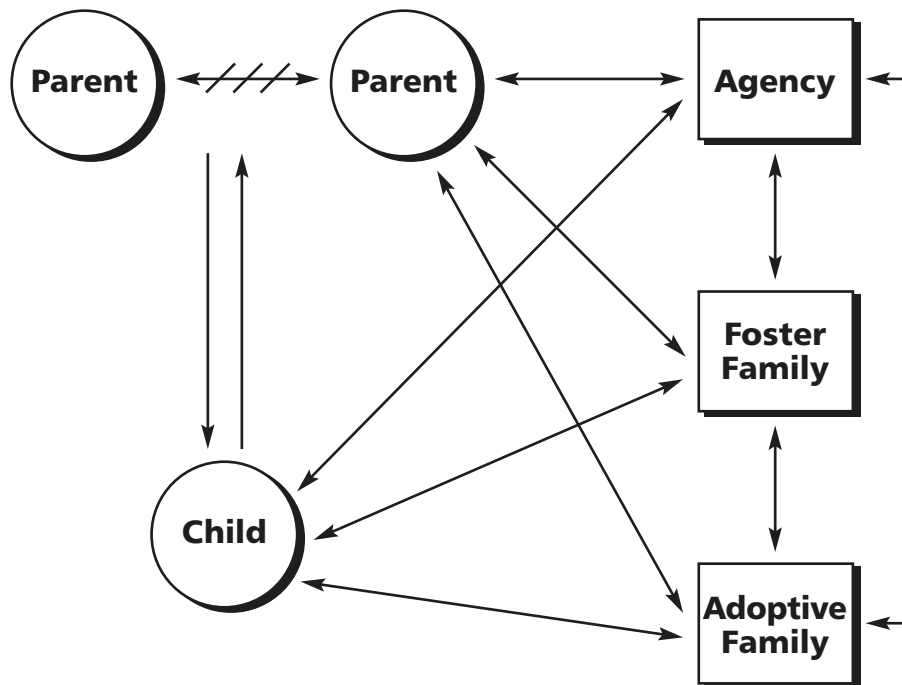
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## The Cycle of Need: Attachment





## The Alliance Model of Child Welfare Practice



The Alliance Model is an idea developed for staff and parents in child welfare to promote partnerships in parenting. This model of practice is even more important today with the passage of legislation such as the Adoption and Safe Families Act, Public Law 105-89, also known as ASFA. ASFA was designed to focus child welfare agencies on the issues of safety, well-being, and more timely permanence for children. With abbreviated time frames, it is important that parents of children in foster care begin working together quickly, whenever possible.

This diagram is called "The Alliance Model." An alliance in a family refers to two members sharing a common goal or interest that is not detrimental to any other members of the family. The lines and arrows in the diagram represent alliances.

The line between the two parents show that they are united, or have formed an alliance, to care for the child and meet his or her needs so that the child can concentrate on growing up and completing important developmental tasks. The slash marks represent a damaged or broken parental alliance. When the positive alliance of parents is damaged or broken, children respond in a variety of ways. Some children who perceive that their parents are not united in seeking the collective good of the family often try to "fix" the family. They begin parenting the parents, as well as younger siblings. When they do this, they often rise above the normal parental boundary line. Other children respond by creating a decoy for all the battling. They may begin acting in ways that capture the parents' attention. Parents may begin aiming their tensions at the child rather than at each other. In the child's mind, at least the parents are united again. Other children respond to the parents' broken alliance by withdrawing, which likewise can serve to unite the parents around the child's good.

\* Adapted from Thomas D. Morton, "*Partnerships in Parenting*," CWI.

Whatever the response, the energy of the child is directed toward preserving the family, rather than toward the “job” of childhood, which entails growing into a healthy and strong adult. Consequently, at best, the family is at risk of deteriorating in function. At worst, the family is at risk of disintegrating altogether, leaving the child at risk of being without the love and nurturance needed for him or her to grow and develop.

In this circumstance the child must develop two separate alliances in a two-parent home – one with one parent and one with the other parent – in order to survive. No longer can he or she rely on the parental alliance. Children faced with this conflict often shield their loyalty to one parent from the other. Alternatively, they may feign dislike for one parent as a way of preserving loyalty to the other. In either case, the child is emotionally at risk and must divert energy toward social survival in the conflicted world of the adults.

Historically, child welfare agencies have primarily emphasized their mission of child protection; therefore, the primary helping alliance has been with the child. The purpose of this alliance is to ensure that the child's needs of nurturance and safety are met. Since the main threat to child safety is generally parental behavior, the alliance seeks to shield the child from risk created by the parents. While the intended benefits of safety are real, both the child and the parents may tend to experience the intervention as reducing emotional and physical safety, rather than increasing it.

With the mission of protecting the child, the agency's natural tendency is to align with the child. The agency seeks to restore the flow of nurturance and limit excessive parental control. Since this intervention is mostly involuntary on the part of the parent, the agency must first establish blame and damage, or risk of damage, before it can legally intervene. These two circumstances generally cause the parents to see the agency as a threat to their attachment to their child.

Agencies often use attachment to extract change in parental behavior. The offered social contract with the parent is, “If you meet the terms of the case plan, you can keep your child in your family.” The threatened loss of the child is used by the agency to socially control the parental behavior that is placing the child at risk.

Although services are offered to the parent and are intended to support the parent, the parent may not experience that support as nurturance. To the extent that the parents have been engaged around their needs, especially the needs and goals for the development and safety of their children, the offers may be experienced as nurture. To the extent that the parents are engaged primarily around the agency's needs to ensure child safety, the parents may experience the offer in much the same way as the truant youth who is ordered to attend school, presumably for his own benefit. If the youth were experiencing success at school, the order would probably not be necessary. The order in and of itself, however, will not alter the experience of attending school.

The child also may sense the intervention as a threat to his or her emotional security. To the extent that the agency's alliance with the child creates conflicting loyalty between the parental attachment and the child's relationship to the agency, the child will experience the situation in a similar way as when conflict began between his or her parents.

A problem of a control-centered intervention is that it tends to place the parents in a childlike position. In terms of family systems, this places the parent below the parental boundary and confuses the parent-child relationship. Although control of parental behavior may be necessary to protect a child, ultimately the success of the intervention will require attention to parental needs as well. Since 99 percent of interventions begin with the preservation of the family or the return of the child to the family as a goal, nurturing the child through the parent is an essential condition for the future.

When safety cannot be ensured within the family, a foster family is frequently chosen for a child. Through the preparation and selection process, foster parents are initially aligned with the agency. Since the primary role of foster parents is to meet the child's needs for nurturance and safety, the foster family quickly works to form a positive alliance with the child, although today they also form alliances with birth parents.

More than the agency's alliance with the child, the attachment of the foster family to the child is likely to be perceived by the birth parents as a serious threat to their attachment with the child. The child is presented with a new dilemma. Attaching to the foster family may be an essential condition to getting his or her needs met. However, this attachment may jeopardize his or her attachment to the birth family. Maintaining the birth family attachment may also similarly reduce the motivation of the foster parents to form an attachment with the child, which is an essential component in their motivation to nurture and protect the child. The child may give up on the parental attachment, fail to attach to the foster family or seek to maintain a dual, and somewhat secret system of parallel alliances.

Any of these are costly choices for the child. The best of all possible worlds is that the child can openly seek and maintain all connections necessary to meet his or her needs. The possibility for this depends on the teamwork of the agency and foster parents and the strength of their partnership with the child's birth parents.

When a child cannot be parented by his or her birth parents or adopted by a foster family, then another family is found to provide the life-long attachment for the child. When this happens, the adoptive family works to form a positive alliance with the child. Since a stronger attachment is often necessary for a lifetime commitment or attachment to be formed, the adoptive parents may view detaching the child from connections with the agency, foster parents and birth family as a necessary act in ensuring the full attention of the child to the attachment with the adoptive family. Unfortunately, the loss of these connections at the psychological level leaves holes in the child's identity and undermines the child's concept of self.

At worst, the child may feel conflict between loyalties to the birth family, foster family, and adoptive family. When the parents compete for the child's loyalty, the child is again left with the dilemma of having to manage all the adult alliances, which diverts energy from growth to psychological security.

When a child in a foster or adoptive home perceives that the adults are not aligned around his or her well-being, the child will feel threatened. Maintaining a relationship with the birth family is important to the child because identity and self-concept begin with that alliance. The alliance with the agency is important because the agency represents the power to move children at will, or so it seems to the child. The foster or adoptive family alliance is important because daily nurturing and care is ensured there. So, when a child perceives that adults are not aligned among themselves, the child responds in ways similar to his or her response to parental conflict. The difference is that now there are more alliances to manage or "fix", and even less energy remains for the child to grow and enjoy his or her childhood. That is why we say the adults in a child's life must work together as team members and as partners.

**Teamwork** - *Teamwork* involves two or more people working together according to a coordinated plan, in a relationship where team members assume different roles and responsibilities, all designed to reach the same goal. Team members can be relied upon to assume their specific jobs or responsibilities.

Within the Alliance Model, child welfare staff and foster parents work as a team. As with any effective team, players have different roles, responsibilities and tasks, but each team member has the same goal, in this case, to preserve, or rebuild, the family around the long-term welfare of the child. This requires that the team members form a partnership or positive alliance with the birth parents, always seeking to keep parents focused on the welfare of the child.

**Partnership** - A *partnership* is a relationship where two or more parties each contribute something of value in order to receive benefits. The nature of the contribution and the distribution of benefits are defined by the social contract between the parties.

**Social Contract** - A *social contract* is an agreement entered into by the mutual consent of parties desiring to exchange something of value. When there is coercion, a contract is not valid. When there is no exchange, there is no contract. When there are no contributions, there is no partnership.

Since we define teamwork and partnership a bit differently in the Alliance Model, we usually use the term "team" to describe the staff, foster parents and other professionals working together. Hopefully the birth parents can become team members. However, at the beginning of the relationship, the best we can hope for is to negotiate good working agreements in partnership. Building partnerships builds trust and agreement between people over time.



Within the Alliance Model, the agency's goal is to establish an alliance with parents to protect their children rather than just an alliance with children to protect them from their parents. Overwhelmingly, agency efforts are directed toward the goal of maintaining the birth family as the primary parenting resource for children. Given this fact, agency efforts are judged by the extent to which they strengthen parenting capacities and family attachments. Foster parents can help or hinder these efforts. Therefore, foster families need to know the framework or model the agency uses in its child welfare practice. If a person is primarily interested in becoming a foster parent in order to protect and save children from harmful parents, his or her needs may not be met through the foster care program. The agency recruitment and public education efforts must reflect the philosophy of the agency's model of practice.

Foster parents play vital roles, supplementing and supporting birth families rather than substituting for them. They, too, need explicitly defined social contracts with birth families. Foster parents must be prepared to care for a child independently while psychologically sharing the child with others. Foster parents make a vital contribution to the partnership when they accept a child's relationships.

The job of public or private child welfare agencies is to preserve, or help rebuild, families at risk of deterioration. The single most powerful relationship upon which to build is the connection between the child and his or her parents.



# The Role of Foster Parents in Building Alliances with Parents of Children in Foster Care\*

## Recognize and support parent strengths

The best place in most cases to begin working with a parent of a child in foster care is to begin looking for the parent's strengths. The parents obviously have needs or their child would not have been placed in care. But we are beginning our work with them counterproductively if we focus our attention too tightly on those needs. When we see only a parent's needs, we are defining the parent in our minds in a negative way. When we have defined the parent in our minds in a negative way, it is difficult for us to be or even seem genuinely engaged in working with him or her. By contrast, when we recognize a parent's strengths, we feel better about working with him or her, and we will have a positive place to begin talking and working with that person.

## Use strengths to engage parents

Once you have recognized a parent's strengths, you can use the following questions to create ways to use those strengths to build a partnership with the parents:

- ◆ How can I use that strength to begin engaging parents to work with me in partnership?
- ◆ What is something I as a team member might want from this parent who has this strength?
- ◆ What is something I as a team member might offer to this parent based on this strength?
- ◆ What is something this parent might want from me as a team member based on this strength?

## Maintain Confidentiality

There are rules and restrictions about confidentiality and what information agency staff can share, even with fellow team members such as foster parents. However, parents themselves may share information with foster parents. All personal information must be held in confidence, with the understanding that foster parents must share information with the agency staff. Parents need to know that agency staff and foster parents share information.

Even when policy supports agency staff sharing certain information with foster parents, some agencies may interpret policy conservatively. In this case the agency's procedures restrict sharing information; thus, the agency perceives a barrier to sharing such information, though there is in reality no legal or policy barrier. It will be healthy if agencies revisit their procedures around the sharing of information to ensure that they are not being counterproductively

\* Adapted from material developed by Thomas D. Morton, Child Welfare Institute.

restrictive. Foster parents should have complete access to information that is relevant. The obvious question arises from what is or is not “relevant.” For example, a mother may have had an affair during her marriage when her child was living with her. The child does not know about the affair, but the husband knows about the affair and his anger may cause the marriage to fall apart. Should the caseworker tell the foster parents about this? In many cases, the foster parents would have no need for the worker to share this information. However, if the parents fight about this issue every time the child comes home, the child could be sufficiently affected that the worker would need to tell the foster parents so they would be able to perform their role and responsibilities. The foster parents would be responsible for holding the family's information in confidence.

### **Manage Personal Emotions**

It is a natural human response to feel strong emotions when learning of a child's suffering. While the “Alliance Model of Child Welfare Practice” readily recognizes the validity of such emotions, it also takes a practical approach toward attempting to help parents change so they will no longer behave in a way that makes foster parents and workers feel anger, disgust or some other negative emotion. Foster parents may ask themselves, “How can I be respectful to someone who did those things?” The answer is that a positive, constructive working relationship is the most effective route to help the parent never again do “those things.”

Foster parents may be judging the parent by the worst thing that parent ever did in his or her life. All of us probably have a worst thing that we did in our lives, and we do not want to be judged by that forever. How would any of us feel if we were judged by the worst thing we ever did? A foster parent could be an important part of the process of helping that parent change. Even in the case of adoption, adoptive parents will need to talk with children about what happened in their past and to be able to do it in a way that is not condemning of the parents.

Also foster parents may be surprised upon getting to know the parent that they are better able to empathize with the parent. For example, we may care for a boy who was sexually abused by his father. Initially we may think the father must be a monster and wonder how anyone could possibly expect us to treat him with respect. But what if we learn the father as a boy was also sexually abused by his own father? Suddenly we have a glimpse past the “monster” we had previously seen the father to be, and we instead are able to see a human being in pain and confusion. We see that although this father indeed committed a monstrous act, he is not a monster; rather, he went through experiences as a boy that confused him about what is acceptable in how fathers relate to sons. When we realize this, we can begin supporting this person to help him find a way to parent that will take the pain away not only from his son, but also from himself.

A place for foster parents to start working with a caseworker in such a situation is for them simply to think together about the best starting place in working with such a parent in a constructive way with a goal of reunification. The foster parent will eventually need to be in the parent's presence, if only at a planning meeting, so the foster parent will need to think of what would contribute to his or her comfort so that the foster parent and the parent will be able to contribute to the child's plan.

There are ways for foster parents to show respect for parents without having direct contact with the parents. A foster parent must realize that as long as the child is in his or her house, the foster parent has a relationship to the parent through the child, because the child will be bringing memories of the parent into the foster parent's house. The way the foster parent talks to the child around these memories and the issues related to these memories is a crucial starting point.

