Shared Parenting

Competencies and Learning Objectives

Competency: Able to initiate and encourage a positive partnership between foster parents and birth parents.

Objectives:
1. Can give at least two examples of the practice of the 6 principles of partnership impacting the development of shared parenting partnerships.
2. Can state two reasons for identifying common ground (connections) between foster parents and birth parents.

Competency: Able to identify fears associated with Shared Parenting that create challenges to partnerships and develop strategies for dealing with these fears.

Objectives:
1. Can name at least 3 fears of each partner (foster parent, birth parent and social worker) that may occur related to shared parenting.
3. Can identify 3 strategies that can be utilized for helping foster parents, birth parents and social workers deal with those fears.

Competency: Able to understand how partnership between foster parents and birth parents can play a role in reunification and making a permanent plan for the child.

Objectives:
1. Can understand the Alliance Model and can explain the concept of partnership in the model.
2. Can name at least three boundary concerns that might be negotiated to enhance the partnership between foster parents and birth parents after reunification.
3. Can identify the steps for preparing social workers and both sets of parents for the initial shared parenting meeting.

Competency: Able to apply strategies to help birth parents and foster parents work in partnership toward the best interests of the child.

Objectives:
1. Can explain the importance of identifying underlying needs when determining strategies that build partnerships.
2. Can name two additional strategies for building partnerships between foster parents, birth parents, and the child welfare social worker.
3. Can identify two steps, consistent with job/role in the agency, which will be taken to support shared parenting.
Competency: Able to understand resistance and identify strategies for overcoming resistance as challenges to practice occur.

Objectives:

1. Can identify at least two reasons foster parents and social workers, and other child welfare community partners may resist the shift to the practice of shared parenting.
2. Can identify two approaches that may help foster parents and workers feel safe and more confident during the transition to shared parenting practice.
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An Introduction to Shared Parenting

Framework of Shared Parenting

Shared Parenting represents an active alliance among the important people in the child’s life—birth parent, foster parents, and agency workers. Recognizing that the connection between parents and their children is the single most powerful relationship upon which to preserve or rebuild families, shared parenting emphasizes establishing an alliance with parents to protect their children rather than just an alliance with children to protect them from their parents.

Within the shared parenting framework, child welfare staff and foster parents work as a team. As with any effective team, players have different roles, responsibilities, and tasks, but each team member has the same goal, in this case, to preserve, or rebuild, the family around the long-term welfare of the child. This requires that the team members form a partnership or positive alliance with the birth parents, always seeking to keep parents focused on the welfare of the child.

Historically, child welfare agencies have primarily emphasized their mission of child protection; therefore, the agency’s primary helping alliance has been with the child. The purpose of this alliance is to ensure that the child’s needs of nurturance and safety are met. Since the main threat to child safety is generally parental behavior, the alliance seeks to shield the child from risk created by the parents. While the intended benefits of safety are real, both the child and the parents may tend to experience the intervention as reducing emotional and physical safety, rather than increasing it.

Shared Parenting Emphasizes Foster Parents as Support not Substitutes

Abbreviated time frames mandated by legislation such as the Adoption and Safe Families Act (ASFA) increase the urgency for foster parents and birth parents to begin working together quickly, whenever possible. ASFA was designed to focus child welfare agencies on the issues of safety, well-being, and more timely permanence for children. In addition to placing children on a fast track to permanency, ASFA significantly changed the foster parent role.

In the shared parenting framework, foster parents play vital roles, supplementing and supporting birth families rather than substituting for them. Therefore, they need explicitly defined social contracts with birth families. Foster parents must be prepared to care for a child independently while psychologically sharing the child with others.

A Sharing Partnership vs. a Controlling Intervention

With the mission of protecting the child, the agency’s natural tendency is to align with the child. The agency seeks to restore the flow of nurturance and limit excessive parental control. Since this intervention is mostly involuntary on the part of the parent, the agency must first establish blame and damage, or risk of damage, before it can legally intervene. These two circumstances generally cause the parents to see the agency as a threat to their attachment to their child.

Agencies often use attachment to extract change in parental behavior. The offered social contract with the parent is, “If you meet the term of the case plan, you can keep your child in your family,” The threatened loss of the child is used by the agency to socially control the parental behavior that is placing the child at risk.
A problem of a control-centered intervention is that it tends to place the parents in a childlike position. In terms of family systems, this places the parent below the parental boundary and confuses the parent-child relationship. Though control of parental behavior may be necessary to protect a child, ultimately the success of the intervention will require attention to parental needs as well. Since 99 percent of interventions begin with the preservation of the family or the return of the child to the family as a goal, nurturing the child through the parent is an essential condition for the future.

Though services are offered to the parent and are intended to support the parent, the parent may not experience that support as nurturance. To the extent that the parents have been engaged around their needs, especially the needs and goals for the development and safety of their children, the offers may be experienced as nurturance. To the extent that parents are engaged primarily around the agency’s needs to ensure child safety, the parents may experience the offer in much the same as the truant youth who is ordered to attend school, presumably for his own benefit. If the youth were experiencing success at school, the order would probably not be necessary. The order in and of itself, however, will not alter the experience of attending school.

At worst, the child may feel conflict between loyalties to the birth family, foster family, and adoptive family. When the parents compete for the child’s loyalty, the child is again left with the dilemma of having to manage all the adult alliances, diverting energy from growth to psychological security.

The Child’s Experience of Shared Parenting

Entry in care presents new dilemmas for children. Attaching to the foster family may be an essential condition for the child to get his needs met. However, this attachment may jeopardize his attachment to the birth family. Maintaining the birth family attachment may also similarly reduce the motivation of the foster parents to form an attachment with the child, which is an essential component in their motivation to nurture and protect the child. The child may give up on the parental attachment, fail to attach to the foster family or seek to maintain a dual, and somewhat secret system of parallel alliances. Any of these are costly choices for children whose energies are spent trying to manage or “fix” adult relationships. The shared parenting framework provides ways for the child to openly seek and maintain all connections necessary to his or her needs.

