

## Focus on Well Being Areas of Advocacy

### Role of an Advocate:

- Your role as an Advocate will include four main components: information gathering, facilitation, advocacy, and monitoring.
- In the execution of your responsibilities, you will advocate for your child(ren) in 7 **primary** areas of focus to ensure their overall wellbeing.

### 7 Areas of Focus:

1. Preserving Connections
2. Physical Health Needs
3. Mental Health Needs
4. Educational and Developmental Needs
5. Enhancing Family Capacity
6. Placement/Permanency
7. Older Youth Transition

#### 1. Area of Focus – **Preserving Connections**

- Currently, DCP&P has a goal of placing 80% of children in out of home placement with a relative (Kinship Placement) within the first 30 days of entering out of home placement.
- Every child has had a life prior to living in out of home placement. There may be family members, neighbors, and/or school relationships which are important to the child.
- Out of home placement disrupts these relationships. Kinship placement may help but removal from home is a disruption to the child's life and to their relationships.
- Within our advocacy, a great deal of emphasis is placed on the continuing relationship between the child and their birth parents. Generally, parental visitation is covered in the court orders resulting from the various hearings held.
- Based on an advocate's observations and ongoing monitoring, recommendations can be made to modify what is currently ordered.
- What does not always receive enough attention is maintaining other important relationships such as grandparents, siblings, or other family members. Based on the child, these might also represent areas requiring attention.
- **As a CASA, it is important to gain an understanding of pre-existing relationships and to determine through your advocacy how those relationships can be sustained.**

#### ➤ **Questions** helpful in thinking about preserving family and other relationships:

- Is the child placed in the least restrictive, most family-like setting, appropriate to his/her needs?
- Discuss with the parent if there are any family members who are willing to provide care on a temporary or long-term basis for the children?
- Is the child living near or visiting with his/her parents? Is it even possible?
- Is the child living with or visiting his/her siblings? If not, are visits enabled?
- Is the child living near his/her school? Would maintaining schools help the child?
- Are there barriers to parental visitation? Can anything be done to resolve the barriers?

- What efforts are being made to preserve connections in terms of friends, religious communities, and cultural connections?

## 2. Area of Focus – **Physical Health Needs**

- This area focuses on the physical wellbeing of the child including their health, dental and eye care.
- Each child is assigned a Child Health Unit Nurse who tracks the child’s physical health.
- While the resource parents can often provide helpful health updates about the child, it is important to gather information from other resources as well. These include the Child Health Unit Nurse and the child’s doctors.
- Chronic health conditions may be more difficult and will require a broader set of contacts.
- This area also needs to focus on areas such as nutrition, exercise and overall health.
- **As a CASA, you can play a key role in ensuring all of the elements of physical health remain a focus for the child through identifying needs and appropriate follow-up.**

### ➤ **Questions** helpful in addressing this area include:

- Is child receiving regular health and dental screenings? (Note: if the child is younger than 3, the dental screening is performed by the pediatrician.)
- Does the child have a primary doctor who tracks the child’s progress?
- Has the child received all immunizations?
- Has the child received a hearing and vision screening?
- If appropriate, has the child received regular dental care?
- Is the Resource Parent informed about the child’s medical conditions?

## 3. Area of Focus – **Mental Health Needs**

- This area focuses on a child’s mental and emotional health.
- Every child who enters out of home placement has experienced trauma. Depending on the circumstances leading to removal, the trauma response may be more severe. (Remember ACES – Adverse Childhood Experiences)
- CASA can play a role in ensuring innate issues and impacts of trauma, if identified, are effectively addressed through services provided to the child.
- Reaching out to service providers to gather information is an important step in your role as an advocate.
- Speaking with educators/resource parents is also critical to understand how the child is progressing.
- **As a CASA, you are in a position to step back and view all of the services being provided. Although you cannot assess the effectiveness of a service, you are in a position to potentially identify gaps and make appropriate recommendations.**

### ➤ **Questions** helpful in addressing this area include:

- Does the child exhibit behavioral issues which are atypical for a child of similar age?
- Has the child received a mental health screening and assessment? Is one needed based on their behaviors?
- Do current services adequately address the child’s needs?
- If a child is taking medication to address mental health issues, do all appropriate parties understand dosage, timing, side effects and possible drug interactions? Is the child being appropriately monitored?

#### 4. Area of Focus – Educational/Developmental Needs

- Due to any number of factors, a child in out of home placement may have been educationally and developmentally disadvantaged. This area focuses on exploring their needs and factors which will allow the child to be academically and developmentally successful.
- Various institutionalized services can be utilized to assist in identifying needs. This includes EIP (Early Intervention Program) evaluations and, if appropriate, IEP (Individualized Education Plan)/504 Plan evaluation, ISP (Individualized Student Plan).
- Speaking with educators/resource parents is critical in understanding how the child is progressing with his education. These resources will be important in identifying successes or needs.
- **As a CASA, you are in a position to monitor a child's progress, understand services provided and make recommendations for additional services if required.**

➤ **Questions** helpful in addressing this area include:

- If the child is under 3 years of age, has an EIP evaluation been completed? Note: all children in out of home placement under the age of 3 should have an EIP evaluation.
- If over 3 and if needed, has the child been evaluated by the Child Study Team (CST)? If so, has an IEP or 504 plan been developed and is it being executed? Special attention is needed to ensure carry over of IEP plans if a school transfer has occurred.
- What educational services are being provided?
- What is the educator's assessment of progress for the child? Does the child struggle? Is the struggle confined to a particular area? What is being done to address it?
- Is the child participating in after school activities? Does the child have an interest in participating in organized activity outside school hours? Are their wishes being accommodated?