Team members might feel safety risks in working closely with some parents. Team members should not feel that to implement the alliance model of practice they must be prepared to jeopardize their safety. Workers and foster parents should follow a standard practice of never being alone with anyone with whom they feel unsafe. Team members may be concerned that some parents in some situations might become angry, out of control or might show up at their house, perhaps intoxicated. When foster parents participate in developing a plan with the workers, they can plan for these possibilities. An obvious action in such situations is to call the police. However, plans should also be developed to avoid such crisis measures and to avoid foster parents feeling vulnerable. Such plans would involve progressions which ensure safety at each step, starting with in-office contacts, progressing to exchange of visits, then progressing to a neutral setting. If a parent is violent and out of control, the plan would include only in-office visits until this pattern of behavior alters. In such cases, if the foster parents want the location of their home kept secret, the caseworker should support them in this. A particularly volatile case might never progress beyond in-office visits.

A key dimension of the alliance model centers around how decisions are made in teams. Working in teams, workers will be more positioned to hear foster parents' input, rather than workers being positioned so they are more likely to have to rely on "pulling rank" over foster parents in making decisions. Sometimes foster parents as team members may be wrong, of course, so that a caseworker may need to make the final decision. By the same token, caseworkers can be wrong, and, if a foster parent feels strongly about his or her view, the foster parent could request that someone else – perhaps the caseworker's supervisor – be brought in so that the foster parent's concerns could be included on the record. In such a case, it would be best for foster parents to be able to cite examples of *behavior*, rather than their own *feelings*. For example, a foster parent may be concerned about the child's safety when the parents use alcohol or other drugs; this foster parent would be behaviorally oriented in describing a mother by saying, "The mother has had alcohol on her breath the last three times I saw her, and she acted intoxicated. No one has done a drug screen to determine if she is using drugs or alcohol."

## **Share Power and Control**

When parents are brought into decision-making, they will be more invested in contributing to a process which they helped to plan. In the partnership/teamwork approach, more information is available. First, caseworkers and foster parents gain more firsthand information from interacting with parents. This added information aids in decision-making. Second, when parents are included in partnership, they gain more first-hand information about the caseworker and foster parents, which could build trust.

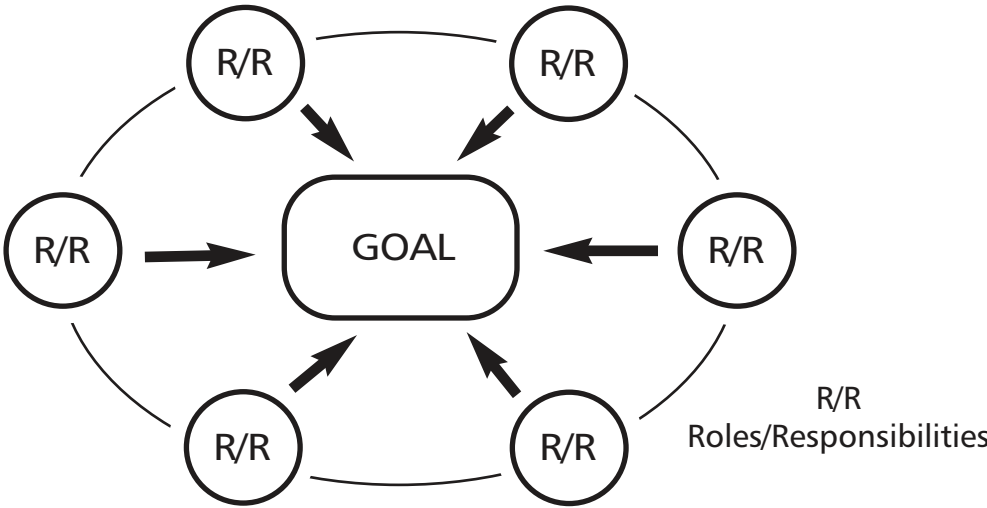
When caseworkers rely too heavily on their personal power to move a case forward, they may not always be aware of how ineffective their power is in real terms. Power often only lasts as long as the person with the power is there to enforce it. When a caseworker or a foster parent is in the room with parents, he or she might be very powerful; however, when the parents are away from the caseworker or foster parent and have the child, they can be very powerful. The alliance model seeks a greater degree of shared influence to influence people's actions and behaviors beyond what happens in a room during a meeting, or in a foster home during a visit. A parent's personal investment in a process often does not come out of response to power; rather, parents' personal investments derive from their wanting the same goals and their being willing to achieve those goals.

## **Model Effective Parenting Skills, Mentor and/or Teach Parents**

When there is direct contact between foster parents and parents, the foster parents often serve as mentors or teachers. Minimally, they model effective parenting for the parents whose children are in foster care. Sometimes the process is formalized; sometimes it is informal. Good teachers do four things. First, teachers or mentors share practical information. For example, foster parents may be in a position to teach a parent about grieving behaviors, in order to normalize angry and depressed behaviors in children. Second, teachers or mentors provide examples or applications for the information. For example, a foster parent trying to teach a parent ways to handle grieving behavior may explain specific ways a child has reacted to loss and specific ways the foster parent effectively dealt with the child's behavior. Third, teachers or mentors give the learner an opportunity to practice. In the case of a foster parent teaching a parent about dealing with grieving behaviors, perhaps the foster parent can facilitate a discussion between the parent and child. Fourth, teachers or mentors provide feedback. Without feedback the learner doesn't know what was done well, or poorly. So, foster parents need to tell parents specifically what they did that was effective, as well as offer suggestions.

# Partnership Building and Teamwork in Foster Care

**Teamwork** – *Teamwork* involves two or more people working together according to a coordinated plan, in a relationship where team members assume different roles and responsibilities, all designed to reach the same goal. Team members can be relied upon to assume their specific jobs or responsibilities.



**Partnership** – A *partnership* is a relationship where two or more parties each contribute something of value in order to receive benefits. The nature of the contribution and the distribution of benefits are defined by the social contract between the parties.

Partnership implies that there is a “give and take.” Partners exchange “wants” and “offers” of real value to each other.



Within the Alliance Model, child welfare staff and foster and adoptive parents work as a team. As in any effective team, players have different roles, responsibilities and tasks, but each team member has the same goal, in this case, to preserve, or rebuild, the family around the long-term welfare of the child.

This requires that the team members form a partnership or positive alliance with the birth parents, always seeking to keep parents focused on the well-being of the child.





## Description of the GPSII/MAPP Program Meetings and Steps

In the Group Preparation and Selection II/Model Approach to Partnerships in Parenting (GPSII/MAPP) program, prospective foster and adoptive parents are led through a series of experiential activities and guided discussions that enable them to make decisions about their ability, willingness and readiness to foster and/or adopt. Making an informed decision requires that families assess their current skills as parents and their ability to develop the skills needed for successful fostering and adopting. The activities in each meeting promote risk taking and sharing of thoughts and feelings by participants to both help them become more self aware and to help the GPSII/MAPP leaders make better assessments. All activities and content incorporate the principles of adult learning theory; specifically that adults are self-directed, need immediately useful information that is relevant to their life experiences and that they must take responsibility for their own learning. Individuals have different learning styles so the exercises incorporate hearing, seeing and touching or experiencing methodologies in their design.

### I. Welcome to the GPSII/MAPP Program

Meeting One of the GPSII/MAPP Program begins with the process of building relationships, examining the role and responsibilities of foster and adoptive parenting, and exploring one's strengths, motivations and concerns. This meeting, and the nine that follow, are designed to be highly experiential and to promote a mutual selection process. The experiential design of each meeting enables foster and adoptive parents to build relationships with each other, to assess their own abilities to foster and/or adopt, and to determine if the agency can meet their needs. In turn, the experiential design enables GPSII/MAPP leaders to assess the prospective foster and adoptive parents' abilities and attitudes. Equally important, the design builds trust between the prospective foster and adoptive parents and the GPSII/MAPP leaders which promotes honest sharing of attitudes, beliefs, and experiences.

In Meeting One, the legal and practice foundation for child welfare is explored through several activities. In one activity, volunteers from the group share a photo of their child. The group is asked to imagine who would care for the child if the parents were gone, and to identify the qualities they want in a substitute caregiver. The exercise is intended to help participants to appreciate the need for an intensive and comprehensive preparation and selection program.

Through a video, the group meets several children and parents who have been involved with foster care and adoption and, with a guided discussion, begins to build empathy for parents and children and to identify their strengths and needs.

During Meeting One, every family receives a copy of a **Profile** as Roadwork, to be completed at home. The Profile gives prospective foster and adoptive families an opportunity to describe themselves in their own words. The Profile is used by the homefinder to inform the decision about certification. It also becomes part of the information kept by the agency to help children, birth families and child welfare workers get to know the foster or adoptive family better and to understand their needs.

The Profiles are returned by Meeting 2, if possible. If absolutely necessary, the family may work on it for an extra week and return it by Meeting 3.

## **2. Where the MAPP Leads: A Foster Care and Adoption Experience**

The purpose of Meeting Two is to provide participants with an opportunity to see foster care and adoption from a variety of perspectives. Nearly the entire meeting is comprised of a sculpting activity in which participants experience how losses and stresses can lead to placement of children into care. This demonstration is one of the most powerful learning activities because it allows participants to experience the trauma that accompanies placement and to appreciate the importance of teamwork and partnership among foster and adoptive parents, parents, and child welfare workers. By participating in this exercise, foster and adoptive parents learn how families can be preserved while children are in care.

Participants are introduced to Erikson's Stages of Development and discuss the impact of abuse and neglect on children's development. In a large group activity participants practice identifying the well-being and permanency needs of children who have been abused, neglected or maltreated using information from four case examples. They discuss their abilities to meet the needs of children and the challenges they might encounter. Leaders closely manage the discussions, identify resources and begin to assess the participant's strengths and needs.

Family Consultations are scheduled after Meeting 2, once the family's profile has been returned. The consultations are meetings in the homes of prospective foster and adoptive families. They are designed to help the families and the leaders jointly assess strengths and needs in a family setting. All family members participate and every family has at least two family consultations during the decision-making and learning process.

During the family consultation, the family and the leader will agree upon a Partnership Development Plan which states who will do specific tasks and when the tasks will be done, in order to meet one or more needs in the preparation, decision making, and mutual selection process.

### **3. Losses and Gains: The Need to Be a Loss Expert**

An activity involving a lost object allows participants to explore the impact of separation and loss on the growth and development of children, and the impact of foster care and adoptive placement on the emotions and behaviors of children and parents. Participants share personal losses (death, divorce, infertility, children leaving home) with each other in pairs or triads and discuss how difficult life experiences may affect their success as foster and adoptive parents. Leaders monitor the small groups in this potentially emotional activity to provide support and intervention when necessary. The meeting emphasizes the teamwork roles of foster and adoptive parents and child welfare workers in turning losses into gains. The GPSII/MAPP leaders share positive and negative effects of their own maturational and situational losses. This promotes trust and encourages personal reflection by participants. This also makes the GPSII leaders “real” to the participants and is specifically placed here so to make discussions easier when GPSII leaders complete the family consultation at the prospective foster and adoptive parent's home.

### **4. Helping Children with Attachments**

Through a visual demonstration using yarn and three volunteers, participants explore the impact of attachment on child development. The meeting uses supervised small and large group discussions to enable participants to recognize how attachments are formed and the special needs of children in foster care and adoption (especially in the areas of building self-concept and using appropriate behavior). Through an imaginary journey exercise, participants experience loss and the feelings that accompany grief. This experiential activity enables participants to apply the information concerning loss and grieving from Meeting Three and the information about attachment from this meeting. Participants practice identifying ways to build positive attachments with children in their care through case examples.

### **5. Helping Children and Youth Learn to Manage Their Behaviors**

Using a group sharing activity, participants discuss techniques for managing behavior, with an emphasis on alternatives to physical punishment. In small groups participants discuss special issues related to discipline for children and youth who have been physically or sexually abused or neglected. This meeting can often be difficult because it includes discussion of physical punishment. The issue of spanking versus not spanking almost always creates controversy and tension and requires group management skills to keep the group on task and to manage conflict.

The meeting emphasizes the need for teamwork and partnership among foster parents, adoptive parents and child welfare workers by identifying alternatives to physical punishment. Once the discussion about physical punishment is finished, fifteen positive discipline techniques are discussed with the group. Prospective parents work in small groups with familiar case examples in order to try to meet children's needs and identify positive discipline techniques that can be used to keep children safe and teach them healthy behaviors to meet their needs.

False allegations of abuse in the foster home are discussed. The leader distinguishes between naïve and manipulative false allegations. The large group discusses the emotional impact of being falsely accused and learns what to expect during the investigation process.

## **6. Helping Children with Birth Family Connections**

Through a forced choice activity, participants explore the importance of helping children in care maintain and build upon their identity, self-concept, and connections. This emotional exercise forces participants to give up crucial connections to family, culture, and/or community, etc.. After processing the emotional impact of losing connections, participants discuss how, in their role as foster and adoptive parents, they can maintain those connections for children in care. Through large group discussions and role plays, the group considers issues such as how children's cultural and ethnic backgrounds help shape their identity; the connections children risk losing when they enter care, and why visits and contacts with birth families and previous foster families are important. Participants take part in a sculpture activity that demonstrates the importance of the Positive Parental Alliance to the well-being of a child in care. Participants engage in a group competition activity that challenges them to identify ways to keep children connected to their families between visits.

## **7. Gains and Losses: Helping Children Leave Foster Care**

Through supervised large and small group activities, participants appreciate the importance of trying to give children messages about moving that they can understand. Children are like sponges; they take in everything around them, but they don't always know how it all fits together. We want to make sure that children understand what is happening around them especially as it has to do with moving; either back home to their parent's home, to another foster home, to an adoptive placement, etc.

Participants also examine concurrent planning, adoption, and independent living. In a carefully planned and monitored discussion, participants share their own extended family's experiences with unwanted separations, and then discuss disruption and its impact on children, families, and agency staff. Through a problem solving exercise

participants focus on the partnership and teamwork role of child welfare workers, foster parents, and adoptive parents in helping children move home, into an adoptive home or into interdependent living. The meeting features a discussion of a video of a mother, foster mother and worker planning the return of the mother's children to her home.

## **8. Understanding the Impact of Fostering or Adopting**

In Meeting 8, prospective parents explore the impact of fostering and adopting on their own families. Using a role play, participants assess their own strengths and needs in managing conflicts about confidentiality and privacy in the foster or adoptive home. In a second role play they practice managing a conflict between their birth child and a child in care. Through a large group discussion, participants define the five characteristics of a family system and how each part will be affected by fostering and/or adopting. Participants use an Eco-Map, a visual tool, to identify their own family's strengths and needs. In what are often emotional discussions, participants examine how fostering and adopting can affect prospective parents' marriages, own children and relationships with extended family.

## **9. Teamwork and Partnerships in Foster Care and Adoption**

This meeting reviews what the participants have learned so far about building a teamwork relationship with the agency and identifying challenges to teamwork. A simulated case review and large group discussion provides a rationale for the importance of working as part of a team with child welfare staff, other service providers and court personnel, as well as the parents of children and youth in care.

## **10. Endings and Beginnings**

This meeting features a panel composed of experienced foster or adoptive parents, birth parents, children in care, and individuals who can respond to questions from the participants. The important tasks of this meeting will be to assess group members' strengths and needs as foster parents or adoptive parents. There also will be some time to say good-bye...the ending. As the preparation/mutual selection process is coming to an end, so begins the transition into becoming a foster or adoptive family...the beginning.

After the last meeting there is a final Family Consultation during which the leader and the parents agree about the family's future role as a foster family, as an adoptive family, or as another kind of child welfare advocate. A Professional Development Plan, developed by the leader and the parents, provides direction for support of the family during the next six months in the child welfare program.



## Criteria for Mutual Selection: Twelve Skills for Successful Fostering and Adopting

The GOAL of the **GPSII/MAPP Program** is to prepare individuals and families to make an informed decision about becoming foster and/or adoptive families. The decision is made with the child welfare agency and is based on the capability and willingness to take on the “role” and develop the skills needed to foster and/or adopt. Foster and/or adoptive families who make good decisions and grow in their new roles work best with the agency, birth families and others. These partnerships help children and youth have stability and permanence with a family.

