

Current Foster Family Resource Guide



FOSTERING
FAMILY



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Introduction

Things that matter are hard. This is true of many of life's most difficult situations, and it's especially true for foster care. Whether you're waiting on your first placement or you've been fostering for decades, you're likely learning that there is nothing easy about parenting children who come from hard places.

Despite months of preparation, paperwork, training, and home studies, many families still report feeling unprepared (and often alone) as they welcome children into their homes. In addition to caring for traumatized children, foster parents must navigate a complex and confusing child welfare system. In light of this, we hope to provide ongoing support to you, your family, and your community.

As we begin this journey together, it's important to highlight a few things:

- 1) Fostering Family partners with DFPS and many child placing agencies, but we are not a licensing agency, nor are we qualified to offer legal advice. Your caseworkers, CPA workers, Ad Litem Attorney, CASA workers, etc., should always be your first line of support. We want to provide guidance and connect you to resources, but we are also committed to respecting the appropriate channels of communication.
- 2) Foster families do not thrive in isolation. If it takes a village to raise a child, that's doubly true of foster care. As a foster family, you need a system of support (family members, neighbors, faith community, etc). When you feel overwhelmed, it's important to invite others into the difficulty in order to provide care and support for you and your family (see page 23).
- 3) Every foster child has experienced trauma, and many of their biological families have too. Children need foster parents who know how to bring healing through love, and more often than not, birth parents are equally in need. Your foster child's birth parents ought to be the object of your compassion, not your scorn. Guiding, resourcing, and mentoring birth parents toward restoration and reunification is a critical part of disrupting the foster care cycle, producing a long-term impact in our community.

Our team is available to answer your questions, connect you to resources, and help you to build a healthy support system. This *Resource Guide* is meant to serve as a first step in that process. We don't pretend to have all the answers, but we're happy to walk with you and connect you with others. Please reach out to us at hello@fostering-family.org if you have questions and/or concerns not addressed in this guide. For a list of local resources, visit [fostering-family/resources](https://fostering-family.org/resources).

Frequently Asked Questions

Foster care can be complex and overwhelming. There is a steep learning curve when a child is welcomed into a foster family, and many families have questions. We've provided general answers for the questions we most commonly hear from families. Answers to these questions will vary because every child's story is different.

Please be sure to utilize your case worker or agency worker for specific questions and concerns. If you have a question that is not included in this list, reach out to us at hello@fostering-family.org and we'd be happy to help you find an answer.

What is the legal process for children in foster care?

Having placed a child in foster care, DFPS will continue to assess what is in the best interest of the child. Children may be reunited with their biological families (usually following a "service plan," whereby the biological parents demonstrate the ability to provide safe and nurturing care). Alternatively, an extended family member or close friend may be willing to assume responsibility for the child (this is called kinship care). Otherwise, the child will remain in foster care, becoming adoptable if/when the court terminates biological parental rights. Typically, a child's case from placement to trial (where a path to permanency is determined) will last about 12-15 months, but any number of factors may prolong or abbreviate the process. For more detailed information about the legal process, see page 14.

What is the likelihood that I will be able to adopt the child I am fostering?

The goal for children in foster care is to achieve permanency. Permanency can include several different outcomes, including returning a child to their biological family, placement with relatives or close family friends, or adoption by the foster family. The best outcome for a child is to find a permanent, loving, and stable home.

When reunification with the child's biological family is no longer an option, there may be an opportunity to adopt a child through the foster care system. If you are considering foster care *primarily* as a means of growing your family through adoption, we gently recommend examining your motivations. Children in foster care need loving families who will support them and put their needs first, even if it means reunification with their biological family. In other words, foster families are called upon to assume a degree of unpredictability, and, while adoption is a possible outcome, there is no guarantee that you will be able to adopt a child from the foster care system.

That said, at any given moment, there are [hundreds of children](#) in Houston's foster system who are currently awaiting adoption.

What ongoing support/training is available to foster parents?

Most certified placing agencies (CPAs) provide ongoing support and training for their foster families. In addition, many nonprofits and faith-based communities in Houston are committed to making sure families are well-supported and thriving. There are a growing number of support groups, parents' night outs, resource closets, trauma-informed care training, and other helpful resources. To find a list of local community support resources, please visit fostering-family.org/resources.

What is WIC and how does it work?

WIC is a federal government program that serves to safeguard the health of low-income pregnant, postpartum, and breastfeeding women, infants, and children up to age 5 who are at nutritional risk by providing nutritious foods to supplement diets, information on healthy eating including breastfeeding promotion and support, and referrals to health care. All children currently in foster care qualify for WIC.

