Building Strong Families and Healthy Communities: The Safe Babies Court Team Approach

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Safe Babies Court Teams Project
ZERO TO THREE

How would you describe your site in terms of implementing current Safe Babies Court Team core components?

- Not implementing any core components
- Implementing some of the core components
- Implementing most—all of the core components
- Operating a community infant/toddler court team.

We are all a product of our earliest experiences.

Brain Develops Early

Infant Mental Health

The developing capacity of the child to:
• Experience, regulate and express emotion
• Form close and secure relationships
• Explore the environment and learn

Within family, community, and cultural expectations for young children

Healthy vs. Abused Brain

(Center on the Developing Child at Harvard University, 2007)
Trauma begins before birth

Mother’s lived experience:

- Poor nutrition
- Alcohol
- Poverty
- Racism
- Victim of violence
- Insecure housing
- Little or no prenatal health care
- Few or no social supports
- (Epigenetics)

Impact of Trauma on Infants, Toddlers, and Families

Maltreatment and exposure to violence affect:

- Brain development
- The immune system
- Emotional regulation
- Attachment and other relationships
- Ability to learn

US Child Welfare Data on Infants and Toddlers

<table>
<thead>
<tr>
<th>Age</th>
<th>Number of victims</th>
<th>Percent of all victims</th>
<th>Number entering foster care</th>
<th>Percent entering foster care</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;1 year</td>
<td>92,029</td>
<td>13.5%</td>
<td>45,535</td>
<td>17%</td>
</tr>
<tr>
<td>1 year</td>
<td>47,331</td>
<td>7%</td>
<td>19,442</td>
<td>7%</td>
</tr>
<tr>
<td>2</td>
<td>46,050</td>
<td>6.8%</td>
<td>17,061</td>
<td>6%</td>
</tr>
<tr>
<td>3</td>
<td>44,357</td>
<td>6.5%</td>
<td>15,461</td>
<td>6%</td>
</tr>
<tr>
<td>Total</td>
<td>229,767</td>
<td>34%</td>
<td>97,499</td>
<td>36%</td>
</tr>
</tbody>
</table>

Trauma for young children in foster care

- Difficult experiences precipitating placement
- Separation from parents, usually sudden and traumatic
- Placement with a series of caregivers
- Very little contact with parents after placement

Building Strong Families

Parents were children once, too.
Table discussion: experience working with parents

Think about parents you’ve met who were believed to have abused or neglected their children. Put together a list of factors that contributed to their parenting difficulties.

(10 minutes)

Adverse Childhood Experiences Questionnaire

While you were growing up, during your first 18 years of life:

1. Did a parent or other adult in the household often or very often:
   - Swear at you, insult you, put you down, or humiliate you? Or act in a way that made you afraid that you might be physically hurt? Yes/No: If yes enter 1 ________

2. Did a parent or other adult in the household often or very often:
   - Push, grab, slap, or throw something at you? Or Ever hit you so hard that you had marks or were injured? Yes/No: If yes enter 1 ________

3. Did an adult or person at least 5 years older than you ever:
   - Touch or fondle you or have you touch their body in a sexual way? Or
   - Attempt or actually have oral, anal, or vaginal intercourse with you? Yes/No: If yes enter 1 ________

4. Did you often or very often feel that …No one in your family loved you or thought you were important or special? Or
   - Your family didn’t look out for each other, feel close to each other, or support each other? Yes/No: If yes enter 1 ________

5. Did you often or very often feel that …You didn’t have enough to eat, had to wear dirty clothes, and had no one to protect you? Or Your parents were too drunk or high to take care of you or take you to the doctor if you needed it? Yes/No: If yes enter 1 ________