As successful foster and/or adoptive parents you must be able to:

1. Know your own family.  
Assess your individual and family strengths and needs; build on strengths and meet needs.
2. Communicate effectively.  
Use and develop communication skills needed to foster or adopt.
3. Know the children.  
Identify the strengths and needs of children and youth who have been abused, neglected, abandoned, and/or emotionally maltreated.
4. Build strengths; meet needs.  
Build on strengths and meet needs of children and youth who are placed with you.
5. Work in partnership.  
Develop partnerships with children and youth, birth families, the agency, and the community to develop and carry out plans for permanency.
6. Be loss and attachment experts.  
Help children and youth develop skills to manage loss and attachment.
7. Manage behaviors.  
Help children and youth manage behaviors.
8. Build connections.  
Help children and youth maintain and develop relationships that keep them connected to their pasts.
9. Build self-esteem.  
Help children and youth build on positive self-concept and positive family, cultural and racial identity.

10. Assure health and safety.

Provide a healthy and safe environment for children and youth and keep them free from harm.

11. Assess impact.

Assess the ways fostering and/or adopting will affect your family.

12. Make an informed decision.

Make an informed decision to foster or adopt.



## **Strengths/Needs Assessment**

### **What is a strengths/needs assessment?**

The strengths/needs assessment is a tool to help prospective foster and adoptive families look at those qualities and skills that are important to successful foster and adoptive parenting. No two families are alike. Every family has or can develop many skills that will be helpful in their new roles. Likewise, every family has a set of needs that must be fulfilled to take on their new roles.

### **What do we do with the strengths/needs assessments?**

At the end of several of the meetings you will be asked to assess your strengths and your needs in each of the skill areas that have been developed in the program. Come prepared to talk about your strengths and needs at the following meeting, as well as to hand in your written suggestions to the leaders about improving the meetings. The written statements will help your leaders plan the group meetings as well as the family consultation for your family.



## Robert Case Study

Robert is a 12-year-old black child who was placed in a white foster home two weeks ago, when his mother began serving a three-month sentence for passing bad checks. His father's last known address, a few years ago, was a homeless shelter. Robert has no brothers or sisters and no extended family members have yet been identified who are able to provide a temporary home for Robert. It is expected that Robert and his mother will be reunified when she completes her sentence but right now, Robert really misses his mom, his friends, and his neighborhood.

Robert has been extremely quiet since he entered the foster home. He tends to stay in his room, listening to his music. He seems uncomfortable with eye contact and doesn't perform the chores he has been asked to do, such as making his own bed or picking up his bath towels. Robert is capable of taking care of his own personal needs. He had to change schools when he entered foster care and doesn't like his new 6th grade teacher, although he has received passing grades on his tests and homework. He says everything is too hard in this new school and the other kids aren't as friendly as in his old neighborhood. He hit another student in school when the boy asked him rude questions about his family and why he had moved into this school.



## **A Brief Summary of Child Welfare Laws Important to Foster and Adoptive Parents**

Hailed as the most important piece of child welfare legislation enacted in three decades, the **Adoption Assistance and Child Welfare Act, P.L. 96-272**, required states to establish programs and make procedural reforms to serve children in their own homes, prevent out-of-home placement, and facilitate family reunification following placement. The Act also transferred federal foster care funding from IV-A to a new Title IV-E of the Social Security Act and provided funds to help states pay adoption expenses for children whose special needs make adoption difficult. A major provision of P.L. 96-272 was that judges determine whether “reasonable efforts” had been made to enable children to remain safely at home before they were placed in foster care.

**Title XX of the Social Security Act** was amended to include the Social Services Block Grant to provide child protective services funding to states. This became the major source of state social service funding.

**The New York State Child Abuse Prevention Act of 1985** was enacted, establishing: standards, training, and qualifications for persons responsible for the care of children, including mandatory training for all new CPS caseworkers within the first three months of employment; access to certain records of the State Central Register of Child Abuse and Maltreatment; the procedure for establishing relationships between law enforcement officials and child protective agencies; and the investigation, prevention, and treatment of child abuse and maltreatment in residential care.

**The Family Preservation and Support Initiative, Public Law 103-66**, gave funding to states for family preservation and family support planning and services. The legislation provided funding for:

- community-based family support programs that work with families before a crisis occurs to enhance child development and increase family stability;

- family preservation programs that serve families in crisis or at risk of having their children placed in foster care as well as other follow-up services, including family reunification; and

- evaluation, research, training, and technical assistance in the area of family support and family preservation.

**The Multiethnic Placement Act (MEPA)** P.L. 103-382 of 1994, outlawed discriminatory practices, and the **Interethnic Placement Provisions (IEP)**, P.L. 104-188 of 1996, clarified the original legislation and created sanctions for state and agencies which fail to comply with the act. MEPA forbids the delay or denial of a foster or adoptive placement solely on the basis of the race, color, or national origin of the prospective foster parent, adoptive parent, or the child involved. It also compels states to make diligent efforts to recruit and retain foster and adoptive families that reflect the racial and ethnic diversity of the children for whom homes are needed, and requires the federal government to impose fiscal penalties for states not in compliance with the antidiscrimination provisions.

**The Adoptive and Safe Families Act (ASFA)**, Public Law 105-89, represents the most significant change in federal child welfare law since the Adoption Assistance and Child Welfare Act of 1980. ASFA reauthorized and increased funding for the Family Preservation and Support program, renaming it the Promoting Safety and Stable Families program. In general, ASFA is intended to promote the primacy of child safety and timely decisions for permanency while clarifying “reasonable efforts” and continuing family preservation.

## Important Definitions for Foster and Adoptive Parents

*Note: Certain terms are defined in this Glossary by statutory or regulatory language. Citations for the statute or regulation appear in parentheses. Abbreviations are as follows: FCA – Family Court Act, SSL – Social Services Law, NYCRR – New York State Code of Rules and Regulations.*

**Abandonment** – A child is “abandoned” by his or her parent if such parent evinces (shows) intent to forego his or her parental rights and obligations. Such intent is manifested by his or her failure to visit the child and communicate with the child or agency, although able to do so and not prevented or discouraged from doing so by the agency. [FCA § 1012; SSL § 384-b (5)].

**Abused Child** – A child less than eighteen years of age whose parent or other person legally responsible for his or her care: (i) inflicts or allows to be inflicted upon such child physical injury by other than accidental means which causes or creates a substantial risk of death, or serious or protracted disfigurement, or protracted impairment of physical or emotional health or protracted loss or impairment of the function of any bodily organ; or (ii) creates or allows to be created a substantial risk of physical injury to such child by other than accidental means which would be likely to cause death or serious or protracted disfigurement, or protracted impairment of physical or emotional health or protracted loss or impairment of the function of any bodily organ; or (iii) commits, or allows to be committed, an act of sexual abuse against such child as defined in the penal law. [SSL § 371 (4-b)].

**Adoption** – A legal procedure that transfers responsibilities for a child from the birth parents to the adoptive parents. The adoptive parent has full parental legal rights and responsibilities.

**Adoption Planning** – A procedure begun by an agency, once guardianship and custody of a child has been transferred from the birth parents to the agency. It includes identifying the child's needs, selecting a potential adoptive family, completing a home study, beginning the placement process, supervising the placement, and finalizing the adoption.

**Adoption Subsidy (Recurring)** – A monthly payment made to adoptive parents who have adopted a child who meets New York State eligibility standards. Based on the special medical, developmental, or social needs of the child or sibling group, this financial assistance begins after the finalization of the adoption and lasts until the child reaches the age of 21. The amount can vary from case to case. (See SSL Article 6 title 9.)

**Allegations** – Statements in a child abuse/maltreatment report that have not been proven.

**Another Planned Living Arrangement** – Formerly known as Independent Living, APLA is a permanency planning goal to assist foster care youth in their transition to self-sufficiency by connecting the youth to an adult permanency resource, equipping the youth with life skills, and, upon discharge, connecting the youth with any needed community and/or specialized services. [18 NYCRR 430.12 (f)]

**Approved Foster Home** – A home in which temporary or long-term care is provided to a child whose care and custody or guardianship and custody have been transferred to an authorized agency pursuant to the provisions of section 384 or 384-a of the Social Services

Law or who has been placed with a social services official pursuant to article 3, 7 or 10 of the Family Court Act and who is cared for 24 hours a day in a family home with a foster parent who is a relative within the second or third degree to the parent(s) or stepparent(s) of the child and who is duly approved by an authorized agency as required by this Part. [18 NYCRR 443.1(f)]

**Assessment** – The process through which the agency gathers the information it needs to form a case plan to help preserve the family. See Case Plan.

**Best Interests of the Child** – The best possible decision from the available options regarding the child - taking into account his or her physical, psychological, cognitive, and emotional needs. This term, undefined in statute, is used by Family Court.

**Birth Family** – The family to whom the child was born. The birth family is the child's biological family.

**Case Plan** – A description of the specific steps that will be carried out to address the reasons for the child's placement, based on the information the agency has gathered about a family. The case plan describes: 1) what the birth parents will do to develop strengths and meet needs; 2) what the caseworker will do to help the birth parents and child; 3) what others, including foster parents, will do to help the birth parents and child; and 4) when the case plan's goals will be met.

**Case Review** – A regular review of how each case of a child in foster care is progressing. The purpose of the case review is to make sure that the family and others are taking the steps they agreed to in the case plan. The case review is also meant to make sure that a child does not drift for a long time in foster care and that the child will be able to live in a safe, permanent home by returning home, living with relatives, or being freed for adoption. Procedures may differ from agency to agency, but the review must occur every six months. Each review must include at least one representative who is not involved with the case (third party reviewer).

**Certified Foster Home** – A home that has received a New York State certificate to provide foster care after an agency home study finds that the family meets the certification requirements. The certificate limits the number of children to be placed in the home and states any restrictions on child characteristics. (See SSL § 433.3.)

**Child Protection Services (CPS) Worker** – A local social services district worker who conducts investigations to determine if a child has been abused or neglected and if there is risk of future abuse or neglect in the household where the child is living or may go to live. If the CPS worker determines that the child's safety is at risk, he or she will devise a plan to provide for the child's safety which may include removing the child from the home.

**Concurrent Planning** – Planning that works toward returning the child home while simultaneously developing an alternative plan for the child. Concurrent planning recognizes that the parent(s) may be unable or unwilling to establish a safe environment for the child and pursues another permanent goal for the child. It focuses on achieving a permanent goal for a



child within one year of placement by highlighting certain aspects of casework practice.

**Confidentiality** – A basic principle and agency requirement for foster parents to not discuss a child’s family background, personal history, problems, or special needs with anyone other than those clearly assigned professional responsibility for some aspect of a foster child’s care and supervision. These matters cannot be discussed with the family’s friends, neighbors, or other relatives who are not part of the foster parent’s household unless for health and safety reasons. Confidential information includes information furnished by foster parents, the agency, the caseworker, the child, or the child’s birth family. It may concern the family background of the child, the child and family’s medical history and condition, and/or the services being provided to the child.

**Court Hearing** – Formal legal proceeding at which the court hears evidence and oral argument by the parties.

- ◆ **Initial appearance hearing** – First hearing in Family Court after the filing of a petition that allows the respondent to admit or deny the allegations contained in the petition.
- ◆ **Fact-finding hearing** – A formal legal proceeding at which the court hears evidence and oral argument by the parties regarding allegations in a petition.
- ◆ **Dispositional hearing** – The hearing to determine what should be done for the child. This usually follows a fact-finding hearing.

**Court Order** – A written or oral directive of the court requiring a party to take a particular action or refrain from taking an action. **Note:** An oral order of the court is only effective if given to the party, to do or not do an act, in open court and on the record.

**Custody** – Physical and legal responsibility for a child and authority to act in place of the parent, granted by the court. Examples of physical responsibility are food, shelter, and necessary transportation.

**Diligent Efforts** – Attempts by an agency to assist, develop, and encourage a meaningful relationship between the child and his or her parents. Examples are assessing what services the family needs, providing or arranging for those services, and making arrangements for child/parent visits.

**Diligent Search** – The attempt to locate a missing mother, legal or alleged father, legal guardian, or responsible relative of a child placed in foster care. The purpose is to locate and involve missing parents in the planning process and to satisfy the court that adequate efforts were made to locate the parents and help the court decide how to handle notifying the parents about an upcoming court proceeding.

**Disruption** – When foster parents decide they are unable to continue caring for a particular child (for a variety of reasons) and that child must leave their home. The term “disruption” is also used when a child’s behavior or circumstances lead to the child being moved from his or

her placement.

**Emergency Placement** – Placement of a child who has been removed from his or her home on an emergency basis. An emergency placement may be made with no prior notice and is temporary until a regular foster home can be identified. In some counties, foster parents who are willing to take emergency placements are designated as emergency foster homes.

**Extension of Placement** – Continuation of the original placement order after review by the court.

**Family Court** – A court designated to hear matters related to family members. This court handles abuse and neglect proceedings and reviews voluntary placements, juvenile delinquents and PINS (persons in need of supervision) cases, termination of parental rights, child support, paternity, adoption, guardianship, custody, and family offenses.

**Finalization** – The final step of the adoption process. The attorney, on behalf of the adoptive parents, files the appropriate legal documents to finalize the adoption. A court hearing is set. After the court hearing, the custody of the child is legally transferred to the adoptive parents. The family receives a new birth certificate for the child with his or her last name changed to that of the adoptive family.

**Finding** – What the court determines the facts of the case to be, based on the evidence presented.

**Foster Care** – Foster care of children means all activities and functions provided relative to the care of a child away from his or her home 24 hours per day in a foster family home or a duly certified or approved foster family boarding home or a duly certified group home, agency boarding home, childcare institution, health care facility, or any combination thereof. [See 18 NYCRR 427.2(a).]

**Freed for Adoption** – Child freed for adoption means a foster child whose custody and guardianship were committed to an authorized agency pursuant to section 384 of the Social Services Law. A foster child who has been freed for adoption includes a child whose care and custody have been transferred to an authorized agency, pursuant to section 384-a of the Social Services Law. Children who have been placed with a social services official pursuant to articles 3, 7, and 10 of the Family Court Act are excluded from the definition of child freed for adoption. [See 18 NYCRR 441.20(a) (3).] **OR** Legally freed child means a person under the age of 18 years: (1) whose custody and guardianship have been transferred to an authorized agency as a result of either a surrender instrument executed pursuant to section 383-c or 384 of the Social Services Law or an order of the Family Court or the Surrogate's Court made pursuant to section 384-b of the Social Services Law; or (2) whose care and custody have been transferred to an authorized agency pursuant to section 1055 of the Family Court Act or section 384-a of the Social Services Law and where such child's parents are both deceased, or where one parent is deceased and the other parent is not a person entitled to notice

pursuant to sections 111 and 111-a of the Domestic Relations Law. [18NYCRR 420.1(a)]

**Guardianship** – Physical and legal responsibility of a child granted to a person or authorized agency to act as parents. Guardianship may be granted by the court when parental rights have been suspended or terminated. Generally, a person can be designated a guardian of the person, of the property, or both. A guardian of the person has the right to make decisions concerning the individual. The care, custody and control of the individual is also usually (although not necessarily) granted to the person as well. A guardian of the property is a person who can make decisions concerning the property of the individual. Guardians either petition the court to be appointed or are designated by the parent either in a will or by a written document with approval by a court to act for the child.

**Home Study** – The process of gathering information to determine if a prospective foster home can be certified or approved. Agency workers (usually called home finders) visit the home and collect detailed information about the applicants as well as other household members and potential caregivers for the child. The worker submits a report to the court or agency, describing the home environment, background, social history, and current makeup of the family situation. A similar home study is conducted for a prospective adoptive home.

**Independent Living** – Older youth in foster care generally are to be provided with information and training to help prepare them to live independently. Agency staff and foster parents prepare these youth to assume the rights and responsibilities of adults in society.

