

Washington State Family Time/Visitation Guidance for Young Children (Birth – 5 Years) in Out of Home Care

FINAL DRAFT – September 2013

Introduction

The purpose of this document is to provide Washington State judicial officers and legal professionals with developmentally appropriate guidance for determining visitation (hereafter called Family Time) in dependency cases involving young children, birth to 5 years old.

This guidance was requested by the legal community in response to mounting evidence of the critical role that parent-child relationships play in early childhood development. The focus on children birth to five recognizes that the most rapid period of brain development occurs during this age span and impacts every aspect of a child's future, including academic performance, behavior and mental health. This work is informed by neuroscience research, protocols adopted by other states, and recommendations from national organizations and experts. The requirements of state law and Children's Administration's policies and practices are also reflected in this document.

A multi-disciplinary work group¹ developed this guidance with the understanding that our entire community shares responsibility for meeting the needs of young children involved in the child welfare system.

Family Time Goals

The goals of Family Time for families with young children are to:

- Promote, strengthen and heal parent-child and sibling relationships
- Support young children's social, emotional and cognitive development by creating secure and stable attachments
- Reduce the potentially damaging effects of separation on young children
- Provide opportunities for parent(s) to acquire and demonstrate parenting skills and positively impact the development and well-being of their child
- Improve the safety, permanency and well-being of children in out-of-home care

Developmental Impact of Relationships and Separation on Young Children

Children develop within the context of their relationships with their primary caretakers or parents. Secure and stable attachments with key caregivers form the basis for a child's future social, emotional and cognitive development.² Research has clearly shown that early relationships play a central role in shaping the physical structure of the brain and establishing a strong neurological foundation on which later skills are developed.³ In fact, early relationship experiences impact the developing child at a basic genetic level.⁴ Maintaining or healing attachments with parents is critical, since relationships are "the conduit for change in young children and families"⁵ and the avenue by which young children develop their ability to self-regulate, a critical capacity for success in school and life.

Infants and young children experience distress over being removed from a parent and placed in a strange environment.⁶ Unable to use words to express their grief over losing their parents, young children often experience emotional trauma when removed abruptly and for extended periods of time.⁷ Children's reactions to and ability to cope with separation from a parent depend on their age and developmental stage.⁸ The younger the child and the longer the period of uncertainty and separation from the primary caregiver, the greater the risk of emotional and developmental harm to the child.⁹

Consistent, frequent contact between the young child and the parent promotes healthy attachment, provides an opportunity to heal damaged relationships, and mediates the trauma of removal.¹⁰ Children need to know that their parent cares for them and is available to them.¹¹ Their memory capacity is such that they cannot hold the parent in mind for long periods of time between contacts.¹² Very young children are dependent on close physical proximity and frequent, repeated interactions with a parent in order to develop an attachment relationship.¹³ For cases where a child was removed at birth or a parent has been newly identified, frequent visitation is critical to build an attachment relationship with a parent who may eventually raise the child.

Research shows that children who have regular, frequent contact with their family while in out-of-home care experience:

- A greater likelihood of reunification
- Shorter stays in out-of-home care
- Increased chances that the reunification will be lasting
- Overall improved emotional well-being and positive adjustment to placement.¹⁴

Minimum, Developmentally Appropriate Family Time Recommendations

- As much in-person Family Time as possible should be provided, consistent with the best interests of the child, in terms of frequency, duration and safety.
- Listed below is the minimum, developmentally appropriate, in-person Family Time that should be provided in every case for children birth to 5 years.

Age of Child	Minimum Amount of Family Time Per Contact	Minimum Contacts Per Week
Birth – 18 months	1 hour	3 days, non-consecutive
18 months – 3 years	1.5 hours	2 days, non-consecutive
3 years – 5 years	2 hours	2 days, non-consecutive

- Judges may exercise their discretion to order increased Family Time beyond the minimum recommended amounts.
- When DCFS recommends a Family Time Plan that provides less than the minimum schedule for a child aged birth to five years old, the reason for the recommendation should be articulated to all parties in the case, factually based, appropriately documented and approved by the court in its findings.
- Families should have additional contact separate from the minimum hours listed above. Such contact may include phone/video contact, participation in childcare or pre-school activities, doctor's appointments and family functions.¹⁵