An Odds Ratio for Negative Adult Outcomes

<table>
<thead>
<tr>
<th>Outcome</th>
<th>No ACEs</th>
<th>1-3 ACEs</th>
<th>4-8 ACEs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart disease</td>
<td>1 in 14</td>
<td>1 in 7</td>
<td>1 in 6</td>
</tr>
<tr>
<td>Smoker</td>
<td>1 in 16</td>
<td>1 in 9</td>
<td>1 in 6</td>
</tr>
<tr>
<td>Alcoholic</td>
<td>1 in 69</td>
<td>1 in 9</td>
<td>1 in 6</td>
</tr>
<tr>
<td>Suicide attempt</td>
<td>1 in 96</td>
<td>1 in 10</td>
<td>1 in 5</td>
</tr>
<tr>
<td>IV-drug user</td>
<td>1 in 480</td>
<td>1 in 43</td>
<td>1 in 30</td>
</tr>
</tbody>
</table>

http://www.acestudy.org/home

Many of the parents whose children enter foster care are very damaged by their experiences in life.

Adverse Childhood Experiences Linked to:

- Teen pregnancy
- Multiple sexual partners
- Unstable relationships
- Risk of repeated victimization
- Mental health problems
Rethinking our approach to maltreating parents

**Significant childhood trauma**
- Substance abuse
- Domestic violence
- Depression

Families Served by Court Teams
Extremely Vulnerable

<table>
<thead>
<tr>
<th>SBCT</th>
<th>US</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>90%</td>
</tr>
<tr>
<td>90%</td>
<td>80%</td>
</tr>
<tr>
<td>80%</td>
<td>70%</td>
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<td>30%</td>
<td>20%</td>
</tr>
<tr>
<td>20%</td>
<td>10%</td>
</tr>
<tr>
<td>10%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Fetal Exposure

Prenatal Alcohol Exposure

Not only is my short-term memory horrible, but so is my short-term memory.

Difficulties for People Affected by FASD
- Abstract Reasoning
- Cause and Effect
- Emotional Regulation
- Impulse Control

Our ability to plan and learn from experience

Higher cognitive/executive functioning

Complex Trauma shuts down higher brain centers

How should I respond?

Input

Action

Input

Action
Historical Trauma

• Slavery
• Segregation
• Incarceration
• Reservations
• Boarding Schools
• Cultural extinction

The Other Side of the Coin

White privilege: Born on third base and think you hit a triple.

Racial Disproportionality in Foster Care

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Number in US population</th>
<th>Number in foster care</th>
<th>% in US population</th>
<th>% in foster care</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>498.3 m</td>
<td>174,477</td>
<td>62.1%</td>
<td>42%</td>
</tr>
<tr>
<td>Black/African-American</td>
<td>104.5 m</td>
<td>97,540</td>
<td>13.2%</td>
<td>24%</td>
</tr>
<tr>
<td>American Indian/Alaska Native</td>
<td>8 m</td>
<td>9,517</td>
<td>1.2%</td>
<td>2%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>136.6 m</td>
<td>90,299</td>
<td>17.4%</td>
<td>22%</td>
</tr>
<tr>
<td>Asian + Native Hawaiians/Pacific Islanders</td>
<td>94.2 m + 1.6 m</td>
<td>2,107 + 693</td>
<td>5.4% + 0.2%</td>
<td>1% + 0%</td>
</tr>
<tr>
<td>2 or more races</td>
<td>24 m</td>
<td>27,179</td>
<td>2.5%</td>
<td>7%</td>
</tr>
<tr>
<td>(Total US population)</td>
<td>308,745,538</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


Normal

• Two married parents
• Their children
• Single family home
• Good schools
• No medical or financial problems
• No substance abuse
• Parents are college educated
• Children are expected to go to college
• Children participate in organized activities from an early age

A Disconnect on the Meaning of Normal

• Two married parents
• Their children
• Single family home
• Good schools...

• Your mother was a heroin addict
• You had a baby at 13
• Your father smoked pot with you starting when you were 14
• Your cousin introduced you to meth when you were 16

Collaborative Problem Solving (CPS)

Kids (all people) do well if they can...
...if they can’t, something is getting in the way.
We need to figure out what so we can help.
Strategies for Infants and Toddlers

- Keep noise and lights low
- Introduce stimuli one at a time
- Employ soothing techniques
- Routines are key
- Simplify (one toy, not 5)
- Calming activities
- Create a safe quiet space where the child can go if s/he feels out of control
- Every age: Speak slowly. Use short sentences. Give directions one at a time. Repeat often. Use visual cues.

