

## Session 4: Achieving Permanence—The Brown Case

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## Session Overview

This session addresses issues related to resilience and permanence, children's educational needs, the unique issues in advocating for older youth and the challenges faced by LGBTQ youth in the system. You'll also continue to explore cultural competency and child welfare law.

## Objectives

By the end of this session, you will be able to...

- Describe the concept of resilience and identify protective factors
- Describe what is meant by concurrent planning
- Explain why expediency in establishing permanence is especially important for older youth
- Describe the importance of involving older youth in the permanency planning process (in an age-appropriate way)
- Identify educational challenges faced by children in the child welfare system
- Explain some of the issues faced by LGBTQ youth in the child welfare system
- Describe one federal law related to education and youth aging out of the system
- Identify strategies for writing effective recommendations in a volunteer court report
- Identify age-appropriate behavior for children from birth through adolescence

## Online Learning

### Resilience

Not all children subjected to lives of severe adversity go on to suffer problems. While abuse and neglect certainly increase the likelihood of developing problems, some children don't experience problems, or do to only a minor degree. This is resilience. In short, resiliency theory suggests that certain children (and adults) have qualities of personality, family, relationships, outlooks and skills that allow them to rise above enormous hardship. Resilient people are those who escape the ravages of poverty, abuse, unhappy homes, parental loss, disability or many of the other risk factors known to set many people on a course of life anguish. Numerous studies of resilient people have identified the presence of the same protective factors—aspects of their personalities, their families, their significant relationships or their experiences—that help them succeed.

#### Activity 4.1: Understanding Resilience

**Part 1:** Click on the link to Part 1 of Activity 4.1 to listen to an audio recording that presents youth in the child welfare system speaking about their childhoods.

**Part 2:** What were you like when you were their age? Write down your thoughts. You will not be asked to share this information.

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## **Activity 4.2: Protective Factors**

**Part 1:** Click on the link to Part 1 of Activity 4.2 to listen to a short recap of Maria Amarillo's story. Then read through the list of risk factors and protective factors on the next page. Put a checkmark next to the protective factors you believe apply to Maria's situation.

**Part 2:** In the online discussion forum, post the three protective factors you think are most prominent in Maria's case and how you think these factors show up in the case.

**Part 3:** Respond to at least two of your classmates by asking a question or making a comment about what they have posted.

## **Risk Factors**

### **Early Development**

- Premature birth or complications
- Fetal drug/alcohol effects
- “Difficult” temperament
- Long-term absence of caregiver in infancy
- Poor infant attachment to mother
- Shy temperament
- Siblings within two years of child
- Developmental delays

### **Childhood Disorders**

- Repeated aggression
- Delinquency
- Substance abuse
- Chronic medical disorder
- Behavioral or emotional problem
- Neurological impairment
- Low IQ (less than 80)

### **Family Stress**

- Family on public assistance or in poverty
- Separation/divorce/single parent
- Large family, five or more children
- Frequent family moves

### **Parental Disorders**

- Parent(s) with substance abuse problem
- Parent(s) with mental disorder(s)
- Parent(s) with criminality

### **Experiential**

- Witness to extreme conflict, violence
- Removal of child from home
- Substantiated neglect
- Physical abuse
- Sexual abuse
- Negative relationship with parent(s)

### **Social Drift**

- Academic failure or dropout
- Negative peer group
- Teen pregnancy, if female

## **Protective Factors**

### **Early Development**

- “Easy” temperament
- Positive attachment to mother
- Firstborn child
- Independence as a toddler

### **Family**

- Child lives at home
- Parent(s) consistently employed
- Parent(s) with high school education or better
- Other adult or older children help with childcare
- Regular involvement in religious activities
- Regular rules, routines, chores in home
- Family discipline with discussion and fairness
- Positive relationship with parent(s)
- Perception of parental warmth
- Parental knowledge of child’s activities

### **Child Competencies**

- Reasoning and problem-solving skills
- Good student
- Good reader
- Child perception of competencies
- Extracurricular activities or hobbies
- IQ higher than 100

### **Child Social Skills**

- Gets along with other children
- Gets along with adults
- “Likable” child
- Sense of humor
- Empathy

### **Extrafamilial Social Support**

- Adult mentor outside family
- Support for child at school
- Support for child at church, mosque, synagogue
- Support for child from faith, spirituality
- Support for child from peers
- Adult support and supervision in community

### **Outlooks & Attitudes**

- Internal locus of control as teen
- Positive and realistic expectations of future
- Plans for future
- Independent minded, if female teen

Adapted from materials by Marci White, Methodist Home for Children, Raleigh, North Carolina, 1999.

