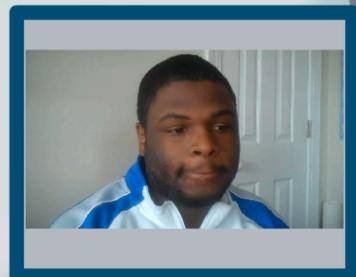


Seeing the Voices of Children & Youth: Setting the Record Straight

Robert G. Lewis, MEd, MSW, LICSW

Six Sessions



Six parts of a whole



Six Life Topics

ABSTRACT

Here's an exciting tool for child welfare workers. Social work formatted into sets of questions and documented with simple video, not just a process or a set of questions and need not be more work. Social workers get to see the voices of youth and assist young people in setting their own records straight. And it is always about permanence. It can be accomplished within regular monthly visits, albeit not single handedly. This document describes a scaffolding process that allows young people to safely push-forward thoughts about the past, the system, their families and friends, ideas and strategies for the future. It is perhaps above all a healing process, therapeutic without the *burden* of being therapy.



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Seeing the Voices of Children and Youth: Setting the Record Straight

Six sessions recorded within regular monthly visits --
the process, questions and more

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Introduction

Here's an exciting tool for child welfare workers. It's social work, not just a process or a set of questions and need not be more work. Social workers get to see the voices of youth and assist young people in setting their own records straight. And it is always about permanence. This is a scaffolding process that allows young people to safely push forward thoughts about the past, the system, their families and friends, ideas and strategies for the future.

Children in the hands of an agency or government are in jeopardy. They need to get out into a safe, secure, loving homes where they know they belong into the future as soon as possible. This is always an urgent matter! A statistical study of the data from the Midwest Study found that school-age children and youth who were removed from their homes by child welfare workers had poorer outcomes (educationally, personally) than children on the margin of placement who had remained in their homes ("Child Protection and Child Outcomes: Measuring the Effects of Foster Care" by Joseph J. Doyle, Jr., Massachusetts Institute of Technology Sloan School of Management in *American Economic Review*, 2007). And as one teen stated "...it's not my fault I'm in care, but I'm the one who's being penalized." (NYC ACS video "Pieces of Me: Journeys Through Foster Care")

Most of the tools used for assessing children's needs when they come into, and while in public care and virtually all of the records we keep are negative - focused on fault, failure, shortcomings, disease and disorder and often based on an individual social worker's perceptions. As a 19 year old young woman pointed out "You people keep track of all the mistakes we make; you think we haven't learned anything from them; and you think you have to tell everyone about them." It is extremely uncomfortable for anyone to be under constant scrutiny.

As a result, children and youth who desperately need to get out of the public care system are referred to potential parents, relatives and other caregivers represented by "all the mistakes". They are regularly over-diagnosed with mental illness and over-medicated. Developmental challenges, hopelessness, helplessness and grief responses of youth are categorized as misbehavior, and misbehavior as mental illness. Their official records are trails of difficulties. What maybe called "full (information) disclosure" about a child in the process of placement is in fact only



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partial disclosure and a negative one at that. Worse still they are moved from place to place (3.5 times on average) and their social workers change frequently.

These factors combine to restrict the accuracy and veracity of the “picture” that the child welfare system paints of children and youth in care. This increases the likelihood that they will languish in foster care experience additional hurt in the process. It also means social workers will have a much more difficult time connecting them to people who will love them unconditionally and permanently.

Project Description, Goal and Objectives

“I just wish I could tell that guy [his mental health evaluator], that’s not who I am.” (Blane, a youth who aged out of the child welfare system in Philadelphia, when asked if he wanted to review and comment on his written record).

“Seeing the Voices of Children and Youth: Setting The Record Straight,” The Video Project, is a tool that captures a more realistic and holistic picture of the child or youth in care. (<http://rglewis.blogspot.com>). This new tool consists of a minimum of six-sessions in which the social worker interviews the child or youth, asking a specific set of questions for each session so that the child can tell his/her story. The social worker captures the sessions using an inexpensive, readily available video camera (Kodak, Dell, Olympus, smartphone cameras, and creates the finished video using, free, easy to use software.

The Video Project is a simple process that social workers, probation staff, mental health workers¹ can easily use in the normal course of their required visits. This need not be extra work even for busy workers when done in collaboration with others who help the youth process the questions. The six video sessions are:

1. Introduction; the camera, the software and permission
2. Before I came into public care...
3. The day I came into care...
4. In care...
5. It’s really like this...
6. In the future I hope...

¹ This is a therapeutic process that is not restricted to those who are in, or have been in foster care. The process pivots on a traumatic, life-changing event or series of events. When that different trauma is the focal point, the sets of questions must be modified to reflect that, i.e. before it happened, the day it happened, etc.



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The goal of Seeing the Voices... has been to provide a tool through which the young person can be heard effectively, and by overcoming hopelessness and helplessness, help children and youth into safe, secure, permanent homes more quickly. It's an engagement process. It is a healing process. It's a permanence process. Most social workers are looking for ways to work more effectively with the children and youth on their caseloads. Although this process need not be more work when the social worker a little time to discuss the project or do the video session, the therapeutic processing takes time. It can be done by a partnered caregiver or therapist if the social worker cannot carve out the substantial amount of time that it will take. If the worker does the processing and recording the questions with the youth, it will definitely take more than the brief time of a regular visit. As one worker said, "You can do it in 5 minutes of a visit, but you may not want to."

The objectives of this project are to:

- Give children & youth opportunities to tell their own story and "set the record straight;" to engage and empower them in the permanence process. To own their own stories so that they are not controlled by them.
- Help social workers see and hear the genuine "voices" of youth and thereby better prepare themselves to achieve permanence for and with the young person.
- Help the young people heal from their traumas and losses and deal with their loyalty issues, and make sense of the world they have been inhabiting. These are essential steps in preparing children and youth for re-connecting with their birth families, connecting with a new family or building and maintaining relationship in general.

Caution

This is a healing process. As such it involves very strong feelings. Every child or youth who undertakes the challenge of *Setting the Record Straight* will find him/herself on a voyage of discovery. Child welfare workers may not have the time, expertise or inclination to take that journey with the youth, but they need to have a therapeutic partner available for the young person as they listen to the child and follow through.

Furthermore, doing this process in a safe environment is also essential. Safety may be a particular place, with the social worker, or it may be in the presence of someone who helps them to feel safe. The worker needs to make sure the child or youth has the freedom to identify his/her on safe environment.

It is very important to note that the videos are all under the control of the child/youth. Only with the child/youth's permission, may the finished video or pieces of it be used for any other purposes such as recruitment and/or training. Any questions about sharing the video(s) need to wait until they are completed. The process is the purpose. The video is for the young person to



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clarify things from him/herself. If there is an idea of sharing it, then the answers are tailored to the expected audience.

The video project is not a recruitment project and not a digital story. It is for the young person to take control of his or her own story.

The ***Seeing the Voices of Children and Youth*** involves a process that includes a flexible, but proscribed set of questions and set-ups that will allow for “editing in the can.” That means that the sessions are pre-edited by the flow of the questions uninterrupted. Therefore, there is a minimum of later work and a more fluid style. The costs are low enough for use for every child and youth in care.

Social workers don’t have the time or the skill to take hours of video to edit into a narrative story. But in regular monthly visits they do have the time to talk, listen and explore these healing questions. Preparation for each “5-10 minute” video session may take numbers of visits and hours of talking/processing as well as any number of “retakes” or in fact, no takes at all. For many, perhaps most, the video camera stands as witness, a goal setter, and a way to be heard that is intuitively clear to the young people. When the answers to the questions become clearer in the young person’s mind, they will be ready to capture their own thinking in the “5-10 minute” video clip of each session. In this way they are also the editors and the directors of their own video projects.

Setting the Record Straight

The video that is created in this process is about a young person’s voice and images. It’s about putting his/her best foot forward, telling his/her own story, which is completely authentic to him/her. It includes what each one remembers, has experienced and believes about what has happened to him/her. It is what s/he thinks of it now and what each hopes for the future. Workers need not worry about capturing every insightful phrase or poignant vignette. This tool is more about the process than the product.

Seeing the Voices... itself is not an open-ended process. It is limited to six sessions for these reasons:

- The need to maintain a sense of urgency. The need for permanence is always urgent, regardless of a child/young person’s age or length of stay.
- The 6-session limit gives the young person another choice of how to proceed after this set of questions is recorded.
- Five 5-10 minute sessions when merged become a 25-50 minute video which is long enough for revisiting, reviewing and/or sharing as the young person wishes.
- A smooth 5-10 minute narrative is possible when the young person has done the processing/healing work, the trauma work.



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- Six sessions does not translate into 6 visits. An individual young person's time to process the content of the material is unique to him/her. It has been done in a 6-8 week time frame and in over two years.

Getting Started

When introducing the idea to a youth about his/her engagement in work, use the whole title not the shorthand "video project". Say something about how you recently learned about it, or that you have learned of a process that allows the young person's voice to be truly heard. It is a process over which they will have full control unlike anything else in child welfare. It is an opportunity for them to set their own records straight, to own their own stories and not feel controlled by them. As one young person said, "If you don't own your own stories, other will." In fact others already have, hence the need to set it straight.

Furthermore it will give young person an opportunity to talk about what hasn't been said or recorded, the time before coming into care, the good times, the happy times, the successful times. It is important to make it clear that this is an opportunity *to set the record straight* for and about themselves, what happened in the past, good and bad, what has happened along the way and what they hope and dream about for the future. It's about what they think about relationships, about where they are going and how they hope to get there and who they hope will be there in the future as well. The video is a way to capture these thoughts for themselves for the future. It is an authentic witness which the young person controls, explain what that control means, i.e. they get to delete everything they record and no other notes will be taken. It will be his/her video project.

