



Parents' Voices:

Out-of-Home Care Reforms in Queensland

(September 2017)



Family
Inclusion
Network

**BRISBANE
PARTNERSHIPS**

addressing local
poverty and inequality

Parents' Voices: Out-of-Home Care Reforms in Queensland

Acknowledgements

We thank the parents who shared their experiences to inform this report. We acknowledge their time and commitment to sharing personal experiences to contribute to systemic change for all families in Queensland.

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1. Introduction

This report and its recommendations have been prepared by the Brisbane Partnerships (a partnership between Kyabra, Micah Projects, the Community Living Association and Jabiru) and the Family Inclusion Network SEQ. We welcome the opportunity to work with the Department of Communities, Child Safety and Disability Services, in their review of out-of-home care for children, with this contribution on the views of birth parents.

We share common goals with the Department, in particular, support for the Carmody Commission of Inquiry recommendations that, where appropriate, “parents should receive the support and guidance they need to keep their children safe” and the corresponding drive to reduce the overall number of children in Out-of-Home care (Queensland Government, 2013). We further support the principle that children in care maintain connection with their family and culture.

An important and logical extension of these principles is that, when children are placed in care, wherever possible, they should be reunited with their family in the shortest possible time.

We welcome the Department’s commitment to engaging with all those involved in the child safety system (Department of Communities, Child Safety and Disability Services Strategic Plan 2017 – 2021). The Strategic Plan defines an approach which listens to the voices of customers/citizens. The Stronger Families vision and goals describe a protection system which is customer centric, respectful of family, community and culture and empowers young people and their families. We strongly support the inclusion of parents’ voices and perspectives to promote children’s sense of belonging and connectedness.

Practitioners and research specialists agree: “Hearing parents’ opinions helps child protection policy makers and practitioners to understand their impact on families and develop strategies for practice improvement. It is a vital mechanism for continuous improvement and ongoing quality assurance” (Tilbury, C. 2017).

This is a summary of parents’ views as we have heard them, plus the views of other parents from across Australia in various research projects over the past seven years. (FIN, 2010-2011, FIN 2011-12, FIN Jan 2013, FIN Parent Café 2016, Hinton, T. 2013, Ivec, M. 2013, Lindley, B & Martin, R. 2002, Qld Aboriginal and Torres Strait Islander Child Protection Peak Ltd June 2016, Ross, N, Cocks, J, Johston, L. & Stoker, L. 2017; Social Action Research Centre, 2013, Tilbury, C 2017, Department of Justice and Attorney General, 2016).

The surveys of parents on which this analysis relies, may be questioned for various reasons. The sample size is generally small. Parents who participate may have a particular grievance. Or alternatively, as they are generally identified via a range of NGOs that provide family support, it might be assumed that they are already

engaged and parents who don't have the same support or resources to engage are not represented (Ross, N. et al 2017). It is also true that parents are scared of speaking out for fear of upsetting the authorities and possible retribution or, as parents told us in the Brisbane Partnerships/FIN survey, parents found it very painful and traumatic reliving their experience of their child being taken away. They feel ashamed.

However, despite these limitations, there are remarkable similarities in the views of all parents we have surveyed plus the research and surveys of those listed above. Their views are outlined below as well as recommendations relating to reforms by the Department in out-of-home care.

2. Parent’s experience of having children in out-of-home care is influenced by their whole experience of the Child Protection System

From first contact with child protection, parents report they did not understand the system and how to interact within it. They experienced feelings of powerlessness, an inability to influence events and that their views were not taken into account or valued. Parents spoke about shame immobilising them. This has inevitably influenced their experience after their children have been taken into care. The impact of the whole process must be taken into account when considering how best to reunite children with their birth families.

In various pieces of research (Ross et al, 2017, and Hinton, 2013) parents have expressed:

- **The difficulty of finding help and the resources they needed to support their family before they have been “notified”.** Parents talked about reaching out for help but not finding the right service fit for their families or that their children were removed when they asked for help. Distrust of the system acts as a barrier for parents who struggle to find support and even greater resistance for parents who were in care themselves. Other barriers to maintaining family stability included: lack of housing, support and protection from domestic violence, not being able to access useful parenting supports, lack of access to mental health and drug and alcohol services that allow them to continue to carry out their parenting role. These issues were reiterated in the QATSIPP Knowledge Circles (2017) where participants wanted: “making it easier for clients to connect with programs and services”; “receiving services earlier before investigation”, “greater emergency assistance and flexible funding, with sensible open perimeters”.

- **At the assessment stage.** They experience their powerlessness and exclusion at the earliest stage of their contact with Child Safety (Ross et al, 2017):
 - “Only seeing the bad things” at assessment
 - Feeling judged and stigmatized when children are taken away, leading to social isolation
 - Lack of understanding of what they needed to do to get their children back
 - Limited knowledge about laws and policies and difficulties of accessing this, not knowing their rights
 - Assessments being undertaken based on historic factors, such as other children being in care, or parents having OOHC experiences themselves. They want current assessments based on their present circumstances. Parents stated clearly “we can, and do change”.

