Permanence & Rules of Engagement

Who Wouldn’t Want a Family?

Georgia Permanency Roundtables Phase II
April & May 2009

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Paradigm Shift:
A change from one way of thinking to another. It's a revolution, a transformation, a sort of metamorphosis. It just does not happen, but rather it is driven by agents of change.

(Kuhn, 1970)
I. Introduction

• “Penny – or a dime - for your thoughts”
• Adages & proverbs
• Who did you bring with you today? (Your own real case – Handout #1 “My Child Worksheet”)

10
Topics For This Conversation

• Permanence – Who Needs it and What is it Anyway?
  – Goals, Objectives & Values of GA Roundtables Project
  – Connection to CFSR & PIP

• Engagement – the Critical First Step
  – Youth, Parents (incl Fathers), Kin, Caregivers
  – Tools (incl Accurint Search)

• Some Barriers on the Path to Permanence

• Permanence for
  – Adolescents
  – Siblings
  – Medically Fragile Children

• Applying What we are Learning
  – Documenting, Accurint, SHINES
  – Practice Roundtable
Learning Objectives for Today
(*Handout #2, Learning Objectives)

• **Engagement**
  - Gain better understanding of concepts & skills related to family engagement
  - Identify specific skills & behaviors related to engagement that can be implemented in practice, with particular attention to fathers & older youth

• **Permanence**
  - Gain better understanding of developmental aspects and lifelong benefits of permanence
  - Identify specific skills and behaviors related to permanence that can be implemented in practice with particular attention to older youth, sibling groups and children with special needs

• **Pre-Test** (Handout # 3 – Pre & Post Test – **10**)
CASE PRACTICE: WORKING WITH CHILDREN, YOUTH, AND FAMILIES

VALUES

No family who needs and wants help to keep their children safe will be left without the help it needs.

SAFETY
PERMANENCY
WELL-BEING

CORE FUNCTIONS

QUALITY SCREENING

SAFE AND SUCCESSFUL TRANSITION FROM DFCS

ENGAGE FAMILIES

BUILD TEAMS

DEVELOP ASSESSMENTS

INDIVIDUALIZED PLANNING & IMPLEMENTATION

CONTINUOUS REVIEW AND ADAPTATION

No child we come into contact with will be left to struggle alone with abuse or neglect.

VALUES

Every child we come into contact with will get the help(s) he needs to be healthy and achieve his/her full educational and developmental potential.

VALUES

No child in our care will leave us without a caring, committed, permanent family.

Connection to CFSR & PIP (*Handout #4)
Permanence:
What is It? – 5
Youth Aging Out of Foster Care
Where are they?

- More likely to live in the least “family-like” settings
- Many have “goal” of “emancipation”
- More than 20,000 do “emancipate” each year
- 12-22% become homeless from day one

From: AFCARS Data, and studies by Courtney, Wulczyn, Hislop, Casey
Educational Outcomes

• 30-35% receive Special education as compared to 11% of general population (Jackson & Mueller 2005)

• One study (Courtney) found that 37% had not finished high school nor a GED

• Used GED to complete education at 6 times the rate of general population (NW Alumni Study)

• Experienced 7 or more school changes

• Only 1.8% completed a bachelors degree
Other Outcomes

- Less likely to be employed
- Poverty level incomes
- No health insurance
- More likely to have children of marriage
- Post traumatic stress rate double war veterans
- Serious untreated health conditions
- Higher rate of becoming victims of crime, or engaging in criminal activity – over 270,000 American prisoners were once in foster care
Key Characteristics of Youth who Never Attain Permanency

- Demographics?
- Other youth-related characteristics?
- Placement or familial factors?
- What is the single most important factor that determines whether a youth attains permanency?
- Why is this good news?
We Can, and We Must, Do Better
Grocery Sack Exercise

• What would you pack? - 10
Permanence: What is it? A Professional Perspective

“The highest level of physical, legal and emotional safety and security that can be attained for each individual child or youth within the context of a family relationship.” Lauren Frey & 1st Stuart Permanency Convening
Permanency: A Youth Perspective

They’re always talking about this Permanency stuff. You know social workers...lawyers...always using these big social work terms to talk about simple things. One day one of them finally described what she meant by permanency.