Development of a Family Time Plan

- Children should be provided meaningful and safe Family Time from the time they enter care until reunification is accomplished or until further order of the court.
- An initial Family Time period should occur within the first 48 hours and no later than 72 hours following physical removal of the child from the home, unless there are documented safety concerns and a court order to the contrary.¹⁶
- A Family Time Plan is a written agreement between Children's Administration, the child's family and any other parties to the case. A Family Time Plan must be developed within three (3) calendar days of a child's placement, when a child is in Children's Administration custody via a court-ordered placement (licensed or unlicensed).¹⁷

- A Family Time Plan should be part of the larger case plan and strategy for working with a family. It should be based on the circumstances and needs of each family and the reason for the removal of the child from the home.
- Family Time can be limited or denied only if it is necessary to protect the child's health, safety or welfare. The court must approve all changes to a Family Time plan if a child is in a dependency.¹⁸
- Family Time cannot be limited as a sanction for the parent's lack of compliance with court orders.¹⁹

Contents of a Family Time Plan

- Frequency and length of in-person contact between child and parent
 - Infants and toddlers benefit from frequent contact. Child development experts have recommended daily contact for children ages birth to 18 months.²⁰
 - Family Time should be as long as feasible given the child's emotional needs and the parent's ability to manage extended periods of time.
 - Family Time length should be increased as the parent(s) demonstrate the ability to respond to the child's cues in consistent and nurturing ways and attend to the child's needs.
 - As a family approaches reunification, unsupervised all-day, overnight and weekend visits should occur.²¹
- Supervision
 - Supervision decisions should be individualized to ensure the child's safety and to further the goals of the family's case plan.
 - Family time should be presumed unsupervised unless there is a demonstrated safety risk to the child.²²
 - The reasons for supervision, the level of supervision necessary, and the requirements to decrease or eliminate supervision should be specified.²³
 - Approved supervisor(s) should be clearly identified.²⁴
 - Contracted visitation supervisors should receive training in young children's developmental and attachment needs.
- Location
 - Family Time should occur in the most natural, least restrictive setting that can ensure the safety and well being of the child.²⁵
 - Whenever possible, Family Time should occur in home-like locations that are familiar to the child, including homes of family members and foster parents.²⁶

- Childcare centers, faith-based communities and visitation centers should also be considered.
- DCFS offices should be the last resort for visits between young children and parents.²⁷
- Transportation
 - Transportation time for the child should be minimized.
 - The child should be transported by a person known to the child, such as a foster parent, relative or family friend.
 - When transportation is provided by a professional, efforts should be made to ensure a consistent transporter with some early childhood training.
 - Transportation support should be provided for parents to travel to the child for Family Time.
- Activities and parenting tasks expected to occur
 - Family Time should be structured to promote child-parent attachment and support the child's development.
 - When possible, Family Time should allow parents to perform daily caregiving routines, including feeding, diapering and comforting.²⁸
- Support for parents
 - Support should be identified to help model positive parenting skills and educate the parent about their child's development.
 - Support may be provided by early childhood mental health professionals, parenting coaches, social workers, family members, foster parents or other professionals.
 - Formal support services may include parent coaching, home visiting, Early Head Start, and early intervention programs.
 - Parents should be given guidance on how to interact with their child, ease transitions and end visits in ways that are supportive.²⁹
 - Parents should be provided support to process their own emotions resulting from separation from their child.³⁰
 - Even when Family Time is unsupervised, observation of the child and parent together may be helpful to determine progress in the relationship.
- Ways that caregivers can support the child-parent relationship
 - Education for foster parents and family caregivers should be provided to help them understand the developmental importance of the child-parent relationship. Caregivers, and those who support them, need to understand that:
 - Family Time for young children is key to developing positive, supportive child-parent relationships, which are critical to a child's social, emotional and intellectual development.

- Developmentally, infants and young children require frequent contact in order to form attachments.
- Behavioral distress is common in children surrounding Family Time, and does not necessarily signify that time with the birth family should be discontinued.³¹
- If there are concerns about the impact that Family Time has on a child's emotional or behavioral well-being, the child should be evaluated by a professional with specific training in infant and early childhood mental health.³²
- Frequency and length of in-person contact with siblings
 - Sibling contact is crucial for maintaining sibling relationships and supports young children's well-being while in care. Efforts must be made to maintain sibling relationships that existed prior to placement.³³
 - Siblings who are separated as a result of placement must have a minimum of two in-person contacts each month, unless an approved exception applies. This requirement also applies to all siblings who remain in the home.³⁴
 - Additional sibling contact is encouraged. Other forms of contact may include telephone contact, or electronic contact through video chat.³⁵

Special Considerations

Families may be faced with circumstances that pose additional challenges to Family Time. These circumstances cannot be fully reviewed in this document. However a few key references and resources are provided below.

