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# THE CAREGIVER-BIOLOGICAL PARENT RELATIONSHIP'S IMPACT ON REUNIFICATION

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# THE CAREGIVER-BIOLOGICAL PARENT RELATIONSHIP'S IMPACT ON REUNIFICATION

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A Project

Presented to the

Faculty of

California State University,

San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

\_\_\_\_\_

by

Karol Valencia Reynoso

May 2022

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May 2022

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#### ABSTRACT

Child welfare cases that require the removal of children from the parents require court involvement. Children in foster care are placed in a foster home.

Foster caregivers are responsible for the daily care of the court Dependent meanwhile their parent(s) is participating in Family Reunification services.

Interviewing social workers with family reunification case work experience allowed for identification of common barriers or commonalities caused by the relationship between foster caregivers and biological parents. Visitations between the children and bio-parents are a great indicator of reunification likelihood based on the child-parent bond. The study was centered on child welfare social worker's experience of families in juvenile dependency cases. There were significant studies that prove attachment is essential for the well-being and development of a child. However, the study found that there are a number of issues based on the caregiver/biological parent relationship.

Participants reported that they must act as a mediator between the two parents in efforts to work toward reunification. Participants appear to focus more on mending the relationship rather than ensuring that the child has health attachments to either parent.

# **DEDICATION**

To my family, who has shown an endless amount of support and love for me and my future Thank you to my parents for the great sacrifice of leaving our home country, leaving your stability in hopes that I would succeed. I can only hope to be as supportive, kind, resilient and independent as my sisters. And to my brother who told me to never let my flame turn down. I didn't, and I won't.

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#### CHAPTER ONE

#### INTRODUCTION

#### **Problem Formulation**

Once children enter foster care, social workers, with the help of the parents, must make every effort to place the children in the least constrictive placement possible. Such placements can be with another non-offending parent, if safe to do so, or a foster home. Children in foster care are placed in a temporary home for their protection and well-being. There is limited information on how the relationship of the biological parent and the foster caregiver affects the reunification process. A family reunification case's likeliness for successful completion is easily affected by a number of factors.

There are two important basic factors that can influence a biological parent's willingness to engage with child welfare workers, [voluntary and involuntary status] (Segal, 2013). The two variables greatly influence the relationship for the case from the engagement stage (Jacobsen, 2013). Involuntary clients are seeking services as a result of legal obligations or pressure from members of their support system. A need for social workers has increased in many diverse settings. The need expanded to settings where clients are obligated to cooperate with social workers. Mandatory cooperation is required in jails, child welfare agencies, and mental health treatment centers. However, clients that are mandated to participate are resistant toward change

given that the decision is not their own. In the child welfare system, cases that require the removal of children from the parents require court involvement. An open juvenile dependency case will have a court ordered treatment plan for the family. Ordering parents to complete services to reunify with their child can lead to resistance on the parent's part toward the social workers and other formal support networks. Additionally, clients' treatment plan is often focused on achieving a designated goal. "Involuntary clients are less likely to respond to warmth, genuineness, and empathy as the primary means of engaging the client" (Ivanoff et al., 1994; Kadushin, 1997). It's important to keep in mind that there will be a certain level of resistance toward cooperation when parents' participation is court ordered rather than voluntary. This in turn can cause that same level of resistance in teaming with foster caregivers due to misdirected frustration.

While receiving family reunification services, children are placed in foster care. During that time biological parents are authorized supervised visitations by the court to maintain the familial connections. The duty to supervise the visitations is often delegated to the caregiver of the child which is when the foster caregiver and the biological parent will have the most interaction during the duration of the case. Social workers are authorized by the court to provide the visitation monitor any relevant information that may affect the quality and safety of the visit. Given that the information provided is often the reason for court involvement there is a negative preconception regarding the parents.

# Purpose of Study

Interviewing social workers with family reunification case work experience will allow identification of common barriers caused by the relationship between foster caregivers and biological parents in the family's efforts to reunify.

Visitations between the children and the bio-parents are a great indicator of reunification likelihood. In 2018 there were approximately 250,103 children that exited foster care. Reasons for exiting foster care include adoption, living with relatives, guardianship or reunification. Forty-nine percent of the children were reunified with their parents (Children's Bureau, 2018). More information is needed to determine if a caregiver is equally participating in the reunification process. Caregivers have the most contact with a child while they are placed in out-of-home care.

Front line social workers have the most interaction with the caregivers, children and biological parents. They are able to verbalize case based responses to what barriers are commonly encountered. Social workers with past experience in family reunification will self-identify what they perceive to be a positive and negative relationship and what effects occur based on that relationship. The more children enter foster care the more important it will be to identify how to increase family reunification rates.

Child welfare cases are opened in Juvenile dependency court for many reasons. Court ordered case plans are often routine due to the limited variations

to alleviate the problem and reunify the family. Social workers while working a case develop a multitude of problems that are not routinely resolved. One of the problems is the ability to form a unified team where all parties involved in the case cooperate to aid in the reunification process. The study will identify common barriers to reunification based on the foster caregiver and biological parent relationship.