After I listened to her description, which was the first time anyone ever told me what the term meant, I said, “Oh, that’s what you mean? Yeah, I want permanency in my life. I don’t think I ever had that! When can I get it?”
WHAT is Permanence?
A Youth Perspective

- PERMANENCE is NOT a place ~
- Permanency is a state of mind, *not a placement*;
- Permanence is having the feeling that you are *connected*,
- That there is someone *in the middle of the night* who will answer your *collect* phone call
- Or *miss you* when you don’t show up
Permanence: What is it?  
My working definition

- **A parent or two** – A parenting relationship with at least one adult  
- **Intent** – a mutual understanding that this relationship is intended to last forever  
- **Unconditional commitment** by the adult(s)  
- **Participation** of all parties in the relationship  
- **Lifelong and mutual** support and involvement  
- **Intimacy & Belonging** – “My son”, “my mom”  
- **Status** How the world views your relationships
Creating Permanence: Engagement is the Critical First Step
Engagement – Questions to Consider

• What is family engagement & why is it important?
• Some reasons it can be so difficult to do
• How do I promote family engagement?
• What are some examples of positive family engagement?
• Special considerations for engaging fathers
• Special considerations for engaging youth
What is Family Engagement

- COOPERATION AND COLLABORATION vs COMPLIANCE AND COLLABORATION (Thanks Judge Fitzgerald!)
- Family engagement is a **process** and an **outcome**.
- An ongoing worker/family/youth relationship that results in the accomplishment of agreed upon goals.
- How do you know it when you see it? (elements?)
  - Personalize – our own experiences in the Dr office or our child’s school - 5
Why is Engagement So Important?

(Handout #6 – Why Engagement?)
Why is it so hard?

• Family Issues
• Cultural Issues
• Our issues (Arm crossing - 5)
  – Habits
  – Life experiences
  – Training, expertise
  – Values, belief systems
  – Systemic pressures
  – Fear for children’s safety
  – Others?
Grief, Loss & Trauma at the Heart of the Engagement

- Understand the loss parents, children, foster parents, other family members and social workers experience
- Understand the stages of grief
- Understand the Sad>>>Mad>>>Bad dynamic
- Understand the impact of trauma* on feelings and behavior
- Develop strategies for recognizing and coping with trauma, grief, anger and depression

(*Handouts 7, 8, 9, 10 from NCTSN)
It’s one of the worst situations a parent can imagine

“Brilliant!! I’ve been waiting for an opportunity to change my behavior patterns, and now that my back is up against the wall, I will roll up my sleeves and get busy. Just tell me where and how to begin; I can’t wait to follow orders.”  Marianne Berry, Ph.D. Kansas
Family History and Patterns

- Problems accepting responsibility
- Patterns of interaction that include aggressiveness or passivity
- Inconsistent parenting practices
- Family history of abuse or neglect
- Problem of access to basic necessities
- Behavior associated with D&A, DV, mental illness, cognitive problems, chronic health care problems
Cultural Challenges to Engagement

– Eye contact story
– Concept of “Shared Parenting” – What does this mean to each of us and how can we allow ourselves to be part of a family’s “shared parenting” resources?
– 10
• Exchange Student Activity - 10
• What do you need to know **BEFORE** you go?
• What do you hope the **host will know** about you?
• What kinds of **supports** will help you most?
When do I engage families?

