XI. SHARED PARENTING

The implementation of shared parenting meetings in child placement cases is one of the Multiple Response System Strategies. The shared parenting framework represents a totality of all the Family-Centered Principles of Partnership.

The purpose of shared parenting is to ensure that the child’s needs of nurturance and safety are met. Shared parenting represents a System of Care value by being an active partnership among important people in the child’s life including birth parents, foster parents and the child’s social worker. The foster parent and social worker partner with the birth parent to help maintain the parent’s connection to their children while continually focusing on the welfare of the child. This connection can preserve and or rebuild their relationship leading to long term good outcomes for children and families.

Shared parenting emphasizes foster parents as being a support to birth families instead of substitute caretakers. By cultivating a nurturing relationship with the family, the foster parents begin to mentor the birth parents in appropriate practices. Because foster parents play this vital role, they must be prepared to care for a child interdependently with others.

Foster parents should have an expectation to participate in shared parenting as this is taught within the Model Approach to Partnerships in Parenting-Group Preparation and Selection (MAPP-GPS) training. The training curriculum is used as a framework to lead parent applicants toward assessing and learning abilities that are necessary for successful foster and/or adoptive parenting.

A. Why Partner

When the safety of a child cannot be ensured with their parents, a foster family is frequently the chosen placement resource for a child. Through the preparation and selection process, foster parents are sometimes initially aligned with the agency. Since the primary role of foster parents is to assure the child’s needs are met, the foster family quickly works toward developing an attachment with the child. The attachment of the foster family to the child may be perceived by the birth parents as a serious threat to their parental relationship with the child.

The child is presented with a dilemma. Attaching to the foster family may be essential to getting his or her needs met. However, this attachment may jeopardize his or her attachment to the birth family. Maintaining the birth family attachment may interfere with the child’s ability to form an attachment with the foster parents, which is essential to nurture and protect the child. The child may give up on the parental attachment, fail to
attach to the foster family or seek to maintain a dual and sometimes secret system of parallel alliances. The child may feel forced to choose between the foster and birth parents. Another element may be the child’s perceived need to align with the county department of social services (DSS) because the DSS represents the power to move children.

The mission of Family Support and Child Welfare is to provide family-centered services to children and families to achieve wellbeing through ensuring self sufficiency, support, safety, and permanence. When the safety of a child is at risk, the DSS can petition the Juvenile Court to intervene. Court intervention may result in adjudicating that the child has been abused, neglected or is dependent and ultimately may provide custody of the child to the DSS. This process may be adversarial in nature between the DSS and the family. The DSS tendency may be to align with the child, seek to restore the flow of nurturance to the child, and limit parental control.

B. Strengths of Practicing Shared Parenting

Shared Parenting provides ways for the child to openly seek and maintain all connections necessary for his or her needs and assure there is some consistency in their life during a tumultuous time. The possibility for this depends on the teamwork of the DSS and foster parents and the strength of their partnership with the child’s birth parents. Partnership is a process that requires time and team building to establish trust.

When children see the adults in their lives working together, they are able to relax and focus on just being a child. Birth parents and foster parents can ease their own anxiety and frustration through communication that prevents many misunderstandings over daily issues. When birth parents feel supported by the foster parents, birth parents may even support the foster parents when they are enforcing consequences of any inappropriate behavior by the child.

When the family recovers and the child returns home, lines of communication sometimes remain open. The foster parents and child can remain connected. The birth parents and child may enjoy continued support or mentoring.

Creating supportive relationships and sharing information with birth parents may:

- Enhance child development, learning and well-being by encouraging the child to return to the child role
- Decrease children’s defiant behavior by reducing the children’s desire/need to demonstrate loyalty to birth family
- Decrease feelings of grief and loss from the separation
- Provide information and insights that enable foster parents to meet children’s needs earlier and in a more effective way, thus helping children adjust more easily and reducing foster parent frustration
- Reduce conflict with birth parents over various issues (e.g., grooming)
• Increase birth parent support for foster parents by reassuring them that their children are being well cared for and that foster parents do not seek to replace them
• Create a positive connection between the foster parents, the child, and the child’s family that will not have to end, even if the placement does

C. Preparation for a Shared Parenting Meeting

Shared parenting can be an intimidating process for both foster and birth parents. Much like Child and Family Team meetings, preparation is the key for shared parenting to succeed. This requires advance planning by social workers so that all parties understand the purpose of the meeting is to discuss the care of the child, not “the case.” The meeting is not to assign blame. It is first and foremost about creating the best possible transition for the child. The social worker should be prepared to discuss how the needs and interests of the child will be recognized during the shared parenting meeting. It is also important to make a plan for if the birth parent may be visiting with the child before or after the meeting.

