

SUPPORTING YOUTH IN FOSTER CARE IN
MAKING HEALTHY CHOICES



A Guide for Caregivers and Caseworkers on Trauma, Treatment, and Psychotropic Medications

TABLE OF CONTENTS

About This Guide	1
Highlights of This Guide.....	2
A Message From Youth to Their Caregivers and Caseworkers	3
A Few Words About Confidentiality	5
1. Using <i>Making Healthy Choices</i> With Youth	7
2. Understanding Trauma and Behavioral/Mental Health of Youth	9
When does trauma happen, and what are its effects?.....	9
How can you promote healing for youth who have experienced trauma?.....	10
3. Understanding Different Treatments	15
How is treatment different for youth who have experienced trauma?	15
How can therapy help?	16
What other approaches can be helpful?	17
What is the possible role of psychotropic medication?	19
4. Seeking Help for Youth	21
How do you know youth are struggling and may need help?.....	21
How do you get a professional assessment and evaluation?	22
How is a treatment plan made?	24
What is informed consent?	25
How can a planning team help?.....	26
How do you find a treatment provider?.....	28
What questions should you ask providers about medication and treatment plans?.....	29
5. Monitoring Treatment and Supporting Progress	32
How can you support youth in taking medication safely?	32
How can you support youth participating in therapy or other helpful approaches?	34
How can you watch for changes and check progress over time?	34
How can you help youth who are transitioning out of foster care?.....	36
How can you help yourself when working with youth in care?.....	39
Acknowledgments	40

The contents of this guide are for informational purposes only and do not substitute for professional medical advice. This guide does not replace State or local agency protocols or policies that caseworkers, supervisors, and caregivers are required to follow.

ABOUT THIS GUIDE

Youth in foster care or kinship care often have experienced abuse, neglect, chaotic living situations, and placement(s) away from their families. Their histories can lead to complicated emotions and behaviors, and many experience trauma. While youth can heal, often it will take small steps over time with stability, supports, and services.

To help youth in foster care understand and make decisions about their mental health care, in 2012 we published *Making Healthy Choices: A Guide on Psychotropic Medications for Youth in Foster Care*. (Find it, in English and Spanish, at <https://www.childwelfare.gov/pubs/makinghealthychoices/>.) The guide for youth provides valuable information about recognizing the need for help, considering treatment options, asking questions, and taking medication safely.

Even then, we knew that publishing a guide for youth was not enough and that caseworkers, foster parents, relatives, and other adults who care about youth in foster care needed some guidance to support youth. So, this companion guide is intended to help you as a caseworker, foster parent, other caregiver, or other caring adult to use *Making Healthy Choices* with youth. You are a key part of the young person's team, and your role is particularly important for a young person who may be struggling with the effects of trauma and/or improving his or her mental health.

Many young people in foster care are prescribed psychotropic medication(s) to help treat their emotions and/or behaviors. We know that use of psychotropic medication in the foster care population is higher than use in the general population.¹ In fact, evidence points to some inappropriate use of psychotropic medication with youth in foster care.² While some youth may benefit from medication to treat certain illnesses, these drugs may be harmful if not used appropriately. Also, medications do not address the causes of the trauma, that is, what's often triggering the emotions and behaviors. So, even those youth who benefit from medication may need other trauma-informed mental health services.

This guide is designed to help you learn more about treatment for youth in foster care who have experienced trauma and are working to improve their mental health. Chapters 2 and 3 can help you better understand trauma and treatments for trauma. Chapters 4 and 5 talk about strategies for helping youth.

NOTE

While young children in foster care also have treatment needs, *Making Healthy Choices* and this companion guide are meant for use with preteens, adolescents, and young adults.³

¹ Stambaugh, L. F., Leslie, L. K., Ringeisen, H., Smith, K., & Hodgkin, D. (2012). *Psychotropic medication use by children in child welfare*. Retrieved from http://www.acf.hhs.gov/sites/default/files/opre/psych_med.pdf

² Fernandes-Alcantara, A. L., Caldwell, S., & Stoltzfus, E. (2014). *Child welfare: Oversight of psychotropic medication for children in foster care*. Washington, DC: Congressional Research Service.

