

Who Are the Young Children in Foster Care?

What Critical Points Must Be Kept in Mind When Addressing Their Needs?

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Case Example

- 6 month old Jenny
 - children placed between 6 months and 3 years of age are particularly vulnerable to separation i.e. eating, sleeping disturbances
- 18 month old Bridget
 - disorganized attachment patterns i.e. ignoring, clinging, crying, began to generalize attachment to other caregivers i.e. grandmother
- 4 ½ year old Andrew
 - can use language to help cope with loss, identifies with same sex parent (father), parentified child

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Scope of the Problem National Statistics

Child maltreatment victims birth to one year have the highest rate of victimization (20.6/1,000)¹

- 27% of maltreated population are younger than 3 years.
- 40% of children in foster care are <6 years old

Ethnic/Racial distribution

- 40% of the children in foster care are white
- 30% are Black
- 20% are Hispanic
- 10% are other or multiracial²

¹ USDHHS, ACF, ACYF, Children's Bureau, 2010 http://www.acf.hhs.gov/programs/cb/stat_research/index.htm#can

² Child Welfare Information Gateway, (2011). *Foster care statistics 2009*. <http://www.childwelfare.gov/pub/pdf/cs/foster.pdf#page=1>

Florida State University Center for Prevention & Early Intervention Policy, July 2010, "Addressing the unique and trauma-related needs of young children"

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Child Maltreatment: Rate of Substantiated Maltreatment Reports of Children Ages 0-17 2005-2009

<http://www.childstats.gov/americanchildren/tables/casr/fam7a.xls>

a. Note that reporting changed in 2007 so data may not be directly comparable

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Scope of the Problem National Statistics

- 74% of child fatalities are children under the age of 4 years
- 46% are children under age of 1 year¹
- Homicide is 3rd leading cause of death in children ages 1-4 years

¹ USDHHS, ACF, ACYF, Children's Bureau, 2010 http://www.acf.hhs.gov/programs/cb/stat_research/index.htm#can

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Number of Children Entering Foster Care in FY2010 By Age Total: 254,375

http://www.acf.hhs.gov/programs/cb/stat_research/statcan/ncrreport18.htm

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Scope of the Problem

- Children under age 3 are the largest group of substantiated cases of abuse and neglect
- Children under age 1 are involved in over 1/3 of neglect reports and 1/2 of all medical neglect cases
- 80% of foster children under 3 were exposed to maternal substance abuse in utero

http://www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report118.htm

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National Survey of Child and Adolescent Well-Being Findings

Children in the Child Welfare System:

- 46% of children under age 6 had behavioral and developmental problems
 - Only 23% of young children received services for these problems
- Children in out-of-home placements were more likely to receive services than children living at home without an active CWS case (36% vs. 20%)
- Preschoolers were more likely than infants to receive:
 - Educational Services (16% vs. 7%)
 - Mental health Services (17% vs. 5%)
 - Primary Care Services (11% vs. 5%)

¹ Stahmer, A. C., Leslie, L. K., Hurlburt, M., Barth, R. P., Webb, M. B., Landsverk, J., et al. (2005). Developmental and behavioral needs and service use for young children in child welfare. *Pediatrics*, 116(4), 891-900.

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National Survey of Child and Adolescent Well-Being Findings

Risks for Infants and Toddlers:

- >50% of children under age 3 living in poverty
- More likely than older children to have parents with histories of domestic violence, substance abuse, or serious mental illness
- 75% of caregivers displayed punitive parenting
- 17% had been removed from home
- 24% received Child Welfare Services

http://www.acf.hhs.gov/programs/opre/abuse_neglect/nscaw/

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National Survey of Child and Adolescent Well-Being Findings

- Nearly 1/3 of children age 3 and younger were significantly behind in cognitive and language skills
- >1/2 of children under age 2 were high risk for developmental delays and neurological impairment
- 1/4 -1/2 were at risk cognitively
- Nearly 1/3 of children age 2-3 had behavior problems in the clinical or borderline range

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Percentage of Children in Out of Home Care with Significant Risk

Age Group	Developmental/ Cognitive	Adaptive Behavior	Behavioral needs	Language/Communication	Social Skills
Age 0-2	28%	12%	58%	10%	8%
Age 3-5	15%	35%	40%	18%	10%

Stahmer, A. C., Leslie, L. K., Hurlburt, M., Barth, R. P., Webb, M. B., Landsverk, J., et al. (2005). Developmental and behavioral needs and service use for young children in child welfare. *Pediatrics*, 116(4), 891-900.