Before the meeting, the social worker should be aware that they do not impose their own biases about a birth parent’s previous decisions. The social worker should model positive communication about the birth parent to the foster parent and about the foster parent to the birth parent. Brief the foster parents about any birth parent fears or needs and help the foster parents understand these needs.

1. Where and When to Meet

A social worker should facilitate an initial shared parenting meeting as soon as possible but no later than 7 days after a child’s placement out of the home to ensure that the partnership has a strong beginning and is supported by the DSS. Subsequent initial shared parenting meetings should be held within 7 days if the child is moved to another placement. Document if there is a family reason that prevents this meeting from taking place within the initial 7 day period. One example would be that the social worker could not convene a shared parenting meeting because the birth parents could not be located.

The social worker can ask the foster and birth parents where they would like to meet. A meeting site that is a neutral location and allows for privacy is important. Sometimes rooms within a neighborhood recreation center, social center, library, or child’s therapist office are good options instead of the agency office. Take into consideration the work schedules of the foster and birth parents as well as children’s schedules, especially if there is a need for child care while the adults discuss parenting issues.

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2. **Involving Relatives**

Though custody of a child may have been removed from the biological parents, the parents may have had tremendous support from other relatives in raising their child. For example, a grandmother that has been the primary caretaker for the child the past 6 months may have some information that is essential for the care of the child. The biological parents may want the relative provider to be a part of a shared parenting meeting.

Deciding whether to include relatives in shared parenting meetings involves careful consideration of the following:

- Pay close attention to the dynamics between the birth parent and their relative. What is their relationship like and is it healthy toward the development of the partnership between the birth parent and foster parent?
- Consider whether the information the relative would provide is critical to the daily care of the child and whether the information is needed to meet the needs of the child and/or provide support to the biological parents.
- Consider the long term goal of developing a partnership between the foster and birth parents. Would consistently involving the relative in each shared parenting meeting deter from building a partnership between the foster and birth parents or is the relative an excellent mentor and support that would help develop a continued partnership beyond reunification?
- Is the relative able to provide needed information for the care of the child in another way other than being involved in the shared parenting meeting?
- Consider a discussion with the family that may give the relative other opportunities to be a part of the child’s life/planning such as involvement in child and family team meetings.
- Be careful not to alienate the birth parent or relative. Make sure all feel heard.

3. **Involving Absent/Non-Custodial Parents**

Both maternal and paternal parents should be involved in a shared parenting meeting. The social worker is responsible for engaging both maternal and paternal parents in the planning process for the child. A parent that has been referred to as absent or non-custodial may have more information than the DSS may have thought they were able to share in regards to the child’s development. Working to develop an early partnership that includes that absent parent may provide an excellent foundation for them to not only become more involved in their child’s life, but also may be a resource the child can reunify with and or be a long term support.

- Ask the question: How can the DSS obtain the absent parent’s involvement?
- If the birth mother and father have a tenuous relationship, consider facilitating separate meetings between each birth parent with the foster parent.
• If one birth parent is unable to travel a long distance for a meeting, consider facilitating a phone conference call or web meeting in order to begin developing a relationship between the birth and foster parent.

4. Safety

The safety of the participants should always be considered when planning to begin shared parenting meetings. The social worker should be aware if there has been a history of domestic violence between birth parents as well as if a birth parent has any history of violence towards others. It would not be appropriate to facilitate or encourage any shared parenting meetings together if there are any court orders including those imposed by probation and parole that do not allow contact between the birth parents. However, it is possible that separate meetings could take place with the foster parents and each individual birth parent at separate times. Document any safety concerns. Consider what special arrangements can be made to help everyone feel safe and comfortable such as:

• Choose a safe location.
• Create specific ground rules and expectations ahead of time together with all participants that are catered to the specific needs.
• If the meeting cannot be held safely, do not hold the meeting.
• Choose other avenues such as a phone conference call to facilitate the meeting.

5. Confidentiality

It is recognized that foster parents have a need to know medical conditions that a child may have in order to best care for them. Re-disclosure of the information is prohibited without consent of the child, parent or guardian.

Avoid sharing information about the birth parents to the foster parents or about foster parents to the birth parents if it is not information that is pertinent to the child’s care. Inform birth and foster parents of the expectation that information that is shared within a shared parenting meeting remains confidential. Eventually, birth parents and foster parents may come to build a good relationship and choose to share personal information with each other.