General Strategies

- Plan long-term
- Teach the child/parent to ask for help
- Focus on strengths
- Use praise constantly
- Identify someone (or a team) to serve as the “external brain”

Can this mother keep her daughter safe?

A. SAFETY FACTOR DESCRIPTION

Describe safety concerns that would pose immediate or serious harm or threat of harm. Consider factors that pertain to child vulnerabilities, protective capacities, and signs of immediate or emerging danger.

The mother has a severe addiction to crack and meth. She is living in the home with the child.

Apply today’s knowledge
1. What other information do you need?
2. What steps would you take immediately?

Caring for the Caregiver

Good information about child’s diagnosis & help planning his care 10 years out

Time away

Enough sleep

Regular Medical care

Friends you can call when you’re losing your cool

Support groups

Taking care of yourselves

1. Describe the specific safety actions to be taken. For each action include the person responsible for the action, when the action will occur, duration, frequency and the person responsible for monitoring the safety plan.

The mother has agreed to allow the child to stay with the maternal grandmother if she goes to do drugs.
Going it alone

It was six men of Indostan
To learning much inclined,
Who went to see the Elephant
(Though all of them were blind),
That each by observation
Might satisfy his mind.

And so these men of Indostan
Disputed loud and long,
Each in his own opinion
Exceeding stiff and strong.
Though each was partly in the right,
And all were in the wrong!

The Blind Men and the Elephant
by John Godfrey Saxe (1816-1887)

Family with child in foster care
pediatrician
Mental health
Case worker
Early interventionist
Substance abuse treatment provider

Safe Babies Court Teams
Help maltreated infants and toddlers reach safe, loving, permanent homes as quickly as possible.

Child welfare class action lawsuits
2. Connecticut (1992)
10. South Carolina (2015)
12. Texas (2011)

Court Team Community Partners
(Core Components 1, 2, and 3)

Leadership provided by:
1. Juvenile/Family Court Judge &/or Child Protective Services
2. ZERO TO THREE Community Coordinator
3. Safe Babies Court Team includes:
   - Court Appointed Special Advocates
   - Health care providers
   - Mental health clinicians
   - Substance abuse treatment
   - County attorneys
   - Private attorneys
   - Early interventionists
   - Foster parents
   - Faith community
   - Community foundations
   - Early childhood community
   - Parenting education programs
   - Private foster care agencies

Child-specific services and system-wide strategies
4. Targeting infants & toddlers in out-of-home care

The Court Team focuses on foster care cases involving children younger than 36 months. Working collaboratively with the investigators at the local child welfare agency, children are identified prior to removal. At the first court hearing, the Community Coordinator reaches out to the parents directly or through the parents’ attorneys to invite them to participate in the Court Team Project. At that time the parent receives a packet of information that includes information sharing releases. Given the multiple duties of the Community Coordinator, the Court Team needs to adhere to a caseload limit of no more than 20 open cases at any one time.

6. Monthly family team meetings

<table>
<thead>
<tr>
<th>Legal Action</th>
<th>Standard Time Frame</th>
<th>Safe Babies – Court Team Innovations</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPS determines that a child is at risk and needs to be removed from his/her parent’s care</td>
<td>30 days to complete the investigation.</td>
<td>Pre-removal conference (PRC)</td>
</tr>
<tr>
<td>Removal</td>
<td>Within 12 hours after the investigation is completed.</td>
<td>PRC helps parents prepare their children and begin seeking services for themselves.</td>
</tr>
<tr>
<td>Shelter Care/Emergency Removal Hearing</td>
<td>1-2 days after removal</td>
<td>Within 24 hours of removal</td>
</tr>
<tr>
<td>Adjudication</td>
<td>21-30 days after removal</td>
<td>7-14 days after removal</td>
</tr>
<tr>
<td>Dispositional Hearing</td>
<td>2 days after removal</td>
<td>Immediately after the adjudication.</td>
</tr>
<tr>
<td>Review Hearing</td>
<td>14 days after removal</td>
<td>Every 30 days with the family team.</td>
</tr>
<tr>
<td>Permanency Planning hearing: the court determines the family the child will be permanently a part of.</td>
<td>12-15 days after Shelter Care hearing</td>
<td>Everyone walks into the hearing with a clear understanding of the next steps.</td>
</tr>
<tr>
<td>TPR Hearing</td>
<td>Sometimes after the Permanency Planning hearing.</td>
<td>Requires a stronger family than TPR.</td>
</tr>
<tr>
<td>Review Hearing – Permanent</td>
<td>W. Va. judges’ discretion</td>
<td>There is a celebration in court with the parents and child.</td>
</tr>
<tr>
<td>Total time elapsed between removal and permanency</td>
<td>2 years or more</td>
<td>1 year or less.</td>
</tr>
</tbody>
</table>