³ Information about younger children may be found through the following links: <http://www.aap.org/fostercare>, <http://www.nctsn.org>, <http://www.samhsa.gov>, and <http://www.zerotothree.org>.

HIGHLIGHTS OF THIS GUIDE

We've tried to make this guide a useful resource for adults working with youth in foster care. Here are some of the most important points:



- **Consider options besides medication.** While psychotropic medication may be helpful for some youth, it should rarely be the first and only treatment option. There are a number of other treatment options, such as therapy.
- **Learn about safe medication use.** If a young person is prescribed medication, learn how it works, including side effects and expected benefits.
- **Empower youth and give them a voice.** Get youth involved in regular and ongoing discussions about how they are feeling, treatment options and decisions, and the importance of taking care of themselves.
- **Learn about trauma and its effects.** Many youth have suffered trauma as a result of their experiences in their families or neighborhoods (including abuse and neglect), removal from their homes, and placement in foster care. This trauma may affect their development and behavior and the way they interact with others. You will need to work in partnership with trauma-informed treatment providers to help youth heal and learn healthy coping skills.
- **Honor youth's specific ethnic, racial, cultural, and sexual identities.** This includes their native languages as well as their beliefs, values, and attitudes about care and treatment. We need to welcome cultural and religious practices and the use of spiritual traditions, some of which may be considered "nontraditional" but are important to youth's identities. We also need to support youth in building a deeper understanding of their identities, including sexual orientation and gender identity.
- **Don't be afraid to ask lots of questions of the doctors and specialists who provide services to youth in your care.** The more you understand, the better you are able to advocate for the needs of young people.
- **Have realistic expectations of yourself, the young person, and your relationship.** When needed, seek support for yourself.

A MESSAGE FROM YOUTH TO THEIR CAREGIVERS AND CASEWORKERS

A message from youth around the country who participated in the Young Adults Training and Technical Assistance Network under the National Resource Center for Youth Development:

It is important for us to know that the adults in our lives care about us and are working together with us to act in our best interests. We need support and encouragement to understand the issues we are facing and to seek the help we need. But we also want to be heard and want to have a say in decisions being made. This guide will provide you with a lot of information, but here is what is most important to us:

- Ask us what we think and want. If there is something we are not happy about, or we are doing something you might not advise (like dropping out of counseling), take time to understand why, rather than fighting against us.
- We don't always know what is best for us, but when our opinion is paired with those who have expertise in certain areas, the outcome will be better.
- Engage with us about our needs, but use language we can understand. Take time to explain things to us, like what certain medications do, what our diagnosis means, etc. Do it in a way that is not intimidating or stigmatizing.





- Ask us if we want you to go with us to any of our appointments or need support, and then make the time to do so. Ask questions like:
 - “Do you want me to come with you?”
 - “Do you know how appointments like this work?”
 - “Do you know how to fill out the forms?”
- We want to feel safe in uncomfortable situations. If you can’t take us to an appointment, and the agency is going to arrange for a driver, make sure we’re comfortable with this. Work with us to come up with a better solution if we’re not feeling okay about it.
- If we aren’t following the treatment plan, talk with us about how we’re feeling. Maybe we don’t feel we’re benefiting from therapy or medication. Or maybe we’re afraid of medications. Or maybe we don’t want to attend “traditional” therapy and prefer another way for working through our issues.
- Please don’t make us feel like we are the problem.
- Even after we turn 18, we may want your support, advice, and guidance. We may still want you to go with us to some appointments. Stay connected with us, and help us understand how important it is to keep on top of our medical and mental health needs.
- We might fight against something if we are not informed and are struggling with trust. Do everything you can to see things from our perspective and personal background. We just want to be cared for, cared about, and heard.

A FEW WORDS ABOUT CONFIDENTIALITY

The issues of privacy and confidentiality for young adults are very important. Research has shown that concerns about confidentiality can affect youth's openness in discussing their health histories and willingness to accept treatment services.⁴

Confidentiality can be a complicated issue. It is guided by both Federal and State laws and varies depending on the age and circumstances of the young adult.