Discuss any questions with your supervisor as well as seek out agency policy around specific situations for the sharing of information.


D. The Role of the Social Worker throughout Out of Home Placement Services
Regardless of their assigned duties, all child welfare social workers have a role to play in shared parenting. It is important that the social worker who is involved in the removal of the child begin the conversation with birth and foster parents by sharing the philosophy behind Shared Parenting. Additionally, it is important that licensing social workers continue to discuss shared parenting with foster parents even before they have a placement. These discussions will help reinforce the emphasis placed on shared parenting taught within the MAPP-GPS training for foster parents.

Counties may assign different social workers to facilitate the first shared parenting meeting. Though a social worker facilitates the initial shared parenting meeting as well as may have facilitated additional ones, ideally shared parenting will have eventually evolved into a true partnership relationship. One can not always assign time frames for when continued contacts take place between the birth parents and foster parents when there is a developing partnership relationship between all parties involved. A good preparation and solid foundation building can have lasting results. As the relationship between the foster and birth parents evolves, it is important for the social worker to remain aware of how the relationship is evolving. Document information provided by the birth and foster parents that describes their relationship and level of contact they have been able to maintain outside of any social worker facilitated meetings. Also, utilizing the MRS Case Tracking Form (DSS-5106) can help with tracking the date and time spent conducting shared parenting meetings.

In addition, the social worker’s role includes being available as a resource to assist both the foster and birth parents with any questions or concerns that arise related to the shared parenting partnership and or to the agency’s progress toward permanency for the child. Focusing on the strengths of shared parenting to work toward positive outcomes for the child will occur more naturally as time progresses.

E. The Shared Parenting Meetings

A social worker should facilitate an initial shared parenting meeting as soon as possible but no later than 7 days after a child's placement out of the home to ensure that the partnership has a strong beginning and is supported by the DSS. Subsequent initial shared parenting meetings should be held within 7 days if the child is moved to another placement.

A shared parenting meeting should reestablish that the meeting is about the child and how their needs can be met through a relationship between the birth and foster parents. It is important to validate that birth parents have valuable input on the care of their child.

Establishing basic ground rules, or the family-centered principles, may help provide some structure:

- Everyone desires respect
- Everyone needs to be heard
- Everyone has strengths
• Judgments can wait
• Partners share power
• Partnership is a process

Encourage the foster parents to engage the birth parents about a positive attribute they see in the child. It may be helpful to initially focus on items that might seem simple but can be very important such as asking for a picture of the family to have for the child, discuss the child’s favorite foods, toys, clothes, activities, likes, dislikes etc… They should share information essential to shared parental responsibilities between foster and birth parents including medical information, school progress, sleeping habits, eating habits, response to discipline, and any of the child’s strengths and needs. This information not only helps the foster parent, it helps the birth parent remain connected to the routine of the child’s care.

Encourage the birth and foster parents to talk openly. Social workers may have to assist foster and birth parents in managing conflict by:

• recognizing the fears of all parties;
• focusing on the strengths ;
• looking beyond behaviors to identify needs; and
• developing interventions to meet needs.

Social workers may also have to assist foster and birth parents in understanding cultural or family differences such as:

• cultivating a mutual understanding and appreciation of religious beliefs and practices;
• openly discussing differences in family rituals such as meal times or where they eat;
• appearance preferences like haircuts, earrings, make up etc...; and
• other family experiences.

It is important to convey the benefits of aligning around parenting and discipline practices to ensure consistency for the child. For example, the foster and birth parents might discuss what discipline practices have been effective and can be continued or the foster parent may recommend a practice that has been effective with other youth. The child receives consistent structure during visits, when transitioning from one home to the other, and the foster and birth parents are supported in their combined efforts.

The foster parent can be a wonderful resource for the birth parent as they can model what others might assume parents know how to do such as play with the child, encourage positive responses in their child, or how to care for their physical and medical needs. Determine if there is a court ordered visitation plan that would allow the DSS the opportunity to encourage the foster parent to host sibling visits, allow the birth parent to call the foster home, and to schedule visitation together with the birth parent. Clear boundaries and ground rules for the contact should be discussed and set with input from
the birth family, the foster family, and the DSS. As it is developed, the Visitation and Contact Plan (dss-5242) can be utilized to help with this discussion/plan to:

- address personal and emotional safety issues for the child, birth family, and foster family; and
- discuss ground rules regarding phone calls, visitation, and transportation.