# Significance of the Project for Social Work

The information gathered will help identify what factors during the family reunification service component are impacted by the relationship between foster caregiver and biological parents. Improvement in the engagement stage will increase child and family team unity.

Social workers can approach the issue using a solution focused approach and client understanding of issues that require intervention and less resistance. The information can assist social work professionals by up-holding the all of the National Association of Social Work code of ethics, specifically importance of human relationships, service and social justice (N.A.S.W., 2008).

The study is centered on case experiences of families that are or were involved in juvenile dependency cases. It will assist workers in their everyday practice when the case goal of the child is reunification with the biological parents by including the foster caregiver to be active participants in that plan.

Social workers use a generalist model to create a rapport with the clients in efforts to promote a positive working relationship from the initial meetings with a client. By the end of this study social workers will identify common barriers that are encountered during the family reunification service component to develop a more efficient strategy to evade common issues. By applying the engagement model that social workers use during the social worker/client relationship to a caregiver/biological parent relationship, social workers will be able to prevent common issues identified by social workers in this study and assist in the family's reunification.

By identifying what factors affect the reunification process, social workers can improve in a micro scale the information can lead to advocacy in bettering results for the benefit of the clients at a mezzo and macro scale. If the social workers are interviewed regarding what case factors are affected by the caregiver's biological parent relationship, then information can be provided to program development to advocate for change at a larger scale. Better engagement strategies can increase program-wide improvement advocacy on a macro scale, such as lobbying for better programs or increase in funding to serve population groups that are poorly represented or inadequately served.

Additionally, County agencies can identify common barriers and adapt the contracts with Foster Family Agency (FFA) contracts to promote reunification in a team setting to include foster caregiver's licensed by and FFA to improve teaming strategies and requirements.

#### CHAPTER TWO

#### LITERATURE REVIEW

### Introduction

This chapter will review relevant information related to family reunification. The subsection will be the juvenile dependency process, placements in foster care, and theoretical guidance. The generalist model will be explained to understand how social workers can use their skills to improve caregiver-bio parent relationships.

## Juvenile Dependency

Within the United States, all states are required to abide by federal and state legislation in the response to child abuse allegations. Each state has a different response protocol. A majority of the states have chosen to administer the requirements on a state level. There are over 2600 different child protective services agencies within the United States. Only nine states administer the requirements on a county level (Child Welfare Information Gateway, 2018). Two states, Nevada and Wisconsin, have a hybrid system, in which they follow mandated regulations in both a county and state level response.

The juvenile dependency system is not well understood by many people.

When a concerned party suspects a child is being abused or maltreated the information should be reported to their local child abuse hotline. There are certain

professional settings where employees are required to be mandated reporters. However, there are also many reports made by concerned citizens. Data reports that on average, there are over four million child abuse report calls in the United States. Once a call is made to the hotline the concerns are documented. If sufficient information is gathered and it meets criteria for possible child abuse an investigative referral will be generated. Less than half of the reports made are evaluated out because there is insufficient information reported to the hotline. The referrals consists of reports of physical abuse, emotional abuse and sexual abuse. However, over 70 percent of the reports allege maltreatment (U.S. Department of Health & Human Services, 2018). Once a referral is generated it is assigned to an investigative social worker to investigate the alleged reports and assess the child's safety and risk level. Referral allegations result in three different ways: substantiated, inconclusive or unfounded. In California, a referral determining that a child is at risk or whose safety is compromised, will lead to opening a juvenile dependency case with the corresponding county courthouse. Based on the abuse results the child may remain in their home with no services, in-home supervision for the family or support services or removal from home.

The Family Preservation and Support Services Act of 1993 was created to prevent separation, improve services, improve care for children and support reunification. The act assisted families that were in crisis which may result in out of-home placement due to neglect or abuse by the parent. The act also provided preventative services to the parents to improve their nurturing abilities and create

a stable environment for the family (Child Welfare: Opportunities to Further Enhance Family Preservation and Support Activities, 2013).

In California, when a child is removed from the parents, the court may be inclined to offer family reunification services to the parents which will allow the parents to complete services to improve their behaviors which lead to the children being abused or maltreated.

Each state offers a variety of services provided to parents to overcome the substantiated allegations that require child welfare involvement. For example, in Los Angeles County SHEILDS is focused on providing family preservation services to low risk families. The services provided include in-home outreach counseling, individual, family and group counseling, therapeutic day treatment, child-focused activities, Teaching and Demonstrating Homemaking services, emergency auxiliary funds, and linkage and referral services (Family Preservation/ Alternative Responses, 2018).

#### Placements in Foster Care

The state of California has over 60,000 children in foster care. Once children are removed from the biological parents and placed in out of home they are placed in a foster care setting. The placement type options are Relative/ Non-Related Extended Family Member (NREFM), Foster home, Foster Family Agency Home (FFA), Group Home (GH), Shelter, Guardian placement, or Court specified home. Between 2009 and 2010, was the year with the most FFA

placements with over 38 percent. Since then, the number of FFA placements has decreased. Between June 2019 and June 2020 in California, 30 percent of children in foster care were placed in an FFA home. Relative/NREFM placements cared for 31 percent of children in foster care (California Child Welfare Indicators Project, 2020).

