Visit Coaching
Building on Family Strengths to Meet Children’s Needs

Marty Beyer, Ph.D.
Acknowledgements

This manual was originally published by New York City’s Administration for Children’s Services in 2004.

Marty Beyer, a nationally recognized child welfare and juvenile justice consultant who developed visit coaching, assisted ACS in implementing visit coaching from 2002-2008. Dr. Beyer provided technical assistance and trained staff in more than 25 private foster care agencies in New York City and in CHIPP (the Children of Incarcerated Parents Program, at ACS, which provided visits for children in foster care and their parents in jails and prisons).

Tanya Krupat, MSW, MPH, made visit coaching happen in the New York City child welfare system when she worked at ACS and led the agency’s visit improvement initiative after starting CHIPP. She has taken visit coaching to Osborne Association which has a long history of providing innovative prison and jail-based services to families.

Sharmeela Mediratta, CSW, is leading the largest visit coaching implementation in New York City at St. Christopher Ottilie, where she started Baby and Me, an innovative visit coaching group.

LaTonya Baskerville, Parent Advocate at JCCA in New York City, made the DVD “Keeping Your Eyes on the Prize” to encourage parents to have happy visits with their children as part of visit coaching.

Paula Y. Fendall, LMSW, led the first ACS Office of Family Visiting and is continuing visit coaching in the New York City child welfare system. For more information about their work, call the ACS Office of Family Visiting at 212-487-8630.

Artists: Laura and Lindsay Knisely and Alexandra Puritz
# Table of Contents

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visit Coaching Principles</td>
<td>1</td>
</tr>
<tr>
<td>Helping Parents Take Charge of Visits</td>
<td>4</td>
</tr>
<tr>
<td>Empowering Families through Visit Planning</td>
<td>6</td>
</tr>
<tr>
<td>Supporting Parent Responsiveness to Children's Needs</td>
<td>10</td>
</tr>
<tr>
<td>Building Attachment through Visit Coaching</td>
<td>13</td>
</tr>
<tr>
<td>Methods of Visit Coaching</td>
<td>16</td>
</tr>
<tr>
<td>Responding to Children's Visit Reactions</td>
<td>31</td>
</tr>
<tr>
<td>Visit Coaching with Teenagers in Care</td>
<td>21</td>
</tr>
<tr>
<td>Visit Coaching as Parents Return to the Community</td>
<td>23</td>
</tr>
<tr>
<td>Coached Visits and Kinship Care</td>
<td>26</td>
</tr>
<tr>
<td>Coached Visits to Make Peace with the Past</td>
<td>28</td>
</tr>
<tr>
<td>The Logistics of Visit Coaching</td>
<td>33</td>
</tr>
<tr>
<td>Appendix A: Visit Module for Parenting Class</td>
<td>36</td>
</tr>
<tr>
<td>Appendix B: Parent Handout #1: Happy Visits</td>
<td>46</td>
</tr>
<tr>
<td>Appendix C: Parent Handout #2: Making Goodbye Easier</td>
<td>47</td>
</tr>
</tbody>
</table>
Family visits with children in out-of-home care are an underutilized service which can be the most significant assistance the child welfare agency provides for safe reunification or family participation in planning another permanent home for their child. Although research correlates visits with return home and shorter foster care placement, in most child welfare systems visits are rarely more than an encounter in an office, often less frequently than once a week. As caseloads get larger and paperwork demands increase, the time available to arrange visits becomes even more limited. Since visits stir up ambivalent feelings in the parents, extended family, foster family, caseworker and providers and often cause difficult behaviors in children, there may be relief when they occur infrequently.

Traditional visits seem pointless to many workers—families can have “okay” visits for months and be no closer to demonstrating that they can keep their children safe. Ask these parents why their children are in foster care and most of them are uncertain: some criticize the agency for removing their children unnecessarily, but few articulate the unmet safety needs that brought their children to the agency’s attention. Services are seldom designed to help families learn more about what their children need. Drug and alcohol programs and domestic violence counseling focus on adult treatment, and parenting classes are typically not specific enough to clarify what a parent does not understand about his/her particular child’s needs. Parents can be clean and sober, or determined to stay out of battering relationships, or graduates of parenting classes and still not be able to demonstrate that they will protect their children from risks that brought them into care.

In current child welfare practice, visits typically do not attempt to build on a parent’s strengths or guide improved parenting. Other than by providing protection in the form of supervision, most visits do not address the abuse or neglect that brought the child into care. Throughout the time the case is open, parents’ concepts of their children’s needs may remain different from those of the worker, foster parent, teacher, or therapist. Their own needs may obscure their child’s needs. They may view the safety needs for which their child was removed from home as luxuries rather than true non-optional needs. They may act out their anger about the child’s removal during visits.

Families are required to make significant changes in a short timeframe in order to meet their children’s needs—they are expected to stop their dependence on substances, their involvement in domestic violence, and their immaturity and to overcome poverty, emotional problems and cognitive limitations. To make these major life alterations within a year necessitates intensive visit support beginning soon after the child is removed.
Visit coaching includes:

■ Reaching agreement with the parent about the child’s needs to be met in visits, connected to the risks that brought the child into care

■ Preparing parents for their child’s reactions and how to plan to give their child their full attention at each visit

■ Appreciating the parent’s strengths in responding to their child and coaching them to improve their skills

■ Supportively reminding parents immediately before and during the visit of how they plan to meet the particular needs of their children

■ Helping parents cope with their feelings in order to visit consistently

Visit coaching can be provided in a variety of ways and settings by workers, foster parents, case aides, parent advocates, therapists and others. Some agencies initially react to the idea of visit coaching with: “The caseworker gives the parent pointers while supervising visits, so we already do visit coaching.” Other agencies consider visit coaching “ideal but impossible to do because of caseload size.” For the parent who has been removed from the parenting role and feels guilt and anger about what has happened to their child, it is unlikely that direction from a visit supervisor to attend to their child or discipline in a certain way, for example, will make visits productive (despite the good intentions of the worker or parenting teacher).

*When staff are trained to coach visits, agencies find that it is completely different than visit supervision; while it makes each visit more time-consuming, it is so effective that staff want visit coaching for most families.*

The four principles of visit coaching—empowerment, empathy, responsiveness and active parenting—are summarized on the next page. A visit coach provided with supervision to adhere to these principles must not only carefully tailor their methods to the family and child but also intervene in ways that allow the parent to take charge.*

* Throughout this manual the term “parent” is intended to be inclusive of any person visiting the child in foster care, including both parents, a parent and a stepparent/significant other, grandparents or other relatives. When the term “foster parent” is used it could also include relative/kinship caregivers, although visits for children in these placements are specifically addressed in a later chapter.
Visit Coaching

**EMPOWERMENT**
Visit coaching builds on the family’s strengths

- Families are supported to take charge of visits, making them as homelike as possible.
- Visit coaching is individually designed to fit the family: the coach guides while appreciating the unique ways the family shows love for their children.
- As soon as possible, coached visits occur outside the office in parks, schools, libraries, the family’s home or the foster home.
- Seeing siblings whom the child does not live with is important, and families are helped to plan for this aspect of visits.

*Visits become a celebration of the family by taking pictures, making a family scrapbook, telling family stories*

---

**EMPATHY**
Visit coaching supports families to meet the unique needs of their children

- Standing in the child’s shoes, the family and coach agree on the child’s specific needs to be met in the visit. When more than one child is visiting, the parent is supported to recognize their different needs.
- At least one need to be met during the visit will be connected to the reasons the child was removed from home.
- The effect of adult lifestyle choices on meeting the child’s needs will be an ongoing topic of discussion between the coach and family.

*The coach makes it possible for each child to have “just you, just me” time with the parent in every visit.*

---

**RESPONSIVENESS**
Visit coaching helps families manage the conflict between adult and child needs

- Visits are an anger-free, depression-free zone: families learn how their anger, sadness or feeling victimized get in the way of meeting their child’s needs.
- Families are coached to understand their child’s need for stimulation and expectations that fit his/her age.
- Separate time is made available for discussions with the worker, so the parent can concentrate on the children during visits.

*Play led by the child, singing and dancing, reading, and crafts are opportunities to give 100% attention to the child during visits*

---

**ACTIVE PARENTING**
Visit coaching helps families learn how their child’s behavior is shaped by the adult’s words, actions and attitudes

- Families are helped to improve the fit between their limit-setting and the child’s temperamen and behavior. They are helped to see the effect on the child of the adult being too controlling or too passive.
- Families are helped to stop viewing the child’s behavior as “bad” or “hyper.”
- Families are involved in the child’s school, activities, and medical appointments.

*Through redirection and play, parents practice preventing escalation & confrontation*
Helping Parents Take Charge of Visits

One of the challenges of visit coaching is helping parents not get discouraged—change takes time, and time is what parents feel they don’t have when they believe they are losing their children. They get frustrated that “the system” is so slow. They have other pressing demands in their lives. Many parents have been debilitated themselves by trauma, learning disabilities, and poverty, and they are fragile as they “start their lives over” in alcohol and drug treatment, domestic violence programs, and employment. Many have their own histories of abuse, neglect, and foster care placement and are still grieving the deaths of family members and other losses which affect them during visits.

Separating from their child in visit after visit is so painful that it is remarkable families do not give up. Parents whose children have been removed are often in shock for a long time. The loss of their child and the resulting instability and sense of guilt take a toll. When they come for visits, parents may be overwhelmed by their mixed feelings of pleasure, sadness, awkwardness, defensiveness, and competitiveness with the foster parent. Parents often feel more inadequate after visits. Visits do not make most parents feel better.

Coaches help make the pain of visits tolerable for parents so they will return. If coached visits start immediately after removal and parents are helped to visit consistently for several months, safe reunification may be able to occur. But progress may not be that rapid, and in subsequent months the parent may require continuing encouragement not to give up. By confirming that meeting their children’s needs (especially in the agency visiting environment) can be frustrating and exhausting, the visit coach gives the parent valuable support.

The parent benefits from the visit coach’s recognition of their complicated feelings about visits. But the visit coach’s primary goal is to help the parent stand in the child’s shoes. When they come to the agency, parents are often flooded by their anger and sadness about the removal, as well as discomfort about the unnatural setting of visits. Coaches attend to their feelings and support them to put their reactions aside in order to spend the entire visit focusing on their child. The handout that follows, written with the assistance of a parent whose children were once in foster care, was designed to encourage parents to take charge of providing activities and attention that will make the visit happy for their children.
 Imagine your child coming through the door for a visit with you.

Your child is happy to see you.

Your child wants to do the things you did together at home—hugs, talking, eating, telling stories and jokes, playing with toys, games, singing, reading, doing hair. You don’t like seeing your child in a strange visit room, but by doing things you would have done together at home, your child will be more comfortable.

Your child might seem different, more quiet or more active. These are normal reactions, and you can help your child by being reassuring. If your child has something angry to say, listening without judging will help. What your child wants most is your total attention during the visit.

If you have more than one child, they may compete with each other for your attention in visits. Spend a little special time with each child. Don’t worry if you can’t bring presents. Bring a snack your children can share.

There is a lot about the visit and about your child being taken away from you that may make you angry. But you don’t want to show your angry face or words to your child. Leave those feelings at the door so the visit is an anger-free place.

It can be stressful to be watched during your visit, but remember your worker wants to see what a loving parent you are. Meet with your worker after the visit for grown-up talk—that way, you can spend all your visit time playing with your child.