Implications for Practice

Within the shared parenting framework, the word team is used to describe the staff, foster parents and other professional working together. In time birth parents can also become team members. However, at the beginning of the relationship, the best that agencies and foster parents may be able to hope for is to negotiate good working agreements with birth parents. Team building requires time and trust.

Overwhelmingly, agency efforts are directed toward the goal of maintaining the birth family as the primary parenting resource for children. Given this fact, agency efforts are judged by the extent to which they strengthen parenting capacities and family attachments. Foster parents can help or hinder these efforts. So foster families need to know the framework or model the agency uses in its child welfare practice. If a person is primarily interested in becoming a foster parent to protect and save children from harmful parents, his or her needs may not be met through the foster care program. The agency recruitment and public-education efforts must reflect the philosophy of the agency’s model of practice.

Adapted from Child Welfare Institute Shared Parenting Leader’s Guide 2002
SIX PRINCIPLES OF PARTNERSHIP

1. Everyone desires respect.

This principle is based on the idea that all people have worth and recognizes everyone’s right to self-determination, to make their own decisions about their lives. Acceptance of this principle leads one to treat clients with respect and to honor their opinions and worldview. True partnership is impossible without mutual respect.

2. Everyone needs to be heard.

This principle is based on Covey’s “seek first to understand” and is accomplished primarily through empathic listening. While empathic listening looks very much like active or reflective listening, what differentiates it is the listener’s motivation. Active and reflective listening are techniques that are often used to manage or manipulate someone’s behavior so that the listener can advance his own agenda. Empathic listening is motivated by the listener’s desire to truly understand someone’s point of view- to enter someone’s frame of reference- without a personal agenda. When one feels heard and understood, defensiveness and resistance are unnecessary, and solutions can be sought.

3. Everyone has strengths.

This principle recognizes that all people have many resources, past successes, abilities, talents, dreams, etc. that provides the raw material for solutions and future success. As “helpers” we become involved with people because of their problems; these problems then become a filter that obscures our ability to see strengths. Acceptance of this principle doesn’t mean that one ignore or minimizes problems; it means that one works hard to identify strengths as well as problems so that the helper and the client have a more balanced, accurate, and hopeful picture.

4. Judgments can wait.

This principle recognizes that once a judgment is made, one’s tendency is to stop gathering new information or to interpret in light of the prior judgment. Therefore, since a helper’s judgments can have an immense impact on a client’s life, it is only fair to delay judgment as long as possible, then to hold it lightly, while remaining open to new information and willing to change one’s mind. Acceptance of this principle does not mean that decisions regarding safety cannot be made quickly; it simply requires that ultimate judgments be very well considered.

5. Partners share power.

This principle is based on the premise that power differentials create obstacles to partnership. Since society confers power upon the helper, it is the helper’s responsibility to create a partnership with a client, especially those who appear hostile, resistant, etc. Clients do not owe us their cooperation; we must earn it.

6. Partnership is a process.

This principle recognizes that each of the six principles is part of a greater whole. While each has merit on its own, all are necessary for partnership. Each principle supports and strengthens the others. In addition, this principle acknowledges that putting the principles into practice consistently is hard. Acceptance of the principles is not enough; it requires intention and attention to practice the principles.

Potential Scaling Questions for Use with
Foster Parents and Birth Parents

Foster Parents:
How willing are you to work in cooperation with the birth families of the children you foster?
10- I am very willing and can’t imagine not including them in their children’s lives.
1- I am not willing and do not see the importance of working closely with birth families.

How important is the birth parent’s role in parenting this child?
10- I see the birth parent as vital and an integral part in parenting this child.
1- I don’t see that the birth parent plays any part of parenting this child/ I don’t see their role as important.

Birth Parents:
How open are you to partnering with the foster parents around the care of your child?
10- I feel very open toward working with the foster parents and am willing to work in partnership.
1- I am not willing to work in partnership with the foster parents and do not plan to be cooperative with them.

How confident are you about working in partnership with foster parents?
10- I feel very confident that we can find a way to work together for the good of the child.
1- I am very uncomfortable working closely with foster parents and am not sure that we can find ways to work together.

Follow up questions for birth & foster parents:
What do you think would help you feel more comfortable working with the foster parents/birth parents?
What might help you to move up the scale one point?
What makes you a 2?
What do you think would help you get to a 3 on the scale?
What would it look like if you were a 3 or 4?

Keep in mind when you are asking families what it might take for them to move along the scale that you should only ask them about moving one or two points on the scale.

You may also want to assess how the foster parents feel about Shared Parenting before and after additional in-service training as a potential measure of training effectiveness.
Video Observations for “Family Connections”

When did you see the 6 principles demonstrated by the actions or words of the adoptive parents?


What are the benefits of shared parenting for children when they have been placed for adoption?


What are the benefits of shared parenting for adoptive parents?
Order Form for *Family Connections DVD*

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Number of Copies Requested _____ X $7.50 = Total: ______________

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Mail above order form along with check or money order to:

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**Chicago, IL 60602**

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Go to [http://www.adoptionlearningpartners.org](http://www.adoptionlearningpartners.org) to find the free online course, “Maintaining Connections,” which utilizes excerpts from this *Family Connections* DVD.
**Alliance Model**

We know that there are many types of families. We are going to use for purposes of this example a couple who are connected and their connection has created a child.

What is the job of the parent?

What is the job of the child?

Every family has stressors. What are some stressors that families face?

What happens to the child and the child’s job during times of stress?

Who often gets called when a family is experiencing high levels of stress?

With whom does the agency (historically) align first?

What happens to the parents if/when the agency aligns with the child first?

What does this do to the relationship between the agency and the parents?

How do parents express this?