- And always “damned if you do, damned if you don’t” - if you react emotionally (you’re judged as mentally unstable) or not emotional enough (judged as cold and uncaring).
- **Family Group Meetings and Case Planning:** This experience was often described as disempowering, not being listened to; having to agree with a case plan without understanding it all or being able to afford to do it all; no help with implementing the plan. They wanted “Child Safety to listen to us and act as they said they would. For Child Safety to make promises and not break them. For Child Safety not to be so judgmental”. “During a family group meeting a number of issues were discussed which were all addressed yet the children were taken 2 days before Christmas while my support agency was on the Christmas break so I had no support.”
- **In Court:** They experienced powerlessness, didn’t know their legal rights, no legal support, “had no-one to advocate for me”, hearsay evidence being used, the adversarial nature of the court system – confusing, disempowering, intimidating, no knowledge of how to appeal a decision. The Hunter Region survey established parents found it difficult, if not impossible, to participate in the legal and administrative processes that occurred after their children had been removed. “The processes were often restrictive, exclusive and featured complicated practices, protocols and language” “(In the Children’s Court, you’re guilty and then you’ve got to prove yourself innocent” (Ross, et al p.23). The Queensland Department of Justice evaluation of child protection reforms (Department of Justice and Attorney General, 2016) reported high degrees of variation between court experiences for parents, that they have limited access to legal aid and if a matter proceeds to hearing, there is often inadequate legal aid funding to provide legal representation. Parents were intimidated by the environment, the complexity of court documents and reported experiencing difficulties accessing documents to support their cases. Data from the Department of Justice’s file review, indicated that parents experience socio-economic barriers and are likely to have experienced mental health issues, domestic and family violence or drug or alcohol dependency issues (Department of Justice and Attorney General, 2016).

Parents’ ability to respond to child protection concerns are influenced by internal and external resources, such as personal resilience, having someone to support and believe in their capacity as a parent, being assisted to access services to help them address concerns in a timely way. These factors are going to become even more important for parents as new permanency measures are considered.

3. Parents' experiences when their children are taken into care

Below is a summary of responses to our survey, supplemented and supported by the recent survey in the Hunter Region (Ross et al, 2017). It is organised according to four of the five outcome domains for children in the out-of-home care system:

3.1 Safe and Nurtured

Our survey of parents, indicated that only one parent who had a good relationship with the foster carer, seemed confident that her children were safe and nurtured. Others said:

“There are people in my son’s life and I do not know who they are and what they are doing with my son... The Department really needs to realise that parents should be informed of every detail...how can they possibly think that we don’t have a right to know?!!! These are our children!” Another was concerned about bruises and wanted “more time (with them) to make the boys feel safer and more secure”.

3.2 Achieving

The parents wanted to know a lot more about their children’s achievements – at school, in sport and other areas of their life. They wanted to be involved, to share in celebrations and successes. They said they wanted to see school reports, to be invited to school meetings, like parent’s meetings, be included in Mother’s Day celebrations at day care, see their children’s arts and crafts.

Some didn’t even know which school their child was attending. Others said they were concerned that their child had had to move school, away from their friends and known learning environments, and even in some cases away from siblings.

3.3 Healthy

In our recent survey, they said:

- They want to see doctor’s reports.
- One suggested a “communication book and a food diary”.
- Another: “verbal conversations would be the easiest way to share information”

They want to know everything about their child’s health - “if he has been in hospital or is sick”, “the reason for bruises on my child”, “knowing that teeth are getting checkups”, “knowing eating habits and routines”; making sure they eat healthy food; see if they are eating fruit and vegies. “Being informed of everything as I am still the parent!”

One parent reported using freedom of information as a mechanism to find out about their children's health and wellbeing. Parents expressed that they would like to provide information about children's health and medications and be advised when health or other types of crises occurred for their children (FIN Parent Café, 2016).

Foster carers can provide current and relevant information for parents but this requires the establishment of a trusting relationship facilitated by skilled Child Safety officers who value and prioritise this work.

3.4 Resilient

Parents expressed concerns that their children were not receiving appropriate therapeutic support required whilst in care.

Parents who have reunified with their children wanted access to better support, post care for the whole family as parents reported significant changes to family dynamics and children's behaviours, but were reticent to ask for help for fear of losing their children again.

3.5 Connected

The most detailed responses from parents in our survey were in relation to maintaining connection with their child:

Seven out of the ten parents we surveyed, did not feel connected with their child although they very much wanted to be.

Supervised contact visits were described as difficult –

- “too short”,
- “not regular enough”,
- “not in a good environment”,
- “supervisor taking over”,
- “not having the proper family see the child, especially siblings”,
- “seeing siblings...not encouraged or supported”
- “Not kept up to date and regularly informed about my child”
- “Want unlimited time with child on special occasions – Christmas, Easter, birthdays...if there are no serious safety concerns”.

If children are to be safely returned to their parents, the building of the birth family relationships is critical. The parents expressed this view in many different ways.

In response to a question about what makes them feel connected, they said:

“Cuddling them, having food with them, painting and craft with them”

“When we have contact with him we would like time to be able to concentrate on our son, and not have the Department arrange for other services to be present during contact”

“More contact, knowing more on how they are health wise and knowing their behaviour.”

“I would like to see them more, like to take them to the park. Currently seeing them at the Child Safety office.”

“I would like ...to be kept informed and updated about everything regarding my child. I would also like to have more contact with my child.”

Wanted most:

“the child is available during important family occasions to participate”.

