What’s Next? Opportunities and Challenges After Launching a Safe Babies Court Team

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ZERO TO THREE is a national, non-profit organization that informs, trains and supports professionals, policy-makers, and parents in their efforts to improve the lives of infants and toddlers.

OUR MISSION is to help professionals, policy-makers, and parents promote the healthy development of infants and toddlers.
Agenda

• Meet Jane

• Barriers and Opportunities In Creating A Cultural Shift With the SBCT Approach

• Supporting Active Concurrent Planning

• Enhancing the Village

• Building the Capacity for Post Permanency Supports

• Sustainability
Meet Jane...

Jane’s Story

When Jane arrived at the county hospital to deliver her fifth child, she hadn’t eaten in two days. She was homeless. Her skin was an unhealthy shade of gray, not the healthy mahogany it was when she was sober. She smelled of cheap alcohol, urine, and unwashed clothes. As she was being prepped for delivery, the nurses noticed bruising around her wrists and neck. Her boyfriends were invariably violent towards her but Jane didn’t consider leaving them; she knew she deserved to be punished when she made them angry. And where would she go?

She told the nurse that she had never gotten prenatal care.

As the OB nurse was taking her history, she asked, “When was your last drink?”

Jane replied, “Today, but only beer. I stopped the hard stuff when I found out it’s bad for the baby.”

The nurse nodded, “Do you drink beer every day?”

Jane nodded, “Just one bottle. Sometimes two.”

“How big a bottle?” the nurse asked.

Jane used her hands to indicate a quart-size bottle.

It didn’t take the hospital staff long to decide that they would perform drug testing on the low birth weight baby boy Jane delivered after 30 minutes of labor. Much to the surprise of the hospital team, Henry’s drug testing was negative. They notified the child welfare agency of Jane’s medical neglect for failing to get prenatal care and her use of alcohol throughout the pregnancy. Like his other four siblings, Henry was taken from her right after delivery.
Meet Jane
Barriers & Opportunities in Creating the Cultural Shift

Services

Trainings

Community-Based Supports
Effective Strategies for Developing a Trauma Informed Approach
Early Childhood Adversity Has Lifelong Health & Social Consequences
### Adverse Childhood Experiences of the parents and children we assist

<table>
<thead>
<tr>
<th>Number of ACEs</th>
<th>Original Survey Sample</th>
<th>SBCT Mothers</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>49.5%</td>
<td>0%</td>
</tr>
<tr>
<td>1</td>
<td>24.9%</td>
<td>0%</td>
</tr>
<tr>
<td>2</td>
<td>12.5%</td>
<td>0%</td>
</tr>
<tr>
<td>3</td>
<td>6.9%</td>
<td>0%</td>
</tr>
<tr>
<td>4 or more</td>
<td>6.2%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>
Common Traits in SBCT Parents:

- Difficulty planning, organizing, prioritizing, initiating and following through
- Difficulty learning from past experiences
- Impaired judgment
- Poor receptive language skills
- Difficulty switching gears
- Defective memory
- Maturity consistent with a much younger age than their chronological age
- Inability to predict outcomes
- Short triggers
Active Concurrent Planning

Plan B
Enhancing the Village

IT TAKES A VILLAGE!
Bringing it all together... who is touching this child’s life?

Juvenile Court

Child Welfare Agency

Early Intervention & Child Care Providers

ZERO TO THREE

Agencies that offer Family Support Partners

Mental Health Providers for Parents and their children

Home Visitors and Visiting Nurses

Substance Abuse Providers

Attorneys representing child welfare agency, children, parents

Foster and Adoptive Parent Organizations
<table>
<thead>
<tr>
<th>Child or parent-specific issue</th>
<th>Address the family issue with the professional team</th>
<th>Change the way the system functions for all families</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mom has terrible teeth due to long term use of meth.</td>
<td>Identify a local dentist willing to provide extensive dental work to this mom.</td>
<td>Build community capacity for dental care. Dental school offered to serve families who can’t afford dental care</td>
</tr>
</tbody>
</table>
Post Permanency Supports

Supporting the Foundation

List of Needs
Strategies for Sustainability
Goal: Achieve timely and nurturing permanent placement of infants and toddlers in foster care.

- Implement concurrent planning from the START of the case
- Use evidence-based programs and services
- Prevent multiple placements
- Ensure access to early intervention services (Part C of the Individuals with Disabilities Education Act)
- Address the mental health needs of infants and toddlers
- Ensure comprehensive and consistent health care that includes dental, vision and hearing exams
- Ensure ongoing post-permanency services and supports
Safe Babies Court Teams

Be the change you wish to see in the world
(Mahatma Gandhi)
SBCT: Wearing Two Hats…

- The work on the ground directly with individual families.
- Systemic work in the community
What the Coordinator can do…

- Provide child development expertise to the judge and SBCT community
- Coordinate services and resources for infants and toddlers
- Recruit and maintain the stakeholder team.
- Enter data about the families served into the data base to track the progress and identify barriers across all cases.
- Represent the Court Team in various community efforts as well as the National SBCT learning community.
The Coordinator’s Role with Families

- **Post Family Team Meetings** – following up on tasks with reminders or completing your own in a timely manner and reporting out.

- **Post Court Reviews** – ensuring that new issues are addressed in the next round of FTMs

- **In all settings** - Providing information about community based resources for identified needs.

- **Inviting key players to the next FTM** – always asking “Who else is touching this child’s life?”

- **Keeping an eagle eye out for barriers** - using that information to build your list of providers and services to seek out and either connect them with a specific family or introduce them to the agency and larger stakeholder group as an additional resource.
What the Community Can Do:

- **Support the Work of Collaboration** – Together identifying ways to connect the work across agencies to reduce the effect of silos and duplicated services.

- **As a Court Team, figuring out the 15%** - Going back to their home agencies to see what ways they could add to or even slightly alter services that could promote change and meet the needs of this population under the umbrella of services they naturally provides.

- **Checking in Annually** - To see how well the collaboration is going and if there are new connections that can be forged under the umbrella of services.
What the Judge Can Do:

- Lead the community by being present and engaged in Community Stakeholder meetings.
- Considering the lens of the child; ordering services that are child-centered and family focused (such as Child/Parent Psychotherapy, increased durations & quality family time, age and developmentally appropriate parenting education that is supportive of each specific family unit).
- More frequent reviews.
- Promote and support the use of creative problem solving within the child welfare agency.
Changing the System

Everything’s a “Pilot”
Consider this…

- How you are is as important as what you do.
- Hold parents up. Believe in them when the parent doesn’t yet believe in him/herself. See them as parents and not problems.
- Recognize your own triggers and areas of vulnerability. Know when you’re feeling burned out.
- People don’t always receive messages the way we think they will. How do you share information in ways that will be perceived by parents as respectful?
Questions and Discussion