Developmentally, where would you say the parents are functioning at this point?

When the child is unable to remain safely in the home, who is called?

With whom does the foster parent typically align? Who next?
Why might it be important for the foster parents to align with the birth parents?

What might stress among the adult relationships do to the child’s job?

Who is called in when children are unable to return home and foster parents are, for whatever reason, unable to make a permanent commitment to a child?

With whom do the adoptive parents first align? (first, second, third, and fourth)

Why might it be important for the adoptive parents to align with birth parents, if only psychologically?

What happens to a child when there is stress/conflict among all these adult relationships?

What are the benefits (for children) of having the adults work together-if only symbolically?
The Alliance Model of Child Welfare Practice: Why We Must Work as a Team with Birth Families

The Alliance Model is an idea developed for staff and parents in child welfare to promote partnerships in parenting. This model of practice is even more important today with the passage of legislation such as the Adoption and Safe Families Act, Public Law 105-89, also known as ASFA. ASFA was designed to focus child welfare agencies on the issues of safety, well-being and more timely permanence for children. With abbreviated time frames, it is important that parents of children in foster care begin working together quickly, whenever possible.

This diagram is called “The Alliance Model.” An alliance in a family refers to two members sharing a common goal or interest that is not detrimental to any other members of the family. The lines and arrows in the diagram represent alliances.

The line between the two parents show that they are united, or have formed an alliance, to care for the child and meet his or her needs so that the child can concentrate on growing up and completing important developmental tasks. The slash marks represent a damaged or broken parental alliance. When the positive alliance of parents is damaged or broken, children respond in a variety of ways. Some children who perceive that their parents are not united in seeking the collective good of the family often try to “fix” the family. They begin parenting the parents, as well as younger siblings. When they do this, they often rise above the normal parental boundary line. Other children respond by creating a decoy for all the battling. They may begin acting in ways that capture the parents’ attention. Parents may begin aiming their tensions at the child rather than at each other. In the child’s mind, at least the parents are united again. Other children respond to the parents’ broken alliance by withdrawing, which likewise, can serve to unite the parents around the child’s good. Whatever the response, the energy of the child is directed toward preserving the family, rather than toward the “job” of childhood, which
entails growing into a healthy and strong adult. Consequently, at best, the family is at risk of deteriorating in function. At worst, the family is at risk of disintegrating altogether, leaving the child at risk of being without the love and nurturance needed for him or her to grow and develop.

In this circumstance the child must develop two separate alliances in a two-parent home – one with Mom and one with Dad – in order to survive. No longer can he or she rely on the parental alliance. Children faced with this conflict often shield their loyalty to one parent from the other. Alternatively, they may feign dislike for one parent as a way of preserving loyalty to the other. In either case, the child is emotionally at risk and must divert energy toward social survival in the conflicted world of the adults.

Historically, child welfare agencies have primarily emphasized their mission of child protection; therefore, the primary helping alliance has been with the child. The purpose of this alliance is to ensure that the child’s needs of nurturance and safety are met. Since the main threat to child safety is generally parental behavior, the alliance seeks to shield the child from risk created by the parents. While the intended benefits of safety are real, both the child and the parents may tend to experience the intervention as reducing emotional and physical safety, rather than increasing it.

With the mission of protecting the child, the agency’s natural tendency is to align with the child. The agency seeks to restore the flow of nurturance and limit excessive parental control. Since this intervention is mostly involuntary on the part of the parent, the agency must first establish blame and damage, or risk of damage, before it can legally intervene. These two circumstances generally cause the parents to see the agency as a threat to their attachment to their child.

Agencies often use attachment to extract change in parental behavior. The offered social contract with the parent is, “If you meet the terms of the case plan, you can keep your child in your family.” The threatened loss of the child is used by the agency to socially control the parental behavior that is placing the child at risk.

Although services are offered to the parent and are intended to support the parent, the parent may not experience that support as nurturance. To the extent that the parents have been engaged around their needs, especially the needs and goals for the development and safety of their children, the offers may be experienced as nurture. To the extent that the parents are engaged primarily around the agency’s needs to ensure child safety, the parents may experience the offer in much the same way as the truant youth who is ordered to attend school, presumably for his own benefit. If the youth were experiencing success at school, the order would probably not be necessary. The order in and of itself, however, will not alter the experience of attending school.

The child also may sense the intervention as a threat to his or her emotional security. To the extent that the agency’s alliance with the child creates conflicting loyalty between the parental attachment and the child’s relationship to the agency, the child will experience the situation in a similar way as when conflict began between his or her parents.

A problem of a control-centered intervention is that it tends to place the parents in a childlike position. In terms of family systems, this places the parent below the parental boundary and confuses the parent-child relationship. Although control of parental behavior may be necessary to protect a child, ultimately the success of the intervention will require attention to parental needs as well. Since 99 percent of interventions begin with the preservation of the family or the return of the child to the family as a goal, nurturing the child through the parent is an essential condition for the future.
When safety cannot be ensured within the family, a foster family is frequently chosen for a child. Through the preparation and selection process, foster parents are initially aligned with the agency. Since the primary role of foster parents is to meet the child’s needs for nurturance and safety, the foster family quickly works to form a positive alliance with the child, although today they also form alliances with biological parents.

More than the agency’s alliance with the child, the attachment of the foster family to the child is likely to be perceived by the birth parents as a serious threat to their attachment with the child. The child is presented with a new dilemma. Attaching to the foster family may be an essential condition to getting his or her needs met. However, this attachment may jeopardize his or her attachment to the birth family. Maintaining the birth family attachment may also similarly reduce the motivation of the foster parents to form an attachment with the child, which is an essential component in their motivation to nurture and protect the child. The child may give up on the parental attachment, fail to attach to the foster family or seek to maintain a dual, and somewhat secret system of parallel alliances.