Keep in mind the following when setting up WIC:

- The monthly household income disclosed on the WIC form is the *child's income*, which is the daily foster care reimbursement rate x 30 days per month (not the foster parent income).
- WIC is most helpful when purchasing baby formula for infant placements.
- All infants are started on Similac Advance formula unless an alternative order is given by the pediatrician. If your child requires a different formula, be sure to get an order from your pediatrician.
- When the child turns 1 year old, additional food items may be covered by WIC, if needed (these items are brand and size-specific according to WIC guidelines).
- Call ahead to schedule your first WIC appointment and ask what documentation you will need to bring. Also, confirm whether you will need to bring the child to the first appointment.
- At your first appointment, you will receive a debit card with the child's prescription and a pin number. This card can be used for purchasing WIC-approved items.
- Always check to see if the child needs to be present for an appointment.
- Online training is required to be completed periodically. These can be completed online (write down your certificate number and take to your next appointment).

- Most grocery stores accept WIC, but it's important to verify before purchasing.

Find your local WIC office [here](#).

What is NCI and how does it work?

NCI is a state-wide government program that offers financial aid for child care so that the cost doesn't prevent parents from attending work and/or school. This program is available to foster families, regardless of their income, if:

- The child is assessed at a Basic level of care.
- Both foster parents work full-time or a single foster parent works full-time (at least 40 hours/week).
- Child is not in adoptive placement (signed adoptive placement paperwork).

Not all child care facilities accept NCI payment. Click [here](#) for a list of NCI Providers and to apply for financial aid. There have been instances where the child care facility does not officially accept NCI, but they agree to accept the NCI negotiated rate from the State provided the foster parent pays the difference between the NCI rate and normal tuition.

Foster parents are encouraged to apply as soon as a placement is made (if the child will be enrolled as soon as possible) as the approval process can take a few months.

Should I attend court hearings?

Unless discouraged by the child's Attorney Ad Litem, it is recommended that foster parents attend court hearings, most importantly the status and permanency hearings. This allows foster parents to stay updated on the child's case and provides an opportunity to advocate for the child. For more information on Advocating for your Foster Child, see page 9.

What should I expect at family visitation?

Visitation with biological family members usually occurs at a DFPS office during normal business hours. Typically, the foster parent drops off the child and then returns for pick up. Visitations should be scheduled in advance on a regular basis. If biological family members are frequently absent, you may request that DFPS take additional measures to avoid disrupting the child's schedule or expectations. This might require family members to confirm the visit 24 hours in advance.

You may come into contact with biological family members before, after, or during visitation. See the below FAQ “How much should I interact with biological parents?” for more information. If your caseworker deems it inappropriate for you to come into contact with the biological family at visitation, arrangements can be made in advance. For example, you may park in a designated spot, call the caseworker upon arrival, and the caseworker can get the child from your car.

Caseworkers may also utilize contracted visitation supervisors to help children visit with their families in a more normalized setting (park, McDonalds, etc).

It is common for the child to feel out of sorts after visitation. They are going between two caregivers, and this brings up lots of complex feelings. Many of these feelings may be difficult for the child to understand. Lower your expectations for those days and practice empathy and patience.

How much should I interact with biological parents?

Unless discouraged by your Caseworker or Attorney Ad Litem, we believe it's important to respectfully engage biological families as the situation allows. In the child welfare system, support for biological families is often overlooked, but it can be a great way to care for the child in your home. You can show support by sending photos or cards from the child to his/her biological parents (via your caseworker), or by dressing the child for visits in clothes given by parents, etc. You may also pack the child's favorite toys, favorite foods, hair brushes, nail clippers, or other items that may help a child to bond during visits. Knowing that someone cares can be very meaningful to a mother or father who is trying to get back on their feet.

Every case is different, and engagement with biological families is not always possible. When it is possible, interactions should always happen under the guidance of your caseworker. Safety should always be emphasized. For more information on Advocating for Biological Families, see page 13.

How do I introduce my foster child to others?

When a child is welcomed into the family, many parents are unsure how to introduce them to family and friends. If the child is old enough to engage in discussion, ask the child how he/she would like to be introduced. If the child is not old enough to discuss, a safe option is to introduce the child by their first name. Family members and friends may already know the journey you're on. Strangers don't need to be filled in on all the details.

How do I handle nosy questions from strangers or family members about my foster child's history?

As foster parents, our job is to protect the children in our care, and that includes their history. It is the child's story to share when he/she chooses. Young children typically don't yet understand the complex reasons why they entered into foster care, but you do not need to speak for them. People unrelated to the legal case do not need to know the child's history before he/she does. When questions from outsiders are asked, be prepared with a one liner that is respectful, but sets a privacy boundary out of concern for the child. For example, "It's a complicated story, but it's her story to share when she's ready."

How do I prepare my biological children for the possibility of fostering a child we won't be able to adopt?

There is always the potential for loss when fostering. It's important for parents to help their children understand what foster care is – providing a safe and loving home for a child as long as it is needed. Usually it is temporary; sometimes it is forever.

It is helpful to set expectations for biological children by helping them to understand (in an age appropriate way) that the child could stay for a short time or a long time, but either way you get to show them love and care while the child is in your home. Avoid using terms like "brother" or "sister" until permanency has been firmly established.