Your child may be confused about why you’ve been separated from each other. It’s hard on you when your children ask, “Can I go home with you today?” Reassure your children that being apart is not their fault. You can also help by showing your love and saying you are doing everything you can to have them come home soon. Avoid going into detail or making promises—these are too hard for children to understand. Talk instead about your child’s interests.

It may be hard to see your child in clothes you don’t recognize or a hairstyle you don’t like, but you don’t want to make your child feel bad about living with someone else. Your child will be happier seeing you and the foster parent get along. Question the foster parent or your worker when your child can’t hear.

Imagine your child leaving the visit. It’s hard for both of you to say good-bye, but it makes it easier for your child if you say something you’re looking forward to doing together at the next visit. You can feel proud that you made sure your child leaves feeling happy about your time together and is looking forward to the next visit.
Empowering Families through Visit Planning

Still in shock that their children are in foster care and overwhelmed by a new schedule of programs they are expected to attend, families may come to visits without having the opportunity to think about how to make them happy for their children. For the family, seeing that their children are okay may be the visit goal. The visit coach helps them stand in their children’s shoes and realize the many needs their children have that must be met at visits.

At first, visit planning by the parent with their coach goes slowly. In response to a request to imagine what the child wants from the visit, the parent may say, “She wants to go home with me.” The parent moves beyond this notion to thinking about visits as days of parenting jammed into a short time. This requires patiently drawing out of the parent the needs of each child. We may start visit coaching with one need (“he needs to sit on my lap”) and over time add needs related to play and other aspects of development.

The visit coach (and worker if the worker is not the coach) does this visit planning with the parent purposefully so the parent is in charge of the visits. Beginning by making the visit as homelike as possible, and then helping the parent do a self-assessment of each visit and plan new activities to meet additional needs empowers the parent. As parents learn how much children benefit from structure, they will organize visit activities to fit their child.

While it might be tempting to skip the formal step of planning each visit around specific needs of the child, it is the key to helping parents understand their children’s needs. Without a needs-driven visit plan, coaching can become only instruction on parenting techniques which is less likely to be lasting.

Planning each visit around specific needs of the child is easier in the context of a strengths/needs-based service plan, as illustrated in the example that follows. Malcolm’s mother, who thought she had been protective, believed she should resume caring for him when she got out of the hospital. She could easily have become a parent who fights with the agency for the duration of the case because she disagreed with the worker’s assessment of risk. This service plan was developed at a family meeting within two weeks after Malcolm came into care. Both the investigative worker, who had discussed Malcolm’s needs with his mother and foster mother before the meeting, and the foster care worker to whom the case was being transferred were present. Malcolm’s mother had many strengths to build on—an important sign of safety was that she and her mother had been close and cared for Malcolm together. Malcolm’s foster mother contributed a lot in the meeting. The prospective visit coach, a case aide, learned from witnessing the process of everyone reaching agreement about Malcolm’s needs.
Strengths/Needs-based Service Plan:
The A Family

“Malcolm” was placed in a foster home at 2 1/2 after his mother’s boyfriend whipped him severely for being “hyper” and when his mother intervened, her boyfriend fractured her jaw. Ms. A is a pregnant, homeless 20-year old who has been depressed since her mother died unexpectedly last year. She has never been employed or lived on her own; she and Malcolm moved among friends because she didn’t want to go to another state where her only relatives live. Malcolm’s father disappeared before he was born. Malcolm is described by his foster mother as active, speech delayed and easily scared.

**STRENGTHS**

Ms. A loves Malcolm and wants him to be happy and normal.
Malcolm loves it when his mother snuggles with him.
Ms. A is getting prenatal care.
Ms. A learned how to sew and cook from her mother and is a thrift store consumer.

<table>
<thead>
<tr>
<th>MALCOLM’S NEEDS</th>
<th>SUPPORTS &amp; SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Malcolm is attached to his mother and needs to spend time with her</td>
<td>• Ms. A will visit with Malcolm on Tuesdays and Thursdays at the early childhood program</td>
</tr>
<tr>
<td>Malcolm needs to feel less scared</td>
<td>• Ms. A and the foster mother will reassure Malcolm when he is frightened</td>
</tr>
<tr>
<td>Malcolm needs to not be hurt or hear or see his mother being threatened or hurt</td>
<td>• Ms. A will attend the domestic violence program three days/week to learn to avoid battering relationships and become more self-reliant</td>
</tr>
<tr>
<td>Malcolm needs to increase his words</td>
<td>• Ms. A and the foster mother will encourage Malcolm to use words</td>
</tr>
<tr>
<td>Malcolm needs to be played with and helped not to over-excite himself</td>
<td>• Malcolm will go to the early childhood program two mornings a week</td>
</tr>
<tr>
<td>Malcolm needs to have the same routine everyday</td>
<td>• Ms. A will go to Dr. H weekly so she can feel less depressed and have the energy to play</td>
</tr>
<tr>
<td>Malcolm needs to be in his permanent home by the time he is 3</td>
<td>• The visit coach will help Ms. A learn to play with Malcolm and keep him calm</td>
</tr>
<tr>
<td></td>
<td>• The visit coach and Dr. H will help Ms. A plan how to manage Malcolm with a new baby</td>
</tr>
<tr>
<td></td>
<td>• Ms. A will find a place to live</td>
</tr>
<tr>
<td></td>
<td>• The worker and visit coach will help Ms. A understand the difficulties of moving him the longer he stays in the foster home.</td>
</tr>
<tr>
<td></td>
<td>• Ms. A will work hard to have Malcolm safely in her home, but if it doesn’t work out will plan another permanent home to meet his needs</td>
</tr>
</tbody>
</table>
This service plan is not specific enough to be a visit plan. The caseworker, visit coach and mother met after the meeting to discuss what Malcolm needed at visits.

*Visit planning starts with, “Imagine your child coming through the visit room door—what does he/she want from you?”*

With some parents, the starting point is a visit plan with one or two simple needs. The visit coach begins by building on the strengths of the parent’s nurturing. The visit coach guides the parent to understand more and more of the child’s needs, particularly the unmet safety needs that brought the child into care.

It is so important not only for the foster parent and parent to communicate but for the child to see them interact in a friendly way that this goal may be stated as a need on the visit plan. Alternatively caseworkers and visit coaches can routinely encourage optimal communication by including parents and foster parents together in visit planning and regular discussions of how to improve visits. This can help parents and foster parents have the same understanding of a child’s difficult behaviors and share ideas for how to manage them. For example, at the end of visits, the coach could support the parent and foster parent in talking briefly about the child’s progress in the foster home and in the visit.

The visit notes from Visit #5 between Malcolm and his mother follow. This is an example of how to document coached visits. The four needs to be met at visits that the caseworker, parent and visit coach identified are printed on the visit note sheet before the visit: (1) to be encouraged to use words, (2) to have his mother get down on the floor and play with toys with him, (3) to have his mother calm him down before he gets too excited, and (4) to have his mother reassure him. These are not identical to the needs in the service plan—early visit plans typically are a concrete statement of the parent’s view of the child’s immediate needs. Thus, progress in demonstrating that the parent can keep the child safe, particularly from the risks that brought the child into care, will be reflected in the changes in the child’s needs in the evolving visit plan (in later visits, Malcolm’s needs may have been refined and hopefully additional progress by his mother in meeting them will be documented). The caseworker and visit coach opted to use a crucial developmental need—Malcolm’s speech delay—as a visit focus that would give his mother immediate success. They chose to include his mother’s concern about controlling his behavior, identified as her biggest worry about Malcolm, as another priority in visits.

Below the four needs stated on the visit notes are the visit coach’s handwritten descriptions of Ms. A’s progress in meeting these needs in this visit and below this, his mother’s self-assessment of the visit. Copies of these notes are given to the parent, the caseworker and to her therapist, domestic violence counselor and early childhood educator and other service providers involved in the family’s service plan (with the consent of the parent). Service providers report that the visit notes provide insights into the parent that assist them in tailoring their interventions.
VISIT PLAN:
THE A FAMILY

Malcolm needs to be helped to say new words

Ms. A initiated Ring-Around-the-Rosie and Pattycake. Malcolm said “down” and “man” and tried to say “roll it and pat it.”

Malcolm needs to have Ms. A get down on the floor and play with toys with him

Ms. A got Malcolm laughing with the puppet.
With prompting, she led a marching game around the room and Malcolm asked, “More.”

Malcolm needs to have Ms. A calm him down before he gets too excited

Malcolm started climbing on the table—Ms. A said, “Oh-oh, he’s getting hyper.” Encouraged her to calm him down with reading, but she has to learn how to read the pictures for his age level.

Malcolm needs to have Ms. A reassure him

A truck backfired outside the office and Malcolm ran to Ms. A shrieking.

M S. A’S SELF-ASSESSMENT

In today’s visit:

Something I did especially well with Malcolm

He loves the puppet and Pattycake.

Something new I did today with Malcolm

I tried marching. It was noisy but fun.

Something I plan to do in my next visit with Malcolm

More reading.

VISIT #: 5 DATE: 1/5/04 VISIT COACH: Alicia

FAMILY MEMBERS WHO VISITED: mom
Supporting Parent Responsiveness to Children’s Needs

Children enter care because their parents are not attentive enough, often because of substance abuse. When they are high or coming down or desperate for more drugs or alcohol, parents’ addiction takes center stage, and it is difficult for them to attend to much else consistently.

Being clean and sober does not make parents responsive to their children, especially if their chemical dependency started in adolescence and continued when they became parents. Much of what the visit coach does is to help parents learn how to see and hear their children’s needs. The parent who sits on the couch while their child plays with toys is encouraged to get actively involved playing with their child—play increases the parent’s awareness of the child’s desire to learn a game, have a book read, lead in an activity, have a snack, go to the bathroom, sing a song, or be listened to. The chronic substance abuser may not have fully developed parental “antennae” to pick up on their children’s needs.

For young children, the parents may not be aware of the child’s need for cuddling, for preschool children the parents may not see the child’s need for play, and for the elementary school child the parent may not tune in to the child’s need to have his/her interests valued. From a child development perspective, these are true needs, but many parents think of them as luxuries when families have time.

Being attentive to children’s needs requires being able to focus and follow through. Some parents have disabilities which include limited “executive functions” — they have trouble organizing and completing tasks. They want to nurture their children, but they do not make lists and have difficulty staying focused on several steps to achieve a goal. Guiding them to organize the visit around the child’s needs and not drift off inattentively before completing something with the child is important progress in responsiveness.

Some children of inattentive parents are unusually undemanding, which enables the parent to continue to overlook the child’s needs. Some children, especially those whose brains were affected by fetal substance exposure, are irritable and hard to calm from birth and get labeled “difficult”—for neurological reasons they are demanding children, born into overwhelmed families. These children may enter care due to abuse when the parent loses his/her temper at the child’s difficult behavior.

Both undemanding and needy children present challenges in visit coaching, especially with parents who are in recovery. It is not only a process of helping the parent become sensitive to their children’s unique needs and also develop techniques for addressing those needs: they must become attentive and responsive to children with needs that would frustrate the most skilled parents. Recovery is a fragile emotional state for parents, and the stress of months of learning new responsiveness while also gradually shaping the child’s behavior requires patient support by the coach. Without support, this frustration can become a trigger for relapse.
Mr. L is a 25-year old recovering cocaine addict who started abusing marijuana and alcohol as a teenager. His 7-year old daughter Nicole is a shy child nicknamed “Mouse,” who likes to draw, and his son, Gerald nicknamed “H.T.” for “Holy Terror.” is a very active 4-year old. Their mother has been in and out of their lives, hospitalized both for suicide attempts and detox and currently in prison for selling drugs. Their father has little experience parenting on his own. The children have been in foster care for several months while their father was in inpatient drug treatment.