“The Department should be encouraging him to spend time with me, not alienating him from me. Foster carers also need to encourage contact with biological parents.”

In the Hunter Region study, these issues were explored further (Ross, et al, pp 40-43). There is a lack of time during contact arrangements to maintain and build relationships. They said it did not give them time to practice parenting skills. Parents describe difficulties and developmental issues that children experience as a result of disrupted attachments. Parents experienced contact visits and phone calls as a series of appointments or events, insufficient to build the parent-child relationship.

“Almost all parents expressed deep concern about the well-being of their children and very much wanted to continue to have, or develop, warm and loving relationships with them” (Ibid p. 42).

Parents talked about the importance of good quality contact visits, allowing time for parents and children to re-establish family connections in family friendly environments, the valued role of good Child Safety support officers and the difference made by workers who treated their family with dignity.

Carers also have an important role to play. They need to know if the child they are caring for, has siblings and to be able to link with others carers to find times that suited all the children and the family for contact visits. They need to know important things like a sibling’s birthday.

As the Hunter Region report recommends, there is a need for “refocusing on family relationships – not just family contact”. “Parents asked for a move away from a formulaic and rigid approach, towards a child and family-centred approach”. Instead of “family contact” there could be a refocus on “family relationships”, a process that honours and respects the ongoing parenting role and the importance of multiple positive relationships, including parents and their children, parents and service providers and parents and OOHC staff.” This aim is congruent with the OOHC outcomes framework aspirations where children have quality relationships with family, friends and significant people in their lives.

In our survey, we asked parents about their hopes and dreams for the future

They want to be part of the solution. They want their child home. This was the way they would definitely know their child was safe and nurtured, achieving, healthy, connected with family and culture. But they also recognised they would need some continued help from support services – some of it involved re-establishing relations with their children. In some cases they wanted disability support, help with child’s tantrums, education for the kids with mum. For others the support they needed was very practical - “a house, food, clothes”.

Hunter Valley parents also asked for more support once the child is returned – “you do guilt-parent because you’ve missed so much of their lives.” “Parents worried about things going well and tried to prepare, and talked about feeling distressed, upset and exhausted after time with their children.”

“Hopefully I will have my three boys back. I’ve got housing, got a support worker, got a mental health support person, done everything!”

What will assist reunification?

A key concern in all the research involving parents whose children have been taken into care, was the poor relationships they experienced with government workers and the lack of relationship or poor relationship they experienced with the child’s carer. All of this they felt led to the gradual erosion of their relationship with their child.

In the Hunter Region study:

“Parents had lots of ideas about how they wanted to be involved...at school, in sporting activities, at concerts and special events. They wanted to be included in decisions, like choice of schools and preschools. They wanted children to be raised in the religion of their family background and to be by their sides during medical procedures and hospital stays. When this occurred, they were often very grateful and described going to great lengths to maintain tenuous relationships with carers and agencies to ensure it continued” (Ross et al, p. 13).

In a Tasmanian study, parents reported similar issues:

“Parents with children in the out-of-home care system reported a range of difficulties in maintaining positive relationships with their children. These included constant changes to access arrangements, including cancellations of access visits; covering the cost of visits; the way in which visits are managed and supervised; and relationships with their children’s carers. Particularly invisible are the needs of those parents whose children are on long term Orders and their struggles to maintain relationships with their children while dealing with their own grief. Overshadowing these experiences are the concerns parents have about what is happening to their children in the out-of-home care system and how far their children’s needs — both practical and therapeutic — are being met” (Hinton, 2013,p.13).

Parents were able to translate their experiences into suggestions about how to improve the service system and service delivery.

There was a clear consensus about what these changes should be. They included: better engagement and partnership working with parents... and mechanisms to ensure that the voices of parents and their experiences are heard and used in developing and designing policy and services (Ibid).

4. Conclusions

In all surveys of parents involved in the Child Protection Systems there are remarkably similar responses to the issues families with children in the child protection system face in all of the surveys reviewed.

- They want to be part of a “partnership”, part of the “care team” along with the foster parents, the CSOs, the support agencies to make sure their child is safe, achieving, healthy, connected.
- They want this from the very beginning. They want more involvement in important decisions about their children. “They have a lot of knowledge about their children that they want to share with carers and other agencies involved...This included information about current services, such as speech therapy and potentially very important medical history information, such as how a child responded to particular medications” (Ross p.36)
- Parents said they wanted to be part of their child’s world. And this could happen when the parent and carer developed a relationship. In our survey of parents only one foster carer had appeared to develop a good relationship with the birth parent “The carers have listened – the carers tell me how things are going with the boys...open communications, shares photos”. However the relationship of the same mother with another carer of a younger son was not happening. Obviously the skills of individual carers can play a critical role in assisting parents in their relationship with their child in care.
- The Tasmanian Report (Hinton, 2013) that surveyed 47 parents as well as government workers and workers in NGOs said everyone found it difficult to work in partnership. *Where partnering did occur, it was based on individual personalities and their ability to build collaborative relationships. It was not a systemic response.* They were frustrated by the apparent low priority given by child protection to encouraging team work between the carer, birth parents and the departmental officers.

Parent engagement is essential where there is a government commitment to reducing the numbers of children in care and keeping families together and children safe at home.