Any of these are costly choices for the child. The best of all possible worlds is that the child can openly seek and maintain all connections necessary to his or her needs. The possibility for this depends on the teamwork of the agency and foster parents and the strength of their partnership with the child’s birth parents.

When a child cannot be parented by his or her birth parents or adopted by a foster family, then another family is found to provide the life-long attachment for the child. When this happens, the adoptive family works to form a positive alliance with the child. Since a stronger attachment is often necessary for a lifetime commitment or attachment to be formed, the adoptive parents may view detaching the child from connections with the agency, foster parents and birth family as a necessary act in ensuring the full attention of the child to the attachment with the adoptive family. Unfortunately, the loss of these connections at the psychological level leaves holes in the child’s identity and undermines the child’s concept of self.

At worst, the child may feel conflict between loyalties to the birth family, foster family and adoptive family. When the parents compete for the child’s loyalty, the child is again left with the dilemma of having to manage all the adult alliances, which diverts energy from growth to psychological security.

When a child in a foster or adoptive home perceives that the adults are not allied around his or her welfare, the child will feel threatened. Maintaining a relationship with the birth family is important to the child because identity and self-concept begin with that alliance. The alliance with the agency is important because the agency represents the power to move children at will, or so it seems to the child. The foster family or adoptive family alliance is important because daily nurturing and care is ensured there. So, when a child perceives that adults are not allied among themselves, the child responds in ways similar to his or her response to parental conflict. The difference is that now there are more alliances to manage or “fix”, and even less energy remains for the child to grow and enjoy his or her childhood. That is why we say the adults in a child’s life must work together as team members or as partners.

**Teamwork** — *Teamwork* involves two or more people working together according to a coordinated plan, in a relationship where team members assume different roles and responsibilities, all designed to reach the same goal. Team members can be relied upon to assume their specific jobs or responsibilities.

Within the alliance model, child welfare staff and foster parents work as a team. As in any effective team, players have different roles, responsibilities and tasks, but each team member has the same goal, in this case, to preserve, or rebuild, the family around the long-term welfare of the child. This requires that the team members
form a partnership or positive alliance with the birth parents, always seeking to keep parents focused on the welfare of the child.

**Partnership**  – A *partnership* is a relationship where two or more parties each contribute something of value in order to receive benefits. The nature of the contribution and the distribution of benefits are defined by the social contract between the parties.

**Social Contract**  – A *social contract* is an agreement entered into by the mutual consent of parties desiring to exchange something of value. When there is coercion, a contract is not valid. When there is no exchange, there is no contract. When there are no contributions, there is no partnership.

Since we define teamwork and partnership a bit differently in the Alliance Model, we usually use the term “team” to describe the staff, foster parents and other professionals working together. Hopefully the birth parents can become team members. However, at the beginning of the relationship, the best we can hope for is to negotiate good working agreements in partnership. Building partnerships builds trust and agreement between people over time.

Within the Alliance Model, the agency’s goal is to establish an alliance with parents to protect their children rather than just an alliance with children to protect them from their parents. Overwhelmingly, agency efforts are directed toward the goal of maintaining the birth family as the primary parenting resource for children. Given this fact, agency efforts are judged by the extent to which they strengthen parenting capacities and family attachments. Foster parents can help or hinder these efforts. Therefore, foster families need to know the framework or model the agency uses in its child welfare practice. If a person is primarily interested in becoming a foster parent in order to protect and save children from harmful parents, his or her needs may not be met through the foster care program. The agency recruitment and public-education efforts must reflect the philosophy of the agency’s model of practice.

Foster parents play vital roles, supplementing and supporting birth families rather than substituting for them. They, too, need explicitly defined social contracts with birth families. Foster parents must be prepared to care for a child independently while psychologically sharing the child with others. Foster parents make a vital contribution to the partnership when they accept a child’s relationships.

The job of public or private child welfare agencies is to preserve, or help rebuild, families at risk of deterioration. The single most powerful relationship upon which to build is the connection between the child and his or her parents.

*Adapted from Thomas D. Morton, “Partnerships in Parenting” and GPS- MAPP Trainer’s Guide, Child Welfare Institute, July 1999*
Seven Dynamics of Change

♦ People will feel awkward
♦ People will initially focus on what they have to give up
♦ People will feel alone
♦ People can handle only so much change
♦ People are at different levels of readiness for change
♦ People will be concerned that they don’t have enough resources
♦ People will revert to old behavior without encouragement
The Birth Parents’ Grief Process
Written by Donna Foster and
Adapted from Charles Horejsi’s “Working with Biological Parents”

SHOCK:
Parent is in disbelief. The words people are saying don’t sink in or make sense. The parent feels like he/ she is sleepwalking. The only thing on his/ her mind is that his/ her child is gone. Behaviors of parents may be: shaking, screaming, crying or swearing at any given time, and overwhelmed with worries about their child. The parent may promise the social worker anything without understanding what they promised. Parent may be in denial and is sure the child will return tomorrow.

PROTEST:
Grief shows itself more physically. The parent may feel sadness or anger and the symptoms could be upset stomach, low or no appetite. He/ she may have headaches, can’t sleep and is very tired. If anger is strong, she may be angry at everyone. The parent may make demands or threats. He/ she may swear or cry for no apparent reason. It may be easier to blame others for the situation than to accept any responsibility. This could be a way of coping with despair and depression.

ADJUSTMENT:
Things start to settle down. The sooner the parent has an ally, such as the social worker and foster parent, the sooner this adjustment occurs. The parent does not worry about their children’s safety or loyalty if trust in the foster parent has developed. The child becomes the focus of the team. Those assisting the birth parent can be the social workers, foster parents, guardian ad litem, therapists and other community resources. The parent builds on their parenting skills and actively participates in co-parenting their children with the foster parents. The social worker, foster parent and birth parent develop a strong Shared Parenting Team. The parent fulfills their obligations and meets the case plan goals.
The Cycle of Need

The Cycle of Need is a visual demonstration of ways behaviors (Expression) demonstrate needs (Underlying Conditions). Solutions (Interventions) can be designed to control the expression of need (Social Control) or can be designed to meet the underlying condition (Nurture or Trust-Building). The Strengths Approach uses strengths to help meet underlying needs.