## Permanence

### Activity 4.3: Permanence—Kadia’s Story

**Part 1:** Click on the link to Part 1 of Activity 4.3 to watch “Kadia’s Story” from *Powerful Voices: Stories by Foster Youth*. Then read the following information about permanence.

#### Permanence

All children need a “parent,” a primary attachment figure who will care for them through life’s ups and downs, protect them and guide them now and into adulthood. In our culture, typically the parents are a father and mother, but one or more other caring adults who are willing to commit unconditionally to the child can also meet the child’s need for permanence.

One of your primary goals as a CASA/GAL volunteer is to advocate for a safe, permanent home as soon as possible, honoring the child’s culture and sense of time. While there is never a guarantee of permanence, having such intentions can ensure that you are working toward a plan that supports permanence.

At a very basic level, permanence is most probable when the *legal* parent is also the *emotional* parent as well as the *parenting figure present in the child’s life*.

There are two possible “permanent” resolutions:

- 1. Return to parent**
- 2. Adoption by a relative or nonrelative**

A third option, while not truly “permanent,” is sometimes considered an appropriate choice when the other two are not available to a child. It is the next best thing:

- 3. Placement and custody or guardianship with relatives**

It is important to know that some Native Americans have a strong bias against adoption, and certain tribes do not approve of adoption. This creates a special situation when considering the permanent options for an Indian child. In some cases, placement with an Indian custodian can truly be considered permanent.

**Part 2:** In the online forum, identify two ways that Kadia’s CASA/GAL volunteer helped her find permanence.

### **Activity 4.4: Concurrent Planning**

**Part 1:** Read the information that follows about concurrent planning.

**Part 2:** In the online forum, write a few sentences about how you will use this information about permanence and concurrent planning in your role as a CASA/GAL volunteer.

#### **Concurrent Planning**

Given the two possible permanent resolutions to a case—return to parent and adoption by a relative or nonrelative—your role is to encourage what is called “concurrent planning,” which means working on two plans at the same time from the very beginning of a case: one to return the child home and another to find an alternative permanent placement. Traditionally, case management in child welfare has consisted of efforts to reunite children with their parent(s), and if those efforts failed, a second plan would be pursued. This created a process that kept many children in foster care for too many years.

Concurrent planning was developed as an alternative that moves a case more quickly through the system with better results. The concurrent planning approach is family-centered, with parents involved in decision making from the start. Throughout the case, parents are regularly given direct, culturally sensitive feedback about their progress. From the start of the case, while providing services to the parents, the caseworker explores kinship options, the applicability of the Indian Child Welfare Act and possible foster/adoptive situations for the child.

## Permanent Resolutions: Question to Consider

There are only two truly permanent resolutions: return to parents and adoption. These resolutions are most possible when the following questions can be answered and the underlying issues they suggest have been dealt with.

Return to Parents	Adoption
• Have issues that brought the child into care been addressed by the agency?	• Are we ready to proceed with a termination of parental rights (TPR) case?
• Have the parents made the changes that the child protection agency requested?	• Do legal grounds exist?
• Has the child protection agency caseworker observed and documented a reduction of risk?	• Have we also considered the best interest issues that must be presented to the judge?
• What have the visits we observed told us about the parents' ability to care for the child?	• How long will the court process take?
• Have we considered recommending a trial placement as a way to observe actual changes in childcare?	• Have the parents been asked to release the child for adoption?
• Have new issues that relate to risk been observed and addressed?	• Is the child already living with caretakers who are willing and able to adopt?
• Has the child protection agency changed the rules or "raised the bar" in reference to expectations that are not related to risk?	• Are there relatives who are available to adopt?
• Would the child protection agency remove this child today?	• How soon can the child be placed?
• Is this a multi-problem family that is likely to relapse?	• Who can help the child through the placement process?
• What services can be put in place to prevent relapse?	• Have we assessed and evaluated the child's particular needs and strengths?
• Have the legal and/or biological fathers been identified?	• What is the child's relationship with his/her siblings?
• Have we recognized the child's grief and need to reconnect to the family of origin?	• Should the child be placed with siblings? Can the child be placed with siblings?
	• Have we identified a placement option that will be able to meet the child's needs?
	• Have the child's ethnic and cultural needs been considered and addressed?
	• Are we holding up the child's placement waiting for a specific type of family?
	• Are the child's needs so severe that finding appropriate parents is unlikely?
	• Is the child able to accept "parenting"?