- Domestic Violence
 - Research suggests that exposure to violence between their parents has a disproportionately strong impact on children under five.³⁶
 - In families with documented domestic violence, opportunities for the children to have safe contact with the offending parent may help protect their young children from feelings of sadness and loss.³⁷
 - Precautions should be taken to protect the safety of all involved.³⁸
 - Resource:
 - *Social Worker's Practice Guide to Domestic Violence*. Children's Administration, Washington State Department of Social and Health Services February 2010, revised May 2012.
<http://www.dshs.wa.gov/pdf/Publications/22-1314.pdf>

- Incarcerated Parent
 - Unless safety issues preclude contact, studies show that maintaining contact with an incarcerated parent may be an effective way to improve a child's emotional response to parental incarceration, reduce the incidence of problematic behavior and anxiety, and improve outcomes.³⁹
 - When a parent of a dependent child is incarcerated, permanency plans must provide for visitation opportunities, unless visitation is not in the best interest of the child.⁴⁰
 - Resources:
 - Center for Human Services, UC Davis Extension. *Out of the Shadows: What Child Welfare Workers Can Do to Help Children and Their Incarcerated Parents*, 2008.
 - RCW [13.34.180](#)
- Parental Substance Use
 - Family Time should be guided by careful and ongoing assessment of the parent's ability to safely care for and appropriately interact with the child. The Family Time plan may require the parent to meet conditions during visitation, such as refraining from using substances before the visit.⁴¹
 - Increased or reduced visitation should be a direct consequence of reduced or increased danger to the child and not linked to some other measure, such as drug test results.⁴²

¹ The Family Time Guidance Workgroup consisted of representatives from the following agencies and organizations: Administrative Office of the Courts, Attorney General's Office, Office of Public Defense, Children's Administration, King County Superior Court, Parents for Parents, Partners for Our Children, Center for Children & Youth Justice, and an Early Childhood Policy Expert.

² Cohen, Julie and Victoria Youcha. "Zero to Three: Critical Issues for the Juvenile and Family Court." *Juvenile and Family Court Journal* 55(2), 2004, 15-17.

³ National Scientific Council on the Developing Child (2004). *Young Children Develop in an Environment of Relationships: Working Paper No. 1*. Retrieved from www.developingchild.harvard.edu

⁴ National Scientific Council on the Developing Child (2010). *Early Experiences Can Alter Gene Expression and Affect Long-Term Development: Working Paper No. 10*. Retrieved from www.developingchild.harvard.edu.

⁵ American Humane Association, Center for the Study of Social Policy, Child Welfare League of America, Children's Defense Fund, and ZERO TO THREE. *A Call to Action on Behalf of Maltreated Infants and Toddlers*, 2011, p. 5

