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Questions from Directors

We had a family at our program for seven months last year. We never had any problem with them during that time. In many ways, they were a “model” family. Everyone was polite and positive, and everyone followed the rules. The kids were great. Last month the family came back to the program through a court order. Although the first two visits went fine (just like last year), the father made some very strong negative and suspicious statements about our program during the last visit. We were shocked. Now he’s really hostile. He questioned whether our volunteer was neutral, and said that I was too friendly with his ex-wife. He said that his current wife saw me several times talking to his ex-wife out in the community. His lawyer keeps calling us with questions. How did this happen?

Unfortunately, this type of thing is much more common than most directors think. Program staff can fall into the trap of thinking that certain parents are “friends of the program.” That’s when the trouble starts. **Here’s a warning to all directors: parents are clients, and clients should always be dealt with at “arms length.” Always -- even when they’ve left the program!** Clients come back to the program quite often. Therefore, you should not sit down at the table with them and chat about your lives when you run into them in a restaurant. You can politely say “Hello, how are you” and smile when they see you, but don’t sit down and talk about the status of your program, and how your child likes Sunshine Elementary, and ask how Junior is coping with his ADHD. These kinds of conversations lead clients to believe that they are friends with you. Your friends should not be your clients.

Is it easy to forget how quickly parents can find fault with you or your staff? If so, give me a call. I’ll give you plenty of examples of directors who “let down their guard” and end up on the receiving end of complaints.

Ultimately, this issue is about professionalism. When you become a program director, or you become staff or a volunteer, you give up your freedom to be comfortable, overly friendly, and involved in the lives of certain people in your community: namely, your clients.

Most directors/staff understand this while the parents are active clients. Many problems, however, occur after the case closes, and later comes back to the program. It is within THIS PERIOD OF TIME that most problems occur. Be careful. Be professional. Think of all past clients as potential future clients.

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Your interests, goals, and plans are not your clients’ interest, goals, and plans.

Attorney Judy X. represented Mrs. Jones in a case we had last year. Judy was very friendly and positive whenever we dealt with her. We had many conversations with her because Mr. Jones and his lawyer were very difficult to deal with and highly argumentative. Finally, that case

ended. Now Judy is representing a new client, Mr. Allen, and she treats us very differently. She accused us of bending the rules when we wanted to, and said we were unfair to her client.

Please remember that a lawyer's job is to represent the client. In some cases, this may mean that the lawyer seems to be on your side, but the reality is that the lawyer is always on the side of the client. The same rules about professionalism apply.

Scenario to Consider (Discussion at March Phone Conference)

Madeline is a mental health counselor in a small community. She counseled Joey last year. Joey's mother Debra brought him to each session. Over time and through many short conversations when dropping Joey off, she learned that she had much in common with Madeline, and she trusted Madeline with Joey's counseling. The counseling, which was part of a family court order, ended after a few months. Six months later, Madeline bumped into Debra at the busy local Fairgrounds. For about a half hour, the two talked about Joey, and also about Madeline's daughter, Shereese. Each bought a beer. They talked about their roller coaster fears. Debra made a few comments about her ex-husband, Oliver, who married Jane, a much younger woman last year. Madeline shared that her hours were being reduced at work due to funding reductions. Debra talked about her new boyfriend, Fred, who is the "love of her life" and "a brilliant, kind man." Debra also gave advice to Madeline about an art teacher for Shereese, and promised to put in "a good word" with the teacher, who wasn't accepting more students but who was Debra's good friend and might make an exception.

1. What is your reaction to Madeline's interaction with Debra?
2. Today Madeline received a court order indicating that a family dispute had arisen, and she was to provide counseling for Joey and his step mother Jane. What, if any, issues should be considered before Madeline accepts the referral? Are there any disclosures that should be made?
3. How do you think Oliver would react if he knew of these conversations? How about Jane?
4. Madeline also reads in the paper that Debra's boyfriend Fred was arrested for stalking his ex-wife. Madeline thinks back to her conversations with Debra, and begins to worry about Fred's presence. Does this make a difference in taking the case?
5. Is there any ethical bright line that Madeline has crossed? Should she take the case? Why or why not?
6. Could this type of scenario ever happen to a supervised visitation staff member?

Supervised Visitation Network National Conference

The Supervised Visitation Network is holding its annual conference in Orlando from May 9-12. For more information about this great opportunity, check out the website <http://www.svnetwork.net/conference.asp>. The Clearinghouse on Supervised Visitation will be

leading two scheduled sessions at the conference. In addition, I will be happy to meet with Florida program directors separately to discuss SV issues.

Using Supervised Visitation to Promote Family Economic Self-Sufficiency

Karen Oehme, J.D.

This workshop will describe the lessons of a project that used two Florida supervised visitation programs to improve financial outcomes for low-income families.

Domestic Violence Cases in Supervised Visitation: A data analysis from five programs

Karen Oehme, J.D.