**Indicated** – A child abuse/neglect report that has “some credible evidence” to support the allegations. [See SSL § 412(12) and 18 NYCRR 433.2(c).]

**Investigation (of a CPS report)** – Gathering of facts by a Child Protective Services (CPS) worker based on the State’s requirements for home visits, interviews, etc., to determine whether there is some credible evidence that the subject of the report abused or maltreated the child.

**Law Guardian** – An independent attorney appointed by Family Court and paid by the county to solely represent the child’s interests. Each child in care is appointed his or her own law guardian by the court.

**Life Book** – A combination of a story, diary, and scrapbook that has information about a child’s life experiences, with such items as pictures of birth family and foster families, report cards, souvenirs of special events, and medical history. A Life Book should be started when children first come into care. Life Books are best developed in partnership by the foster parents, birth parents, caseworker, and child. Children take their Life Books with them when they return home, are adopted, or go into independent living.

**Neglected (or Maltreated) Child** – A child less than eighteen years of age: (i) whose physical, mental, or emotional condition has been impaired or is in imminent danger of becoming impaired as a result of the failure of his parent or other person legally responsible

for his or her care to exercise a minimum degree of care:(a) in supplying the child with adequate food, clothing, shelter, education, medical or surgical care, though financially able to do so or offered financial or other reasonable means to do so; or(b) in providing the child with proper supervision or guardianship, by unreasonably inflicting or allowing to be inflicted harm, or a substantial risk thereof, including the infliction of excessive corporal punishment; by misusing a drug or drugs; by misusing alcoholic beverages to the extent that he loses self-control of his actions; or by any other acts of a similarly serious nature requiring the aid of the court; provided, however, that where the respondent is voluntarily and regularly participating in a rehabilitative program, evidence that the respondent has repeatedly misused a drug or drugs or alcoholic beverages to the extent that he or she loses self-control of his or her actions shall not establish that the child is a neglected child in the absence of evidence establishing that the child's physical, mental, or emotional condition has been impaired or is in imminent danger of becoming impaired as set forth in paragraph (i) of this subdivision; or (ii) who has been abandoned by his parents or other person legally responsible for his care. [SSL §371(4-a)]

**No Reasonable Efforts** – A finding by the court that no reasonable efforts should be made to prevent or eliminate the need for placement or to return the child home after being placed in foster care due to certain circumstances, which are spelled out in the law. (See FCA § 1039-b.) See also Reasonable Efforts.

**Notification Letter** – A letter required by state law that informs the parents or caregivers that they have been named as a subject or other person in a report of suspected child abuse or maltreatment made to the State Central Register (Child Abuse Hotline).

The letter must contain the Register number, report I.D. number, and date of the report. A different notification letter informs the subject or other person named in a report of the determination.

**Parental Rights** – The right to make major decisions for a child, such as deciding a child's religion or giving permission to marry or serve in the military. Also includes the legal right to be in contact with the child.

**Permanence** – Permanence is the assurance of a family for a child intended to last a lifetime. Permanence assures a child of a family where he or she will be safe and nurtured. Foster parents work in teamwork with the caseworker and others to assure that a child returns to his or her home or has a timely plan for adoption or placement with extended family.

**Permanency Hearing** – A hearing held in accordance with section 1039-b, 1052, 1055, or 1055-a of this article (Family Court Act Article 10) for the purpose of reviewing the foster care status of the child and the appropriateness of the permanency plan developed by the Social Services official. [FCA§ 1012(k)] For the purposes of calculating the initial period of placement, such placement shall be deemed to have commenced the earlier of the date of the fact-finding of abuse or neglect of the child pursuant to section 1051 of this Part or 60 days after the date the child was removed from his or her home in accordance with the provisions

of this article. The initial permanency hearing shall be held no later than 8 months following placement. Each subsequent permanency hearing shall be held as directed by the court but no later than 6 months following the preceding permanency hearing. [FCA § 1055-a(3)(c)]

**Permanency Planning** – Planning by agencies to protect a child's right to grow up within a permanent family. Agencies develop plans to place children in living situations that will meet their needs and give them stability for the longest period of time.

**Person In Need of Supervision (PINS)** – A person less than 18 years of age who is habitually truant or who is incorrigible, ungovernable or habitually disobedient, and beyond the lawful control of a parent or other person legally responsible for such child's care, or other lawful authority (effective July 1, 2002). [SSL § 371(6)].

**Person Legally Responsible** – Child's custodian, guardian, or any other person responsible for a child's care.

**Petition** – Formal written application to the court requesting action by the court.

**Physical Abuse** – Physical abuse is defined by state law and is usually indicated by unexplained bruises, welts, burns, fractures/dislocations and lacerations or abrasions. Other behavioral indicators include a child who feels deserving of punishment, is wary of adult contact, is apprehensive when other children cry, is aggressive, withdraws, is frightened of his or her parent(s), is afraid to go home, reports injury by parent(s), often has vacant or frozen stares, lies very still while surveying surrounding (infant), responds to questions in monosyllables, demonstrates inappropriate or precocious maturity or indiscriminately seeks affection.<sup>1</sup>

**Placement Order** – An order made by a court granting the custody of a child to an agency for a specific amount of time.

**Preventive Services** – Those supportive and rehabilitative services provided to children and their families in accordance with the provisions of this Part for the purpose of: averting a disruption of a family which will or could result in placement of a child in foster care; enabling a child who has been placed in foster care to return to his or her family at an earlier time than would otherwise be possible; or reducing the likelihood that a child who has been discharged from foster care would return to such care. [See 18 NYCRR 423.2(b).]

**Reasonable Efforts** – A finding by the court that reasonable efforts should be made to prevent or eliminate the need for placement or to return a child home after being placed in foster care. Health and safety of the child are the paramount concern in determining reasonable efforts. (See FCA § 1039-b.) See also No Reasonable Efforts.

<sup>1</sup> Adapted from Drews, K., Salus, M., and Dodge, D. 1979. Child Protective Services In-Service Training for Supervisors and Workers. Washington, D.C. U.S. DHEW, ACYF, Children's Bureau, National Center on Child Abuse and Neglect, HEW Contract No. 105-79-1103, pp. III 6, 1-4.

**Relatives Within the Third Degree** – Relatives within the third degree are those who are related to the parent(s) or legal step-parent(s) through blood or marriage in the first, second, or third degree in the kinship line. In relation to the child, they are: grandparents and great-grandparents; aunts and uncles and their spouse; siblings and their spouse; first cousins and their spouse; great-aunts and great-uncles and their spouse; and great-great grandparents. In addition, a person who is unrelated to a child may be approved to be a relative foster parent to that child if the person is related to the child's half-sibling(s) and such approval will allow the half-siblings to remain together. [See 18 NYCRR 443.1(i).]

**Report (Child Abuse/Maltreatment)** – Written allegation from the State Central Register (SCR) of “reasonable cause” to suspect child abuse/maltreatment giving the agency legal authority to begin an investigation.

**Respite Care** – The provision of brief and temporary care and supervision of children for the purpose of relieving parents or foster parents of the care of such children or foster children when the family or foster family needs immediate relief in order to be able to maintain or restore family functioning or to provide relief for foster parents from the stress of providing care for a severely handicapped or emotionally disturbed foster child or for a foster child with a chronic or recurring illness. [See 18 NYCRR 435.2(d).]

**Recertification and Reapproval** – The annual process of reviewing the certified or approved status of a foster home when the family wishes to remain eligible to care for foster children.

**Reunification** – When a child returns from foster care to live with his or her birth family.

**Risk** – Risk is the likelihood of any degree of long-term harm or maltreatment. It does not predict when the future harm might occur but rather the likelihood of the harm happening at all. Foster parents can help caseworkers assess risk and likelihood of future harm.

**Safety** – A child is safe when there is no immediate or impending danger of serious harm to a child's life or health as a result of acts of commission or omission (actions or inactions) by the child's parents and/or caretakers.

**Self-Concept** – How an individual feels about who he or she is. Self-concept includes the qualities of being lovable, capable, worthwhile, and responsible. Children who have been sexually or physically abused or neglected often blame themselves for their families' problems. Sometimes it is hard for children who have been treated badly to feel good about who they are. Their self-concept is poor. Foster parents should help children and youth understand and feel good about who they are, including their cultural, racial, and religious identities.

**Service Plan Review (SPR)** – A formal meeting scheduled at set periods to assess and reassess the service plan for the family and child and to review the permanency planning goal set for the child. Participants discuss progress toward the service plan and revise the plan if necessary. At a minimum, participants should include the caseworker, supervisor, birth parents,

foster parents, child (age 10 and up, or younger if able to participate), and third party reviewer (an agency staff member who is not involved with the case). (See 18 NYCRR Part 428.)

**Sexual Abuse** – Child sexual abuse involves any interaction, contact or non-contact, between a child and any person—child or adult—in a power position in which the child is being used for the sexual stimulation of another person. Sexual abuse is defined by state law and is usually indicated by a child's disclosure and a combination of physical indicators including difficulty in walking or sitting; torn, stained, or bloody underclothing; pain, swelling, or itching in genital area; pain on urination; bruises, bleeding or laceration in external genitalia, vaginal, or anal areas; vaginal/penile discharge; venereal disease, especially in pre-teens; poor sphincter tone; pregnancy; bizarre, sophisticated or unusual sexual behavior or knowledge; poor peer relationships; delinquency; running away; change in school performance; withdrawal, fantasy or infantile behavior.

**Source** – Person who suspects child abuse or maltreatment is occurring and calls the Hotline to take a report.

**State Central Register of Child Abuse and Maltreatment (SCR) (Hotline)** – A file (register) maintained in Albany containing records of all indicated reports and reports under investigation. The Hotline receives and screens phone calls of suspected abuse and maltreatment statewide and distributes the information to the appropriate county.

**Subject** – Subject of the report means any of the following persons who are allegedly responsible for causing injury, abuse, or maltreatment to, or allowing injury, abuse, or maltreatment to be inflicted on, a child named in a report to the State Central Register of Child Abuse and Maltreatment: (i) a child's parent or guardian; (ii) a director, operator, employee, or volunteer of a home or facility operated or supervised by an authorized agency, the Division for Youth, or an office of the Department of Mental Hygiene or a family day-care home, a day-care center, a group family day-care home or a day services program; (iii) a consultant or any person who is an employee or volunteer of a corporation, partnership, organization or any governmental entity which provides goods and services pursuant to contractor other arrangement which provides for such consultant or person to have regular and substantial contact with children; or (iv) any other person 18 years of age or older legally responsible for a child, including the child's custodian, guardian, and any person responsible for the child's care at the relevant time. Custodian may include any person continually or at regular intervals found in the same household as the child when the conduct of such person causes or contributes to the abuse or maltreatment of the child. [18 NYCRR432.1 (d)]

**Substantiated (Indicated)** – Found to have some credible evidence.

**Summons** – A document issued by the court, usually handed in person, notifying the person to appear in court at a day specified to answer a petition.

**Special Needs** – A child with special needs means a child who: (i) the State has determined cannot or shall not be returned to the home of his or her parents; (ii) is handicapped or is hard-to-place; and (iii) a reasonable but unsuccessful effort has been made to place the child with appropriate adoptive parents without adoption assistance, except where such an effort would not be in the best interest of the child. “Handicapped child” means a child who possesses a specific physical, mental, or emotional condition or disability of such severity or kind which, in the opinion of the department, would constitute a significant obstacle to the child’s adoption. Such conditions include, but are not limited to: (i) any medical or dental condition which will require repeated or frequent hospitalization, treatment or follow-up care; (ii) any physical handicap, by reason of physical defect or deformity, whether congenital or acquired by accident, injury, or disease, which makes or may be expected to make a child totally or partially incapacitated for education or for remunerative occupation, as described in sections 1002 and 4001 of the Education Law; or makes or may be expected to make a child handicapped, as described in section 2581 of the Public Health Law; (iii) any substantial disfigurement, such as the loss or deformation of facial features, torso, or extremities; or (iv) a diagnosed personality or behavioral problem, psychiatric disorder, serious intellectual incapacity or brain damage which seriously affects the child’s ability to relate to his peers and/or authority figures, including mental retardation or developmental disability. “Hard-to-place child” means a child, other than a handicapped child: (i) who has not been placed for adoption within six months from the date his or her guardianship and custody were committed to the social services official or the voluntary authorized agency; or (ii) who has not been placed for adoption within six months from the date a previous adoption placement terminated and the child was returned to the care of the social services official or the voluntary authorized agency; or (iii) who meets any of the conditions listed in clauses (a) through (f) of this subparagraph, which the department has identified as constituting a significant obstacle to a child’s adoption, notwithstanding that the child has been in the guardianship and custody of the social services official or the voluntary authorized agency for less than six months: (a) the child is one of a group of two siblings (including half-siblings) who are free for adoption and it is considered necessary that the group be placed together pursuant to sections 421.2 (e) and 421.18 (d) of this Part; and (1) at least one of the children is five-years-old or older; or (2) at least one of the children is a member of a minority group which is substantially overrepresented in New York State foster care in relation to the percentage of that group to the State’s total population; or (3) at least one of the children is otherwise eligible for subsidy in accordance with the provisions of this subdivision; (b) the child is the sibling or half-sibling of a child already adopted and it is considered necessary that such children be placed together pursuant to sections 421.2 (e) and 421.18 (d) of this Part; and (1) the child to be adopted is five-years-old or older; or (2) the child is a member of a minority group which is substantially over represented in New York State foster care in relation to the percentage of that group to the State’s total population; or (3) the sibling or half-sibling already adopted is eligible for subsidy or would have been eligible for subsidy if application had been made at the time of or prior to the adoption; (c) the child is one of a group of three or more siblings (including half-siblings) who are free for adoption and



it is considered necessary that the group be placed together pursuant to sections 421.2 (e) and 421.18 (d) of this Part; or (d) the child is eight-years-old or older and is a member of a minority group which is substantially overrepresented in New York State foster care in relation to the percentage of that group to the State's total population; or (e) the child is 10-years-old or older; or (f) the child is hard to place with parent(s) other than his/her present foster parent(s) because he/she has been in care with the same foster parent(s) for 18 months or more prior to the signing of the adoption placement agreement by such foster parent(s) and has developed a strong attachment to his/her foster parent(s) while in such care and separation from the foster parent(s) would adversely affect the child's development. (18 NYCRR 421.24)

**Strengths** – The skills, resources, qualities, and experiences that are part of each person. Foster parents should look for and recognize strengths in themselves, children, and birth parents. Identifying strengths helps in understanding and appreciating others and in gaining insight into a person's life and behaviors. Part of seeing a person's strengths lies in seeing that person in a positive light.

**Termination of Parental Rights (TPR)** – Commitment of the guardianship and custody of a child to an authorized agency to prepare for adoption planning. Involuntary TPR occurs when a court determines that the parents have failed for a period of more than one year following the date such child came into the care of an authorized agency substantially and continuously or repeatedly to maintain contact with or plan for the future of the child, although physically and financially able to do so, notwithstanding the agency's diligent efforts to encourage and strengthen the parental relationship when such efforts will not be detrimental to the best interests of the child. (See SSL §384-b). TPR can also be voluntary, when birth parents decide on their own to surrender their parental rights. (See SSL §384.)

**Unfounded (Unsubstantiated)** – A report that has been determined by CPS where CPS has not found that some credible evidence of the alleged abuse or maltreatment exists. [See 18 NYCRR 432.1(f).]

**Uniform Case Record (UCR)** – A means of documenting case assessment and service planning through its various forms (e.g., progress notes, service plans, and plan amendments). The UCR provides a structure to help guide agency efforts at permanency planning and to record such efforts, thereby giving caseworkers a useful tool in working with families and children. (See 18 NYCRR Part 428.) (NYS FP Manual)

## **Well-being**

Well-being is not defined in federal law, but in the GPSII/MAPP program well-being includes the physical, emotional, social, mental and moral/spiritual healthy development of a child.