- Report of abuse and neglect
- Assessment
- Case planning
- Case coordination
- Case management
- Visits: Every Child/Every Month
- The court review process
- Aftercare planning
- Case closure
Essential Components of Family Engagement

- Honesty & Clarity
- Safety, well-being, permanence
- Respectful and mutual relationships
- Responsiveness to family priorities
- Identify everyone’s strengths & roles
- Shared responsibility for success
- Evidence-informed practice—Using “what works”
  - Success increases engagement
Promoting Effective Engagement

• Tuning into self and others
• Focused listening
• Being clear and specific - **5**
• Clarifying roles and purpose
• Respect
• Clear, immediate and accurate responses to family questions
• Honest/Dependability

(*Handout #11)
Clarify Roles and Responsibilities:
Who has power to make decisions?
Who has resources to offer?

- Agency
- Courts
- Parents
- Youth
- Other Kin
- Other Service Providers
- Family/Youth’s own support network
Examples of Effective Engagement: Empower Family to Take the Lead

Begin with parent’s stated goals
If there are other goals you feel are important, confirm with the parent

Ask the parent to prioritize the goals (use visioning exercise, (*Handout 12) as a tool to support this work)

Develop a plan that includes both goals and activities related to each goal

Help the parent use both her own and the child’s strengths to address each goal

Establish timelines for achieving each goal

Use a parallel process with the youth/child’s goals. **Spend lots of time listening!**
Examples of Engagement: Conversation Starters

• What would you say are your family’s strengths / resources?
• What would you define as your largest challenge at the moment?
• What kinds of support have you found helpful at other times in your life?
• What has not worked before? (so we won’t make the same mistakes).
Identifying Strengths and Protective Factors
(*Handout 13)

• Demonstrated patterns of positive problem-solving in other life areas
• Ability to form healthy relationships
• Hobbies, interests, demonstrates ability to care for someone (or thing) other than self
• Non-maltreating parent or other adult who is willing to help
• Engagement in community of faith or other supportive network
Engaging Youth

- Think about the time & place
- Talk about goals, hopes & dreams.
- Present thoughts and ideas for them to consider in their media.
- Give them multiple venues for self expression (writing, music, art, sports)
- Help the youth understand the options and process – every step of the way
- Give youth opportunities to interact with peers in similar situations
- Don’t make assumptions
- Ask questions
- LISTEN
Basic Elements of Good communication – Do Words Matter? (Sex Ed Memory – 5)

- **Listen with respect** – Hear what is beyond the words
- Position yourself at eye level and make eye contact
- **Listen with respect**
- Pay attention to body language
- Repeat actions and messages of empowerment
- **Listen with respect**
- Allow for disagreement without triggering oppositional behavior
- Find areas of agreement
- **Listen with respect**
- Don’t expect full buy-in
- Keep at it – engagement is not a “one-shot” deal
- **Did I mention, Listen with respect?**
Fathers Matter

- Children with Involved Fathers are safer, have more resources for permanence and improved wellbeing
- Who/What makes a “good father”? - 10
- What are my biases?
- Is there a continuum of possibilities for father engagement that are constructive?

("Handouts 14 & 15 Engaging Fathers"

“Son, The way I see it, you have two choices – you can sit on the bench or you can get into the game and be a player.”)
Engaging Fathers: Special Challenges & Opportunities—Fathers say “I am not involved because...”

The system is biased against men - stereotypes of “deadbeat dad”

System only cares about financial involvement (i.e. child support)

Lack of information, notice about DHR involvement, meetings, court hearings

I want no contact with Mom

I do not believe the child is mine

I fear incarceration for nonsupport

I want no contact with her current partner

I did not know about this situation
Helping Dads Negotiate the System

One researcher found: "caseworkers anticipat[ing] that their ‘investment’ in working with birthmothers will yield a better ‘return’ than working with fathers’"

How do you react to that statement?

