



Special Considerations: SAFETY COMPONENT FOR CHILDREN IN FOSTER CARE

When visits with biological parents may constitute a physical or emotional safety concern for children

Ashley Fiore, MSW, LCSW and Caroline Sigmon, MSW, LCSW

Note: Remember that your goals for the safety component of TFCBT with any child include decreasing future risk and building the child's sense of his or her own competency to manage scary situations related to the trauma. When children continue to visit with parents who have been scary and the parents cannot take responsibility for their actions, children are faced with a particularly difficult dilemma. These are not hard and fast rules. What helps one child feel safe won't help every child feel safe.

- I. The therapist can advocate for safety at the systems level, talking with the professionals involved in the arrangement and monitoring of the parent child visits.**
 - 1. Consider the child's Physical AND Emotional Safety: Both are important!**
 2. Consider separate visits with parents initially if the child's trauma was DV.
 3. Don't forget to ask about restraining orders if considering putting parents together.
 4. If parents can't admit wrong doing, create rules for topics that are off limits.
 - i. -Keep things present-focused
 - ii. -Talk to parents about looks and other threatening gestures that will cause the supervisor of the visit to end the visit early
 - iii. -No talking about the future until things are known
 - iv. -Teach parents how to express their feelings and validate those of the kids without making promises.
 5. Use the supervisor as a resource: Teach child that the adult is responsible for keeping this safe.
 6. Go sit by that person if your smoke alarm is going off.
 7. Est. a hand signal with the person supervising in advance to communicate you need to end the visit or check in with them privately.

- II. The therapist can work directly with the biological parents to increase safety during visits:**
 - 1. Respectful school counselor approach: never pointing fingers!**
 - "Here's what we've been working on, why it's been sticky, where you could be really helpful"
 - "Here's where your child is at, have you seen this? What's your experience been? What have you found to be helpful?"
 - "Have you ever noticed he gets nervous or jittery when there are loud noises? Would your child have ever been around people yelling – even in public or loud fire engines? What behaviors happen? What you're seeing is his getting triggered. One way to reduce his anxiety is by ..."
 - "I try to keep my voice at a low level to reduce his anxiety, even in sessions."
 - "You have a limited amount of time with him and we want it to be positive."



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2. **Ask for the parents' input on additional ground rules for visits before they occur:**
 - "What do you think would be appropriate? These are some things we've done in past that have been helpful: would you like some ideas? "

III. The therapist can work directly with children to increase safety during visits:

1. **Ask: "What would help you feel safer when you have the visit?"** Having others there with you? Certain places? Things you could take with you? (a game to share – not electronics, stuffed animal, etc)
2. **Recognize changes parents have made.** "Is your dad the same person now that he was then? How has he changed?"
3. **Help the child be a part of creating the "new normal":** "What are the things that would help you feel safe in the future?" "Just like you are learning new things, your parents are, too. Our job is for everyone to be honest about what happened. No one's getting in trouble. We want to make it better so nobody has to come back here again. The old way wasn't working, so the family needs a new way to be together/solve problems."