It's understandable to have concerns about the effects of foster care on your biological children. There will likely be disruptions to daily life, diverted attention, added stress, and possibly grief from saying goodbye. But there will also be life lessons that can't be forgotten. They learn empathy and how to sacrificially love others, even from an early age. Regardless of the outcome, many siblings take great pride in getting to play a role in welcoming a child and helping a family to heal.

Should it really be this hard?

In short, yes. Trauma that happens in relationship must be healed in relationship. And this is hard work. Progress often feels like two steps forward and one step back. As a foster parent you play an important role, but it often takes a team of professionals to meet the needs of a child who has come from a hard place. Lean into your community, and do not be afraid to seek professional help from your agency, health care providers, and therapists. For more information, see Trauma-Informed Parenting on page 22.

Advocating for Your Foster Child

As a foster parent, you have a right and a responsibility to advocate on behalf of the child in your care. This means you are responsible not only for the child's daily care, but also for communicating valuable information about the child's needs and advocating for their best interest.

Foster parents are not parties to the child's legal case, but they do have an opportunity to play a very important role. Your involvement is crucial not only for the sake of the child, but often for the child's entire family as well.

General Tips:

- Keep everyone informed!
 - Communication is key, and when dealing with multiple entities, it's easy for miscommunication to happen. Rather than relying on your caseworker to disseminate information, we recommend that foster parents provide written monthly updates to all necessary parties. This includes DFPS caseworker (and Supervisor, if required), CPA case worker, Attorney Ad Litem, CASA worker).
 - We have provided a comprehensive communication template (see Appendix B) that can be used to provide monthly updates. We recommend completing monthly and sending via group email to all parties.
- It is entirely possible to advocate for your child while also showing respect to those involved in the case. Working as a team typically gives everyone the best chance at helping the child to move forward successfully.
- Listen and learn. The child welfare system is complex and there is always more that we can learn. Educate yourself by utilizing resources listed on page 18.
- Prioritize knowing your child and his/her needs. Make it a point to schedule phone calls and visits with educators, pediatricians, specialists, and therapists who are involved in your child's life. Be sure to communicate these updates with parties listed above.
- Turn in paperwork in a timely manner (reports, doctor/dentist visits, evaluations, etc).

Advocating in Court Hearings

- Find out which court number your case is assigned to- your DFPS caseworker or Attorney Ad Litem should give you this information (visit fostering-family.org/resources for a list of all DFPS courts).
- Ask your DFPS caseworker to put you on the mailing list to be notified of all court hearings and permanency conferences. Reconfirm the next hearing date with your caseworker (they may be rescheduled for various reasons).
- Attend every court hearing. As the child's primary caretaker, you are a key source of information. The judge should always acknowledge your presence. You may be asked to provide information about the child's well-being.
- You may approach the judge with others when the child's case is called (you may want to discuss this with your caseworker before the hearing due to sensitivity at times with biological family members). Listen to the judge's ruling, orders, and deadlines. Bring a notepad to jot down any notes.
- Never state your name in court. Instead, use "foster parent" if asked to identify yourself.
- Dress in business casual, and silence your cell phones!
- Do not bring children.
- After the hearing, discuss the next steps with your child's Ad Litem Attorney.

Working with your Child's Attorney Ad Litem

- The Attorney Ad Litem represents the best interest of the child. He/She is appointed by the judge in the court in which the child's case has been assigned.
- Find out who your child's Attorney Ad Litem is by asking your DFPS caseworker, agency caseworker, or by consulting the placement documents. The attorney may also reach out to you to schedule home visits.
- It is especially important that you keep the Attorney Ad Litem informed, especially if your foster child cannot speak for him/herself.

- The Attorney Ad Litem should visit your home regularly. The Ad Litem is not required to visit with children under 4, but many of them do. They may visit at any place or at any time (at a visitation, at school, etc). Feel free to reach out to them with any concerns or questions at any time.
- During home visits, be prepared to give an update on your foster child's current well-being – including their physical, behavioral, emotional needs – and any concerns you may have.

Working with your Caseworkers

- Write down the names and email addresses of your caseworker and their supervisor.
- Questions come up often! If it's not an urgent need, keep a list of questions to discuss at their next visit. If it is urgent, don't hesitate to reach out.
- To keep yourself informed on your child's case, these may be helpful questions to ask:
 - What should I expect at the next court hearing? Will there be a change in the placement recommendation or permanency goal?
 - How are the child's biological parents doing with their service plans?
 - Are there any relatives that have come forward requesting placement?
- If your caseworker is not meeting with you at your home every month, you may need to be proactive in getting it scheduled.
- Document all significant events, phone conversations, or interactions with a follow-up email to your caseworker, including what was discussed and any further follow-up needed.
- Keep in mind that caseworkers are very busy and have a difficult job. As much as possible, be patient with response times and perhaps consider a way you can encourage them!

Medical/Behavioral Advocacy

- Schedule medical and behavioral visits promptly and follow-up as prescribed.
- Communicate any new treatments, surgeries, medication changes, etc, in your monthly updates.

- Document information (or ask for documentation) regarding diagnoses, medications, therapies, etc.
- Medical jargon can be really confusing. Don't be afraid to ask questions if you don't understand!