INTERVENTION STRATEGIES FOR DEALING WITH FEAR & BEHAVIORS

FEAR:

BEHAVIORS:

STRATEGIES/INTERVENTIONS THAT ADDRESS NEEDS:

FEAR:

BEHAVIORS:

STRATEGIES/INTERVENTIONS THAT ADDRESS NEEDS:
Social Workers

Bridging the gap of separation between children and their families

A Continuum of Contact

- Talk positively about birth parent to foster parent
- Serve as liaison between foster parent and birth parent
- Serve as positive role model to foster parent and birth parent
- Arrange phone contact between foster parent/birth parent
- Describe foster parent in non-identifying terms at placement
- Debrief foster parent regarding birth parent problems/needs
- Encourage exchange of information between birth parent and foster parent
- Have birth parent/foster parent exchange pictures
- Share all information with foster parent/birth parent
- Facilitate the development of a collaborative relationship between birth parent and foster parent
- Encourage foster parent to allow birth parent to call foster home
- Set clear boundaries for contact
- Help foster parent understand the birth parent’s problems
- Talk openly with birth parent/foster parent about their concerns
- Mediate and resolve conflicts
- Exchange monthly progress reports with birth parent/foster parent
- Encourage birth parent to permit foster parent to call home
- Assist foster parent/birth parent in understanding cultural differences
- Facilitate conversation between birth parent/foster parent
- Schedule regular and frequent visitation
- Participate in visitations
- * Insure that foster parent/birth parent attend agency meetings
- * Encourage foster parents to host sibling visits
- * Have foster parent and birth parent to work on life book together
- * Permit foster parent to invite birth parent to attend all appointments
- * Assist foster parent/birth parent in managing conflict
- * Assist foster parent in welcoming birth parent to home
- * Assist birth parent welcoming foster parent to home
- * Encourage foster parent to transport child to home
- * Allow foster parent/birth parent to schedule all visitation
- * Empower foster parent to set limits and boundaries re: Contact and visitation
- * Encourage post reunification contact
- * Suggest that foster parent can provide respite care after reunification

Adapted from the work of Annie E. Casey Foundation
**Foster Parents**

Bridging the gap of separation between children and their families

**A Continuum of Contact**

- Have positive view of child’s family
- Talk openly with child about family
- Attend training to learn how to work directly with birth parent
- Call child’s parent on phone
- Learn about, understand, and respect the birth parents’ culture
- Provides written information for PPRs
- Exchange letters with child’s family via social worker
- Request pictures of child’s family to display in child’s room
- Give parents pictures of child
- Share copies of homework and report cards with family
- Non-threatening attitude
- Encourage parent to phone child
- Foster parent host.arranges sibling visits
- Send snack/activity for visit
- Dress child up for visits
- Shares monthly progress report with BP
- Transport child to visit
- *Talk with parent at visit
- *Brag to parent about child
- *Request cultural information from birth parent
- *Encourage parent’s progress
- *Refer to child as “your child” to parent
- *Attend staffings, PPRs, court reviews, and family meetings
- *Share parenting information
- *Share child’s life book with parents
- *Serve as parent’s mentor
- *Give parents verbal progress reports
- *Review child’s visits with parent
- *Invite child’s family to attend school programs
- *Meets child’s family at placement
- *Help birth parent find community resources
- *Ask parent to come to appointments
- *Take/pick up child to/at parent’s home
- *Foster parent transports parent to meetings
- *Assist in planning child’s return to birth home
- *Welcome child’s parent into foster parent’s home
- *Attend parenting classes with parents
- *Arrange family visits with parents
- *Serve as support to family following reunification
- *Foster parents provide respite care
- *Include birth parent in farewell activities

Adapted from the work of Annie E. Casey Foundation
Birth Parents

Bridging the gap of separation between children and their families

A Continuum of Contact

- Send card/letters to child at foster home via social worker
- Send family pictures to child via social worker
- Attend all visits/meetings
- Attend all classes/appointments
- Make regular contact with social worker
- Plan special activities for visits
- Remember child’s birthday and holidays
- Talk with child about separation
- Write down important information about child such as diet, routine, habits, etc.
- Send medical/school/etc. records to foster parent via social worker
- Encourage child to cooperate with placement
- Share critical cultural information with foster parent
- Discuss child’s activities with foster parent at visits
- Share family information with foster parent
- Arrange phone calls from child
- Develop positive relationship with foster parent
- *Talk with foster parent at agency meetings
- Give foster parent your home phone number
- Do not make unrealistic promises to child
- Avoid giving child a specific date for reunification

- Learn about, understand, and respect the foster parent’s culture
- Phone child at foster home
- Call foster parent for help with parenting problem
- Attend school meetings with foster parent
- *Help develop the child’s life book
- *Include foster parent in visitation activities
- *Invite foster parent to your home
- *Invite foster parent to child’s birthday party
- *Discuss case plan progress with foster parent
- *Review child’s behavior with foster parent
- *Invite foster parent to attend parenting classes with you
- *Ask foster parent for help in locating community resources
- *Include foster parent in child’s return home
- *Visit child in foster home
- *Work with foster parent on discipline problems
- *Allow child to keep in contact with foster parent after reunification
- *Work with foster parent to solve school problems
- *Include foster parent in holiday celebrations
- *Show appreciation to foster parent
- *Offer to take child to appointments for foster parent

Adapted from the work of Annie E. Casey Foundation
Shared Parenting Partners

Foster/ Kinship Parent

Food, Clothing, Education, Medical Attention, Discipline, Nurturing Plan for permanence

Birth Parent

Life, Gender, Physical Appearance, Talents, Traditions/Culture, Discipline, Nurturing, Food, Clothing, Medical Attention, Plan for permanence

Legal Parent/DSS

Medical Consent for Care, Legal Consents, Financial Support, Physical Safety & Security Plan for permanence

Adapted from: New York State Citizens' Coalition Initiative and National CASA Training Guide
Making Shared Parenting Work

A social worker should facilitate a meeting between the birth parents and foster parents within a week of placement to ensure that the partnership has a strong beginning and is supported by the agency. This requires advanced planning by social workers so that both families understand the purpose of the meeting (to discuss the care of the child, not “the case”.)