Well-being is assessed based on the following questions:

- ◆ Is the child or youth **physically healthy**? If not, does the child have the medical attention required to restore or optimize health, given the condition?
- ◆ Is the child or youth **emotionally healthy**? Does the child experience being lovable, capable and worthwhile?
- ◆ Is the child or youth **socially healthy**? Does the child interact in work and play activities at a level appropriate for age and abilities?
- ◆ Is the child or youth **intellectually** or **mentally** on target? If not, does the child have the educational resources required to optimize intellectual growth?
- ◆ Is the child or youth **morally/spiritually healthy**? Does the child have a sense of right and wrong and an ability to understand the feelings of others? Does the child have hope in the future?

## Strengths/Needs and Permanency for Children

1. What possible strengths did you see in the children?

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2. What possible strengths did you see in the parents of the children?

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3. What are some possible needs of the children, especially related to permanency?

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4. What possible needs did you see in the birth parents?

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5. What did the foster and adoptive parents specifically do to meet the needs of children and parents?

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## Roles and Responsibilities of Foster Parents

As a foster parent, you are responsible for the temporary care and nurturing of a child who has been placed outside his or her own home. During a time of disruption and change, you are giving a child a home. At the same time, your role includes working with the caseworker and the child's family so that the child can return home safely, when appropriate.

The role of the foster parent is to:

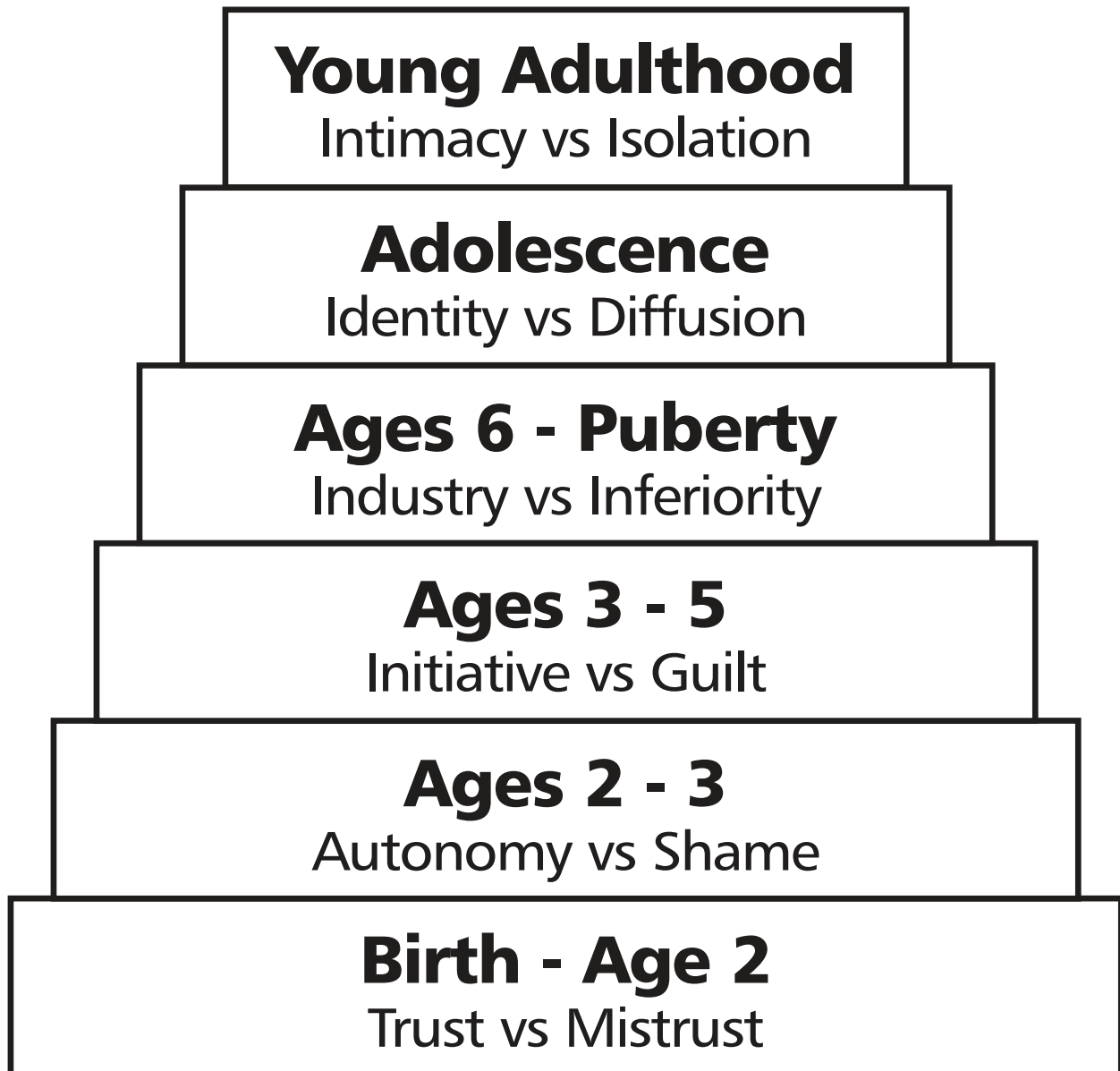
- ◆ Provide temporary care for children, giving them a safe, stable, nurturing environment.
- ◆ Cooperate with the caseworker and the child's parents in carrying out a permanency plan, including participating in that plan.
- ◆ Understand the need for, and goals of, family visits and help out with those visits.
- ◆ Help the child cope with the separation from his or her home.
- ◆ Provide guidance, discipline, a good example, and as many positive experiences as possible.
- ◆ Encourage and supervise school attendance, participate in teacher conferences, and keep the child's caseworker informed about any special educational needs.
- ◆ Work with the agency in arranging for the child's regular and/or special medical and dental care.
- ◆ Work with the child on creating a Life Book – a combination of a story, diary, and scrapbook that can help children understand their past experiences so they can feel better about themselves and be better prepared for the future.
- ◆ Inform the caseworker promptly about any problems or concerns so that needs can be met through available services.

Foster parents have the right to:

- ◆ Accept or reject a child for placement in a foster home.
- ◆ Define and limit the number of children that can be placed in the foster home, within legal capacity.
- ◆ Receive information on each child who is to be placed in the foster home.
- ◆ Expect regular visits from the child's caseworker to exchange information, plan together, and discuss any concerns about the child.
- ◆ Participate in regular conferences in the foster home to discuss the child's plan every 90 days or less as required (whenever necessary in times of crisis or emergency).
- ◆ Receive notice of, and participate in Service Plan Reviews and Family Court permanency hearings on a child placed in their home.
- ◆ Receive training on meeting the needs of children in care.
- ◆ Have their personal privacy respected.



## Erikson's Stages of Development\*



\* Erickson, E.H. Childhood and Society, 2d ed. NY: WW Norton, 1963.





## Feelings/Behaviors of Children Who Are Grieving

To help children move forward, foster and adoptive parents must first recognize where children are in the grieving process. Behaviors are an expression of feelings and needs. How children express strong feelings is influenced by many things like age, experiences and temperament.

This handout identifies some things that children may feel or do at each stage of the grieving process and should be considered as a “guide,” not a set of rules.

Stage of Grieving	Feeling	Behavior
Shock/Denial	<p><i>Emotions <b>seem</b> to be absent – the child may appear not to be bothered at all by the separation.</i></p> <p><i>The child may be numb.</i></p> <p><i>The child may appear to be happy.</i></p> <p><i>(An example is the “good baby” who only sleeps and eats.)</i></p>	<p><i>Some children's bodies “shut down.”</i></p> <p><i>There may be short-term memory loss, confused thinking, loss of hearing, or becoming physically ill after moving into a new foster or adoptive home.</i></p> <p><i>Very rhythmic behavior may occur (e.g., head banging, skipping rope continuously, bouncing a ball).</i></p> <p><i>The child may have difficulty focusing or performing well in school.</i></p> <p><i>This is also known as the “honeymoon” period – the child is eager to please and is not really dealing with what has happened; the foster or adoptive family may be misled into thinking the child is an “angel” or has no problems adjusting to loss.</i></p>
Anger	<p><i>Anger is the predominant feeling. The child may be angry toward:</i></p> <ul style="list-style-type: none"> <li><i>• birth parents for causing the children's move into foster care</i></li> <li><i>• the foster parents for accepting the children's move into adoption,</i></li> <li><i>• themselves because they may believe they are to blame for the circumstances leading to foster care or for not being able to prevent the placement</i></li> </ul>	<p><i>Anger is directed toward the only parents around – the foster parents– and is expressed through:</i></p> <ul style="list-style-type: none"> <li><i>• Refusing to follow requests</i></li> <li><i>• Refusing to take care of personal hygiene needs</i></li> <li><i>• Running away</i></li> <li><i>• Temper tantrums</i></li> <li><i>• Angry outbursts/swearing; making it clear the foster parents can't do anything right</i></li> <li><i>• Violence directed at others or self</i></li> <li><i>• Destroying property</i></li> </ul>

<p>Depression/ Despair</p>	<p>Common feelings during this stage include:</p> <ul style="list-style-type: none"> <li>• depression</li> <li>• hopelessness</li> <li>• sadness</li> <li>• loneliness</li> <li>• apathy</li> </ul>	<p>Many children refuse to eat or experience eating and sleeping disorders after moving to a foster or adoptive home.</p> <p>Listlessness, lack of energy, being withdrawn, and pushing others away are typical behaviors.</p> <p>Regression or loss of skills previously mastered (like staying dry at night or wanting to be “babied”) are common.</p> <p>Self-destructive behaviors like cutting or drug and alcohol abuse can occur.</p> <p>Talking about or threatening suicide should be taken very seriously. Seek professional help immediately if the child, at any age, threatens suicide, gives away possessions, or changes behavior patterns abruptly and expresses no hope that things can improve.</p>
<p>Acceptance/ Understanding</p>	<p>Feelings during this stage include:</p> <ul style="list-style-type: none"> <li>• Hopeful</li> <li>• Able to experience the full range of emotions, including pleasure as well as sadness</li> <li>• “Connected” to their past</li> <li>• “Connected” to other people</li> </ul>	<p>Children <u>may</u> behave more like what is expected of their chronological age developmentally (physical, emotional, social, spiritual/moral, and intellectual).</p> <p>A verbal child will talk about his or her parents and why they could not do the “job” of parenting right then.</p> <p>Children will be more willing to be part of family life.</p> <p>Children will demonstrate fewer signs of “guilt” about the separation from parents.</p> <p>Children will be more comfortable talking about the feelings they have as well as the information they need about birth parents, sisters, brothers and previous foster families.</p> <p>Child will have energy needed to complete developmental tasks.</p>

## The Life Book\*

A Life Book is a tool and process to help children understand their life experiences so that they can function better, feel better about themselves in the present and be better prepared for the future. The Life Book is a combination of a story, a diary, and a scrapbook. The Life Book is an important part of a child's connection to his or her birth family. It is an important collection of the child's history and aids the child in developing his or her identity.

The best time to begin a Life Book is when a child comes into the foster care system, when information about the birth family and the child's developmental and family history are more available. Unfortunately, this process often does not happen. Then, it becomes the task of the ongoing child welfare worker and the foster parents, or even the adoptive parents (if no one else has done this job), to begin to retrieve and collect important identity information for the child. The Life Book is developed with the child, not for the child, if the child is old enough to participate.

Information for a Life Book may be collected from such sources as:

- ◆ Case records
- ◆ Case records from other agencies that have had contact with child/and or family
- ◆ Birth parents
- ◆ Foster parents
- ◆ Grandparents or other relatives
- ◆ Previous social workers
- ◆ Hospital where born
- ◆ Well-baby clinic
- ◆ Other medical personnel
- ◆ Previous neighbors
- ◆ Teachers and schools
- ◆ Court records
- ◆ Newspapers — birth announcements, marriage announcements, obituaries
- ◆ School pictures (from school records)
- ◆ Policemen who have had previous contact with the birth family
- ◆ Church and Sunday School records

*\* This information is adapted from Adoption of Children with Special Needs: A Curriculum for the Training of Adoption Workers. Prepared by the Office of Continuing Social Work Education, School of Social Work, University of Georgia. Athens, GA, 1982, published by the U.S. DHHD, ACYF, Children's Bureau.*

The information to be included in the Life Book could be:

- ◆ Birth Information
  - birth certificate
  - weight, height, special medical information
  - picture of the hospital
- ◆ Birth Family Information
  - pictures of birth family
  - names, birth dates of parents
  - genogram
  - names, birth dates of siblings, and where they are
  - physical description of parents, especially pictures of parents and siblings
  - occupational/educational information about birth parents
  - any information about extended family members
- ◆ Placement Information
  - pictures of foster family or families
  - list of foster homes (name, location of foster homes)
  - names of other children in foster homes to whom child was especially close
  - names of social workers
  - pictures of social workers to whom child was especially close
- ◆ Medical Information
  - list of clinics, hospitals etc., where child received care; and care given (surgery, etc.)
  - immunization record
  - any medical information that might be needed by the child as he or she grows up, or as an adult
  - height/weight changes
  - loss of teeth
  - when walked, talked, etc.
- ◆ School Information
  - names of schools
  - pictures of schools, friends and teachers
  - report cards, school activities

- ◆ Religious Information
  - places of worship child attended
  - confirmation, baptism and other similar records
  - papers and other material from Sunday School
- ◆ Other Information
  - any pictures of child at different ages of development
  - stories about the child from parents, foster parents, and social workers
  - accomplishments, awards, special skills, likes and dislikes

It is never too late to start a Life Book. Foster parents have an important role in collecting information and working with the social worker to help the child develop the Life Book. Foster parents can share the Life Book with the child's birth parents when the child is leaving foster care, to help the birth parents share in their child's past. Or, they can share the Life Book with new adoptive parents to help with the child's move from one family to another.

Adoptive parents can begin helping with the Life Book at the time of placement. Again, foster parents will want to share the Life Book with the adoptive parents. Adoptive parents may want to share their own Life Book with the child as a way of getting to know each other.

The process of constructing a Life Book can:

- ◆ Help the child welfare worker, foster parents, adoptive parents, birth parents and child to form an alliance;
- ◆ Help a child understand events in the past;
- ◆ Help a child feel good about self and record memories;
- ◆ Provide a way for the child to share his or her past with others;
- ◆ Increase a child's self-esteem by providing a record of the child's growth and development;
- ◆ Help the birth family share in that part of the child's past when they were living apart; and
- ◆ Contribute to the adoptive family's understanding of the child's past, to better help the child develop a positive identity and self-concept.



# Understanding and Helping Children Who Are Grieving Worksheet

**Instructions:** Review the information and answer the questions listed following the background.

Background information: **Alana**, age 15, is the mother of Matthew, 6 months. Her father is dead and her grandmother has raised Alana and her two younger sisters since her mother disappeared when she was four years old. When Alana became pregnant, her grandmother told her she could not keep the baby. She ran away. When the police picked her up, her grandmother refused to take her home and she entered foster care. That was a little over a year ago. Todd, Matthew's father, is also 15 and is involved with his son. Alana and Todd plan to marry when they are old enough. Both attend school. Alana's grandmother does not want Alana to see Todd but the foster parents welcome him into their house to visit with Matthew. Alana is searching for her mother who has a history of prostitution and drug use. Alana is very attentive to Matthew's needs and is helpful in the foster home. She becomes very sad and sometimes angry because her grandmother refuses to see her or allow her to see her two younger sisters. Alana is considering getting an order from Family Court that would allow her to visit with her sisters. She can talk about her anger toward her grandmother.

1. Where is **Alana** in the grieving process?

- Shock/Denial
- Anger
- Depression/Despair
- Acceptance/Understanding

2. What are some of the maturational and situational losses **Alana** is experiencing?

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3. What are additional grieving behaviors a foster parent may see **Alana** do?

