Supporting quality contact visits for children in out-of-home care

Issue 10 of the ICPS Research to Practice series discusses the ways in which children in out-of-home care, parents and foster carers can be supported to participate in contact visits. This issue is based on a literature review on supervised contact between children in out-of-home care and their parents, and draws upon the broader ICPS study; kContact: Keeping Contact between Parents and Children in Care. More information on the literature review and the kContact project is provided at the end of the issue.
Section 1

Reasons for contact between children in care and their parents

A number of reviews have discussed the basis of and reasons for contact between children in care and their parents (see Bullen et al., 2015 for overview of this discussion). One of the major reasons for facilitating contact is to support, maintain and enhance the relationship between children in OOHC and their parents. When contact is well supported and managed, it supports children’s emotional and psychological wellbeing, and their developmental needs (Scott, O’Neil & Minge, 2005; Taplin, 2005). Other reasons for contact may include:

- To maintain links and a sense of identity: for children in long-term care who are unlikely to return to their families, contact can maintain a child’s connections with family;
- To prevent idealisation of the parents; and,
- To assess and support reunification.

Section 2

Supporting children, parents and foster carers involved in contact

In order for contact visits to be a more positive experience for children and parents, each of the people involved in a child’s placement may require individual support – the child, the parents, and the foster / kinship carers. This support largely focuses on ensuring participation and involvement in decision-making, being informed about contact processes, purposes and expectations, and assistance to manage practical and emotional issues relating to contact (Tilbury & Osmond, 2006).

Child support and preparation

Children may need support from multiple sources, to participate in decision-making related to contact and to understand what supervised contact might involve. Providing children with the opportunity to contribute to discussions about contact can partially support them to address feelings of confusion and isolation. Including children in decision-making involves actively listening to their thoughts, needs and wishes, and providing them with opportunities to think through and discuss their options regarding contact (Fitzgerald & Graham, 2011; Morrison et al., 2011).

Children may require support from foster carers, parents and caseworkers, and potentially other people in their lives, such as siblings and extended family, school professionals and child/youth workers. Foster carers have reported the importance of engaging in positive, nurturing rituals to help children transition into and out of supervised visits, and children may also require information and support to understand the progress of each visit, and the feelings that may arise for them before, during and after contact visits (Morrison et al., 2011).

The purpose of each visit needs to be carefully considered in preparation for visits, and may involve discussion with children about what they might like to do during contact, what is expected of them during contact, and how problems might be dealt with if they arise. Contact should also be age appropriate, and may involve using art or play therapy. Preparation for visits can also be practical: by facilitating transport and being flexible with schedules where possible, to ensure it does not interfere with children’s other activities (Moyers et al., 2006; Morrison et al., 2011).
Parent support and preparation

While interventions with parents frequently focus on improving their parenting skills, parents of children also require support to prepare for and debrief from contact visits with their children. Parents have reported feeling anxious about the rules and expectations of contact visits, particularly if they are not informed about what these are and why they are in place, and if parents are unclear about what they are supposed to say and do. As supervised contact is already an artificial environment, parents may experience increased emotional demands, when they are already distressed about the removal of their children. This can impact on the quality of contact for both parents and children (Triseliotis, 2010).

Support for parents involves good communication and transparency between parents and the case worker, both to access services (such as parenting support, financial, health and housing) to address the issues that may have led to their children being removed; as well as to support their emotional needs. Parents should be supported to address feelings of distress, loss or anger, prior to contact visits. Providing parents with collaborative guidance for structuring visits may decrease parents’ feelings of disempowerment, provide an opportunity to be involved in the process, and enhance the quality of the visit. Parents feel supported when they are able to contribute to decisions about contact visits and the care of their children (Hojer, 2009; Fernandez, 2013).

Parents also want information about the daily lives of their children, as it promotes a sense of inclusion, and an opportunity to share parenting responsibilities with foster carers. Debriefing parents after contact may also support parents to reflect on what has gone well at visits, and to process any feelings that may have arisen during contact (Hojer, 2009; Beyer, 2008).

Support for Foster and Kinship Carers

Although foster carers may not be present during contact visits, they play a pivotal role in supporting children before and after contact, which can influence the quality of contact. The level of involvement foster carers have in supporting contact, their attitudes towards contact, and the training and support they receive as carers, all influence children’s experiences of contact with their parents (Sen & McCormack, 2011).

OOHC placements are likely to be more stable where contact is supported and encouraged by carers. Carers may need specific supports to ensure they feel informed and equipped to support contact. When foster carers are supported through training or emotional support, and their views are considered, this support can filter down to the children in their care. Contact visits are more likely to be supported by foster carers when they themselves feel supported and understand the purpose of contact visits. Foster carers report being more satisfied with the level of support provided by care agencies when they are viewed as part of the parenting team, and they also feel better equipped to support children with contact, if they have information about how contact visits went. Involving foster carers in the development of contact plans can help them to understand how they can support the child in their care before and after contact visits. Where foster parents are not included in planning for contact, this may be distressing for carers (Hashim, 2009).

Training and support in improving negotiation and communication skills can help foster carers to build positive relationships with parents, to be better prepared for visits, and to deal with any anxiety associated with contact that may arise for both themselves and the children. Carers can experience a wide range of emotions in response to contact visits, just as children and parents do. As they provide emotional support
to children before and after contact visits, they may experience their own feelings of anger and disappointment for the children in their care. Kinship carers also report a need for professional support and training to manage contact, particularly as they are likely to be related to the parents. Kinship carers may experience loyalty conflict, as they are attempting to manage their relationship with the parents and the children in their care. This may impact on children’s ability to communicate difficulties they may experience in relation to contact with their parents (Spielfogel, Leathers, Christian, & McMeel, 2011; Gibbs, et al, 2004; Kiraly & Humphreys, 2013; 2014).