5. Recommendations

These recommendations are put forward as doubly urgent given the likely passage of the Child Protection Amendment Bill to legislate for two year permanency planning. If the aim of the reforms is primarily to reduce the number of children in Child Protection, then every effort must be made to reunify children safely with their parents.

Recommendation 5.1

We recommend that a key principle in the Department of Communities, Child Safety and Disability Services' "Strengthening Families Protecting Children Framework for Practice" be strongly supported and implemented i.e. that the collaborative assessment and planning framework is used in partnership with children, families and their extended networks... from the first point of contact with a family right through until case closure" (p.1).

We further recommend the continued reinforcement and constant monitoring of this key principle in future audits, evaluations of practice and case reviews.

In particular we note and strongly support the Practice Framework's emphasis on building a constructive relationship with the family from the very beginning and the importance of parents needing to feel respected and included in decision making (pp 18-25).

We further recommend that it be openly acknowledged that the 'care team' for the child should consist of the carer, the government worker and the parent.

Recommendation 5.2

We recommend that it is acknowledged, that parents can and do change and that, if the time a child needs to spend in care is to be minimised and/or not taken permanently into care, the family will need support to implement the case plan with specialised reunification resources provided by community based services immediately after a child is removed.

This support might include access to housing, employment, specialist support for domestic violence, therapeutic support as well as assistance with parenting.

It must be accepted that parents who have had a child permanently removed, frequently and in many cases inevitably do go on to have another child to fill the gap in their lives, and any previously committed reunification resources will act as an investment in early intervention.

Recommendation 5.3

We recommend that the Department establish and appropriately fund a Reunification Program that assists parents to implement the various requirements that will be placed on them in order to have their child returned.

This program should include four elements:

- a) **Intensive family support put into place immediately** after the child is taken into care, to assist with reunification goals.
- b) **A state-wide specialised information and advice service for parents** established in the non-government sector.
- c) **The funding of a non-government organisation in each region who will be responsible for establishing a system of formal advocates to stand alongside and support the parent in specific and important meetings** - family group meeting, court appearances etc. The advocates would be professionals, including practising solicitors, and generic advocates, some, but not all of whom, would have specialist knowledge of child protection issues.
- d) **The funding of the same non-government organisations to support a circle of peer support workers who would work alongside and with the parent and the formal advocates to assist with reunification.** They may be members of self-help groups, or relatives and friends, with previous experience of the child protection system and who can establish a trusting relationship with the parent. *(For more detail on this model see Lindley, B & Martin, R. (2002) Protocol on Advice and Advocacy for Parents (Child Protection), Centre for Family Research, University of Cambridge)*

Recommendation 5.4

We recommend that the Department of Child Safety, develop and implement a trauma informed policy and practice, for working with families to understand and respond to the emotional impacts and consequences of children being removed and reunified – for both child and parent.

This should include an understanding of the impact of inter-generational trauma. Removal of children from biological parents is traumatic for everyone involved. Trauma informed practice is important both in situations where the child is reunified as well as situations where the placement remains permanent (Centre for Advanced Studies in Child Welfare, University of Minnesota (2013)).

Recommendation 5.5

We recommend that, while a child is in care, continued family relationships must be valued and respected and that contact visits must be carried out in a way that these relationships are enhanced.

This should involve:

- a) appropriate contact places that encourage rather than inhibit parent-child interaction;
- b) parent attendance and participation in normal family events such as sporting activities;
- c) foster carers being provided with information about siblings including birthdays and other important information and to be able to coordinate family contact arrangements involving all siblings;
- d) parents being kept informed about the achievements of their child and given opportunities to participate in school and extra-curricular activities;
- e) appropriately trained and sufficient numbers of contact 'supervisors' who are able to facilitate rather than inhibit positive family interactions;
- f) recognition that poverty and poor access to resources might require support for parents with transport to be able to participate.

Recommendation 5.6

We recommend that foster carers are provided with appropriate training to build their capacity to relate, communicate and liaise with parents.

Recommendation 5.7

We support proposals for professional and appropriately paid foster carers who can provide specialist foster care responses for high needs young people. We further recommend that professional foster carers are available to work in an on-going way in partnership with parents who may have an intellectual disability or with a parent in prison.

Recommendation 5.8

We recommend that parents are kept informed about the achievements, health and wellbeing of their children and that KICBOX be considered as one way for parents to share in information about their child.

Recommendation 5.9

We recommend that, in cases involving domestic violence where a child is removed but subsequently reunified with one of the parents, information about the location of the family must not be passed on to the perpetrator of the violence.

Recommendation 5.10

We recommend that, if the children in care are identified as needing therapeutic supports, then they have access to the same therapeutic supports when they are reunified with their family in addition to any support the family may need to build family resilience.

Recommendation 5.11

We recommend and support FIN SEQ's long standing recommendation that the Department of Communities, Child Safety and Disability Services, establish and resource a Parent Advisory Committee, so that the voices of parents who have been in contact with the child protection system and their experiences, are heard and used in developing and designing policy and services.

The members of the Committee would receive prior training in advocacy (eg through the Parent Leadership Training Institute program conducted by FIN SEQ) and would be provided with on-going support through a regional non-government sector organisation experienced in working with peer advocates (see Recommendation 3c above).

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Appendix 1

Appendix 1 to this report is an extract from an international review of parent and family engagement (Ivec 2013 pp 103-110) and summarises a number of proven or promising practices in other jurisdictions to engage parents while their child is in foster care.