5. Because young children see the world through the eyes of their closest caregivers, every change in placement is a difficult adjustment for the child. Changes in placement are minimized by reaching out to extended family members prior to removal from the parents’ care and by quickly identifying caregivers (kin and non-related foster parents) who would be willing to become the child’s permanent family if reunification becomes impossible. It is important for all members of the family’s team to understand concurrent planning and to make sure that parents understand it as the legal way to make sure that their child reaches a permanent home as quickly as possible.

7. Parent-child contact (visitation)

Very young children become attached to their parents whether the parents are able to provide consistent loving care or not. While the quality of that attachment may be insecure or even disorganized, separating a young child from his parents is still painful. The goal of parent-child contact is to permit the child and parent to keep the other a living presence in their lives and to improve the parent’s responsiveness to the child’s needs.

8. Continuum of mental health services

Children who have been traumatized by their parents’ care may need mental health services. Parents who are maltreating their children need some level of intervention to help them overcome the reasons for their neglectful or abusive behavior. The intensity of the intervention should mirror the specific characteristics of the parent and child.

- An assessment of the parent-child relationship
- Parenting education programs that have been shown to effective in working with maltreating parents (e.g. in-home)
- Visit coaching
- Child-parent psychotherapy
Olivia Y, named plaintiff in MS lawsuit

Olivia's experience in foster care

<table>
<thead>
<tr>
<th>Placement</th>
<th>Duration</th>
<th>DCFS Action</th>
<th>DCFS Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster home</td>
<td>1 week</td>
<td>Moved to kinship care</td>
<td>Background check for adults in the relative’s home was completed.</td>
</tr>
<tr>
<td>Maternal aunt</td>
<td>1 week</td>
<td>Moved</td>
<td>Aunt’s son was a convicted rapist</td>
</tr>
<tr>
<td>Foster home</td>
<td>1 day</td>
<td>Moved</td>
<td>Shelter MD conducted first medical exam which documented extremely small stature, low weight, abnormal facial features, severe cradle cap, strong body odor, extremely foul smelling bowel movements. Olivia “reacted in terror” when MD tried to evaluate possible sexual abuse. Follow up exam 2 ½ months later noted depression, continued malnutrition, vaginal redness and swelling.</td>
</tr>
<tr>
<td>Foster home</td>
<td>9+ months</td>
<td>Remains</td>
<td>Permanency goal remains reunification despite Betty’s positive drug screens and failure to comply with her service agreement.</td>
</tr>
</tbody>
</table>

9. Training and technical assistance

ZERO TO THREE staff and consultants provide training and technical assistance to Court Team communities. One of the most successful elements of the Safe Babies Court Teams approach is the exchange of ideas and innovative approaches across sites. The Safe Babies Court Teams Learning Community provides the Safe Babies Teams with access to the latest scientific and evidence-based practices through e-mail, conference calls, webinars, trainings, and other in-person meetings. The topics shared as part of the learning community are based on the issues that the Safe Babies Teams are struggling with on the ground in their communities.

10. Evaluation

Each Court Team evaluates its work. Information is collected about:

- Knowledge enhancement among professionals working in or with the child welfare system.
- Collaboration among providers working with the child welfare system (systems change).
- Services for children and families.

