



Representing Parents: Substance abuse issues in the child welfare system

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Institute to
**Transform
Child Protection**

Smarter Systems. Stronger Families.

Learning Objectives

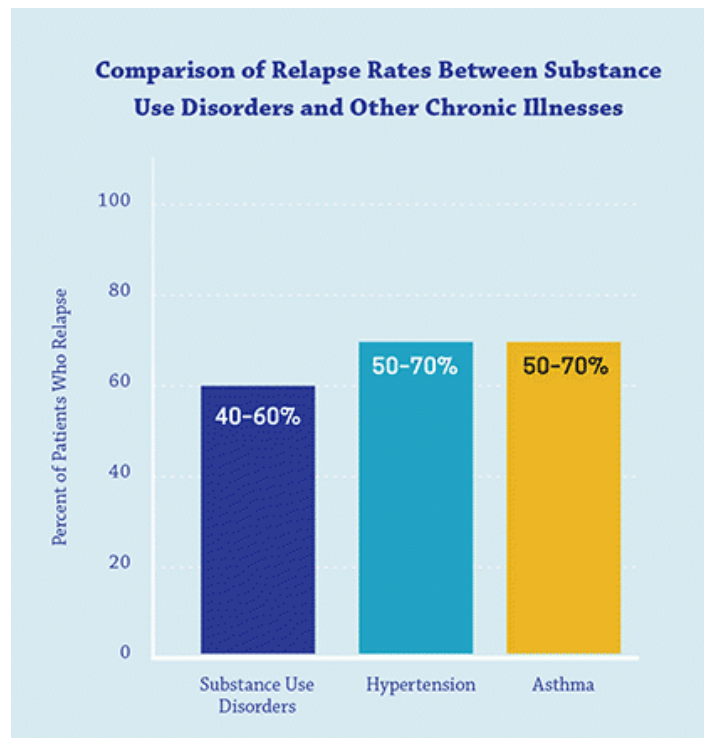
- Understand the science of addiction and recovery and the ways in which this relates to child welfare involvement.
- Learn Minnesota and federal laws and policies relating to in-utero substance use and how to advocate for clients impacted by these policies.
- Become familiar with best practices around substance use and child welfare.

Child Welfare Competency Linkage

- Demonstrates the ability to **identify service/treatment plan requirements** and to construct **behaviorally-based, measurable objectives for successful outcomes** with the family so the family knows when goals are achieved.
- Demonstrates an understanding of **pre-placement preventative services** and **constructs supportive systems for children and families** that may include referral to and collaboration with multiple agencies and disciplines.
- Uses understanding of the dynamics and **effects of trauma to continuously evaluate and adjust intervention strategies** and case plan goals.
- **Re-evaluates progress outcomes** and considers potential contributing factors when goals are not being achieved without sole focus being placed upon youth or family.
- Demonstrates an **understanding of the legal framework** for child welfare practice.

Addiction

- Defining success with substance use
 - Relapse rates for drug addiction are similar to rates for other chronic medical conditions. When a person recovering from an addiction relapses, it indicates that the persona needs to work with a professional to resume treatment, modify it, or try another treatment.



Use in Pregnancy

“It is inappropriate to reflexively move from the possibility to an alleged certainty of defective parenting or danger to the child simply because of evidence of substance use . . . Sanctions against parents under child protective services interventions should be made only when there is ***objective evidence of danger, not simply evidence of substance use***. . . State and local governments should avoid any measures defining alcohol or other drug use during pregnancy as ‘child abuse or maltreatment,’ and should avoid prosecution, jail, or other punitive measures as a substitute for providing effective health care services for these women.”

American Society of Addiction Medicine, Public Policy Statement on Substance Use, Misuse, and Use Disorders During and Following Pregnancy, with an Emphasis on Opioids (2017).