In California, open cases where multiple children are removed such as sibling sets, only 79 percent of the children in care are placed with some or all of their siblings. Only 59 percent of children are placed with all of their siblings. Biological parents of sibling sets will have multiple foster caregivers to work with. Since 2015, the reunification rates have varied between 48 and 52 percent. From June 2018-2019 twenty-six percent of children exiting foster care resulted in adoption. Compared to white children, Hispanic, Native American and Black children are more likely to have some sort of contact with a social worker from the child welfare system (California Child Welfare Indicators Project, 2020).

Children and Family Services San Bernardino County Annual Report (2018) reports that over 30 percent of residents in the county are made up of children and adults under the age of 20 years old. Of all San Bernardino County residents 61 percent identify as Latinos, 21 percent identify as white and eight percent identify as black. The remainder of residents identify as Asian or multiracial (Children and Family Services San Bernardino County Annual Report, 2018).

# **Theoretical Guiding**

It is important to understand how building relationships helps establish a positive rapport. By analyzing how social workers initially engage with clients, the same methods can be implemented between biological parents and caregivers. Understanding the attachment theory is necessary to understand why child-parent visitations while in foster care are critical in the reunification process. Nonetheless, it is also impactful in understanding how children form bonds with their caregiver. While in foster care children's basic needs must continue to be met.

While in foster care, children receive services that can assist in the reunification process as well as placement stabilization. Programs in San Bernardino County such as Wraparound in stabilizing the child's behavior in placement and reducing the risk of being placed in a group home setting, Group home placements are not preferred due to the fact they do not exhibit a family-like setting. In 2018 over fifty percent of children who were referred to wraparound services successfully graduated the program. Graduation from wraparound indicates a child was able reach their individual goals (San Bernardino Annual Report, 2018). The program is also utilized to assist the families who are reunifying to have the children transition home successfully.

Attachment can be simply described as a bond between two people.

Examples of attachment relationships are parent-child or romantic relationships.

Attachments begin forming as very early stages in life and can often have very long lasting effects for an individual. The attachment theory explains that a child's relationship with their parent or caregiver will create a sense of security and assist their development. Their future ability to form relationships is greatly influenced by the relationship with their caregiver at an early stage in life based on their needs being met. It was suggested that attachment as a child an indicator of their future romantic relationships. It can also be linked to forms of loneliness, depression combat stress reactions and post-traumatic stress disorders in adulthood. (Hazan and Shaver, 1987)

The more positive the attachment between the parent and child, the more likely the child is to want to explore their surroundings. Attachment is broken down to several styles of attachment, secure, ambient-secure, and avoidant-insecure. It is also broken down to four patterns, ambivalent, avoidant, disorganized and secure. Poor attachment can have long lasting negative effects on a child. Many children who lack positive attachment have behavioral diagnosis such as Obsessive Compulsive Disorder (OCD) (Nelson III, Furtado, Fox, & Zeanah Jr., 2009). Social workers assess the parent-child relationship based on visitations. When working with children that have been removed from their parents it is unknown the attachment type the child exhibits. Visitations in a court case are court ordered unless deemed unsafe. All parents are legally entitled to have visitations. Social workers will use the visitations as a determining factor of the parent's willingness to reunify with their child. Social workers use Safe

Decision Making tools to assess the visitations appropriateness based on frequency and the quality of visitations. Strong/adequate visitations will exhibit the parent being protective, ability to recognize the child's behavior or cues or showing interest in the child. Social workers are examining the attachment between the parent and child. (Ahn, 2016)

Cooley (2015) stated that any new attachments will not be directly affected while a child is maintaining contact with the birth parent. He further stated that continuing contact with the parents will be instrumental in ensuring that there is an attachment between the child and the caregiver. He does take into account that there are circumstances where severing ties between the child and the parent may be appropriate despite the importance of attachment at an early age.

Cooley (2015) acknowledges that fostering is a difficult job. It explores the many support systems a caregiver needs to adequately meet their role as a foster caregiver. The support system consists of formal and non-formal support from foster family agencies, mental health teams, child welfare support, family and friends. The article discusses how having support is important in the retention of foster parents to continue to foster children. However there is no mention of utilizing the biological parents as a support system in fostering.

# Summary

By all accounts there are significant studies that prove attachment is essential for the well-being and development of a child. But there is limited information on how the caregiver and biological parent relationship affects the child. By further studying how that relationship impacts the reunification process social workers will be able to determine what hinders or helps reunification.

#### CHAPTER THREE

#### **METHODS**

#### Introduction

This study will seek to see similarities and differences that affect reunification based on the relationship between foster caregivers and biological parents. It will also identify what strategies social workers have used that can mediate any problems between the two. This chapter will further discuss how the study will be conducted.

