



ARIZONA DEPARTMENT of CHILD SAFETY

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Engaging With Children and Youth

Build trust so kids will confide in us and feel safe to ask for what is important to them. You can do this by:

- Allowing the children and youth the opportunity to have some control by giving them choices of where to meet them or what activity to participate in; and
- Individualizing the questions to each child; spending time each visit exploring beyond school, medical, and counseling, getting to know the child's likes and dislikes, hopes, and talents.

Questions you might ask:

- What do you like to do for fun with your friends and family?
- What holidays do you like to celebrate and how?
- Who would you like to spend your free time with?
- Do you have any religious preferences?
- What are your favorite hobbies, clubs, activities, or group sports?
- What activities do you like at school?
- What are your favorite things to do in your free time?
- Are there relationships you'd like to see change?

Assessing for the General Needs of Children

Make a concerted effort to continually assess for all needs of the children as life happens – be proactive rather than reactive whenever possible.

- Consider needs such as social skills and competencies, attachment and caregiver relationships, social relationships and connections, social skills, and self-esteem.
- Take into consideration the developmental stages of the child when assessing the social and emotional needs of children:
 - ▶ Infants/Toddlers (0-2 years): Ask caregivers how the child communicates with them during the day, and how the caregiver responds. Find out what the child's daily routines are and how the child responds when that routine is disrupted. Who are the important people in the child's life.
 - ▶ Preschool (3-5 years): This is the age of fantasy, and children often move in and out of reality during this stage. This is important because it allows the child to explore and deal with a wide range of emotions. Does the child have imaginary friends? Does he/she engage in pretend play? Also, providing simple choices at this age helps children learn to make decisions and provides a sense of importance. The preschool child is also sensitive to others' feelings, enjoys making others happy, and tends to be friendly, talkative, and curious.
 - ▶ School-age (6-12 years): Ask questions of the child and the caregiver that demonstrate the importance of times they felt proud and competent, or when they felt like they were contributing at home or school. Find out when they have felt encouraged, supported, and rewarded. When did they have an opportunity to make real choices and decisions, and how did that make them feel? Request that they share specific examples.
 - ▶ Adolescence (13-18 years): Adolescence is the age of asserting independence. Remember that the importance of relationships is shifting from revolving mainly around family to now include circles of a variety of friends, acquaintances, and other adults. This is also a period where, socially and emotionally, youth fall all over the continuum. Find out from the youth what independence means to them, and ask the caregiver how comfortable they are with setting limits yet still allowing the necessary freedom to develop healthy independence.

Child Welfare Information Gateway. (2013). *Parenting Children or Youth Who Have Experienced Abuse or Neglect*. Washington, DC: U.S. Department of Health and Human Services, Children's Bureau. Retrieved from [here](#). *Adverse Childhood Experiences: Looking at how ACEs affects our lives and society.*

Engaging with caregivers to best meet the social needs of children:

- Encourage caregivers to engage in pretend play with preschool-age children, to offer simple choices to the child several times each day, and to be aware that what seems like chatter to the caregiver is a critical developmental task for preschoolers.
- Encourage the caregiver to provide opportunities for the school-age child to experience situations where they feel capable and responsible; where they have the ability to make their own decisions whenever safe to do so.
- Encourage the caregiver and youth to work together to reach agreement on rules, consequences, and acceptable activities.
- Discuss with the caregiver the importance of children feeling supported and rewarded, and to have meaningful relationships with a variety of people.
- Adolescents have unique needs, such as sex education, independent living tasks, and exposure to appropriate role models. Be sure to make these needs a part of case planning, CFT discussions, and service provision.

- Bullying can be a very real problem for children and youth. Ask if there is anyone they do not get along with at school, in the community, or on social media.
- Through a trauma-informed lens, consider past abuse/neglect history and separation/grief/loss concerns experienced by the child that might provide a greater understanding of the child's need for supportive relationships and positive activities. These relationships and activities serve to connect the child to their family, friends, and community.
- As a team, ask: What already-identified needs are not being met? Why not? Create a plan with the child, family, support network and service providers at the next CFT to ensure these needs are being met whenever possible.
- Periodically revisit any existing court orders that prevent the child from participating in certain activities or having contact with a specific individual. If you feel it is in the child's best interest, advocate for lifting the court order.

Adverse Childhood Experiences (ACEs) can be turned around by providing positive experiences that build resiliency

- Children in out-of-home care have already experienced at least one Adverse Childhood Experience - that of abuse and/or neglect - and possibly others if the reason for being in out of home care was due to a parent who abused substances, if they were witnesses to domestic violence toward a parent, or for the incarceration of a parent. Providing children with more than their basic needs can counteract these experiences and teach resilience.
- Children who experience the following positive relationships and situations are typically more resilient than other children:
 - ▶ Have someone other than a parent available to them for support,
 - ▶ Experience positive interactions and play experiences with a parent,
 - ▶ Have someone available to help them feel better when sad or worried,
 - ▶ Know their family cares about how they are feeling at school,
 - ▶ Can find someone they trust to talk to when they feel bad,
 - ▶ Have people notice they are capable,
 - ▶ Are independent as a child, and
 - ▶ Feel loved.

Focus on the needs of children beyond the basics of medical/dental, educational, and behavioral health.

- Separate the symptoms from underlying needs when looking at behaviors to identify the root causes. A child's behavior may be related to loss/grief/ frustration/anger as opposed to a diagnosable mental health issue.
- Ensure to the greatest extent possible that children in out-of-home care have the opportunity to participate in experiences similar to those of their peers who are not in out-of-home care. Children need typical childhood experiences while in out-of-home care.
- Consider the child's need for transportation; tangible resources, such as clothes or personal items; and financial needs, such as prom clothes or sports equipment that may be provided through Friends of Foster Care. Explore if there is a relative or important person in his or her life that can help to provide support in this way.

Refer to DCS Policy Manual Chapter 4: Section 11, Reasonable and Prudent Parent Standard.

Always work to build and improve family relationships.

- Encourage parents and extended family to remain involved, or become involved, in the child's life through extracurricular activities, social connections, holiday celebrations, and traditions.
- Engaging in family-like activities provides a sense of normalcy for children; extended family, friends, church and community can all help fill the gaps when parents are unable to do so.
- Include all significant people in the child's life at case plan staffings and TDMs as an opportunity to incorporate them into the case plan or safety plan.
- Adults who play a significant role in the child's life can be role models or mentors by providing some of the day to day activities, such as transporting to and from counseling or involving the child in the summer reading program.
- Providing services to families goes beyond services referrals. It includes engaging the family and encouraging them to have a voice in what they need to feel safe, secure, and connected.
- Consider if the parent is safe to attend, schedule and/or transport the child to social activities or events.

For additional information, refer to *Maintaining Parent-Child Relationships through Shared Parenting* and *Preserving a Child's Connections to Family, Tribe, Culture and Community* Practice Guidelines.