

Meeting 1:

Chronological List of Handouts and Presentation Slides

Handouts

1. Meeting 1 Agenda
2. Criteria for Mutual Selection of Foster and Adoptive Parents
3. Description of the TIPS-MAPP Preparation and Selection Program Meetings and Steps
4. Strengths/Needs Assessment
5. Partnership Development Plan
6. A Brief Summary of Child Welfare Laws Important to Foster and Adoptive Parents
7. Important Definitions for Foster Parents and Adoptive Parents
8. Safety, Well-Being and Permanence – Video Worksheet
9. How Changing Laws and Practices Affect Children in Foster Care – Case Example and Worksheet
10. Bill of Rights for Children in Foster Care
11. Rights of Parents of Children in Foster Care
12. Code of Ethics for Foster Parents
13. Indian Child Welfare Act (ICWA)
14. Multiethnic Placement Act of 1994 and Amendment of 1996 (MEPA/IEP)
15. Fostering Connections for Success and Increasing Adoptions Act
16. Resource Guide for Foster and Adoptive Parents*

Supplemental Handouts Family Profile

* Handout should be created by the agency

Presentation Slides

01. Instructions for Matching Activity
02. Twelve Criteria for Mutual Selection of Foster and Adoptive Parents
03. Ways Information is Shared in the TIPS-MAPP Program
04. Child Welfare Laws
05. Important Definitions
06. Safety, Well-Being and Permanence – Video Directions
07. Directions for Small Group Activity – How Changing Laws and Practices Affect Children in Foster Care
08. Roadwork

Meeting 1: Welcome to the TIPS-MAPP Group Preparation and Selection Program

Agenda

Time	Meeting and Topic
(40 Minutes)	1-A. WELCOME AND GET ACQUAINTED <ul style="list-style-type: none">‣ Group leader introductions‣ Purpose of the meetings‣ Meeting 1 agenda‣ Participant introductions/get-acquainted activity‣ "Rules of the Road"
(35 Minutes)	1-B. INTRODUCTION TO THE TIPS-MAPP GROUP PREPARATION AND SELECTION PROGRAM <ul style="list-style-type: none">‣ Partnership as a foundation for the foster care/adoption program‣ The TIPS-MAPP Group Preparation and Selection Program‣ Criteria for mutual selection‣ The strengths/needs approach‣ Information sharing‣ Partnership Development Plan
(10 Minutes)	BREAK
(45 Minutes)	1-C. ADOPTION AND FOSTER CARE TODAY <ul style="list-style-type: none">‣ Important definitions‣ Children and youth who need safety, well-being and permanence

Agenda continued

Time	Meeting and Topic
(40 Minutes)	1-D. THE ROLES AND RESPONSIBILITIES OF FOSTER AND ADOPTIVE PARENTS <ul style="list-style-type: none"> ‣ Review of reasons, feelings and behaviors ‣ Assuring safety, well-being and permanence for a child
(10 Minutes)	1-E. SUMMARY OF MEETING 1 AND PREVIEW OF MEETING 2 <ul style="list-style-type: none"> ‣ Summary of Meeting 1 ‣ Preview of Meeting 2 ‣ Next step in the mutual selection process ‣ A Partnerships in Parenting Experience

Roadwork

- Read the handouts and bring any questions you have to the next meeting.
- Talk with someone about foster and adoptive parenting and the importance of partnership this week.
- Complete your Family Profile. If you have any questions, feel free to call during the week.

Leaders Contact Information:

Name	Phone	Email

Criteria for Mutual Selection of Foster And Adoptive Parents

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

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

1. Know your own family.

Assess your individual and family strengths and needs; build on strengths and meet needs.

2. Communicate effectively.

Use and develop communication skills needed to foster or adopt.

3. Know the children.

Identify the strengths and needs of children and youth who have experienced abuse and neglect and recognize how the past trauma impacts the way they experience the world around them.

4. Build strengths; meet needs.

Build on strengths and meet needs of children and youth who are placed with you.

5. Work in partnership.

Develop partnerships with children and youth, birth families, the agency, and the community to develop and carry out plans for permanency.

6. Be loss and attachment experts.

Help children and youth develop skills to manage loss and attachment and minimize the risk of a child being traumatized again.

7. Teach healthy behaviors.

Help children and youth identify the need and emotion behind their behaviors. Foster and adoptive parents will respond in ways that will teach the children healthy ways to stay safe with themselves and others.

8. Build connections.

Help children and youth maintain and develop relationships that keep them connected to their pasts.

9. Build self-esteem.

Help children and youth build on positive self-concept and positive family, cultural and racial identity.

10. Assure health and safety.

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

11. Assess impact.

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

12. Make an informed decision.

Make an informed decision to foster or adopt.

Description of the TIPS-MAPP Preparation and Selection Program Meetings And Steps

1. **WELCOME TO THE TIPS-MAPP PREPARATION AND SELECTION PROGRAM**

Acquaints leaders and participants with the TIPS-MAPP Program and each other. This meeting explains the process of becoming a foster or adoptive parent and the legal foundation for child welfare services. With a focus on safety, well-being and permanence, you will meet several children and parents (in a video) who have been involved with foster care and adoption.

During Meeting 1, every family receives a copy of a **PROFILE**. The Profile gives prospective foster and adoptive families an opportunity to describe themselves in their own words. The Profile becomes part of the information used to help in the decision about fostering or adopting. It also becomes part of the information kept by the agency to help children, birth families and child welfare workers get to know the foster or adoptive family better.

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

2. **WHERE THE MAPP LEADS: A FOSTER CARE AND ADOPTION EXPERIENCE**

This meeting provides an overview of a foster care and adoption experience from the perspectives of clients (children and parents), foster parents, adoptive parents, and child welfare workers. Case examples of eight children will be used to help participants consider the safety, well-being and permanence needs of children who have been abused, neglected or maltreated.

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

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

3. LOSSES AND GAINS: THE NEED TO BE A LOSS EXPERT

Explores the impact of separation on the growth and development of children, and the impact of foster care and adoptive placement on the emotions and behaviors of children and parents. Examines personal losses (death, divorce, infertility, children leaving home) and how difficult life experiences affect success as adoptive parents or foster parents. Emphasizes the partnership roles of foster parents, adoptive parents, and social workers in turning separation losses into gains.