## **Placement with Relative or Kin: Questions to Consider**

Living with someone the child already knows and feels safe with can mitigate the child's feelings of loss, which are part of any placement. The use of a relative or kin placement should be evaluated from the beginning of agency involvement. The following questions should serve as guidance in considering both the pitfalls and benefits involved with kin and relative placements:

- Have the relatives/kin been carefully evaluated?
- Is there a written home study?
- What are the parents' thoughts and wishes in reference to this relative?
- What will be the ongoing relationship with the parents?
- Will the parents create problems with the placement or compromise the child's safety?
- Will the relative be able to protect the child from hostile or inappropriate parental behavior?
- Will the relative be able to be positive about the parent to the child?
- Will there be an "unofficial" return to the biological parents?
- Will this relative support the present service plan?
- If the plan changes, will the relative support the change?
- How will visitation be accomplished?
- Are the relatives able to understand and cooperate with agency expectations?
- Have the relatives of both parents been considered, regardless of the removal home?
- Is placement with relatives a way we can protect the child's roots in his/her community?
- Will placement with a particular relative mean that the child must leave the community?
- Will placement with a particular relative mean that the child will lose other important relative or kinship ties?
- Will a relative placement mean that the child will have to endure another move?
- What losses will the child experience if another move is required?
- Have we considered sibling attachments, as well as any "toxic" sibling issues?
- Is this potential caretaker related to all the siblings?
- Is this relative able and willing to take all the siblings?
- Will placement with the siblings be positive for this child?
- Will this placement support the child's ethnic and cultural identity?
- Is this seen as permanent by the potential caretakers?
- Would this relative consider adoption?
- Are there the same issues in the extended family that existed with the parents?
- What pre-placement relationship existed?
- Does the child have any attachment to these relatives?
- Have the child's wishes been considered?

### **Long-Term Foster Care—An Impermanent Solution: Questions to Consider**

Despite the advocacy efforts of CASA/GAL volunteers and the hard work by caseworkers, many children remain in foster care and a family is not found for them. These children live in foster homes or group homes—or move from placement to placement during their time in care.

Long-term foster care becomes the plan for older or difficult children for whom there is no identified family. Sometimes these children are actually placed in a family setting but their caregivers do not want to adopt them. In any case, when the plan is permanent foster care, what the child protective services system is actually doing is planning for these children to belong to no one. Clearly this is unacceptable. When faced with this as the “only” alternative, it is our obligation to insist that this not be the end of the planning process, but rather the beginning of a new dialogue around how to make permanence a reality, even for the most difficult child. Begin this dialogue with these questions:

- What other options have been explored?
- Does the child need specialized care? Is it possible for him/her to have a legal and emotional attachment with a person with whom he/she does not live?
- Is there a significant role model or mentor involved with this child? What barriers exist to this person becoming the legal parent?
- What are the barriers to the caregiver adopting? How can these barriers be removed?
- Have all adoption subsidies, other financial resources, and continuing services been explored and offered?
- Who have been the child’s support and attachments in the past? Can any of them be involved now?
- Who are the child’s attachments and support in the present? What is their current involvement?
- What family or kin connections are available—especially with siblings?
- Can parents or other kin be involved anew in this stage of the child’s life?
- What does the child want?
- What resources and persons will be available when this child is an adult?
- Who will be this child’s family for the rest of his/her life?

Materials created by Jane Malpass, consultant, North Carolina Division of Social Services, and Jane Thompson, attorney, North Carolina Department of Justice. Used with permission.

## Educational Advocacy

### Activity 4.5: Educational Challenges for Children in Care

**Part 1:** Think about your current job or one you had in the past. What was the first day like? Was there a learning curve? When you were growing up, did you ever have to move from one school to another? What was that like?

Write your answers below. You will not be asked to share your responses.

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**Part 2:** Read the following information about educational challenges for children in the child welfare system.

#### Education Challenges for Children

Chaos in a child's life often results in the neglect of educational concerns. Parents or caregivers may not be available to help with homework, attend school conferences or make referrals for evaluation when concerns arise. Children entering foster care often have school issues. Addressing these issues can allow a more positive experience for a child who hasn't known the rewards of success in school.