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- ⁶ Goldsmith, Douglas F., David Oppenheim and Janine Wanlass. "Separation and Reunification: Using Attachment Theory and Research to Inform Decision Affecting the Placements of Children in Foster Care." *Juvenile and Family Court Journal* 55(2), 2004, 1-13.
- ⁷ Goldsmith, Douglas F., David Oppenheim and Janine Wanlass.
- ⁸ Wright, Lois E. *Toolbox No. 1: Using Visitation to Support Permanency*. Washington, D.C.: CWLA Press, 2001, 8-9.
- ⁹ American Academy of Pediatrics Committee on Early Childhood, Adoption and Dependent Care. "Developmental Issues for Young Children in Foster Care." *Pediatrics* 105(5), 2000, 1146.
- ¹⁰ Edited by Charles H. Zeanah, Jr., MD. *Handbook of Infant Mental Health, Third Edition*. Guilford Press, 2009.
- ¹¹ Smargia, Margaret. *Visitation with Infants and Toddlers in Foster Care: What Judges and Attorneys Need to Know*. American Bar Association and ZERO TO THREE, 2007, 5.
- ¹² Jones Harden, Brenda. *Infants in the Child Welfare: A Developmental Framework for Policy and Practice*, Zero To Three, 2007, p. 252.
- ¹³ Edited by Charles H. Zeanah, Jr., MD. *Handbook of Infant Mental Health, Third Edition*. Guilford Press, 2009.
- Hill, Sheri & Solchany, Joanne. "Mental Health Assessments for Infants and Toddlers," *American Bar Association Child Law Practice*, Vol. 24, no.9, 2005, p. 139.
- ¹⁴ Weintraub, A. *Information packet parent-child visiting*. National Resource Center for Family-Centered Practice and Permanency Planning, Hunter College School of Social Work, 2008.
- ¹⁵ *Social Worker Practice Guide – Visits Between Parent(s), Child(ren) and Siblings*, Washington State Children's Administration, August 2008, 5.
- ¹⁶ "Efforts must be made to hold a visit within 72 hours of placement. The initial parent/child visit must occur within 5 days of placement or signing of the VPA, unless there are documented safety concerns." *Washington State Children's Administration Policy and Practice Guide, section 4254 (A)(1)(a)*. Parent, Child and Sibling Visits http://www.dshs.wa.gov/ca/pubs/mnl_pnpg/chapter4.asp
- ¹⁷ *Washington State Children's Administration Policy and Practice Guide, section 4254 (A)(1)(b)*.
- ¹⁸ *Washington State Children's Administration Policy and Practice Guide, section 4254(A)(1)(d)*.
- ¹⁹ RCW 13.34.136 (2)(b)(ii)
- ²⁰ *ZTT Visitation Brief, p. 11, Call to Action, p. 5*
- ²¹ Wright, Lois E., 8-9.
- ²² "Key Principles for Permanency Planning for Children," *NCJFCJ Technical Assistance Brief*, Adopted by the NCJFCJ Board of Trustees – July 23, 2011 <http://www.ncjfcj.org/sites/default/files/Key%20Principles%202011.pdf>
- ²³ *Washington State Children's Administration Policy and Practice Guide, Section 4254, Procedure (A)(5)*.

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- ²⁴ *Washington State Children's Administration Policy and Practice Guide, Section 4254, Procedure (A)(4).*
- ²⁵ *Washington State Children's Administration Policy and Practice Guide, Section 4254, Procedure (A)(2).*
- ²⁶ Jones Harden, Brenda, 253.
- ²⁷ *Social Worker Practice Guide – Visits Between Parent(s), Child(ren) and Siblings*, August 2008, 6. Jones Harden, Brenda, 253. Smargia, Margaret, 13.
- ²⁸ Jones Harden, Brenda, 254.
- ²⁹ Gerring, Charyl E., Kemp, Susan P., Marcenko, Maureen O. "A Relational Approach to Engaging Birth Parents in Visitation," *Child Welfare* 87(6), 2008, 5-30.
- ³⁰ Haight, Wendy L., James E. Black, Sarah Mangelsdorf, Grace Giorgio, Lakshmi Tata, Sarah J. Schoppe, and Margaret Szewczyk. "Making Visits Better: The Perspectives of Parents, Foster Parents, and Child Welfare Workers." *Child Welfare* 81(2), 2002, 173–202.
- ³¹ Smargia, Margaret, 5; Goldsmith, Douglas F., David Oppenheim, and Janine Wanlass. "Separation and Reunification: Using Attachment Theory and Research to Inform Decisions Affecting the Placements of Children in Foster Care." *Juvenile and Family Court Journal* 55(2), 2004, 2.
- ³² Smargia, Margaret, 9.
- ³³ *Washington State Children's Administration Policy and Practice Guide, Section 4254, Policy (B)(1).*
- ³⁴ *Washington State Children's Administration Policy and Practice Guide, Section 4254, Policy (B)(1)(a).*
- ³⁵ *Washington State Children's Administration Policy and Practice Guide, Section 4254, Policy (B)(1)(e).*
- ³⁶ Kitzmann, et al., 2003; Fantuzzo, Brouch, Beriama, & Atkins, 1997
- ³⁷ Van Horn, Patricia & Macalister Groves, Betsy. *Children Exposed to Domestic Violence: Making Trauma-Informed Custody and Visitation Decisions*, 57 *Juvenile and Family Court Journal* 51(2006).
- ³⁸ Edleson, Jeffrey L., et al. *Parenting in the Context of Domestic Violence*, Judicial Council of California, 2003.
- ³⁹ Bearse, Miriam L. *Children and Families of Incarcerated Parents: Understanding the Challenges and Addressing the Needs: A Report to the Children and Families of Incarcerated Parents Advisory Committee*, Washington State Department of Social and Health Services, 2008.
- ⁴⁰ RCW 13.34.180 (2)(b)(i)
- ⁴¹ Smargia, Margaret, 10.
- ⁴² Smargia, Margaret, 21.