Educational Advocacy

- Communicate with your child's teacher, administrator, and/or counselor consistently to stay informed about his/her educational needs.
- Every school district in Texas has a "foster care liaison." Their experience and expertise varies across districts, but they have a responsibility to help children in foster care and their caregivers navigate the educational system. Visit fostering-family.org/resources for a list of foster care liaisons in Harris County.
- Educational, behavioral, and physical needs are often linked. If your child is struggling with school, be sure to communicate their educational needs to his/her pediatrician and/or therapist, psychologist, or psychiatrist (i.e. are they struggling because they need glasses? Are they processing ongoing trauma?). Success in these areas often requires a team approach.

Advocating for Biological Parents

General Tips

- Children don't usually enter the foster system because their parents don't love them. Most biological parents are struggling to make ends meet and need help to continue caring for themselves and their children.
- Commit to always speaking well of biological parents in front of their children.
- Recognize that parents may be feeling threatened and ashamed. Continuing to show them grace allows them to begin to trust you.

During family visits

- Take printed pictures or homemade cards/crafts that the child made that parent can take home.
- Share a light-hearted story about the child or recent achievement with the parent (i.e. something he/she said, learned a new word, etc).
- For infants, send a bottle so the parent can feed the child during the visit.
- Respectfully ask the parent for guidance on things like bedtime or feeding ("What are his/her favorite foods?" or "How does he/she like to go to bed?"). This helps parents feel like they are still involved.
- Always be kind and respectful.
- "We are for you." These words can be very powerful for a parent who may have little hope or few people in their corner.
- Keep a journal of milestones and activities that biological parents can read during the visit. Encourage the parent to write their own letters to the child that they can bring also.

Building the Relationship

- With the guidance of your Caseworker and Attorney Ad Litem, you may be able to continue to build a supportive relationship with a biological parent.
- It is still important to continue setting appropriate boundaries (may set up an anonymous email address or prepaid phone number for correspondence). Use your first name only. It is never appropriate to share your address. Any letters should go through your caseworker.
- Agree together on set times that you will connect, and keep caseworkers updated on all correspondence.
- Celebrate the parent's progress in completing their service plan.
- Sometimes, even after reunification, biological parents will continue to include their child's former foster parents in the child's life. If a child's case is headed toward reunification, offer to continue to be a resource for the family. This helps to ensure continued stability and success for the parent and the child.

Navigating the Legal System

The legal system pertaining to child welfare cases is complex, and there are many key players. Understanding the timeline and people involved in a child's case is beneficial for helping foster parents advocate for the child in their care.

It is important to note that every child's story is different, and every legal case is different. The information provided below is intended to provide a general overview of legal cases within the Region 6 child welfare system. For more specific information, consult with your child's Attorney Ad Litem or your Caseworkers.

Key Terms:

- **Removal Hearing:** Emergency hearing wherein DFPS requests a court order to remove a child from parental custody; in certain circumstances may be conducted as a non-emergency removal hearing.
- **Show Cause (Adversary) Hearing:** Hearing wherein DFPS must prove necessity for removal of and continued conservatorship (custody) of a child; if standards are met, DFPS may be named temporary managing conservator (TMC) and additional orders may be issued (i.e. visitation, service plans, appointments of representatives, etc); occurs 14 days after removal hearing.
- **Status Hearing:** Hearing held to discuss the contents and execution of the family's service plan filed with the court; occurs within 60 days of DFPS being named TMC.
- **Permanency Hearing:** Hearing to discuss and review reasons child is in conservatorship, where child is placed, whether parents are able to provide safe care to the child, updates to child's medical care, other determinations regarding care, custody of the child; occurs within 180 days of DFPS being named TMC. Subsequent permanency hearings must be held no later than 120 days after initial permanency hearing, but usually occur more frequently.
- **Final Order:** An order issued by the court, either during a contested trial on the merits or a mediated settlement, that specifies the party's new legal relationship.
- **Temporary Managing Conservatorship (TMC):** When temporary custody of a child is given to a party that is not the child's biological parent (most often given to DFPS in child welfare cases).

- Permanent Managing Conservatorship (PMC): Permanent custody and legal responsibility for a child, but not adoption; may be given to someone other than a biological parent, including DFPS, a relative, close family friend, or a foster parent.
- Termination of Parental Rights (TRP): Outcome in a DFPS care where a parent and child no longer have a legal relationship. TRP is a prerequisite to adoption or other permanency outcomes for a child; may be voluntary or involuntary; typically occurs for both parents, but may also occur for only one.
- Family Reunification: Occurs when a child is returned to one or both parents and DFPS is dismissed as the child's conservator; may include monitored return before reunification.

Who is involved in the legal case?