The caseworker and foster parents met with Mr. L at his program; he and Gerald’s foster father happened to get to the meeting early and their conversation led the foster father to volunteer to be the visit coach (Gerald was the only child in a therapeutic home because he was difficult to manage and his foster father had previous experience working with children). Mr. L saw the children as soon as he was allowed a day pass, but was depressed by the end of the visit because Mouse hugged him yet hardly spoke or made eye contact and H.T. had to be pulled off the top of the table, the couch, and out from under the bookshelf endlessly. He described himself hopelessly as a “basket case with two kids from another planet.” Without a long session with the visit coach recognizing his strengths and his ability to shape his children’s behavior, Mr. L probably would not have returned for visits. For months, even when progress was being made in both enhancing Mr. L’s responsiveness and reducing his daughter’s withdrawal and his son’s activity level, the visit coach sought supervision for how to manage the post-visit sessions to ensure that Mr. L would not become so disheartened that he would be unable to return to visit. His discouragement was amplified by the guilt that many recovering addicts feel about how their choices have harmed their children. At the coach’s suggestion, every other week Mr. L’s NA sponsor observed part of the visit, participated in the post-visit discussion and worked out with Mr. L at the gym afterwards.

The visit coach’s notes reflect the first breakthrough after a visit when Mr. L despaired about the children ever changing. The coach believed that their nicknames had symbolic meaning that reinforced their behavior, and patiently drew this idea out of Mr. L. In the third visit, Mr. L called his son Gerald consistently (and by the fifth visit his sister was conforming and “H.T.” was never used again). The coach encouraged Mr. L to ask his daughter what she liked her friends to call her and she shyly told him “Niki” and showed him how she liked to dot the i’s of her signature with little hearts. He got her a necklace with “Niki” on it, and “Mouse” also went out of their vocabulary.

One of the challenges of visit coaching was that Mr. L had to learn two different types of responsiveness to meet the needs of his two children. Just when he was trying out the skills he had rehearsed with the coach of interviewing Niki about her friends, her artwork, and school work, Gerald would come crashing into their conversation. Mr. L would become so frustrated it was difficult for him to patiently try the calm re-direction with Gerald that he had practiced. Mr. L and the visit coach decided it would be more rewarding to visit separately with the children, which they discussed with the caseworker and the other foster parent. It was time-consuming for the coach, but a much more effective learning situation, for Mr. L to have two separate visits. He also wanted to learn to manage the children together, so he subsequently began 45-minute visits with Niki, after which she had an art lesson in an adjacent room with a volunteer while Mr. L played with Gerald for 30 minutes. Then he provided a snack for Niki and Gerald together and learned to give them each individual attention during 30 minutes of family time. The visit coach and Mr. L were worn out by these weekly nearly 3-hour marathons (which included a 15-minute pre-visit session and more than a 30-minute post-visit discussion and rehearsal of new skills), but over time Mr. L and the children progressed significantly. The sponsor arranged to have the visit coach, caseworker, probation officer, drug treatment counselor, foster parents and Mr. L’s new partner as special guests at a meeting at his program where Mr. L showed...
portions of videotapes of his early and recent visits with his children and explained how he was learning to tune in to his children's needs which he had been unable to attend to for years as an addict. He acknowledged that the visit coach and his sponsor had to help him with discouragement during each visit and that he often felt overwhelmed by the long path ahead for him to manage the children's transition out of their foster homes. He told everyone about his recent meetings at Niki's school and Gerald's Headstart program where the teachers were optimistic about the children's improvements, and with hesitant hopefulness concluded by reporting that after the previous day's visit the coach had commented that Mr. L had not referred to himself as a “basket case” or his children “from another planet” for weeks.

Given the risks of relapse, Gerald's continuing special needs (which will necessitate strong coordination between his special education kindergarten and Mr. L), the increasing commitment between Mr. L and his new partner, and the eventual release of the children's mother from prison, this family required months of in-home coaching during a gradual reunification process. After eight months in foster care, Niki began spending the week with her father and returned to her foster home for weekends while Gerald spent a 24-hour period in his father's home during each weekend. Mr. L's partner became actively involved in being coached, and the coach collaborated with a couples counselor who observed both children in the home on Saturday mornings and then discussed with them ways to improve their cooperation as parents. When this case approaches closing, it will be essential for Mr. L and his partner to be prepared for the fact that each developmental transition for the children will require special attention to their changing needs so they will not get discouraged and will turn to teachers and others for continuing support.

At an annual foster parent association event, Gerald's foster father was recognized for his extraordinary contribution to the L family: he was a dedicated visit coach who believed in Mr. L; because of their work together, the children achieved permanency and probably years of residential treatment were prevented.
Building Attachment through Visit Coaching

When infants and parents are not living together, it is more difficult to form an attachment. For the child’s development, it is crucial that from birth the child experiences reciprocal communication with at least one caregiver. Each child, even as an infant, has its own temperament, including unique rhythm of engagement and level of activity. Prenatally substance exposed infants may be more irritable, more reactive to bright light or noise, physically stiff, and have slower or more intense responses. Premature infants curl up, prefer tighter blankets, and sleep as if they were still in the womb. In addition, each parent has his/her own style of responding, attention span, flexibility, and anxieties. Some infants entering foster care are first children so their parents are more anxious because of their inexperience. Postpartum hormonal states can reduce mothers’ coping skills. Parents of infants entering care are likely to be grieving their loss, which may result in holding the infant tightly throughout the visit or distancing themselves from the feelings provoked by not being able to keep the infant.

The goal of visit coaching with infants and their parents is to build attachment by supporting the parent to consistently tune into the baby.

Coaches help parents realize that their infant is communicating with them, and that it is beneficial for the child when the parent understands and responds to the baby’s message. Often this can mean helping the parent talk to and handle the baby quite differently from how they were raised. While being sensitive to cultural differences, the visit coach encourages give-and-take between the parent and infant.

Coaches support parents in attuning to their infants by emphasizing that reciprocal communication with newborns is an important way to develop attachment. Infants communicate through their behavior. Not only do infants react to their parent’s face and voice, but they also cry to get a response from their caregivers. When they are upset, some infants console themselves easily, while others have a more difficult time. The goal of visit coaching is to help parents to avoid overstimulating intrusiveness or helpless withdrawal, which are common parenting styles with babies.

Coaches guide parents in appreciating the surprisingly large number of things their infant is capable of. A “Look What My Baby Can Do” chart with a picture of the parent and infant and a list of accomplishments...
that can be added to at visits is recommended. For example, parents might observe that their babies can:

• Look into my eyes  
• Watch my face when I make funny faces  
• Smile  
• Look at me when he/she hears my voice or I make funny sounds  
• Coo back when I sing or talk  
• Follow with his/her eyes an object that I move around slowly  
• Try to bring hand to mouth  
• Adjust his/her body in anticipation of being held  
• Thrust arms and legs in play  
• Make crawling movements when on tummy  
• Enjoy it when I gently stroke his/her arms or legs  
• Stay involved in a game (e.g., “Where’s the baby?”) (modified “peek-a-boo”)

The coach’s job is to encourage parents to interact with their infants, as in this example:

_A 25-year old mother is visiting her newborn, who was removed at the hospital after testing positive for cocaine, and her two preschoolers. She accepts it as “normal” that the 2-year old stays near the foster mother during the visit. The mother spends most of her time watching the 4-year old play with toys, sometimes giving commands to the children from the couch while the baby sleeps in the infant carrier. She ignores the 2-year old who she says is just like his father; he whines and becomes agitated by the end of each visit._

**VISIT PLAN**

<table>
<thead>
<tr>
<th>CHILDREN’S NEEDS DURING VISITS</th>
<th>THE COACH WILL HELP MOM</th>
</tr>
</thead>
</table>
| **6-week old**  
To be happy being close to her mother  
To feel part of a family with her mother and two brothers | • Have some visits alone with the infant getting to know what she enjoys; spend time imitating the baby’s faces, talking to the baby, trying to lengthen the amount of time the baby can keep her attention on her  
• Teach the 2- and 4-year old special things they can do to entertain their sister  
• Plan a music activity and snack they can all enjoy together |
| **2-year old**  
To feel his mother likes him  
To have a lot of attention | • Find one thing to praise him for each visit  
• Have some visits alone with the 2-year old practicing giving him attention and praise to see what keeps him from getting grumpy. |
| **4-year old**  
To lead play with toys and games | • Spend part of the visit on the floor playing, holding and talking to the baby while also moving from child to child with play that fits their different levels |
Attachment building is like a dance—when your dance partner moves with you, it is pleasurable and people watching would say that you are synchronized. If the two of you are moving separately, toes are stepped on and neither of you is happy. Two people who are dancing can talk to each other: infants have a lot to communicate but without words, and it is up to the adult to decipher the baby’s messages and react. Like dancers, the parent learns to make adjustments to meet the infant’s needs. When the parent tunes in to what the baby is communicating and responds, the baby is less fussy and smiles and coos more. By asking during the visit, “What do you think the baby is ‘saying’ to you right now?” coaches guide reciprocal communication and also increase the parent’s stimulation of their infant’s development.

Ideally, visits would occur during the baby’s most awake and least fussy time of the day, which is not so easy to predict. Parents will not learn as much if they are visiting with a sleeping baby, and an important part of the coach’s assistance is to help parents interact for long periods with the baby without poking or startling. It would be optimal to have 30 minutes of active reciprocal communication between parent and infant every day instead of a weekly one or two hour visit. For building child-parent attachment, frequent visits are crucial. For young children, frequency is more important than duration of visits.

In addition to holding, feeding and changing the infant, for each visit, coaches help the parents focus on two tasks:

**Imitate everything your baby does**

**Do everything you can to keep your baby’s attention**
Methods of Visit Coaching

The term “coaching” was selected because:

- The starting point is where the parent is
- The goal of visits is building on the abilities parents already have by strengthening their understanding of their child’s needs
- The approaches used must fit the parent, the child’s needs and the teaching moment

Thus, the visit coach has to be knowledgeable not only about children, family dynamics, parenting skills, the variety of cognitive styles shown by parents, and cultural differences, but also must be flexible and able to draw on a variety of intervention approaches to fit a particular visit. A range of coaching approaches can be effective in developing active parenting, building responsiveness, and enhancing empathy:

Use Of Play

Probably the most rewarding visit time for parents is seeing the enjoyment their child gets from playing with them. Many parents do not know how to play at the child’s level. Often they are unaware of the importance of imagination and the developmental benefits of play, particularly trying out new things and mastering skills. For example, the child who pulls on a dress-up shirt not only imagines being a new person (a pirate, a nurse, a cowboy, a mommy, a fisherman), but also practices skills of buttoning and tying and imitating. A parent who “plays along with” the pretending child encourages imagination and accomplishment.

The coach may have to repeatedly encourage playing at the child’s level. Getting on the floor is not appealing to some parents. Parents can be told that they will not be judged negatively for coming to visits in informal clothes so they can play. Putting a sheet on the floor may encourage the parent who does not want to get dirty. For some children, play with action figures, legos, dolls or small cars can be done effectively at a table if the parent gets actively involved.