Source Ivec, Mary (2013): A necessary engagement: An international review of parent and family engagement in child protection, Social Action and Research Centre, Anglicare Tasmania

United Kingdom

Country	England & Wales
Name	Family Rights Group
Description	Advice and advocacy services
Activities	Advises families involved with child welfare services. Promote policies and practices, including FGC and a support framework for children living with family and carers, so that children and their families have a greater say and influence over decisions-making and services they need or use and more children are raised safely and securely within their families.
Evaluation	Yes — see useful links
Useful links	<p>http://www.frg.org.uk</p> <p>Featherstone, B, O'Dell, L, Tarrant, A, Fraser, C & Pritchard D 2012, <i>Evaluation of Family Rights Group Advice and Advocacy Service</i>, The Open Univesrity, Consult Research and New Philanthropy Capital, <http://www.frg.org.uk/images/advicecampaign/Evaluation-of-Family-Rights-Group-Advice-and-Advocacy-Service.pdf></p>

Programs focussed on foster care

United States

Country	USA, New York
Name	Co-parenting
Description	A training program for birth and foster parents that focuses on creating a collaborative partnership to parent the children in care.
Activities	12-week parenting course (Incredible Years) and a co-parenting component (new developed).
Evaluation	Promising Practice. Evaluation found that involvement in the program increased co-parenting flexibility and problem solving at the end of the intervention but these gains were not maintained over time.
Information & contacts	<p>New York University Child Study Centre Email: oriana.linares@med.nyu.edu</p> <p>Foster family-based Treatment Association 2008, <i>Implementing evidence-based practice in treatment foster care: a resource guide</i>, Hackensack, NJ, viewed 29 May 2013, <http://www.ffa.org/publications/ebpguidefinalweb.pdf>.</p>

Country	USA
Name	Family Finding or Family Search and Engagement
Description	Family finding was inspired by the family-tracing techniques used by international aid agencies to reunite people separated by war and natural disaster. An intensive search method to find family members and other adults who would like to step in and care for children and youth in foster care who lack permanency. The goal is to locate long-term, caring, permanent connections for children, and to establish a long-term emotional support network with family and other adults who may not be able to take the child into their home but want to stay connected. Has resulted in permanent placements with relatives, but the more frequent outcome is the establishment of a lifelong connection with a group of relatives who provide the child with emotional and other support.

Activities	<p>Intensive search aims to identify at least 40 extended family members and important people in the child's life. Engagement is made through interviews, phone conversations and letters/emails. Through this a group of family members and supportive adults are identified who are willing to participate in a planning meeting on how to keep the child safely connected to family members.</p> <p>Family meetings of family members and others important to the child are then held to plan for the child's future and make decisions to support the child into the future.</p> <p>Family meetings also evaluate the permanency plans developed for the child. Providing follow-up supports to ensure that the child and family can access and receive informal and formal supports is essential to maintaining permanency for the child.</p>
Evaluation	<p>Yes. Between 2008–2010 the differences between two evaluation sites were examined, one implementing family finding with children 'new to out-of-home care' and one implementing family finding for children who have been 'lingering' in foster care. Although family finding was initially developed as a tool for helping children lingering in foster care reconnect with family members, it is fast becoming a tool that child welfare agencies want to utilise with all cases.</p> <p>See: http://www.childrensdefense.org/child-research-data-publications/data/promising-approaches.pdf</p>
Contact & Information	<p>Email: info@familyfinding.org Family finding: http://www.familyfinding.org/</p> <p>EMQ Families First 2013, 'Family Finding' <http://www.emqff.org/services/family_finding.shtml></p>

Country	USA, Austin Texas
Name	Federal Parent Locator Service
Description	National database that is accessed by some state welfare used to notify the child's relatives that the child has been removed from the parents' home and ask if they are willing to be considered for placement of the child or if they would want to provide assistance or support for the child when they do not want to be considered for placement. The form identifies the possible resources available for the relative if the relative takes placement of the child and many of the requirements for the relative to become a licensed foster parent.
Activities	Locates fathers who have been identified where children are with child welfare agencies.
Useful links	<p>National Resource Center for Permanency and Family Connections n.d., <i>Fostering Connections</i>, <http://www.nrcpfc.org/fostering_connections/kinship_guardianship.html#rsnprr></p> <p>Office of Child Support Enforcement n.d., <i>Federal Parent Locator Service (FPLS)</i>, http://www.acf.hhs.gov/programs/css/fpls</p>

Country	USA, New York
Name	Parent Advocates: Foster care agencies
Description	Parent advocates (parents who have been in contact with the child welfare system) work in a number of private foster care agencies in New York City (NYC), as well as Children's Services, the NYC child welfare agency. Parent Advocates provide parents with information and support and help agency staff understand parents' perspectives.
Activities	Peer support, advocacy.