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Challenges for Children in Foster Care

- 40% of foster children were born low birth-weight or premature leading to developmental delays and disability
- 1/2 of foster children under 3 yrs experience developmental delays
 - 4 to 5 times the rate in the general population

(J. Dean Lewis Judge, National CASA Association, President of NCJFCJ)

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What is Early Childhood Trauma?

- Traumatic experiences that occur to children ages 0-6 years
- Experiences causing “toxic” stress that overwhelm the young child’s coping
- Overwhelm the care giving system’s capacity to respond with needed support



What is Early Childhood Trauma?

“The Infant and Toddler’s unique view of what is perceived as life-threatening or overwhelming psychological trauma may not always be identical to that of older children or adults”

For example: “separation becomes traumatic when it is abrupt and an overwhelming change with loss of all things familiar”

Florida State University Center for Prevention & Early Intervention Policy: July 2010. “Addressing the unique and trauma-related needs of young children”



Causes of Overwhelming Stress for Young Children in General

- Trauma from child abuse, or neglect due to an impaired caregiver
- Trauma from accidents & physical trauma
 - near-drowning, burns, falls, choking, poisoning
- Trauma from painful or invasive medical procedures
- Trauma from sudden loss or death of caregiver
- Exposure to domestic violence or community violence (10% witness knifing or shooting, 50% DV in the home)
(Boston City Hospital survey)



Causes of Overwhelming Stress for Young Foster Children

- Multiple separations from caregiver
- Multiple caregivers
- Events around initial separation and removal into care
- Adverse experiences leading up to removal
- Impaired caregiver
 - maternal depression, adult substance abuse, neglect
- Secondary stressors and losses
- Multiple transitions and visitations
- Interruptions of familiar schedules and routines



Why are Young Children in Foster Care at Increased Risk?

- Vulnerability of the young child’s rapidly developing brain
- Early childhood a time for developing attachments and trusting relationships
- Vulnerability to increased fearfulness, reduced sense of safety and protection





How is Early Childhood Trauma Unique?

- Young children may not be able to verbalize their reactions to threatening or dangerous events
- People mistakenly assume that young age “protects” children from the impact of traumatic experiences
- Even infants may be affected by events that threaten their safety or the safety of their caregivers and can show symptoms of traumatic stress
- Traumatic events have a profound sensory impact on young children
- Young children lack an accurate understanding of cause and effect





How is Early Childhood Trauma Unique?

- Young children believe that thoughts, wishes or fears have the power to become real (i.e., "magical thinking")
- Young children less able to anticipate danger or know how to keep themselves safe
- Young children may blame themselves or their parents for not preventing a frightening event
- Young children develop misconceptions of reality and construct conclusions or "meanings" of events that may not be accurate

Frequent Concerns for Young Foster Children

- Disruptions in attachment
- Developmental delays and loss of previously acquired skills
- Loyalty binds
- Dysregulation associated with visits and other interactions
- Loss of continuity of care, interruptions in daily routines
- Increase in childhood fears

Therapeutic Interventions



- Relationship-based
- Focused on healing and supporting the child-parent relationship
- Developmentally focused
- Culturally appropriate




Attachment Patterns

- Up to 82% of maltreated infants have unhealthy attachments to their caregivers
- Trauma can negatively impact the caregiver-child relationship
- Emotional and developmental harm can result from separation from caregiver



(*Visitation with Infants and Toddlers in Foster Care: What Judges and Attorneys Need to Know", July 2007, Zero To Three Policy Center)

Critical Point 1 Impact of Trauma

Effects of trauma on young children



- Can be equally devastating as it is for older children or adults
- Sometimes unrecognized by child welfare system