Teachers who see the child every day have a wealth of knowledge about the child's behavior, attitude, likes and dislikes, and about the best ways to communicate with that child. As you inquire about a child's progress in school, you may discover that your child has special educational needs and should be referred for an evaluation. In

some areas, an abundance of resources may be available for special-needs children; in other areas, you may have to advocate for the creation of needed resources.

Children from racial, ethnic or cultural backgrounds different from the majority culture may also have special needs based on discriminatory practices in the educational system. For instance, children may face racist or homophobic taunts, teachers who believe they can't learn and testing that is racially/culturally biased. It is important to realistically assess the school difficulties of any child and determine what role the educational system, as well as the child's particular school setting, may be playing in creating or sustaining those problems.

### **Activity 4.6: Educational Needs Assessment**

**Part 1:** Fill out the form below as if you were the CASA/GAL volunteer for Maria Amarillo. Once you have finished, click on the link to Part 1 of Activity 4.6 to compare your notes with the notes of an expert who has reviewed the Amarillo case.

#### **Educational Advocacy Quick Assessment Form**

School Name	
Grade	
Special Needs/IEP Requirements	
Evidence of Behavioral Problems/Excessive Absence	
Grade Point Average	
Seeing School Social Worker?	
Extracurricular Activities	
Need for Tutoring?	
Other Pertinent Info.	

**Part 2:** Once you have compared your notes with the “expert notes,” respond to the following questions in the online discussion forum:

- How might a tool like this be helpful in a case with an older youth?
- How might it be helpful in a case with a younger or even preschool-aged child?

## **Beyond Alphabet Soup: Some Key Acronyms in Education Advocacy**

Below are some terms that are used often in educational settings. You need not memorize them, but be aware that they might be included in a child's school records. You can use the information below as reference material.

### *FAPE: Free, Appropriate Public Education*

This is part of the IDEA (Individuals with Disabilities Education Act) requirement, in which "appropriate" means "providing meaningful educational progress." A student with disabilities has the right to receive special education and related services that will meet his or her individual learning needs, at no cost to the parents.

### *FBA: Functional Behavioral Assessment*

An assessment process for gathering information regarding a child's behavior, its context and consequences, variables, the student's strengths and the expression and intent of the behavior for use in developing behavioral interventions. An FBA is performed when a child is having behavioral challenges in school.

### *IEP: Individualized Education Plan*

This is a written educational plan of special education for students from age 3 to 21 who are eligible under IDEA and state laws. The IEP is tailored to each child's needs and identifies goals and objectives, necessary accommodations and related services. The IEP is developed by a team of people, including but not limited to foster parents, parents, guardians, special education and regular education teachers, therapists, psychologists and the child, when appropriate. Sometimes the CASA/GAL volunteer will participate in these IEP meetings. An educational surrogate may be appointed if the family is not available, but even with a surrogate assigned to the child, the parents still have a right to involvement. Knowledge of the child's schooling is one way for parents to stay connected to a child's progress even when the child is in out-of-home placement.

### *IFSP: Individualized Family Service Plan*

This is a written developmental plan of early intervention services for children from birth to age 3 and their families who are eligible under IDEA and state laws. The plan must involve and include the family of the child involved.

### *LRE: Least Restrictive Environment*

This refers to the services identified in an IEP, which must be provided in the least restrictive environment for the child or youth involved. It is part of the IDEA requirement that children with disabilities shall be educated to the maximum extent possible with their non-disabled peers.

## Advocating for Older Youth

### Activity 4.7: Comparing Advocacy Across Age Ranges

**Part 1:** In the online discussion forum, post a few sentences in response to the following question:

- How do you think your role as a CASA/GAL volunteer working with an older youth may differ from your role working with a child age 10 or younger?

**Part 2:** Respond to at least two of your classmates by asking a question or making a comment about what they have posted.

### Activity 4.8: Advocating for Older Youth

**Part 1:** Consider what the outcome for Maria would be if she remained in foster care until emancipation and did not receive help navigating through the systems indicated below. In the space provided, list what issues Maria might face in the various systems an older youth encounters:

#### Education

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#### Living Situation

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**Mental Health**

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**Employment**

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**Finances**

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**Part 2:** Share two of your answers in the online forum.