Every effort must be made to locate any absent/non-custodial parents. Including absent/non-custodial parents early in the shared parenting meetings encourages both parents of the child to become more involved in the child’s life. (Depending on the nature of the relationship between the custodial parent and the absent/non-custodial parent, a separate meeting between each birth parent and foster parent may be necessary).

A meeting site that is a neutral location that allows for privacy is important. Sometimes neighborhood recreation or social centers are good options instead of the agency office.

Tips that social workers can use:

☐ Ask foster and birth parents at placement how they would like to meet (consider facilitating a conference call or web meeting if distance prevents a parent from attending a face to face meeting)

☐ Describe shared parenting meetings in positive terms

☐ Serve as positive role model to foster parents and birth parents
  o Talk positively about birth parent to foster parent
  o Talk positively about foster parent to birth parent
  o Maintain confidentiality
  o Describe foster parent in non-identifying terms at placement

❖ Brief foster parents on birth parents’ fears and needs and help foster parents understand these needs.

☐ Talk openly with all about their concerns
❖ Share information essential to shared parental responsibilities with foster parents and birth parents, i.e., medical information, school progress, goals, and the child’s strengths and needs
☐ Set clear boundaries and ground rules for contact that include input from the birth family, the foster family, and the agency
  o Address personal and emotional safety issues for the child, birth family, and foster family
  o Set ground rules regarding phone calls, visitation, transportation

☐ Assist foster parent/ birth parent in managing conflict
  o Recognize fears of both parties
  o Focus on strengths
  o Look beyond behaviors to identify needs
  o Develop interventions that meet needs

☐ Assist foster parent/ birth parent in understanding cultural differences
  o Cultivate a mutual understanding and appreciation of religious beliefs and practices
  o Openly discuss differences in rituals, family experiences, dress and appearance preferences, etc.

☐ Convey the benefits of aligning around parenting and discipline practices to insure consistency for the child

☐ Facilitate conversations between birth parent/ foster parent
  o Discuss non-threatening topics
  o Find common areas of interest
  o Recognize both families’ strengths
  o Use of self-disclosure
  o Reflect feelings
  o Encourage exchange of information between birth parent and foster parent, i.e. favorite foods, toys, sleep behaviors, pictures, school progress, etc.

☐ Encourage foster parent and birth parent to attend all school and medical appointments

❖ Encourage the two families to work on the child’s life book together with the child

☐ Encourage the two families to attend parenting classes together

❖ Initiate discussion with families about strategies that they may use that will support the child’s relationship and attachment with both sets of parents to avoid dividing the child’s alliance.
## Shared Parenting Topics to Consider for Discussion

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| Other |  |
Bright Ideas...
SHARED PARENTING:  
FOSTER PARENT COMMUNICATION  
WITH BIRTH PARENTS

1. Use Reflective Listening when sharing with birth family.

2. Use humility when working with birth families. Another phrase for this is to use the “one-down approach.” Let the birth parent be the knowledgeable one when talking about their child.

3. Understand the anger of a birth parent as a stage of grief.

4. Be careful not to sell yourself as wonderful!
   a. Ask the birth parent questions about their child.
   b. Ask what questions they have for you.

5. Encourage the birth parents to interact with their child at visits.
   Ask them if they would like the child to bring games or a snack for them to share.

What Social Workers Can Do:

1. Have the movies like “I AM SAM” and “Losing Isaiah” for foster families to watch.
2. Have foster parents train Shared Parenting to other foster parents.
3. Plan with the foster parents on how to talk with the birth family. Have a practice time. Give the foster parents the strengths of the birth family.

J. Scaturro & D. Foster, May 2008
VIDEO OBSERVATIONS
For “Family Forever”

What did you see/hear foster parents do/say that helped support birth families and initiate a relationship with them?

________________________________________________________________________
________________________________________________________________________
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What did social workers do/say that supported or encouraged the foster parent and birth parent relationship?

________________________________________________________________________
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What did birth parents identify as being helpful to them?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Family Forever: Reunification Through Family-Focused Foster Care Discussion Guide and Video

Family Forever includes a video tape and discussion guide created to help child welfare systems in their struggle to improve outcomes for families and children. In 1992, The Annie E. Casey Foundation’s Family to Family Initiative envisioned, among other system-wide changes, foster care reforms that would focus on changes that supported a more family-focused approach. As part of that reform, Prince George’s County (MD) Department of Social Services developed this training film and discussion guide. The guide gives background information on family-focused foster care, the families featured in the video, the changing roles of the people involved, and gives clear how-to "Steps Along The Way" for each family team member. The video helps illustrate and add fullness to the relationships of birth parents, foster parents, and social workers.

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Washington, DC 20001-2085

Contact:
Phone: 202/638-2952
Fax: 202/638-4004
**Boundaries**

Webster’s Ninth Collegiate Dictionary defines a “boundary” as, “something that indicates or fixes a limit or extent; a separating line.”

- Physical boundaries may include one’s physical proximity to other people, or the use of fences, walls, doors, etc.

- Social boundaries may include a person’s physical proximity to other people; the differences in socioeconomic status between people in communities; age differences between people and generational differences between people.