While sometimes the parent can suggest what to play, children’s needs are usually better met if a parent can let the child lead in play. Avoiding directing play is challenging for parents, especially if they tend to be controlling or anxious. The visit coach can help the parent see that it is much less important to play one way than to have the child learn from making simple decisions about how or what they want to play.

In addition to imaginary play and playing with toys, children enjoy games that are not too hard for them. They might not be old enough to count the steps in Candyland, but are able to play Twister with a little help in color identification. Marching games and Red Light Green Light and The Wheels on the Bus appeal to young children. Some parents have to be encouraged to sing with children, and a helpful addition to the visit room is a tape/CD player and recordings of children’s songs. Usually before kindergarten children
are not ready to learn the rules of games, so a parent's focus on doing it right should be redirected to “Is the child having fun doing it his/her way?”

Playing on slides or swings outdoors is an opportunity to encourage parents to be protective of children because they have to anticipate danger and make sure their child does not get hurt.

Art activities are attractive to most children and offer the parent the opportunity to praise the child and listen to the child’s story of what they are creating. Some parents have to be helped to concentrate on the child’s art, rather than their own.

Reading to the child is a quieting down activity all parents can benefit from strengthening. Some parents have to be taught how to “read the pictures” to young children, and/or how to let children “read the pictures” to them.

Snack is another activity that gives the parent the opportunity to interact with children of different ages and to be attentive to their stories. Parents may benefit from practicing how to ask questions that open up school-age children to telling the details of their lives.

**Modeling**

Coaches use modeling in both subtle and direct ways. The coach may offer to show the parent how to do something, such as how to keep an infant’s attention. The coach may jump in if a parent holds back and do the activity with the parent and child, such as Ring Around the Rosie. The coach may behave in ways he/she hopes will be copied by the parent, such as sitting on the floor in the toy area or using an “inside voice” or reading the pictures in a book enthusiastically.

The biggest risk in modeling is that the coach may do things more confidently than the parent. This can cause the parent to give up or to passively want the coach to do everything. Thus, modeling has to be adjusted to the parent, always keeping in mind that the goal is for the parent to be able to meet the child’s needs.

When parents do not copy what the coach has shown them, such as the parent who continues to hold their underweight infant in a lying down position after feeding (causing spitting up) instead of upright, the coach has to consider (and talk with the caseworker about) why the parent is not learning. Is it cognitive limitations? Does the parent not understand the reason for the changed behavior? Is the parent limited by doing what their own family did? Too often, these failures are attributed to the parent being oppositional; instead of blaming the parent, the coach should modify the intervention so it is effective.

**Instruction**

In addition to modeling, there are direct instructional coaching approaches. In planning visits, the parent is repeatedly encouraged to stand in the child’s shoes, which teaches him/her a different way to think about the child. The parent is helped to ask the question, “Why does he/she do that?” which can help
planning how to respond to a child's behavior. Each time the coach asks out loud what
the purpose behind a behavior is, the parent is being guided in responsiveness: is
the baby crying out of hunger or tiredness? is the whining child asking for undivided
attention? is the older child who wants to sit on the parent’s lap asking to be listened
to as well as getting affection?

Sometimes the technique being suggested by the coach is so far outside
the parent’s experience that trying it out for a series of visits is necessary.
For example, the parent of an excitable child who brings in sweet caffeine
beverages and candy for snack might be encouraged to see whether it affects
the child’s behavior to have fruit juice or an unsweetened snack. The parent
accustomed to physical punishment may be helped to try time out, which
takes consistency before it will be effective with a child.

For some parents learning is more effective with props such as reminder
notes or posters. One teenage parent wrote notes on her hand of what to
remember in visits. A coach wrote reminder words on different color paper flags and
raised them without telling a parent what to do out loud in the visit. Some parents
like to set a timer or alarm clock to help make transitions to other activities or to
prepare for the end of the visit. One family with three elementary school children
made and decorated a “Today’s Schedule” poster.

Rehearsal

Some skills are developed more quickly if they are practiced outside of
visits. This is particularly true when the parent has to plan in advance
what to say to avoid making promises to the child or making the
child feel rejected. Responding to the older child who is asking
about a parent who is being prosecuted for abusing the child or
answering the painful question, “Why aren’t I going home with you today?” are
examples of wording that should be practiced until the parent can remember it under stress.

Re-directing a child or giving a child a time out during visits are other examples of skills that may require
the practice of role-playing with the coach outside of visits.

How Active Should the Coach Be?

For some parents and children in some visits, the coach may have to be very active to guide effectively.
In other visits, the coach may reinforce the parent’s skills with encouraging comments. What the parent
wants from the coach may change over time as a more trusting relationship develops.

Because there is such a short timeframe for the parent to get a new understanding of the child’s needs
and make changes in how they parent, the coach may feel under a lot of pressure. It is important not
to pass this stress on to the parent or to become overly directive. Flexibly using whatever coaching technique will be effective in a given teaching moment is the art of visit support.

**Working with a passive parent: Avoid overshadowing.** For the parent who lacks self-confidence, the coach must find what they are good at and help them build on it. With the teaching of each new skill, the coach must make sure the parent does not feel inferior. The coach may have to monitor his/her own response as the child may initially be more drawn to the active coach than the passive parent.

**Working with an angry parent: Avoid taking it personally.** Parents who feel unfairly treated by the agency have to be helped to put their anger aside so they can focus on nothing but their child during the visit. First the coach has to avoid seeing the anger as directed at him/her. Then the coach has to help the parent find something to do with their anger to keep it out of the visit. It may be hard for the parent to say, “This is my agenda. It is getting in the way of seeing my child’s needs or responding to my child the way I want to.” For some parents, the primary work of months of visit coaching will be to learn how to separate their anger from their child’s needs, which they may never have had help with before. One coach and parent wrote each of the things the parent was angry about on separate balloons, then the parent tied those balloons to the outside door handle before going into the visit which reduced the interference of the anger in the visit.

**Visit Coaching builds on the strengths of parents to meet their children’s safety, developmental and permanency needs.**

Parents are more likely to recognize what they did not do to meet their child’s safety needs and to learn to be more protective when visits build on the parent’s strengths.

For the parent who has a good sense of humor and is playful, the visit can be full of laughter. For the parent who is reserved but likes to read, the visits can revolve around books. For the parent who is a good cook, making and/or bringing food, making playdough, or decorating cookies during visits can make the child feel loved and secure. Visit coaches adjust their interventions to opportunities to build on the unique strengths of each parent, as in the following example:

*Placed in a foster home at 9 months old for more than a year and returned to her mother, 4-year old Gwendolyn was recently removed again and her mother (and her mother’s boyfriend) incarcerated for physical abuse with no contact orders with the child. Gwendolyn is in an unrelated foster home but her maternal grandmother has recently moved into the area to plan with the agency and start coached visits because “I want my granddaughter to have a better life.” She is having trouble accepting that her daughter may be incarcerated for a long time. She is not accustomed to responding to a young child’s fears and has limited understanding of the connection between the child’s behavior and repeated loss and abuse. Although she does not have much self-confidence, her grandmother has strengths including gentleness and enjoyment of crafts. Her foster mother manages Gwendolyn’s temper tantrums skillfully, but her grandmother believes she should be punished for her unruly behavior.*
# VISIT PLAN

<table>
<thead>
<tr>
<th>CHILD’S NEEDS DURING VISITS</th>
<th>HOW THE COACH WILL HELP</th>
</tr>
</thead>
<tbody>
<tr>
<td>To be cuddled</td>
<td>• Grandma will read to her on the couch, play a tickle game, and put barrettes in her hair to help them get closer to each other</td>
</tr>
<tr>
<td>To stop yelling and kicking when she doesn’t get her way</td>
<td>• Grandma will get ideas for play activities from the foster mother and plan at least one for the visit, bringing whatever supplies are needed. Grandma will ignore her temper tantrum by playing music, which will drown out the sounds that bother Grandma—hopefully Gwendolyn will get interested in the music</td>
</tr>
<tr>
<td>To be comforted when she misses her mother</td>
<td>• Grandma will say, “We feel sad that Mommy isn’t here,” give a hug, and if she wants, make a card together to send to her mother. Grandma will not overwhelm her with comments about her mother’s situation</td>
</tr>
</tbody>
</table>

There is no right way to be a visit coach. Two visit coaches with the same visit plan might use different interventions effectively with a parent. The personal style of the coach affects the method used, so one coach might rely on modeling while another writes reminders for activities on poster board, and both are effective interventions to build on the parent’s strengths. One of the values of clinical supervision, in addition to getting new ideas from hearing other coaches report on cases, is receiving feedback about how a less familiar approach might be tried effectively with a parent.
Responding to Children’s Visit Reactions

It is normal for a child removed from home after neglect or abuse to have reactions to visits, which are usually not a sign that the visit is harmful for the child. Children’s reactions to visits typically include a mixture of some or all of the following:

- The child is happy and relieved to see his/her family because he/she misses them
- The child is confused, especially about why he/she cannot go home; younger children are confused about having two sets of parents
- The child feels sad and angry about being separated from his/her parents, has lost everything familiar, and cannot count on or control anything
- The child is angry about the maltreatment and may be fearful
- The child feels being taken away from home is his/her fault
- The child feels worried about being disloyal to his/her family
- The child feels worried about whether his/her parents, siblings, and other family members are okay

Most children do not put these feelings into words; instead, their behaviors reflect their feelings. Regression (being babyish, whining, demanding, or scared), numbing or denying of feelings, depression, nightmares, irritability, aggression, overactivity, inattention, and physical pains are common prior to and following visits. Children may express anger toward the foster family and/or the biological family before, during and after visits. Some children cling to the foster parent or to the parent. Some children become intolerably controlling because of the feelings stirred up by visits. The more out of control the child feels of his/her life, the more likely symptoms of anxiety are, including fearfulness, inflexibility, and compulsive behaviors.

Uncomfortable as the feelings stirred up at visits are, they can be an important opportunity for growth for the child. Parents, foster parents, case aides, caseworkers, teachers, therapists, and others can reassure children by putting their behaviors into feeling words and helping them understand at their level what is happening to them. Foster parents and parents must have support to help the child recover from trauma so mourning does not interfere with the child’s friendships, concentration in school, or other aspects of development.

It is not surprising that foster parents have mixed feelings about visits because they live with the child and have to manage the child's reactions to visits. Foster parents have to struggle with the disruption of the household routine every time a child returns from a visit and takes his/her anger and sadness out on others in the home.
Encouraging the child to live happily in two different families can relieve painful disloyalty pressures. Without being aware of it, well-intentioned family members and foster parents can contribute to the child's confusion about who to love, who is better, and what to do with negative feelings toward either family. Increased contact between the parent and foster parent often makes it possible to become more supportive of the child during visits.

**Foster Parents Want Visits to be Happy for Children**

All foster parents should have training on understanding and responding to children's visit reactions. If a foster parent thinks visits are harmful for a child, this must be addressed through discussion with the caseworker, visit coach, and child's therapist, and alterations in the visits to make sure the child's needs are being met. Of course, when agencies have encouraged communication between the foster parent and parent, it will be easier to facilitate an open discussion of the child's visit reactions. The visit coach's support for the parent and foster parent to talk about the child's needs improves visits and achieving permanency. The assistance of another foster parent who has faced ambivalence about visits may be a good idea to make sure that the foster parent feels heard and believes that visits are designed to protect the child while building on the strengths of the parent.