## Cultural Competence—Issues Facing LGBTQ Youth

The child in the case study at your next in-person session identifies as lesbian. There are a disproportionate number of LGBTQ (lesbian, gay, bisexual, transgender, questioning/queer) youth in foster care, so it is important to explore some of the issues that these youth face in the child welfare system.

### Activity 4.9: Walking a Mile in Someone Else's Shoes

**Part 1:** Think back to when you were a child or teenager. Did your peers ever make fun of you for any part of who you were? If so, how did you feel or respond? Did you make fun of anyone else? How did they respond? Write your responses in the space provided.

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**Part 2:** Click on the link to Part 2 of Activity 4.9 to listen to a podcast featuring LaRae Oberloh, Program Manager, Sioux Falls Area CASA, as she speaks about some of the unique challenges involved in working with youth who are LGBTQ.

**Part 3:** In the online discussion forum, post your responses to the following questions:

- How do you think a youth's sexual orientation affects his or her identity?
- What obstacles might LGBTQ youth encounter in foster care that would hinder their ability to maintain their identity?
- Do you think these obstacles are unique to LGBTQ youth? If so, why? If not, how are these issues transferable to youth in other situations?

**Part 4:** Respond to at least two of your classmates by asking a question or making a comment about what they have posted.

## LGBTQ Glossary

The following are terms and expressions that you may find useful when working with youth or family members who identify as LGBTQ:

**Bisexual:** A person who is emotionally, romantically and sexually attracted to both men and women.

**Coming Out:** The process of disclosing one's sexual orientation or gender identity to others. Because most people in our society are presumed to be heterosexual, coming out is not a discreet life event but a lifelong process. Coming out may also be experienced by heterosexual family members or allies of LGBTQ persons, who may decide to disclose to others that they have friends or relatives who are LGBTQ.

**Femme:** A term some individuals use to describe their feminine gender identity or expression.

**Gay:** A person whose emotional, romantic and sexual attractions are primarily for individuals of the same sex. This term typically refers to men, but in some contexts it's used as a general term for gay men and lesbians.

**Gender Expression:** An individual's characteristics and behaviors (such as appearance, dress, mannerisms, speech patterns and social interactions) that are perceived as falling somewhere along a continuum of feminine and masculine.

**Gender Identity:** A person's internal, deeply felt sense of being male or female or something other or in-between. Everyone has gender identity.

**Heterosexual:** A person who is primarily or exclusively attracted to people of a different sex romantically, affectionately and sexually. Sometimes referred to as straight.

**Homosexual:** A term used to refer to a person based on his or her same-sex sexual orientation, identity or behavior. Many LGBTQ people prefer not to use this term—especially as a noun—because of its historically negative use by the medical establishment.

**In the closet:** Keeping one's sexual orientation or gender identity secret.

**Intersex:** An individual born with reproductive or sexual anatomy that does not conform exclusively to male or female norms in terms of physiological sex.

**Lesbian:** A woman whose emotional, romantic and sexual attractions are primarily for other women.

**LGBTQ:** An acronym for lesbian, gay, bisexual, transgender and questioning or queer.

**Queer:** A historically negative term for gay men, lesbians or gender-nonconforming people. The term has been widely reclaimed by younger LGBTQ people as a positive social and political identity. More recently, “queer” and “genderqueer” have become common as terms of self-identification for people who do not identify with the restrictive and binary terms that have traditionally described sexual orientation.

**Questioning:** An active process a person goes through before “coming out.” The term is used mostly by young people who are in the process of determining their sexual orientation and/or gender identity.

**Sexual Orientation:** A term describing a person’s emotional, romantic and sexual attraction, whether it is for members of the same sex or a different sex. More appropriate than “sexual preference.”

**Transgender:** An umbrella term that can be used to describe people whose gender expression is nonconforming and/or whose gender identity is different from their assigned sex at birth. This term can include transsexuals, genderqueers, cross-dressers and others whose gender expression varies from general norms.

**Transsexual:** A more specific term that describes people who have physically altered their bodies through hormones and/or surgery to change their sex from the sex they were assigned at birth.

**Transition:** The time period when a transgender person starts living as the gender with which they identify. Often includes a change in style of dress, selection of a new name, a switch in pronoun use and possibly hormone therapy and/or surgery.

**Transphobia:** Refers to various kinds of aversions toward transsexuality and transsexual or transgender people, often taking the form of refusal to accept a person’s expression of their internal gender identity.