# Study Design

The study explored what common barriers social workers encountered based on the relationship between foster caregivers and biological parents when a case is in the stage of Family Reunification. The study also identified possible solutions to address the barriers. This was a qualitative study based on social workers' perspectives by interviewing social workers with open-ended questions on cases that they managed while working in child welfare.

The study's questions were open ended, which will allowed social workers to provide feedback regarding their own cases. The question type allowed for a wide variety of answers rather than limiting responses to selected answers.

Social worker's perspectives allowed for this study to be used to examine what issues can arise in family reunification cases. The interviewer asked social

workers if there have been any solutions that have been successful in mediating the issues.

The study allowed social workers to use practical, real case experience to identify how the relationship between foster caregiver and biological parents affect the case's goal of reunification. The study identified if social workers are undergoing similar complications in their cases caused by the relationship.

One of the limitations of the study was that the interviewed social workers are volunteers therefore there was a limited number of participants. Additionally, the study is not representative of all child welfare counties given that participants are only from two counties in southern California. The study was based on only self-reported information based on case experiences that each social worker has experienced therefore the information is limited to their own current and past caseloads. The data provided for the purpose of the study may be biased which can affect the legitimacy of the study results. Therefore the results of the study are not meant to detect causality between negative relationships between foster caregivers and biological parents to a lower rate of reunification.

# Sampling

The study focused on social workers in child welfare. Specifically, social workers who are in a case carrying role, which is commonly referred to as a carrier or back-end worker. The researcher used purposeful sampling to recruit

social workers that fit the specific child welfare experience characteristics needed for the study. The specific worker has experience in working with both biological parents and foster caregivers who must team in effort to participate in a case plan ordered by juvenile dependency court. The social workers are from San Bernardino County and Riverside County. A total of 9 social workers were interviewed one-on-one by the researcher. Only workers that have practical experience in the case carrying role were included in the study because they have direct knowledge of what caregiver and biological parent relationships are like. The experience can be either current or historical as long as there is a minimum of 6 months managing family reunification cases.

# Data Collecting and Sampling

Using the researcher's current formal network among the child welfare system, participants were identified then provided the opportunity to participate in the study. Participants who met the criteria based on the work experience requirements, were emailed by the researcher the consent form to be recruited as willing volunteers of the study. Once participants provided the signed consent form to the researcher an interview was be scheduled given that the interview ranged from 20- 45 minutes. The researcher gave each participant the option to receive the interview questions prior to the interview to ensure that they were prepared for the interview with case specific information. If a participant

requested the interview guide, it was emailed to them prior to the interview start time.

Participants were be interviewed over the phone and via zoom due to COVID. The interviews were audio recorded then transcribed. The participants were informed of the interview process. A description of the study's goals and purpose was provided to all the participants prior to starting the interview. All participants were given the option to provide demographic information for statistical purposes but the information was not required to participate in the study.

Some demographic questions were asked such as age range, gender, and race. Social workers were asked about their work experience to ensure they met the criteria. Additionally, the years of experience can impact the study's findings because employees who have been working for longer periods of time in child welfare had more case insight. Workers were be asked about the caseload numbers to compare their ability to manage tasks. Participants were asked about relationships between the foster caregiver and biological parents. Questions included the worker's perspective of a positive and negative relationship, differences in teaming based on placement types, and what other factors affect the relationship between foster parents and biological parents.

#### Procedure

The undersigned conducted the one-on-one interviews with each participant on the phone and through Zoom due to the COVID 19 pandemic occurring during the time the interviews were being conducted. Phone/Zoom interviews assisted in lowering the risk of transmitting illnesses due to the rise of COVID 19 cases. The participants were selected based on the researchers' knowledge of the participant qualifying for the study. Each participant was asked their willingness to be a voluntary participant. Participants were provided with a short introduction of study, an informed consent, and a confidentiality statement prior to starting the interview. The informed consent consisted of the purpose of the study, description of the survey, voluntary participation, and confidentiality of participants, duration of the survey, risks, benefits, and contact information for any questions regarding the study and where to obtain the results of the study. The consent form was sent to an individual who the researcher knew met the criteria, gave a brief description of the study and requesting their participation. The consent form instructed the participant willing to participate in the study to virtually sign an "X" on the informed consent to maintain the participants' confidentiality. Once the participants consented to partaking in the study it was sent back to the researcher. An interview was scheduled to ensure that it was completed at a time when the participant will be available given the interviews were estimated to take between 20-45 minutes.

All interviews were audio recorded to later be transcribed by the researcher.

The researcher usedthe transcribed data to compare similarities between the

workers' responses. The hard copies of the transcribed interviews were printed and stored in a safe where only the researcher has access to.

# Protection of Human Subjects

The protection of confidentiality of the social worker is the primary concern for the researchers. There were a number of precautions that were taken to ensure that each participants' identity was protected. Certain identifiable information was not asked for the purpose of identity protection such as name, date of birth, or income. Each interview was assigned a random six-digit case number for documentation purposes rather than saving the interview's audio recording under the participant name.