Over 100 domestic violence injunctions in which judges ordered families to use a local supervised visitation program were analyzed by the Florida Clearinghouse on Supervised Visitation. Five SV programs separately tracked these cases to determine service patterns. The outcomes were surprising and informative. This workshop will address the methods and conclusions of the research. This session is important because of researchers' call for more outcome data on the usage of supervised visitation.

Training: More about Family-Centered Practice

By Ember Maselli

Overview and Review of Concepts

Florida's system of child protection emphasizes family-centered practice. Family-centered practice is a way to work with families in order to help parents to care for and protect their children. This approach focuses on the needs of children in their families and in their communities. Family-centered practice also represents a strengths-based model of practice.

For our definition, "families" can include birth families, step-families, extended families, foster families, and adopted families. It also includes LGBT family members.

Supervised visitation offers many opportunities to use family-centered practice in order to enhance parent-child relationships.

Unlike the professional-centered models, where the expertise of the professionals who work with the families is given priority, families are more closely involved in determining their own futures when a family-centered practice is utilized.

The Four Components of Family-Centered Practice

In child welfare, there are generally four core components of family-centered practice. Those include the following:

1. The focus of attention is on the family unit.

- By working with the family unit, family-centered practice works to ensure the safety and well-being of the family.
- 2. Professionals must emphasize the encouragement of effective functioning within families.
 - The focus is on the family's potential to identify and follow through with responsibilities.
- 3. Families are involved in the process of establishing policies, services, and program evaluation.
 - Family-centered practitioners work with families to design a program and set of services that works best for the family depending on cultural background and context.
- 4. Families work with comprehensive, diverse, and community-based services and supports.
 - Family-centered practice helps to increase the communication between families, service providers, and other areas of the community.

The family-centered model focuses on empowering families. There is a strong emphasis on:

- Family strengths
- Responsibility
- Autonomy, choice, and decision making
- Active participation by families with professionals

Common Intervention Strategies

Using the family-centered model, supervised visitation staff can implement the following strategies to better assess and work with families:

- Conduct individual family interviews/informal assessments of each family member.
- Focus on safety with victims and children.
- Assess and understand the risks and dangers faced by each family member.
- Create program visitation plans that are based on agreements/contracts which have been developed with the parents.
- Seek court ordered services when parents are unable or unwilling to provide for their children's basic needs.
- Link families with services and providers to help improve functioning.

- Provide visitation services for parents who wish to have timely and successful reunification, and work towards this goal.

Modeling during Supervised Visitation

Another way to use family-centered practice is by modeling behavior for parents and children to help strengthen relationships and to encourage positive parenting strategies.

- The supervised visitation worker can give parents suggestions on how to interact with their children. This can help strengthen bonds between family members.

The supervised visitation worker must intervene if a parent becomes too violent, angry, or aggressive when interacting with a child. The worker can do this by modeling positive parenting behaviors.

This type of practice can enhance the relationship between parents and children and make supervised visitation more pleasant in the future

Scenarios

While firmly disciplining children is not abuse, yelling can escalate to emotional abuse, which could lead into physical abuse. The following scenario shows possible ways to react when a child is misbehaving.

Cindy has just arrived at supervised visitation to see her four-year-old daughter, Madeline. Cindy and visits with her once a week. While playing with some toys, Madeline throws a ball to Cindy, and it hits her in the nose. Cindy is in pain, and begins walking towards Madeline, yelling at her. She continues to move closer, and gets close to Madeline's face, all the while yelling. Cindy insists that it is Madeline's fault and that she did it on purpose because she is mad at her.

Instead of allowing this to continue, the supervised visitation staff member can calmly offer a different solution to confronting Madeline.

- The supervised visitation worker can calmly ask Cindy if there would be a better way to react, and ask her if she has any solutions besides yelling.
- The supervised visitation worker can model behavior by encouraging a dialogue between Cindy and Madeline. The worker can ask Madeline if she threw the ball on purpose, and ask her to apologize if she did. The worker can ask Cindy to explain to Cindy how she feels about being hit with the ball. This helps build empathy.
- If it was a mistake, the supervised visitation worker can explain to Madeline how balls can hurt people, and to be careful next time.
- The supervised visitation worker can talk with Cindy after the visit is over, with Madeline out of the room. The supervised visitation worker can explain that an

authoritative parent can discipline children, but in a rational, issue-oriented manner, instead of yelling at her child without understanding why the child behaved the way she did. Cindy should be encouraged to come up with ways to talk to Madeline in the future.

- The supervised visitation worker can talk with Cindy after the visit is over and encourage Cindy to think of strategies to better handle Madeline's behavior on their next visit.

Dan is a father who has been visiting his eight year old child in supervised visitation for a few weeks. While playing, Dan's son Jeremy is rough. He is loud, and is not talking to his father in a kind manner. Jeremy calls his father names, throws toys at him, and hits him to get his attention. Dan does nothing to stop the behavior.