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4. How might **Alana’s** losses affect her well-being and healthy development?

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5. What situations might trigger developmental grieving for **Alana**?

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6. Think about ways to help **Alana** express and release feelings of anger, sadness, fear and sorrow. In order to help **Alana** grieve, what are some parenting strategies or interventions you might choose?

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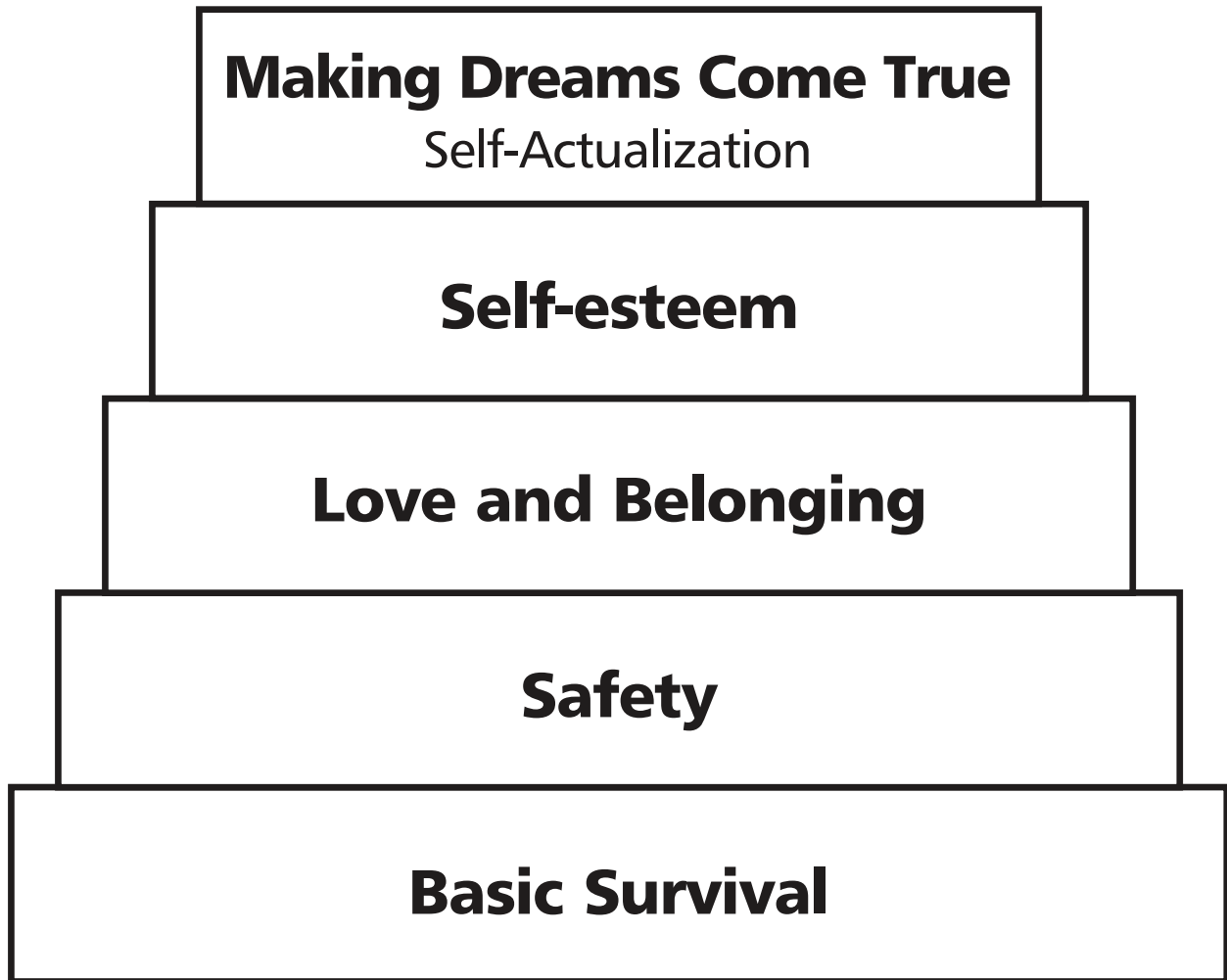
## Helping Children with Healthy Grieving – Family Strengths and Needs

Thinking about the children to whom you were introduced to in Meetings 2 and 3, consider and discuss your own losses and how these losses create strengths and needs for you to help each one of the children with their own grieving.

<b>Child/Youth</b>	<b>Losses of Child or Youth</b>	<b>My Strengths</b>	<b>My Needs</b>
Beau	Soon to lose mother, health is impacted by chronic disease, normal childhood, hope for a pet, dreams of flying an airplane		
Karen	Normal family life, healthy heart, ability to read well, old friends		
Jason	Childhood, close relationship with friends and father, relationship with mother		
Jeryce	Cultural roots, self-esteem, being with family, friends, innocence of a normal childhood		
Alana	Relationship with mother, contact with siblings, good relationship with grandmother, normal freedom of adolescence		



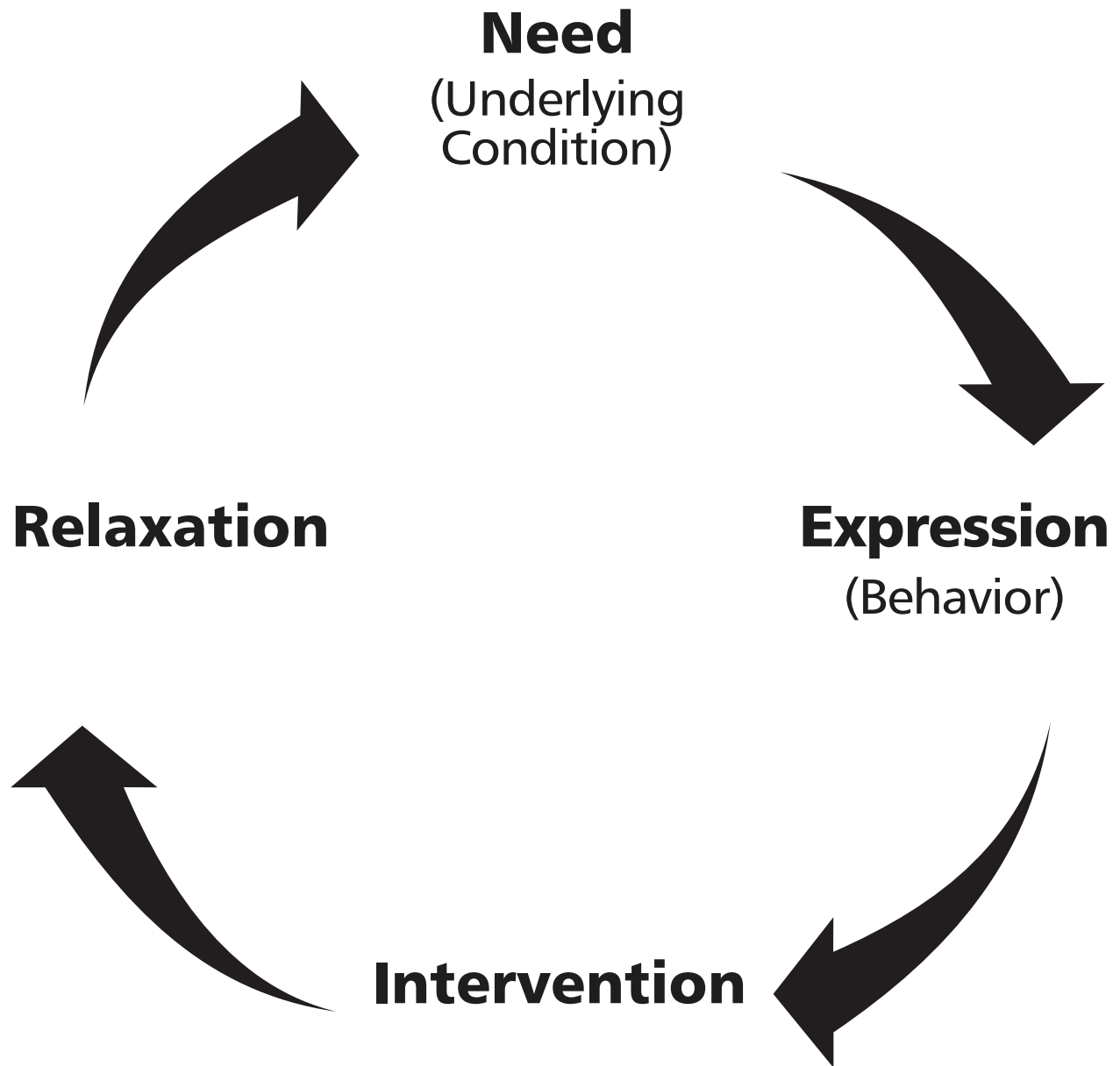
## Basic Human Needs\*



\* Adapted from concepts of Abraham Maslow.



## The Cycle of Need: Attachment





## Attachment Tasks of Foster and Adoptive Parents\*

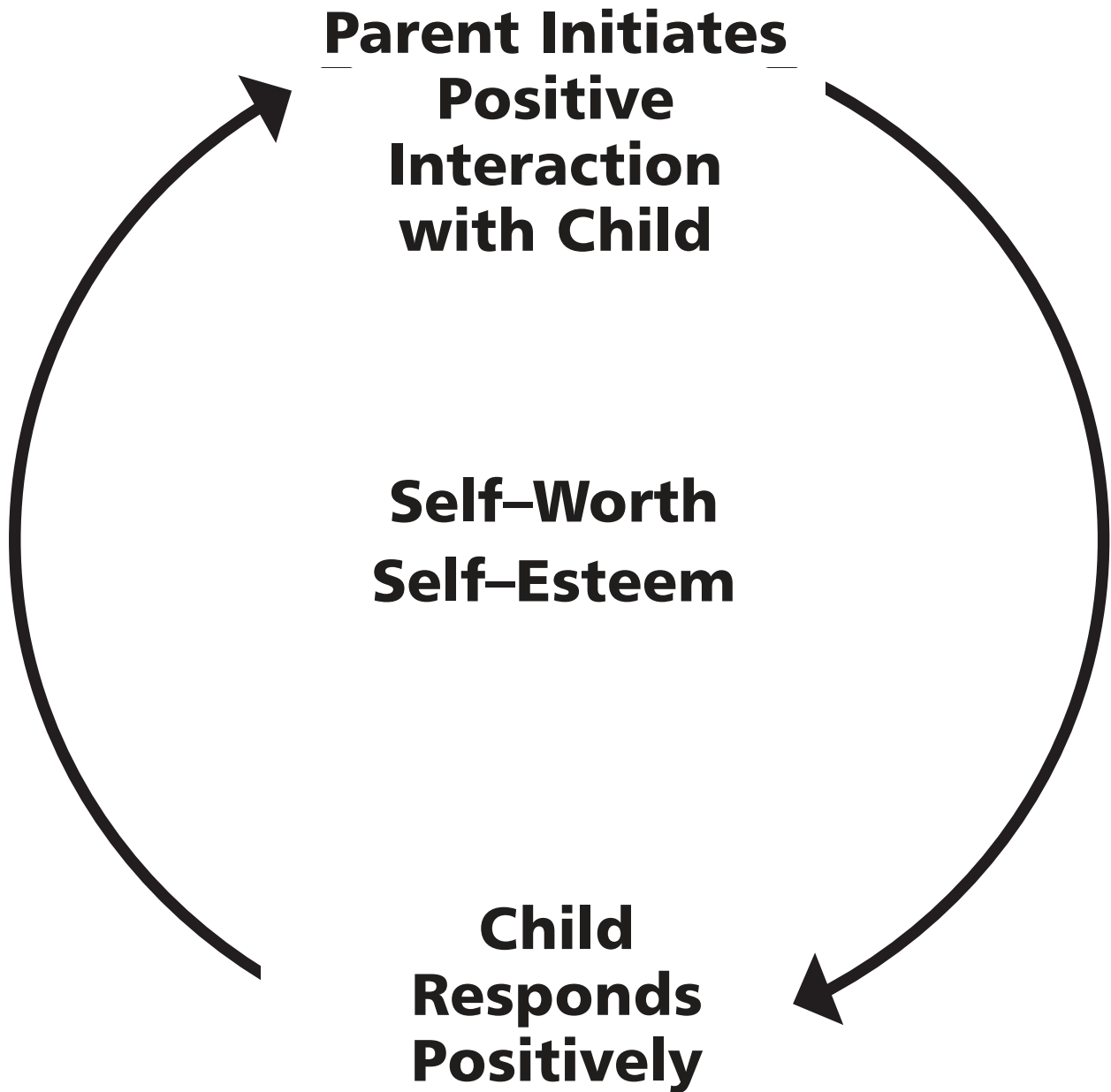
- ◆ The first important task of foster and adoptive parents is to support the attachment children have to their parents and families.
- ◆ The second important task is to help children in foster care recover from a separation from their families and attach to a foster family.
- ◆ The third task is to help children in foster care rebuild and maintain relationships with their parents and families.
- ◆ For children who cannot be reunited with their families, the fourth task is to help them build and maintain new relationships with new adoptive families. For some older youth in foster care, the fourth task may become helping them build and maintain attachments to people who can help them move into self-sufficient, interdependent adult living.

\* Fahlberg, Vera. "Attachment and Separation" PROJECT CRAFT, Training in the Adoption of Children with Special Needs. Ann Arbor, MI: University of Michigan School of Social Work, 1980, pp. V-1 – V93.





## The Positive Interaction Cycle\*



\* Reproduced from "Attachment and Separation: A Workbook" by Vera Fahlberg, M.D. in PROJECT CRAFT, Training in the Adoption of Children with Special Needs. Ann Arbor, MI: University of Michigan School of Social Work, 1980, pp. V-23. V-25.



## Impact of Placement on Children's Self-Concept \*

**Self-Concept:** The set of beliefs which a person has about himself or herself, which evolves out of relationships with others over a period of time. These beliefs shape the way one feels, thinks and behaves in relation to oneself and others. Self-concept has four primary characteristics:

lovable

capable

worthwhile

responsible

**Lovable:** What makes you feel lovable? What makes children feel lovable? When children feel lovable, how do they show it? How do children let you know they feel unlovable? How might foster care placement make a child feel unlovable? What can foster parents and social workers do to help children feel more lovable?

**Capable:** When do you feel capable? What makes children feel capable? How do children demonstrate that they feel capable? How do they behave when they do not feel capable? How might placement make a child feel not capable? What can we do to help children feel more capable?

**Worthwhile:** What makes you feel worthwhile? What makes children feel worthwhile? How do children demonstrate that they feel worthwhile? How do they behave when they do not feel worthwhile? How might foster care placement make a child feel not worthwhile? What can foster parents, and social workers do to help youth in foster care feel more worthwhile?

**Responsible:** When do you feel responsible? What makes children feel responsible? Why would children in foster care not feel responsible or even want to be responsible? How does placement make a child feel not responsible? What can we do to help youth in foster care feel more responsible?

Which of the above four characteristics might be the easiest to instill? Which might be the most difficult? As a foster parent, where would you begin?

\* Adapted from **Foster Parent Training – A Curriculum and Resource Manual**, by Michael E. Polowy, Daniel Wasson, and Mary Wolf. New York State Child Welfare Training Institute. State University College at Buffalo, 1985.



## Definitions – Discipline and Punishment

- ◆ **Punishment** is giving negative consequences for a behavior after it has occurred.
- ◆ **Punishment** is a behavior designed to stop a behavior. Punishment is derived from the Latin, *punire*, which is associated with causing pain.
- ◆ **Discipline** is teaching healthy behaviors. The word discipline is derived from the Latin, *discere*, which means to learn. (Source: **The American Heritage Dictionary**)
- ◆ **Discipline** of children who have been physically abused, neglected, emotionally maltreated or sexually abused should teach the following:\*

  - ◆ To understand feelings and needs;
  - ◆ To understand the connection between feelings and behaviors;
  - ◆ To learn healthy ways to get needs met (problem solve);
  - ◆ To feel good about their relationships with adults and other children;
  - ◆ To feel good about themselves (lovable, capable, worthwhile and responsible).

