



WHO AM I? WHY FAMILY REALLY MATTERS

The most enriching environment for children is one in which they are loved and cared about no matter what. Too often mental health and child welfare workers meet children who have journeyed from foster home to foster home, from hospital to residential program, and in and out of detention facilities. As they travel through various homes and institutions, they become displaced children without family, home, or neighborhood. Often, no information is available regarding the location or investment of family members. Initial tragedies in their lives are compounded by the experiences that no one cares and that there is nowhere to go that is safe, permanent, and accepting. These experiences result in suicide, drug use, and delinquency. Children and care providers feel frustrated and helpless to break the cycle.

At Catholic Community Services (CCS) of Western Washington Family Preservation, we believe that children need their families and families need their children. We serve children who are unable to live successfully at home, school, or in the community and are considered "failures" of many service systems. As we provide wraparound services, we strive to enrich children's lives through rigorous family searches to reconnect children with their families.

We see powerful positive results in the lives of children as they are introduced to people who have inherent connections to them, including grandmothers, uncles, and even second cousins or fellow tribal members. Youth gain a sense of belonging, meaning, and value, while families regain dignity and hope through meeting the needs of their long lost children. These reconnections



result in sustainable behavioral and placement successes. For many youth, reuniting with family has a calming impact that subsequently reduces distress and disruptive behaviors. These enduring, unconditional living situations and relationships are often successful for those who had been thought to be unable to live in the community.

Scope of the Problem

According to the US Census (1996), most children (over 98%) live with family. However, the Center for Policy Analysis (2001) reports that over 600,000 children were in foster care that same year. Unfortunately, foster care too often becomes a long-term solution. Research reports that one tenth of children remain in care for over 7.4 years, while one quarter are in care for 4.3 or more years, and those who are adopted spend an average of four to six years in care (Bandow, 1999). Many children experience disruption, chaos and rejection through multiple placements. According to the National Center for Policy Analysis (2001), 23 percent of children in foster care have two placements, 20 percent have three to five placements, and seven percent have over seven placements.

Adoptions are also less permanent than we would hope. Over 14 percent of adoptions of children with special needs fail (Groze, 1986).

Children facing behavioral challenges may be placed in residential treatment facilities. According to the U.S. Surgeon General (1999), residential treatment centers are highly restrictive, costly, and are not always proven effective in treating children with mental health problems. The Report on Mental Health (Surgeon

General, 1999) also lists concerns related to this form of care, including “failure to learn behavior needed in the community,” and “difficulty reentering the family or even abandonment by the family.”

Family Story

Charlie is a 12-year-old African American boy who was addicted to cocaine at birth and immediately placed in foster care because relatives were not deemed appropriate for placement. After living in 10 different homes, Charlie was placed with an African American woman, Serena, when he was eight. Serena cared for him for four years. Serena considered adopting Charlie, but hesitated because of her father’s failing health. Serena anticipated her father would need to live with her in the near future.

As Serena’s attention was diverted to her father, Charlie began having more difficulty controlling anger outbursts at home, school, and in the community. He threw objects, hit and kicked others, and ran into traffic. He was at risk for encounters with police and for being placed in a more restrictive setting. Charlie was referred for wraparound services to preserve his placement.

Charlie’s team included his social worker, appropriate professionals, Serena, and her family and friends. The team agreed to attempt to contact Charlie’s natural family to expand his options. Team members reported that Charlie had no known family, though they supported searching for his kin.

Child protection records noted that Charlie’s grandmother lived in a rural community in Georgia. Upon hearing about Charlie, she hoped to meet him. She also explained that his mother was in the local jail. The team sent a message to Charlie’s mother, saying that she might be of help to him. Charlie’s mother wrote to him, saying that she thought about him daily and that she loved him.

Charlie’s natural family lived close together in a small community. His aunt and grandmother had both been licensed childcare providers. The team supported Charlie in developing relationships with his relatives after learning of their interest in Charlie and of their connections in the community.

Upon Charlie’s arrival in Georgia, the entire community greeted him warmly. He immediately befriended an uncle and felt at home with him. Charlie poured over family albums and learned about his African

American ancestors who had lived with great courage in the South.