Other steps taken to protect confidentiality was to limit the number of people who have access to the data collected. The only individuals that will have access to the participants' data are the researchers and the faculty advisor. The audio-recordings were stored in a password protected computer which only the researcher has access to. Once the data is collected and analyzed, it will be destroyed by the researchers after three years. Furthermore, participants were informed in the introduction of the survey that they have the right to refuse to take the survey. Participants were informed about the confidential nature of their answers so that they can respond honestly.

The interviews asked participants general information regarding cases they were been assigned to. To protect the client's confidentiality, the researcher will not ask for any identifiable information such as case name, case number, date of birth, or time the case was active.

# Data Analysis

All data gathered was analyzed. First, audio recordings of the interviews were transcribed into written form. Non-verbal observations by the researchers were documented. The researchers used the interview answers to categorize answers into groups and sub-groups of similar answers. Social workers identified an estimated percentage of how many children in foster care are placed in a Foster Family Agency home. Social workers verbalized what constitutes a positive and negative relationship between the foster caregiver and the biological parents. Social workers identified at least three barriers that influence the caregiver and parent relationship. For each barrier, the social worker rated the frequency each barrier occurs on their caseload. Social workers then identified how each specific barrier influenced the case in general and the family's reunification process, specifically. The answers was categorized into similar responses then rated based on similarity. Social workers then discussed what successful or unsuccessful problem solving techniques the participants have used to attempt to overcome the identified barriers.

Therefore, the study's purpose is to answer the following hypothesis question: does the relationship between the foster caregiver and the biological parents affect the reunification process?

# Summary

This study identified common barriers that social workers encounter when managing a Family reunification case that were caused by the relationship between the foster caregivers and the biological parents of a child. The participants shared how they attempt to surpass the barriers for the betterment of the clients they serve. Using social worker's perspectives ensured that the case commonalities were identified.

#### CHAPTER FOUR

#### RESULTS

In this chapter the demographics and characteristics of the child welfare social workers who were interviewed in this study will be presented. The quantitative study gathered demographic information regarding each of the participants such as age range and ethnicity. Additionally, participants were asked about their previous experience relevant to child welfare. The participants were asked a series of questions in regards to their prior work experience when working with foster caregivers and/or biological children. The questions were open ended to allow the participants to have the opportunity to describe their own experience within their practice. The answers were compared and analyzed for common themes among each question. The interviews allowed the researchers to identify how foster caregiver's relationship with bio parents affect reunification based on a social worker's perspective. Participants' quotes were used to support commonalities or differences between the participants' case experience. The interviews with participants ranged between 12 and 47 minutes in length.

#### Qualitative Interview Data

The population who participated in the study consists of nine (9) participants. Females accounted for 77% of the study participants. Two (2) participants were male and seven (7) were female. The participants' ethnicity consisted of

Caucasian, Native American, Asian, and Hispanic. The participants were asked to categorize themselves in three age categories, 20-35, 35-45 and 45 and above.

Table 1. Demographic Characteristics of Participant

Variable	Frequency	Percentage			
Ethnicity					
Asian	1	11.1			
Caucasian	3	33.3			
Hispanic	4	44.4			
Native American	1	11.1			
African American	0				
Other	0				
Age					
20-35 Years	4	44.4			
35-45	2	22.2			
45 and Above	3	33.3			
Gender					
Male	2	22.2			
Female	7	77.2			
Experience in Child Welfare					
(In Years) 2	2	22.2			
3	0	22.2			
4	4	44.4			
5	2	22.2			
6	2	22.2			
Prior Experience in Child Welfare					
Yes	5	55.5			
No	4	44.4			

Once the participants completed the demographic portion of the interview, they were asked about prior and current child welfare. All participants were employed in child welfare at the time of the interview. The average amount of time the participants had been employed in child welfare was 4.6 years, the participant with the least experience in child welfare was two (2) years. The participant with the most time employed in child welfare was six (6) years. Seventy-seven percent of participants disclosed they had other relevant child welfare related employment. Previous experience among the participants consisted of working in therapeutic fields for children who were in child welfare, victims of crime therapy, Court Appointed Special Advocate, probation, Inland Regional Center, and Foster Family Agencies. Only one participant disclosed working in another county other than the county they were currently employed in. All participants have experience in a southern California county child welfare agency.

Once the participants completed the experience portion of the interview, they were asked 12 questions regarding the relationship between foster caregivers and biological parents.

Although all participants have experience with reunification cases for at least six months, two participants were not working in family reunification cases at the time the interview occurred. At the time of the interview, Participant 3 was

working in child welfare in adoption cases. Participant 2, at the time the interview was conducted, was working as a court investigator for child welfare.

## Positive Relationship Indicators

Overall participants were able to identify common themes in which they indicate a positive relationship between foster caregivers and biological parents.

Participant 4 was able to list what they consider to be the most important factors

Open and honest communication, being accessible to each other, focused on the children during interactions, able to accept constructive criticism, emotional interaction, engagement and involvement, understanding each other, and appropriate boundaries. (Participant 4, November 2021)

The majority of participants are able to identify that in order for the two parties to have a positive relationship they must have a teaming mindset.