\* Polowy, M., Wasson, D., and Wolf, M., (1985). Information on what discipline needs to teach is adapted from **Foster Parent Training — A Curriculum and Resource Manual**. Buffalo: The New York State Child Welfare Training Institute, State University College at Buffalo



## Side Effects of Physical Punishment

Many parents, at some time, have felt that physical punishment (smacking, swatting, hitting, spanking, or depriving a child of food) is the only effective way to make a child stop a bad behavior.

Many parents have seen that physical punishment can be effective because:

- ◆ It immediately stops the behavior, at least for a while, by getting the child's attention.
- ◆ It makes the parents feel better because they are angry and, therefore, have a way to express their anger. The child knows they are angry.
- ◆ The spanking is just one small part of discipline and is received by the child in a context of a close, loving relationship with parents.\*
- ◆ Many parents were raised with physical punishment and turned out to be healthy, happy and productive people.

Therefore, what is the problem with physical punishment? For children who have been sexually abused, physically abused or neglected, here are the side effects of physical punishment:

- ◆ Children who have been physically abused usually respond to physical punishment in one of the following ways:\*\*
  - They are so used to being physically and emotionally hurt that they don't "feel" the pain. Therefore, they have to be hit or spanked harder and harder to feel any effects.
  - They may find pleasure, or relief in getting the spanking, because it's the only way they have learned to get attention.
- ◆ Physical punishment takes away the golden opportunity parents have to help a child feel remorse for an unkind or objectionable action, thus robbing the child of an opportunity for moral development.

\* Gilman, Brian G., **"The Case Against Spanking,"** Foster Care Journal, April 1987.

\*\* Adapted from McFadden, E.J. (n.d.). **Fostering the Battered and Abused Child.** Ypsilanti: Eastern Michigan University Social Work Program, p. 7. Battered and Abused Child.

Therefore, they will work hard to get their new parents to show attention the same way that their birth families showed attention.

- ◆ Physical punishment models aggressive behavior. It teaches children that the method a bigger person can use to stop the behavior of a smaller person is to use physical force. We don't often see an adult use physical discipline with a child bigger than the adult. Likewise, we don't often see a smaller child hitting a bigger child. The following example demonstrates how a parent can teach a child to use physical force:
  - A tired mother is in a grocery store or doctor's office with her two children who are fighting. They start hitting each other. The mother finally turns around and hits her children, telling them to stop hitting each other. Certainly, she got them to stop hitting — at least for a while. But what did she also teach them? That you get people to do what you want by hitting them.
- ◆ Physical punishment teaches children what not to do instead of what to do.
- ◆ Physical punishment hurts children, and children who need foster care already have been hurt enough.

For children who have been abused, spanking or smacking can be terribly damaging. And sometimes, of course, a child's foster parents will not know for certain that a child has been physically or sexually abused until the child's behavior in the foster home so indicates.

Therefore, using alternatives to physical punishment has two important benefits. First, it minimizes the risk of additional hurt to a child. Second, it helps break the intergenerational cycle of physical abuse.



# Discipline Techniques to Help Children and Youth Manage Their Behaviors

Please use this handout to take notes as the methods are discussed. As you think about the method, write down behaviors that could be managed using the ideas presented.

## I. Be a Role Model

One of the most effective methods of learning is imitation. Role modeling is an effective method of teaching social behaviors.

Think of some things you have learned to do by watching others. Can you think of some social situations, such as your first formal dining experience, where you may have taken cues on how to behave based on what others were doing?

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## 2. Provide the Child with Time Out

Time out is an effective behavioral way to let children know that they cannot continue to do what they are doing. Time out is removing a child from the action and placing the child in a quiet place where he or she can gain control. Some people will ask, "How can you help young children learn to do things when their language is limited and it is difficult to reason with them?" Time out can be effectively used to stop a young child's behavior. It lets the child know what is right and what not to do. Time out also provides the child with an opportunity to get back in control.

Think of ways you as an adult have learned to take time out when you are angry or are having an emotional reaction.

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**3. Provide Positive Reinforcers and Privileges**

One of the best ways to get a behavior to continue is to reward it. Immediate positive feedback usually causes the person to continue or repeat the behavior that is being reinforced. Both the Cycle of Need: Attachment and the Positive Interaction Cycle depend on positive interventions and positive response. The process is simple. We all tend to continue behavior when it is reinforced.

When someone compliments you on a job they think you've done well, how do you feel?

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**4. Take Away Privileges**

Children need to be able to make the connections between actions, responsibilities and rights. Often privileges are earned based on responsible behavior. Privileges are lost as a result of irresponsible behaviors. If the rule is that no telephone call be longer than 20 minutes, and the child continues to extend calls beyond that time limit, taking away the privilege of using the phone for 24 hours may be an effective way to change the behavior. Children learn the connections between behavior and consequences when their lost privileges are tied to the behavior they need to change.

When the loss of privilege does not relate to the behavior, the child is more likely to feel punished and resentful. What are some privileges that adults can have taken away as a result of their actions?

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**5. Provide Natural and Logical Consequences**

Consequences that are natural, ones likely to occur if no intervention is taken, become life’s lessons. Natural consequences are really learning through the school of hard knocks, such as when toys left outside are stolen. Logical consequences are given to the child by the parent, such as when toys left outside are placed “off limits” for a period of time.

When we want to prevent life’s blows to children or need to protect their health and safety, we often provide logical consequences rather than natural consequences. What are some natural consequences from which you have learned?

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**6. Ignore the Behavior**

Some behaviors need attention or reinforcement to continue. Sometimes children will act up or out just to get a parent’s attention. If a child is using a behavior to gain control or get your attention, an effective response can be to withhold attention.

Have you observed any instances where someone has stopped a troubling or offensive behavior because it was being ignored?

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## 7. Ensure that Restitution Occurs

If children are held accountable for their behavior, they are more likely to be responsible. Restitution is giving back or “making amends” for behavior that causes harm to someone.

What are some adult situations where restitution is an effective technique?

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## 8. Hold Family Meetings

Family meetings are scheduled family gatherings to share important information. Often the best way to resolve an issue is to get all the parties together and discuss what is happening and what are logical solutions. By holding family meetings, parents show their children that they are an important part of the family and that their feelings count. Also, family meetings help children learn to talk about their concerns.

Can you think of a time during your childhood or youth when a family meeting might have been a good way to help you learn answers to some of your questions or concerns?

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**9. Develop Behavioral Charts**

Behavioral charts can help assist parents to determine when behaviors occur and what causes them. By tracking behaviors, parents can determine when to use positive reinforcement to increase the learning or performance of the desired behaviors.

Did you ever have a behavior that you might have managed differently if it had a been tracked on a chart?

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**10. Grandma’s Rule or This for That**

Rules are clearly stated expectation for behaviors. Grandma’s Rule or This for That teaches both the expected order of behaviors and a logical way to earn privileges. For example, children must finish their homework before they can watch television.

Can you think of a example of “This for That” in your family growing up?

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**11. Help the Child Understand Feelings**

Many children will not relate the way they are feeling to the way they are acting. When parents can help the child connect emotions and behaviors, an important first step toward changing behaviors has been made.

Can you think of an example when you did something as a way to express a feeling that you weren't able to/allowed to talk about?

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**12. Replace Negative Time with Positive Time**

It is very difficult to stop behavior. Substituting something positive and healthy for something negative and destructive is a key to being able to change a behavior.

Can you think of a positive behavior you wish you had been encouraged to give more time to (instead of doing something negative)?

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### **13. Provide Alternatives for Destructive Acting-Out Behaviors**

Providing alternatives is giving the child acceptable behaviors to express strong feelings. Emotions carry a great deal of energy. Children will need some place to put that energy. Parents can help them to find positive ways to express their feelings.

What are some alternatives you think would be useful when you see the results of destructive acting-out behaviors?

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### **14. Make a Plan for Change with a Child**

Learning how to make a plan for change only comes with practice. Plans usually start with a goal. If you can help a child understand the need for change and then develop a goal, you will be moving in the right direction.

Think of a time you had a goal and what helped you to achieve it. Did you have small, reasonable steps? Were there lots of options to get you where you were going? What kind of reinforcers or rewards did you get along the way?

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**15. Make a Plan for Change with the Child and a Professional**

Foster and adoptive parents have many resources available to them. You can call on the child welfare worker, a clinical social worker, psychologist, counselor and many other professionals. Be ready to reach out for the help that you and the child need.

Can you think of a time when a professional has helped a family make positive changes?

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**16. Other effective discipline techniques:**

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## Choosing Discipline Techniques to Keep Children Safe and Meet Needs

**Jenny**, age 6, was placed in foster care three months ago after she was physically abused by her mother's boyfriend. Jenny's mother says that she loves Jenny and wants her home. She continues to live with the boyfriend, who also beat her when she tried to protect Jenny. Jenny's birth father lives in Utah with his family and volunteered to give up his rights to Jenny. Jenny has no other family resources.

Jenny has been living with the Nelson family for three months. The Nelsons have a twelve-year-old daughter, Sandra, a ten-year-old son, Jeff, and a beloved and old family dog, Rusty. Jenny is doing well in first grade.

### **Jenny's challenging behaviors:**

- ◆ Jenny expresses many fears: she doesn't want to be touched, is afraid of baths, strangers, and the stairs, and screams when she sees someone with a lit cigarette.
- ◆ She also disobeys or ignores many of the foster family's rules, e.g., won't wash her hands before meals or help clear the table after dinner.

### **Recent behaviors:**

- ◆ Jenny has begun hitting the family dog, mostly when she thinks no one is watching.
- ◆ She has begun using profanity, especially in front of friends of Sandra and Jeff. She yelled "suck my dick" at Mrs. Nelson yesterday.



# Discipline Methods Worksheet

Child's challenging behavior (what the child says or does)

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1. The child's behavior might be expressing this feeling(s)

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or need ( i.e. physical survival, safety, love and belonging, self-esteem, making dreams come true.)

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because:

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2. As the parent, I am feeling:

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because:

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3. Child's behavior needs to be managed or changed because:

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4. Child's behavior needs to change to:

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5. Discipline techniques that would be harmful or not teach the child healthy ways to meet needs or manage feelings identified in Question 1 include:

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6. Discipline techniques that I can use to help teach this child healthy ways to get his or her needs met:

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## Identity and Culture – Important Definitions

<b>Identity</b>	Identity is who you are based on characteristics such as race, ethnic background, religion, primary roles and responsibilities, and gender.
<b>Self-concept</b>	How we feel about our identity. It includes our sense of being loveable, capable, worthwhile, and responsible.
<b>Connections</b>	The important ties we have to people, values, beliefs, ideas, places, and things.
<b>Culture</b>	The way of life of a people.



## Merrilee's Case\*

Merrilee lived with her birth mother until Merrilee was 16 months old. During Merrilee's first year, her mother had been reported for neglect. It was not too serious, and Merrilee remained in the home. When Merrilee was 14 months old, her mother gave birth to a baby boy and after that, began to neglect her more seriously. Merrilee was placed in foster care while her baby brother remained with her mother. Later he, too, was placed in foster care although in a different home.

When Merrilee came into foster care, the agency staff felt that it would be too confusing for her to see her birth mother. The worker recommended an "adjustment period" for both mother and child with no visits. After this initial adjustment period, both Merrilee and her birth mother seemed to have "adjusted" so well to the separation that both the mother and worker were reluctant to initiate contact between the two. The mother relinquished her rights after six months, having never seen Merrilee again.

Merrilee was a bright and precocious child who became a valued member of the foster family. The foster family wanted to adopt Merrilee; however, the agency was reluctant to allow this. They opposed foster parent adoption in general. In addition, they were concerned about confidentiality because the foster parents knew who the birth mother was; however, the foster parents had had an application in for some time to adopt an infant. Soon after Merrilee's placement with the foster family, an infant boy became available for adoption through a private agency. This boy was placed for adoption with the foster parents, and another adoptive family was sought for Merrilee.

An adoptive family who lived 350 miles away was selected. The initial visit was arranged so that the adoptive family would come and pick up Merrilee at the social services building and take her for an all-day outing. They planned to return her to the social services building so that her worker could take her to her foster home for her last night there. The following day the foster mother was to bring her into the agency; the adoptive family would then take her to their home. There was no plan for the foster and adoptive parents to meet.

This first visit, an all-day outing, went very well, as first visits frequently do. The adoptive family asked Merrilee if she would like to spend the night with them and she said yes. They called the caseworker who agreed with the change in plan. The following morning, the adoptive parents brought Merrilee back to the agency to say her final good-bye to her foster mother. Her foster father, who was at work and who knew that he would be upset by the separation, said his "good-byes" to Merrilee over the phone. The worker took her from the room with her adoptive parents to a room down the hall. Her foster mother was waiting there to give Merrilee her belongings and to say good-bye. Merrilee then returned to the room where her adoptive parents were waiting.

\* From, "Helping Children When They Must Move" by Vera Fahlberg, M.D., in **PROJECT CRAFT: Training in the Adoption of Children with Special Needs**. Ann Arbor: University of Michigan School of Social Work, 1980, p. VI-16-18.

The adoptive parents changed Merrilee's name so that she could feel as if she were having a "fresh start" in her new family. Merrilee had long, naturally curly hair. Her foster mother had frequently brushed Merrilee's hair. She did this as a way of being physically close and nurturing with Merrilee. She also used this as a way to raise Merrilee's self-esteem by commenting what beautiful hair she had and how pretty she was. The adoptive mother didn't know this history and suggested that Merrilee have her hair cut, "like your older sister's hair." Merrilee agreed.

I met Merrilee when she was four-and-a-half years old. At that time, she was constantly fighting control battles with her mother. For example, she was not to leave the yard without permission. Merrilee didn't sneak out of the yard; instead, she would sit perched on the fence until she was sure her mother was looking out of the kitchen window. Then, she would go over the fence. If she were asked to do something such as pick up her toys, it never quite got done.

In some respects she seemed overly competent, never asking for help. Merrilee had trouble sitting in a comfortable fashion on her parents' laps. She couldn't cuddle. She was prone to many fears, but the most prominent one was her fear of strangers. Whenever the family had company, Merrilee would become alternately hyperactive and clingy, demanding a lot of attention.



## Identifying Underlying Messages

<b>Things that Happened to Merrilee</b>	<b>Possible Unintentional Message to Merrilee</b>
1. Foster care placement soon after birth of brother.	
2. No contact with mother soon after placement or ever again.	
3. No contact with brother ever.	
4. Placement of a baby boy with foster parents soon before Merrilee's adoptive placement.	
5. Merrilee learned to trust and love foster parents and then had to move.	
6. The moving plan of one pre-placement visit.	

<b>Things that Happened to Merrilee</b>	<b>Possible Unintentional Message to Merrilee</b>
7. No return to foster home after initial visit.	
8. Lack of direct contact with foster father for good-byes.	
9. Lack of contact between foster and adoptive parents.	
10. Change of name at age two-and-a-half.	
11. Cutting of hair.	
12. Lack of contact of any type (no pictures, letters or direct contact) with foster parents after move.	

## The Role of Foster Parents in Transitioning Children and Youth from Foster Care

Foster parents contribute to successful transitions of children and youth from foster care.

Moving from a foster home is often emotionally difficult for the child or youth. They need emotional support. When children and youth leave foster homes it can also be very difficult for the foster parents, their families and their friends. However, since the goal of foster care is reunification, it is the healthy foster family who must be willing to take the responsibility to help children manage their emotions during a move, as well as manage their own challenges.