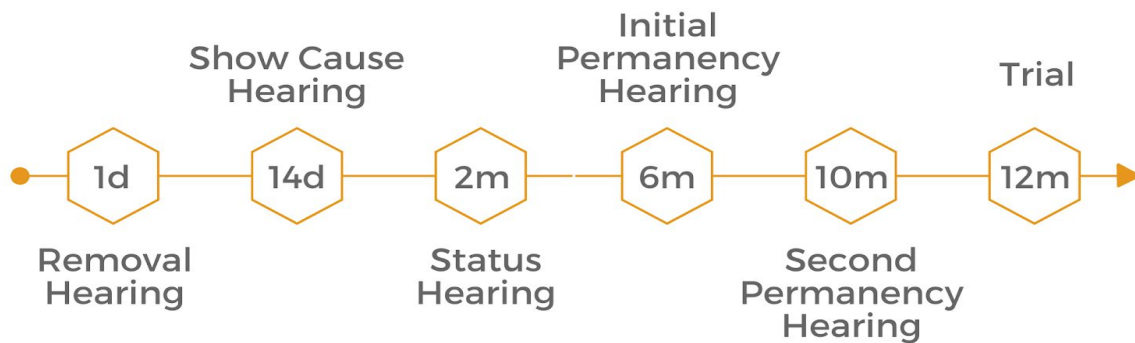
- Judge: Elected official who presides over the courtroom and makes final decisions on the case (e.g., monitoring by child protective services, services plans for parents, permanency decisions, final orders, etc)
- Associate Judge: Appointed by the presiding judge, and is able to make rulings on cases and generally handle cases in the same manner as presiding judges.
- Attorney for DFPS: Legal representative for the Department of Family and Protective Services. May be a regional attorney employed by DFPS or the prosecuting attorney (District or County) in a particular jurisdiction. This representative brings charges of abuse/neglect before the court, provides evidence for the need for removal, and gives recommendations to the court for a permanency plan.
- Parents' Attorney: Legal representatives, typically court-appointed, for each of the child's parents. May also be hired by a parent. An attorney will be appointed for each parent, even if a parent is not involved in the case or has not yet been identified.
- Attorney Ad Litem (AAL): Legal representative for the child's best interest; may also serve as the child's Guardian Ad Litem.
- Guardian Ad Litem (GAL): May be a legal representative or a layperson who serves the same purpose as the Attorney Ad Litem, and also acts as an advocate for the child's best interests.

- Court Appointed Special Advocate (CASA): A trained volunteer appointed by the court in some (but not all) child welfare cases. This volunteer will report how the child is doing and give recommendations to the court regarding what is in the child's best interest. May also serve as a Guardian Ad Litem (see above).
- DFPS Caseworker: Employee of the Department of Family and Protective Services who may be investigating the reports of abuse/neglect or providing updated information about the case as a witness in a hearing. The caseworker is typically the most consistent point of contact for a child and/or foster family for information regarding a child's care.
- Child Placing Agency (CPA) Caseworker: Employee of a child placing agency contracted by the State who provides support, training, and oversight to ensure a foster family is in compliance with Minimum Standards. CPA caseworkers may also be called as a witness to provide additional information during a hearing.
- Court Administrator/Clerk: Handle administrative matters for judges and help schedule hearings for attorneys, among other duties.
- Bailiff: Law enforcement officer who ensure the safety in the courtroom
- Court reporter: Employee of the court who transcribes word-for-word information during hearing or trial.

What is the general timeline for a child's legal case?

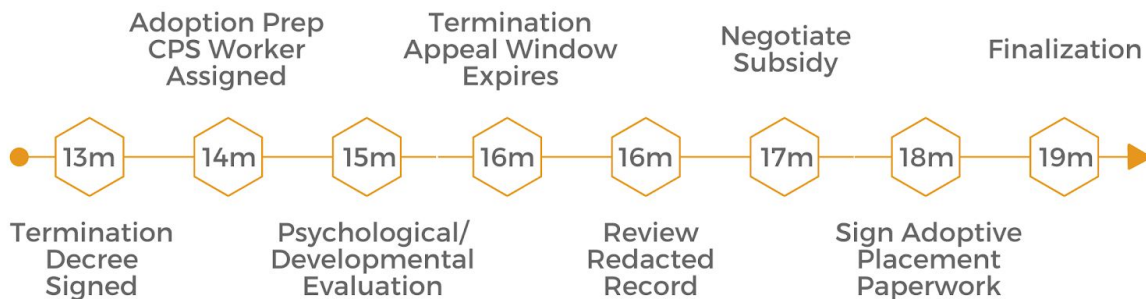
This is an example of a timeline for an emergency placement that ends at trial. A trial results in a Final Order which may include the following potential outcomes:

- Return of a child to a parent
- Managing conservatorship granted to a relative or other person
- Permanent managing conservatorship (PMC) granted to DFPS *without* termination of the parent-child relationship
- Permanent managing conservatorship (PMC) granted to DFPS *with* termination of the parent-child relationship



If termination of the parent-child relationship occurs at trial and DFPS is given permanent managing conservatorship (PMC), the court must hold a Permanency Hearing 90 days after the final order and every 6 months thereafter to review the child's placement, permanency plan, and progress.

This is an example of a timeline in which trial resulted in termination of parent-child relationship and appointment of Permanent Managing Conservator to DFPS until adoption consummation by a foster parent.



