States Work Together to Reunite Families

By Dan Logsdon [1]
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Parents play the most essential role in a child’s life, but when families struggle or break down, states often become responsible for providing a safe and secure home base. There has been a shift in focus, however, to help families overcome challenges so that more parents and children can be reunited.

According to Tennessee state Rep. Raumesh Akbari, there is a real commitment in her state to stabilize children in need, but there is also an effort to stabilize the parents so the family can ultimately be reunited.

While state foster care agencies will always focus first on protecting children, providing assistance for families has shown positive outcomes. There has been an increased focus on providing new techniques to strengthen parents and foster parents. Many states are now implementing projects that help provide training and capacity building programs for families.

Nevada is one of a handful of states using a new tool called the Quality Parenting Initiative, or QPI. Developed by the Youth Law Center, QPI is an approach to strengthening foster care and enhancing a foster parent’s ability to meet the tremendous challenge of caring for kids.

Reesha Powell, deputy administrator of child welfare with the Nevada Department of Health and Human Services, said QPI empowers child welfare agencies to better partner with foster parents, but also partners foster families with the child’s family to assist with the reunification process or long-term solutions for the kids. QPI achieves this by creating relationships between agencies and foster parents to help build capacity and ultimately better care for the kids.

“It’s really about putting a team around that child to get them to reach permanency more timely,” Powell said.

According to Powell, QPI represents a significant change from past practice.

“When I first came into this practice, there was this belief that children were better served if they were in foster care and removed from their family … and I think nowadays we do a much better job of trying to keep children in their birth home or in their family home and try to work with the family to mitigate whatever circumstances exist within that family that are causing neglect or abuse to occur. So it’s a paradigm shift for us,” Powell said.

However, Powell said the paramount concern is for the welfare of the children. “Obviously if there is an immediate risk of danger to a child or what is called ‘present danger’ to a child, we have the ability to immediately remove them from the situation and place them in alternative placement whether it be with a relative or a foster care provider. That is typically how kids come into care … if we have been working with a family trying to mitigate the circumstances within the home and it appears that it’s not working, we can remove the child at that point.”
“The bottom line is that foster care is supposed to be a temporary help. What we want to make sure is that the child—who has probably encountered some sort of trauma in being removed from the home—is in the best possible position,” Akbari said. “It is important to make sure that child feels loved, that they have adequate mental health counseling and family support, that there is an ultimate goal to get them back into their house and, of course, that they have the same educational opportunities so that they don’t have this transient lifestyle where they are constantly moving and not being able to have a foothold in the educational system.”

State court systems are also stepping up to help children, especially those who are victims of the opioid epidemic.

“Everything we know about opioid addiction tells us that an addicted parent will be unlikely to move from addiction to safe parenting, or achieve sobriety, within the timeframes set for children to have a proper nurturing home.” Ohio Chief Justice Maureen O’Connor said. “Recovering in time to meet the normal permanency timeframes is extremely difficult for parents with opiate addictions. Why? Because the paths to recovery can be long and often there’s a scarcity of resources to support addicts. Permanency planning must be based on the best interests of the child, and the child’s needs and the parent’s recovery paths usually don’t line up when it comes to opioids.”

The Ohio court system is working to tackle this issue with Family Dependency Treatment Courts, or FDTCs, O’Connor said.

“Currently, 30 of Ohio’s 88 juvenile courts have an FDTC that’s certified by the Supreme Court of Ohio,” she said. “The number of FDTCs has grown in the last few years, yet we need to recruit more counties to launch FDTCs. National research findings have demonstrated better results for families when substance-abusing mothers participate in a family drug court.”

According to O’Connor, early identification of cases involving substance use disorder, immediate access to treatment services and support and more judicial oversight to ensure accountability of all parties can lead to better outcomes for families.

Nationally, the Interstate Compact for the Placement of Children, or ICPC, is working to catch up with the states. The Association of Administrators of the Interstate Compact on the Placement of Children, or AAICPC, is working to pass a new interstate compact that will address the deficiencies of the current compact, which was established in 1960.

As the AAICPC notes in a policy brief issued in 2013, “While the 20th century welcomed the current ICPC as a novel and useful process for negotiating interstate placements and sustaining care and well-being of children placed beyond a state’s borders and its jurisdictional authority ... the current ICPC at best, provides for a fragmented system that breeds an inefficient and sometimes ineffective use of time and resources on the part of state and county governments, the courts, and stakeholders ...”

Particularly important is the new ICPC’s approach to the interstate placement of children. The current compact causes delays in interstate placements that leave children in foster care awaiting interstate processing and placement six months to one year or more. The traumatic impact of state intervention on children can be lessened if the child can be placed with relatives quickly. However, a state’s ability to bring about these cross-border, emergency placements are difficult given the lack of interstate cooperation, even when willing relatives are available.

Addressing this issue is one of the goals of the Regional Judicial Opioid Initiative, or RJOI. RJOI comprises of state court leaders in Illinois, Indiana, Kentucky, Michigan, North Carolina and Tennessee and is the result of the Regional Judicial Opioid Summit held in 2016.

Officials in RJOI states are noticing a significant increase in cases where expedited, cross-border emergency
placement would help already traumatized kids. While several counties situated on state borders have developed agreements to expedite these types of placement with family members, these agreements, while helpful, are inadequate to address the scope of the problem.

Emergency placement and foster care is a difficult issue to tackle, but states are adapting. Through best practices and establishing partnerships with outside agencies and leaders, states are demonstrating that by continuing to work together and focusing on supporting families, outcomes can continue to improve.

“Our children are our future, I can’t stress this enough,” Akbari said. “I think that if we can get them in a place where they can be whole in spite of what they’ve experienced then we are going to produce better results and that is the ultimate goal.”


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