- Emotional boundaries may include how intimate people are with each other or how much they are willing and able to disclose about themselves.

**Question:** What do you see as the difference between “Defensive Boundaries” and “Shared, Negotiated Parenting Boundaries?”
VIDEO OBSERVATIONS
For “Foster Parents Speak”

What did you see/ hear foster parents do/ say that helped support birth families and initiate a relationship with them?
____________________________________________________________________________________
____________________________________________________________________________________
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What roles can social workers play to support the foster parent-birth parent relationship?
____________________________________________________________________________________
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FOSTERING CHANGE

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Planning for the Shared Parenting Meeting

1) What issues need to be addressed at the first meeting?

2) How will you prepare the birth parent for the meeting?

3) How will you prepare the foster parent for the meeting?

4) Will the birth parent visit with the children before or after the shared parenting meeting?

5) How will the needs and interests of the child be recognized during the Shared Parenting meeting?
Scenarios for Shared Responsibilities

1. You are a foster parent for a two-year-old boy named Bobby. You have been partnering with his mother, Rhonda, for the 9 months Bobby has been in care and he has just gone on his first overnight visit. You go to pick Bobby up at 3:00 as agreed. When you arrive, you find Bobby with a very wet and dirty diaper that has obviously not been changed in quite a while. Following what you have learned in Shared Parenting you would...

2. You are a foster parent for a 6 year-old girl named Jasmine. You have been partnering with her mother Ramona for the 9 months Jasmine has been in care and she has just gone on her first overnight visit. You go to pick Jasmine up at 3pm as agreed. When you arrive you find Jasmine alone watching television. Ramona comes in a couple of minutes later saying she just ran to the corner to get some milk. Following what you have learned in Shared Parenting you would...

3. You are a foster parent for two brothers, J.C., age 7 and Eric, age 9. You have been partnering with their parents Tom and Sharon for the 9 months they have been in care and they have just gone on their first overnight visit. You go to pick the boys up at 3 pm as agreed. When you arrive you hear Tom yelling at the boys. He is cursing and threatening to leave them in foster care. Following what you have learned in Shared Parenting you would...

4. You are a foster parent for a sibling group of three, Deidra, age 12, Travis, age 9, and D.J., age 8. You have been partnering with their mom Keisha for the 9 months they have been in care. They have just gone for their first unsupervised visit. Keisha agreed to have the children back to your house by 6 pm but she didn’t arrive until 8pm saying the kids just wanted to spend some more time. Following what you have learned in Shared Parenting you would...
**Shared Parenting Implementation Goals**

One thing I can do next week to encourage and support shared parenting relationships in my agency is

__________________________________________________________________________

__________________________________________________________________________

One thing I can do to help birth parents understand the benefits of shared parenting is

__________________________________________________________________________

__________________________________________________________________________

One thing I can do next week to support foster parents as they learn about shared parenting is

__________________________________________________________________________

__________________________________________________________________________

One question I have for my supervisor/ team is:

__________________________________________________________________________

__________________________________________________________________________
Shared Parenting

Legal Basis

North Carolina Administrative Code 70 E .1104 requires that foster parents shall develop partnerships with children and their parents or guardians, help children maintain and develop relationships that will keep them connected to their pasts, and help children placed in the home build a positive self-concept and positive family, cultural, and racial identity.

Policy

Foster parents must engage in shared parenting by:

- Developing partnerships with children and their parents or guardians;
- Helping children maintain and develop relationships that will keep them connected to their pasts; and
- Helping children placed out of their own home build a positive self-identity and positive family, cultural, and racial identity.

Protocol – What you must do

No later than 14 days of a child being placed out of the home by a county child welfare services agency, a shared parenting meeting between the parent(s) and the placement provider must occur.

This includes placement in:

- Licensed foster homes (therapeutic and family foster care);
- Relative and non-relative kinship placements;
- Group home placements; and
- Any other placement in which the county child welfare services agency has legal custody of a child and the child is separated from their parent or caretaker.

Foster parents, whether supervised by a private agency or a county child welfare services agency, must participate in shared parenting.

Guidance – How you should do it

Trauma-Informed Partnering for Safety and Permanence Model Approach to Partnerships in Parenting- (TIPS-MAPP) training is a 10-week training curriculum that is used as a tool in the mutual assessment of prospective foster and adoptive parents in their ability to successfully provide trauma-informed care for children in county child welfare services agency custody.

Shared parenting and shared parenting meetings can be an intimidating process for both foster and birth parents. Much like Child and Family Team meetings, preparation is the key for shared parenting to succeed.

This requires advanced planning by county child welfare workers, so all parties understand the purpose of the meeting is to discuss the care of the child, not “the case.” The meeting is not to assign blame. It is first and foremost about creating the best possible transition for the child. Sharing parental responsibilities can be enjoyable activities such as working on the child’s life book together, exchanging pictures, reading with the child, etc. They can also plan a joint fun activity that is specifically catered to the child.
Shared Parenting

Before the shared parenting meeting, the county child welfare worker must:

• Be aware that they do not impose their own biases about a birth parent’s previous decisions;
• Model positive communication about the birth parent to the foster parent and about the foster parent to the birth parent;
• Brief the foster parents about any birth parent fears or needs and help the foster parents understand these needs;
• Be prepared to discuss how the needs and interests of the child will be recognized during the shared parenting meeting;
• Plan for the birth parent visiting with the child, if appropriate;
• Make visitation arrangements when the child is visiting with the birth parent before or after the meeting; and
• Encourage the foster parents to share with the birth parents a positive attribute they see in the child.

The county child welfare worker must prepare the foster parents and birth parents to exchange information essential to shared parenting, including:

• Medical information;
• School progress;
• Sleeping habits;
• Eating habits;
• Response to discipline; and
• Any of the children’s strengths and needs.