In preparation for doing this video work with young people, the worker gives them the names of all of the sessions, and all the questions, this whole document if requested.

The worker may be in a hurry, but the young person needs to take his or her time, which for some young people is also "in a hurry". This may be a process of only 5-10 minutes in a visit, but it also has to be sensitive to the young person's readiness. Workers provide the questions in advance (over and over as necessary). The worker or their therapeutic partner discusses the questions over as many visits as necessary before beginning to record, recording the questions/answer session at one uninterrupted session when the child or youth is ready. It can be at every session. Recording can begin at any time as the child/youth wishes. "Messing up" the video shoot, i.e. the continuous flow, may mean "I'm not ready to complete this session or set of questions yet" or "I'm not finished discussing this part of my story."

The preparation/processing time discussions are what make it possible to "edit in the can". And like other editing, some really good material will be left behind (on the cutting room floor) in a previous conversation or a halted video take. The "outtakes" can be saved on a separate DVD or deleted as the young person wishes –



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it is always the young person's choice. It's important that the worker not get too concerned about recording the video. It's the process that works.

As needed, have the young person discuss the questions and the process with people whom they trust and on whom they rely. If the young person wants to redo a session, redo it. Remember, as hard as it may seem, if the young person wants to delete any or all of the videos, the worker must do it. The young person controls the process! Six sessions really can be completed in six visits only very rarely. The issues involved are important; healing takes time and life intervenes. It is his/her process. If s/he wants to do it in fewer than six visits, that is also OK once the work of discussing the material has gone forward. There is no preconceived "look" for the final product. Sometimes after weeks of processing, a young person will want to record several sessions at once.

That said, it is important that each of the five video sessions should be shot from beginning to end with no stopping. There should be no editing beyond trimming the beginning and the end. For children who are used to others describing them (controlling their stories) through various professional lenses, a seamless take is evidence of their control of the content especially when and if they view it days, months or even years later. That said, the process can be repeated with a youth years later as well. There may be magic in the process, but it's in the processing, not just in the video recording.

The professionals need to let the young people know that they will help them "set the record straight" for themselves as well as "for the record". If they need more information it is the workers' responsibility to obtain it. The worker, acknowledging the unsettling nature of the process, needs to be aware of the child/youth's need for more therapeutic work because of the strong feeling that are emerging. Grief work is hard. The worker will either take the time to explore these challenging areas, or refer them to a therapist of their choice. Once begun, however, The Video Project should not become another broken promise in the child/youth's eyes. They can take the time they need to feel safe and ready and they can resume as and when they let the worker know that they want to continue. A certain appropriate level of moving the process along is also valuable for the young person. Many young people have asked at the outset whether the worker will stick with them through the whole process. Even those who don't ask have that question because they have had so many changes of workers. The worker and administration need to make this commitment.

With access to the Internet on monthly visits, by phone or laptop, the young person can watch sample videos from the current Video Project videos available through links at <http://rglewis.com/VideoProject.html> Perhaps the best place to start would be Kashawn's video "Why do it!" on the website as well as Porter's "Why did you want to do it?" also linked there to "unlisted" YouTube videos. Unlisted YouTube videos are accessible with the correct link, but cannot be searched.



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All the Kashawn sample videos, sets of questions and more are accessible via <http://rglewis.com/VideoProject.html>

More sessions are always available. Ideas for questions in those sessions are included at the end of this document and are being gathered into topic areas. This document is edited and updated as feedback comes in from those doing Video Projects in the US and Canada.

Confidentiality

The videos are confidential to the young person. What does that really mean? In part it means that the young person decides what to delete, what to save, where the video is shared and with whom, as well as *setting the record straight*. Typically the worker tells the young person that two DVDs will be made from their work together unless the child/youth objects. One will go into the confidential case folder and one will be given to the young person him/herself.

Once completed, the young person may give permission and may want to share his/her video with others. Any discussion of sharing needs to wait for the completion of the young person's own video project. A sample release/permission form is attached to this document. It identifies the widest latitude of permission for the use of the video. If the young person wants to tell and record his/her story, but not share it, modify the release form to reflect the narrower focus of the young person's specific wishes. In addition, the first session includes a video release script in a question-answer format similar to every succeeding session.

This is Social Work Not Videography

Anyone undertaking this process with a youth must be aware that it is opening sensitive topics. He/she must take the time to be sure the young person is feeling OK at the end of each visit and has someone with whom to debrief if not the worker him/herself. The young participants need to have individuals whom they trust to "tell the whole session to" – to debrief as the sessions progress and to prepare as well. Some workers have planned to do the videos before a regular therapy session. Some have supported the therapist in doing the Video Project with the young person. It is also important to be sure to let the other caring adults in the young person's life know the schedule and especially when the session/visit ends. The video social worker shares the goals and question with the other adults as well. Call to the young person later to check-in or have some other caring adult do so also work well. Making sure that the young person has access to a therapist can be useful as the process goes forward. And of course, it is essential to remember how important feeling safe is for the young person.

Each of the session's questions can be printed out on a 4x6 card and given to the young person. It's helpful to do that. Alternatively the worker can give the one page session description. The important thing is to leave the questions for the next session with the young person each time. No session must be done as a Q&A



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session. A card version is attached to the end of this document. The young person may have some idea of how s/he wants to tell the story and where. S/he may want to use the questions like a teleprompter, or just in talk the questions through from memory. The worker is the time and questions keeper and must use his/her own judgment about whether this is “the final” take or if another version would serve both the purpose of dealing with the trauma of the past events and the length of the video. After recording six sessions the worker puts the five content sessions together into one complete DVD using freely available software.

There is no need to ask the questions word for word. We have tried to make them flow for the pre-editing purposes, however. It is always about the young person’s story and his/her telling; it is a healing process. The worker also has to be sure the youth understands the question. Sometimes they need to be made more concrete, but even with that, the questions should be open-ended.

Throughout the process, the worker keeps checking with the young person to be sure that s/he is all right with the process and feels safe. They may not be comfortable, but they may be safe and all right. This will also be a relationship building process for the worker and the child. The worker especially should be alert to the growing relationship and aware of the consequences.

Once begun, this is a process that needs following through to the end. Workers who begin this process need to see it through even if the young person has difficulty; the worker needs to let that young person know that it will be done in his/her own time, but that the worker will be available as the child/youth is ready. If not now, later; if not later, then after that.

This process is a tool to achieve wellbeing. In many ways the process reverses the child welfare mantra, “Safety, Permanence, Wellbeing” into wellbeing to achieve permanence and safety.

Technical Issues: the camera, the software and the setup

Most of the simple video cameras are just that – simple, easy to use and uncomplicated (Google “best simple video camera”). They are easy to learn before starting out – playing with it helps, including downloading the video software and making practice videos. Every young person who has engaged in the process has been quite willing to teach his/her worker how to use the camera and software. For the hesitant young person practice-editing of video clips (trimming the lead and the end only) can help. Workers and supervisors are more likely to be intimidated by the technology than the young person.

There are some simple videography tips to remember, e.g. pay attention to the video background behind the young person, set them at least 4 ft from the background if possible, set up sufficient and “ambient” lighting, make sure the young person’s face is well lit and not backlit, eliminating background noise such as music, TV, traffic, talking or whatever. The camera needs to be stable – using a little tripod (The



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Gorillapod™ works well for some and Apple sells a device for mounting iPhones). Holding it usually doesn't work. If there are two in the picture (for any reason) they need to be as close as possible. Sometimes in making the videos, part of the story is a location where the young person wants to do that session. In honoring that, all the other tips remain important, especially if the location is outside. Be alert to the young person's reactions. The special location combined with the questions may trigger a stronger reaction than either worker or the young person expects.

Since, for most of the sessions 5 minutes will not be enough time, the worker can use as much time as the young person has to make the video. Once the worker and youth make the contract in the beginning to do 5-10 minute versions, redoing a shorter version for the compilation/movie video will be a given. Discussing the questions in advance, several times together will help in making a more succinct recording. Whatever approach seems most comfortable to the child/youth should dictate the process. As for editing, most of the cameras come with software that allows easy trimming of each segment and a tool to "create" a movie by putting the pieces together in any order the young person wishes. Practice trimming and making movies are part of the preparation for the work.

At Every Visit Regardless of Content

ROUTINE QUESTIONS ON SAFETY AND PERMANENCE SHOULD BE PART OF EVERY VISIT REGARDLESS OF THE PURPOSE.

From the perspective of the **whole** interaction with a child or youth, below are questions on safety for the social worker to ask, and questions on permanence for the young person to ask the social worker during every visit, not for recording unless the young person wants them to be.

Safety questions for the social worker to ask each month

Ask these questions during every visit, not as a form to be filled out, but in a frame of genuine concern.

1. *Are you safe at home; do you feel safe; is anything worrying you?*
2. *Is anyone hurting you?*
3. *What makes you feel lonely; how often is that?*

Permanence questions for the child/youth to ask each month

Print these out on a card and give them to the young person to ask at every visit with his/her social worker. There are 2x2 sticky pads available to give the young person as well. S/he can write the workers response each time and/or ask the worker to write a response.

