

## MODULE IX: UNDERSTANDING PRIMARY FAMILIES

### Note Taking Guide

At the end of this module, you will be able to:

- Discuss common reactions to loss the primary parents may experience when their children are in out-of-home care
- Discuss the advantages to the child when there is positive interaction between primary parents and caregivers or adoptive parents
- Discuss ways caregivers or adoptive parents can involve the primary parents in decisions regarding the care of his or her child
- Explain the importance of maintaining strong sibling connections

### Introduction

- Working with the primary family is an essential part of being on the child welfare team.
- Caregivers and adoptive parents need to have an understanding of the dynamics of primary families.

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### Collaboration

Caregivers and adoptive parents must be aware of cultural differences and misassumptions that may be barriers to collaboration.

A significant number of primary parents have trauma histories.

Strategies for collaboration include:

- Respect for one another
- Seek conflict resolution
- Permission for honesty
- Focus on the best interest of the child
- Communication



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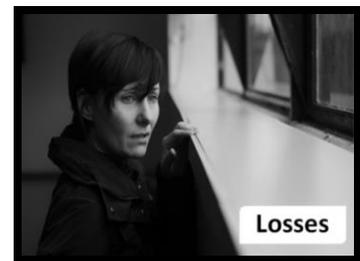
## Reactions of Families with Children in Care

### Families experience:

- Psychological distress or trauma
- Threats to self-esteem
- Subjected to criticism and shame
- Conflict with strong cultural values
- Reduced income and financial security
- Emotional changes

### Reactions:

- Shock or denial
- Anger
- Bargaining
- Depression
- Acceptance



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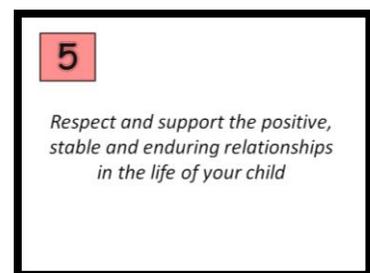
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## A Continuum of Contact

- Positive, stable relationships play a vital role in helping children heal from trauma.
- Primary parents with children in temporary custody retain residual parental rights.
- Frequent contact with primary family can help ease behavior problems, anxiety, and depression.
- Strategies for maintaining contact include:
  - Be a support system
  - Mentor
  - Allow time for trust to develop



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### Sibling Connections

- Siblings should be placed together. If that isn't possible, they should have frequent opportunities for visitation.



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List three ways you will use the information from this training:

- 1.
- 2.
- 3.

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### Myths and Realities

Myth	Reality
Primary parents who abuse, neglect, or relinquish their children do not care about them.	Primary parents do not plan to abuse or neglect children. Maltreatment of children usually occurs following overwhelming stress. Parents who maltreat their children may, in fact, love their children dearly, but may not be able to cope with circumstances or may not know how to parent successfully. Furthermore, parents who voluntarily relinquish their children usually do so with tremendous ambivalence; they do not walk away from these relationships without significant, lifelong grief.
Most primary parents are violent, dangerous people who pose a threat to the families caring for their children.	Some primary parents have a history of violence or mental health problems that indicate risk for caregivers and adoptive parents. Most primary parents, however, can build a collaborative relationship with caregivers that can be invaluable in the rapid reunification of the family. When the caseworker or caregiver or adoptive parent is unsure about the level of risk posed by a primary family, relationships should be built with deliberate care along a continuum of openness, with the safety of caregivers and adoptive parents of paramount concern.
Foster and kinship families are expected to function as caseworkers or therapists for primary families.	Foster and kinship families may serve in key roles as mentors with primary families. When caregivers and primary families develop a partnership, this will be part of a total intervention plan developed by the child welfare team. The intervention planning will involve the caregiver and will spell out the expectations for the caregivers, when those interventions will occur, and why they are planned to improve the outcomes for the child.

Myth	Reality
<p>The agency is "setting up" foster and kinship caregivers or adoptive parents to be hurt by dangerous primary parents.</p>	<p>The agency will not expect caregivers or adoptive parents to place themselves at risk in working with primary families. The agency will always consider risks when developing a partnering plan, and caregivers or adoptive parents will be involved in the development of the plan. Communication between caregivers or adoptive parents and primary families may, at times, need to occur through an agency intermediary, usually the caseworker, to protect the safety of the child and the caregiver or adoptive parent.</p>
<p>Foster and kinship families are expected to work with all primary families of children who come into care.</p>	<p>Foster and kinship families are expected to communicate with the primary parents of all children. That communication may take many forms, depending on the characteristics of the primary family, the wishes of the foster or kinship family, and the stage of the developing relationship between the caregivers and primary families. Relationships may begin with a journal of the child's progress, move into telephone calls between the primary and caregivers, meetings during supervised visits at the agency, and may eventually evolve into unsupervised visits at the foster, kinship, or primary family home prior to reunification.</p>
<p>Foster and kinship caregivers will be responsible for caring for the primary parents as well as the child.</p>	<p>The role of the foster and kinship caregiver is to provide a safe, temporary home for children who are unable to remain in their primary homes. Foster and kinship caregivers are part of a team whose primary goal is reunification. Visitation and communication are essential to achieving that goal. However, caring for the primary parent is <i>not</i> an expectation of the foster or kinship caregiver; it would actually be counterproductive to the development of adult, responsible behavior by the primary parent.</p>

