Collaborating with Kinship Caregivers - Curriculum and TA

Teleconference/Webinar
Wednesday, September 19, 2012
3:00-4:30 PM EST

An event for State Adoption and Foster Care Managers and their invited guests, sponsored by the National Resource Center for Permanency and Family Connections.
Agenda

• Webinar Welcome and Introduction
  – Stephanie Boyd Serafin, Associate Director, NRCPFC

• Collaborating with Kinship Caregivers
  – Eileen Mayers Pasztor, DSW and Donna D. Petras, PhD, MSW

• NRCPFC TA

• Q & A and Discussion
COLLABORATING WITH KINSHIP CAREGIVERS

A Research-to-Practice Training Program for Child Welfare Workers and Their Supervisors

Developed by:
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The Collaborating with Kinship Caregivers Training Program includes two modules:

Module I: The Essential Need for Collaborating with Kinship Caregivers

Module II: Implementing the Collaborating with Kinship Caregivers Model of Practice
Welcome to Module I

The Essential Need for
Collaborating with Kinship Caregivers
Module I Objectives

When this module is completed, participants should be able to:

1. Know the rationale for and history of this training program.

2. Know the Agenda and Objectives for Module I and Module II.

3. Provide working definitions for kinship care and collaboration.

4. Explain the rationale for collaboration as a model of practice.

5. Identify strengths-based child welfare words and expressions.
Module I Objectives (cont’)

6. Identify major socio-economic, legislative, and other change-drivers affecting kinship care.

7. Provide a program identity for kinship care.

8. Describe the “Double-D” (demographic diversity) and “Double-A” (attachment vs. authority) dynamics.

9. Identify nine major issues that require collaboration.

10. Describe five collaboration competencies.

11. Identify four phases of service delivery.
Module I Objectives (cont’)

12. Identify the three child outcomes specified in the Adoption and Safe Families Act (ASFA) of 1997.

13. Know specific practice tools to share with kinship caregivers.

14. Summarize Module I.

15. Preview Module II.

16. Integrate participating kinship caregiver(s) perspectives into their model of practice.
Module I Agenda

Welcome, Introductions, and Overview
A. Participant Introductions
B. Review of Objectives and Agenda for Module I and Module II
C. Training Program Collaboration
D. Definitions
E. About this Training Program

The Policy Choice and Practice Challenge of Kinship Care
A. Back to the Future: How We Got to Now
B. A Program Identity for Kinship Care
C. The “Double D” and “Double A” Dynamics
D. Kinship Caregiver Perspective

The Kinship Care Collaboration Model of Practice
A. Issues Needing Collaboration
B. Competencies for Collaboration
C. Service Delivery Phases
D. Collaboration Practice Tools
E. Outcomes

Summary and Closing
A. Preview of Module II
B. Closing Remarks
C. Evaluation
Module II Objectives

When this module is completed, participants should be able to:

1. Demonstrate the objectives from Module I.

2. Identify local community partners to support collaboration.

3. Demonstrate how to:
   - (a) address the nine issues of concern to kinship caregivers, using
   - (b) the five competencies and
   - (c) the practice tools across
   - (d) the four phases of service delivery to help achieve
Module II Objectives (cont’)

3. Demonstrate how to:
   – (e) the three Adoption and Safe Families Act (ASFA) of 1997 outcomes of child safety, well-being, and permanency (connecting children to safe, nurturing relationships intended to last a lifetime); and
   – (f) access information regarding the Fostering Connections to Success and Increasing Adoptions Act of 2008.

4. Complete a strengths/needs assessment for themselves and their agency/organization regarding ability, willingness, and resources to implement the Collaboration Practice Model.
Module II Objectives (cont’)

4. Complete a strengths/needs assessment for themselves and their agency/organization regarding ability, willingness, and resources to implement the Collaboration Practice Model.

5. Identify specific child/family case- and cause advocacy strategies for kinship care collaboration using local, state, and national resources.
Module II Objectives (cont’)

6. Identify implications for policy and practice changes based on implementation of the Kinship Care Collaboration Model of Practice.

7. Share closing comments.

8. Complete a training program evaluation.
Module II AGENDA

Introduction to Module II
A. Welcome to Module II and Participant Re-introductions
B. Objectives and Agenda Review
C. Bridge from Module I

Implementing the Collaboration Practice Model
A. Collaborating with Community Partners
B. Demonstrating Practice Tools and Competencies

Implementation Strengths and Needs: Assessment, Advocacy, Action
A. Connecting to Adoption and Safe Families Act (ASFA) of 1997 Outcomes:
   Safety, Well-being, and Permanency
B. Individual, Agency/Organization Strengths and Needs
C. Developing Child/Family (Case) and Cause Advocacy Strategies

Closing Remarks
A. Committing to Collaboration
B. Certificate of Accomplishment and Closing Comments
C. Evaluation
Kinship Care Definitions

• Full-time nurturing and protection of children by relatives, members of tribes, clans, godparents, step-parents, or anyone who “goes for kin”

• Informal arrangements by family members

• Formal arrangements with public agency jurisdiction and oversight
The expression “kinship care”—to differentiate from family foster care—was advanced by CWLA’s National Commission on Family Foster Care (NCFFC), based on Carol Stack’s 1974 book, *All our Kin: Strategies for Survival in a Black Community (Harper & Row)*.