1. *What is the reason I'm still in foster care?*
2. *What are you doing about it?*
3. *Is there anything I can/need to do? Why is it important for me to do it?*





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Introducing the young person to his/her own video project

Video is everywhere. It is the language of children and youth today. It animates the social media on the web. The challenge of introducing the video project to young people is not video, it's what we the professionals plan to do with it; how much control he/she will have over the process and the result. Since most young people *know* that we "keep track of every mistake they make," one way to engage the child or youth in doing this video process is a discussion of ***setting the record straight***, of being heard and of taking control of his/her story in a whole new way. Remember the Kashawn and Porter videos that you can share. This is an opportunity to get one's best foot forward. S/he can say "what's really on your mind" about what really has happened and what is happening to them in foster care or wherever they are. This is not about the facts, but about their experience of what happened. We know that "Anything perceived as real is real in it's consequences."

There are reasons to hesitate, of course. Shame is a big one. Being in foster care itself is shameful. Professionals in the field often forget that. What the young person believes s/he has done to warrant being in care for so long is another reason to hesitate, to be ashamed. Things they have done may be very shameful, things that were said about and to them may also be burdensome. Young people seem to intuit that they will be compelled by the camera/process to say what's really on their minds. Having identified with the negative labels for years can also give a youth pause. Having genuinely made mistakes, done something wrong may also be part of the shame.

Introduce, demonstrate, and insist on the idea that the child/youth has control of the content and the videos. This is different from every other adult-youth interaction in foster care and for adolescents in general. In the first session the worker will demonstrate that this process is different with the youth. The questions are not meant to be a surprise or secret in any way. The worker gives the young person the session questions on 4" x 6" cards if possible, explaining that s/he can talk about the questions or that s/he can talk with whomever s/he wants about them and when ready make the video in one take. Explain the reason for the one non-stop recording.

It is important to explain the idea of making a seamless video of each session so that in the future the young person can see that it has not been altered or edited; it really is what s/he was thinking and feeling at the time. The final product of his/her own video project will be two DVD copies of the sessions, one for the record if the young person wishes and one in the youth's hands. That's as far as it will go until and unless the young person wishes to give permission for it's use or shares it him/herself.

There are also sets of the questions (without instructions) at the end of the Six Sessions section called "Follow-on sessions/visits" that offer sets on questions in a similar format on specific topic.



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The child/youth is free to discuss his/her video project with whomever s/he chooses. In fact, the worker should encourage them to do so with appropriate persons. Although it is confidential to the youth, it is not a secret of any sort. If the young person wants to see an example of the process, use the samples recorded by Kashawn Little www.RGLewis.com/VideoProject.html

Seeing the voices of youth requires openness to seeing the youth differently. What the young person has to say is his/her truth at that time. The only time a worker contradicts the child/youth narrative is if s/he assumes the blame for coming into and staying in foster. For youth who have never been in foster care, the pivotal traumatic event will clarify just how much “to blame” the young person feels s/he is and it will be up to the worker to mitigate that.²

Since this process can also be used for young people who have never experienced foster care, it will be up to the interviewer/worker and the young person to decide what that traumatic, pivotal event is. Although coming into care is always traumatic, separation from siblings may be the more life-changing trauma.

² A relevant set of questions is available for young people who have never been in care. Contact Bob@RGLewis.com (857)222-3060



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AGENDA for starting a Video Project Team

Working To Insure Success

Implementing The Video Project is more likely to be successful with a commitment on several levels of an organization. These are some of the critical elements that will make its integration into the agency a success.

- Workers, supervisors and managers commit themselves to the whole project.
- The agency insures that they have the web and video cameras for each worker or worker/supervisor team before the training.
- Participating social workers will have downloaded and previewed the latest protocol before the training (latest iteration at RGLewis.com)
- The process works best when the workers and supervisors have had a day's training on "Recasting" their young people. Seeing the real person not just the one described in the record.
<http://www.rglewis.com/VideoProject.html>
- Participating social workers who will be doing the video project take part in this one day of training (additional days of training are available).
- Participating social workers committed and plan to take part in monthly one-hour team coaching/consultation for workers and supervisors (and optimally for program managers) on WebEx for 10 months on the days and time mutually agreed.
- Participating social workers commit to completing the process with at least one child.
- Participating social workers/supervisors agree to complete a brief final evaluation via Survey Monkey.

The Day's schedule

The training will be delivered through a combination of presentations, videos, case examples, small and large group discussion, handouts and exercises and practice as time allows.

Agenda & Process & Q&A

- Report/overview of the video project's success.
- A look at the theory and practice that supports it's effectiveness
- Identifying the specific behaviors and tasks of adolescents
- Looking at survival behaviors and other descriptions of adolescents
- Recasting the descriptions of the children to be served by the video project
- Introduction to the interview/engagement process for the participants
- Practice with the equipment, Some video-audio tips
- Identifying the process of future consultation



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First Session: The Camera, the Software and Permission

For all young people under the age of 18, a parent or guardian must give permission to make the videos. The particular form will be governed by local rules, regulations and forms. Regardless of anyone else's permission, the child must give his/her permission and that permission is the governing one. The questions of the first session make up that permission and are not part of the final video per se.

In this session play with the camera with the young person and view the results. Download it to a laptop if you have one with you. Do whatever the two of you want; and especially what the young person needs to take possession and ownership of this process; demonstrate how it works and how easily clips can be permanently erased. Make it as ordinary as pen and paper, as ordinary as computers, as ordinary as a cell phone. To most young people that is exactly what it is. They are usually able to instruct the worker in the technology. Pay attention.

Clowning around, taking pictures around the room, of you, etc. is all OK. If the young person wants to ask questions of you, by all means do it. Be prepared to respond, of course.

Here is a set of questions you can give the young person to ask you by way of example of how the process will work with them. Set up the camera with both of you in view or just you. Print out the following questions on a 4" x 6" card with one for you and one for him/her. This may also be a way for the young person to hear your commitment to the process and your commitment to confidentiality, etc.

- Why do you like Seeing the Voices of Youth, Setting the Record Straight?
- What makes you think it will be good for me?
- Can you tell me about other young people who have done their own video projects?
- Tell me again how the whole thing works.
- Any other question...

ALL children and youth must agree to the process, demonstrate an understanding of the process, their right to stop the process, challenge any question, refuse to participate, delete any recording, etc. This is their record under their control. "They control the delete key." They must understand that the video record they are making becomes their property and a part of their own confidential record as maintained by the public or private agency. Share the following questions with the young person before you begin.

Making a video of this permission process is more reliable than a form to be signed especially when the permission video is captured in one take. (However, use a written release form if needed in your agency or jurisdiction.) Video allows the young person to hear and see what s/he is agreeing to and then proceed or not. Remember to do this recording in one take so there is no question in the future about editing after the fact.



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Begin with the young person introducing him or herself to you/the camera. Do a brief take and delete it completely. Demonstrate the young person's control over the content. For young people who are limited in anyway, keep your explanations as concrete as possible. Take it at his/her pace. Always and in every session insure that the child feels safe.

"Your Video Project: Setting The Record Straight" is a way for you (name) to tell your own story of what happened to you from before you came into care, while you were in care and what you hope for the future and to record it on video for yourself and for your permanent record. Do you understand that?

We will work on this video project together through a series of questions over time that you are the only one who has the "right" answers for. You can delete any recording you wish to eliminate or redo. Do you understand that you have this control? Do you have any thoughts or comments on that?

Telling ones' own story is a healing process as well and taking control of it can be hard. If the telling of your story becomes very troubling for you I will ask you to talk about it further with me or another professional of your choosing. Do you understand and agree?

You will own the finished product both personally and as a part of your personal, confidential record if you wish. Do you agree with that and do you have any questions about that?

Since this is your story, you also may give permission to share your story or any part of your story once you have finished (as you and your parent/guardian agree). For example some young people, once they have completed the process, wanted to share their stories with people who may want to get to know them better, recentlyu reconnected relatives, for example. You may want to let professionals in child welfare know what happened to you so that you might help some other young people in care. But that decision must wait until you're finished. This is for you, by you and about you. What do you think of that?

You do not have to share your story with anyone. Are you clear about that? Do you have any other questions?

Are you ready to start the process?"

Watch the video immediately together, either on the camera or on the computer. If necessary, redo the whole session (in one take, remember). Make sure the young person is comfortable with it. Answer any other questions that come up. Tell them that this is similar to how the questions and answers will be done in each section/recording session. Be sure to close this session with a look at the questions in the future session(s). Remember set up and safety. You don't have the do the next video on your next visit, but when the child/youth is ready. Some youth do want to



*Seeing the voices of children and youth,
Setting the record straight*

make more than one session at a time, however. Honor the request; acknowledge his/her control.

Close each session with stress release as seems appropriate. If you begin doing it in the first session, it will become more valuable, more relevant and more useful in the later sessions. Many young people in care are not aware of these simple self-soothing techniques. Take the time to teach them. Samples are included in the Resources Section at the end of this document and available online. This may also be a time to talk about the feelings of shame for what the young person has gone through and/or done. Explain that this is why it is completely confidential. Explain in clear understandable terms the value of releasing the shame. Remind them that they control the outcome.



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Second Session: Before I came into care...

Watch the video from the previous if the young person requests. Ask him/her if s/he has any thoughts or concerns. Go over “this session’s” questions. Remember the setup for the video. This process is about the youth: follow his/her lead. Being neutral (not the interviewer) has been very effective, but so has the “thoughtful” interviewer. Remember the overall approach is 3L&T- Love, Listen, Learn and then Teach. This can be a very painful time or a happy time, idealized, romanticized, or painful and full of regrets. Without negating a young person’s experience, memory or understanding, it is important to set the record straight about the young person’s responsibility for coming into care. Accept, reflect, and offer another perspective (e.g. a 6 year old is never responsible for coming into care). Modify these questions to be more concrete for young people who need that approach for whatever reason.

Please tell me about your life before you came into care.