Although not all foster parents want to become visit coaches, whether the visits are in their home or elsewhere, a foster parent who gets to know a parent can be the optimal visit coach. When a foster parent is interested in coaching visits, arranging training and supervision for the foster parent must occur quickly. Foster parents bring to visit coaching familiarity with the child's needs and effective ways to meet those needs. The challenge for foster parents is remaining open to the possibility that a parent might meet the child's needs adequately in different ways. When it comes naturally for the experienced foster parent, for example, to talk to the infant or to be lovingly firm with the preschooler, it may be difficult for the foster parent to explain why they do what they do. Probably both the parent and the foster parent are repeating what they learned as they were growing up. The parent will change multigenerational parenting patterns because he/she is persuaded that the unfamiliar approach better meets the child's needs, which should be the emphasis of the foster parent who is the visit coach.
Visit Coaching with Teenagers in Care

Teenagers often enter foster care as a result of parent-child conflict. Some teenagers have grown older in care as a variety of obstacles have prevented reunification. Teens are more likely to become successful, independent adults if they are helped to have stable connections—sometimes with a family member from whom they have been estranged—before they leave care, and visit coaching is a method to achieve this important goal. Some group care providers indicate that parents feel relieved that their child is being cared for, and, overwhelmed with other concerns, do not participate in family counseling. For example, one agency interested in utilizing visit coaching with teenagers reported that many of the teenagers in their group homes had families they might be able to live with, but some had little family contact and fewer than a fifth were likely to reunify. The teenager and parent may wish for a better relationship, but they may be angry at each other. Neither the parent nor the teenager may know how to improve their relationship and find the unnatural setting of an office visit not conducive to doing so.

The initial goals of visit coaching with teenagers and their families are (1) to help them enjoy something together and (2) to improve their communication. Modeling a democratic process by getting parents and teenagers to participate in setting simple ground rules and deciding on activities is a good beginning. Parents may have to be helped to see that they can ask questions without being critical, and teenagers may need support for a more positive attitude. The parent and teenager will enjoy the experience of the give-and-take of conversation if they can be assisted in getting past habitual poor communication. Activities together do not have to be costly, although going to a movie and having a snack afterward can be a very positive visit—the coach can accompany them to facilitate good conversation or can ask for a report from each of them at the next coached visit. One coach learned that a teenager who had been estranged from her family thought it would be nice to cook dinner with her father. The coach helped them make a grocery list, talk while they went shopping together, and continue the positive tone while they made and ate dinner. Another coach did a “getting to know you” exercise which she feared would be seen as boring or too formal but resulted in the teenager and parent learning many things they did not know about each other, including some similar favorite foods and music which they enjoyed together in subsequent visits. Another positive aspect of visit planning with teenagers is that it gives the teenager a voice and can be a positive mutual activity.
Family meetings enhance teenagers’ day or weekend visits with their families. The family meeting encourages respectful communication and helps the parent and teenager appreciate their different agendas for the visit. This planning prevents weekend visits where either the parent feels the teenager is just using their home as a hotel and does not want to do family activities or the teenager feels the parent is too busy to spend quality time together. If they are helped to openly express their wishes for the visit without blaming, they will be able to compromise on some special “just you, just me” time and also plan separate activities.

“Lamont,” a 16-year old, started visiting his paternal aunt who seemed to enjoy being a “weekend parent.” He liked it when his father would come to see him at his aunt’s home. His mother, who asked the court to place him in the group home, did not respond to staff outreach and only occasionally talked to Lamont on the phone. The visit coach discussed the idea of a family get-together with each family member individually, stressing that the purpose was for all of them to appreciate how well Lamont was doing. The visit coach transported Lamont’s mother to his aunt’s home where Lamont, his father, his mother, his aunt and coach talked around the kitchen table and had refreshments. Lamont was preparing to sing a solo in his aunt’s church choir and sang it for everyone. Lamont also talked about his school program and his plan to remain in the school near the group home for the rest of the year. The first meeting was not designed to discuss his need for a permanent home—first the adults had to have a tolerable time together and with Lamont. It will take some time together to get to the point of talking about whose home he may be able to transition to.

Teenagers with Children in Care. While the same principles apply in supporting visits with teen parents as with older parents, the visit coach makes special efforts to engage adolescents who are visiting their children. Teens parents in care may be angry about what has happened to them. They may have difficulty trusting adults. They may feel that they can parent and they are being unfairly judged because they are in foster care. Often they have not made peace with the past: they feel hurt about their maltreatment, separation from their families, and multiple moves. In addition, teen parents may be in the middle of adolescent development—the way they think and behave is different from adults and special supports are necessary to build on their strengths as parents:

Thinking is maturing The young person is gradually learning how to anticipate the consequences of actions, reduce risk-taking and see alternative choices. This normal process is more difficult for youngsters with disabilities who require special instruction to be capable of mature decision-making. Traumatized youth are vulnerable to self-destructive behavior and to numbing their feelings with substances.

A stable identity is forming The young person is experimenting with different personal styles to get approval. If the young person has low self-esteem (from feeling rejected, multiple losses, or being unsuccessful in school), he/she may gravitate toward negative peers who are accepting.

Moral reasoning is stabilizing The young person is developing the capacity to apply lessons about right and wrong. Under stress, the young person may still make immature choices.
As the visit coach is forming an alliance with an untrusting teen parent, it is crucial to achieve genuine agreement with the young person about one thing they want to make happen for their child in the visit. When a young person does not want what adults think is needed, the visit coach will hear, “You can’t tell me what to do” or “You have no idea what it is like to be in my situation.” The visit coach tries to make it possible for the young person not to be distracted by the unfairness in his/her life in order to take charge of happy visits.
Visit Coaching as Parents Return to the Community

Visit coaching can make visits between incarcerated parents and their children more successful. Working with a visit coach also helps the parent prepare for visits in the community when they are released. Helping incarcerated parents prepare for visits is important—in addition to the feelings that can get in the way of focusing on children's needs as described earlier, incarcerated parents often have not seen their children for a long time, are uncertain about the future, and typically feel embarrassed to see their children while in a uniform surrounded by prison guards (it is not unusual for them to want their children not to know they are visiting a jail/prison). Logistical problems make visit coaching challenging with incarcerated adults: it would be best to provide, either in a class or workbook form, the parenting class visit module (see Appendix A, p. 38) to encourage the incarcerated parent to think realistically about their child's needs. Having a budget for, or donations of, toys, books, crafts, and snacks will make visits with incarcerated parents more fun for children. Supporting the parent to have “just you, just me” time (even briefly) with each child is important. For young children who show little recognition of the parent, the coach should support the parent through the pain of their child's not knowing them and help the parent enjoy age-appropriate play with the child. Saying goodbye at the end of a visit in jail/prison is an emotional time, and the handout on the page 25 may be helpful for incarcerated parents.

It is often difficult for parents to get visits started or resumed after they are released from jail/prison. The best arrangement is transitioning from coached visits while incarcerated to coached visits in the community. The visit coach can assist the parent in arranging visits, which initially may occur in a transitional facility program. Usually after release, the parent faces a multitude of challenges, including seeking employment; locating housing; getting alcohol/drug, mental health and medical treatment; reconnecting with family; and avoiding old habits while reporting to parole officers, and these make it more difficult to visit consistently. The visit coach can help the parent stay focused on resuming their parenting role and making visits happy for their children.

An incarcerated mother had not seen her children for months; her youngest child had been in care since birth after being born testing positive for drugs. She had been working with the agency toward reunification, but relapsed and was arrested. During her prison visits, she was loving and attentive and talked about how her 5-, 3- and 1-year old children had matured since she had seen them. She was upset that the baby did not know her. She was released from prison into a drug treatment program, and her caseworker and visit coach went to the program to meet with her and the staff to plan visits to meet the children’s needs. The priorities for visits she identified were: building a bond with the 1-year old, reassuring the 5-year old so he is less sad, and engaging the lively 3-year old in reading or play. She was receptive to guidance about designing the visit to fit the children. She discussed ways to set up the visit that would allow her to give individual attention to each of the children. She talked about feeling
guilty about “lost time” and her worries that the agency would file a termination of parental rights, but recognized that visits should be a time for her to do less talking and more listening to and playing with her children. Her drug treatment program provided a playroom for the visits and her counselor worked with her individually and in groups to help her improve her understanding of her children’s needs and how her chemical dependency in the past obscured those needs.
At the End of a Visit:  
Making Goodbye a Little Easier

Saying goodbye at the end of a visit is difficult for your child and you. Children of all ages will be confused about your visit ending and why you are not going home together. If they look sad, you may feel like crying — it’s as if they are being taken away from you again.

How you help them say goodbye can make a big difference.

- You can make them feel loved.
- You can reassure them by showing you are happy you will be seeing them soon.
- You can give them reminders of you together that will support your attachment.
- You can keep the same routine of saying hello and goodbye to fix you in their minds.

To make sure the goodbye at the end of the visit helps them the most, stand in their shoes.

At their age, what will they understand best?

Some suggestions are:

For children under 2 who do not use many words, it is hardest to figure out what will make them look forward to the next visit. When they aren't with you, they aren't old enough to be able to remember a lot from week to week. Giving them a stuffed animal to bring back and forth to visits can be a help.

Most 2-5 year olds do not know the difference between tomorrow and next week, so your emphasis should be on one thing you will do together at the next visit, not when. Giving them a picture of you together can be reassuring. The older they are, the easier it will be for them to use the idea of talking to your picture in between visits.

Something you repeat at every goodbye can be a help, such as singing the same song, handshakes, rhymes or coming up with your own goodbye ritual like an enthusiastic cheerleader (“Who does Mommy love? Naya and CeeCee! Who can't Mommy wait to see next week? Naya and CeeCee! Who's going eat popcorn with Mommy next week? Naya and CeeCee!” etc.)

School age children are able to look forward to a visit on a specific day and to talk to you on the telephone.

The older they get, the more possible it is for them to be in charge of bringing something to the visit, such as a school project they want to show you. Making a scrapbook of old photographs or pictures they draw, with stories they tell about what they remember in the past, can be something they will look forward to in visits.
Draw each other a picture during the visit for you each to take with you or bring a loving note to give them when they leave.

Probably the best goodbye advice is to do more listening and less talking. Your children cannot understand your complex feelings or plans for the future. You will be full of feelings as the visit ends, but those are for you to talk to another adult about. Listen to your children. Agree with them that it is hard to say goodbye. Label their feelings with words such as, “We both feel sad to say goodbye. We both feel happy we will see each other soon.” Your own special goodbye ritual with your children will make this hard time a little easier.
Coached Visits and Kinship Care

Traditional office-based visits started when most children removed from their homes were placed in unfamiliar foster homes. Now kinship placements are common, with individuals familiar, and usually related, to the child and family and often informal visiting in the home. At the beginning of most foster care cases, the stated goal is reunification with the parent, although relatives may become the child’s permanent home. With the increase in kinship placements for children, it is a challenge to design visits to achieve permanency for the child without being too intrusive into the family.