After there is an approved visitation plan that is flexible in allowing the foster parent to convene visits/contacts, at times, it is still good practice for the DSS worker to be involved with observing contact between the birth parent and child. The DSS worker is able to personally provide positive feedback on how their relationship is developing.

If allowable, encourage foster parents to invite birth parents to attend school and medical appointments. If the birth parent is unable to attend an appointment, the foster parent could provide progress reports to the birth parent on how their child is performing in school, home, updates on any medical information, and other activities.

Sharing parental responsibilities can be enjoyable activities such as working on the child’s life book together, exchanging pictures, reading with the child etc... They can also plan a joint fun activity that is specifically catered to the child.

F. Shared Parenting and Child and Family Team Meetings

Though shared parenting meetings and child and family team meetings may feel alike, they serve two separate purposes. The purpose of shared parenting is to ensure that the child’s needs of nurturance and safety are met by partnering between birth parents, foster parents and the child’s social worker. It may begin as a meeting but evolves into a true partnership relationship that becomes a continued experience.

The purpose of the child and family team meeting is to reach an agreement with the child, youth, family, and community supports on how identified child welfare issues will be addressed throughout the life of the case by developing and implementing a family services agreement.

1. Similarities

- Both are family-centered meetings
- Both utilize the 6 family-centered principles of partnership
- Planning is important to the success of both
- Both are initiated early in the case
- Both help meet the needs of the child

2. Differences

- Shared parenting is not about “the case”
Child is usually not present at the first shared parenting meeting
Shared parenting meetings are not on a “set” schedule
Less people attend a shared parenting meeting
Worker may not be present at every shared parenting contact

G. Preparation for Post Permanency

Often times a well developed partnership will lead to continued contact between the foster parents, child, and birth family after reunification has been achieved. The birth parents and child may enjoy continued support or mentoring. The DSS can discuss with the families if they have considered any continued contact. Continued contact may be encouraged to help the child and family with any separation anxiety and feelings of loss as well as it would validate their developed closeness. However, the decision for continued contact is ultimately that of all parties.

Shared parenting does not have to be exclusive for practice within a permanency goal/achievement of reunification. There are elements of shared parenting that can be practiced in the framework of any permanency goal/achievement as a continuum.

1. Adoption

A majority of children that were adopted from the foster care system are adopted from their foster parents. Planning for maintaining connections after the final decree of adoption is important. Adoptions in North Carolina are growing along with knowledge of effective practice. Families and agencies have a broader understanding of the adoption triad; child, adoptive family, and biological family. There is recognition that adoption is a life long process and the process doesn’t end with the final decree of adoption. As the adoptee matures, so does his/her birth family, former foster families and adoptive families. Members of the adoption triad continue to process the adoption and often have many unanswered questions that permeate their lives. It is imperative that agencies and social workers build shared parenting as a critical component to the overall healthy wellbeing of adoptees and their many connections.

When preparing youth for adoption, be mindful of these shared parenting opportunities:

- A youth residing with a prospective adoptive parent may still have connections with former foster parents as well as biological parents. It is beneficial for those former caretakers to share parenting information with the prospective adoptive parent. There are many characteristics about the adoptee that former parents can share. In addition, as the child ages, these former parents can be wonderful resources for additional information as well as potential respite resources.
- Youth who are transitioning from a foster home into a prospective adoptive placement can benefit from shared parenting. Incorporating the foster parent into the transition plan is critical. A prepared foster parent can assist with the youth’s transition into the adoptive placement. The foster parent may be able to assist
with visitation, respite, late night emergency situations, relationships with school personnel, medical providers, etc... These efforts are not meant to replace the adoptive parent but be a support to the adoptive parent. Experienced foster parents can also avoid any triangulation by being mindful of their role while supporting the adoptive family and being an extension of the child’s family.

2. Other Permanency Options

In addition to the achieved goal of adoption, shared parenting also remains important after achieving guardianship, legal custody, or another permanent planned living arrangement of a child. While contact beyond decree of adoption, guardianship, legal custody, or another permanent planned living arrangement may not be mandated, if safe, and healthy connections have been promoted early, they are more than likely to continue and prove to be mutually beneficial. The child and the child’s family will reach out for support as they continue their journey. If they have cultivated supportive relationships with former parents of the child, those individuals can be support systems in the stead of community agencies. Former parents will have a strong investment in the health of the child and his/her family. Shared parenting is not only beneficial to support families during challenging times but also to support children during life successes and major life events. Having a strong extended supportive network of connections only serves to foster the child’s wellbeing.