What do you remember? What have others told you?

What stories do you have from that time, either told to you or remembered?

What did you think of your life then? Can you remember how you felt then; can you talk about it?

What do you think of it now?

What have you taken with you from that time? (For a limited young person ask about specific things, pictures, toys, anything they have from that time and ask him/her to talk about it.)

What have you left behind? Are there some things you lost; can you talk about them?

What do you want to leave behind?

What (from that time) do you want to make sure you take into the future, things, ideas, feeling, relationships?

Anything else?

Watch the video immediately if desired and/or possible. Be sure to close this and all sessions with a look at the future sessions and also letting things be. Use relaxation exercises. It is definitely not your job to “correct” his/her story but it is important to point out that despite the youth’s feeling, he or she is NOT responsible for coming into care. Ask the youth what other questions s/he wants to include. Give him/her a copy of the next visits’ questions. Ask him/her to look them over and think about what to s/he wants to say. For a younger child, make the questions concrete and cut out anything that does not make sense to him/her.



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Third Session: The day I came into care³...

Watch the video from the last visit if the child or youth wants to view it. Go over the questions for this session. Be prepared for the young person to pull back. For almost every person, coming into care was a traumatic, life-changing event – even if it's relief on some level. There may be some other more traumatic (in the child's view) more life-changing event. Stop if the young person wishes to stop for ANY reason. However, the best approach is a discussion of the questions in advance of setting up the camera. Go over them and be sure the young person feels ready to put it all together in one narrative. Take as much time as the child/youth needs to be ready to do the whole thing. There is no imperative to make a video once a visit "His/her readiness is all. "

What was it like, the day you came into care?

Describe what went on around you, what it felt like, as best you can.

What were your fears, concerns? What hopes did you have?

What really happened?

What might the professionals have done differently?

Was there anything you were told at that time that isn't quite right?

What do you want to be sure to remember?

What would you like to let go of?

Anything else?

Watch the video immediately if desired and/or possible. There are likely to be strong feelings here and vivid, often traumatic memories. Spend as much time as you need in preparation and more time after recording the session to debrief (i.e., closing things down). You will almost certainly need a person to help the young person debrief if you don't have the time. Once again a look ahead to the next session will be helpful. Leave a copy of the questions for the child or youth to look over and think about.

³ For those who were never in foster care, this will be the pivotal traumatic event that the worker and the young person identify in advance, e.g. being arrested, going to detention, losing a parent, life threatening/changing injury...



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Fourth Session: In foster care...

Watch the video from the last visit with the child or youth who wants to view it. Talk about that session as much as the young person wants to go over it. Go over the questions for this session. Spend as much time as you need in preparation. It is improbable that these questions can be answered and recorded in only 5 to 10 minutes at the first go, but once you have gone over the whole story together, the youth will be able to make it more succinct. But once again, the discussion in advance will facilitate a more fluid process. Allow the young person to talk as much as s/he wants about his/her journey through foster care. S/he can do it on camera or in conversation. When it seems right remind the young person of the need to be succinct in the final recording of this session.

Please describe your journey through foster care. You can take it place-by-place or event-by-event, or any other way you want to describe your journey.

What did those homes/places mean to you?

Can you tell me a little bit about what that was like?

Talk about all the things that you hoped for, and what happened to those hopes as best you can.

What were the good and bad of what happened to you?

Talk about the things that frightened you.

Describe what it was like to have to move from one place to another.

Who were the significant people during your stay in foster care? Why were/are they important to you (good or bad reasons)?

What might they have done differently? And now?

Anything else?

Watch the video immediately if desired and/or possible. Once again there are likely to be strong feelings here, vivid memories and terrible losses. Although you may not be able to keep it to 5 – 10 minutes, discussion in advance allows for a more concise narrative. Spend as much time as you need in preparation and more time after recording the video to debrief (i.e., closing things down). Once again look ahead to the next session. Leave the questions for the child or youth to think about. Divide this up as much as the young person needs or wants. It is his/her story; just remember the need for whole narratives to avoid editing anything except the beginning or ending of a narrative.



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Fifth Session: It's really like this...

The previous sessions were about the past. Sessions 5 and 6 are about the present and future. Therefore, watch the videos from the previous sessions put together in a “movie” if you can or unless the child or youth does not want to view them. Go over the questions for this session. Take as much time as needed. Don't rush to complete it. This session brings the young person to that place of “how I got here to this place in my life.” In the mourning process, this is the search for meaning. This can often be a difficult set of questions. Take the time to process...

How would you put it all together to answer the question “What has happened to you?”

How about the question “Who am I?” How do you answer that for yourself now?

Can you think of all the people who have loved you?

What is it about you that has helped them to love you?

What is it about you that allows you know where you're going?

How can a person help you on your path?

Who might do that? Are there others?

How do you feel now about being in foster care? How does it impact the choices you make today? How do you think that may be different in the future?

What might professionals and others have done differently?

Anything else?

Watch the video immediately if desired and/or possible. Once again there are likely to be strong feelings here and some painful feelings. Spend as much time as you need in preparation and more time after to debrief the video recording i.e., closing things down. Remember that you are trying to achieve that 5-10 minute narrative in one take. If you are learning about new people, potential or past connections, ask permission to talk about them apart from the video recording. Remember the video is the young person's story telling; it's their process, not your family finding.



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Sixth Session: In the future, I hope...

Watch whatever video or combination of videos the young person wants to view. Watch at least the previous one together if possible, but be directed by the young person. All the cautions of the earlier sessions apply here as well. There may be strong feelings as well and some painful losses. Remember to keep the final recording to 5, no more than 10 minutes. Spend as much time as you need in preparation, especially if this will be the last video session. Endings can be difficult. Losses resonate with losses. But this is also a successful completion of a project that has been long and at times difficult in the making.

The name of this session is “In the future, I hope...”; what do you want in your life in the future?

Who do you want to help you get there?

How do you think being in foster care will impact your future?

If you could have anybody, whom would you want in your life in the future? And how could they be part of your life?

Is there anyone you would involve if you were not ashamed of being in foster care or other things?

Is there someone you would involve whom you think is legally forbidden?

Imagine yourself to be safe and secure. What makes it safe, secure? Who is there with you?

What do you want to do next?

What question should I have asked that I didn't through this whole process?

Is there anything else you want to say to set the record straight?

Ok, let's put it all together.

Watch the video immediately if desired and/or possible. Congratulate the young person for a job well done over a sustained time and a difficult road at times. Following this session make a time to put the whole video all together at your earliest convenience. A straight forward “movie” will do it in minutes if you have a laptop with you. You can add simple music. It need not take more than the same five-minute time frame we have been using. If you don't have a laptop to do it, you may need to make an appointment with the young person to come to your office where you can do it.

Schedule a final visit with this project to make and hand over the completed DVD and talk about future work together.



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Follow-on Sessions/visits: **The rest of the story ...**

There are numbers of ways to follow up on this project and make to work for the young person's future.

1. The product of the video project is the process, the DVD is the record of it. Telling one's story is restorative. And this is a therapeutic process. Watch it together again and again as the young person wants and don't force it if they don't. The more they process before making the video the less likely they are to want to watch it.
2. Just putting the child/youth's story together in one video, burning it to a DVD and putting it in the official record will help "set the record straight".
3. You or the youth can use the material with the young person for a digital story by adding digitized (scanned or digital) pictures, music and other commentary as the young person wishes.
4. You and the young person may want to make brief linking videos to add between the recorded sessions "for the record" before burning the DVD. This just a way continue your work together. The linking videos can be the debriefing of the whole process as well.
5. The young person, with or without your help or others, can use all of the recorded material and other material to make a "Digital Story" which is a more complete and personal expression of the young person's telling of their own story adding personal pictures, music and any other material the young person may feel enhances his/her unique expression of him/herself.
6. The young person can make additional videos or choose which segments if any to use to represent him/herself by way of introduction to new people, lost and found family members or others. In other words, the material can be shaped by the young person to be his/her own recruitment video.
7. If the young person has not achieved permanence during your work together, if they are not "safe and secure", you can continue to take 5 minutes of each monthly visit for "keeping the record straight". Below you will find additional sets of questions organized into thematic sessions that you may want to use.
8. Pick any topic or theme with the young person and make up a set of questions, (e.g. "my education") with them. Remember to do your best to keep the final interview/video process to five to ten minutes.



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About My Brother(s) &/or Sister(s): I often think ...

This is a session for the young person to talk about his/her siblings, feelings about them, about what happened to them, and hopes, dreams and fears for them. This can be done as a seventh session or “out of order” if the young person wants to do that. Regardless of when it’s captured, it can be added to the video at anyplace that the youth wishes. As always, don’t rush to get it done. Look over the questions, add some if necessary and prepare to capture the video at a later session.

Talk about your brother(s) and/or sister(s).

What do you remember about them that really matters to you?

Is there some specific thing you want to be sure to remember always?

What happened to them?

How was that different from you?

In “setting the record straight” what do you want to say to or about your brother(s) and/or sister(s)?

What would you like to say to them here and now?

What else needs to be said about you and your brothers & sisters?

Anything else?

There are always possibilities for strong feelings in relationships that have been through some painful losses. Spend the time before recording this session just discussing all the questions so that you can make the final video in 5 to 10, minutes. Spend as much time as you need in preparation, especially if this will be the last video session. Following this session make a time together to put the new material in the “movie”. You can add simple music. It need not take more than the same five-minute time frame we have been using.

A Session about being adopted: What happened to me ...

This is a session for the young person to talk about his/her feelings about going through the adoption process, about what happened to him/her, about hopes, dreams and fears. This can be done as a seventh session or “out of order” if the young person wants to do it.