The approach is focused on bringing key participants into the evaluation planning and implementation activities. The evaluator shares results with staff in a timely manner to be useful for quality improvement purposes as well as to understand the outcomes of the initiative. Program information and outcomes are shared with local, state and national level stakeholders.

Court Teams Evaluation Results: JBA

- 97% of the identified service needs met
- Timely permanency
- Increased parent-child contact (twice weekly or more)
- More than two-thirds remained in 1 or 2 placements
- 99.05% protected from further maltreatment

(Hafford, McDonell, Kees, DeSantis, & Dong, 2009)
Court Team children exit foster care faster

<table>
<thead>
<tr>
<th>Type of Exit from Foster Care</th>
<th>ZTT (n=298)</th>
<th>NSCAW (n=511)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reunification</td>
<td>Median 309</td>
<td>Median 547</td>
</tr>
<tr>
<td></td>
<td>Mean 340</td>
<td>Mean 587</td>
</tr>
<tr>
<td>Adoption</td>
<td>Median 464</td>
<td>Median 800</td>
</tr>
<tr>
<td></td>
<td>Mean 484</td>
<td>Mean 824</td>
</tr>
<tr>
<td>Relative custodian</td>
<td>Median 351</td>
<td>Median 450</td>
</tr>
<tr>
<td></td>
<td>Mean 363</td>
<td>Mean 487</td>
</tr>
<tr>
<td>Non-relative guardian</td>
<td>Median 451</td>
<td>Median 878</td>
</tr>
<tr>
<td></td>
<td>Mean 467</td>
<td>Mean 780</td>
</tr>
</tbody>
</table>

8 months faster on average
10 months faster on average
3-4 months faster on average
10-13 months faster on average

Patterns hold using propensity scores in a competing risks analysis

Cost effectiveness of Safe Babies Court Teams

Children served by Court Teams reach permanency more quickly, generating savings equal to about 2/3 of the cost of the intervention.

Quoting the evaluators, “These savings… are only a proxy for the real benefits of the program—improved life outcomes. In the end, the goal of the program is not to reduce child welfare costs alone. If that were the case, one could reduce system costs simply by leaving children in dangerous or neglectful situations. If the program improves these longer term outcomes, then the return on the program could be quite large. For example, if Court Teams increase the chance of high-school graduation by roughly 3 percentage points, the resulting savings more than cover the costs of this program.”


Achieving evidence-based status

Site implementation plan question

In your community, which of the following areas need the most attention in order to promote a change in thinking and a positive shift in practice?

- Trauma/Trauma Informed Care
- Substance Abuse/Addiction
- Infant Mental Health
- Evidence-Based/Evidence Informed Practice
- Historical Trauma/Racial Justice
- Early intervention for children’s developmental delays/disabilities
- Knowledge of the damage done to infants’ developing brains by maltreatment and their foster care experience;
- Some of the above
- All of the above

If Olivia had come into care 3 years later...

- She would have had a developmental screening.
- She would have found a medical home in the practice of a developmental pediatrician.
- She would have been evaluated for Fetal Alcohol Syndrome.
- She would have been placed in one foster home where she could remain throughout her foster care experience.
If Olivia had come into care 3 years later...

- She and her mother would have spent time together at least twice/week.
- One therapeutic venue for those visits would be Child-Parent Psychotherapy.
- Her mother would have found kindness and concern about the problems that led to her substance abuse.

Change is incremental

- Everyone is welcome on the team.
- Make sure people learn something at every meeting.
- Start small: everything’s a pilot project.
- Learn about gaps in your systems from each family case.
- Take advantage of community resources.

Remember Rome wasn’t built in a day.

Critical concepts

- Recognizing the uniqueness of each family.
- Striving for stable, loving caregiving relationships in every baby’s life.
- Making the first placement the last placement.
- Focus on concurrent planning.
- Frequent parent-child contact.
- Building on parental strengths, supporting areas of need.
- Monthly case conferences (e.g. family team meetings, court hearings)

It’s all about relationships

How you are is as important as what you do.

-Jeree Paul

Contact information

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