Again, each case will vary in complexity and duration. Situations that may increase complexity and duration include but are not limited to Review and Selections (RAS), service plan extensions, appeals, relatives asking for placement later in the timeline, and DFPS understaffing.

Source: www.dfps.state.tx.us/handbooks/CPS/Files/CPS_pg_5400.asp

Resources:

- Understanding Texas' Child Protection Services System (TexProtects)
www.texprotects.org/media/uploads/texas'_cps_system_%26_flowchart.pdf
- Child Protective Services Handbook (DFPS):
www.dfps.state.tx.us/handbooks/CPS/default.asp
- Common Child Protective Services Acronyms:
benchbook.texaschildrenscommission.gov/pdf/Bench%20Book%202016%20Common%20Acronyms%20and%20Abbreviations.pdf
- Placement Process Resource Guide (DFPS):
www.dfps.state.tx.us/handbooks/CPS/Resource_Guides/Placement_Process_Resource_Guide.pdf
- What you should know about your Child Abuse, Neglect, or CPS Case (Texas Young Lawyers Association)
[www.texasbar.com/AM/Template.cfm?Section=Free_Legal_Information2&Template=/CM/ContentDisplay.cfm&ContentID=36108#:~:text=The%20attorney%20ad%20item%20will%20act%20as%20an%20advocate%20for,\(GAL\)%20for%20the%20child.](http://www.texasbar.com/AM/Template.cfm?Section=Free_Legal_Information2&Template=/CM/ContentDisplay.cfm&ContentID=36108#:~:text=The%20attorney%20ad%20item%20will%20act%20as%20an%20advocate%20for,(GAL)%20for%20the%20child.)
- Foster Care Advocacy Center: www.fcactexas.org

Meeting the Medical Needs of Children in Foster Care

Children in foster care are more likely to have medical needs as a result of the abuse, neglect, and/or trauma they have experienced. These needs may include physical injuries, developmental delays, undiagnosed or untreated illnesses, etc. Physical, emotional, and behavioral struggles associated are often associated with the trauma that occurs from being removed from biological parents. Each subsequent placement further exacerbates these struggles.

Additionally, children almost always change medical providers and insurance carriers when they enter foster care. This often leads to difficulty accessing a child's previous medical records, miscommunication between providers, lack of awareness of a child's medical needs, and disruptions in medical care.

One of the best ways to begin advocating for the child in your home is to begin communicating with your pediatrician. Let them know about the child's history, circumstances, and any concerns you have. Make sure they are able to access prior medical records. For infants and small children ask about their developmental progress and get referrals as needed.

There are many great pediatricians in the Houston area, but not nearly enough who are accessible and well-informed to the needs of children in foster care. Because of their experience in caring for children who are impacted by the foster care system and their access to a vast network of specialists, we recommend considering the following institutions at least for the child's initial evaluation. These providers can complete an initial assessment, facilitate necessary referrals, assist with medical records, and, when necessary, connect you to a primary care physician in your area.



The HCPS Integrated Healthcare Clinic was established to make accessing healthcare easier for children and youth in the care of DFPS. The clinic offers medical, dental, and mental health care in one location, alleviating the need for caregivers to find each service individually. The clinic also offers assistance to families in navigating the DFPS system. For more information visit:

hcps.harriscountytexas.gov/clinic



The Foster Care Clinic at Texas Children's Hospital is dedicated to providing care for children in foster care as well as those in at-risk social situations. Services include medical evaluations, support and education, case management and care coordination, mental health screens, and coordination of trauma informed care. For more information, visit:

www.texaschildrens.org/departments/public-health-pediatrics/services



The CARE Clinic provides initial assessments as well as ongoing comprehensive medical care to child victims of abuse and neglect, as well as complete care for children living in foster care. For more information, visit:

med.uth.edu/pediatrics/child-protection-pediatrics/clinical-services/care-clinic/

For more information, including local pediatricians and specialists who serve children in the foster care system, please visit fostering-family.org/resources.

Saying Goodbye

Foster care is intended to be temporary. But even when it ends with adoption, grief is still a part of this journey. By the time a child enters foster care, their grief journey has already started. It's important that you take steps to process your grief as you help the child in your home to process theirs.

Grieving after reunification

Whether a child has been in your home for a weekend or a few years, it's normal to feel the weight of grief when a child returns to their family or moves to another home. Even when you know it's best for them, it's common to have feelings of sadness as your family processes this loss and transitions into a new season. During this time, it may be helpful to:

- Journal your thoughts and feelings
- Share with a close friend or family member
- Schedule an appointment with a grief counselor or therapist
- Take time to work through your grief before accepting a new placement
- Join a Foster Care Support Group
- For siblings: Listen to your children, talk to them about the child that left, share favorite memories, take time to establish new rhythms at home, and/or pray together for the child and his/her family.