What would you like to be sure to say about getting (being) adopted? About the process you have gone (went) through? about what you would like to say to other young people? to other workers?

What were your first thoughts about adoption when the worker started talking with you about adoption?



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What were your hopes and fears? How have any of those fears or hopes come to pass?

What advice would you like to give to other young people about the process?

What would you like to tell the adults who want to adopt?

How might the process have worked better for you?

What did you want to say to a people who might have been interested in sharing their homes and families with you?

For people interested in you, what did you want them to know?

What else would you have said to them?

Which three question would you have asked them? And what answers were you hoping for?

What was the first thing you wanted to do when you met your new family? Did you do it? What did you want them to do? And/or the first things you'd like to do with them?

What Else should I have asked you about your adoption experience?

Anything else you want to say?

There are always possibilities for strong feelings in all that the child/youth has been through including some painful losses. Spend the time before recording this session just discussing all the questions so that you can make the final video in 5 to 10, at most 15 minutes. When a young person wants to do this, it is often s/he wants to share with the world. The shorter it is, the more likely it is to be watched. A thorough discussion of what s/he wants to say before setting up the camera will make it possible to be succinct and clear. And of course take the time to debrief.

A Session with Brother(s) and/or Sister(s): That way we see it ...

This is a session for the young person and his/her siblings to do together. This will take a lot more organization. Don't rush to get it done if someone one can't attend. The discussion is the process. Show whatever video or combination of videos the young person wants to view and/or share. Be directed by the young person.

The name of this session is "The way we see it..." You've all seen __ (name) __ video. Is that your story too?

How is your story the same? How is it different?

Who had it the hardest? Easiest? Why was that?

What did you think was happening to one another at these times? Before care...? Coming into care...? In foster care...? Now... ?



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In the spirit of “setting the record straight” what do you want to ask one another? What do you want to say to one another about any part of what you shared or didn’t share?

How do you want your life stories to intertwine now and into the future?

Anything else do you want to say?

There are always possibilities for strong feelings in relationships that have been through some painful losses. Spend the time in advance discussing all the questions so that you can make the final video in 5 to 10 minutes. Spend as much time as you need in preparation, especially if this will be the last video session. Following this session make a time together to put the new material in the video. You can add simple music. It need not take more than the same five-minute time frame we have been using.

Questions for Recruitment

What is special about you?

How has it been to be in foster care? What’s the good? What’s the bad?

What do you want for yourself today?

What do you think about foster care?

Imagine that you get to pick your parent(s)...

What type of family would you like?

What do you want to say to a people who may be interested in sharing their homes and families with you?

For people interested in you, what would you like them to know?

What else would you say to them?

What do you need in a home? Who else might be there, other kids, boys/girls, ages, etc?

Anything else?

Questions to Ask Prospective Parents

What do you want to say to a people who may be interested in sharing their lives, families and homes with you?

Which three questions would you ask them?

What answers are you hoping for?

If all the answers to your questions were to your liking, what would you want to do next?



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What about ... [one or more of the youth's answers that needs further exploration]?

What would you like to talk about with your foster parent/group home?

What is the first thing you'd like the new family to do?

What are the first things you'd like to do with them?

Anything else?

Loyalty: Questions About Fathers

What do you know/remember of your father?

What can you tell me about him?

How often do you speak to him? Now? Earlier?

What would you like to do about that relationship?

Are there other men who have been fathers to you?

What about them stands out in your mind?

What would you like to do now?

Loyalty: Questions About Mothers

What do you know/remember of your mother?

What can you tell me about her?

How often do you speak to her? Now? Earlier?

What would you like to do about that relationship?

Are there other women who have been mothers to you?

What about them stands out in you mind?

What would you like to do now?

Questions Related to Mourning Needs

It's difficult to have lost many people by coming into care and while in care. Please tell me about them, as many of them as you can.

Are there some people you've lost that you miss more? How have you been able to endure or deal with the pain?

Can you make a list of all the good things you remember about that person and some of their human frailties? No one is perfect. Are funny things you remember?

In the process of losing all these people, does it make you or anyone different?



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Some people say “everything happens for a purpose.” Do you believe that? How are you making sense of it?

Where do you get your support in this? What might others [social worker, caregiver, therapist, etc.] do?

Conversation Starter Questions Leading to Finding Connections

1. Name someone younger than you who looks up to you. How do you know that he or she looks up to you?
2. When you feel really sad or depressed, what is the one thing you know will help cheer you up?
3. Who was your first real friend?
4. What special qualities should a role model have?
5. What are three things about you that your friends would say make you a good friend to have?
6. Who would you talk to if you were feeling pressured to do something that you didn't want to do? Why would you choose this person?
7. Do you have a vision for who you want to become?
8. Would you rather be in a class that deals with a subject you love but whose teacher is boring, or would you rather be in a class you aren't excited about that has a passionate teacher? Have these situations happened to you?
9. What does the word 'respect' mean to you? To other students at your school? To teachers at your school?
10. Do you think you are a role model for anyone? Why or why not?
11. What's the best story you've ever heard about someone overcoming an obstacle?
12. Which friend makes you feel best about yourself? How does he or she do that?



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Resources Section



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Seeing the Voices of Children and Youth: Setting the Record Straight

The Video Project (summary)

The Video Project(TVP) is a new social work tool for a young person in foster care to be effectively heard. And in overcoming their hopelessness and helplessness, TVP supports them into safe, secure, permanent homes more quickly without adding to the burden on already busy social workers. It is a 6-segment healing process. Not a recruitment tool, per se, it allows young people to correct the largely negative information in their records, helps them regain a sense of control of their lives and reengages them in planning and developing their own permanence.

TVP is not really videography, but a theoretically well-founded social work project designed for every worker to use with every child in five minutes of the required monthly visits. It engages the child/youth, giving him/her a sense of positive control over his/her life. It opens or continues the dialogue about connections. Importantly, it “sets the record straight” about who the young person is and what they have experienced allowing the worker to really hear and see the young person separate from the recorded “facts” of their cases and diagnoses. As a truly functional “voice of youth” it neither glorifies that voice nor muffles it. And as a healing process, outlined in a protocol document,* it cannot be completed in a proscribed time frame and certainly not in isolation.

As with any new tool there is a learning curve. There is also the challenge of taking the knowledge and understanding and turning it into action. The one-day training takes a Video Project team from awareness to knowledge and understanding. The 10 follow-on, WebEx, consultation sessions assists them in the actual doing.

In the word of one of the pilot social workers:

I like the way it is so empowering for the youth. Often things are done "to" the youth and "for" the youth. This project proactively involves the youth and gives the youth a voice.

Endorsed by The U.S. Children’s Bureau Express

<http://cbexpress.acf.hhs.gov/index.cfm?event=website.viewArticles&issueid=131&articleid=3360>

Bob Lewis, www.rglewis.com

MEd, MSW, LICSW

TVP: www.rglewis.blogspot.com

*<http://www.rglewis.com/video%20project/TVP%20process%20&%20questions%20Mar%202012.pdf>



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RELEASE BY YOUTH or GUARDIAN

I consent to the photographing of myself and the recording of my voice and the use of these photographs and/or recordings singularly or in conjunction with other photographs and/or recordings for advertising, publicity, commercial, or other business purposes. I understand that the term "photograph" means both still photographs and motion picture footage.

I further consent and authorize _____ (*name of agency or company*) to reproduce and use said photographs and recordings of my voice for use in all domestic and foreign markets. Further, I understand that others, with or without the consent of _____ (*name of agency or company*), may use and/or reproduce such photographs and recordings.

I hereby release _____ (*name of agency or company*), and any of its associated or affiliated companies, their directors, officers, agents, employees, and customers, and appointed advertising agencies, their directors, officers, agents, and employees from all claims of every kind on account of such use.

If youth is under age 18: I, _____, am the parent/legal guardian of the individual named above, I have read this release and approve of its terms.

Youth's Name: _____

Youth's Signature: _____

Date: _____

Parent's/Legal Guardian's Name: _____

Parent's/Legal Guardian's Signature: _____

Date: _____

Stress Relief Exercises

Deep breathing for stress relief

With its focus on full, cleansing breaths, deep breathing is a simple, yet powerful, relaxation technique. It's easy to learn, can be practiced almost anywhere, and provides a quick way to get your stress levels in check. Deep breathing is the cornerstone of many other relaxation practices, too, and can be combined with other relaxing elements such as aromatherapy and music. All you really need is a few minutes and a place to stretch out.

The key to deep breathing is to breathe deeply from the abdomen, getting as much fresh air as possible in your lungs. When you take deep breaths from the abdomen, rather than shallow breaths from your upper chest, you inhale more oxygen. The more oxygen you get, the less tense, short of breath, and anxious you feel. So the next time you feel stressed, take a minute to slow down and breathe deeply:

- Sit comfortably with your back straight. Put one hand on your chest and the other on your stomach.
- Breathe in through your nose. The hand on your stomach should rise. The hand on your chest should move very little.
- Exhale through your mouth, pushing out as much air as you can while contracting your abdominal muscles. The hand on your stomach should move in as you exhale, but your other hand should move very little.
- Continue to breathe in through your nose and out through your mouth. Try to inhale enough so that your lower abdomen rises and falls. Count slowly as you exhale.

Guided imagery for stress relief

Visualization, or *guided imagery*, is a variation on traditional meditation that can help relieve stress. When used as a relaxation technique, guided imagery involves imagining a scene in which you feel at peace, free to let go of all tension and anxiety. Choose whatever setting is most calming to you, whether a tropical beach, a favorite childhood spot, or a quiet wooded glen. You can do this visualization exercise on your own, with a therapist's help, or using an audio recording.