This kind of behavior from a child can harm relationships between father and son, especially when the son is not respecting his parent, and the parent is not enforcing any type of rules or behavioral policies. The supervised visitation worker can intervene or model behavior for Dan.

- The supervised visitation worker can calmly model behavior for Dan by explaining to Jeremy that it is not okay to hit other people, including adults, and that name calling is disrespectful.
- The supervised visitation worker can engage Dan in conversation, and ask him if he likes when Jeremy hits him, and encourage Dan to talk to Jeremy about the issue while still visiting with him.
- The supervised visitation worker can talk to Dan after the visit is over, when Jeremy is out of the room. The supervised visitation worker can explain that this type of disengaged parenting style can lead to children being rebellious and defiant when children don't get what they want, and lead to anti-social behaviors.
- The supervised visitation worker can talk with Dan after the visit is over and ask Dan to think of strategies to better handle Jeremy's behavior on their next visit.

Beverly has been visiting her daughter, age nine, for a few weeks. Her daughter, Lisa, is growing older, and is more able to understand her situation in supervised visitation, and the dynamics between her parents. While at visitation, Lisa does not listen to her mother's suggestions of things to do and leaves a mess when she moves from one activity to another. When her mother asks her to clean up or to have a better attitude, Lisa ignores her or talks back. Seemingly overwhelmed, Beverly tries to enforce rules, but Lisa ignores her efforts to discipline completely. Beverly becomes visibly upset and feels out of control.

Lisa seems to have little to no respect for her mother or her mother's rules. This could be because of the scenarios occurring in her foster home, between her parents, or other factors.

- In order to model behavior for Beverly, the supervised visitation staff can suggest ways to speak more firmly to Lisa.
- The supervised visitation staff can explain to Lisa that her mother has rules and have Beverly explain the rules to Lisa. Beverly can tell Lisa that if she does not obey, there will be consequences to her actions.
- The supervised visitation worker can talk with Beverly after the visit, when Lisa is out of the room, and explain that she has been parenting in a style called the indulgent parenting style. This style is demonstrated by a parent, who is very responsive to their child, but does not demand certain behaviors or enforce rules that should be followed. Children who have indulgent parents often act out and feel like they have no consequences.
- The supervised visitation worker can talk with Beverly after the visit is over and Lisa is out of the room. The worker can ask Beverly to think of strategies to better handle Lisa's behavior on their next visit.
- The supervised visitation worker can explain to Beverly that a parent who implements the authoritative parenting style combines two factors. The first factor is being demanding and responsive, to help discipline the child. The parent also responds to the child's needs, and is not dismissive. This type of parenting style allows for children to have rules and boundaries, and also a maintain communication and respect for parents or caregivers.
- The worker asks Beverly to strategize about responding to Lisa's future behavior.

Conclusion

By modeling positive parenting behavior, suggesting parenting alternatives, and asking parents to strategize about their interaction with children, staff can help to improve the relationship between parent and child, and build the parent's confidence. This relationship is a central tenant to family-centered practice.

Research has shown that adolescents of calm but authoritative parents (like the modeling described above) learn how to calmly discuss issues, negotiate, and compromise. They understand that their own opinions are valued and taken into consideration, and value other's opinions as well. As a result, these children are more likely to grow up with better relationships with their parents, be more sociable, responsible, and independent.

References

Institute for Family Violence Studies (2011). *New Family-Centered Practice Material*. Retrieved from http://familyvio.csw.fsu.edu/SV/nc_prac_mat.php

Kopko, Kimberly (2007). *Parenting Styles and Adolescents*. Retrieved from <http://www.parenting.cit.cornell.edu/documents/Parenting%20Styles%20and%20Adolescents.pdf>

National Resource center for Permanency and Family Connections (2011). *Family-Centered Practice and Practice Models*. Retrieved from http://www.hunter.cuny.edu/socwork/nrcfcpp/info_services/family-centered-practice.html

Parenting Styles (n.d.). *Parenting Styles*. Retrieved from <http://parenting-styles.org/>

U.S. Department of Health and Human Services (n.d.). *Family Centered Practice*. Retrieved from <http://www.childwelfare.gov/famcentered/>

SPICE: The dangerous, new synthetic marijuana

Listen at visits for words you don't recognize. Children and adults may be putting themselves at risk.

The Clearinghouse would like to inform all Supervised Visitation staff of this new drug being used by teenagers. It is extremely important that everyone is aware of this new substance and its harmful effects.

Synthetic marijuana

This is a psychoactive herbal and chemical product that, when consumed, mimics the effects of cannabis. Basically, it is a legal herb spiked with many toxic chemicals. It is best known by the brand names Spice and K2, both of which are generalized trademarks used to refer to any synthetic cannabis product. These synthetic cannabis blends first went on sale in 2004 and gained popularity in 2006 by targeting young people and the amount of teen users continues to grow. There is no age restriction in Florida and it is legal and easily accessible.

