



Applying Infant Mental Health Concepts to Dependency Court

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Why Infant Mental Health in Child Welfare?

- Unique Needs
- Responses
 - Individual
 - Systemic
 - Improving Outcomes



Court Processes with IMH Implications/Opportunities

- Removal (Shelter Hearing)
- Placement
- Family Contact/Visitation
- The Case Plan
- The Reunification Process



Removal

Two simultaneous risks:

(A) the maltreatment

(B) the emotional cost of separation on a child's developing attachments

(C) *Both can have long-term negative consequences for the child*

“Separation and Reunification: Using Attachment Theory and Research to Inform Decisions Affecting the Placements of Children in Foster Care”

Goldsmith, Oppenheim, & Wanlass, *Juvenile and Family Court Journal*, 2004



Placement: IMH Considerations

- Child's Secure Attachments
- Visitation
- Reunification Mindset
- Specific issues
 - Number of Children
 - Proximity to Parents
 - Understanding IMH Issues



Family Contact/Visitation

- continued contact with parents increases the probability that children will go home to their families
- visits have been called the "heart of reunification"

Simms, M. D. & Bolden, B.J. (1991). The family reunification project: Facilitating regular contact among foster children, biological families, and foster families. *Child Welfare, 70*(6), 679-691.

Hess, P. M. & Proch, K. (1992). Visiting: The heart of reunification. In B.A. Pine, R. Warsh, and A. N. Maluccio (Eds.), *Together Again: Family Reunification in Foster Care*.

Washington, D.C.: CWLA, 119-139.



Visits Matter

- To the Children:
 - calm some of children's separation fears
 - help children express their feelings
 - relate better to foster parents,
 - give foster children and foster parents continuing opportunities to see the parents realistically



Visits Matter

■ To the family

- they help maintain relationships within the birth family
- they empower birth parents
- help birth family members face reality
- allow birth family members to learn and practice new skills and behaviors
- they give social workers a chance to assess and document birth family progress

Hess, P. M., Mintun, G., Moelhman, A., & Pitts, G. (1992). The family connection center: An innovative visiting program. *Child Welfare*, 71(1), 77-88



Family Contact/Visitation IMH Considerations

- Purpose
- When
- How Often
- Under What Circumstances
 - Supervision
 - Location
 - Substance Abuse
 - Domestic Violence



Visitation and Reunification

"Research has shown that regular, frequent, visitation increases the likelihood of successful reunification, reduces time in out-of-home care, promotes healthy attachment, and reduces the negative effects of separation for the child and parent."

Visitations with Infants and Toddlers in Foster Care: What Judges and Attorneys Need to Know" Margaret Smariga, Practice and Policy Brief, American Bar Association, ABA Center on Children and the Law, Zero to Three Policy Center, July 2007



Case Planning: Parental Involvement

“..... areas that negatively impact the achievement of timely, stable reunifications: One of the most common issues is the lack of parent involvement in case planning and decision-making, including a lack of case-worker communication with birth parents regarding expectations.”

Family Reunification: What the Evidence Shows, Child Welfare Information Gateway, June 2006



The Case Plan

- Therapeutic Basis (IMH)
 - Infant Mental Health Issues
- Prioritize
- Parental Involvement
- Referral Process



Reunification Process

- System Integrity
- Planning for Reunification
 - Visits
 - “Removal”
 - Visits (communication)



Issues Impacting IMH

- Depression
- Substance Abuse
- Domestic Violence
- “The Great Divide”



What To Do?

- Awareness
- Priorities
- Monitoring
 - Frequency
 - Engagement, Engagement, Engagement



Engagement

**“Engagement of Families is critical
to the change process”**

(Dawson & Berry, 2002; Yatchmenoff, 2001)