Information	<p>Miller, L 2011, 'Fighting for families: giving parents the information they need to succeed, <i>Rise Magazine</i>, <http://www.risemagazine.org/Parent%20advocacy%20stories/Fighting_for_families.html></p> <p>Pagan, R 2011, 'You're your voice': working from inside the system to support parents, <i>Rise Magazine</i>, http://www.risemagazine.org/Parent%20advocacy%20stories/I_am_your_voice.html</p>
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Country	USA, Texas
Name	Texas Parent Collaboration Group
Description	A partnership between the Texas child protection service and parents who have been clients of that service. Parents are involved in the design and implementation of programs in child welfare services.
Activities	The group acts as a consultative body liaising between parents and departmental staff to increase communication and improve services. The group provides information to staff about parents' experiences; suggestions for improvement; training opportunities for workers regarding the parent experience; and policy advice.

Country	USA, New Hampshire
Name	Adoptions Together, Parent Advocate Project
Description	Supports parents seeking reunification. It aims to provide the services needed for faster, safer, and lasting reunifications for the children entering foster care. Facilitates strong relationships between birth families, foster parents, and social worker soon after the child is placed in out-of-home care. Uses trained mentors who have (in the past) been monitored by or successfully navigated the child welfare system.
Activities	Parent mentors provide families with one to one support and guidance through the child welfare and family court systems; help parents obtain support services that will expedite reunification with their children.
Contact & Information	Email: kking@adoptionstogether.org Adoptions Together, www.adoptionstogether.org

Country	USA
Name	Multidimensional Treatment Foster Care for Preschoolers (MTFC-P)
Description	Foster care treatment program tailored to 3–6 year olds. A team work intensively with the child, the foster care provider, and those who might provide permanent placements (birth parents, adoptive relatives or non-relatives).
Activities	Foster parents are given intensive training and support and access to around the clock on-call crisis intervention. The children also have weekly therapeutic playgroup sessions and attend receive services from a behavioural specialist. Birth parents (or other carers) receive family therapy.

Evaluation	<p>Effective practice according to California Evidence-Based Clearinghouse for Child Welfare (2009). At least two randomised clinical trials have been conducted to evaluate permanent placement outcomes. The earlier study found that the permanent placement success rate in the control group was 64% while the permanent placement success rate in the MTFC-P group was 90%. Results of this study also found that MTFC-P might mitigate against the risks of multiple placements (a known risk for permanent placement disruptions). Children with multiple placements in MTFC-P did not show increased re-entry to foster care (Fisher et al. 2005).</p> <p>A smaller study in 2009 (n=52) also found that children in the MTFC-P group had more than twice as many successful permanent placements (adoption or reunification with family) at the time of the 24 month follow up (Fisher et al 2009).</p> <p>See: Semanchin Jones, A & LaLiberte T 2010, <i>Re-entry to foster care report</i>, Centre for Advanced Studies in Child Welfare, <http://www.cehd.umn.edu/ssw/cascw/attributes/PDF/Re-entry%20Report_Feb%202010_Final_rev.pdf></p>
Useful link	The California Evidence-Based Clearinghouse for Child Welfare 2011, <i>Multidimensional Treatment Foster Care for Preschoolers</i> , < http://www.cebc4cw.org/program/multidimensional-treatment-foster-care-for-preschoolers/detailed >

Country	USA, New York
Name	Building a Bridge (RISE program)
Description	Foster parent training program that aims to build and maintain positive connections between birth parents and foster parents to promote better outcomes for children.
Activities	The birth parent can feel support from the foster parent and become more comfortable with the boundaries and limitations of visits. Suggestions for building connections include: writing letters to the children (from the parent or foster parent), planning positive visits, invitations to birthday celebrations, or weekly phone calls (Rise, 2009).
Useful links	<p>Casey Family Programs 2013, <i>Strategies and programs to improve birth parent engagement</i>, <http://www.casey.org/Resources/Publications/BirthParentEngagement.htm></p> <p>Rise Magazine 2009, <i>Building Relationships with Foster Parents</i>, <http://www.risemagazine.org/PDF/Rise_issue_13.pdf></p>

Country	USA, Washington State
Name	Birth Family-Foster Family Connections Project
Description	Designed to create supportive connections among birth families, foster families, children, and the child welfare system (Gerring, Kemp & Marcenko 2008, p. 5 cited in Corwin 2012, p. 16). The project also seeks to build connections to birth families and encourage participation in services and visitation.
Activities	Relationship-based practice includes early contact with birth parents, safer parenting, building relationships with birth parents, providing empathic support, alleviating the pain left by family separation, creating happy/fun visits, addressing developmental needs and providing feedback (Gerring 2008 cited in Corwin 2012 p. 16).

Evaluation	A three-year collaborative research demonstration project between a large private agency and the Washington State Department of Child and Family Services. Evaluation shows higher weekly visitation rates by birth parents and general satisfaction with the project services (Marcenko cited in Corwin 2012). The Connections Project resulted in strong parent-worker relationships, very high participation in weekly visitation by birth parents, and quite extensive contact between birth and foster families.
Useful links	Gerring, C, Kemp, S & Marcenko, M 'The Connections Project: A Relational Approach to Engaging Birth Parents in Visitation' Child Welfare Journal, Vol. 87, No. 6, < http://www.cwla.org/articles/cwjabstracts.htm#0806 > National Resource Center for Permanency and Family Connections 2012, <i>Family/child visiting</i> , < http://www.hunter.cuny.edu/socwork/nrcfcpp/info_services/family-child-visiting.html >