### **Activity 4.10: Foster Youth and Bullying**

Many aspects of youths' identities can cause them to feel disconnected from their peers. Bullying can occur in reaction to any aspect of a youth's identity that peers view as "different."

**Part 1:** Click on the link to Part 1 of Activity 4.10 to listen to a podcast on the effects of bullying.

**Part 2:** Call your assigned school and ask to be directed to the person who can talk to you about efforts and safety measures the school has put in place to address the issue of bullying. Some questions you may wish to ask include:

- What education do you provide to your students on the issue of bullying?
- Who is responsible for disseminating that information?

**Part 3:** In the online discussion forum, post the information you learned about your assigned school, including the name of the school you called, the person who is responsible in that school for addressing bullying issues, how that school addresses bullying and any other information that may be of interest to your classmates.

## Revisiting Child Welfare Laws

### Activity 4.11: Laws Related to Older Youth and Education

Choose one of the laws described in the next pages and post a three- or four-sentence summary of how that law relates to the information you've learned so far in this session. In formulating your post, you may choose to use only the information provided in this manual or you may choose to do additional research on your own (speaking with CASA/GAL program staff, looking up additional information online and so on).

### **Fostering Connections to Success and Increasing Adoptions Act, P.L. 110-351**

The Fostering Connections to Success Act is a significant and far-reaching law enacted in 2008 that is designed to improve outcomes for youth in care, particularly improving outcomes for older youth. The legislation is a series of building blocks, based upon evidence-based practices, with each component having demonstrated positive outcomes. There is a focus on connections to family, to siblings and to other adults to foster successful transitions to adulthood.

*Key provisions of this legislation include:*

- State agencies are required to provide notice to relatives within 30 days of the child's removal from their home and explain the options for the relative's participation in the child's care, either as a placement or opportunities for engagement in the child's case. This can be the beginning of establishing a permanent connection for the child with the extended family, perhaps even as a permanent placement option.
- In addition to maintaining the child's connection with family, the legislation maintains the child's connection with his/her siblings. Interviews of youth have consistently revealed that the greatest loss they experienced when removed from their home is the loss of their connection with their siblings, and too often they are never able to re-connect with them. With this law in place, state agencies must make reasonable efforts to place sibling groups together in foster, family or adoptive placements, if in the children's best interests. If placement together is not feasible, the agency needs to assure continuing contact among siblings, at least once a month.
- A new, specific transition plan must be developed at least 90 days prior to the youth's transition out of foster care (at age 18 or older). This is over and above the plan that should normally begin around the age of 16. The new plan should be personalized and detailed, developed with the caseworker and other appropriate representatives. The plan should be as detailed as the

- youth directs, and include specifics on housing, health insurance, education, opportunities for mentors and continuing support services, workforce supports and employment services.
- Educational stability for children in care is underscored by requiring that the child's case plan includes provisions to ensure the child's educational stability while in foster care. State agencies must ensure that the child remains in the school of origin, unless not in the child's best interest. The child's placement should take into account the appropriateness of the educational setting and proximity of the school in which the child is enrolled at the time of placement. If the school of origin is not in the child's best interest, then the agency must provide immediate enrollment in a new school and provide all educational records.
  - There are a number of other elements of this law, particularly those that apply to children in care that are IV-E eligible (ask your volunteer supervisor if this applies to your case). Some states already provide such opportunities, but many more are currently examining the feasibility of implementing the opportunities that the Fostering Connections to Success Act offers because it holds the promise of federal reimbursement for state efforts.

For children in care who are IV-E eligible (varies from state from state; nationally about 50% of children in care):

- States may choose to extend support for youth in care to age 19, 20 or 21, and receive federal assistance to provide such support, and the extension of Medicaid. Youth must be enrolled or participating in an eligible program.
- States also have the option of receiving federal assistance to provide payments to qualified grandparents and other kin who are willing to become legal guardians, and who meet state requirements for placement.

Once state budgets allow sufficient resources to cover the match requirement, it is anticipated that states will expand these provisions to all children in care, and not exclusively to IV-E eligible children as the federal law allows.

#### *Key Impact of the Fostering Connections to Success Act on CASA/GAL Advocacy*

Search and notification of relatives does not end after 30 days; birth relatives need to understand multiple ways they can be involved beyond solely as a placement option (examples include attending school events, transportation, holidays). When appropriate, volunteers should keep family engaged and informed.