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### Benefits, Challenges, and Strategies

#### Benefits

- Separation trauma and anxiety are greatly reduced.
- Continuity of care and attachments are maintained for the child in care.
- Planning and implementing visits are simplified, making it possible to visit more frequently, and helping to assure more productive visits.
- Reunification can occur more quickly, or an alternative plan for permanence can be made in a timelier manner.
- The primary family can use the caregiving family as a role model and can be mentored to make changes that enhance their personal development and parenting skills.
- When the two families work collaboratively, loyalty issues for the child are reduced, and the child is less likely to create divisiveness and resentment between the two families.
- Caregiving families can maintain contact with the child after reunification, which prevents additional separation trauma.
- Caregivers and adoptive parents can become a permanent support system for the child and family.

#### Challenges

- Families may have different values, backgrounds, cultures, parenting styles, beliefs, knowledge, and skills. This may create disagreements, particularly on the best means of caring for the child.
- The families may not like one another.
- The caregiving or adoptive family may be fearful of primary family members.
- The primary family's presence may, at times, interfere with the caregiving family's schedule, habits, traditions, or decisions.
- The primary family may be jealous of the foster or kinship family. The family may feel embarrassed and ashamed, and may worry that the children may not want to return home.

## **Strategies**

### **Respect for one another**

The primary team members must recognize that each member brings individual viewpoints, values, and culture to the team process. The primary care team should seek to utilize diversity to achieve benefits for the child.

### **Seek conflict resolution**

The primary care team must be committed to resolving differences of opinion regarding the case plan or intervention strategies. Differences of opinion that do not affect the case plan are irrelevant to the case planning process.

### **Permission for honesty**

The primary care team needs to set an atmosphere of honesty with one another regarding case goals and planning. Each member needs to be honest regarding the actual agenda for the case process. There must be freedom for members to explore the meaning of behaviors and words with one another.

### **Focus on the best interests of the child**

The primary care team must agree to act in a manner that helps children. The primary care team must keep revisiting what is best for the children.

### **Communication**

The primary care team must have established channels of communication that provide information in a timely and efficient manner.

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### Reactions of Families with Children in Care

#### ***Shock or Denial***

A parent experiencing this reaction to the loss of her child might say:

*"I'm going to get you back! As soon as I go to court, you will be coming home!"*

*"I took care of my children better than anyone else in this neighborhood! You should be taking a look at my neighbors! They really neglect their children!"*

#### ***Anger or Protest***

A parent experiencing this reaction to the loss of her child might say:

*"Don't you call that woman 'Mama!' I'm your mother! You don't have to do what she says!"*

*"I think the foster parents are abusing/mistreating my child!"*

#### ***Bargaining***

A parent experiencing this reaction to the loss of her child might say:

*"I've completed two of the parenting classes. When can my children come home?"*

*"It will never happen again."*

*"I'll ask my boyfriend to leave."*

#### ***Depression***

A parent experiencing this reaction to loss of her child might say:

*"There is no reason to attend visits, I'm not getting them back."*

*"I don't have the energy to fight anymore to work through this case plan and the agency has already made up its mind."*

#### ***Acceptance***

A parent experiencing this reaction to loss of her child might say:

*"Look what the adoptive family has to offer"*

*"My child is better off without me as a parent."*

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### Strategies For Maintaining Contact Between Children And Their Families

- Exchange letters with child's family
- Call child's parents and encourage them to call the child
- Request pictures of child's family to display in child's room
- Give parents pictures of child
- Share copies of homework and report cards
- Have positive view about primary family members
- Talk openly about family to child
- Send snacks or activities for visit
- Praise parents' progress
- Provide written report for child's case worker
- Share monthly progress reports
- Host or arrange sibling visits
- Brag to primary parent about child
- Request cultural information from primary parents
- Transport child to visit
- Talk with primary parent(s) at visit
- Meet child's family at placement
- Maintain a non-threatening attitude
- Refer to child as "your child" to primary parents
- Share parenting information
- Attend meeting
- Help primary parents find community resources
- Encourage and reassure reunification when appropriate
- Share child's life book with parents
- Attend training to learn how to work directly with primary parents
- Learn about, understand, and respect primary parent's culture
- Transport child to and from parent's home
- Review child's visits with parents
- Give parents verbal progress reports
- Ask parent to come to appointments
- Transports primary parents to meetings
- Invite child's family to attend school programs
- Assist in planning child's return to primary home
- Welcome child's parents into your home
- Attend parenting classes with primary parents
- Serve as support to family following reunification
- Provide respite care

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### Individual Reflection

*Please take a few minutes to reflect on what you have learned in the Preservice training and how it applies to you. Give this sheet to the agency worker who is completing your homestudy.*

1. What are your biggest fears in working with primary families? What do you think will help ease your fears?

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2. What strategies do you plan to use to keep the primary parents involved the child's life?

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3. What strategies do you plan to use to help the child maintain connections with siblings, if he or she has any?

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