

A. Removal Resources Generally

- U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, Administration on Children, Youth and Families, Family Time and visitation for children and youth in out-of-home care, Information Memorandum (2020), https://www.americanbar.org/content/dam/aba/administrative/child_law/cb-familytimeim.pdf

This information memorandum provides information on research, best practices, resources and recommendations for providing children and youth in out-of-home care safe, meaningful and high frequency family time that strengthens the family, expedites reunification and improves parent and child wellbeing outcomes. The memorandum emphasizes the importance of family time and visitation in reducing the trauma of removal and placement of children in out-of-home care, maintaining the integrity of the parent-child relationship, healthy sibling relationships and overall child and family well-being.

- Vivian L. Gadsden et al. eds., Parenting Matters: Supporting Parents of Children Ages 0-8 (2016), <https://www.nap.edu/read/21868/chapter/1>.

Noting that decades of research have demonstrated that the parent-child dyad and the environment of the family are “the foundation of children’s well-being and healthy development,” the study focuses on supporting parents with children under the age of eight. In particular, the study seeks “to provide a roadmap for the future of parenting and family support policies, practices, and research in the United States.” According to the study, children who do not become securely attached to a primary caregiver (e.g., due to maltreatment or separation) may develop insecure behaviors in childhood and potentially suffer adverse outcomes later in life, such as mental health disorders and disruption in other social and emotional development. In an effort to facilitate healthy attachment, the study explores parenting-related knowledge, attitudes, and practices that are associated with improved developmental outcomes for children and provides guidance for the development of parenting-related programs, policies, and initiatives. Such recommendations include how to effectively utilize existing platforms and properly scale parenting programming to reduce the harm of removal.

In its chapter on parenting knowledge, the study identifies “several parenting practices that are associated with improvements in” physical health and safety and emotional, behavioral, social, and cognitive competence:

- Contingent responsiveness (serve and return);
- Showing warmth and sensitivity;
- Routines and reduced household chaos
- Shared book reading and talking to children
- Practices related to promoting children’s health and safety—in particular, receipt of prenatal care, breastfeeding, vaccination, ensuring children’s

adequate nutrition and physical activity, monitoring, and household/vehicle safety; and

- Use of appropriate (less harsh) discipline.

- Lenore M. McWey et al., The Impact of Continued Contact with Biological Parents upon the Mental Health of Children in Foster Care, 32 Child. & Youth Servs. Rev. 10, 1338 (2010), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2928481/pdf/nihms205361.pdf>

Guided by attachment theory, this study examines the impact of contact with biological parents on depression and externalizing problems (i.e., aggressive and delinquent behavior) in children in foster care. Controlling for gender differences and exposure to violence, the study surveyed 362 children who were subjects of abuse or neglect between October 1999 and December 2000. The study highlights many of the purported benefits of visitation between children in foster care and their biological parents (e.g., maintenance of family ties, lessened grief, increased overall well-being). While foster parents often challenge the benefit of visitation by reporting that visitation results in problematic behavior of the children, the study found that “more frequent contact with the biological mother was marginally associated with lower levels of depression and significantly associated with lower externalizing problem behaviors.”

- Renee Schneider et al., What Happens to Youth Removed From Parental Care?: Health and Economic Outcomes for Women with a History of Out-of-Home Placement, 31 Child. & Youth Servs. Rev. 440 (2009), https://s3.amazonaws.com/academia.edu.documents/44083072/What_happens_to_youth_removed_from_paren20160324-25611-1df1v7u.pdf?AWSAccessKeyId=AKIAIWOWYYGZ2Y53UL3A&Expires=1531767464&Signature=psl6xfEc0Oxk0I7V8gmq42Ia12s%3D&response-content-disposition=inline%3B%20filename%3DWhat_happens_to_youth_removed_from_paren.pdf

Exploring the relationship between out-of-home placement and mental and physical health problems and educational attainment, this study posits the need for “greater access to mental health care and social services for youth in out-of-home placement to improve their long-term health and economic well-being.” According to the study, routine screening for mental health problems and early intervention and prevention efforts should be targeted to youth in or transitioning to out-of-care placement. (See Removal into Foster Care for full annotation).

- Aubyn C. Stahmer et al., Developmental and Behavioral Needs and Service Use for Young Children in Child Welfare, 116 Pediatrics 4, 891 (2005), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1550707/>

This paper seeks to “determine the level of developmental and behavioral need in young children entering child welfare [and] estimate early intervention services use.” Collecting data on 2,813 children under the age of 6 for whom possible abuse or neglect was investigated, the study analyzed developmental and behavioral needs across five domains: cognition, behavior, communication, social, and adaptive functioning. The study found that across age groups, approximately half of young children in child welfare had developmental or behavioral problems that would qualify them for early intervention services. The study found, however,

that over the course of year, less than one quarter of young children in contact with child welfare received any developmental or behavioral intervention. The study also notes that, although serious developmental and behavioral problems are as frequent among children that remain home as those that are removed, children remaining home are much less likely to receive early intervention services. From a societal prospective, the study contends, “contact with [child welfare] represents an opportunity to identify children who are likely to be at substantial risk for poor long-term developmental trajectories,” and access to early intervention services should be increased whether the child remains in the home or is removed.

- Children with Traumatic Separation: Information for Professionals, National Child Traumatic Stress Network, https://www.nctsn.org/sites/default/files/resources//children_with_traumatic_separation_professionals.pdf.

The NCTSN provides a variety of tips for working with children experiencing traumatic separation, including allowing the child to have memorabilia (e.g., pictures, objects from a previous home, a scrapbook) to preserve positive memories of and stay connected to the absent caregiver and coordinating outside resources and referrals to whom the child can turn when needing comfort.