WARNING! EASY ACCESS Anyone can purchase Spice at gas stations and convenience stores and for this reason, Spice and K2 are growing in popularity among teenagers nationwide.

How is Spice sold and used?

It is commonly marketed as "herbal incense" or "herbal smoking blends" and both look similar to potpourri. Users buy Spice because they think the effects are similar to those of marijuana. The dried herbs come in small packages with flavors such as "Pink," "Cloud 9," "Blonde," and "Summit". Retailers sell the products from \$15 to about \$50. Spice is also available online.

Spice can be rolled into cigarettes, mixed with tobacco in cigarettes or made into an herbal infusion to drink. It is absolutely toxic and extremely potent. A little is a lot and a lot is too much. Ingesting the chemicals found in Spice poses serious health threats and can be fatal.

Extreme Health Hazard

Spice and K2 are sold with a warning that it is not for human consumption but, there is no regulation. Researchers know that the artificial chemical compounds are unsafe for humans. One of these compounds is a chemical fertilizer and another has been found to be 100 to 800 times more potent than THC, the main active ingredient in marijuana. All of these chemicals have been listed with the Drug Enforcement Administration (DEA) as chemicals of serious concern. The chemicals in Spice remain longer in the brain and other organs. They are also not as quick to bind to receptors in the body, which means that there is an increased risk of overdose as individuals ingest more because they can't immediately feel its effects. As well, some users develop a tolerance for Spice and start to use more not realizing how dangerous it is. Since synthetic marijuana is not produced in an environment with quality control, the dosage is inconsistent and not regulated. This makes the effects highly unpredictable, particularly when compounded with other chemicals. "Scary Spice" or "Kill U2" are more suitable names.

Common Adverse Reactions

Researchers have found Spice can cause hyperventilation, anxiety attacks, seizures, nausea, increased pulse rate, heart palpitations, hallucinations, shaking, vomiting, convulsions, increased agitation, obvious increased temperature, dilated pupils, and a variety of other symptoms. It is important to note that synthetic cannabis intoxication is also associated with acute psychosis, worsening of previously stable psychotic disorders, and also may have the ability to trigger a chronic psychotic disorder among vulnerable individuals such as those with a family history of mental illness. Please be aware that Spice will trigger these disorders.

In late January 2012, Demi Moore was having a seizure after having smoked something "similar to incense" and throughout the distressed 911 call, Moore was described as "shaking", "semi-conscious," and "burning up" -- all adverse reactions to Spice. While no one is certain what happened to her, many health officials and doctors are convinced she was using Spice. Even though Spice is most commonly used by teens, it is available to everyone, everywhere.

The number of calls to U.S. poison control centers about Spice has doubled in the last year.

Why Isn't Spice Illegal?

Spice and K2 are designer drugs – drugs that have been modified to take advantage of loopholes in the legal system. Spice is difficult to detect and regulate, since the drug does not show up on the same tests that work for marijuana. Many European countries have deemed the chemical components of Spice illegal and dangerous. Although Spice is currently not illegal

in the United States, in the past few years several states have taken action in banning the chemical compounds found in these blends. We hope Florida will join those states very soon but, while the DEA is currently reviewing information on Spice, concern increases as it continues to be sold over the counter in Florida. More and more states are bound to follow suit and legalize Spice, since the drug is particularly dangerous while acting as a substitute for marijuana.

More kids are using Spice because they think that because it is legal, it is safe. But remember, Spice is an extreme health hazard.

References

ABC News Blotter, January 30, 2011 <http://abcnews.go.com/Blotter/doctor-seizures-demi-moores-smoking-spice/story>

American Association of Poison Control Centers, 2010 www.aapcc.org/

K2 Spice Drug Alert, Wakulla County Sheriff's Office investigation, Jun 29, 2010 <http://www.wctv.tv/home/headlines/97407654.html>

National Institute on Drug Abuse, December 2011 <http://www.drugabuse.gov/publications/infofacts/spice>

Wikipedia, 2010-2011 http://www.wikipedia.org/wiki/synthetic_cannabis

Turnover in Social Services

Overview

There is a great deal of employment turnover in social service and it is no different for supervised visitation. Many things can contribute to employee turnover and there are also factors that may be able to predict employee turnover. Although employee turnover often has a negative impact on an agency, there can be benefits to turnover: it also allows for new, more experienced or well-suited employees to take new positions.

Why Turnover Happens

There are any number of factors that can lead to turnover in social services. The demand of the job and the experiences, knowledge, and skills required to fulfill the tasks required are important. A worker who is lacking in any of these areas or an agency that does not adequately assess the needs and strengths of their employees can contribute to turnover. Listed below are just a few of the reasons why turnover could happen in an agency.