Treatment & Recovery

- Effective treatment recognizes and attends to the multiple needs of the individual– not just their drug use. To be effective, treatment must address the individual’s drug use and any associated medical, psychological, social, vocational, and legal needs.
- Recovery is the goal of treatment AND recovery is more than just abstinence:
 - Building a life of integrity
 - Connection to others
 - Finding, or rediscovering, purpose
 - Improved coping skills and ability
 - Healing from trauma

Advocating for Parents

- Attorney present at emergency removal hearing to advocate for parent and to prevent the removal
- Request placement of parent / infant in family treatment program
 - only four facilities currently available in MN
- Request that parent be allowed to remain with child and have relative / kin move in or move in with relative / kin
- Demand reasonable efforts from first hearing on, including efforts to secure culturally appropriate treatment and placement options for parent / child

What the law says

Constitutional Basis for Parental Rights

Wisconsin v. Yoder, 406 U.S. 205 (1972)

Troxel v. Granville, 530 U.S. 57 (2000)

Take-home points from U.S. Supreme Court cases:

- ✓ Parents have a fundamental liberty interest in directing the upbringing of their children which is protected by the due process clause of the 14th amendment.
- ✓ The state may infringe only for a compelling reason and only insofar as that infringement is necessary to protect the state's interest.

What the law says

Reasonable Efforts

Minn. Stat. 260.012(f): Reasonable efforts are made upon the exercise of due diligence by the responsible social services agency to use culturally appropriate and available services to meet the needs of the child and the child's family. Services may include those provided by the responsible social services agency and other culturally appropriate services available in the community.

In re Welfare of Children of S.W., 727 N.W.2d 144, (Minn. App. 2007)
"Reasonable efforts" at rehabilitation, for purposes of termination of parental rights proceedings, are services that go beyond mere matters of form so as to include real, genuine assistance; the quality and quantity of efforts to rehabilitate and reunify the family impact the reasonableness of those efforts.

What the law says

Reasonable Efforts to prevent removal

Minn. Stat. 260.012 (d)

Reasonable efforts to prevent placement means:

- (1) the agency has made reasonable efforts to prevent the placement of the child in foster care by working with the family to develop and implement a safety plan; or
- (2) given the particular circumstances of the child and family at the time of the child's removal, there are no services or efforts available which could allow the child to safely remain in the home.

What do reasonable efforts look like?

- Removal
 - Is removal necessary for safety or are there mitigating safety measures that can be put into place?
- Placement
 - Possible with parent? With family/kin that includes unlimited visits?
- Referrals
 - Is the entire burden on the clients to respond to a referral?
 - Is there an obligation to locate and engage the parent in the best possible services available?
 - What's available??

Best Practices

Policies and practices that prioritize:

- Attachment
 - Rooming in (research shows best outcomes for babies and mothers); family treatment and recovery; breastfeeding and skin-to-skin when possible; family/kinship care; frequent and meaningful visitation
- Trauma-responsive lens
 - The inherent trauma of removal; transparent and open communication; mutuality; sharing of power and control; awareness of past trauma
- Informed timetables
 - Child welfare timelines vs treatment cycles; acute vs chronic disorders

Policy Reform is Needed

2019 MN Opioid Bill

- Most aggressive in the country
- Includes sharp increase in annual registration fees for pharm manufacturers and drug wholesalers that sell or distribute opioids in Minnesota. The money would go into a fund that would support a wide range of prevention, education, treatment and recovery strategies, including more facilities where women could reside with their children during treatment.

Federal timelines do not match recovery timelines

- Consider legislative changes to allow for more time to work case plans for parents seeking recovery

Change policies relating to newborn removal – prioritize keeping mother and child together and safe versus trauma of separation

Resources

- Drug Policy Alliance, www.drugpolicy.org
- Institute to Transform Child Protection, www.transformchildprotection.org
- National Advocates for Pregnant Women, www.advocatesforpregnantwomen.org
- National Center on Substance Abuse and Child Welfare, www.ncsacw.samhsa.gov
- Sheway, <http://sheway.vcn.bc.ca>
- Substance Abuse and Mental Health Services Administration, www.samhsa.gov

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