## Rapport Building

All participants were asked to describe their work responsibilities in regards to their family reunification cases.

Formulate Case Plan with stakeholders, CFTM (Child Family Team Meeting) to identify and problem solve, weekly or monthly contacts, monitor progress, arrange assessments (Psychological, psychiatric,

educational, forensic), correct barriers, as warranted, residential planning, arrange services (drug education, testing, parenting skills training, IPV, Anger Management, Individual Therapy, Group Therapy, support groups, etc.), and family finding. (Participant 4, November 2021)

For the purpose of this study, a caseload is described as the number of cases a social worker is assigned. A single case consists of a single child/youth rather than a whole family. Participants were asked the highest and lowest number of cases they have been assigned during their employment in child welfare. The lowest number of cases a participant reported was 10 cases by Participant 2. However, Participant 2 disclosed that the "low" case assignment was due to returning to work after time off. Participant 5 reported their highest number of cases was 75. Participants 9 and 3 reported that having higher case assignments severely affected their ability to adequately serve their clients by limiting their time available to build a positive rapport with both the foster caregiver and the biological parent. Participants reported that the required mandates for their position for each case were very demanding, therefore making it very difficult to establish rapport with clients. Participant 3 indicated the difficulty of managing a high case load by providing their perspective on the amount people a child welfare social worker would have to contact on a monthly basis with a high caseload. The participant described how having a high case load affects their ability to fully engage in the best practice mandates of meeting with parents in person.

I can break it down from when I had 30 cases, I was able to go out and really interact with clients so I was able to go out and search for clients as far as getting out into the streets. Walking down in the riverbed at the homeless encampments looking for parents. I was able to do that with ease. I got to 40, I was able to do it, but less frequently, but able to still do it, and still go out and find them. When I got to 50 cases I could no longer do it. Find them, you know, motivate them. I'd be lucky to be able to go out and meet them somewhere, they don't always have to come to the office to meet. Once I hit 60-65. I did mostly phone calls. So that kind of puts it in perspective and I'll tell you why that puts it in perspective, because when you have 65 cases you're talking about 65 kids. With 65 kids you have 120, actually that's 130 parents. We're assuming they have the same mom and dad. On top of that, you also have to meet with the caregivers, which is about another 130 people that you have to interact with a month. (Participant 3, November 2021)

Additionally, eight out of the nine participants agree that cultural ignorance is a barrier to a healthy relationship between foster caregivers and bio parents. Participants share that due to the scarcity of available foster homes in emergency situations, social workers rush to place a child in the first available placement rather than taking time to consider the cultural or language needs of a child/family and ultimately a case. Participant 2 responded the following when

asked if culture affects the relationship between and foster caregiver and biological parent:

Yes. Sometimes I don't think we are being culturally sensitive. When we are placing children let's say like at detention. You know if we have a limited amount of foster homes or whatever is available at the time of removal. I had children who, you know, had to be placed in a Spanish speaking home that creates barriers and obviously issues between the foster parents, children and parents. So we quickly have to look at that to make that change and look into another home or relative. I do think those factors prevent communication. I feel like there are some kind of cultural barriers. It could be a situation where we have the caregivers together with bio parents like in a child and family team meeting to really bring everyone on the same page, or if they just don't have a good relationship all together. (Participant 2, September 2021)

## Sharing Information

Participants reported that the information provided to the foster caregivers regarding the case and that of the biological family is confidential. Participants were asked how much information is provided to the foster caregiver such as the reasons a child was removed, the child's past behavior and family history. Only two participants disclosed that they provide as much information as possible about the child's behavior. Regarding reasons for removal and family history,

however, participants provide different amount of information for a series of reasons. The participants indicate that there is a variety of information shared based on the case stage. Participant 2 shared that during the court investigation process there is not much information shared with the foster caregivers due to the limited amount of information that the department has at the time.

I definitely do disclose, you know the reasons for removal, but I do not go into extensive detail just because of confidentiality issues, privacy. And in terms of behavioral issues because part of my work as a JD (Jurisdiction/Disposition) writer is trying to gather any kind of medical, development, behavioral and emotional concerns about the children. And once I am aware of any I do notify foster parents, sometimes it's not at the beginning of the case, sometimes it could be, you know, as time progresses. But then on the flip side too foster parents know you know the information we have about this child can be minimal. If it's a situation where I haven't interviewed the parents. So sometimes, the foster parents are reporting back to us, like me as the worker about some behaviors. They are observing and then I kind of make it a point of discussing it with the bio parents or caregivers. (Participant 2, September 2021)

However Participant 8, much like the other participants, provides a limited amount of information to the foster caregiver unless it is necessary in the particular care for the child to address specific behavioral concerns that are being

reported. The information provided is only shared if the child's trauma directly affects their behavioral patterns.

I try not to give too much information because that's you know, their (the parents') privacy. With the child's behaviors, I do say what behaviors the child has had and things like that, and if they have any health conditions... I try not to give too much information about their background. I'm not going to say I have not done it because I have. Because I thought it was necessary. But I thought it was necessary because the child's behaviors were reflecting trauma. The trauma was reflecting in their behaviors and the foster parents didn't really understand why she was acting this way.