- Help him understand roles – yours, his and other key participants
- Get his perspective and show an interest in his point-of-view (even if you don’t agree)
- Use a strengths based approach
- Report his information accurately
- Respect his right to disagree
- Include his extended family as resource
- Keep him informed about the process
- Help him identify his needs and resources
GA TOOLS for Search & Documentation

• ACCURINT SEARCH
  – Karen Robinson - Andrew Stimson - Mark Loizzo - Accurint Solutions

• SHINES
  (Handout #22 – Shines screen shots)
Permanence:
WHO NEEDS IT?
With Special Consideration of:
Older Youth (Adolescents)
Siblings Groups
Medically Fragile Children
Permanence is . . . .

- PERMANENCE IS FOR NOW - What does permanence mean for young people preparing to leave care?
- PERMANENCE IS FOR THE FUTURE: What might it mean in 5, 10 or 20 years?
- PERMANENCE IS FOR ALL YOUTH: Including those who will need adult residential care, or with a permanency plan of Emancipation
- PERMANENCE CAN BE CREATED:
Creating a Context – Bringing it Home IS PERMANENCE FOR ME? - 10

• Over 18?
• Competent?
• Why need a family?
• My own permanent family – Under one roof?
WHY is Permanence Important for all Children and Youth?

• Brain development
• Social-Emotional Development
• Educational attainment
• Financial stability
• Better health and mental health outcomes
• Foster care does eventually end, our need for being connected to others never does
Five Stories - 10

Tammi

JD

Renee

Lou

Peggy

45
WHO are the youth in need of permanence?

- Can you think of any specific youth you are currently working with (in your county or region) who have no need for permanence?
WHEN is permanence important in children’s lives?

• PERMANENCE IS FOR NOW – Understanding permanence in the context of child development - What does permanence mean young people preparing to leave care?
Understand Child Development

- Permanence impacts achievement of developmental milestones
- Understanding developmental needs underscores urgency of achieving permanence
- Permanence is critical for children with special needs, too

(Handout 16: Child Development - 10)
Key Developmental Tasks: The early years

- Develop trust
- Enhance attachment
- Resolve abandonment fears
- Healthy brain development
- Set the tone for future relationships
Key Developmental Tasks: The School-Age Years

• Belonging
• Mastery and Achievement
• Beginning of Abstract Thinking
Key Developmental Tasks: Adolescents

- Identity experimentation
- Fitting in
- Questioning everything
- Value development, moral code
- Separation/attachment cycle revisited
Identity Development – Who Am I?

- Adolescents need to “try out” and “try on” different identities
- They also need a base to return to
- Going into foster care, or moving from one home to another can interrupt this process
Effective IL/Transitional Services will promote & support permanence

• Establish/Re-establish connections
  – Family
  – Mentors
  – Caregivers

• Build Skills
  – Life competencies
  – Vocational
  – Educational

• Provide supportive networks
  – Culture
  – Social supports
  – Resources

**Involve and support youths’ participation in their own decisions**

(Freundlich & Brockman, 2004; Massinga & Pecora, 2004)
The sibling relationship is unique. It is longer lasting and more influential than any other, including those with parents, spouse or children.

- Siblings can be comforters, caretakers, role models, motivators, faithful allies and best friends.
- There is growing awareness that the interplay between siblings also exerts a powerful life-long force.
- Children acquire social skills from their relationships with siblings, for example, through games and conversations with each other, young children learn such skills as helping, sharing and cooperating.
Sibling Relationships Change but remain important over a Lifetime

• In early childhood, siblings are constant companions and playmates - the sibling relationship influences social and cognitive learning.
• During adolescence, once-close siblings may temporarily weaken their ties as they exert their individuality and independence. This is to be expected.
• In adulthood, the needs of their families usually take precedence over the relationship with each other.
• The sibling bond comes full circle in old age, when parents & spouse may be gone and their children are raising families. They once again become each other’s companions, sometimes living together for the remainder of their lives.
Sibling Experience for Children in Foster Care

• There are over 500,000 children in foster care in the US.

• 55-69% have siblings, 30% have 4 or more siblings.