Helping your foster child to grieve

Children learn how to grieve from adults in their life. For many children, foster parents might be the first adults who have modeled healthy expressions of emotion and given them space to grieve and heal. As children in your home process their grief, it may be helpful to:

- Remember: a child's grief can look like a lot of different emotions (anger, sadness, anxiety, etc). Look for the need beneath the behavior. Give space for the child to express their feelings without judgement or shame.
- Create opportunities for PLAY. Many children process their feelings through playful engagement.
- Find a play therapist or trauma-informed practitioner to help you and your child navigate feelings of grief and loss (visit fostering-family.org/resources).

Resources: Giving Your Child Permission to Process Feelings (KPICD):
<https://www.youtube.com/watch?v=CL0fS0BCQI8>

Trauma-Informed Parenting

Foster parents receive varying amounts of trauma-informed training during their licensing process. But when a child is placed in their home, many parents find themselves struggling to connect with their children and to help them to regulate their emotions and behavior.

We've listed a few helpful reminders, but we highly recommend utilizing the resources at the bottom of this page to dig deeper and get additional training. If training cost is a barrier, please reach out and we will find ways to help you get the training you need!

- Trauma-informed parenting is investment parenting. It's got a high upfront cost (sacrifices time, control, and our inherited parenting strategies), but it has long-lasting benefits. It will help to build a strong connection with your child so you can conquer the world together.
- The basis of trauma-informed parenting, regardless of the framework you use, is building connection and trust. When in doubt, find ways to connect. Get on the same level, offer gentle touch, and remind them that you aren't going anywhere.
- Play, play, play! According to Dr. Karyn Purvis, "Scientists have determined that it takes approximately 400 repetitions to create a new synapse in the brain- unless it is done with PLAY, in which case it takes between 10-20 repetitions."
- You won't get it right every time. You will lose your temper and break connection. Remember that healing happens when we admit our mistakes, identify our emotions, and ask our children for forgiveness. Our kids get another opportunity to build connection, and they also get to see healthy emotion and repair modeled for them.

Resources:

One Big Happy Home (Ryan and Kayla North):

<https://www.onebighappyhome.com/>

<https://www.onebighappyhome.com/build-creating-a-foundation-of-connection/>

Trust-Based Relational Intervention (TBRI):

<https://child.tcu.edu/about-us/tbri/#sthash.9a2NN4pM.dpbs>

<https://www.youtube.com/c/KarynPurvisInstituteofChildDevelopment/videos>

Trauma-Free World (formerly Trauma Competent Caregiver):

<https://traumafreeworld.org/the-hub/>

Show Hope: Cindy Lee Nugget Videos:

<https://www.youtube.com/playlist?list=PLJGso3kWgO7leFR6wK769hg6jO4QeEJ5t>

For a list of recommended therapists and counseling centers, visit our resource page at fostering-family.org/resources.

It Takes a Village

We encourage all foster/adoptive families to reach out to their immediate community for support. If you do not have a community, please consider joining one. We'd be happy to help you get connected!

Why is this so important? First and foremost, foster/adoptive families do not thrive in isolation. You will need some sort of support system. And by inviting others into your journey, you give them opportunities to serve you and your family. Incidentally, this is a great way to serve children all over the city, because the members of your support system are the foster families of tomorrow. So by being honest about the support you need from others, you also help the city of Houston to recruit additional foster and adoptive families.

The best places to begin building your support system are (1) your biological family members, (2) your faith community, or (3) your neighborhood. Not only do you get the support you need, but sharing the load fosters community and makes our city a better place to live. To that end, Fostering Family is committed to helping your faith community to be your greatest advocate and support network. Email us at hello@fosteringfamily.org if you would like to connect us with your faith community. We would be happy to provide resources and tools for serving and supporting current and future foster/adoptive families.

For a list of local community resources including support groups, parent night out events, closets for tangible needs, etc, visit fostering-family.org/resources.

The Babysitting Collaborative

Becoming a certified foster care babysitter can be time-consuming, confusing, inconvenient, and expensive. Different agencies have different requirements, including background checks, fingerprinting, and CPR/First Aid certification. As a result, most foster families operate on a very short supply of certified babysitters. This is a key indicator that foster families are isolated and under-supported.

When foster families are isolated, communities miss out on the privilege of loving and serving vulnerable children. When foster families are well-supported, communities are exposed to the need and more likely to foster themselves.

Fostering Family has created a streamlined, multi-agency babysitter certification course for foster care babysitters. This one-day training course allows babysitters to complete most of the training and documentation necessary to serve and support foster children and families in their communities.