And so I tried to, you know, by telling her a little bit about her background. (Participant 8, October 2021)

Participant 3, who is currently an adoption worker stated they provide much more in depth information regarding the child to the prospective adoptive parents. Adoptive parents are entitled to know as much information as the department is aware of to make a final and informed decision to adopt the child.

I have to make sure that the adoptive family is fully briefed on all behaviors why the child was bringing those. What kind of therapy the child has had, to what extent, and basically a full presentation to them. As far as why the child was removed, what kind of behaviors the child has had while

in placement. Okay. I don't gloss over anything, I don't care what it is.

(Participant 3, November 2021)

# Barriers

Participants in the study were asked to identify what they would qualify as a negative relationship between the two parental sets of the child. Additionally, they provided case specific examples to describe how the issues occurred in specific cases. Participant 4, identified "hostility among parties" as a negative teaming trait among the relationship. Participant 6, reports that in their case management experience, foster caregivers speak negatively about the parents in front of the children. Child welfare has attempted to take steps in order to promote teaming strategies among all parties involved. Participant 4 specifically answered that not engaging in the family reunification process is a trait that indicates a negative relationship.

Foster parents regardless of their specific Foster Family Agency, all have different amounts of experience as a foster caregiver when children are placed in the home. A majority of participants agree that the amount of experience a foster parent has in fostering children and working with biological parents will affect their relationship with the biological parents. Participant 4 feels that the previous experiences, whether they were positive or negative, can affect how the foster caregiver interacts with the bio parent.

Negative past experiences can create caution, guardedness. Positive experiences can create motivation, enthusiasm and energy to meet goals. Yes, foster parents have good and bad experiences especially with numerous children in the home. A negative experience or ongoing issues with bio parents can disrupt the household and future decisions to remain open, and willing to work with the parents. Also the lack of continued education to further their skillset and adaptive skills. (Participant 4, November 2021)

# Summary

Overall, participants feel that an open communication will assist with a teaming mindset which can assist with reunification. However, the participants reported that that are many obstacles that they face in order for the foster and biological parent to have a productive relationship. A number of solution suggestion were discussed which will be described in Chapter five, along with suggestions by the researcher based on the participant responses.

#### CHAPTER FIVE

#### DISCUSSION

### Introduction

This chapter will provide a synopsis of the results to identify how the relationship between a foster caregiver and a biological parent affects reunification based on social workers' perspective.

A review of the literature indicates the importance of creating positive attachment (Hazan and Shaver, 1987). A child's development can be affected based on the type of attachments or poor relationships. However, participants have overall indicated that there are much more barriers in their daily practice which inhibit building a secure attachment. Although a child's overall case goal may be reunification, the foster caregiver does not always prioritize the goal of reunification. Foster caregiver comply with case mandates but do not seek to assist with the reunification process.

### Attachment

While children are residing in out-of-home care with foster caregivers, it is likely the child will develop a bond with the new person. However, during the interviews several participants discussed that the lack of communication between the caregivers and the biological parents leaves parents without information about their children's everyday routines. The parents inability to know about their

children, can affect the child's sense of security with their parents. Wraparound can be utilized to transition the child back to the parent's home. The wraparound team can be better utilized to improve the attachment between the child and parent during the transition process by creating a secure attachment where the child will trust the parent's ability to meet their needs despite prior abuse/neglect.

# Practice Affecting Service

Participants agree that culture and language barriers can directly affect the relationship by interfering with the communication. As previously mentioned in Chapter 3, given that 61 percent of San Bernardino County residents identify as Latinos, the cultural and language barriers are not being well addressed by local child welfare agencies despite the population demographics. Social workers place children in the first available home rather than matching the child with a home that may better meet the cultural needs of a child. Also, due to the seeming urgency of finding a placement during a crisis, gives parents little to no input on how their child will be raised culturally, during the placement period which is often described to be as a temporary placement.

Some participants indicate that the work requirements far exceed their ability to complete them in their designated work hours. Participants have expressed that the high caseloads affect their ability to simply complete tasks corresponding to the case. Participants have observed that the more cases they are assigned to, the less likely they are able to build a rapport with the biological

parents and foster caregiver to really address issues between the two. Social workers appear to be addressing issues with a crisis stabilization mindset rather than initiating a positive relationship through the life of a case.

Lack of consistency in practice such as the inconsistent information provided to foster caregivers creates a barrier between foster caregivers and social workers by instilling a doubt in the social worker's ability or willingness to be honest regarding the child's needs. Participants all provide a different level of disclosure to the foster caregiver to protect confidentiality. However, participants who disclosed that they do in fact disclose additional case information justify that more information is shared because it will assist with the child's needs. The need for additional disclosure is based on that particular social worker's assessment.

# **Improvement Suggestions**

Based on the participant responses, there are a great number of improvements that can be made for the client populations served. On a macro scale, participants frequently commented that the high caseloads were influencing their ability to have good working relationships with their clients.