Personal Distress:

- Many social services workers and those in supervised visitation are working in environments that can be emotionally and mentally trying.
 - Studies have shown that up to half of the social work workforce in the United States reports personal distress as a direct result of their day to day duties (Wharton, 2012).
- Many employees may experience burnout. Burnout is the “physical, emotional, and mental exhaustion resulting from involvement with people in emotionally demanding situations”. This can lead many workers to feel helpless in their positions and many leave the field of social services (Weinbach, 2008 p. 298).

Lower Levels of Education:

- Employees who have lower levels of education or do not have social services-related degrees have been found to leave the social services field more often than those with advanced or more targeted degrees (N.C. Division of Social Services, 2000).
- Education levels have been shown to be positively correlated with longer stays at social services agencies.
 - Research has shown that people who want to stay at their current job often have traits like “human caring” and self efficacy, which are traits related to an education in social work (Social Work Policy Institute, 2000).
- Those social services workers who had internship or volunteer experience in the field before accepting a position at an agency also had higher retention rates.
 - This could be due to the fact that they had experience in the field beforehand and decided they wanted to continue on the path of social services.

Poor Organization or Supervision:

- Research has shown that people who stay in social services longer have reported that their supervisors were responsive, willing to listen, caring, and helpful. Those who left the social services profession (or were planning on leaving) did not report these positive traits as often (N.C. Division of Social Services, 1999).
- Poor organization of staff, unclear goals and objectives, or changes in supervision and organization can contribute to turnover. Employee retention has been found to be related to organizational support. The more a supervisor or agency is able to organize employees, clients, staff, and tasks, the higher the retention rate will be (Social Work Policy Institute, 2000).

Casework Overload and Inadequate Staff

- Many social service agencies have limited amounts of funding and therefore may resort to hiring fewer staff members than needed at the particular agency. This can cause existing workers to be forced to work harder and they may not be able to focus on given tasks as well as they did before. This can result in burnout or additional stress, which can lead to the employee leaving.
- Employees who may not be able to fully complete their job tasks do not understand the tasks they must complete or who receive negative feedback may be more likely to leave the profession.
 - One study found that 36 percent of former county welfare employees had mixed or poor reviews on their evaluations (Igelhart, 1990).

Other Reasons for Job Change

- Some employees will stay in their social services job for a short period of time. Many use social service jobs as a stepping stone to get more experience and move up to a supervisor position or in a related field. They may view their current position as a way to develop skills in order to gain more expertise for their desired field (Ingelhart, 1990).

Preventing Turnover

By recognizing some causes for social service turnover, there are ways that agencies and supervisors can act in order to prevent turnover. Although not all turnover is negative, it can cause for uneasiness within an agency and create confusion for both employees and clients. Below are some ways that supervisors and agencies can **help to prevent turnover**.

Being Aware of Possible Personal Distress or Emotional State:

- As stated above, both personal distress and non-responsive supervisors can lead to employee turnover. Supervisors can help by being more aware of how employees are feeling and helping to decompress after long days of work.
- According to the National Association of Social Worker's (NASW) code of ethics, under chapter 4.05 Impairment:
 - Social workers should not allow their own **personal problems**, psychosocial distress, legal problems, substance abuse, or mental health difficulties to interfere with their **professional judgment and performance** or to jeopardize the best interests of people for whom they have a professional responsibility.
 - Social workers whose **personal problems**, psychosocial distress, legal problems, substance abuse, or mental health difficulties interfere with their professional judgment and performance should **immediately seek consultation and take appropriate remedial action by seeking professional help**, making adjustments

in workload, terminating practice, or taking any other steps necessary to protect clients and others (NASW, 2006).

- Offering referrals or recommendations to employees who may be experiencing personal distress or burn out can help combat turnover. By recognizing these needs, and attending to them, the supervisor shows the employee they care about their well-being and are able to solve issues with personal distress that could affect work.

Improving Hiring Tactics:

- As stated above, an advanced degree or a targeted degree is related to lower levels of turnover. While not all employees with unrelated degrees will become another turnover statistic, it is important to take education into account when hiring.
- Due to the lack of open jobs in the current economy, many people may be applying to any job available. This can cause unqualified applicants -- who only plan on working in the short term -- to apply for job openings. Asking applicants what their long term goals are can help supervisors determine which employees are dedicated to the field, and which are just trying to get a job -- any job.

After Turnover

Turnover can either be a good thing or a bad thing. Often, employees who leave the profession may have been unsuited for their positions, and may have caused stress for other co-workers. However, even less skilled employees can leave a lot of work for co-workers to take up when they leave. The stress on staff can cause negative effects, including time management difficulties, burnout, frustration, and apathy.

Before an employee resigns, the employee's work ethic or performance level may decrease. They may be uninterested in working anymore or apathetic towards their work performance because they plan on leaving anyway. They also may be workers who have been forced to pick up extra work because of an employee's resignation.

- Conducting periodic performance evaluations and discussing productivity with employees can help supervisors predict this kind of behavior.
 - Some organizations can be left with workers who keep their jobs because of seniority, job specialization, or lack of job alternatives. In other words, only less motivated employees remain. Evaluations are important to maintain a work quality expected from the agency.
- Incentivizing work through friendly, fun workplace challenges and competitions can cause employees to work harder and maintain their performance levels.