Following this visit, Charlie’s grandmother came to Washington to meet his foster mother, Serena. Charlie’s grandmother met with the local team and gained their confidence as a potential support for Charlie. Charlie continued to live with Serena while developing relationships in Georgia.

Two teams were developed for Charlie—one local Washington team and one which included his extended family. The local team met the foster home needs, including respite provided by Serena’s sister and friends. The larger team looked at long-term options for Charlie, including concurrent plans that offered alternative family placements in Georgia and Washington. The team developed plans for two scenarios in anticipation that one might be more effective than others:

- In the first scenario, Charlie would live with extended family and take holidays and other planned visits with Serena
- In the second scenario, Charlie’s grandmother or another family member would move to Washington to offer support to both Serena and Charlie.

Charlie continues to live with Serena and regularly visits his extended family. This allows for the success of whichever option best suits the family’s strengths and needs.

Family Search, Reunification, and Support Strategies

Consistent with wraparound practice, Catholic Community Services begins by identifying the needs and strengths of the child and family. Unmet needs for children in crisis often stem from loneliness and longing for family or from families experiencing isolation, financial hardship, and other challenges. Hence, we focus on identifying family members who can offer the child and family support and assistance. Resource exploration focuses on identifying relatives that could provide meaningful family involvement with a child or family in need.

Family Search. The most valuable source of information about family is often the child. Children know names and general locations of family members who care about them. Other relatives (even those unable to have contact with the child) have critical information about who else can help. Child welfare records contain

contact information for family members who have long been disconnected from the child. Ancestry charts are compiled for maternal and paternal families. Once a family member is located, an initial phone call focuses on gathering information about the strengths of the family member, information about other family, and carefully providing information to the family member about the strengths and general needs of the child. A follow up face-to-face contact is planned to further develop supportive connections.

Family Meeting. Initial meetings between a child and family who have been disconnected mostly involve informal conversations that establish a sense of identity for the child. Often family members tell stories about the family and the child. In most cases, this is a natural process that needs little facilitation. Follow-up meetings begin to reflect a child and family team meeting style, and the family actively assists in developing options to meet the child's needs.

Planning for Multiple Scenarios. Team planning creates multiple contingencies that maximize the potential for success. Each option is pursued concurrently to ensure that one plan will lead to a successful outcome.

Outcomes

Reunification efforts have resulted in stable placements and reduction of risk for most children served. The Family Access to Stabilization Team (FAST) provides intensive supports for up to 3 months for children at risk. Problems youth encounter included multiple suicide attempts, assaults with weapons, and drug use. Of 248 youth served in one year, all were in dangerous circumstances upon referral, homeless, or at risk of admission to a psychiatric hospital or residential treatment to keep them safe. FAST provided services for an average of 50 days. Upon discharge, 81% of youth lived with relatives, and 19% lived in therapeutic foster care or living independently. Thirty-seven percent of the youth received traditional mental health services upon discharge. Ten percent received intensive wraparound services. As sustainable placement options were realized, risk factors that brought them into intensive services declined.

Summary

Children deserve to have a sense of self. In our efforts to provide services, we often inadvertently disconnect a child from a critical part of self—family. Assisting a child in gaining a sense of belonging, heritage, and security provides enrichment that exists far beyond the involvement of any service system. Family connections allow for sustainable relationships and for potential solutions to emotional and behavioral needs, even placement needs for children. Concurrent planning creates flexibility in responding to the needs of a child and family to maximize success. The children we serve will have many challenges to face throughout their lives. It is our hope that they also have lasting relationships with people who are there to call, to stay with, or to write, people who care about them, no matter what. Who better than family?

References

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Barbara Boisvert; Gina Brimner; Kevin Campbell; Don Koenig; John Rose, M.D.; Mary StoneSmith *The authors administer Family Preservation within Catholic Community Services of Western Washington. It is funded by mental health and child welfare to provide ongoing community based services, including therapeutic foster care and family reunification, to keep children safe and in their homes. Dr. Rose is Medical Director of Family Preservation.*