4. HELPING CHILDREN WITH ATTACHMENTS

Explores the subject of attachment and child development. Focuses on how attachments are formed and the special needs of children in foster care and adoption (especially in the areas of building self-concept and appropriate behavior). Discusses the partnership roles of foster parents, adoptive parents and child welfare workers in helping children form new attachments.

5. HELPING CHILDREN LEARN HEALTHY BEHAVIORS

Discusses techniques for managing behavior, with an emphasis on alternatives to physical punishment. Topics include special issues related to discipline for children who have been physically or sexually abused or neglected. Techniques to be discussed include being a "behavior detective," reinforcement, time out, mutual problem solving, structuring and setting limits, negotiating, and contracting. Emphasizes the partnership among foster parents, adoptive parents and child welfare workers.

6. HELPING CHILDREN WITH BIRTH FAMILY CONNECTIONS

Examines the importance of helping children in care maintain and build upon their identity, self-concept, and connections. Considers issues such as how children's cultures and ethnic backgrounds help shape their identity; the connections children risk losing when they enter care; and why visits and contacts with birth families and previous foster families are important.

7. GAINS AND LOSSES: HELPING CHILDREN LEAVE FOSTER CARE

Discusses family reunification as the primary case planning goal as well as alternatives like foster care, adoption, and independent living. Examines disruption and its impact on children, families, and agency staff. This meeting also focuses on the partnership role of child welfare workers, foster parents, and adoptive parents in helping children move home, into an adoptive home or into independent living. The meeting features a video of a mother, foster mother and worker planning the return of the mother's children to her home.

8. **UNDERSTANDING THE IMPACT OF FOSTERING OR ADOPTING**

Previous meetings included discussions and experiential activities to find out what foster care and adoption are all about. Participants learned about separation and attachment, how to build and maintain relationships with children and how to support them in working out the emotions they have for the important people in their lives. In Meeting 8 prospective parents explore the impact of fostering and adopting on their own families. Discussions and activities examine how fostering and adopting can affect prospective parents' marriages, own children and relationships with extended family.

9. **PERSPECTIVES IN ADOPTIVE PARENTING AND FOSTER PARENTING**

This meeting continues the examination of the impact of foster and adopting on families and builds skills for shared parenting. The meeting features a video of a parent talking about her experiences when her daughters were in foster care. A special children's group will be part of this meeting, designed especially for children and youth from families who are thinking about becoming foster or adoptive families.

10. **ENDINGS AND BEGINNINGS**

The important tasks of this meeting will be to assess group members' strengths and needs as foster parents or adoptive parents. There also will be some time to say good-bye ... the ending. As the preparation/mutual selection process is coming to an end, so begins the transition into becoming a foster family or adoptive family ... the beginning.

After the last meeting there is a final **FAMILY CONSULTATION** during which the leader and the parents agree about the family's future role as a foster family, as an adoptive family, or as another kind of child welfare advocate. A **PROFESSIONAL DEVELOPMENT PLAN**, developed by the leader and the parents, provides direction for support of the family during the next six months of partnership in the child welfare program.

Strengths/Needs Assessment

What is a strengths/needs assessment?

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

What do we do with the strengths/needs assessments?

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

What is an effective strength or need statement?

An effective strength or need statement does not need to be lengthy, fancy or complicated. It is best if written in words you use every day. Most importantly, your strengths and needs should be based upon what you learned in the meeting.

Following are examples of strength and need statements from other groups:

"During the meetings I saw that my wife and I have been good communicators for a long time. We listen very well to one another, and that can help when we have a child in our home." (Strength in Criterion #2)

"As a result of Meeting 1, I have a better idea of the real reasons children need to be fostered or adopted. I think I have the beginning skills to identify strengths and needs of children who have been abused and neglected." (Strength in Criterion #3)

"I began to realize during this meeting that I spend a lot of time meeting the needs of everyone in my family, but little time meeting my own needs. I need to figure out ways of meeting my own needs as well as the needs of children." (Need in Criterion #1)

"I understand the need to build a relationship with a parent of a child in foster care, but I am uncomfortable with the idea. I need help in figuring out ways to safely develop those relationships." (Need in Criteria #5 and 8)

Partnership Development Plan

As part of partnership building in the preparation and the mutual selection process, it is important to have a clear understanding of all the strengths and needs involved in your becoming a foster/adoptive parent. Throughout the process you will discover things you may want to work on as an individual or as a family. Professional development as a foster family begins now and continues throughout the time you care for abused and neglected children. It is important for you to assess your own strengths and needs. Your program co-leaders will also openly share with you any concerns they have regarding your ability to become foster parents or adoptive parents. It is hoped that, together, needs can be identified and met so you can make the best decision for your family. Every time you talk about your progress in making a decision about fostering and/or adopting and in developing new skills it will be helpful to write out what you plan to do next. The following steps are designed to help you document your discussions:

Steps

1. Describe the need clearly. _____

2. Explain why this is a need. _____

3. Develop an action plan including:

A. What tasks will be done to meet the need? _____

B. Who will do each task? _____

C. When will we evaluate progress? _____

D. How we will know whether the need is met. _____

E. What will happen if the need is met; if the need is not met? _____

Parent Signature

Date

Parent Signature

Date

TIPS-MAPP Leader Signature

Date

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

A Summary of The Adoption Assistance and Child Welfare Act, Public Law 96-272

The Adoption Assistance and Child Welfare Act, Public Law 96-272, was enacted by Congress in 1980. The law is a set of provisions aimed at redirecting federal fiscal incentives away from out-of-home placement and into preventive services to keep troubled families together. Where removal is necessary, Public Law 96-272 promotes family reunification or adoption, as appropriate. The law also provides for federal reimbursement of adoption subsidies for children with special needs.

Public Law 96-272 supports three important goals:

- that foster care is intended to ensure that children's needs for nurturance and protection are met in the foster care system.
- that the foster care program seeks to ensure that the parent-child attachment is strengthened and preserved to meet the child's needs for nurturance and protection.
- that the foster care program seeks to strengthen and preserve the child's ability to form attached relationships which meet the child's needs for nurturance and protection.

Public Law 96-272 emphasizes family reunification; requires regular and systematic judicial oversight of children in foster care; provides financial incentives for states to comply with the law; and requires that in order to receive federal money, "reasonable efforts" to prevent removal and to achieve reunification be made.