#### **Carl Perkins Vocational Education Act**

This law requires integrated academic and vocational education that ensures full and equal access for special populations, including special services that might be needed to succeed.

### **Family Educational Rights and Privacy Act (FERPA)**

This federal law protects the privacy of a student's education records. It also ensures a parent's right to inspect and review these records and to consent to disclosures of personally identifiable information about themselves and their children.

### **Indian Education Act**

This act provides funding to local educational agencies to support special education programs for Indians. It requires Indian tribe or parent involvement in planning, development and operation.

### **Individuals with Disabilities Education Act (IDEA)**

This act ensures that all children with disabilities have access to a free, appropriate public education that emphasizes special education and related services designed to meet their unique needs and prepare them for employment and independent living.

### **McKinney-Vento Act**

This law ensures that homeless children and youth have equal access to the same free, appropriate public education that is provided to other children.

### **No Child Left Behind Act**

Passed in 2001, this law ensures that all children and youth have a fair, equal and significant opportunity to obtain a high-quality education and reach proficiency on challenging state academic achievement standards and state academic assessments. In addition, this act requires that all schools be safe and drug free.

### **School-to-Work Opportunities Act**

This law provides funds to states for planning grants and for state subgrants to local partnerships to give all students the chance to complete a career major. It assures equal access to the full range of program components for all students, including youth in out-of-home care.

## Court Report Writing

### **Activity 4.12: Court Report Writing—Making Recommendations**

**Part 1:** Click on the link to Part 1 of Activity 4.12 to read about things to consider when you write recommendations in a CASA/GAL volunteer court report.

**Part 2:** The facilitator will provide four or five of the recommendations you and your fellow training participants wrote in the Amarillo case study activity. Based on the material you just read, identify three changes you would make to these recommendations. In the online forum, post your ideas.

## In-Person Training

### Welcome

#### **Activity 4.13: Welcome**

**Part 1:** On a separate sheet of paper, write the one concept you think has been most important to you over the course of this training so far. You may have more than one “most” important concept, but choose one concept for the purpose of this activity.

**Part 2:** When the facilitator asks you to switch, pass your paper to someone else in the class. At the same time, you should receive someone else’s paper. Read what the other person has written as the most important concept, and take a moment to think about why someone might consider that concept vital for a CASA/GAL volunteer. Briefly write your ideas below the initial concept. The facilitator may ask you to switch papers several times and reflect and write your thoughts on several people’s papers. At the end of the activity, return the paper to the original writer.

In the large group, share the concept you consider most important.

## Child Development

When children's needs are met appropriately, they are able to grow and develop optimally. It is important in your work as a CASA/GAL volunteer to be able to assess age-appropriate behavior for children from birth through adolescence. The next activity provides information on growth and development that will be a resource to you in your work.

### Activity 4.14: Ages and Stages

Consider which of the following age groups you have the most interest in or experience with:

- Birth to 6 months
- 6 to 12 months
- 12 to 18 months
- 18 months to 3 years
- 3 to 5 years
- 6 to 9 years
- 10 to 15 years
- 16 to 21 years

Divide into small groups according to the age group that you select. The facilitator will give each group an envelope that contains cards with behaviors written on them. Several different age groups' behaviors are represented in each envelope. Trade cards with the other groups until you have a set of cards that you think is descriptive of the age group you have chosen. After every group has finished collecting their cards, check your work by referring to the Child Development Chart that the facilitator provides. In the large group, share what you discovered and any questions you have.

### How Children Grow and Develop

1. No two children are alike. Each one is different. Each child is a growing, changing person.
2. Children are not small adults. They do not think, feel or react as grown-up people do.
3. Children cannot be made to grow. On the other hand, they cannot be stopped from growing.
4. Even though children will grow in some way no matter what care is provided for them, *they cannot reach their best growth possibilities unless they receive care and attention appropriate for their stage of development from a consistent figure in their life.*
5. Most children roughly follow a similar sequence of growth and development. For example, children scribble before they draw. But no two children will