- Talking to employees about long term goals can help determine when employees may plan on leaving. Noticing a decreased work ethic can key supervisors in on this behavior. Confronting employees about preparation for leaving may be a helpful tool in preparing for a resigning employee.

Team members or remaining employees may be called on to pick up where this worker has failed or fell behind, and this can cause stress. In some cases, higher-performing workers may leave due to stress from picking up tasks from the original worker.

- Let your employees know that the extra work load is only temporary and that a solution will be found to lighten their caseload or work.
- Ask team members about solutions to picking up work from resigning employee.
- Agencies often have informal means for handling the cases left by a resigning worker. This can include a supervisor monitoring specific cases on a temporary basis. A good way to keep caseloads from backing up is to have a plan in case a worker does leave.
 - Does a supervisor have enough time to temporarily take on cases? Can other workers take on one or two extra cases? Depending on the agency, these answers will be different.

When a member of a team leaves, this has a negative effect on the performance of self-managing work teams (Igelhart, 1990). When a supervisor is not directly involved with these groups, it can become difficult to manage work.

- Teams should work together and have a plan on how to split up work in case a worker leaves, is terminated, or takes a leave of absence.
- Task flexibility, or the ability of team members to take on assignments they do not normally perform, is important.
- In order to prepare for turnover, team members should take part in refresher training courses to ensure they know the proper protocol for completing duties they may not normally do but may come up if a team member leaves.

Best Practice for Father–Child Visits in the Child Welfare System

Introduction

A recent focus on policies and practice related to parent/child visits in the child welfare system has increased the knowledge of the field with regard to the importance of visits, frequency of visits, planning for visits, worker skills needed for effective visits, and outcomes of visits. Most child welfare families are headed by single mothers, so visiting policies and practice have largely been targeted to mothers and their children. In the past decade, however, there has been a movement nationwide towards more father involvement in the lives of children. As a result, the child welfare system is also developing strategies for father involvement.

The National Quality Improvement Center for Non-Resident Fathers (QIC NRF) was created by the federal Children’s Bureau in 2006 to promote meaningful engagement between the child welfare system and non-resident fathers. The QIC NRF believes that fathers should have the same opportunities as mothers to develop and maintain healthy relationships with their children. When families are involved in the child welfare system, best practice means that workers are inclusive of non-resident fathers by considering the father and his family as a potential placement resource, offering fathers services linked directly to their needs, inviting fathers to participate in the case plan, and allowing fathers frequent visits with their child(ren). Children benefit by having both parents involved in their lives to the greatest extent possible. This paper was funded through a generous contribution from the QIC NRF.

Research

Reunifying abused and neglected children with their families is a relatively new concept. Up until the 1960s, children were maintained in long-term foster care or institutions (Hartman, 1993). As researchers began to study the long-term effects of out-of-home care on children, they found that children were “drifting” from placement to placement with no permanency. Most of the children had never been visited by their parents (Maas and Engler, 1959). A renewed interest in family ties led to a permanency planning movement that culminated with the passage of Public Law 96-272 in 1980. The use of visits increased with the passage of the federal law (Hess, 2005) and subsequent research on parent/child visits and father–child visits found:

- The likelihood of mothers reunifying with their children increased ten-fold with mother/child visits (Davis et al, 1996).
- The first round (2000–2004) of the federal Child and Family Services Reviews showed a close association between parent/child visits and achieving permanency.
- The Child and Family Services Reviews indicated that the more caseworkers included mothers, the more likely they were to include fathers in assessment, services, case planning, and visits.
- A survey of caseworkers in the child welfare system showed that 30% of nonresident fathers visited their children with about 13% doing so on a regular basis (Malm, Murray, and Geen, 2006).

- A demonstration project emphasizing father-friendly practice and training for caseworkers to engage fathers showed father–child visits peaked at six months with one-third of the fathers complying with the plan for visiting (English, Brummel, and Martens, 2009).

Differences Between Fathers and Mothers that Inform Father–Child Visits

What are some differences between males and females/fathers and mothers in communication and in parenting styles that may affect father–child visits?

- Men are more task oriented, less likely to ask for help, have more difficulty in expressing feelings, are more apt to shout when angry, and less likely to talk about relationships than are women.
- Fathers use a stern voice and fewer words when correcting children.
- Fathers engage in more active and rougher play with children than do mothers.
- Fathers allow children more freedom and opportunity to explore than mothers.
- Fathers place more maturity and autonomy demands on sons than on daughters. (National Family Preservation Network, *Advanced Fatherhood Training Curriculum*)

What are the implications of these differences in communication and parenting styles related to father–child visits in the child welfare system? Could differences in male/female styles of communication be exacerbated in tense situations? If so, then a mostly-female child welfare system workforce interacting with confused, angry fathers whose children have been removed presents a potential barrier to a good working relationship. The QIC NRF recommends that a male worker have the first contact with the father. Since that is generally not feasible, female workers need to be trained on how to approach fathers and how to respond to male methods of communication including hostility, anger, and difficulty with expressing feelings and concerns. The more that workers understand fathers’ methods of communicating and parenting, the faster they will establish a working relationship with the father to facilitate case planning and father–child visits.