A Summary of The Adoption and Safe Families Act, Public Law 105-89¹

The Adoption and Safe Families Act (ASFA) was signed into law by the President as Public Law 105-89 on November 19, 1997. ASFA continues most of the structural components of Public Law 96-272, while shortening timetables and providing new definitions. ASFA did not displace the aspirations and goals of Public Law 96-272, but it did refocus attention on the child welfare system by causing states to balance family preservation and reunification with the health and safety of children, which the act declares of paramount importance.

¹ Developed for National Association of Foster Care Review and published in Heather Craig-Oldsen, Foundation Training for New Foster Care Reviewers, Atlanta, GA 1998 through funding from Administration on Children, Youth and Families, Children's Bureau.

The law reflects a clear shift from and emphasis on protracted reunification efforts to permanency at the earliest possible time. This change in emphasis does not pit reunification against permanency, but is a shift from process and procedure to outcomes. In addition to fiscal incentives, the act contains mandates, and requires that states come into conformity with its provisions on a carefully arranged timetable.

Key Provisions of the Law:

- Continues the requirement that “reasonable efforts” be made to prevent or eliminate the need for removing children from their homes or to make it possible for them to return home safely, but does not require “reasonable efforts” to be made in cases where there are aggravated circumstances. The act lists a number of aggravated circumstances and allows the state to exercise discretion in protecting the health and safety of children in cases other than those described in the act.
- Changes the term “dispositional hearing” to “permanency planning hearing” and requires that it be held 12 months after a child enters foster care, rather than 18 months as in Public Law 96-272. A child is considered to have entered foster care to the earlier of the date of the first judicial finding of deprivation (i.e. adjudication) or to the date 60 days after the date on which the child is removed from the home.
- States must initiate or join in termination proceedings for all children who have been in foster care for 15 out of the most recent 22 months, but provides for circumstances in which it is not necessary to file such proceedings.
- Re-authorized and expands the Family Preservation and Support Services program, renaming it “Promoting Safe and Stable Families.” Family reunification services are time limited to the 15- month period beginning on the date the child enters foster care.
- Provides for adoption incentive payments to states that increase the number of adoptions of children in foster care as compared with a base year.
- Requires that states provide health insurance coverage for all special needs children in subsidized adoptions, regardless of whether they are 4E adoptions.
- States must have procedures for criminal records checks for prospective foster or adoptive parents before a child eligible for federal subsidies is placed with such prospective parents. States can avoid this requirement through passage of specific legislation or through written notification to the Governor and to the Secretary of Health and Human Services.
- States must develop plans for use of cross-jurisdictional adoption resources and may not deny or delay placement of a child for adoption when an approved family is available outside the jurisdiction responsible for handling the child’s case.

- States must develop standards to ensure that children in foster care are provided quality services.
- References to the safety of a child must be included in planning a case review for children in foster care.
- Foster parents, pre-adoptive parents, or relatives caring for children in foster care must be notified of and have the opportunity to be heard in any review process.
- There are requirements for data reporting and there will be "State Report Cards."

Important Definitions for Foster Parents And Adoptive Parents

Foster Care – Foster care is a protective service for families. Foster care usually means families helping families. Children who have been physically abused, sexually abused, neglected or emotionally maltreated are given a family life experience in an agency-approved, certified or licensed home for a planned, temporary period of time. The primary goal of foster care is to reunite children with their families. Foster parents are often in a position to help children and their families reunify. Foster parents are also often in a position to emotionally support parents who cannot do the job of parenting and must make a plan for adoption or another permanent plan for their children.

Adoption – Adoption is a way of meeting the developmental needs of a child by legally transferring ongoing parental responsibilities for that child from the parents to adoptive parents; and, in the process, creating a new kinship network that forever links the birth family and the adoptive family through the child who is shared by both. This new kinship network may also include significant foster families, both formal and informal, that have been a part of the child's experience².

Customary Adoption: Meeting Children's Needs While Honoring Tribal Values and Beliefs

- Historically and traditionally, adoption has been practiced in most tribal communities through custom and ceremony. In general, tribes did not practice termination of parental rights. Unfortunately, adoption became a negative thing due to forced assimilation policies; it was used as a tool to destroy Indian families and culture. Due to this historical trauma, many tribes actively abhor adoption as understood by the larger culture's definition. Today, tribes are healing those old wounds and reclaiming their positive tradition for "making relatives." In a customary adoption, tribes are allowed to meet the permanency needs of their children while honoring their own tribal values and beliefs. NICWA supports this developing movement in Indian Country and believes that offering a link to understanding this exciting option to the larger culture is imperative. An adoption outreach program must understand these cultural influences in order to be successful with Indian families. Additional information is available at <http://www.nicwa.org/adoption/>.

Child Protective Services – The legal intervention of child welfare agencies, through the judicial (court) system, to protect children and families.

Termination of Parental Rights (TPR) – The legal ending of a parent's rights to his or her child. Most state statutes for TPR require that a child has been abandoned; the parent exhibits significant abuse of drugs/alcohol; the parents are mentally ill or mentally retarded; the child has suffered repeated maltreatment; or the child has been in foster care for a specific length of time and the parents have failed to work with the placement agency or to plan for the return of the child³.

2 Watson, Kenneth. Developing Post Legal Adoption Services: The Public Agency Responsibility. (Springfield, IL: Illinois Department of Children and Family Services).

3 Adapted from Drews, K., Salus, M., and Dodge, D. 1979. Child Protective Services In-Service Training for Supervisors and Workers. Washington, D.C. U.S. DHEW, ACYF, Children's Bureau, National Center on Child Abuse and Neglect, HEW Contract No. 105-79-1103, pp. V 3, 2.

Physical Abuse – Physical abuse is defined by state law and is usually indicated by unexplained bruises; welts; burns; fractures/dislocations and lacerations or abrasions. Other behavioral indicators include a child who feels deserving of punishment; is wary of adult contact; is apprehensive when other children cry; is aggressive; withdraws; is frightened of his or her parent(s); is afraid to go home; reports injury by parent(s); often has vacant or frozen stares; lies very still while surveying surroundings (infant); responds to questions in monosyllables; demonstrates inappropriate or precocious maturity or indiscriminately seeks affection⁴.