The cultural context should also be considered when making decisions about contact, as ideas of parenting and child behaviour vary across cultural groups. For Aboriginal and Torres Strait Islander families, providing support to carers who are supervising contact is important for children to maintain and develop their cultural identity, as well as relationships with their parents and the family, which has a broader definition than in non-Indigenous cultures (Haight et al., 2003; Kiraly & Humphreys, 2011).

Foster carer training may provide carers with additional resources to cope with the challenges that contact visits trigger, such as discussing feelings about contact with the children in their care, and managing behaviours that arise following visits.

### Key Messages

| Supporting children | • Children require support from a number of sources to prepare for contact and participate in decision-making  
|                     | • Involving children in decisions about contact visits may help them to address feelings of confusion or isolation, to clarify their expectations about contact, and to assist in planning contact activities |
| Supporting parents  | • Parents may require support to address issues that led to their child being placed into care, as well as support to prepare for, and debrief from, contact visits  
|                     | • Support for parents involves good communication and transparency between parents and case workers, as well as skills-based and emotional support  
|                     | • Parents feel supported when they can contribute to decisions about contact visits and the care of their children |
| Supporting foster/kinship carers | • Foster carers’ attitudes towards contact can significantly impact upon the quality of contact  
| | • Foster carers feel more supported when they are involved in the development of contact plans and viewed as part of the parenting team  
| | • Foster carers may need specific training and supports to assist them to support children and themselves with issues relating to contact |
Additional facilitators to supporting positive experiences of contact

There are a range of additional facilitators that practitioners and services can be aware of when preparing for contact, to support a positive experience for children, parents and foster/kinship carers.

1. Age and developmental stage of the child:
Whilst considering that the child’s developmental stage may not be the same as their chronological age, activities planned for contact visits should seek to be age-appropriate and respond to the needs and wishes of individual children, and consider how they might like to spend their time with their family. The *Kids Central Toolkit* provides a range of free tools and resources that can assist practitioners and families to adopt a child-centred approach and to engage with children about the types of activities they might like to participate in.

2. Risks to the safety of the child:
Children need to be provided with the emotional resources and support to enable them to cope with the stress of contact and to feel safe to explore their world, including at visits with their parents. Where there are increased physical or emotional risks associated with contact, higher levels of vigilance and protection may be needed (Prasad, 2011; Neil & Howe, 2004).

3. Distances, costs, time and disruption:
Although parents’ motivation to see their children may overcome distance to some extent, it has been consistently reported as an ongoing practical problem; and long distances may disrupt home routines for children and their carers. School-aged children may find it difficult to participate in after-school activities or homework, and travel may result in fatigue and irritability of children, particularly young children, which could interfere with the quality of contact visits. Children may be transported by staff they are not familiar with, which can of itself be anxiety provoking; it also sends conflicting messages about getting into vehicles with strangers (Salveron et al., 2009; Morrison et al., 2011).

4. Location of contact visits:
If parents or children have negative associations with the location of contact visits (such as departmental offices), or if it is not a child-friendly environment, this may impact upon the quality of the visit and require the exploration of alternatives. The *Kids Central Toolkit* includes a resource that can be used to help assess, with children, how child-friendly environments and spaces are.

5. Flexibility of arrangements:
Lack of flexibility in contact arrangements for children in long-term care can be problematic, emotionally and practically, with children missing out on activities, especially as they get older; inflexibility may also prevent children’s wishes from being considered as they change over time. Carers and parents also report facing a lack of flexibility in arrangements, and that they may not be consulted (Atwool, 2013; Morrison et al., 2011). Considering all parties’ needs as much as possible is important.

6. Observation of visits and note-taking:
With many supervised contact visits, minimal interaction with parents is the approach adopted. However, supervision and observation creates an artificial situation where behaviour is likely to be affected, even if it is in a naturalistic setting. Children also report disliking notes being taken during visits, particularly if the reasons for note-taking are not explained to them (Triseliotis, 2010; Morrison et al., 2011). The level of interaction and note-taking by contact supervisors should be considered.

7. Therapeutic Supervision:
Therapeutic supervision is contact between parents and their children, which is facilitated by a trained professional. It aims to address parent-child relationship problems, reduce risk, and promote secure attachment during visits; and focuses contact sessions on active parenting with the child, rather than solely a social visit. There is some evidence that structure, consistency and routines for supervised contact can be therapeutic and beneficial to children and parents (Smith, Shapiro, Sperry, & LeBuffe, 2014).
About the Study

This Research to Practice Issue was based upon a literature review prepared in 2015 by the Institute of Child Protection Studies. It is focused on face-to-face supervised contact, but also draws on the broader literature on contact.

The literature review was prepared as part of the current ICPS study kContact: Keeping Contact between Parents and Children in Care. kContact is a three year study (2014 – 2016) funded through an Australian Research Council Linkage Grant, with significant partner contributions. It is developing and trialling an enhanced model of managing and supporting contact between children in care and their birth parents. Conducted in the ACT and Victoria, the project is a joint initiative between ICPS, the University of Melbourne, and a number of government and community partners.

More information about the project, along with links to associated publications, is available at www.acu.edu.au/icps-kcontact.

References and Useful Resources

For the complete reference list please refer to the kContact study literature review.


See also www.acu.edu.au/icps-kcontact for additional publications, presentations and resources relating to this project.

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