Based on recommendation of the NCFFC, CWLA created its first kinship care program and named its first kinship care program director.


History of the Curriculum

• Based on research conducted by child welfare and gerontology faculty at the California State University, Long Beach (CSULB), School of Social Work

• Began as a two-module, six-hour, research-to-practice, competency-based curriculum

• Identified inherent challenges in how kinship caregivers and child welfare workers work together to enhance child safety, well-being, and permanency for the children in their care and caseloads

• Used collaboration as a framework to address the identified challenges
Research Questions

• What do child welfare workers and kinship caregivers perceive as barriers to their effective collaboration?

• What best-practice examples can child welfare workers and kinship caregivers provide to illustrate their effective collaboration?
Curriculum Today

- Revised based on CWLA National Kinship Care Advisory Committee recommendation to expand, update, and field test
- Curriculum doubled to 12 hours from 6 hours
- Field-tested in: Los Angeles, CA; Baton Rouge, LA; Bronx, NY; and Providence, RI
- Over 2,000 child welfare workers, supervisors, administrators, and community advocates trained
Policy Choice and Practice Challenge

- Factors Influencing the Growth of Kinship Care
- A Program Identity: More Like Family Preservation or More Like Family Foster Care?
- The “Double D” and “Double A” Dynamics
- Kinship Caregiver Perspective
Factors Influencing the Growth of Kinship Care

- Children were already residing with grandparents or other relatives because of parental circumstances

- Placement in the “most family-like setting” implied a preference for kin (P.L. 96–272, 1980)

- Crack/cocaine and HIV/AIDS propelled infants, children, and teens into the child welfare system

- The shredding of the social safety net in the 1980s

- The U.S. Supreme Court ruling in re: Youakim v. Miller (1979)
Factors Influencing the Growth of Kinship Care (continued)

• The child welfare population continues to be more challenged and challenging

• Relatives could help ensure an ethnic- and cultural match

• Involvement of birth parents could have positive impact on children

• Growth of support and advocacy groups

• Proliferation of research
Key Legislation

• Adoption and Safe Families Act (ASFA) of 1997
  – Shortened time for parents to correct conditions
  – Mandatory TPR after 25 months in care

• Fostering Connections for Success Act of 2008
  – (www.fosteringconnections.org)
A Program Identity for Kinship Care

Family Preservation?

Family Foster Care?

Informally Arranged?

Formally Arranged?
“Formal” and “Informal” Kinship Care

• Issues that bring children into care
• Complexity of kinship care arrangements
• Kinship care and socioeconomic risks
Inherent Collaboration Challenges

- “Double-D” (demographic diversity)
- “Double-A” (attachment vs. authority)
The Collaboration Practice Model

• 9 major issues that need collaboration
• 5 collaboration competencies
• 4 phases in kinship care services
• 3 federally mandated outcomes for children

The three most important collaboration words: for the children
Kinship Collaboration Model of Practice

ISSUES
1. Legal status
2. Financial support
3. Health/mental care
4. School
5. Child behavior
6. Family relationships
7. Support services
8. Fair and equal treatment
9. Satisfaction and recommendations

OUTCOMES
SAFETY
WELL-BEING
PERMANENCY
(safe, nurturing relationship intended to last a lifetime)

COMPETENCIES
1. Respect knowledge, skills, and experiences
2. Build trust by meeting needs
3. Facilitate open communication
4. Respect the "dynamics of diversity" and of "attachment versus authority"
5. Use negotiation skills, clarifying those that are "nonnegotiable"

The three most important collaboration words: for the children

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Collaboration Tools

• Trauma and Child Development: Jigsaw Puzzle Child

• Trauma and Positive Discipline: Providing Nurture and Structure

• Trauma and Loss: Pathway Through the Grieving Process

• Trauma and Support Structures for Kinship Caregivers: Family Group Conferencing
Module I Summary and Closing Remarks

Thank you for collaborating with us!!
Welcome to Module II

Implementing the Collaboration Model of Practice
Collaborating with Community Partners
Panel Resource Notes, Topics of Concern

Panelist Name: 
Agency/Organization: 
Contact Information: 
Key Points:

- KINSHIP CAREGIVER RIGHTS AND RESPONSIBILITIES
- BIRTH PARENT ISSUES
- PLACEMENT PROCEDURES
- SCHOOL
- HEALTH AND MENTAL HEALTH
- FINANCIAL REIMBURSEMENTS
- COURT
- SUPPORT GROUPS
- OTHER RESOURCES AND ADVOCACY

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Demonstrating Practice Tools and Competencies
COLLABORATION WORKSHEET: ACCESSING SERVICES AND SUPPORTS

Part I: Who lives in the actual home or household of the kinship parent (ECOMAP).