Sexual Abuse – Child sexual abuse involves any interaction, contact or non-contact, between a child and any person—child or adult—in a power position in which the child is being used for the sexual stimulation of another person.⁵ Sexual abuse is defined by state law and is usually indicated by a child's disclosure and a combination of physical indicators including difficulty in walking or sitting; torn, stained, or bloody underclothing; pain, swelling, or itching in genital area; pain on urination; bruises, bleeding or laceration in external genitalia, vaginal, or anal areas; vaginal/penile discharge; venereal disease, especially in pre-teens; poor sphincter tone; pregnancy; bizarre, sophisticated or unusual sexual behavior or knowledge; poor peer relationships; delinquency; running away; change in school performance; withdrawal, fantasy or infantile behavior.⁶

Neglect – Neglect is defined by state law and is usually indicated by children who are underweight; have poor growth patterns; are consistently hungry; have poor hygiene; are inappropriately dressed; lack supervision; have unattended physical problems or medical needs; who are abandoned; who beg or steal food; have extended stays at school or rarely attend school; are constantly fatigued; show delayed speech development; inappropriately seek affection; do not change expressions; assume adult responsibilities and concerns; exhibit abdominal distention; have bald patches on the scalp; abuse alcohol or other drugs; talk in a whisper or whine.⁷

Emotional Maltreatment – Emotional maltreatment is defined by state law and is usually indicated by a combination of behavioral indicators including speech disorder; lags in physical development; failure to thrive; hyperactive/disruptive behavior; sallow, empty facial appearance; habit disorder (sucking, biting, rocking); conduct/learning disorders; neurotic traits (sleep disorder, inhibition of play, unusual fearfulness); behavioral extremes; overly adaptive behavior (inappropriately adult or infantile); developmental lags; attempted suicide.⁸

Safety – Safety refers to a set of conditions that positively or negatively describes the physical and emotional well-being of children. A child may be considered safe when there are not immediate threats of harm present or when the protective capacities can manage any foreseeable threats of harm.⁹

Risk – Risk is the likelihood of any degree of future harm or maltreatment. It does not predict when the future harm might occur but rather the likelihood of the harm happening at all.¹⁰

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

5 McNamara, Bernard and McNamara, Joan. (1990). The SAFE-TEAM Curriculum: Preparation and Support for Families Adopting Sexually Abused Children. Greensboro, NC: Family Resources Inc. (Presented as part of a project funded by the United States Department of Health and Human Services, Grant No. 90-CO-0466.)

6 Ibid.

7 Ibid.

8 Ibid.

9 Adapted from Morton, Thomas and Holder, Wayne. Designing a Comprehensive Approach to Child Safety (Atlanta, GA: National Resource Center on Child Maltreatment, 1999.)

10 Ibid.

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

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

Permanence – Permanence is the assurance of a family for a child intended to last a lifetime. Permanence assures a child a family where he or she will be safe and nurtured.

Permanency Planning – Permanency planning is the formulation of methods to provide services to children and their families to help keep children with their parents if at all possible. If children cannot live with their parents, permanency planning provides for placing children with relatives. If a relative placement is not possible, permanency planning provides for temporary, short-term, foster care placement with a plan to return to the parents. Finally, if return to the parents is not possible, permanency planning provides for adoption or interdependent living, depending upon the age, strengths and needs of the child and family¹¹.

Concurrent Planning – The development of two permanency goals at the same time. Concurrent planning allows for the contingency of finding a foster family for a child that could, if necessary, become the adoptive family for a child who cannot return home. Concurrent planning allows child welfare agency staff to petition to identify, recruit, process and approve a qualified family for adoption while filing the petition to terminate the parental rights of a child's parents.

Timeliness - Timely reunification is federally defined as children who had been in foster care for 8 days or longer who were discharged from foster care to live with their parent(s), primary caretaker from whom they were removed, or other relatives who care for the child while the parent has legal custody or who obtain legal custody (excluding adoption or guardianship)¹².

Best Interests of the Child - is a term that generally refers to the deliberation that courts undertake when deciding what type of services, actions, and orders will best serve a child as well as who is best suited to take care of a child¹³.

11 Adapted from Emlen, A., Lahte, J., Downs, G., McKay, A., and Downs, S., 1978. Overcoming Barriers to Planning for Children in Foster Care. Washington, D.C., U.S. HEW, ACYF, Children's Bureau, National Center for Child Advocacy, DHEW Publication No. (OHDS) 78-30138, pp. 10-11.

12 Child Welfare League of America National Working Group to Improve Child Welfare Data, 2007

13 Child Welfare Information Gateway Children's Bureau/ACYF www.childwelfare.gov

Reasonable Efforts - refers to activities of State social services agencies that aim to provide the assistance and services needed to preserve and reunify families¹⁴.

Trauma - Children and adolescents experience trauma under different sets of circumstances. Some types of traumatic events involve (1) experiencing a serious injury to yourself or witnessing a serious injury to or the death of someone else, (2) facing imminent threats of serious injury or death to yourself or others, or (3) experiencing a violation of personal physical integrity. These experiences usually call forth overwhelming feelings of terror, horror, or helplessness¹⁵.

Trauma-informed care – a trauma-informed child welfare practice model addresses and best responds to the needs of children who have been maltreated and traumatized. The model spans investigation, service provisions and coordination, court decision-making, and permanency. Implementation of a trauma-informed care model must take into consideration the child's developmental level and must reflect sensitivity to the child's family, culture, and language. Systems grounded in trauma-informed care will be better able to achieve goals of the Adoption and Safe Families Act—safety, permanency, and child well-being.

The trauma-informed child welfare worker understands the impact of trauma on a child's behavior, development, relationships, and survival strategies, and can integrate that understanding into planning for the child and family. The trauma informed child welfare worker also understands his or her role in responding to child traumatic stress¹⁶.

Trauma reminders - People, places, activities, internal sensations, or other things that trigger memories of a trauma experience. Trauma reminders can cause feelings of fear or distress or put people "on alert." Trauma reminders can "restart" post-traumatic stress reactions or behavior even years after a traumatic event has occurred¹⁷.

Retraumatization - A situation, interaction, or environmental factor that replicates events or dynamics of prior traumas and triggers feelings and reactions associated with those original traumas. Can be obvious – like placing an individual with a history of being forcibly raped – in 4 point restraints lying down with legs spread apart; or It can be a normal gynecological exam. Or retraumatization can be NOT so obvious - like closing the door of your office thinking you are protecting the person's privacy – while they are being triggered to the times when an adult used to take them into a room alone and close the door to the room before abusing them. Retraumatization is usually unintentional. Persons causing retraumatization are often unaware that their behavior or the situation is replicating something about that persons original abuse.