Close your eyes and let your worries drift away. Imagine your restful place. Picture it as vividly as you can—everything you can see, hear, smell, and feel. Guided imagery works best if you incorporate as many sensory details as possible. For example, if you are thinking about a dock on a quiet lake:

- **See** the sun setting over the water
- **Hear** the birds singing
- **Smell** the pine trees
- **Feel** the cool water on your bare feet
- **Taste** the fresh, clean air



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Talking with Children and Youth:

Reaching unknowingly into Carl Rogers idea of “unconditional positive regard”, a young woman, former foster youth from the [Pasqua Yaqui Tribe](#) identified what she wanted, needed but didn’t often get from her social workers. Remembered with the mnemonic “3LT”, short hand for **Love, Listen Learn & Teach**, she wanted her social workers to care about her, listen to her, hear and learn her point of view before telling her what she was supposed to do.

The list relates very strongly to Rogers theories about a successful therapeutic relationship. That said, these areas may best be examined in questions for teams of social workers to answer and thereby identify their own best practice in working with children and youth, regardless of the child’s behavior, attitude or defensive posture at the outset.

1. How do the Children know we **Love** them? What do they experience? What do they see, hear? Etc.
2. How do they know we are **Listening**? Describe a workers (caregiver’s) demeanor that would signal to the child that the person is fully present and listening to him/her. Make a list.
3. What would convince a youth that the worker had **Learned** his/her point of view? What would the child perceive about the worker to know that he/she had learned the child’s feeling, ideas, attitudes, fears, etc.
4. Finally, what and how do social workers and others **Teach** most effectively? What do they learn from the most? What makes it easiest for them to learn?

Document the answers to these questions for an outline of best practice in taling with children and youth.

40 Developmental Assets

Search Institute has identified the following building blocks of healthy development that help young people grow up healthy, caring, and responsible.



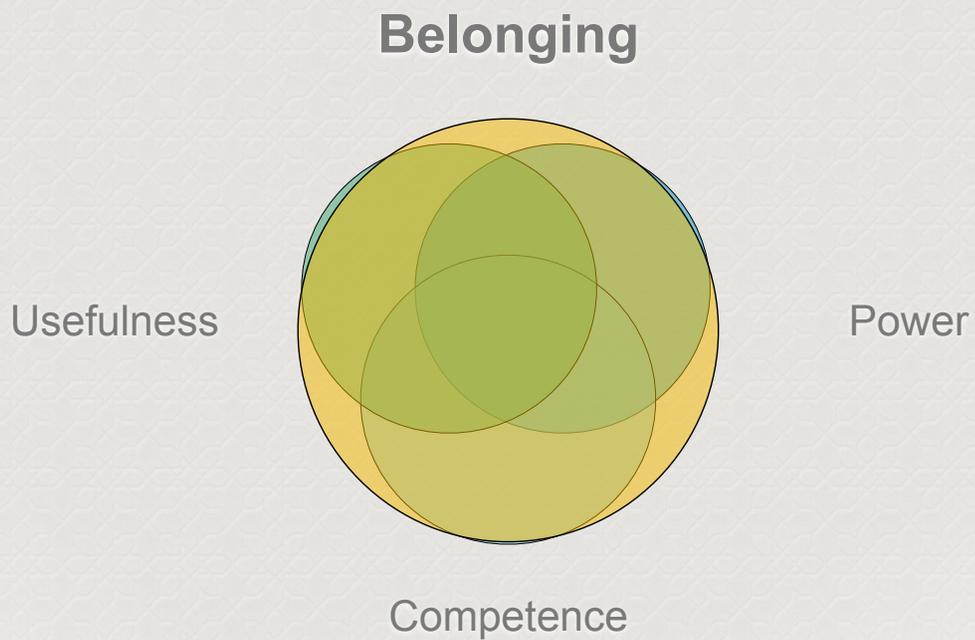
Category	Asset Name and Definition	
External Assets	Support <ol style="list-style-type: none"> 1. Family Support-Family life provides high levels of love and support. 2. Positive Family Communication-Young person and her or his parent(s) communicate positively, and young person is willing to seek advice and counsel from parents. 3. Other Adult Relationships-Young person receives support from three or more nonparent adults. 4. Caring Neighborhood-Young person experiences caring neighbors. 5. Caring School Climate-School provides a caring, encouraging environment. 6. Parent Involvement in Schooling-Parent(s) are actively involved in helping young person succeed in school. 	
	Empowerment <ol style="list-style-type: none"> 7. Community Values Youth-Young person perceives that adults in the community value youth. 8. Youth as Resources-Young people are given useful roles in the community. 9. Service to Others-Young person serves in the community one hour or more per week. 10. Safety-Young person feels safe at home, school, and in the neighborhood. 	
	Boundaries & Expectations <ol style="list-style-type: none"> 11. Family Boundaries-Family has clear rules and consequences and monitors the young person's whereabouts. 12. School Boundaries-School provides clear rules and consequences. 13. Neighborhood Boundaries-Neighbors take responsibility for monitoring young people's behavior. 14. Adult Role Models-Parent(s) and other adults model positive, responsible behavior. 15. Positive Peer Influence-Young person's best friends model responsible behavior. 16. High Expectations-Both parent(s) and teachers encourage the young person to do well. 	
	Constructive Use of Time <ol style="list-style-type: none"> 17. Creative Activities-Young person spends three or more hours per week in lessons or practice in music, theater, or other arts. 18. Youth Programs-Young person spends three or more hours per week in sports, clubs, or organizations at school and/or in the community. 19. Religious Community-Young person spends one or more hours per week in activities in a religious institution. 20. Time at Home-Young person is out with friends "with nothing special to do" two or fewer nights per week. 	
	Internal Assets	Commitment to Learning <ol style="list-style-type: none"> 21. Achievement Motivation-Young person is motivated to do well in school. 22. School Engagement-Young person is actively engaged in learning. 23. Homework-Young person reports doing at least one hour of homework every school day. 24. Bonding to School-Young person cares about her or his school. 25. Reading for Pleasure-Young person reads for pleasure three or more hours per week.
		Positive Values <ol style="list-style-type: none"> 26. Caring-Young person places high value on helping other people. 27. Equality and Social Justice-Young person places high value on promoting equality and reducing hunger and poverty. 28. Integrity-Young person acts on convictions and stands up for her or his beliefs. 29. Honesty-Young person "tells the truth even when it is not easy." 30. Responsibility-Young person accepts and takes personal responsibility. 31. Restraint-Young person believes it is important not to be sexually active or to use alcohol or other drugs.
		Social Competencies <ol style="list-style-type: none"> 32. Planning and Decision Making-Young person knows how to plan ahead and make choices. 33. Interpersonal Competence-Young person has empathy, sensitivity, and friendship skills. 34. Cultural Competence-Young person has knowledge of and comfort with people of different cultural/racial/ethnic backgrounds. 35. Resistance Skills-Young person can resist negative peer pressure and dangerous situations. 36. Peaceful Conflict Resolution-Young person seeks to resolve conflict nonviolently.
		Positive Identity <ol style="list-style-type: none"> 37. Personal Power-Young person feels he or she has control over "things that happen to me." 38. Self-Esteem-Young person reports having a high self-esteem. 39. Sense of Purpose-Young person reports that "my life has a purpose." 40. Positive View of Personal Future-Young person is optimistic about her or his personal future

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<http://www.hsph.harvard.edu/chc/parenting/raising.html>

Four Strengths for Success

What is Permanence?



That leads to success.



*Seeing the voices of children and youth,
Setting the record straight*

Preparing for (re)connection

In helping young people prepare for connection to additional adults in their lives, special needs adoption staff identified these 5 elements of preparation that are important to a child's connection to new adults in their lives or to return home.

Loyalty

Many teens believe they have to give up their parents in order to connect with additional caring, parenting adults. So much of the structure of child welfare has been alternative parenting rather than shared parenting that the young people haven't learned that they have numbers of caregivers. It happens all the time – parenting is shared.

But for teens they may not want to call it parenting, so descriptive works work best

Loss

Children and youth in care are struggling to understand and cope with the losses in their lives. They have virtually no understanding that anger, hurt, bargaining, denial, and acceptance are part of everyone's experience of loss. If they've heard it, they may not have related the "stages" to the crazy feeling they are experiencing. Painful as it is to do, grief work is a learned skill. Most adults learn how s/he grieves and accepts that "life is loss".

For teen, however, grief is not just traumatic, it's also developmental.

Note the Mourning Needs list above.

Self Esteem

Returning to Carl Rogers, perhaps, everyone needs self esteem. In this context, it's clear that no one can give it to a young person, but caregivers and others can build an environment that fosters its development

Behavior Management

Behaviors come from a child's developmental level, the stages of grief often compounded by "ambiguous loss" and survival behaviors that work in a crisis environment, but don't work under ordinary circumstances. The challenge for the worker and the child is sorting them out. It's important to note, however, that it is extremely difficult to give up survival behaviors when one is one mistake away from being moved (regardless of one's wishes) as is the care of living in foster care.

Self Determination

Noting the 4 ingredients for success as identified in the Youth Development literature noted above, foster youth are often afflicted with a sense of hopelessness and helplessness. They seldom get to make meaningful decisions in their own lives and are at risk of precipitous change for as long as they are parented in public. Empowerment is an essential element of (re)connection.