A first step in tailoring visits is a meeting of the extended family/kin, including the parents, the caseworker, and possibly other providers (the family may find it intrusive to have the parent’s drug treatment counselor present, for example, and more progress may be made by not including any other professionals). Talking openly about the children’s needs, especially reframing the extended family’s worries about the potential continuing harm of the parent’s behavior into specifically stated needs of the child, is often necessary for the family to see the benefits of planned visits. Focusing on the child’s needs may help the family have hope that old family disputes and communication patterns do not have to prevent the child from being happy in one of their homes permanently. The family may require mediation to reach agreement on the child’s needs, as in the case below:

Ruby (age 10) and Randolph (age 8) were raised by their parents whose relationship was deteriorating after their father lost his job and both parents’ substance use increased. The family was in a tragic car accident in which their mother was killed, their father was jailed for DWI, and the social worker at the hospital contacted the agency. The children were placed briefly in a foster home until relatives in a neighboring community who had no phone were found. The court gave the agency custody of the children because the maternal grandmother said she was worried their father would pick them up as soon as he was released. Ruby and Randolph were placed with their paternal aunt, enrolled in a new school and the pastor in the aunt’s church met with them several times to talk about their mother’s death. Their father was incarcerated at the time of the hearing and funeral; when he was placed in a DWI program he went to the aunt’s home and was enraged that he could not take the children. The children were upset by their father’s outburst, and he only left his sister’s home because she threatened to call 911. The worker asked a mediator to facilitate a family meeting which included the father, the aunt, both grandmothers, the pastor and the worker. Their father argued that he was good enough to parent the children before, and they needed him more now. The aunt said he had been unhappy before the accident and understandably now seemed more unstable, was unlikely to get a job in his condition and was at risk of relapse. The worker listed the father’s strengths and said that probably the family could agree on the children’s needs in order to start visits that could lead to the children’s safe return to their father.
## VISIT PLAN

<table>
<thead>
<tr>
<th>RUBY &amp; RANDOLPH’S NEEDS</th>
<th>WHAT EVERYONE WILL DO</th>
</tr>
</thead>
<tbody>
<tr>
<td>To be comforted as they grieve the death of their mother</td>
<td>• All family members and the pastor agree to give the children the same message about their mother's death to help the children talk about missing her, express their anger about losing her, and avoid feeling guilty</td>
</tr>
<tr>
<td>To have their ups and downs in behavior understood as part of learning to forgive their father</td>
<td>• Dad will get help from his counselor so he is not guilty or defensive in talking about their mother or his substance abuse; he will be patient</td>
</tr>
<tr>
<td>To be reassured so they do not worry about their father</td>
<td>• Dad will visit every Saturday and Sunday without fail and will be presentable and not loud; he will tell the children about his accomplishments, but not make promises about when he will be able to care for them</td>
</tr>
<tr>
<td>To feel loved and recognized for being great kids and being successful in school and sports and being helpful in the family</td>
<td>• Dad will spend most of the visit giving individual attention to each child plus following their lead in activities they want to do</td>
</tr>
</tbody>
</table>

Everyone in the family trusted the pastor and he was able to observe the visits in their aunt’s home and afterwards guide their father in improving his ability to meet the children’s needs. He also continued to meet with the family to support positive communication among the adults, leading to the aunt and the father describing themselves as “co-parents.” As their father continued to be clean and sober and became less depressed over his wife’s death, he was able to go on outings with the children with the church and then unsupervised.

In other families, however, the involvement of a visit coach would be seen as intrusive. They might not want to have visits formalized. Yet, the children might be harmed by the parent dropping in for visits or by witnessing disputes between the parent and relatives or by permanency remaining uncertain for long periods. Agencies can contract with and train relatives who have successfully cared for grandchildren/nieces/nephews to become visit coaches in kinship placements. These kinship visit coaches would benefit from training and supervision with other visit coaches since the principles of their work are the same. They will also want assistance in figuring out how to get the benefits of visit coaching while avoiding too much intrusiveness into the family.
Coached Visits to Make Peace with the Past

Visits can serve the important purpose of helping the child make peace with maltreatment and loss. This is especially necessary for children who are not returning to their parents or whose relationship with a parent must be strengthened to consider whether reunification will meet their needs.

From a developmental perspective, the child is likely to be delayed if maltreatment and loss are not resolved. The child who is attached to his/her parent experiences their separation as painful and difficult to understand. The child may believe the parent has rejected him/her because he/she is a bad or unworthy child. The child may worry a lot about the safety of a substance-abusing or mentally ill parent who is in-and-out of his/her life. The older child may identify with a parent and show early signs of self-destructive behavior. Children can become so preoccupied with these emotional reactions to loss that no progress is made in school. In addition, these unresolved ties to the parent interfere with the child forming other attachments—children have to be helped to understand it is acceptable to love both their parent and their caretaker and not worry about being disloyal. If they have taken care of their parents, children may worry that if they accept another home, they will leave the parent unprotected. The child can be helped to progress normally in development by a therapeutic process of making peace with the past, facilitated by therapists, caretakers, and parents with visit coaching.

The traditional prohibition that parents must not talk about the maltreatment or make promises about the future (designed to protect the child) may silence parents in ways that can be harmful to the child. Foster parents and relative caretakers often believe that they should not provide the child with information about the past or the future. Talking about the past is often deferred because it brings emotions to the surface that cause difficult behavior. When children's therapists think that permanency is the domain of the agency, present-day living becomes the focus of treatment, even when the child's behaviors are tied to hurt and anger from unresolved trauma.

When a child who is attached to a parent is not returning to that parent, the child cannot be expected to adjust successfully without talking about the past and understanding their losses. When a child has not lived with a parent for a long time, returning to that parent safely requires both the child and the parent understanding how the past continues to invade the child's present behavior. Making peace with the past can be valuable for engaging youth in the process of identifying a “family for life.” Revisiting past family and foster relationships helps youth form improved connections with family members from whom they have been separated which can assist them greatly in making a transition into adulthood (even if they do not live with those family members).
Making peace with the past includes:

- the child understanding the maltreatment and losses they experienced
- the child not blaming him/herself for the parent's rejection or the losses from multiple placements
- the parent assuring the child that the parent's problems were the cause of the maltreatment and loss
- the parent affirming the child's worth and assuring the child that if reunification is not possible, it is not because the child is unlovable
- the parent, foster/adoptive parent/kin, caseworker and therapist giving the child the same message about the continuing parent-child relationship and helping the child not feel disloyal about loving both the parent and the caretaker

Making peace with the past is a complicated process that includes therapeutic work individually with the child, coaching parents in visits, and guiding the caretaker. For this reason, in such cases the child's therapist may be the preferred visit coach, although another visit coach could receive clinical supervision from the child's therapist.

One method for making peace with the past is to begin with a therapeutic life story process. Similar to the life books developed by adoption workers, the therapist and child use a scrapbook or a large wall chart (such as plain shelf paper that can be rolled up between sessions). With photographs, the child's drawings, and a narrative written or dictated by the child in the scrapbook or on the wall chart, the child's life story unfolds. The caseworker and case record serve as references for dates and other details of events, particularly separations and losses. As the factual history is developed, the child's questions are answered. The therapist uses this process to help the child understand why losses occurred and not feel responsible or personally rejected. How the child's life story is shared with parents and caretakers in the making peace with the past process can take a variety of forms that include teaching the parent about the child's needs to resolve separation and loss and not to blame self, not to feel disloyal, and not to worry about the parent.

This approach can also be therapeutic for sibling groups. When the children are not placed with each other, and the agency has held them together as a family through visits (even though the parents may not visit), the children will benefit from understanding their shared history together. Making peace with why they are not returning to their parents will also solidify their attachments to each other and is an important step to permanency for them. A therapist or other visit coach can do a series of sessions with the sibling group to assist them through a therapeutic life story process.

*Dorine is a 13-year old who has been in and out of care for years. She and her teenage mother lived with her maternal grandmother, and she first was placed in a foster home when her grandmother was hospitalized. She returned home for several years, but was removed again after being sexually abused by her uncle. Her mother had a hard time with these disclosures as she had also been a victim of incest, but continued to be dependent on her extended family. Two years ago Dorine's grandmother died.*
Dorine still struggles with poor self-esteem, school adjustment difficulties and sexualized behaviors and behaves much younger in some respects and much older in other ways than her chronological age. She is attached to her mother, she and her mother have visits, and Dorine continues to hope to return to her. Dorine’s mother is now 30, has a 2-year old son, and has been living with his father for several years. Dorine loves her half-brother, but is envious that he is being raised by their mother. Dorine needs to make peace with the losses and abuse she experienced. Her mother remains ashamed about the past. She does not understand that trauma has made Dorine a controlling child, which is irritating during visits. Dorine and her mother want reunification, but the caseworker worries that her mother would be too overwhelmed by Dorine’s needs to be able to meet them.

Dorine’s therapist worked with her on a life history that she has decorated with colorful drawings. She has struggled to forgive herself for the sex abuse, the losses, and not being as appealing as her brother. Her therapist tried to help her express anger at her mother, but Dorine continued to be protective and instead got mad at herself, her foster mother, or peers at school. Dorine’s mother, therapist, caseworker and foster mother met to reach agreement about what Dorine needed from coached visits. For the first time, they discussed openly how Dorine wanting both reunification and to enjoy the stability and emotional availability of her foster mother has caused her to get stuck in disloyalty. They agreed to meet monthly to continue this discussion of Dorine’s loyalty and recovery from abuse and loss, they planned how to answer Dorine’s questions without being blaming, and they defined her needs during what they anticipated would be an intensive coached visitation process. Dorine’s therapist’s coaching was crucial in helping her mother clarify how the abuse and losses were not Dorine’s fault, show love without making promises, and giving her permission to love both her mother and her foster mother. As a result of the coaching, Dorine’s mother understands that regardless of whether her child returns to her, she will play a crucial role in helping Dorine be able to mature into liking herself.

Therapeutic Visits to Change the Parent Role. Visit coaches and caseworkers require thoughtful supervision when visits in a family evolve into a process for the parents to encourage the child to settle into another permanent home. These visits may also become the place where the definition of a continuing relationship between the child and parents, if any, occurs.
The Logistics of Visit Coaching

To convert from supervised office visits to coached visits requires more staff time. Thus, it is preferable to diversify visit coaching parent advocates beyond the staff previously supervising visits: if caseworkers, case aides, foster parents, parenting skills teachers, counselors and others are trained to become visit coaches, many more families can have productive visits.

Pre/Post Visit Contact with Parents

Coaches meet with parents 15-30 minutes before each visit to review the child's needs to be met during that visit and to practice skills. Coaches review their notes about progress and the parent's self-assessment with the parent after the visit, and also use post-visit time to support the parent so they are emotionally able to return to the next visit. This important pre/post visit work with parents presents logistical problems if the visit coach transports the children, unless someone else provides childcare during pre/post meetings or transportation.

More Visit Time

Coached visits more than once a week may be necessary to meet the needs of the child. As parents make progress, the visit coach may recommend that visits be extended, presenting logistical problems because as each family's visiting takes more hours each week, the number of families each visit coach can manage is reduced.

Conducive Visit Environments

When agencies implement visit coaching, one of the first things they change are their visit rooms. They move coached visits into private rooms with doors rather than noisy large areas where several families may visit at the same time. They get rid of office furniture and clean the rug and floor and put big pillows and sheets in the visit room to make floor play enjoyable. They purchase (or arrange donations of) sturdy, versatile toys and art supplies.

As visits are individualized and are designed to challenge the parent to meet needs that brought the child into care, caseworkers and visit coaches may decide to move coached visits outside the office. As long as the child is not at risk, coached visits in the foster home, the family's or extended family's home, school or daycare center, programs, and/or in the community (parks, restaurants, etc.) can enhance the parent's skills.