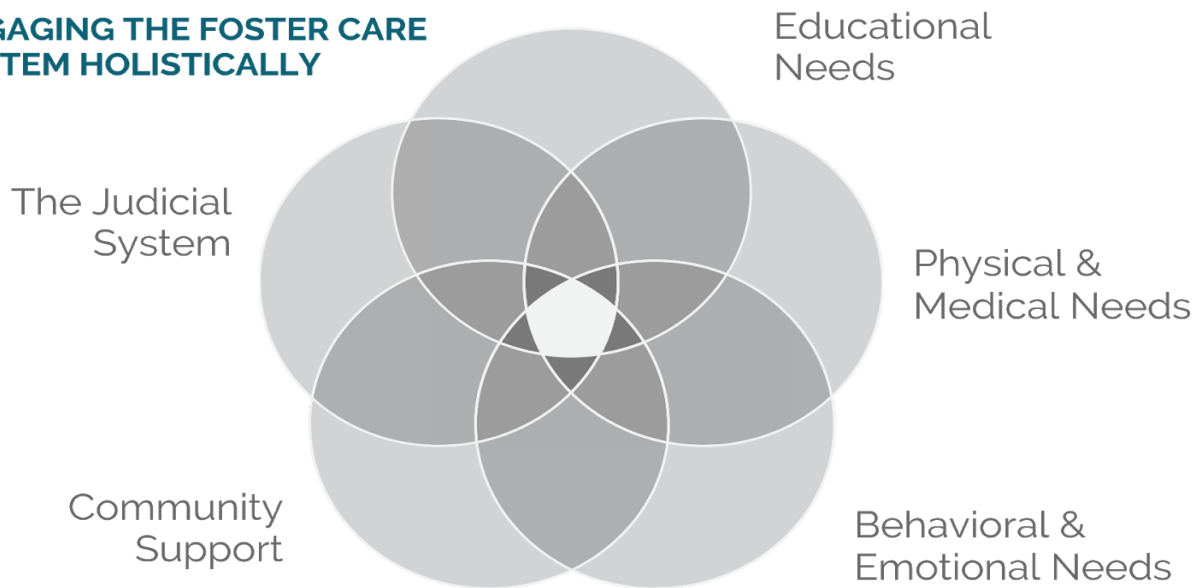
As you continue on in your journey toward becoming a licensed foster family, it's important to gather your team of support. Sending those you trust to become certified babysitters allows you to take time for rest, attend required training, and have options for childcare in case of an emergency.

For upcoming training dates and locations, a list of participating agencies, answers to frequently asked questions, or other details regarding our Babysitter Certification Trainings, please visit fostering-family.org/babysitting-collaborative.

Recommended Resources

Houston has a variety of resources for children and families involved in the foster care system, but unfortunately, many struggle to access these resources. As a community, we can work together to make sure our neighbors are getting the help they need. In doing so, we believe Houston can become a city where children can thrive and families can heal.

ENGAGING THE FOSTER CARE SYSTEM HOLISTICALLY



For a list of local resources, visit fostering-family.org/resources.

Books

- [*The Connected Child*](#) by Karyn Purvis, Ph.D
- [*The Connected Parent*](#) by Karyn Purvis, Ph.D & Lisa Qualls
- [*The Whole Brain Child*](#) by Daniel J. Siegel, M.D. and Tina Payne Bryson, Ph.D
- [*Integrative Parenting: Strategies for Raising Children Affected by Attachment Trauma*](#) by Debra Wesselmann, Cathy Schweitzer, & Stefanie Armstrong
- [*The Body Keeps the Score*](#) by Bessel van der Kolk, M.D.
- [*Parenting From the Inside Out*](#) by Daniel J. Siegel, M.D. & Mary Hartzell, M.Ed.
- [*Twenty Things Adopted Kids Wish Their Adoptive Parents Knew*](#) by Sherrie Eldridge
- [*Dear Birthmother*](#) by Kathleen Silber
- [*In Their Own Voices*](#) by Rita J. Simon and Rhonda M Roorda
- [*Black Baby White Hands: A View From The Crib*](#) by Jaiya John

Additional Websites/Online Resources

- [Empowered to Connect](#)
- [Jason Johnson Blog](#)
- [Christian Alliance for Orphans- Resources](#)
- [Foster the Family Blog](#)

Podcasts

- [One Big Happy Home: The Empowered Parent Podcast](#)
- [CAFO: Foster Movement Podcast](#)
- [CAFO: More Than Enough Podcast](#)
- [The Honestly Adoption Podcast](#)
- [Creating a Family: Talk about Infertility, Adoption, & Foster Care](#)
- [The Real Mom Podcast by Foster the Family](#)
- [Archibald Project Podcast](#)
- [The Forgotten Podcast](#)

Appendix A: Foster Family Profile

Foster/kinship families do not thrive in isolation; they need friends and relatives who are willing to walk alongside them through the joys and sorrows and daily uncertainties. This worksheet is designed to (1) help foster families voice their needs and (2) help communities discover how best to serve and support. Feel free to utilize this resource however works best for you and your community.

[Click to Download](#)

Or visit fostering-family.org/intervention

Appendix B: Comprehensive Communication Template

One of the most effective ways to advocate for the child(ren) in your home is to keep everyone informed. This Communication Template is a guide for providing monthly updates to all parties involved (DFPS caseworker, CPA worker, Attorney Ad Litem, and CASA worker). We recommend you copy/paste the following into a monthly email addressed to all parties listed above. Unless approved by your agency, this should not replace the documentation you currently provide to your caseworker.

[Click to Download](#)

Or visit:

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