• 61% of children with siblings are placed with at least one sibling; but less than half with all their siblings.
Sibling Experience for Children in Foster Care

• For children whose parents are unable to meet their needs, the sibling bond may become stronger.
• The sibling bond is especially strong when siblings are neglected by parents and an older sibling becomes a caregiver or when the siblings must mutually depend on each other to get their needs met.
• Children in these families learn to depend on each other to cope with their common life experiences.
Sibling Experience for Children in Foster Care

- Separating siblings in foster care or through adoption adds to their emotional burden.
- Studies have shown that even **babies experience depression** when they are separated from their brothers and sisters.
- Brothers and sisters separated in foster care experience trauma, anger and an extreme sense of loss. Research suggests that **separating siblings may make it difficult for them to begin a healing process, form attachments and develop a healthy self-image**.
Sibling Experience for Children in Foster Care

• Children form sibling attachments with their foster siblings and these ties are important to respect

• How can these ties be maintained?
Tips and Tools for Social Workers
Don’t Believe the Myths

• The “parentified child” should be separated from younger siblings in order to give him/her a chance to be a child (Sue Ann Story)
• Brothers and sisters should be separated to prevent sibling rivalry. (Monique story)
• A child with special needs should be placed separately from siblings in order to receive more focused attention (Adam story)
Supporting and Retaining Families for Siblings

- Families receive all financial support they are entitled to
- Support individual needs of each child & sibling group as a whole
- Parents don’t have to make multiple trips to doctors, therapists, birth family visits etc.
- Community members & businesses donate or discount vans, heavy duty washing machines, paper goods in bulk, bunk beds, etc.
When Siblings are Separated

• Write sibling visitation into case plans and provide supports families need to make those visits happen
• Monthly visits for an hour are not sufficient.
• Educate families about importance of sibling bonds and their roles in maintaining them
• When one or some of a sibling group are adopted, pursue open adoption
Youth With Disabilities in Foster Care:

“A Double Dose of Different*”

(*Handout 18)
Children in foster care are at higher risk for and experience disabling conditions at a higher rate than children in the general population.

- Children with an identified disability are more than three times more likely to be maltreated than other children (Sullivan & Knutson, 2000).

- Children in foster care are likely to suffer developmental delays, educational disruption, and physical and mental health problems (Barbell & Freundlich, 2001). More than half of the children in foster care have moderate to severe mental health issues.
Youth with Disabilities in Foster Care: What do they need?

• Permanent Family Connections and Caring Adults
• A Voice in the Decisions that Impact their Lives

“Who wouldn’t want a family?

Who wouldn’t want to have a family to spend holidays with, to call when things don’t go right, or to call when things are great to celebrate? Who wouldn’t want that?”
Youth with Disabilities in Foster Care Have a Voice and Need to be Heard

• These children, by virtue of their disability, are often invisible to the systems and courts that serve them.
How do youth with severe special needs exercise their voice?

• **What are this child/youth’s strengths?**
• **What is unique or special young person?**
• **How does this youth communicate his or her wants and needs?**
• **What kinds of activities does this young person find most enjoyable or interesting?**
• **What kinds of activities does this young person find most difficult or stressful?**
• **Do we spend time WITH him or her, not just hearing ABOUT him or her? Do we keep a photo on hand?**
If we understand the importance of permanence – why can’t we achieve it for all of our children and youth?

“FAMILIES ARE NOWHERE”
Many Doors to Permanency

• Youth are **reunified** safely
• Youth are **adopted**
• Youth **permanently** reside with legal guardians
• Youth are connected to **kinship or customary adoption networks**

• Youth are safely placed in another planned alternative permanent living arrangement which is closely reviewed for appropriateness every six months (APPLA)
PERMANENCE

Getting to Permanence: What the Evidence Tells us & Applying What we are Learning –
HOW - Do we help move children, youth and families towards permanence?