One agency recruited foster parents through school association meetings with the idea of keeping children in care in the same classroom they were in prior to removal; the school allowed coached visits
after school several times a week which met children’s attachment needs, was convenient for parents and foster parents, led to the parent’s participation at the school, and speeded up safe reunification. Another agency regularly had visits after 4 P.M. at a Headstart program and hired the Headstart teacher’s aide as a visit coach. A rural agency where transportation was an obstacle arranged with local churches to have visits in the church school rooms, allowing for decentralization and increased parent and foster parent participation.

Coaching During Group Visits

Some agencies implement coached visits where several families visit simultaneously because of space and staff shortages. As long as each parent has the benefit of learning about their child’s needs and how to meet them, with the coach moving among the families to provide guidance, group visits can be effective.

An exciting form of visit coaching is happening in a play group for parents and their infants and toddlers in foster care. The first part is a structured playschool format, where the coaches help the parents use music, play, reading, and snack time to appreciate and build their children’s skills. The second part is a parent support group where parents and the coaches discuss the children’s safety, developmental and permanency needs. Parents report that learning from watching and talking with other parents has been a valuable part of the play group. The play group is more normalized than the unnatural setting of typical visits. Agencies may decide to change the role of the parenting teacher into offering a weekly play group/parent group with active coaching and the integration of parenting topics into these group visits. A video entitled “Baby and Me” describes the formation and shows the success of the play group as a positive form of visit coaching. (This video is available through the ACS Video Unit: 212-676-2050/52.)

Making Visits Challenging

If visits seem easy, probably the parent is not stretching to learn how to attend to the unmet needs that brought their child into care. Visits may have to be altered significantly to challenge the parent, without putting the child at risk. If the child was not adequately supervised, parents will not learn much in a safe office, but would be challenged by a coached visit in a busy park where they would have to actively anticipate risks and protect their child. A coached visit from 11-1 or 4-7 in the parent’s home when a meal has to be prepared while several children are making demands may provide learning opportunities connected to the unmet needs that brought the child into care. The caseworker, visit coach, and parent plan these alterations to make visits more challenging.

Matching the Visit Coach to the Family

A variety of individuals can be effective visit coaches, including caseworkers, foster parents, case aides, parent advocates, parenting skills instructors, school counselors, therapists, the parent’s domestic violence or substance abuse treatment counselors or someone in the parent’s network of support. Visit
coaching requires a combination of hands-on teaching skills, knowledge of child development, and the ability to build on the strengths of parents. A flexible, non-judgmental, culturally sensitive style allows the visit coach to use every opportunity to guide the parent to meet the child's needs. Clinical supervision at least monthly for visit coaches (including coaches with different professional backgrounds) helps the coaches tailor their interventions to each family and avoid being controlling while being firm about the safety and developmental needs of the children.

The Importance of Communication

If the visit coach is not the caseworker, the two must collaborate to ensure that the needs identified by the parent to be met during visits fit the changes in parenting necessary for reunification in the future. The caseworker and visit coach must work actively to prevent the splitting that occurs when parents have a habit of labeling others as either on their side or against them. It is not unusual for parents to feel closer to the visit coach and to resent the power and judgment of the caseworker. In addition to the benefits for achieving permanency for the child, it is therapeutic for an untrusting parent to learn to relate to two individuals who appreciate his/her strengths and want him/her to be able to meet the child’s needs.

In traditional surveillance-oriented visits, it is not unusual for the visit supervisor to report that visits are “fine.” For one hour weekly in the office, the parent interacts adequately with the child, and the visit supervisor assumes that progress is being made on the goal of reunification. Meanwhile, the caseworker may be receiving reports of the parent's recent arrest or positive urine tests and wonders whether the parent will be able to keep the child safe. Parents may promise they will change when their child returns, not understanding, since they are not currently responsible for caring for children except at visits, why it matters how they live. In periodic caseworker-visit coach-parent meetings, communication about how improved parenting at visits fits with overall progress toward return home is crucial. Any discrepancies between visit progress and lifestyle must be discussed at these meetings so that what occurs in visits can be used strategically to encourage more positive parent choices outside of visits.
Appendix A
Parenting Class: Visit Module

This module is designed for use with any parenting class for parents of children in foster care. It can be modified to fit the parents in the class and the length and format of any class.

This module was prepared because visits have been a missed opportunity for parents to learn about their children’s needs. Visits can be an effective way to engage parents, but typically traditional supervised office visits alienate parents who are already angry about their children’s removal. Too often parents do not realize how important visits are to achieve safe reunification. Parents, particularly those in the early stage of recovery, may be challenged in meeting their children’s needs because their own needs get in the way. It is important to empower parents to take charge of visits and prepare them to spend the entire time focusing on their children.

It is preferable to present this module to parents soon after removal, but even parents who have had months of unsatisfactory visits can change their visits and improve the experience for their children and themselves.

Desired outcomes from this visit module are to: (a) help parents stand in their child’s shoes and see what is important in visits for the child, (b) design visits to fit the child and make them as homelike as possible (even though they are uncomfortable with supervision and the visit room conditions), (c) help parents manage their feelings about visits, especially loss, guilt, hopelessness and anger so they are able to visit consistently, and (d) help parents respond when they feel their child is different from the child they had at home with them.

It is recommended that the one-page handout “Making Visits Happy” (see Appendix B), “Making Goodbye Easier” (see Appendix C) and the videotape “Keeping Your Eyes on the Prize” be used with this visit module. (This video is available through the ACS Video Unit: 212-676-2050/52.)

Principles of Productive Visits

Focus on children’s needs Parents must be helped to picture their child entering the visit and stand in their child’s shoes to imagine what he/she wants from the parent during the visit. Although unfamiliar to some parents, listing their child’s needs very specifically will improve visits. Vague needs, such as “he wants love” do not guide the parent. “He wants his new sneakers to be admired” or “She wants to be listened to and praised when she shows off her singing” are more useful. A need statement such as “She wants to come home” might be accurate but does not help the parent know how to respond to the child. “She needs to be reassured that Mommy is going to classes and hopefully she will return home soon” would be preferable. The child’s needs should not be confused with what the parent wants, such as “He needs to stop having temper tantrums.” Instead, “He needs to be warned in advance of the next
activity and to be involved in helping with it so he does not feel things are out of control” would be preferable. Recognizing that each child needs “just you, just me” time with the parent and thinking of ways to achieve that when several children visit at once is also an important objective.

**Empowerment** Parents are helped to design visits to meet their children’s needs. At first parents may envision a simple visit plan such as hugging, play, and snack, but with guidance can take charge by planning games and songs, reading out loud that fits their child’s interest level, and other activities. For the parent who feels overwhelmed by the demands of a child who has changed since entering care, recognition of their patience in responding to their child can be empowering.

**Validation** Parents’ feelings about visits, especially anger about the removal and at the agency and the foster parent and sadness about saying goodbye to their children, should be recognized. Parents must be helped to find steps they can take to deal with their feelings so they can focus on their children during visits. Acknowledging that if they have experienced losses themselves, repeated separations can trigger strong feelings can be helpful. The image of visits as an “anger free zone” or “depression free zone” is useful for parents.

**Effectively Inviting Parents to Make Visits Productive**

Many parents have auditory and visual processing problems, so information must be presented in ways they can digest. Multimodal instruction, relying on something written and oral and acting out the concepts, is necessary for many parents. Participation, through discussion, role play and exercises, reinforced by major points written on the board, will increase retention.

*Picture a parent coming to parenting class a few weeks after her child has been removed. She has lost her housing, her boyfriend is incarcerated, she is living in a shelter, her whole life has been turned upside down, and she misses her child. It takes her more than an hour by bus each way to see her child for an hour each week under unnatural, unpleasant conditions. There is no space in a drug treatment program right now so she is discouraged about how long her child will be separated from her. She has been court-ordered to come to this class, but she says she is a good mother who loves her child and she doesn’t want a social worker who she feels cannot relate to her situation to tell her how to parent.*

**WHAT WOULD SUPPORT THIS PARENT TO HAVE PRODUCTIVE VISITS?**

- To tell her story
- To be recognized for being a loving parent
- To have her anger validated and be helped to see what she can do about it that does not take away from her time with her children
- To see her child’s unmet safety need that resulted in removal without having to “confess” to being a neglectful or abusive parent
- Clarify and understand what she has to do to show she can meet her child’s needs
- To comprehend the timeframe for making changes for her child’s safe return
One of the major difficulties with most parenting classes is that parents do not connect what is taught to how they behave with their own children. Visits are a great laboratory for the parenting class. This module should be done with parents in the context of their own children, not as it applies to children in general. Throughout other sessions of the parenting class, parents could be helped to apply what they are learning during their visits by completing worksheets after every visit.

Using Developmental Charts to Help Parents Identify their Children’s Needs

Most parenting classes present the developmental stages of children, although parents complain that this information is too didactic and not easily applied to their own children. Parenting class teachers report that the concept of children going through a predictable progression in mastering physical and cognitive skills is unfamiliar to many parents. To arrange beneficial visits, parents must be helped to: (1) recognize delay in their child’s development; (2) become interested in reducing delay or keeping their child developmentally on target through stimulation and expectations that fit the child, and (3) understand that they will have to make adjustments in their parenting to keep in tune with their child’s development. A worksheet to help translate developmental jargon into behavior descriptions and practical parent responses may help in achieving these goals:

WHERE ARE MY CHILDREN DEVELOPMENTALLY?

Child’s name ____________________________ Birthday __________ Age _____

SKILLS MY CHILD SHOULD HAVE AT THIS AGE

____________________________________ □Yes □No

____________________________________ □Yes □No

____________________________________ □Yes □No

____________________________________ □Yes □No

___________________ __________________ □Yes □No

CHILD’S SKILLS I WILL WORK ON IN VISITS

____________________________________

____________________________________

____________________________________

____________________________________

____________________________________
Here is a sample worksheet filled out by a parent, which would be a useful basis for identifying each child's needs:

**WHERE ARE MY CHILDREN DEVELOPMENTALLY?**

<table>
<thead>
<tr>
<th>Child's name</th>
<th>Birthday</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Serena</td>
<td>1/14/02</td>
<td>2 years</td>
</tr>
<tr>
<td>Delonte</td>
<td>5/20/03</td>
<td>8 months</td>
</tr>
</tbody>
</table>

**SKILLS MY CHILD SHOULD HAVE AT THIS AGE**

**CHILD’S SKILLS I WILL WORK ON IN VISITS**

- 2-3 word sentences
  - Yes ✓ No
  - Naming pictures in books; Encouraging words

- Climbs on play equipment
  - Yes ✓ No
  - Play on slide; throw & kick soft ball

- “Helps” with simple chores
  - Yes ✓ No
  - Help set table and clean up after snack together

**Preparing Parents to Plan Visits**

Parents will benefit from an exercise that helps them see how they could define their child's needs and decide what to do during visits to meet those needs. You can read the example below out loud while parents follow along on their own copies or you could have a role play with the parent, child and worker (perhaps using posterboard signs for each need):

A 23-year old mother of a 3-year old remains furious that he was removed when a relative called in a report because she repeatedly whipped him with a belt. She says she is a good mother, and she resented going to parenting class where they “talked down” to her about “everything” she already knew. She feels strongly that he has developed behavior problems in foster care that he did not have before. She is critical of the home for having too many children and the foster mother being late to visits. The 3-year old is attached to her, but usually during the visit they get into a struggle over her demanding he stop aggressive behavior. This frustrates his mother because “he didn’t used to be like this,” and the visit deteriorates into her complaints while her son plays with the toys.
## VISIT PLAN

<table>
<thead>
<tr>
<th>CHILD’S NEEDS DURING VISITS</th>
<th>MOM IS GOING TO:</th>
</tr>
</thead>
<tbody>
<tr>
<td>To have a predictable routine, with reminders of what will happen next</td>
<td>• Remember that his feeling out of control is causing acting out. Help him feel he is in charge of getting snack ready or picking up the toys</td>
</tr>
<tr>
<td>To have a lot of attention from his Mom</td>
<td>• Make every minute of the visit time she spends being involved with her son</td>
</tr>
<tr>
<td>To be redirected before he gets upset instead of being scolded</td>
<td>• Remember if he sees Mom's angry face and voice, he will believe she is angry at him even if she doesn't mean him to think that</td>
</tr>
<tr>
<td></td>
<td>• Ask the worker for time after every other visit to discuss her case so the visit can be an anger-free zone</td>
</tr>
<tr>
<td></td>
<td>• Avoid power struggles—do not put him in the position where he becomes stubborn</td>
</tr>
</tbody>
</table>

During parenting class, in the role play, encourage the person playing the child to show he loves Mom but also has difficult behaviors. Encourage the person playing Mom to be loving but also frustrated with her child and outspoken about her anger at the system. Divide into two groups with two easels, one defining the Mom’s feelings and the other what the child needs from Mom. Discuss how Mom can keep her feelings from getting in the way of meeting her child's needs. Make personal posters, each parent writing what their child needs from visits, their feelings as a parent that might get in the way of meeting their child's needs, and what they will do to prevent that.