Critical Point 2 Reaction to Trauma

Young child's response to trauma

- Similar to reactions of older children
- Different in some unique ways
- Lack of understanding about young children and trauma
 - Inadequate services
 - Placement instability

**Critical Point 3
Distress in young children**

Understanding of distress in young children

- How communicated by young child
- Shown in everyday behavior
 - Eating
 - Sleeping
 - Activity level

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**Critical Point 4
Relationship**

Essential to understand the context of relationship for young child

- Child's developmental imperative
 - Attach to caregiver
- Meaning to young child
- Meaning to caregiver
- Impact on recovery from trauma

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**Critical Point 5
Foster Care as Active Intervention**

Goals of Foster Care

- Child-focused
- Help young child to recover from trauma
- Opportunity to become attached
 - Committed caregiver with emotional availability
- Not just "a place to stay"

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**Critical Point 6
Foster/Resource Parent**

Foster/Resource parent

- Essential partner in recovery of young child
- Challenging task
 - Behavioral challenges
 - Socio-emotional challenges
- Caregiver's own emotional response

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**Critical Point 7
Support from Child Welfare System
and Related Cross-systems**

Awareness of the child's, parents', and foster/resource parents' perspectives
Communication and collaboration across systems

<p>Child welfare system</p> <ul style="list-style-type: none"> Foster care workers Judges Attorneys Therapists Transportation workers 	<p>Related systems/providers</p> <ul style="list-style-type: none"> Early interventionists Education Child care provider Parents' substance abuse counselor Domestic violence advocates Medical professionals
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**Critical Point 8
Development and Trauma**

Related in complex ways

- Physical vulnerability
- Developmental delay
- Impact on recovery from trauma

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Critical Point 9 Behavioral and Developmental Issues

Very common in young traumatized children

- Impact on relationship with caregiver
- Age can be a factor
- Child's behavior is interpreted as "bad"
- Speech and language delay
- Fine/gross motor delay

Critical Point 10 Therapeutic Interventions

Appropriate therapeutic interventions

- Take into account developmental status
- Need for support from a committed attachment figure

Critical Point 11 Treatment for Child and Family

Treatment tailored to meet specific needs

- Relationship-based
- May include careful use of psychiatric medications
 - Combined with therapy and family support
- Medications alone are never sufficient treatment for young children exposed to trauma.

Critical Point 12 Visitation

Visitation is key

- Important contact between parent and child
- Support both child and parent in visit
- Can help to maintain and grow parent-child relationship
- Opportunity for healing relationship but may also be stressful for child and parent

Critical Point 13 Transitions

Carefully planned transitions

- Recognize that young children cannot "keep caregivers in mind" like older children
- Counterproductive to move child rapidly unless safety concern
- Attachment disruptions have long-term implications

Critical Point 14 Self-care

- Essential for those who work with young traumatized children
- Risk for vicarious traumatization
 - Burn out
 - Compassion Fatigue
 - Can profoundly affect the recovery of young children and their families

Summary

- Young children (0-6) comprise a significant portion of children served by the child welfare system
- Early childhood trauma overwhelms the young child's coping
- Young children show distress in unique ways
- Services for young children in the child welfare system
 - Relationship-based
 - Developmentally focused
 - Trauma informed
- Child-focused foster care and visitation are key elements of child's recovery
- Transitions should be carefully planned
- Significant risk for vicarious traumatization to those working with young children in child welfare system

Resources

- USDHHS, ACF, ACYF, Children's Bureau, 2010
http://www.acf.hhs.gov/programs/cb/stats_research/index.htm#can
- Child Welfare Information Gateway. (2011). *Foster care statistics 2009*.
<http://www.childwelfare.gov/pubs/factsheets/foster.pdf#page=1>
- <http://www.childstats.gov/americaschildren/tables/xls/fam7a.xls>
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- Stahmer, A. C., Leslie, L. K., Hurlburt, M., Barth, R. P., Webb, M. B., Landsverk, J., et al. (2005). Developmental and behavioral needs and service use for young children in child welfare. *Pediatrics*, 116(4), 891-900.
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– Justice J. Dean Lewis, National CASA Association, President of NCJFCJ
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