Deciding when and where the shared parenting meeting should be held, the county child welfare worker should:

• Take into consideration the work schedules of the foster and birth parents as well as children’s schedules, especially if there is a need for child care while the adults discuss parenting issues; and
• Ask the foster and birth parents where they would like to meet. Meeting in a neutral location that allows for privacy is important. The following can be good options:
  o A neighborhood recreation center or social center;
  o The library; or
  o A child’s therapist office.

County child welfare workers should initially focus on items that might seem simple but can be very important such as:

• Asking for a picture of the family to have for the child; and
• Discussing the child’s favorite foods, toys, clothes, activities, likes, and dislikes.

Both the birth and foster parents should be encouraged to talk openly. County child welfare workers should assist foster and birth parents in managing conflict by:

• Recognizing the fears of all parties;
• Focusing on the strengths;
• Looking beyond behaviors to identify needs; and
• Developing interventions to meet needs.

County child welfare workers should also assist foster and birth parents in understanding cultural or family differences by helping them to:

• Cultivate a mutual understanding and appreciation of religious beliefs and practices;
County child welfare agencies must explore opportunities to (if the court ordered visitation/contact plan allows):
- Encourage the placement provider to host sibling visits if applicable;
- Allow the birth parent to call the placement provider’s home; and
- Allow the placement provider to participate in the parent/child visitation.

- Openly discuss differences in family rituals, such as meal times or where they eat;
- Discuss appearance preferences for things such as haircuts, earrings, make up, etc., as well as other family experiences.
- Discuss the benefits of aligning discipline practices. This includes what discipline practices have been effective and can be continued as well as recommendations of alternative practices the foster parent has used effectively in the past. Aligning practices provides consistent structure during visits and when transitioning from one home to the other. The foster and birth parents are supported in their combined efforts.

If allowable, placement providers should be encouraged to invite birth parents to attend school and medical appointments. If the birth parent is unable to attend an appointment, the placement provider should provide progress reports to the birth parent on how their child is performing in school, home, updates on any medical information, and other activities.

The placement provider can be a wonderful resource for the birth parent, as they can model what others might assume parents know how to do, such as play with the child, encourage positive responses in their child, or how to care for their physical and medical needs.

Clear boundaries and ground rules for the contact should be discussed and set with input from the birth family, the foster family, and the county child welfare services agency. As it is developed, the Family Time and Contact Plan (DSS-5242) can be utilized to help with this discussion/plan to:
- Address personal and emotional safety issues for the child, birth family, and foster family; and
- Discuss ground rules regarding phone calls, visitation, and transportation.
## INVOLVING ABSENT/NON-RESIDENTIAL PARENTS

The county child welfare worker must engage both parents in the planning process for shared parenting.

After there is an approved Family Time and Contact Plan in place that is flexible and allows the placement provider to convene visits/contacts, the county child welfare worker should be involved with observing contact between the birth parent and child, when appropriate. The county child welfare worker can provide positive feedback on how their relationship is developing.

An absent or non-residential parent may have important information to share about the child’s development. Working to develop an early partnership that includes the absent parent may provide an excellent foundation for them to become more involved in their child’s life, but also may be a permanent placement option, and/or a long-term support.

The county child welfare worker should:
- Ask the question: “How can the county child welfare services agency obtain the absent parent’s involvement?”

If the birth mother and father have a tenuous relationship:
- Consider facilitating separate meetings between each birth parent and the placement provider.

If one birth parent is unable to travel a long distance for a meeting:
- Consider facilitating a phone conference call or web meeting to begin developing a relationship between the birth parent and placement provider.

Prior to removal, the parents may have had tremendous support from other relatives in raising their child. For example, a grandmother that has been the primary caretaker for the child over the past 6 months may have some information that is essential for the care of the child. The biological parents may want the relative provider to be a part of a shared parenting meeting.

## INVOLVING RELATIVES

County child welfare agencies must decide whether to include relatives in shared parenting meetings by considering the following:
- The relationship between the birth parent and the relative;
- Will the relative disrupt the development of the partnership between the birth parent and foster parent?
- Does the relative have information critical to the daily care of the child, and is this information needed to meet

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the needs of the child and/or provide support to the biological parents?

- Would involving the relative disrupt the long-term goals between the biological and foster parent?
- Could the relative be a mentor and support that would help develop a continued partnership beyond reunification?
- Other opportunities for the relative to be a part of the child’s life/planning, such as involvement in child and family team meetings; and
- Will the decision alienate the birth parent or relative?
  (Make sure all feel heard.)

CONFIDENTIALITY
It is recognized that placement providers have a need to know medical conditions that a child may have. Re-disclosure of the information is prohibited without consent of the child, parent, or guardian.

County child welfare workers must:

- Avoid sharing information about the birth parents to the placement providers or about placement providers to the birth parents if it is not information that is pertinent to the child’s care.
- Inform birth parents and placement providers that information shared within a shared parenting meeting remains confidential.
- Discuss any questions with their supervisors and seek out agency policy around specific situations for the sharing of information.

Eventually, birth parents and placement providers may come to build a good relationship and choose to share personal information with each other.

SAFETY DURING SHARED PARENTING
The safety of the participants should always be considered when planning shared parenting meetings. The county child welfare worker should be aware if there has been a history of domestic violence between birth parents as well as if a birth parent has any history of violence towards others.

It would not be appropriate to facilitate or encourage any shared parenting meetings together if there are any court orders, including those imposed by probation and parole, that do not allow contact between the birth parents. However, it is possible that separate meetings could take place with the placement providers and each individual birth parent at separate times. Document any safety concerns.

Consider what special arrangements can be made to help everyone feel safe and comfortable such as:

- Choose a safe location;
- Create specific ground rules and expectations ahead of time together with all participants that are catered to the specific needs;
- If the meeting cannot be held safely, do not hold the meeting; and
- Choose other avenues such as a phone conference call to facilitate the meeting.