- **For youth under the age of majority.** The child welfare agency is responsible for making sure that youth in foster care receive needed health and mental health care. Even so, it is important for youth to feel that they can talk privately with a doctor, therapist, or other treatment provider. There are several ways to support youth's treatment and respect confidentiality:
 - Talk with health- and mental health-care providers to understand confidentiality laws in your State.
 - Ask providers if they have general guidelines about which types of information (for example, safety concerns) will be shared with parents, foster parents, guardians, or caseworkers.
 - Partner with providers and youth to establish clear rules for when information will be shared with parents, foster parents, or caseworkers.
 - Let youth know when information is about to be shared and with whom so that youth are comfortable with such sharing and the reasons for it.

KEY TERMS

CONFIDENTIALITY:

The right to discuss private information with doctors, therapists, or other health- and mental health-care providers and to trust that such information will not be shared without permission.

CONSENT:

To give permission for something to happen, such as treatment or information sharing.

AGE OF MAJORITY:

The age at which a young person is considered an adult by law. In most States, the legal age of majority is 18, but in some States it is 19 or 21.



⁴ National Institute for Health Care Management Foundation. (2011). *Protecting confidential health services for adolescents and young adults: Strategies and considerations for health plans*. Issue brief. Retrieved from <http://www.nihcm.org/images/stories/NIHCM-Confidentiality-Final.pdf>



KEEP IN MIND

It is important to explain to youth what consent and confidentiality mean in ways they can understand. In addition, youth should not be forced to sign consent forms to share confidential information. If a young person opposes sharing information that a service provider, caseworker, foster parent, or relative feels should be shared with others, talk with the young person about the reasons why.

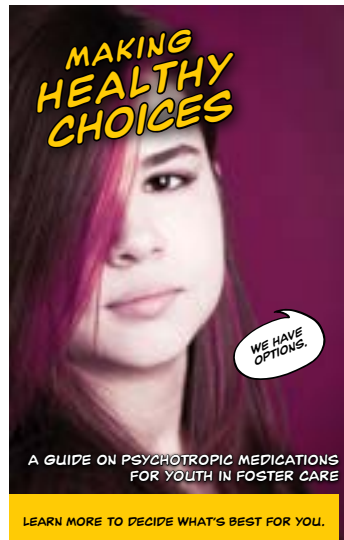
- **For young adults who are over the age of majority or meet special circumstances outlined in State law.**⁵ These youth can consent to treatment and must agree in writing before health- or mental health-care information can be shared. Even then, certain information will have to be shared, such as when a young person expresses plans to harm him or herself or others. There are several ways to support these youth:
 - Assure youth that their treatment is confidential.
 - Let youth know you are there if they want to share concerns or need your support in talking with a provider.
 - Encourage youth to talk with their providers about when information will have to be shared.

⁵ Special circumstances may include youth under the age of majority who are emancipated (for example, youth who are serving in the military or are married). Also, in many States, laws allow youth under the age of majority to consent to certain types of services (such as services for substance abuse treatment, birth control, sexually transmitted diseases, or certain emergency care).

1 USING MAKING HEALTHY CHOICES WITH YOUTH

Making Healthy Choices is a tool to engage youth in decisions about their physical and mental health. You can present the booklet to youth as part of a larger discussion about their goals for their own well-being, including their physical health and emotional wellness. Do this in a supportive way that encourages youth to think and talk about their strengths, concerns, needs, and preferences.

To help youth recognize when they might need help, *Making Healthy Choices* contains “symptom checklists.” (See Section #1.) These checklists and other worksheets can help youth identify troubling symptoms and talk about their concerns with trusted adults. Completion of checklists and worksheets should be optional; never require youth to give completed worksheets to caseworkers, service providers, caregivers, or others.



KEEP IN MIND

Youth must feel safe in sharing honest information about their experiences. This information should not be used against them in any way.