Country	USA, Northern Virginia
Name	Bridging the Gap
Description	Program which focuses on building and maintaining relationships and communication between the birth, foster and adoptive families involved in a child's life. The goal of this work is to support family reunification or another permanency plan. Implemented through a collaboration between private and public agencies.
Activities	Includes use of icebreaker meetings and visit coaching. Work can include other family members involved in the child's life, such as members of the extended family of origin, other relatives who are caregivers and adoptive parents.
Contact	Fairfax County Department of Family Services National Resource Center for Permanency and Family Connections 2012, <i>Birth and foster family partnerships</i> , < http://www.hunter.cuny.edu/socwork/nrcfcpp/fewpt/partnerships.htm >

Country	USA, Washington State
Name	Parent Mentoring Program
Description	Foster parents act as mentors to birth parents and work with them to develop and implement action plans for reunification. Voluntary program.
Activities	The program capitalises on the skills of foster parents who are knowledgeable about the child welfare system, the needs of children and families and the resources of the community. Mentor candidates complete a two-day training. Mentors are not a source of evidence for investigations. Parents must be reasonably cooperative with their service plan and not currently active in any addiction. Together, all parties identify barriers to reunification among participating families. Mentors and parents work together to address the issues. Families and mentors meet for 6-10 hours each week for up to 24 weeks. Mentors, birth parents and child welfare workers meet monthly. Mentors also help parents develop an appropriate, reliable, safe social support system. Mentors observe parents and children's interactions, encourage parents to use learned skills, and document these sessions, providing feedback to both the parent and assigned child welfare social worker. The mentor and social worker remain in frequent contact. Mentors also receive supervision and support through regular meetings with program staff and other mentors.
Evaluation	Parents in the program experienced more frequent reunifications and children of parents in the program experienced shorter durations in foster care (Marcenko & Grossman 2008 cited in Corwin 2012).

Contact & more information	Email: Ross Brown Rosb300@dshs.wa.gov Partners for Our Children 2010, <i>Parent engagement/mentoring models in Washington State</i> , < http://pocweb.cac.washington.edu/sites/default/files/publications/2010._parent_engagement_mentoring_models_in_wa.pdf >
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Country	USA
Name	Parent Engagement and Self-Advocacy (PESA)
Description	Program for birth parents, foster parents, and caseworkers of children (age 10–17) who are in foster care and candidates for reunification. All parties work together to address the mental health needs of the children.
Activities	Essential components: group facilitators and group must include birth parent advocates, foster parents and caseworker; a 3-day training for group facilitators followed by 12 consultation calls; groups: one 2–3 hour session per week, recommended duration: 5–6 weeks.
Contact	Lisa Hunter Romanelli, PhD; lisa@thereachinstitute.org Casey Family Programs 200113, <i>REACH Institute collaboration on mental health</i> , < www.casey.org/Resources/Initiatives/REACH >

Country	USA
Name	Shared Family Care
Description	Program provides short term placements for a parent and child with a family who provides mentorship, skills, and resources to meet goals. The goal of SFC is to achieve permanency for the child and to move the family toward self-sufficiency. The program works to establish a relationship between the foster and birth parents and develop the skills and supports of birth parents.
Activities	Provides parents with intensive 24-hour support from a trained mentoring family plus intensive services from a multi-disciplinary team (drug counsellor, case manager or housing specialist).
Evaluation	'In a quasi-experimental study (non-randomised, comparison group) in California, results showed that 8% of the children in families who completed the SFC program re-entered foster care within 12 months, compared to 17% in comparison group. Participants in the program also showed improved outcomes over the comparison group including: higher graduation rates, increased average income, and greater numbers of families living independently. More research is needed on this program, but results of this study indicate some promise in reducing re-entry to foster care using the SFC model.' (Semanchin Jones & LaLiberte 2010)
Useful links	Abandoned Infants Association n.d. , <i>Shared Family Care</i> , < http://aia.berkeley.edu/family-well-being/shared-family-care/ > Semanchin Jones, A & LaLiberte, T 2010, <i>Re-entry to Foster Care Report</i> , Centre for Advanced Studies in Child Welfare, University of Minnesota, < http://www.cehd.umn.edu/ssw/cascw/attributes/PDF/Re-entry%20Report_Feb%202010_Final_rev.pdf >

Country	USA, Oregon
Name	Project Keep
Activities	Supports and trains foster and birth parents.
Description	<i>Project Keep</i> is a group program that provides foster and birth parents with coping tools and support for their work with children (ages 5–12) who exhibit behavioural and emotional problems. A comprehensive set of skills is covered including: effective limit setting, encouraging participation, strengthening interpersonal relationships and parental stress management. A 16 week program.

Evaluation	A controlled randomised study found parents who participated in <i>Project Keep</i> reported reduced rates of child problem behaviours, fewer placement disruptions and increased rates of family reunification and adoption.
Contact & more information	Oregon Social Learning Centre. Email: pattic@oslc.org www.oslc.org

Country	USA, Kansas
Name	Intensive Reunification Program
Description	Program provides multiple opportunities for parents and their children to spend time together. Places parents and children together to engage and interact. Clinicians, social workers, family support workers and volunteers partner with children and families, coaching and demonstrating appropriate responses.
Activities	The program requires extensive participation by family members. Biological parents and their children participate in activities for two hours, twice a week for 36 weeks. Based on a behavioural paradigm that requires intensive time and skills of foster care staff: modeling positive behaviors, providing opportunities to practise newly acquired skills, imparting community resource information, and providing frequent opportunities for participant self- evaluation.
Evaluation	A comparative evaluation of this model after one year found that its reunification rates are double that of comparable cases receiving the agency's conventional reunification services. Intensive Reunification Program of Kansas Children's Service League http://www.docstoc.com/docs/100303083/Intensive-Reunification-Program-of-Kansas-Childrens-Service-League