• Get “P.O’ed” (Nancy Salyers) EVERYONE needs to be “Permanency Oriented”

• Think about how these messages get communicated

• Keep a sense of URGENCY

• Think about WHO to include

• Use team meetings as a tool in planning and decision making
Supporting Permanency Through Meaningful Case Manager/Child Visits (from GA Every Child Every Month Training):

Cycle of Conducting Purposeful and Meaningful Caseworker/Child Visits:

1. Preparation
2. Engagement (The Visit)
3. Debrief
4. Next Steps
Every Child, Every Month Training
Promoting Placement Stability and Permanency through Caseworker/Child Visits

- **Preparation**
  - Schedule Visit in Advance
  - Review Case Note
  - Identify Concerns and Visit Priorities
  - Prepare a Visit Agenda

- **Engagement (The Visit)**
  - Remember Keys to Engagement – Genuineness, Empathy & Respect
  - Establish Purpose of Visit
  - Give Undivided/Individual Attention (Alone Time) to review progress or challenges since last visit
  - Gathering Information – Using Age/Developmentally Appropriate Interviewing Techniques to Assess Safety, Permanency and/or Well-Being
Every Child, Every Month Training
Promoting Placement Stability and Permanency through Caseworker/Child Visits

• **Debrief**
  – Gather and Analyze Information
  – Recap Visit and Review with child/youth and caregiver
  – Engage Child/Youth in Planning for Next Steps
  – Recap Shared Agreements on Next Steps and Specific Arrangements for Next Visit

• **Next Steps**
  – Supervisory Review and Consultation
  – Document Thoroughly
  – Case Management – case plan revisions, service coordination, follow ups, etc.
  – Prepare For Next Visit
HOW to create and support Permanence? Strategies . . .

- Teaching Importance of Permanence
- Utilizing Evidence-based interventions
- Teaming/Multidisciplinary Permanency Action Teams (use Family Team Meetings – FTMs)
- Concurrent Planning
- Individual Permanency Plans
- Family Engagement – Allowing the Process to be driven by the youth, family, caregivers & support network
Thinking Through the Domains: Issues to Consider

- Safety
- Subsistence/Financial
- Emotional/Psychological
- Medical
- Educational/Vocational
- Social/Relationships

(Handouts 19 & 20 – Domains Worksheet & Resources – 10 after the last domain)
Safety

• Are there current safety risks?
  – What were the safety issues that brought the child into care?
  – What is different now?

• How are the issues raised going to be addressed as we move to permanence?
  – Parenting Toolkit
  – Stress Management
  – Problem Solving
  – Crisis Management
Subsistence/Financial

- “If you Give a Man a Fish”
  - learning how to access community resources
  - Systems outside of DHR
- Emergency Funds?
- Immediate needs
- Ongoing needs – Does parent have money management skills?
- Benefits explored/secured?
Medical

• Are all health needs of parent/caregiver and child identified?
  – Has the child had a complete, comprehensive assessment?
    • Nutrition/Allergies
    • Physiological basis for behaviors?
  – Does parent/caregiver have information about child’s health needs, care activities, immunizations, medications, etc
• Does the family have Medical coverage?
• Does the family have providers?
  – Will the child have to change providers
  – Work on transition between providers
• Help parent develop partnerships with service providers (Self Advocacy)
Emotional/Psychological

- Grief, Loss, Trauma
- Anger
- Stress
- How to live in a family
- Changing Roles within the family
- Therapy, counseling, support groups, other mental health services* should be established before reunification can occur

* (Refer back to NCTSN Handouts 7,8,9,10, esp #9, Questions to ask MH providers)
Behavorial Health

• Are all behavioral health needs ~ of parent/caregiver and child ~ identified?
  – Has there been a thorough assessment?
    • Trauma Assessment?
    • Medications thoroughly assessed?
      – Does parent have information about child’s experience with behavioral health services? Therapies? Medications?

• Does the family have Medical coverage that includes behavioral health benefits?

• Does the family have providers?
  – Will the child have to change providers
  – Work on transition between providers

• Help parent develop partnerships with service providers (Self Advocacy)
Educational/Vocational

• How and where will educational needs be met?
  – Does child have to change schools?