Historical trauma theory is a relatively new concept in public health. The premise of this theory is that populations historically subjected to long-term, mass trauma—colonialism, slavery, war, genocide—exhibit a higher prevalence of disease even several generations after the original trauma occurred.¹⁸

14 <http://www.nctsnet.org/content/defining-trauma-and-child-traumatic-stress>

15 <http://www.nctsnet.org/resources/audiences/parents-caregivers/glossary-of-terms>.

16 Ibid.

17 Jennings, Ann Ph D. TheAnnaInstitute.Org

18 Sotero, M. (2006) A conceptual model of historical trauma: Implications for public health practice and research. Journal of Health Disparities Research and Practice. Vol. 1, No. 1, pp. 93-108.

Safety, Well-being and Permanence – Video Worksheet

Use this handout to take notes during the video, if you choose. You may want to use your ideas in the summary discussion.

1. What are some possible safety issues for the children?
2. What are some of the well-being issues for the children?
3. What are some of the permanence issues for the children?
4. What are some traumas experienced by the children?
5. What has the adoptive mother, Lynetta, done to assure continuing safety, well-being and permanence for Dan and Moses?
6. What might be the role of the foster parent in working with the families of the children in foster care?

How Changing Laws and Practices Affect Children in Foster Care: Case Example and Worksheet

Case Example: Lily

Lily has just turned 14 years old and has been in foster care for six months. Lily was originally placed in foster care because she was physically abused by her father. In this case, Lily was hit on the body and around the face. Her mother took her to the hospital because she was afraid that Lily's jaw had been broken.

During the investigation, which was begun at the hospital, the child protective services investigator learned that Lily had been sexually abused by her father's 34 year-old brother. Lily's father believed that Lily had encouraged his brother, and that is why he hit Lily. Lily's mother said she could not protect Lily in the home. During the course of the investigation, the child protective services worker learned that Lily's mother has encouraged Lily to drink alcohol and smoke marijuana with her. There are no family, friends or relatives with whom Lily could stay, so Lily was placed in foster care.

Lily began therapy soon after entering foster care and her foster parents have worked closely with the therapist. Lily frequently dresses in clothing more appropriate for an older person. She also often wears brief tops that expose her shoulders and midriff, and she wears very short and tight shorts. During her first four months in care, Lily has often lied for no apparent reason and she has taken small amounts of money from her foster mother's purse on two occasions. When confronted with the lying and stealing, Lily responded by throwing a temper tantrum and then pouting. Lily is two years behind the grade level of other youth her age, and she is struggling in school. She is testing at about three years below her age level. During the first month in the foster home, Lily was often physically affectionate with her new foster father, seeming to enjoy long hugs, which she initiated whenever they were alone together in the same room. He and his wife talked with Lily about appropriate and comfortable ways to demonstrate affection in their home, and she responded well.

The foster parents have provided consistent consequences for Lily's behavior and have established a predictable family schedule and routine for Lily. Lily has responded well to consistency and predictability. She has recently talked with her foster mother about being sexually abused as a toddler and preschooler by her great-grandfather (her mother's grandfather). The foster parents contacted the child welfare worker and an investigation was begun. The investigator has confirmed that Lily's great-grandfather spent several years in prison when Lily's mother was a little girl. He was incarcerated for child molestation. Lily's parents used the grandparents as baby-sitter for Lily before Lily began going to school. The therapist believes Lily and thinks that Lily's early problems in school and with friends may have been affected by her very early sexual abuse.

Worksheet

Small Group Instructions:

1. Select a group facilitator and a recorder.
2. Answer the questions that are listed below about the role of foster parents in assuring safety, well-being and permanence.
3. Write your ideas on newsprint.
4. Be prepared to share your ideas with the large group in 10 minutes.

Thinking about Lily and her family, answer the following questions:

1. List three traumatic experiences for Lily?
2. What is a safety issue for Lily?
3. What are the well-being needs of Lily?
4. What will have to happen for Lily to return home?
5. What might be the role of the foster parent(s) in helping Lily be safe and to be healthy?
6. What might be the role of the foster parent(s) in helping the agency work with this family for a timely decision about permanency?

Bill Of Rights For Children In Foster Care

Ratified in Congress Hall, Philadelphia, Saturday, the Twenty-eighth of April, Nineteen Hundred and Seventy Three; Reaffirmed During the National Focus on Foster Care Conference, Norfolk, Virginia, Wednesday, the Fourth of May, Nineteen Hundred and Eighty Three

EVEN more than for other children, society has a responsibility along with parents for the well-being of children in foster care. Citizens are responsible for acting to ensure their welfare.

EVERY child is endowed with the rights inherently belonging to all children. In addition, because of the temporary or permanent separation from the loss of parents and other family members, the child requires special safeguards, resources and care.

Every Child In Foster Care Has The Inherent Right:

- | | |
|---------------------|---|
| Article the first | to be cherished by a family of his own, either his family helped by readily available services and supports to reassume his care, or an adoptive family or by plan, a continuing foster family. |
| Article the second | to be nurtured by foster parents who have been selected to meet his individual needs, and who are provided services and supports, including specialized education, so that they can grow in their ability to enable the child to reach his potential. |
| Article the third | to receive sensitive, continuing help in understanding and accepting the reasons for his own family's inability to take care of him, and in developing confidence in his own self-worth. |
| Article the fourth | to receive continuing loving care and respect as a unique human being...a child growing in trust in himself and others. |
| Article the fifth | to grow up in freedom and dignity in a neighborhood of people who accept him with understanding, respect and friendship. |
| Article the sixth | to receive help in overcoming deprivation or whatever distortion in his emotional, physical, intellectual, social and spiritual growth which may have resulted from his early experiences. |
| Article the seventh | to receive education, training and career guidance to prepare him for a useful and satisfying life. |

- | | |
|--------------------|---|
| Article the eighth | to receive preparation for citizenship and parenthood through interaction with foster parents and other adults who are consistent role models. |
| Article the ninth | to be represented by an attorney at law in administrative or judicial proceedings with access to fair hearings and court review of decisions, so that his best interests are safeguarded. |
| Article the tenth | to receive a high quality of child welfare services, including involvement of the natural parents and his own involvement in major decisions that affect his life. |

Additionally, the Multiethnic Placement Act of 1994 and its amendment of 1996 make it illegal to deny or delay placement of a child based upon race, ethnicity or national origin of the child or of the prospective foster or adoptive parents.