Country	USA, Oregon, North Carolina, Maryland, Oklahoma, California, Virginia and New Mexico
Name	Icebreaker meetings
Activities	Facilitated child-focused meeting to provide the opportunity for birth parents and foster parents (or other caregivers) to meet and share information about the needs of the child. Ideally held within two days of a child's out-of-home placement. The meeting is seen as the beginning of building relationships and communication between the child's parents and caregivers.
Description	The child welfare practice model includes the utilisation of icebreaker meetings between birth and foster parents to promote easier adjustments for children and parents involved in the child welfare system. Similar to Bridging the Gap program (see below).
Useful links	National Resource Center for Permanency and Family Connections 2009, <i>Birth and foster family partnerships</i> , < http://www.hunter.cuny.edu/socwork/nrcfpp/fewpt/partnerships.htm >

Country	USA
Name	Visit Coaching
Description	Visit coaching supports families to make each access visit an opportunity to learn parenting skills as well as meet the needs of the children.
Activities	Visit coaching activities include: helping parents identify what their children need from access visits; preparing parents for their children's reactions; helping parents plan to give their children their full attention at each visit; appreciating the parent's strengths in caring for and meeting each child's needs; helping parents cope with their feelings so that they can visit consistently and keep their anger and sadness out of the visit. The goal of visit coaching is to address the issues that brought the child into care by building on family strengths and supporting improved parenting.

Useful links	http://www.martybeyer.com
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Europe

Country	Bulgaria
Name	For Our Children Foundation
Description	For Our Children Foundation is a successor to the British organisation for protecting children's rights 'EveryChild'. Areas of work include: prevention of child abandonment and placement in institutions; foster care; support for foster carers and adoptive parents; returning children from institutions back to their families or back to family type environments.
Activities	First Bulgarian non-government organisation that introduced foster care in 1997. Range of children and family services.
Evaluation	See useful links
Useful links	Child Abuse and Neglect in Eastern Europe 2008, <i>For Our Children Foundation</i> , < http://www.canee.net/bulgaria/other_organizations/for_our_children_foundation >

Programs focussed on statutory authorities

Australia

Country	Australia, Western Australia
Name	Signs of Safety
Description	<p>A risk assessment and case planning framework in situations of suspected or substantiated child abuse that integrates professional knowledge with local, family and cultural knowledge. The approach balances a rigorous exploration of risk to children alongside indicators of strengths and safety. The assessment is simple but rigorous and easily used to gather information about concerns or dangers, existing strengths and safety and envisioned safety.</p> <p>New Zealand and West Australia have expanded the assessment framework to cover planning for the future. In Minnesota implementing the framework has focused on using collaborative conferencing with all high risk cases. The Gateshead, England and Carver County, Minnesota implementations have refined ideas for using the Signs of Safety at the initial investigation.</p>
Activities	<p>Signs of Safety focuses on how the worker can build partnerships with parents and children and still deal rigorously with the maltreatment issues. This approach is grounded in working in partnership. It is strengths-based and safety-focussed. However, the investigation of risk is expanded to look at strengths, case planning and a future focus, which balances the usual problem focus of most risk assessment.</p> <p>The approach is designed to be used from notification through to case closure. It can be used by professionals at all stages of the child protection process, in statutory, hospital, residential or treatment settings.</p>
Information & contact details	Signs of Safety is owned by Resolutions Consultancy. info@signsofsafety.net Signs of Safety http://www.signsofsafety.net/

Appendix 2

Appendix 2 to this report is a document: “Rights of Parents Affected by the Child Welfare System” guided by Rise magazine in New York City, the Centre for the Study of Social Policy in Washing, DC, that National Coalition for Parent Advocacy in Child Protective services in Claremont, California and Parents Anonymous.

- “1. I HAVE THE RIGHT TO not lose my child because I’m poor.
2. I HAVE THE RIGHT TO services that will support me in raising my child at home.
3. I HAVE THE RIGHT TO speak for myself and be heard at every step of the child protective services process.
4. I HAVE THE RIGHT TO be informed of my rights.
5. I HAVE THE RIGHT TO a meaningful and fair hearing before my parental rights are limited in any way.
6. I HAVE THE RIGHT TO quality legal representation.
7. I HAVE THE RIGHT TO support from someone who has been in my shoes.
8. I HAVE THE RIGHT TO have my child quickly placed with someone I trust.
9. I HAVE THE RIGHT TO frequent meaningful contact with my child.
10. I HAVE THE RIGHT TO make decisions about my child’s life in care.
11. I HAVE THE RIGHT TO privacy.
12. I HAVE THE RIGHT TO fair treatment regardless of my race, culture, gender or religion.
13. I HAVE THE RIGHT TO services that will support me in reunifying me with my child.
14. I HAVE THE RIGHT TO offer my child a lifelong relationship.
15. I HAVE THE RIGHT TO meaningful participation in developing the child welfare policies and practices that affect my family and community.