This case example can help parents both recognize the purpose of visits for themselves and their children and separate their needs from those of their child. Many parents are confused about the purpose of visits for their children (supporting attachment, providing reassurance, feeling loved) versus for the parent (demonstrating that they understand and can meet their children's needs). If parents list specifically what they get from visits and what their child needs when they see each other and discuss how parents can meet their own needs at another time will avoid the parent thinking, “I love my child, therefore the idea that my needs get in the way of taking care of my child doesn’t apply to me.” Parents think they meet general needs for love and security, but may be unaware, for example, that their child doesn’t feel attended to if the parent sits on the couch while the child plays with the toys during the visit. It is crucial for the parent to understand how to attune to the child’s unique level of activity, learning style, mood, and rhythm of engagement. Since no two children and no two parents are the same, this all-important responsiveness to the child is something each parent must learn for him/herself.
Teaching Parents Songs and Games to Use during Visits

Many parents do not know age-appropriate activities to do with their children, especially when they have children of different ages. They may not have played Simon Says, Red Light/Green Light, Pattycake, or marching games before; they may be embarrassed to sing nursery rhymes; they may feel foolish doing dress-up or making animal noises in imaginary play with their children. They may have to be persuaded that singing songs, playing games and doing make believe is essential for the child to develop skills: it is fun and it is important learning. The value of play is a new concept for many parents: both the importance of adult/child interaction and that the child learns problem-solving, achieves a sense of mastery, and develops muscles from play. Some parents unrealistically expect young children to understand the rules of games, which is not developed in preschool children, and some parents do not realize that children learn more when the parent does not control play. Learning how to play in ways that encourage the child’s development, practicing games, and getting materials for taking photographs, scrapbook-making and other crafts are important aspects of preparing for visits.

Helping Parents Understand their Child’s Reactions at Visits

It may be difficult for parents to stand in their child’s shoes. Children come to visits and may seem subdued or unaffectionate or aggressive. Often these reactions are the result of their confusion about their removal and not living with the parent; the conditions of the child’s home prior to removal may also have left them angry or feeling betrayed, and they may be worried about their vulnerable parent. Parents may think these reactions are caused by inadequacies in the child’s foster home. Parents complain that the child they see in visits is not the same child they knew at home. It is important to help parents decide to respond to the child’s feelings instead of being put off by them. Avoiding becoming depressed, angry, or controlling during visits will require having an understanding of their reactions to their child. The goal is to avoid what is so often seen in visits: an anxious child and an anxious parent reacting to each other.

Parents can be helped to plan to give 100% of their attention to their child in visits. If they are visiting more than one child, arranging the visit so each child gets “just you, just me” time is important but may be overlooked by the overwhelmed parent. Planning activities in visits that their child liked in the past will normalize the child’s behavior as well as reduce the parent’s anxiety. For school age children, parents can make visits beneficial by learning how to interview their child about the important things in their child’s life. This is not questioning to satisfy the parent, who is worried about the foster home, for example, but is designed to make the child feel the parent is really interested. An opportunity for children to show off something they do well or something new they have learned gives the parent a chance to praise the child.
Helping Parents Apply What They Have Learned about Effective Discipline

Some parents bark orders at their children constantly, thinking that this is being a good parent. They require help to see that it meets their child’s needs more effectively to only speak loudly to children when they are in danger and otherwise avoid controlling their child. It is a new idea to many parents that they can avoid most power struggles with their children (without compromising on their limit-setting role as parents) and that doing so is beneficial to the parent-child relationship. Parents who have labeled their child “stubborn” must be helped to understand these behaviors exist for a reason: because of the child’s age and/or because they have been traumatized and are afraid to be out of control. For parents to implement what they have learned in class about effective non-abusive discipline requires more than believing in the effectiveness of redirection and preventing the child’s escalation. If the parent has a passive parenting style or a controlling parenting style, they may not recognize that most child behaviors are the result of what the parent says or does.

Helping Parents with their Feelings about the Foster Parent

Children will have happier visits with their parents if resentments between parents and foster parents are kept to a minimum. Visits often stir up negative feelings between parents and foster parents. If the parent does not have opportunities to interact with the foster parent, resentment may increase especially if the foster parent is late to visits or if the child comes to visits with clothes or a hairstyle the parent does not like. In the parenting class, it may be helpful to brainstorm about “what is good about the foster home my child is in” as well as to encourage parents to list “things about my child I would like the foster parent to know.” A group discussion about their worries about their child being in the foster home and what they could do about what they are worried about is helpful. Working in class on a letter which the parent could take to their caseworker may also help the parent recognize that their child needs support living in two families and may encourage the parent to get to know the foster parent:

Dear (Caseworker’s Name)____________________________________________________________

What I like about my child’s foster parent is________________________________________________

But I am worried about the foster home my child is in because ________________________________

____________________________________________________________________________________

Could you please find out about this and call me?

I haven’t met my child’s foster parent and I think it would make my child feel better to see the foster parent and me on friendly terms. Could you arrange for us to meet?

Signed, Parent __________________________________________________
Helping Parents Understand the Short Timeframe for Making Visits Productive

Many parents have learning disabilities that affect their comprehension, including visual and auditory processing problems and sequencing difficulties. Caseworkers, judges, lawyers and some parenting classes present an organized a - b - c way of looking at a concurrent plan, but parents may not comprehend the sequence of a 12-month foster care timeframe. Where the order of things is important (for example, when a parent goes to a six month court review, they must be able to show the judge that they have compiled with their service plan—been at every visit, gone to parenting class, started therapy, gotten on the Section 8 list), many parents require extra assistance to organize all that information. A group sequencing exercise using a hypothetical case example and clarifying each step the parent has to take before a certain date because their children cannot wait would (a) show that consistent visits are very important; (b) increase the understanding of visits as an opportunity to demonstrate that they can meet their child's needs; and (c) help the parent understand why having an unsafe lifestyle while their children are in care will affect reunification.
Appendix B
Arranging Happy Visits for Your Children

Imagine your child coming through the door for a visit with you.

Your child is happy to see you.

Your child wants to do the things you did together at home—hugs, talking, eating, telling stories and jokes, playing with toys, games, singing, reading, doing hair. You don’t like seeing your child in a strange visit room, but by doing things you would have done together at home, your child will be more comfortable.

Your child might seem different, more quiet or more active. These are normal reactions, and you can help your child by being reassuring. If your child has something angry to say, listening without judging will help. What your child wants most is your total attention during the visit.

If you have more than one child, they may compete with each other for your attention in visits. Spend a little special time with each child. Don’t worry if you can’t bring presents. Bring a snack your children can share.

There is a lot about the visit and about your child being taken away from you that may make you angry. But you don’t want to show your angry face or words to your child. Leave those feelings at the door so the visit is an anger-free place.

It can be stressful to be watched during your visit, but remember your worker wants to see what a loving parent you are. Meet with your worker after the visit for grown-up talk—that way, you can spend all your visit time playing with your child.

Your child may be confused about why you’ve been separated from each other. It’s hard on you when your children ask, “Can I go home with you today?” Reassure your children that being apart is not their fault. You can also help by showing your love and saying you are doing everything you can to have them come home soon. Avoid going into detail or making promises—these are too hard for children to understand. Talk instead about your child’s interests.

It may be hard to see your child in clothes you don’t recognize or a hairstyle you don’t like, but you don’t want to make your child feel bad about living with someone else. Your child will be happier seeing you and the foster parent get along. Question the foster parent or your worker when your child can’t hear.

Imagine your child leaving the visit. It’s hard for both of you to say good-bye, but it makes it easier for your child if you say something you’re looking forward to doing together at the next visit. You can feel proud that you made sure your child leaves feeling happy about your time together and is looking forward to the next visit.
Appendix C
Making Goodbye a Little Easier

Saying goodbye at the end of a visit is difficult for your child and you. Children of all ages will be confused about your visit ending and why you are not going home together. If they look sad, you may feel like crying—it’s as if they are being taken away from you again.

How you help them say goodbye can make a big difference.

- You can make them feel loved.
- You can reassure them by showing you are happy you will be seeing them soon.
- You can give them reminders of you together that will support your attachment.
- You can keep the same routine of saying hello and goodbye to fix you in their minds.

To make sure the goodbye at the end of the visit helps them the most, stand in their shoes.
At their age, what will they understand best?

Some suggestions are:

For children under 2 who do not use many words, it is hardest to figure out what will make them look forward to the next visit. When they aren't with you, they aren't old enough to be able to remember a lot from week to week. Giving them a stuffed animal to bring back and forth to visits can be a help.

Most 2-5 year olds do not know the difference between tomorrow and next week, so your emphasis should be on one thing you will do together at the next visit, not when. Giving them a picture of you together can be reassuring. The older they are, the easier it will be for them to use the idea of talking to your picture in between visits.

Something you repeat at every goodbye can be a help, such as singing the same song, handshakes, rhymes or coming up with your own goodbye ritual like an enthusiastic cheerleader (“Who does Mommy love? Naya and CeeCee! Who can’t Mommy wait to see next week? Naya and CeeCee! Who’s going eat popcorn with Mommy next week? Naya and CeeCee!” etc.)

School age children are able to look forward to a visit on a specific day and to talk to you on the telephone.

The older they get, the more possible it is for them to be in charge of bringing something to the visit, such as a school project they want to show you. Making a scrapbook of old photographs or pictures they draw, with stories they tell about what they remember in the past, can be something they will look forward to in visits.

Draw each other a picture during the visit for you each to take with you or bring a loving note to give them when they leave.

Probably the best goodbye advice is to do more listening and less talking. Your children cannot understand your complex feelings or plans for the future. You will be full of feelings as the visit ends, but those are for you to talk to another adult about. Listen to your children. Agree with them that it is hard to say goodbye. Label their feelings with words such as, “We both feel sad to say goodbye. We both feel happy we will see each other soon.” Your own special goodbye ritual with your children will make this hard time a little easier.