Rights of Parents of Children In Foster Care*

Parents of foster children shall have the following rights:

- A. To be treated as individuals who have all the rights guaranteed to them as citizens of the United States and their state.
- B. To maintain custody of their child unless it has been demonstrated that this would jeopardize the child's health and welfare.
- C. To be provided with opportunities to demonstrate their capacity to provide a suitable home for their child, and to regain custody of their child as quickly as possible, when regaining custody is consistent with the health and welfare needs of the child.
- D. To receive proper and adequate notice regarding any grievance or legal proceeding concerning their child.
- E. To participate in planning for their child, to receive a copy of the case plan and to receive notice of any formal review of their child's case plan.
- F. To receive a clear written description of their rights and responsibilities and the agency's rights and responsibilities, and to receive information about any recourse they may have to contest actions taken by the agency.
- G. To receive services, in accordance with the service plan, to assist them in overcoming the conditions which led to removal of their child, and if return of their child to their custody is not feasible, to help them adjust to an alternative permanent plan for their child.
- H. To visit and communicate with their child within reasonable guidelines as set by the service plan and by the court.
- I. To have their cultural, religious, ethnic or racial heritage respected as a plan for them and for their child is developed.
- J. To receive an explicit written description of the expectations they must meet in order to have their child returned home and of the services the agency will provide to help them meet those expectations.
- K. To have information maintained by the agency about them kept confidential.
- L. To have access to information maintained by the agency about them within a framework of agency guidelines which take into consideration others' rights to privacy, and to correct errors contained in those records.

*American Public Welfare Association. Standards for Foster Family Services Systems for Public Agencies. Children's Bureau, Administration for Children, Youth and Families, Department of Health, Education and Welfare. DHEW Publication No. (OHDS) 79 30231.

Code of Ethics For Foster Parents*

Preamble

The mission of the National Foster Parent Association is to support foster parents in achieving safety, well-being, and permanency for the infants, children, and youth in their care commensurate with the Adoption Assistance and Child Welfare Act passed in 1980, and the Adoptions and Safe Families Act passed in 1997. The Code of Ethics for Foster Parents begins by emphasizing that family foster care is an integral component of the child welfare system which:

- Recognizes the rights of children and youth to safe, nurturing relationships, intended to last a lifetime;
- Assists parents to regain custody or make alternative plans, intended to be permanent, for their children and youth;
- Emphasizes the developmental needs of children and youth
- Provides each child or youth with a foster parent and social worker who have the skills to support the child or youth's safety, developmental, and permanency needs, and provide foster parents and social workers with the supports necessary to develop and use these skills;
- Designs family foster care as a part of a comprehensive, coordinated, inter-disciplinary service delivery system;
- Provides legal representation to ensure timely and skillful responses to case plans involving court proceedings;
- Collects, analyzes, and disseminates accurate and relevant data about children, youth, and their families leading to informed policies, programs, and practices; and
- Supports family foster care – and all child welfare services – with effective and accountable leadership in city halls, governors' offices, national organizations, the judiciary, the federal government, Congress, and the White House (National Commission on Family Foster Care, 1991, p. 5).

Historical Perspective and Definitions

The Code of Ethics for foster parents is based on the definition of family foster care established by the 1991 National Commission on Family Foster Care, sponsored by the Child Welfare League of America and the National Foster Parent Association. It reframed the historical term, "foster family care" to "family foster care," to emphasize the importance of family. This is based on the premise established by the first White House Conference on Children in 1909 (Rycus & Hughes, 1998) and

*National Foster Parent Association, <http://nfpaonline.org/page-1020550>

established by the first White House Conference on Children in 1909 (Rycus & Hughes, 1998) and the United Nations Convention on the Rights of the Child in 1997 that children need and have the right to a family life. Family foster care: An essential child welfare service option for children and parents who must live apart while maintaining legal and, usually, affectional ties. When children and parents must be separated because of the tragedy of physical abuse, neglect, sexual abuse, maltreatment, or special circumstances, family foster care provides a planned, goal-directed service in which the care of children and youth takes place in the home of an agency-approved family. The value of family foster care is that it can respond to the unique, individual needs of infants, children, youth, and their families through the strength of family living, and through family and community supports. The goal of family foster care is to provide opportunities for healing, growth, and development, leading to healthier infants, children, and youth, and families, with safe and nurturing relationships intended to be permanent (National Commission on Family Foster Care, 1991, p. 6).

Foster Parent: NFPA definition: Includes those providing kinship, guardianship, resource and family foster/adoptive care.

Statement of Purpose

The Code of Ethics is a public statement by the National Foster Parent Association that sets clear expectations and principles to articulate basic values and to guide practice. Family foster care is a public trust that requires foster parents, with essential supports from their agencies, to be dedicated to service for the welfare of the children in their care. Each foster parent has an obligation to maintain and improve the practice of fostering, constantly to examine, use and increase the knowledge upon which fostering is based, and to perform the service of fostering with dignity, integrity, and competence.

Principles

Successful family foster parenting includes competencies in the following domains:

Principle 1: Providing a safe and secure environment

Principle 2: Providing a loving, nurturing, stable family care environment.

Principle 3: Modeling healthy family living to help children, youth, and families learn and practice skills for safe and supportive relationships.

Principle 4: Providing positive guidance that promotes self-respect while respecting culture, ethnicity, and agency policy.

Principle 5: Promoting and supporting positive relationships among children, youth, and their families to the fullest possible extent.

Principle 6: Meeting physical and mental health care needs.

- Principle 7:** Promoting educational attainment and success.
- Principle 8:** Promoting social and emotional development
- Principle 9:** Supporting permanency plans
- Principle 10:** Growing as a foster parent - skill development and role clarification; participation in training, professional or skill development, and foster parent support organizations and associations.
- Principle 11:** Arranging activities to meet the child's individual recreational, cultural, and spiritual needs.
- Principle 12:** Preparing children and youth for self-sufficient and responsible adult lives.
- Principle 13:** Meeting and maintaining all licensing or approval requirements.
- Principle 14:** Advocating for resources to meet the unique needs of the children and youth in their care (National Commission on Family Foster Care, 1991, p. 17).
- Principle 15:** Collaborating with other foster parents and the child welfare team, building trust and respecting confidentiality.
- Principle 16:** Promoting decisions that are in the best interest of the child/youth, promoting safety, well-being, and permanence.
- Principle 17:** Supporting relationships between children and youth and their families.
- Principle 18:** Working as a team member.