There has to be systematic change to address high caseloads social workers are expected to maintain. As previously stated by Participant 3, there is a large, unrealistic number of individuals a social worker is expected to communicate with on a regular basis in order to complete the required mandates.

Participants described that a positive relationship between foster and bio parents is one where they can directly communicate with each other. However, the high caseloads will impact building rapport with clients.

Better engagement strategies can increase program-wide improvement advocacy on a macro scale, such as lobbying for better programs and increased funding to serve population groups that are poorly represented or inadequately served. Additionally, county child welfare agencies can identify common barriers and adapt the contracts with Foster Family Agencies (FFA) to promote reunification in a team building setting.

Lack of communication in case leads to further issues. Participants recommend CFTMs to create a teaming effort in the beginning of the case to avoid the issue from the beginning. CFTMs can also be used to teach the dependency process to the foster caregivers and bio parents in order to instill a common goal of reunification at the start of the case. This is important because parents feel judged by foster parents. Supporting that level of communication can give parents the opportunity to be involved in their child's upbringing while in out-of-home placement.

# **Study Limitations**

One of the limitations of the study was that the population size was nine
(9) participants who all have the majority of their child welfare experience within

the same county. The study finding cannot be generalized to a large population of participants. Therefore the study cannot be considered a true representation of all nationwide child welfare agencies. Another limitation is that the participant responses are limited to their own experiences for cases assigned to them. The study does not represent all cases in child welfare. Additionally participants recognized that some situations are case by case. The researcher asked for a generalization in regards to certain questions for statistical purposes.

For future studies that explore the relationship between the foster caregivers and bio parents, it would be beneficial to include testimony from foster caregivers and bio parents to understand their own perceptions of the level of interaction they should be completing during a family reunification case. Further research will be beneficial if researchers can compare the training that social workers and foster caregivers receive in regarding interactions with bio families.

#### Summary

Overall the participants were hopeful in their practice but acknowledged that the field has barriers that do not allow for best practice methods to be utilized. Systematic difficulties need to be addressed for the clients to truly receive quality care in effort to have positive attachment development for children in the child welfare system that are removed from their family of origin.

APPENDIX A
INFORMED CONSENT





School of Social Work

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#### INFORMED CONSENT

The study in which you are asked to participate is identify how the relationship between the caregiver and the biological parent affects reunification. The study is being conducted by Karol Valencia Reynoso, a graduate student, under the supervision of Dr. Janet Chang, Assistant Professor in the School of Social Work at California State University, San Bernardino (CSUSB). The study has been approved by the Institutional Review Board at CSUSB.

PURPOSE: The purpose of the study is to identify how the relationship between the caregiver and the biological parent affects reunification.

DESCRIPTION: Participants will be asked a few questions on their work experience with reunification cases, common barriers in reunification, common solutions to the identifies problems, and some demographics.

PARTICIPATION: Your participation in the study is totally voluntary. You can refuse to participate in the study or discontinue your participation at any time without any consequences.

CONFIDENTIALITY: Your responses will remain confidential and data will be reported in group form only.

DURATION: It will take 25-40 minutes to complete the survey.

RISKS: Although not anticipated, there may be some discomfort in answering some of the questions. You are not required to answer and can skip the question or end your participation.

BENEFITS: There will not be any direct benefits to the participants. However, findings from the study will contribute to our knowledge in this area of research.

CONTACT: If you have any questions about this study, please feel free to contact <u>Dr. Chang at (909) 537-3501.</u>

The California State University · Bakersfield · Channel Islands · Chico · Dominguez Hills · East Bay · Fresno · Fullerton · Humboldt · Long Beach · Los Angeles

# APPENDIX B INTERVIEW GUIDE

### **INTERVIEW GUIDE**

# **Demographics:**

- o What is your age range?
- o 20-35
- o 36-45
- o 45+
- O What race do you identify with?

# **Experience:**

- Are you currently employed by a child welfare agency?
- o If so, how long have you been employed at the agency?
- o What is your current position?
- Other relevant experience
- o What are your duties as they relate to family reunification?
- Have you managed cases that require you to interact with both the biological families and the foster caregivers?
- o What is your average caseload number?
- o The highest number of cases you've had?
- o The lowest number of cases you've had?

# Relationship between caregivers:

- Do foster caregivers and parents have a significant amount of contact between each other?
- What indicates a positive relationship
- What indicates a negative relationship
- o How much information do you provide to caregivers regarding the case?
  - Removal reasons
  - Family history
  - o Child's behavior
- Based on your case management experience, do foster caregivers and biological parents have a positive or negative relationship?
- For foster caregivers that are relatives/NREFM do they get along better or worse than FFA caregivers?
- Does the service component affect the relationship?
- O Does the child's age affect the relationship?
- Does the foster caregivers' experience affect the relationship?
- Does race or preferred language have an impact on the relationship?
- In cases where they do not get along what are three common issues that arise during their negative interactions? Provide a scenario of each issue.

What solutions have you attempted to implement to resolve the issue?

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