

“It Takes More Than a Village”

Lamesha sat alone on the park bench as she watched other children doing what children do in the park—running, swinging, jumping...and laughing. But Lamesha never felt like laughing. She was terribly sad, but covered up this pain with incredible anger. That was the face she showed to the world to keep people away, to remain distant so she wouldn't keep getting hurt. She was abusive towards others because she was abused. She was detached because she was afraid of attachment. And now she thought she might be pregnant. But if that was true, at least she would have someone she could love...and would love her back.

Lamesha lived in a foster home. She saw her birth mother twice a month during supervised home visits. The judge said that it was in her best interests to live with her mom and that she could return home when her mother successfully completed a rehab program, or at least demonstrated a good effort to get clean. Lamesha wasn't sure if she really wanted to return home. She thought she loved her mom, but she didn't feel safe in her mom's house. Lamesha sighed deeply, her head drooping down to her chest. She close her eyes...

Just as she was drifting off, Lamesha felt a hand on her shoulder. She turned suddenly, flinching as she had so many times before, when someone tried to hurt her. But then she saw Mrs. Adams' face looking anxiously at her. “Why didn't you come home after school? I've been worried,” Mrs. Adams said softly, but directly. Mrs. Adams always talked softly to Lamesha. Few people ever did. Mrs. Adams sat down beside her. This time she took Lamesha's hand and gently squeezed it. “Your school called me today. I know you have a lot on your mind. Let's go home and talk. Besides, dinner's almost ready.” As she got up from the bench, Lamesha held on to Mrs. Adams' hand and imagined how good the chicken and rice casserole would taste. It was only a short walk home...

Lamesha is one of approximately 20,000 children in foster care in the state of Illinois at the present time. 50% of them have chronic medical problems; 30% are victims of various forms of abuse and neglect.* Many of them have significant issues of attachment and loss resulting from childhood trauma. The Department of Child Protection (DCP) is the investigative arm of DCFS. Along with other professionals who may come in contact with children (teachers, doctors, nurses,

etc) and who are “mandated reporters” of suspected incidents of abuse and neglect, DCP investigators have additional authority to remove children from their biological homes if there is substantiated evidence of “child endangerment.” If a child is taken into protective custody by the state, her or she is frequently placed in a temporary shelter until “substitute care” can be arranged. Ideally, the placement will be with a relative who, as a result of a “diligent search” by the state, can demonstrate the ability to stabilize and nurture the child. Otherwise, the state will contract with a social service agency for the child’s placement in a licensed foster home, or in the case of more severe behavior issues, a group home.

Children in substitute care need a variety of therapies to become stabilized. Foster parents, child care workers and therapists, working as a team, may be confronted with behavior management issues, communication disorders, attachment and loss trauma, and sexual abuse histories, among many other assessments and diagnoses. During the course of placement and on-going treatment, hearing officers in juvenile court will determine whether a child should return home or remain in substitute care. The time frame that determines these judgments can be months or years, depending upon both the biological parent’s and the child’s rehabilitation. Sometimes, biological parents will terminate their parental rights (TPR), by choice or court mandate. If that happens, the child’s goal becomes “permanency placement.” Then the foster parent is faced with the option of becoming a legal guardian or adoptive parent of the child in her home.

Even if all parties involved are functioning in the best interests of a child in substitute care, there remains the most challenging issue of all; that of the child’s perception and understanding of what is actually happening to him. Living in the most loving and nurturing foster care home environments, children can develop unrealistic expectations and hopes about where and with whom they will ultimately live, creating conflicting loyalties about bio mom vs. foster mom. If the goal of “return home” or “permanency placement” is prolonged, children’s feelings can range from extreme ambivalence (lethargy, isolation, depression) to behavioral acting out (object aggression, stealing, truancy, running away, among others).

Children in foster care want a sense of normalcy and an identity as part of a family unit. A licensed foster home, whether with a single parent or couple, affords a child the opportunity to develop healthy emotional intimacy, trust, self-esteem and opportunity to learn valuable life skills. A foster parent's most important role for the duration of a child's stay is to be that of "teacher/mentor." Foster parents can help children learn responsibility, teamwork, commitment and respect by virtue of being good role models. A foster parent must be child-focused 24 hours a day and be willing to be held to a higher standard of parenting than many biological parents. Although the state provides financial support for foster children, foster parents do not receive salaries for their efforts. And in spite of the constant challenges and tests of one's patience, there is little glory and only intermittent recognition for the work that is done. It is critical to the outcome of a child's welfare, that a person considering becoming a foster parent, do it for the right reasons.

To qualify for a foster care license, an individual or couple must pass a background check, show proof of financial stability, be physically and emotionally healthy, pass a residential standards inspection, complete over 40 hours of classroom training and participate in an agency team interview; all to be completed before being recommended for licensing by DCFS in Springfield, Illinois. Once licensed, however, the foster parent becomes the most important member of the child care team which includes legal advocates, therapists and case managers, as well as the support group of other foster parents in a particular agency.

Not everyone can do this work. There are many horror stories told by former foster parents, who, in spite of their best efforts, did not re-new their licenses because the challenges were too great. On the other hand, there are many foster parents who have had many children live in their homes over the years; care-givers whose lives were enriched by all the experiences they shared with their foster children. And then there are the foster children, themselves, who have grown to become loving, nurturing parents to their own children. Thank you, Mrs. Adams.

*Illinois Department of Children and Family Services (www.state.il.us/dcf)

Individuals or couples who are interested in learning more about foster parenting and the license application process, can contact:

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