Context

A Code of Ethics for Foster Parents must be viewed within the context of the service delivery system in which individual foster parents are affiliated. Foster parents recognize that while they have the solemn responsibility for the 24-hour care of the children placed with them, their abilities and resources are influenced by caseworkers, the role reciprocals. The National Foster Parent Association urges social work professionals to view the Code of Ethics for Foster Parents within the Code of Ethics for Social Workers, promulgated by the National Association of Social Workers: competence, dignity, integrity, importance of human relationships, service, and social justice (National Association of Social Workers, 1996, p. 1).

References

- National Commission on Family Foster Care (1991). A blueprint for fostering infants, children, and youths in the 1990's. Washington, DC: Child Welfare League of America.
- National Association of Social Workers (1996). NASW Code of Ethics. Washington, DC.

Indian Child Welfare Act (ICWA)*

Purpose

The purpose of the Indian Child Welfare Act is to help promote the stability and security of American Indian tribes and families (25 U.S.C. § 1902).

Congress recognized that a large number of American Indian families had been torn apart by the often unwarranted removal of the children by non-tribal public and private agencies. (25 U.S.C. §1901(4)). These children were placed in foster or adoptive homes that were non-Indian, affecting the children's cultural upbringing (25 U.S.C. §1901(4)). The Indian Child Welfare Act establishes minimum federal standards for the removal of American Indian children and the placement of these children in foster or adoptive homes. It also provides funds to tribes for the operation of child and family services programs (25 U.S.C. §1902).

Jurisdiction

1. Unless jurisdiction is otherwise vested in a state by federal law, the act gives the tribe exclusive jurisdiction over any American Indian child who resides or is domiciled within the reservation (25 U.S.C. § (a)).
2. If the child is a ward of the tribal court, that court has exclusive jurisdiction over the child regardless of the residence or domicile (25 U.S.C. §1911(a)).
3. In the absence of good cause to the contrary or the objection of either parent, a state court must transfer any foster care or termination of parental rights proceeding concerning an Indian child not domiciled or residing within the reservation of the Indian child's tribe to the jurisdiction of the tribe (25 U.S.C. §1911(b)).
4. The child's tribe and custodian may intervene at any point in a state court proceeding when that proceeding addresses either foster care placement or termination of parental rights (25 U.S.C. §1911(c)).
5. All judicial proceedings, public acts and records of an American Indian tribe which are applicable to American Indian child custody proceedings must be given full faith and credit (25 U.S.C. §1911(d)).

* Developed by National Association of Foster Care Reviewers and published in Heather Craig-Oldsen, Foundation Training for New Foster Care Reviewers, Atlanta, GA 1998 through funding from Administration on Children, Youth and Families, Children's Bureau.

Definitions

- Indian** Any person who is a member of an Indian tribe, or who is an Alaska native and member of a regional corporation as defined in 1606 of title 43 (25 U.S.C. §1903(3)).
- Indian Child** Any unmarried person who is under age 18 and is either: (a) a member of an Indian tribe or (b) eligible for membership in an Indian tribe and the biological child of a member of an Indian tribe (25 U.S.C. §1903(4)).

Custody Proceedings Covered by the Act

The Act applies to:

1. Involuntary foster care placement (voluntary placement is covered separately).

In order to remove an American Indian child from the home, there needs to be "clear and convincing evidence" that the continued custody of the child by the parents or Indian custodian is likely to result in serious emotional or physical damage to the child (25 U.S.C. §1912(e)). The act applies not only to the initial foster care placement, but also to all subsequent placements unless the child is being returned either to the parents or the Indian custodian from which the child originally was taken (28 U.S.C. §1961(b)).

2. Termination of parental rights.

In order to terminate parental rights there must be a showing that the continued custody of the child by the parent or Indian custodian is likely to result in serious emotional or physical damage to the child. This finding must be supported by evidence beyond a reasonable doubt (25 U.S.C. § 1912(f)).

3. Pre-adoptive and adoptive placements.

Pre-adoptive placement is the "temporary placement of an Indian child in a foster home or institution after the termination of parental rights, but prior to or in lieu of adoptive placement" (25 U.S.C. §1903(iii)). The purpose of a pre-adoption proceeding is to insure that all placements are subject to the protections afforded by the act, and that the act's adoptive placement preferences cannot be avoided by labeling an Indian child as not-adoptable (Bureau of Indian Affairs Report 1984 (67)). Adoptive placement is the permanent placement of an American Indian child, which includes any action resulting in a final decree of adoption (25 U.S.C. §1903(iv)).

Criteria for Placements

The Indian Child Welfare Act describes the criteria that must be met when placing a child in foster care or pre-adoptive care initially and when reviewing the child's placement. The child must be placed in a setting that will meet any special needs that child may have and will also be the least restrictive setting which most approximates a family. The foster or pre-adoptive home must be within a reasonable proximity to the child's natural home. Preference shall be given, in the absence of good cause to the contrary, to a placement with (i) a member of the Indian child's extended family, (ii) a foster home licensed, approved, or specified by the Indian child's tribe, (iii) an Indian foster home licensed or approved by an authorized non-Indian licensing authority or (iv) an institution for children approved by an Indian tribe or operated by an Indian organization which has a program suitable to meet the Indian child's needs (25 U.S.C. §1915(b)).

When placing an American Indian child in an adoptive placement, preference shall be given, in the absence of good cause to the contrary, to a placement with (1) a member of the child's extended family, (2) other members of the Indian child's tribe, or (3) other Indian families (25 U.S.C. §1915(a)).

Multiethnic Placement Act of 1994 (MEPA) and Amendment of 1996 (IEP)*

The Howard Metzenbaum Multiethnic Placement Act of 1994 (MEPA), 42 U.S.C.A. §5115a, prohibits denial or delay of placement for foster care or adoption by any agency that receives federal funds because of the child's or foster/adoptive parent's race, color or national origin. The law was intended to:

- Decrease the time children wait to be adopted.
- Prevent discrimination in the placement of children on the basis of race, color or national origin.
- Prevent discrimination on the basis of race, color or national origin when selecting foster and adoptive placements.
- Facilitate the development of a diverse pool of foster and adoptive families.

MEPA was enacted to encourage trans-racial placements of children when appropriate same-race placements are not available. The act specifically permitted the consideration of a child's cultural, ethnic or racial background and the ability of a potential foster parent to meet the child's related needs as one of many factors to consider in determining the best interests of a child. The Department of Health and Human Services published Policy Guidance in the Federal Register on April 25, 1995, to be used as guidelines for compliance by agencies.