• Are there special educational needs?
  – Does parent understand process and rights?

• What are the parent’s educational/vocational needs?

• Help parent develop partnerships with service providers (Self-advocacy)
Social & Family Relationships

• Have opportunities for social interaction and respite – for parent/caregiver & child - been addressed?
  – Recreational outlets?
  – Community of faith?
• How will relationships with father, extended family, foster family be managed?
• Have routine family management issues been addressed?
  – House rules, Discipline

 10
Steps for Creating An Individual Permanency Plan

• Preparation
• Gathering a Team
• Developing a Plan
• Investigating Resources
• On-going Follow up
NEW YEAR’S RESOLUTION ACTIVITY

• Write out a resolution (i.e. I will start exercising 3 x a week) on one card
• Write out your reason/motivation (i.e. so I can get in shape for my high school reunion) on a second card
Question #1 – How did you feel about being handed a resolution that was not your own?

Question #2 – Was the reason given good enough to motivate you to try to accomplish the goal on the resolution card? What were your feelings about this?
PREPARATION:
FAMILY FINDING & SEARCH TOOLS

• Record Review (*see next slide*)
• Accurint (*wasn’t that a great demo!*)
• High School Yearbooks, Church records
• Family Ancestry Chart
• Internet Sites for locating persons

(*see Handout 20 -Resources*)
Preparation: Case Record Review

- Review the youth’s entire case record
- Look for anyone who has expressed concern for the youth - see Handout 21 Review a Case Record -
- Third party reviewers can be helpful in the process of uncovering these possible connections as case workers who have been assigned the case may inadvertently miss connections that may be more visible to a fresh eye.
PREPARATION: Involving Youth in Permanency Efforts

- Youth must be involved in the process and must have input (*Person Centered Planning is great resource)
- Many youth do want to permanence, even if they initially say no – “when I was 16 I would have said no . . . .” (Handout 23 “When a Teen Says NO”)
- Youth can be involved in recruitment efforts
- Youth can identify persons with whom they feel they have connections
- “Ask them what they want”
CONNECTEDNESS CHART (Handout 24)
Gathering a Team: Who Needs to Be Included as Part of the Team?

(See Handout 25 “Describe the Youth” - 10)

- Where does this young person SPEND TIME?
- Where did he EVER spend time?
- Who is CONNECTED to him – even if they don’t know it?
- Who has EXPERTISE related to his needs?
- Who has a NETWORK related to his interests, talents, strengths?
- How far can we take “One Church One Child” model?
The Meeting (*Handout 26 “Meeting Tips”)

- Getting people together
- Input from people who cannot attend
- Anticipating challenges
  - Disagreements
  - Unrealistic expectations
  - Too low expectations
  - Baggage/ “invisible” issues
  - Unavailable or non-existent resources
Creating A Plan

• Start Broad, **get specific**
• **Empower** the youth to take the lead
• Address a range of issues **concurrently**
• Danger of all plans sounding alike after you have done several: Ensure that plan is individually tailored to **this child/youth**
• Build in **flexibility**
• Be **specific** and **concrete** –
  – WHO will do WHAT by WHEN
  – Plan the next meeting

• **Make a copy of the plan for all participants before the end of the meeting**

(*Handout 27 Creating an Individual Permanency Plan)
Supporting Permanency

• Mentoring
• Life Books (*Handout 28)
• Person Centered Planning
• Family Team Meetings
• Visits
• Digital Storytelling, Journaling, creative approaches
• Appreciative Inquiry
• Family to Family Approaches
• Youth Empowerment Approaches
Investigating Resources  (Handout #20)

• Identify both formal and informal resources
  – Use resources the youth is familiar with as a starting point
• Formal resources – agencies, providers
  – Applications, enrollment, waiting period
  – Eligibility, fees, alternatives
• Informal resources
  – Current foster family
  – Extended family
  – Peers, social network of the youth
  – Community of faith
KEY QUESTIONS (Handout 29 - 10)