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The 3-5-7 Model for preparing children & youth for permanence

Completing 3 tasks (CIA)⁴

1. clarification,
2. integration,
3. actualization

Answering 5 questions:

1. What happened to me? (Loss)
2. Who am I? (Identity),
3. Where am I going? (attachment)
4. How will I get there? (Relationships)
5. When will I know I belong? (Claiming & Safety)

7 Critical elements

Workers need to

1. Engage the child in the process
2. Listen to the child's words
3. Speak the truth
4. Validate the child and his/her life story
5. Create a safe space for the child to do his/her work
6. Allow that it is never too late to go back in time, and
7. Acknowledge that pain is part of the process

⁴ [Darla Henry, "The 3-5-7 Model: Preparing children for permanency"](#)

Trauma recovery tips⁵

Recovering from emotional and psychological trauma takes time. Give yourself time to heal and to mourn the losses you've experienced. Don't try to force the healing process. Be patient with the pace of recovery. Finally, be prepared for difficult and volatile emotions. Allow yourself to feel whatever you're feeling without judgment or guilt.

Staying grounded: A trauma self-help exercise

It is very important to stay 'grounded.' If you are feeling disoriented, confused, or upset, you can do the following exercise:

- Sit on a chair. Feel your feet on the ground. Press on your thighs. Feel your behind on the seat and your back against the chair.
- Look around you and pick six objects that have red or blue. This should allow you to feel in the present, more grounded, and in your body. Notice how your breath gets deeper and calmer.
- You may want to go outdoors and find a peaceful place to sit on the grass. As you do, feel how your body can be held and supported by the ground.

Source: Gina Ross and Peter Levine, [Emotional First Aid](#)

Trauma self-help strategies:

- **Don't isolate.** Following a trauma, you may want to withdraw from others. But isolation makes things worse. Connecting to others will help you heal, so make an effort to maintain your relationships and avoid spending too much time alone.
- **Ask for support.** It's important to talk about your feelings and ask for the help you need. Turn to a trusted family member, friend, counselor, or clergyman. You may also want to join a support group for trauma survivors. Support groups are especially helpful if your personal support network is limited.
- **Establish a daily routine.** In order to stay grounded after a trauma, it helps to have a structured schedule to follow. Try to stick to a daily routine, with regular times for waking, sleeping, eating, working, and exercise. Make sure to schedule time for relaxing and social activities, too.
- **Take care of your health.** A healthy body increases your ability to cope with stress. Get plenty of rest, exercise regularly, and eat a well-balanced diet. It's also important to avoid alcohol and drugs. Alcohol and drug use can worsen your trauma symptoms and exacerbate feelings of depression, anxiety, and isolation.

⁵ http://helpguide.org/mental/emotional_psychological_trauma.htm



Seeing the voices of children and youth,
Setting the record straight

From Healing the Hidden Wounds of Racial Trauma

Dr. Kenneth V Hardy

Internalized Devaluation

A toxic human mold, hard to see yet ever spreading, gnaws at the dignity of youth of color. They are oblivious to this infection but emotionally reactive to its effects (Hardy & Qureshi, 2012). *Internalized devaluation* is a direct by-product of racism, inextricably linked to the deification of whiteness and the demonization of non-white hues. It is perpetrated throughout society, including in the very systems with the stated mission of serving youth.

Assaulted Sense of Self

The *assaulted sense of self* is the culmination of recurring experiences with internalized devaluation. Continual exposure to devaluation shapes how youth of color see themselves. It becomes very challenging to develop a healthy sense of self when one's emotional-psychological milieu is inundated with the repeated race-related messages such as: *you are not as attractive as... not as smart as... too dumb to... not intelligent enough to... ..and so forth.*

Internalized Voicelessness

... erodes the ability to defend against a barrage of unwelcomed and unjustified negative, debilitating messages. While these wounds are described here in a linear and distinct fashion, they are experienced in a systemic, inter-tangled way. For example, voicelessness both results from and fuels internalized devaluation and an assaulted sense of self.

The Wound of Rage

It is virtually impossible to be the depository of perpetual negative and debilitating messages and have one's sense of self assaulted without experiencing rage. Rage can be a deep-seated emotional response to experiences of degradation and devaluation. Rage builds over time as a result of cumulative suppressed emotions precipitated by voicelessness. It is distinguishable from anger, which is an emotion connected to immediate experiences. Rage is a very complex emotion that can appear as anger, explosiveness, sadness, and depression.

From Healing the Hidden Wounds of Racial Trauma

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1. ***Affirmation and Acknowledgement.*** It is important for the helping professional to convey a general understanding and acceptance of the premise that race is a critical organizing principle in society. Through affirmation and acknowledgement, we allow conversations about race to emerge.
2. ***Create Space for Race.*** Conveying a sense of openness and curiosity, we take a very proactive role in encouraging conversations about race. An effort is made to identify race as a significant variable, and we encourage youth to talk openly and candidly about race and their respective experiences with it.
3. ***Racial Storytelling.*** Young people are invited to share personal stories of racial experiences. This enables them to develop their voices and begin to think critically about their experiences growing up as youth of color. Examples of specific questions to encourage storytelling are: 1) Can you tell me a story about the first time you realized you were treated differently because of your race? 2) Can you tell me about a time when someone attempted to dis' you based on your race? 3) Can you tell me a story about a time when you felt proud to be (Asian, Latino, African American, Native American, etc.)? Youth gain a better understanding of how their lives are affected by race, and they expose hidden wounds embedded in their life stories.
4. ***Validation.*** This is a tool for counteracting devaluation and an assaulted sense of self. Validation is much more specific and personalized than the affirmation and acknowledgement process described in Step One. Rather than conveying a global knowledge about race, validation provides confirmation of a youth's worldview and worth. We also discover strengths and redeemable qualities of the young person, and the youth's small acts of heroism are pointed out. Although suffering from internalized devaluation and an assaulted sense of self, there is an untapped hero within that has been overshadowed by stereotyping, pathologizing, demonizing, and criminalizing. For example, when Angel shared his gut-wrenching experiences on the subway where he was presumed to be a criminal, it would be important to validate the *untapped hero within* who is perceptive, sensitive, and able to exercise incredible restraint during the midst of such painful and infuriating racial micro-aggressions.
5. ***The Process of Naming.*** One of the most debilitating aspects of racial oppression is that this is a nameless condition, difficult to describe, quantify, or codify. Lacking a common language to convey what is happening deepens the self-doubt/self-denigration cycle. The major objective of this step is to affix words to racially based experiences. This offers external and consensual validation to racially oppressed youth and helps restore their voices. As we "name" the hidden wounds of racial oppression, we help youth understand how their lives are significantly impacted by them.
6. ***Externalize Devaluation.*** This is a direct way to heal the wounds of internalized devaluation. Stated simply, we help youth understand why respect and the absence of respect are so important. They learn to recognize that devaluation and disrespect are directly connected to race and race oppression. Further, some of their problem behavior may have been counterproductive ways to try to gain respect. The goal is to increase their thirst for respect and to recognize that assaults on their dignity do not lessen their self-worth.

7. ***Counteract Devaluation.*** The process of externalization described above helps youth of color exhale and expunge the societal toxins regarding who they allegedly are. Step Seven endeavors to provide an array of resources (emotional, psychological, and behavioral) that help build their strengths and provide a buffer against future assaults to their dignity and sense of self. This is vital if they are to successfully cope in the face of unrelenting messages from the broader society that can have a debilitating effect on their sense of self.

8. ***Rechannelling Rage.*** The pain of rage is a normal and predictable response to perpetual experiences with degradation, devaluation, and domination. It is the build-up and culmination of emotions that have been blocked expression (Gil, Vega, & Turner, 2002). As previously noted, there is a strong relationship between voicelessness and rage. Unless rage is properly channeled, it can be all-consuming, displaced, and destructive to self and others. Those who have rage are often enraged for good reasons. Thus, the goal of treatment is not to rid them of their rage but instead to help them be aware of it, gain control of it, and ultimately to redirect it. Rechanneled rage can be a powerful energy source helping youth of color to discover and cultivate what is great in and about them. It drives them to stand again after they have been knocked down, to try again after not succeeding, and to believe in themselves when all others around them fail to do so. These are the positive outcomes of healing the hidden wounds of racial oppression.



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Setting the record straight*

Stages of Grief

Shock/Denial: *You cannot believe what has happened. You feel like you have been through a war. You are in shock. You may be silent, withdrawn. You may feel like eating, or you may overeat. You may eat nothing. You may have trouble sleeping or feel like sleeping all the time. Maybe you create a make-believe world and live in that world. You probably don't want to talk to anyone about your loss.*

Guilty/Bargaining: *In this stage, you may promise to be good if only the lost thing or person would come back. If the loss is loss of your family, you may act out or become rebellious in the hope of returning home. You may run without a specific destination. You feel responsible.*

Hurt/Anger: *You may become destructive or disrespectful of your things or things other people have. You may be uncooperative. You find yourself always yelling or threatening others. You may do things that could hurt you or others that you might regret later. You may mess up in school.*

Desperation/Depression: *Nothing matters. You feel no interest or enthusiasm in any activities other than watching TV or listening to music. You may cry a lot or sleep a lot. You may feel like skipping school or have an "I don't care" attitude. You cannot do any schoolwork. Even though you are smart enough, you just cannot study.*

Understanding/Acceptance: *You may feel ready to form a new relationship with other people. You may feel more confident and have a positive attitude about new challenges (looking for a job, trying out for a team or club) with less frustration and fear. You begin to talk about and have hopes and plans for the future. Once you accept, it may trigger the shame and guilt you feel. You now try to undo what you have successfully completed.*



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Understand the six needs of mourning

From "Healing your Grieving Heart" by Alan D. Wolfelt, PhD
Adapted for children in care

1. Acknowledge the reality of the loss.

- ~gently confront yourself
- ~it may occur over weeks and months (this is ok)
- ~acknowledge your loss with your head and then your heart
- ~keep in mind that integration comes in doses, as you are ready

Tell someone about the loss today. This will help you work on this important need.