In August of 1996 Congress amended MEPA. The Interethnic Provisions of 1996 P.L. 104-188 was enacted in order to strengthen its nondiscriminatory provisions and to provide stiff penalties for violation of the act. The anti-discrimination provisions of MEPA/IEP now state that any public or private agency or entity that receives federal assistance **cannot**:

- Deny to any person the opportunity to become an adoptive or foster parent on the basis of the race, color or national origin of the adoptive or foster parent or the race, color or national origin of the child involved in the foster or adoptive placement; and
- Delay or deny the placement of a child for adoption or into foster care on the basis of the race, color or national origin of the adoptive or foster parent or the race, color, or national origin of the child involved in the foster care or adoptive placement.

IEP repealed language in MEPA that allowed States and other entities to consider the cultural, ethnic, or racial background of a child, as well as the capacity of the prospective parent to meet the needs of such a child.

* Developed by National Association of Foster Care Reviewers and published in Heather Craig-Oldsen, Foundation Training for New Foster Care Reviewers, Atlanta, GA 1998 through funding from Administration on Children, Youth and Families, Children's Bureau.

Non-compliance with this act is a violation of Title VI of the Civil Rights Act of 1964, 42 U.S.C.A. §2000d et seq. Any person who believes that she or he has been a victim of a violation of the act has a right to bring an action for relief in the appropriate U.S. District Court. Any entity found in violation of the law will lose considerable federal matching funds. MEPA does not affect the Indian Child Welfare Act of 1978, 25 U.S.C. 1901 et seq. (42 U.S.C.A. §5115a(f))

MEPA/IEP - Multiethnic Placement Act of 1994 (MEPA), part of Improving America's schools Act of 1995, Public Law 103-382, #551-554, 108 Stat. 4056-4057 and Removal of Barriers to Interethnic Adoption (IEP), part of the Small Business Job Protection Act, Public Law 104-188, 110 Stat. 1755 #1808

Fostering Connections to Success and Increasing Adoptions Act

Improving lives and opportunities for children in foster care

The Fostering Connections to Success and Increasing Adoptions Act (H.R. 6893/P.L. 110-351) will help hundreds of thousands of vulnerable children find a safe, loving and permanent home by increasing opportunities for adoption and relative guardianship. It also will improve critical education and health care services for children in foster care and better prepare older youth for adulthood by extending federal support for transition programs to age 21. The act also will offer, for the first time ever, important federal protections and support for many American Indian children.

The Fostering Connections to Success and Increasing Adoptions Act will improve the lives and opportunities for children in foster care by addressing several important areas.

The act will help move more children out of foster care and into a safe, permanent home

With relatives

- **Notice to relatives when children enter care.** This increases opportunities for relatives to step in and care for children who are removed from their parents by ensuring the extended family is notified of the removal.
- **Kinship Navigator programs.** This provides “Family Connection” grants for Kinship Navigator programs that connect relatives with the critical support and programs they need when caring for the children of a family member.
- **Subsidized guardianship payments for relatives.** This helps children leave foster care to live permanently with grandparents and other relatives when they cannot return home or be adopted. It provides states federal funds in the form of payments to guardianship families for supporting these children, usually to age 18. In certain circumstances, children may continue to receive guardianship assistance to age 21. The act clarifies that all children who, as of Sept. 30, 2008, were receiving federally supported subsidized guardianship payments through Child Welfare Demonstration (Title IV-E) waivers can continue to receive that assistance. And it clarifies that children who leave foster care after age 16 for kinship guardianship are eligible for independent living services and education and training vouchers.
- **Licensing standards for relatives.** This clarifies that states may waive non-safety related licensing standards for relatives on a case-by-case basis. It also requires the Department of Health and Human Services (HHS) to report to Congress on the use of licensing waivers and on recommendations for increasing the percentage of relative foster family homes that are licensed.

With adoptive families

- **Incentives for adoption.** This increases state incentives to find adoptive families for children in foster care, especially older youth and children with special needs.
- **Adoption assistance.** This increases opportunities for more children with special needs to receive federally supported adoption assistance without regard to income of the birth family.

With birth families and other relatives

- **Establishes Family Connection grants.** This increases resources for Kinship Navigator programs, as described above. It also provides grants for Family Group Decision Making, Family Finding, and Residential Family-Based Substance Abuse Treatment, all of which can help children stay safely with family members and out of foster care. If the child already is in care, these programs help return that child safely to their parents or other relatives.

- **Keeping siblings together.** This preserves the sibling bond for children by requiring states to make reasonable efforts to place brothers and sisters together when they must be removed from their parents' home, provided it is in the children's best interests. In the case of separated siblings, states must make reasonable efforts to provide for frequent visits or other interaction, unless it would be harmful to the children.

The act improves healthcare, education and opportunities for children in foster care

- **Foster care for older youth.** This provides federal support to states that extend foster care services one to three years for young people who turn 18 without a permanent family. This significantly increases the young person's opportunities to successfully transition to adulthood.
- **Educational stability.** This helps children in foster care, guardianship and adoption to continue their education with as little disruption as possible. It requires states to make sure children placed in foster care can stay in the same school, if possible, or be transferred promptly to a new school, if it is not. The act also provides more federal support for school-related transportation costs.
- **Healthcare coordination.** This helps improve health care for children in foster care by requiring state child welfare and Medicaid agencies to: better coordinate health care; ensure appropriate screenings, assessments and follow-up treatment; share critical information with appropriate providers; and provide oversight of prescription medications.

The act increases support for American Indian and Alaska Native children

- **Direct access to federal support for Indian tribes.** This offers, for the first time ever, the same federal foster care and adoption assistance programs and protections to American Indian and Alaska Native children that all other children receive.
- **Technical assistance and implementation services.** This requires HHS to provide services to improve permanency outcomes for Indian children and their families.

The act improves training for people working with vulnerable children

- **Extended federal support for training of staff.** This provides more federal support to train people who are caring for and working with children in the child welfare system. This includes relative guardians, staff of private child welfare agencies, court personnel, attorneys, guardian ad litem, and court appointed special advocates.

For further information or for a copy of a more detailed description of H.R. 6893, please contact **JooYeun Chang** at 202.728.2004 ext. 35004 or JChang@casey.org.



www.casey.org

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