Part II: Issues of concern to be discussed in terms of what is going well, and what help is needed
1. legal, financial, health/mental health, school, birth family, fair and equal treatment, services and supports, recommendations
2. jigsaw puzzle child, loss history worksheet, discipline – nurture/structure
3. culturagram

Part III: The phase of service/supports that the kinship family is in
1. assessing (willingness, ability, resources)
2. placing
3. supervising
4. transitioning.

Part IV: Collaboration competencies needed
1. Respecting each other’s knowledge and skills.
2. Building trust by meeting needs.
3. Facilitating open communication.
4. Creating an atmosphere to support the “Double D” (demographic diversity) and “Double A (attachment versus authority) dynamics.
5. Using negotiation skills. What are possible “deal-breakers” and how could you address them?
Outcomes
ASFA Outcomes and Kinship Care*

• Definition.
• Implications for Kinship Care.
• Outcome Measures.

Assessing Implementation
Strengths and Needs
Kinship Care Collaboration Model of Practice Strengths/Needs Checklist

- **Purpose.**

- **Instructions.**

  **Step 1.** Cross-check the competencies with the issues.

  **Step 2.** Summarize the competencies that are “strengths” and summarize the competencies that “need work.”

  **Step 3.** Strategize how to move “needs work” to strengths
  
  What is willingness (“I just don’t see the value of this.”)
  
  Ability? (I would like to do this, but I just don’t have the skills);
  
  Resources? (I want to do this, I know how, but no resources)
Child/Family (Case) and Cause Advocacy
Advocacy Action Agenda

A Child Advocacy Primer: Experience and Advice from Service Providers, Board Leaders, Children, and Families.

1. Increase financial stability.
2. Strengthen families.
3. Enhance community-based and government responses.
4. Create navigator programs
5. Consider viewpoints (administrators, community leaders, local media, unions, windows of opportunity)
Advocacy Action Agenda (cont’)

6. Possible action steps:
   – Create action group
   – Develop realistic budget
   – Develop array of relevant options
   – Draw on research findings (local, state, or national)
   – Include an evaluation component (school of social work?)
   – Make key presentations
   – Set clear objectives (SMART: Specific, Measurable, Achievable, Realistic, and Timely)
   – Write imaginative title for your project
   – Celebrate your successes, or try again
Advocacy Action Agenda (cont’)

7. Cautions/suggestions:
   – Are there unintended consequences?
   – What are our objectives?
   – What is the need we want to address, and what is the evidence?
   – What will the costs be—tangible and hidden?
   – Who are our allies, and why?
   – Who is the opposition, and why?
   – Who will benefit from our plan?
   – Why is this important, and to whom?

Best wishes with your advocacy agenda.
Advocacy with CWLA

CWLA welcomes everyone’s interest and input in advocacy.

Learn more about priorities for children through CWLA’s Legislative Agendas. (http://www.cwla.org/advocacy/2012LegAgenda.pdf), with a new legislative agenda each year.

CWLA prioritizes protecting programs for vulnerable children and families in ongoing budget negotiations.

To stay up to date about all child welfare-related policy developments, subscribe to CWLA’s Children’s Monitor Blog (http://childrensmonitor.wordpress.com/). Much of CWLA’s most recent policy work on kinship care was in connection to the Fostering Connections to Success and Increasing Adoptions Act and an added kinship/guardianship payment option under IV-E of the Social Security Act. Learn more about Fostering Connections (http://www.cwla.org/advocacy/adoptionhr6893.htm) and kinship (http://www.cwla.org/advocacy/kinshipcare.htm) online.

For more information, e-mail govaffairs@cwla.org.

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IMPLEMENTATION ISSUES

1. “Systems” Training Checklist*
   - Defined roles
   - Congruence among policy, program, practice, and content
   - Level of competence (participants, training, curriculum congruence)
   - Ethnic and sexual minority children and families
   - Qualifications and “happiness” of the trainers
   - Language sensitivity
   - Adult learning principles
   - Evaluation and outcomes
   - Other issues?

IMPLEMENTATION ISSUES (cont’)

2. Kinship Caregiver Co-facilitator

3. Location, location, location

4. Invitations

5. Individual trainer checklist

6. The Learner: Whatever we tell our learners, they will make something that is all their own out of it. It will be different from what we held so dear, and attempted to transmit. They will build into it their own scheme of things, relating it uniquely to what they already hold as their experience. Thus, they build a world all their own. What is important is not so much we what we say, but what they make out of what we intended. (Author unknown.)
CWLA thanks you for your Collaboration for the Children and Families!

National Association of State Foster Care Managers

National Resource Center for Permanency and Family Connections

CWLA’s National Advisory Committee on Kinship Care

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After the Event

• A feedback survey will be emailed to all participants. We appreciate your feedback!

• Materials for this event (and a link to Regional Office contacts) are currently posted on the NRCPFC website at: http://nrcpfc.org/teleconferences/2012-09-19.html

• The event will be archived at the above link on Wednesday, September 26th.

Thank you for your participation!
Questions

Press *1

on your phone to ask a question or engage in discussion.