

The Role of Foster Parents

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The Scenario

- There is a foster home with a 13 month old and a 13 year old.
- Capacity has changed and one child must be moved.
- Which child should be moved?





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Why We Waited

Child In Transition
Child Traumatized
Child Grieving
Results and assessments not reliable
Child won't be here long enough
Everything will repair just being in a new environment



Why We Can't Wait

The cost of waiting.....

- Emotional development may be stunted
- Attachment styles are becoming established
- Relationship Templates developing: Who am I Who are you
 - How does the world work
- Waiting could mean months or years
- · Physiologic effects of early trauma unresolved



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Challenges for Resource Parents that affect caring for children

Then and Now.....

Behavior Understanding effects of Trauma Childcare Transitions Birth parents and Visitation Loss and Grief Being part of the TEAM

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Policies & Procedures

1st best placement RFA Support for relatives Enhanced services Mentoring Training Bridges

1st Best Placement

 Using an alternative placement program that pays family foster homes to keep beds available on an emergent basis to care for children while their needs are assessed and other appropriate foster family home placements can be identified.

Nest homes Way-stations



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Resource Family
Approval
&
Support for relatives



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The challenge of having enough homes for the number of children in care demands appropriate, timely and effective interventions to help children develop emotional, social and life skills.

Sleep Regulation Grief Attachment Aggression Depression Anxiety Fear Language Safety





Training

Grossmont College Foster Adoptive Kinship Care Program TIPS - 12 hour Trauma Informed Pre-Service Trauma effects on children Appropriate positive discipline Development Working with the CWS system

Mentoring

Experienced Resource parents can be assigned or available to support and mentor families that require help navigating the system or need resources.



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Childcare

YMCA Emergency Child Care Bridge Program Eligible families may receive assistance with locating and payment of childcare providers.

Respite

Maxim provides up to 100 hours of respite care per quarter for eligible families.

Options for Recovery

Recruits, trains, and supports resource families who would like to specialize in caring children 0-60 months who are substance exposed and/or HIV positive.



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A National Look at the Use of Congregate Care in Child Welfare U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau

Children Age 12 and Younger Child development theory, federal legislation, and best practice confirm what we know intuitively—children should be placed in settings that are developmentally appropriate and least restrictive. For young children, particularly those age 12 and under, it is particularly important for their developmental needs to be met in family-like settings. As such, we would expect to see very low percentages of children age 12 and under in a congregate care setting. Where there are children in these settings, we would expect them to spend short amounts of time in that setting—time for assessment and stabilization that readies them for transition to permanency or family foster care. Children 12 and younger comprised an unexpectedly high percentage (31 percent) of children who experienced a congregate care setting. This concerning percentage of younger children in congregate care underscores the need for careful examination of this special group of children. Use of congregate care varies by state, and additional information on state practices, policies, and state-specific definitions of congregate care would provide important missing information. Twenty-one states had percentages of children 12 and younger in congregate care that were above the national average of 31 percent. States ranged from 6 to 69 percent of the 2008 cohort who were age 12 or younger and who experienced a congregate care episode. Targeted interventions, coupled with finer data collection, may be needed to justify placement into these group settings.

10th Annual Early Childhood Mental Health Conference, San Diego, CA