2. Embrace the pain of the loss.

- ~we don't naturally want to do this -- it's easier to avoid
- ~this is how you learn to reconcile yourself to it
- ~dose yourself on embracing your pain as you need to -- you can't do it all at once.

Reach out and spend time with someone who doesn't try to take your pain and sense of loss away.

3. Remember the person who's gone.

- ~he/she stays on through our memories
- ~actively remember and commemorate the good things you remember; it's healthy
- ~never let someone else try to take your memories away (trying to help you); it's good for you to continue to display those pictures.
- ~remembering the past makes hoping for the future possible.

Brainstorm a list of characteristics or memories of the person who's gone. Write as fast as you can for ten minutes, then put away the list for future reflection.

4. Develop a new self-identity.

- ~part of who you are was formed by the relationship you had with that person who is gone.
- ~the way you defined yourself and the way society defines you has changed (ex: to foster kid, adoptive kid, etc.)
- ~re-anchor yourself, reconstruct your self-identity. This is long and hard work.
- ~you may discover some positive changes as you work on this (more caring, less judgmental, more strong)

Write this statement down: I used to be _____. Now that _____, I am _____. This makes me feel _____.

5. Search for meaning.

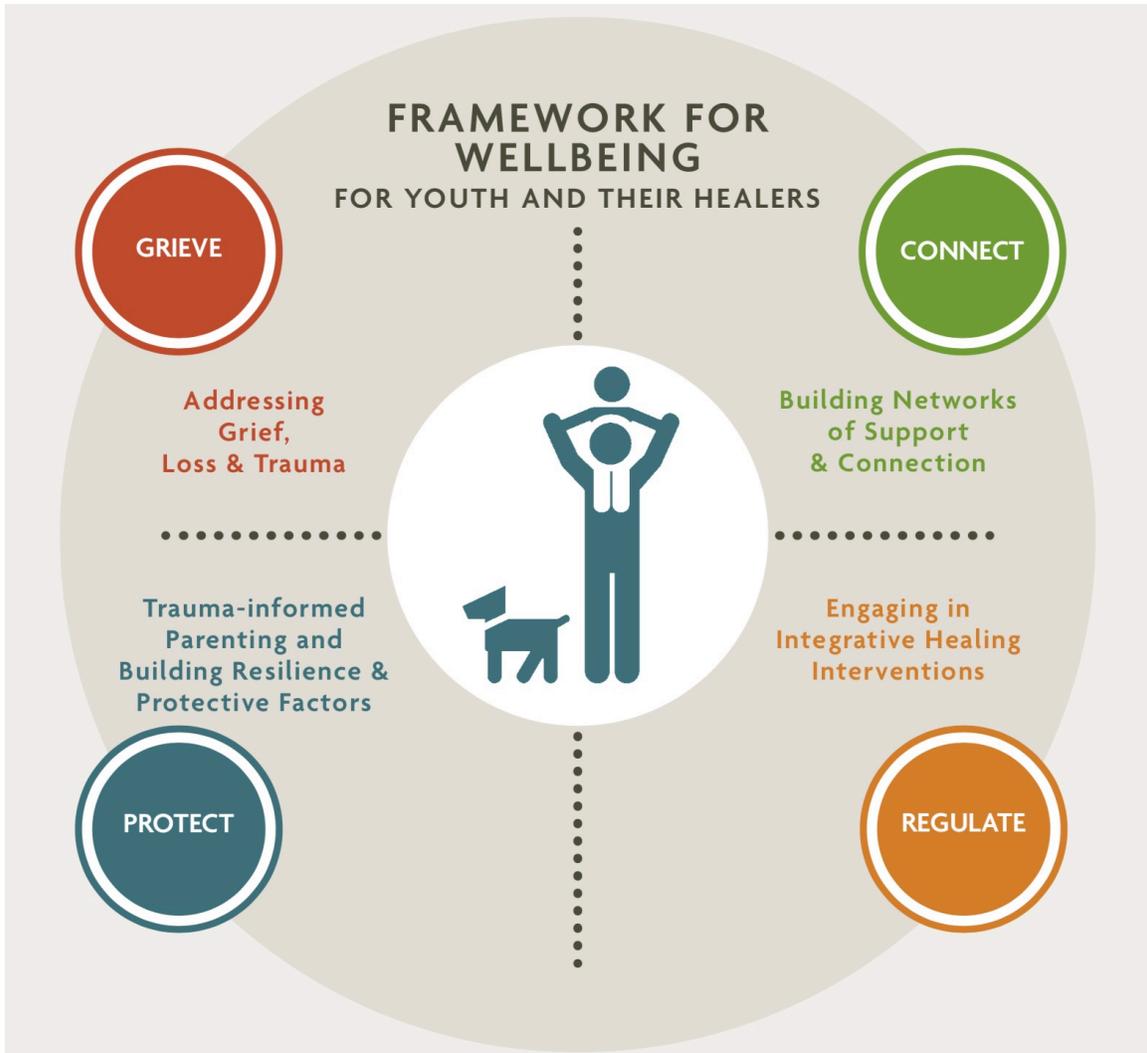
- ~naturally you will question the meaning and purpose of life
- ~Why and How questions may surface uncontrollably. (Why did this happen? How will I go on?)
- ~question philosophy of life, explore different religions and spiritualities
- ~"Blessed are those who mourn for they shall be comforted." Even if you have faith, you still need to mourn.

Write down a list of 'why' questions that have come up for you since the death. Go through them with a friend or counselor who won't feel she has to give you all the answers.

6. Receive ongoing support from others.

- ~we need the love and understanding of others to heal.
- ~don't feel ashamed of your dependence right now; revel knowing others care for you.
- ~society places too much value on "doing well" and "carrying on" that we lose support too soon.
- ~grief is a process not an event. You will need support for weeks, months and years.

Friends want to help but don't know how. Call them and tell them you'll need help in the coming weeks.





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First Recording: The Camera, the Software and Permission

“My Story: Setting The Record Straight” is a way for you (name) to tell your own story of what happened to you from before you came into care, while you were in care and what you hope for the future and to record it on video for yourself and for your permanent record. Do you understand that?

We will work on this video together through a series of questions over time that you are the only one who has the “right” answers for. You can delete any recording you wish to eliminate or redo. Do you understand? Do you have any thoughts or comments on that?

Telling ones’ own story is a healing process as well. If the telling of your story becomes more troubling for you I will ask you to talk about it with a professional of your choosing. Do you understand and agree?

You will own the finished product both personally and as a part of your personal, confidential record. Do you agree with that and do you have any questions about that?

Since this is your story, you also may give permission to share your story or any part of your story as you and/or your parent/guardian agree. For example some young people want to share their stories with people who may want to get to know them better, lost relatives, for example, and/or to let professionals in child welfare know what happened to you so that you might help some other young people in care. What do you think of that?

You DO NOT have to share your story with anyone. Are you clear about that? Do you have any other questions?

Are you ready to start the process?”

Second Recording: Before I came into care...

Please tell me about your life before you came into care.

What do you remember? What have others told you?

What stories do you have from that time, either told to you or remembered?

What did you think of your life then? Can you remember how you felt then; can you talk about it?

What do you think of it now?

What have you taken with you from that time? (For a limited young person ask about specific things, pictures, toys, anything they have from that time and ask him/her to talk about it.)

What have you left behind? Are there some things you lost; can you talk about them?

What do you want to leave behind?

What (from that time) do you want to make sure you take into the future, things, ideas, feeling, relationships?

Anything else?



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Third Recording: The day I came into care...

What was it like, the day you came into care?

Describe what went on around you, what it felt like, as best you can.

What were your fears, concerns? What hopes did you have?

What really happened?

What might the professionals have done differently?

Was there anything you were told at that time that isn't quite right?

What do you want to be sure to remember?

What would you like to let go of?

Anything else?



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Fourth Recording: In foster care...

Please describe your journey through foster care. You can take it place-by-place or event-by-event, or any other way you want to describe your journey.

What did those homes/places mean to you?

Can you tell me a little bit about what that was like?

Talk about all the things that you hoped for, and what happened to those hopes as best you can.

What were the good and bad of what happened to you?

Talk about the things that frightened you.

Describe what it was like to have to move from one place to another.

Who were the significant people during your stay in foster care? Why were/are they important to you (good or bad reasons)?

What might they have done differently? And now?

Anything else?



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Fifth Recording: It's really like this...

How would you put it all together to answer the question “What has happened to you?”

How about the question “Who am I?” How do you answer that for yourself now?

Can you think of all the people who have loved you?

What is it about you that has helped them to love you?

What is it about you that allows you know where you're going?

How can a person help you on your path?

Who might do that? Are there others?

How do you feel now about being in foster care? How does it impact the choices you make today? How do you think that may be different in the future?

What might professionals and others have done differently?

Anything else?



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Sixth Recording: In the future, I hope...

The name of this session is “In the future, I hope...”; what do you want in your life in the future?

Who do you want to help you get there?

How do you think being in foster care will impact your future?

If you could have anybody, whom would you want in your life in the future? And how could they be part of your life?

Is there anyone you would involve if you were not ashamed of being in foster care or other things?

Is there someone you would involve whom you think is legally forbidden?

Imagine yourself to be safe and secure. What makes it safe, secure? Who is there with you?

What do you want to do next?

What question should I have asked that I didn't through this whole process?

Is there anything else you want to say to set the record straight?

Ok, let's put it all together.