• What will it take?
• What can we try again that has been tried before?
• What can we do differently?
• What can we do concurrently?
• How can we engage the youth in developing & implementing the plan?
Case Scenarios – 30-45

• What concerns do I have?
• What additional information do I need?
• Who should be included in the meeting?
• What might permanency look like for this youth?
• How can I be an advocate for this youth and work to make permanence happen

(Use Handouts #25 “Describe the Child”, #27 “Creating a Plan”, #29 “The Five Key Questions”, #30 “Case Scenarios” and #31 “Permanency Comparison Chart” as tools)
Jordan

- Fourteen-year-old Jordan has been in care for 2 years. He was originally removed due to abuse – he was beaten by his mother’s boyfriend, and lost partial vision in one eye. His mother is no longer with this boyfriend. She has just started her first job at the age of 28. Returning to his mother’s home will involve changing schools, and Jordan is angry about this, so is acting out. Jordan is on 6 different psychotropic meds to control his anger & behavior.
Zaire

• Zaire, now 15, two years ago came home and found his mother dead from an asthma attack/heart attack. He had lived from cars to shelters with his mother and younger sister Gia (9). After placement in care with his sister, their father, whom they had not developed a relationship with, was located and they have been visiting for more than 6 months. Like his mother, Zaire has asthma. They will move in with his father, his wife and two preschool children, one of whom is autistic.
Eleven-year-old Marisa, came to Georgia from Puerto Rico when she was four and lived with her grandmother. Her mother lived in So. Jersey but was not involved in her care. At age 5 her grandmother signed her over to foster care and returned to PR. Marisa has speech delays and lives in a group home. There is no identified permanency resource for Marisa.
Kevin and Kenya

- Two siblings with significant developmental delays, Kevin & Kenya, ages 2 and 3 are being considered for adoption by the family who adopted their three older siblings, ages 6, 7 and 10. The children were removed as a result of neglect due to their mother’s substance abuse addiction.
Maya and PJ

- Maya is a 16-year-old Caucasian female with a 6-month-old infant, PJ. Maya is Developmentally disabled. In care for 12 years, has continued some contact with birth family over time. Current foster family wants to adopt PJ but not Maya. Maya wants to live independently with her baby.
Rachelle

• Rachelle is a 13 year old African American female and has been in care for 9 years. She is in special education, has behavior challenges, and has a therapist who does not believe she should move from the residential facility. She was recently seen by a relative in another state who wishes to care for her. There are differences in homestudy requirements and paternal TPR requirements in this state.
Follow up: Provide On-Going Support

- Ensure that each step of the plan is being implemented
- Check back, revise, modify from time to time as needed
- Post-permanency services must be put in place to support any permanent placement
I always thought that I was adoptable even though I was 16 years old, but my social worker kept saying I was too old every time I asked him about it. I worked after-school at this hardware store and the guy who owned it was so kind to me. He was such a good guy and I always talked to him. I never really told him I was in foster care, but one day when we got to talking, he started to ask me a lot of questions about my family and then about life in foster care. I invited him to my case conference because my social worker said I could invite anyone who I wanted to, and at that point he asked about adoption. I was shocked at first, but it made sense. We finalized my adoption three months ago. That day was the happiest day of my life.

- Former foster youth
Summary of Key Points

- **No child should ever grow up in foster care** ~ Permanency is vital for healthy development and well-being in all children and youth.
- **Permanency is possible and achievable** for all Georgia children and youth.
- **Meaningful, effective engagement** of the youth, parents, caregivers and other significant people is the key to successful permanency outcomes.
- **Using a team approach improves** engagement opportunities and permanency outcomes.
- **There are skills, strategies and specific casework behaviors** that, when consistently applied, can enhance practice and improve outcomes.

Time for the Post-Test/Evaluation! (*Handout 3 - 10)