Based on the parenting style of fathers, visits between fathers and children will emphasize the following:

- Fathers should spend considerable time with their children playing and having fun. Fathers teach children how to explore the world while also helping children learn how to keep aggressive impulses in check.
- Fathers should maintain the active, physical style of fathering even as their children age. Active pursuits such as hiking are far more valuable than spending time in passive activities such as watching television.
- Physical activities can be combined with productive activities such as household repairs, raking the back yard, or washing the car. These shared activities promote a sense of responsibility and significance in children that is, in turn, linked to greater self-esteem, academic and occupational achievement, psychological well-being, and civic engagement later in life.

- Fathers' involvement in educational activities such as reading to their children or meeting with the teacher have a greater effect on children's academic success than mothers' involvement.
- Fathers' involvement with sons is critical in the transition from boyhood to manhood. (Rosenberg and Wilcox, 2006)

What Fathers Say That Informs Father–Child Visits

In 2004 researchers in Kentucky sent out a survey to all fathers involved in the child welfare system. Over 300 fathers responded with a slight majority expressing satisfaction with their contact with the caseworker, invitation to attend meetings regarding their children, perception of being treated politely and professionally by staff, and a conclusion that their children were helped by the agency. A majority of fathers responded negatively to questions about services offered to their family, referring others to the agency for assistance, seeking help in the future from the agency, and receiving services that helped them become better fathers. Earlier comparison surveys involving mostly mothers found satisfaction rates of 80% suggesting that there is a lot of room for improvement in working with fathers.

Fathers also reported on referrals to services and receiving those services. While over 80% of fathers were referred for visits with the child, only 42% actually had visits. About 40% of fathers would have liked a referral to a father support group but only 9% of the fathers were referred to a group (6% attended). Researchers noted that mailing addresses were available for only 16% of fathers and that barriers to receiving services resulted in low follow-through rates for fathers.

The researchers made a number of recommendations that resulted in changes for fathers involved in the Kentucky child welfare system, and these changes included a state information Web site, an annual fatherhood conference, training on father involvement, increased efforts to locate fathers, efforts to improve father parenting, and efforts to involve paternal relatives in placement decisions (Huebner et al, 2008).

Best Practice in Father–Child Visits

Best practice begins from the top down. Agency administrators must:

- Conduct a father-friendly assessment of the child welfare agency to determine current policies, practice, and perceptions regarding fathers.
- Take steps to make the agency father-friendly: provide male-oriented decorations and reading material, hire male staff, and establish flexible working hours for staff to in order to accommodate fathers' work schedules.
- Provide training to child welfare workers on different styles of communication and parenting of fathers and mothers; the importance of father involvement, including visits, in the child's life; and skill-building in working with fathers.
- Establish policies that treat mothers and fathers equally in all areas including case planning, services, visits, and placement.
- Require that fathers be identified, located, and contacted when the case is opened. Locator services need to be available for workers to use as a resource, and supervisors need to ensure that case records reflect the same contact information for fathers as for mothers.

- Provide male staff to make the initial contact with fathers.
- Set standards for father–child visits that include a written plan, frequency, location, and planned activities.
- Coordinate with other agencies, including courts, advocates, service providers, and visiting centers to ensure that fathers are included in case planning and visits.
- Work with local fatherhood support groups on a referral process that effectively connects fathers to support groups.

Summary

Best practice for father–child visits is in its infancy. However, there is well-established best practice for parent/child visits that provides a solid foundation for father–child visits. Workers need training on the different styles of communication and parenting of fathers and of mothers and need training for skill-building in working with fathers. It's critical that workers identify, locate, and contact fathers as quickly as possible and provide fathers with the same opportunities as mothers in case planning and visits with children. Fathers' visits with children should incorporate learning activities with physical activities. Fathers should be referred to support groups and provided with appropriate services that overcome barriers to developing a healthy relationship with their children.

References

Children's Bureau. Summary of the Results of the 2001–2004 Child and Family Services Reviews, <http://www.acf.hhs.gov/programs/cb/cwmonitoring/results/genfindings04/index.htm>

Davis, I., Landsverk, J., Newton, R., and Ganager, W. (1996). Parental Visiting and Foster Care Reunification. *Children and Youth Services Review*, 18 (4/5), 363–382.

English, D. J., Brummel, S., & Martens, P. (2009). Fatherhood in the child welfare system: Evaluation of a pilot project to improve father involvement. *Journal of Public Child Welfare*, 3(3), 213-234.