- grow through the sequence in exactly the same way. Some will grow slowly while others grow much faster. Children will also grow faster or slower in different areas of development. For example, a child may be very advanced in language development but less advanced, or even delayed, in motor coordination.
6. During the formative years, the better children are at mastering the tasks of one stage of growth, the more prepared they will be for managing the tasks of the next stage. For example, the better children are able to control behavior impulses as 2-year-olds, the more skilled they will be at controlling behavior impulses they experience as 3-year-olds.
  7. Growth is continuous, but it is not always steady and does not always move smoothly forward. You can expect children to slip back or regress occasionally.
  8. Behavior is influenced by needs. For example, active 15-month-old babies touch, feel and put everything into their mouths. That is how they explore and learn; they are not intentionally being a nuisance.
  9. Children need to feel that they are loved, that they belong, that they are wanted. They also need the self-confidence that comes from learning new things.
  10. It is important that experiences that are offered to children fit their maturity level. If children are pushed ahead too soon, and if too much is expected of them before they are ready, failure may discourage them. On the other hand, children's growth may be impeded if parents or caregivers do not recognize when they are ready for more complex or challenging activities. Providing experiences that tap into skills in which children already feel confident as well as offering some new activities that will challenge them gives them a balance of activities that facilitates healthy growth.

Resources for Child Caring, Inc., Minnesota Child Care Training Project,  
Minnesota Department of Human Services.

When observing a child's development, keep in mind these key points:

- There is a wide range of typical behavior. At any particular age 25% of children will not exhibit the behavior or skill, 50% will show it, and 25% will already have mastered it.
- Some behaviors may be typical—in the sense of predictable— responses to trauma, including the trauma of separation as well as abuse and neglect.
- Prenatal and postnatal influences may alter development.
- Other factors, including culture, current trends and values, also influence what is defined as typical.
- As a CASA/GAL volunteer, you need to become aware of your values, attitudes and perceptions about what is typical in order to be more objective and culturally sensitive when assessing a child's needs.

## **Learn More!**

If you'd like to learn more about issues surrounding advocacy for children with developmental delays, listen to the National CASA podcast on this topic found at: <http://podcast.casaforchildren.org/advocating-for-children-with-developmental-delays>

To learn more about mental illnesses common in children and adolescents, go to: [www.aacap.org/cs/root/resources\\_for\\_families/child\\_and\\_adolescent\\_mental\\_illnesses\\_statistics](http://www.aacap.org/cs/root/resources_for_families/child_and_adolescent_mental_illnesses_statistics)

## Learning with Case Studies

### Activity 4.15: The Brown Case

**Part 1:** Your group will receive a hard copy of the initial case file for the Brown case. Take several minutes to begin digesting the information in this case file. Then send your Runner to the facilitator to request an additional document (either an interview transcript from a key player you'd like to speak with or another important document you'd find during a case). You may continue to request additional interviews and documents one at a time over the course of 35 minutes in order to complete your investigation of the case at this stage. Do not make your recommendations as a group.

**Part 2:** The facilitator will distribute copies of an assessment checklist and describe each section of the checklist. Working individually, write recommendations to the court regarding services for the child, services for the parent and placement decisions. Refer to the assessment checklist as needed and keep in mind the information you read online about writing effective recommendations.

**Part 3:** In pairs, evaluate whether each of your recommendations is fact-based and child-focused. Then in the large group, share some of your recommendations and discuss how you might improve them.

**Part 4:** In the large group, discuss the debrief questions that the facilitator distributes and any others that arose during the activity.

### Activity 4.16: Transferring Skills from the Case Studies

Each of the case studies focused on specific families, age ranges and circumstances; however, the skills and knowledge you applied to these cases will be transferable to other situations. In small groups, use the chart below to briefly describe how the skills you used while working on these cases will be transferable to other circumstances such as working on a case that may involve multiple siblings, serious mental health needs on the part of the child, attending to physical health needs of a child with HIV or fetal alcohol syndrome, etc.

	Greene	Lavender	Amarillo	Brown
<b>Child Welfare Laws</b>				
<b>Cultural Competence</b>				
<b>Communication Skills</b>				
<b>Working with Children &amp; Families</b>				

## Wrapping Up

### Activity 4.17: Know/Want/Learn

Look at the remaining Post-its on the “W” (WANT to Learn) flipchart. In the large group, discuss the following questions:

- Are there items you learned during this session that you’d like to move to the “L” (LEARNED) flipchart?
- Are there any new items you’d like to add to the “W” flipchart?

### Wrap Up

Fill out the Session 4 Training Evaluation and give it to the facilitator before you leave.

Be sure to complete the online work for Session 5 by the deadline the facilitator specifies.