When a child is returning home, or moving to an adoptive home, the foster parents:

- ◆ Talk with the child or youth about the specific plans.
- ◆ Involve the child and the child's parents or prospective adoptive parents in planning how the move will occur.
- ◆ Prepare the child or youth for all the steps of the move.
- ◆ Explain the details of any court appearances during the transition time.
- ◆ Communicate with the caseworker and parents about how the child or youth is handling the upcoming move.
- ◆ Communicate with the child's parents or prospective adoptive parents about how the child or youth is handling the upcoming move.
- ◆ Plan a way to honor the child or celebrate the time the child was with the foster family.
- ◆ Update the child's Life Book to include information and pictures involved with the move.
- ◆ Be prepared for grieving behaviors in the child or youth, as well as in the foster family.
- ◆ Honor and celebrate going home.



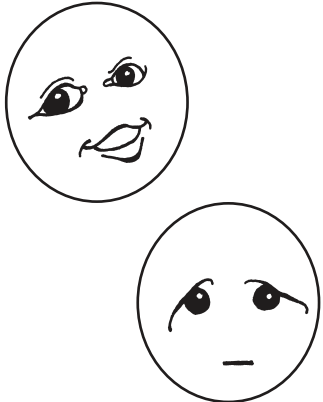
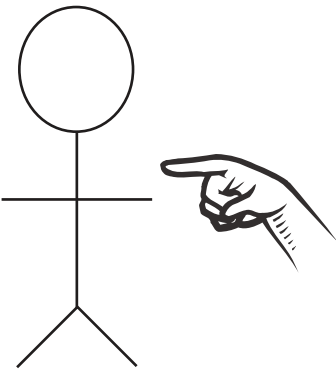

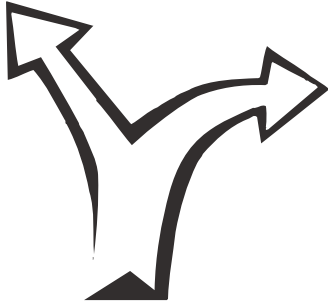
## Definitions – Disruption and Dissolution in Foster Care and Adoption

**Disruption:** an unplanned move from one foster or adoptive home to another out-of-home situation.

**Dissolution:** the legal act of ending an adoption, much like a divorce ends a marriage.



# Stages of a Disruption or Dissolution

<p><b>Diminishing Pleasure</b></p> 	<p><b>Child is seen as blame for all</b></p> 	<p><b>Going Public</b></p> 
<p><b>Turning Point</b></p> 	<p><b>Ultimatum</b></p> <div data-bbox="652 1066 966 1495"><p>You will...</p><hr/><hr/><hr/><hr/><hr/><hr/><hr/><hr/></div> <div data-bbox="673 1302 933 1480"><p>You won't...</p><hr/><hr/><hr/><hr/><hr/><hr/><hr/><hr/></div>	

<b>Stage</b>	<b>Description</b>
1. Diminishing Pleasure	Where in the early months of placement the negatives begin to outweigh the positives.
2. Child is Seen as the Problem for Everything	When anxiety creates a time of child's "acting out," and the child is seen as the cause of all problems.
3. Going Public	When talking about the problem to family and friends increases the bad feelings.
4. Turning Point	When a bad or critical incident or crisis occurs that almost is "the last straw."
5. The Deadline or Ultimatum	When parents set a timeframe for improvement, or give the threat, "One more time..."
6. The Decision to Disrupt	When the child fails to meet the expectations for the deadline, violates the conditions established and has to go.

\* Adapted from Patridge, S., Hornby, H., McDonald, T. (1986). **Learning from Adoption Disruption: Insights for Practice**. Portland, ME: University of Southern Maine, p. 61-68.



# Characteristics of the Family System\*

The family system has five major characteristics: boundaries, rules, roles, power distribution among family members, and communication patterns.

## Boundaries

Families have boundaries, or “invisible lines,” that define who or what is inside the family and who or what is outside. Very closed families have locked gates, high fences, unlisted numbers, not much contact with the outside world, and lots of secrets. Very open families have frequent guests, unlocked doors, and lots of “differences” among family members.

Are your family boundaries able to accept a new member who will come also with a child welfare worker, birth family, etc.?

## Rules

Over time, families develop rules about how they relate to each other and the outside world. The rules are developed by the family to ensure stability and keep the family distinct from other families.

What are your family rules about food, about dress, and about who can be friends of the family?

Which rules are openly discussed and can be changed? What happens if a rule is broken?

How will a new person adjust to your family rules? What will happen if that person cannot adjust?

## Roles

Every family works out things like who does the chores, who handles the money, and who cares for the children. The way we fulfill our roles depends upon our culture, our own upbringing, our lifestyle, and family composition. In some cultures, for example, older children are responsible for taking care of the younger children in their families.

Each member of a family has a unique role. There is only one mother, wife, husband, father, partner, oldest child, youngest child, only male or oldest male. What is it like to be the mother, father, youngest child, only female, etc., in a family?

How will the addition of a new child change the roles of family members? What new role will be ascribed to the new child?

\* Adapted from “Understanding Families” by Jo Ann Allen (1982) in **Adoption of Children with Special Needs: A Curriculum for the Training of Adoption Workers**. Athens, GA: The Office of Continuing Social Work Education, School of Social Work, University of Georgia, p. 12-18

## **Decision Making**

All families have ways of making decisions and resolving conflicts. Some families strive for equality and let everyone participate in making decisions. Other families allow only one family member to make the “major decisions.”

It is important that the family have an orderly pattern of power distribution – one that is reliable but flexible enough to change if necessary.

How are decisions made in your family?

What decisions will need to be made regarding your foster care or adoption experience?

Who primarily will be involved in making those decisions? How will the other family members feel about the way these decisions are made and what decisions are made?

## **Communication Patterns**

You can't not communicate. All behavior says something. Even silence is a message. A family works out its roles, rules, power, and boundaries through communication.

Families develop unique communication patterns. In some, messages are clear; people let you know where they stand and can express themselves relatively freely. In others, individuals cannot freely express their needs and there is little congruence in what people feel, say, and do.

There are all kinds of workable and effective communication and relationship patterns. Culture and ethnicity have a lot to do with how families express themselves. What is important is that the communication patterns of the family matches that of the child.

Would a new child in your family understand how your family expresses feelings, gives instructions or does different activities?

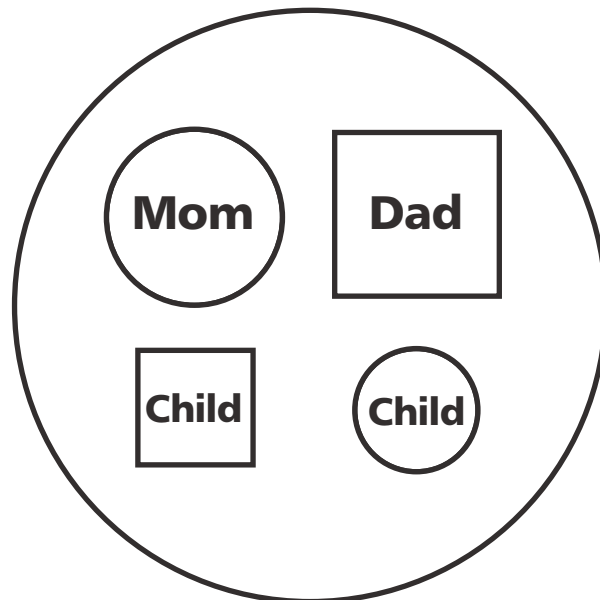
## Creating an EcoMap\*

The purpose of the EcoMap is to:

- ◆ Help your family consider the “quality” of your environment;
- ◆ Look at the balance you have between stress and support;
- ◆ Look at ways these stresses and supports might be affected by your decision to foster or adopt;
- ◆ Assess your strengths to foster or adopt;
- ◆ Assess the demands and needs of a new child upon your family's balance;
- ◆ Use as a tool with the child welfare worker to assess if foster care or adoption is right for your family and, if so, what child with what kind of background, personality, family ties, etc., would best fit into your family's “world;” and
- ◆ Develop preventive strategies to reduce the stresses and increase your support, if you decide to foster or adopt.

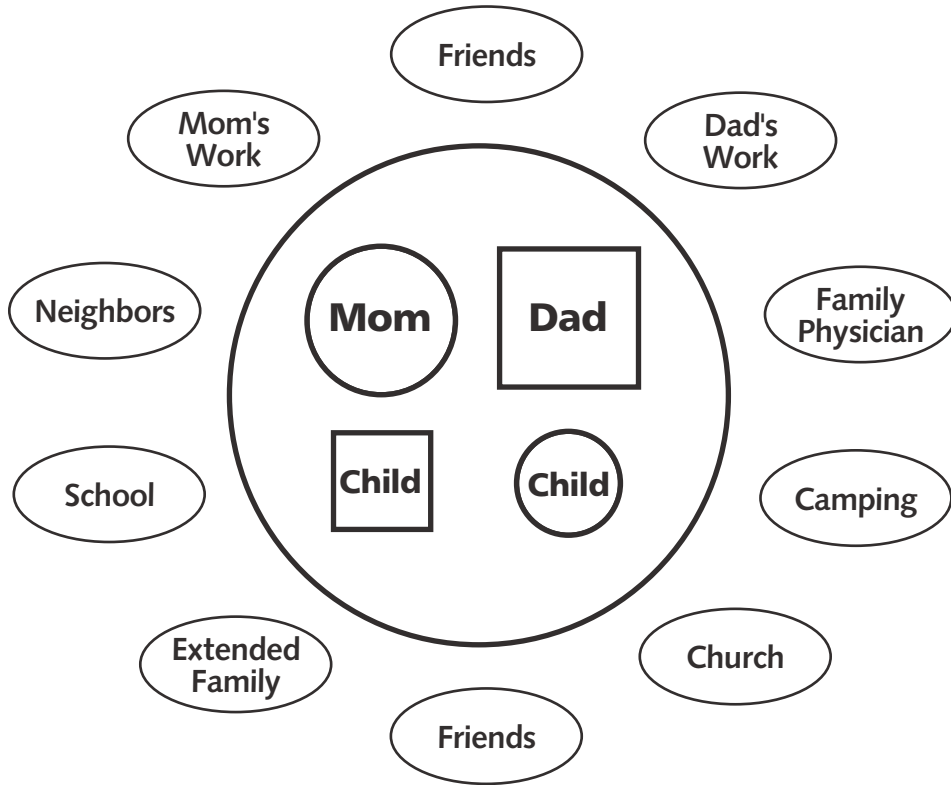
Steps for drawing the EcoMap:

1. In a large circle put the names of all the people who live in your household (pets are allowed, too). Males are represented by squares and females by circles. Pets are usually represented by triangles.



\* From Ann Hartman, **Finding Families: An Ecological Approach to Family Assessment in Adoption**, Sage Publications, Inc., Beverly Hills/London, p. 35., 1979.

2. Next, draw circles outside your family circle which indicate the systems that give and take away energy. Label the other circles for different aspects of your family life. For example, a “Work” circle, a “School” circle, “Religion,” “Recreation,” “Extended Family,” “Friends,” “Neighbors,” “Health Care,” “Hobbies,” etc. Here is an example.



3. For each of these circles and for the people in your family, draw one of three kinds of lines from a person in the circle to the circle with which that person has a relationship. The three types of lines are:

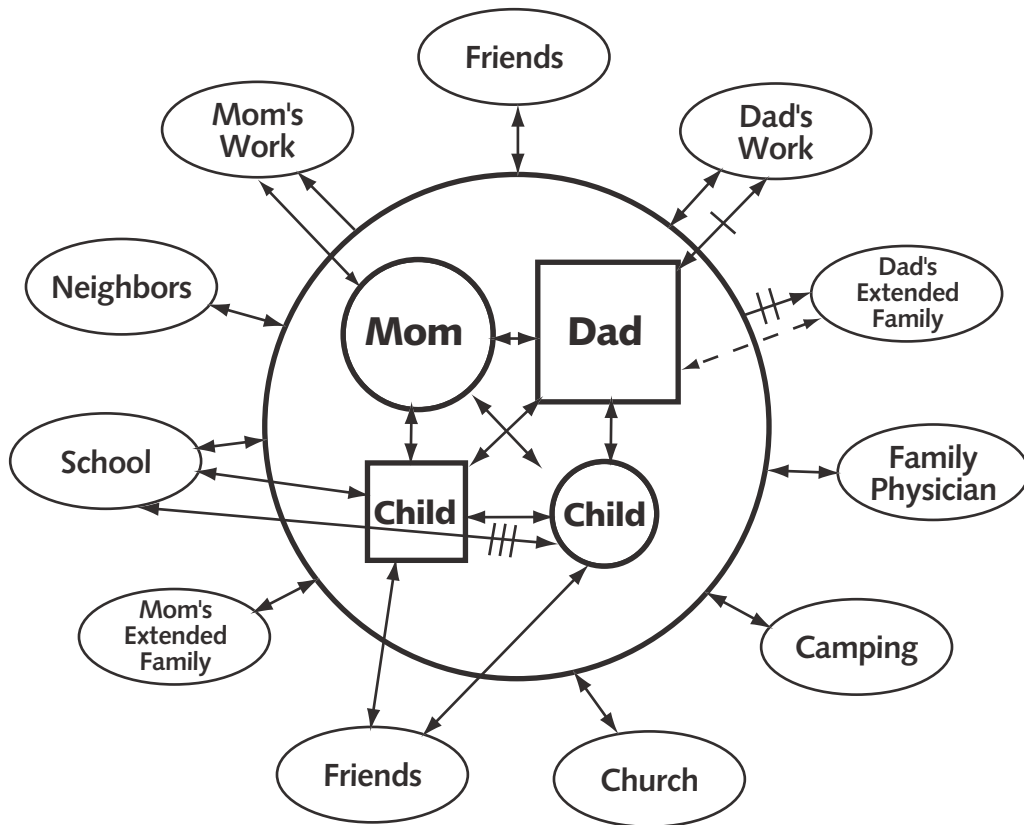
- ◆ Solid for a strong relationship or energy flow. \_\_\_\_\_
- ◆ Heavy solid for an especially strong relationship. =
- ◆ Dotted for a weak relationship. - - - - -
- ◆ Hash marks for a difficult relationship. #####

If the outside circle affects the family as a whole, draw the line to the family.

4. If you both give and receive energy from the area, draw arrows in both directions. If the giving or receiving is one-way, draw the arrow in the appropriate direction.



Following is an example:



5. Discuss your EcoMap, considering the following issues:

- ◆ How would you describe most of your relationships? Are they strong, weak, or difficult?
- ◆ How will the strong relationships support your involvement in foster care or adoption?
- ◆ How will the weak or difficult relationships, or those having significant stress, be weakened or made more difficult through foster care or adoption?
- ◆ How will a new child affect each family member – especially in terms of sharing time, space, and resources?
- ◆ How will the extended family and friends react to the new child?
- ◆ What potential problems do you see?
- ◆ What resources do you have to deal with these problems?
- ◆ What new resources or supports could you develop to help you deal with these problems?
- ◆ Children come to you with their own EcoMaps. Will you be prepared to talk with the child welfare worker about how a child's EcoMap fits together with yours?

## Creating an EcoMap – Worksheet

Name: \_\_\_\_\_

On this page, please create your own EcoMap.

**Name:** \_\_\_\_\_

Now that you have completed your EcoMap, consider the following questions:

- 1. What are at least five additional “systems” you know would likely be added to your EcoMap with the addition of a child through foster care or adoption? List them here:

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- 2. For each of the above systems, which would be a source of energy and which would require energy?

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- 3. Which of your sources of energy might be negatively affected by your becoming a foster or adoptive family?

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- 4. Which of your sources of energy might remain strong should you become a foster or adoptive family?

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## From Foster Parent to Adoptive Parent: Attachment vs. Commitment