#### 5. Area of Focus – Enhancing Family Capacity

- The primary goal for every child in out of home placement is reunification.
- The Division determines what services are required for a parent to regain custody and the Division will take steps to enable those services.
- It is important for CASA to recognize that when a child enters out of home placement, the birth parents are often in one of the lowest points of their lives. Many parents will be in distress and/or dealing with multiple hardships. Some parents may resist the idea of engaging in services or may not be in a position to fully comply.
- **As a CASA, you can play a key role in supporting the birth parents and ensuring they understand what services are being required of them. Through information gathering, you may also be able to determine if additional services will be beneficial and/or if there are barriers to completion of services.**

➤ **Questions** helpful in addressing this area include:

- Have the birth parents had the opportunity to participate in Family Team Meetings?
- Are there any cultural considerations that should be taken into account?
- Do the birth parents feel all of their needs are being addressed?
- What are other barriers to reunification such as housing, employment, transportation?
- How can CASA help remove those barriers?

## 6. Area of Focus - Placement and Permanency

- Currently, DCP&P has a goal of placing 80% of children in out of home placement with a relative (Kinship Placement) within the first 30 days.
  - Relatives utilized for placement must also qualify as a licensed resource parent and their homes must satisfy all of the Division's safety requirements.
  - Working with a new resource parent may present additional challenges as the new resource parent struggles to understand the varying requirements.
  - When a child enters out of home placement, the initial goal is reunification. A concurrent goal is developed to ensure a child does not spend longer than needed in out of home placement. If reunification is not possible, other options include Private Custody, Kinship Legal Guardianship or Adoption.
  - Generally, at the end of one year, a Permanency Hearing will be held to determine the plan for permanency. At times, there may be concurrent plans developed for the child.
  - **As a CASA, it is important to help facilitate understanding of Division requirements and needed services, monitor the child's progress and wellbeing while in placement, and make a permanency recommendation at the Permanency Hearing. As always, it is critical CASA share any questions, concerns or thoughts with the caseworker and the law guardian.**
- **Questions** helpful in addressing this area include:
- Is the current placement the best fit for the child? Are there relatives or a close child relationship available that might better serve the child in preserving connections?
  - Does the current placement represent a potential long-term solution?
  - Are there special needs which cannot be adequately addressed by the current placement?
  - Are there programs/services which might help the child better adapt to their placement.
  - Are there any gaps between resource parent understandings and requirements which the CASA can help bridge?
  - Does CASA have resources which might help?

## 7. Area of Focus – Older Youth and Transition

- The needs of a child in out of home placement change as they get older.
- For every youth age 14 and older, a Transitional Plan for YOUth Success ("Transitional Plan") is developed between the youth and the Division. The youth should be an active participant in the development of the Plan.
- Development of daily life skills such as health management, financial management, nutrition education, birth control, and drug/alcohol abuse prevention become more critical. (Generally, these services do not become available until the youth reaches the age of 16.)
- Planning is needed for various domains including supportive relationships/community connections, education, employment, living arrangement/housing, health, and transitional services.
- As the youth transitions to independent living, supportive relationships become even more critical.
- **As a CASA, you will fulfill your basic role regardless of the age of the child: information gathering, facilitation, advocacy, and monitoring a case. However, as the age of the youth changes so will your role. You should expect the focus of your advocacy to evolve as the older youth nears aging out. It is important that as a CASA, you empower the youth to be an active participant in their case planning.**

- **Questions** helpful in addressing this area include:
  - Has the youth participated in the development of the Transitional Plan? How do they feel about the Plan?
  - Does the youth have the documents they need?
  - What are the youth's goals?
  - Does the youth have supportive relationships/community connections? Can they identify them? Do they have a mentor they can talk to? Friends?
  - Is the youth progressing in the completion of their objectives and goals established in their Transitional Plan?

**Recap:**

- **Preserving Connections** - As a CASA, it is important to gain an understanding of pre-existing relationships and to determine through your advocacy how those relationships can be sustained.
- **Physical Health Needs** - As a CASA, you can play a key role in ensuring all of the elements of physical health remain a focus for the child through identifying needs and appropriate follow-up.
- **Mental Health Needs** - As a CASA, you are in a position to step back and view all of the services being provided. Although you cannot assess the effectiveness of a service, you are in a position to potentially identify gaps and make appropriate recommendations.
- **Educational/Developmental Needs** - As a CASA, you are in a position to monitor a child's progress, understand services provided and make recommendations for additional services if required.
- **Enhancing Family Capacity** - As a CASA, you can play a key role in supporting the birth parents and ensuring they understand what services are being required of them. Through information gathering, you may also be able to determine if additional services will be beneficial and/or if there are barriers to completion of services.
- **Permanency and Placement** - As a CASA, it is important to help facilitate understanding of Division requirements and needed services, monitor the child's progress and wellbeing while in placement, and make a permanency recommendation at the Permanency Hearing. As always, it is critical CASA share any questions, concerns or thoughts with the caseworker and the law guardian.
- **Older Youth and Transition** - As a CASA, you will fulfill your basic role regardless of the age of the child: information gathering, facilitation, advocacy, and monitoring a case. However, as the age of the youth changes so will your role. You should expect the focus of your advocacy to evolve as the older youth nears aging out. It is important that as a CASA, you empower the youth to be an active participant in their case planning.

**NOTE: Remember working as a team with the birth parents, resource parents, caseworker and the law guardian to address all areas of advocacy will allow you to be more effective in addressing the overall wellbeing of the child.**