Hartman, Ann (1993). Introduction: Family Reunification in Context. In B. Pine, R. Warsh, and A. Maluccio, (Eds), *Together Again: Family Reunification in Foster Care*, (page xvi), Washington, D.C.: Child Welfare League of America.

Hess, P. (2005). "Visits: Critical to the Well-Being and Permanency of Children and Youth in Care." In Hess, P. and Mallon, G. (Eds,) *Child Welfare for the Twenty-First Century: A Handbook of Policies, Practices, and Programs* (pp. 548–557). New York: Columbia University Press.

Huebner, R., Werner, M., Hartwig, S., White, S., and Shewa, D. (2008). Engaging Fathers: Needs and Satisfaction in Child Protective Services. *Administration in Social Work*, 32 (2), 87–103.

Maas, H., and Engler, R. (1959). *Children in Need of Parents*. New York: Columbia University Press.

Malm, K., Murray, J., and Geen, R. (2006). *What About the Dads? Child Welfare Agencies' Efforts to Identify, Locate, and Involve Nonresident Fathers*. Washington, D.C.: The U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation.

National Family Preservation Network, *Advanced Fatherhood Training Curriculum*,
<http://www.nfpn.org/father-involvement1/advanced-curriculum-package.html>

Rosenberg, J. and Wilcox, W.B. (2006). *The Importance of Fathers in the Healthy Development of Children*. Washington, D.C.: Children's Bureau, U.S. Department of Health and Human Services.

THE INTERSECTION OF SUBSTANCE ABUSE AND DOMESTIC VIOLENCE

THE FACTS...

- Six of every ten perpetrators of domestic violence abuse substances.
- 66% of female domestic violence victims cope with the abuse by using substances like alcohol and/or drugs.
- Women who have experienced domestic violence are 15 times more likely to abuse alcohol and nine times more likely to abuse drugs than women who have not experienced domestic violence.
- Perpetrators often blame their violent behavior on their substance abuse.



WHY TREATING DOMESTIC VIOLENCE OR SUBSTANCE ABUSE ALONE IS NOT ENOUGH...

- Many interventions focus exclusively on domestic violence or substance abuse, without taking into account the fact that one problem often impacts the other.
- Interventions for batterers often do not address co-occurring substance abuse.
- Staff of substance abuse programs may blame the victim for the substance abuse and/or the domestic violence, instead of empowering the victim.
- Residential substance abuse treatment programs may not provide the security needed for domestic violence victims who are leaving an abusive partner.

COMMON DOMESTIC VIOLENCE TACTICS USED TO ASSERT POWER AND CONTROL...

- Perpetrators often force victims into substance use and addiction
- Perpetrators emphasize the substance abuse to blame the victim for family upheavals (including job loss, moving, and worsening abuse).
- Perpetrators' constant verbal and physical abuse robs the victim of both the energy and self-esteem needed to be emotionally available to the children.



HOW CAN SOCIAL SERVICE PROVIDERS HELP?

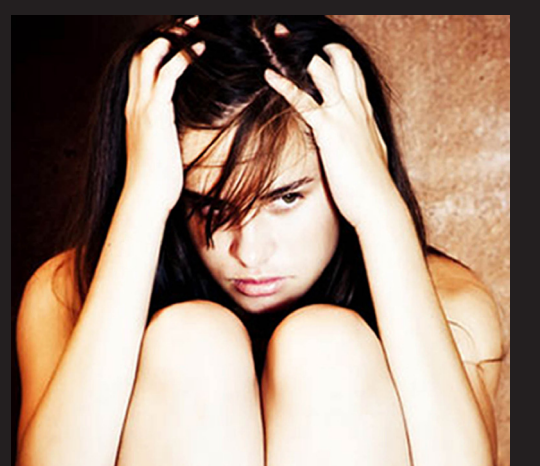
- Prioritize safety for the victim and children.
- Protect the victim's information (no one should reveal the victim's current circumstances to the abuser).
- Understand the factors contributing to the substance abuse as well as the non-linear nature of the recovery process.
- Focus on the victim's strengths and inherent worth; emphasize empowerment.
- Refer individuals with co-occurring domestic violence and substance abuse issues to programs that address both issues concurrently.

REMEMBER...

- Alcohol and drugs do NOT cause domestic violence. Perpetrators choose violence.
- Domestic violence does NOT cause addiction, but may increase the likelihood of drug or alcohol abuse by victims.
- A victim's substance use is never an excuse for the abuser's violence.



**DOMESTIC VIOLENCE:
INTOXICATION
DIDN'T CAUSE IT,
SOBRIETY
WON'T CURE IT!**



Florida's Supervised Visitation Programs: Protecting Children, Connecting Families
The Clearinghouse on Supervised Visitation, Institute for Family Violence Studies, College of Social Work, Florida State University

[HTTP://FAMILYVIO.CSW.FSU.EDU](http://familyvio.csw.fsu.edu)