GET COPIES OF *MAKING HEALTHY CHOICES* FOR YOUTH IN YOUR CARE OR SUPERVISION:

Online in English

<https://www.childwelfare.gov/pubs/makinghealthychoices/>

Online in Spanish

<https://www.childwelfare.gov/pubs/makinghealthychoices-sp/>


In print from Child Welfare Information Gateway

Email info@childwelfare.gov or call 800.394.3366



TIPS FOR USING *MAKING HEALTHY CHOICES* WITH YOUTH

- ❑ **Set aside time on a regular basis to talk** about youth's health, feelings, and goals. Focus first on strengths and progress, and then move to any areas where youth may need assistance.
- ❑ **Introduce *Making Healthy Choices* as a tool** that can help youth with thinking about experiences, needs, strengths, and helpful treatment options.
- ❑ **Provide an overview of what's in the booklet** and how it can help youth make decisions about their health. Point out the checklists and worksheets. Some youth may feel comfortable reading through the booklet and completing the checklists and worksheets on their own. Others may wish to go through each section with a trusted adult.
- ❑ **Inform youth that using the booklet is their choice.** There should be no requirement to complete the checklists or worksheets. Some youth may want to talk about the checklists and worksheets with a doctor or therapist, while others may not. Some may not want to use the booklet at all. Allow youth to be in control of their health information.
- ❑ **Assure youth that the information they share with you will not be used against them.** Supporting them to find appropriate help requires open, honest conversations.
- ❑ **Encourage youth to talk through what they learn in the booklet** with you, their health-care providers, and/or other trusted adults. Listen carefully when youth share their wishes (such as "I want to be off medication"). Work together with youth and their health-care professionals to develop short-term and long-term strategies for achieving goals.
- ❑ **Talk about plans** for next steps.

As you go through the rest of this guide, look for the following icon to alert you to related sections in the *Making Healthy Choices* booklet for youth: 

2 UNDERSTANDING TRAUMA AND BEHAVIORAL/MENTAL HEALTH OF YOUTH

This chapter provides background information on trauma. This information may help you understand why youth behave in certain ways and how you can respond most effectively. When adults don't understand what's happening with youth who have experienced trauma, trauma symptoms may just seem like difficult behavior ("he refuses to behave in school" or "she shuts down when I'm talking"). These symptoms and behaviors are sometimes managed with psychotropic medications, which do not address the underlying issues of trauma.

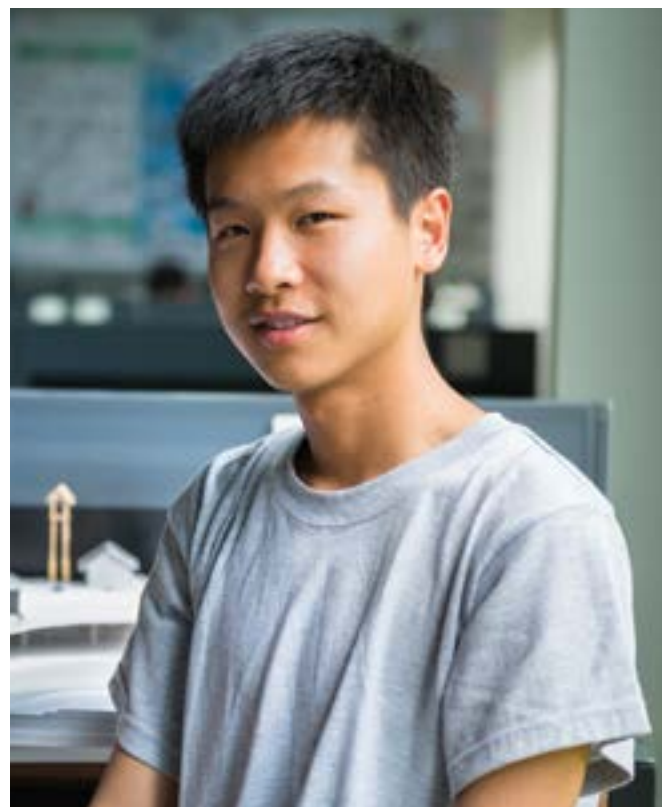
When does trauma happen, and what are its effects?

Trauma is an emotional response that happens after a person experiences one or more stressful or scary events. Traumatic stress occurs when that trauma leads to harmful effects on physical and emotional health and well-being. The stressful or scary events can be real or perceived (felt to be real). Trauma may affect the person who experienced the event or someone else who cares about that person.

Trauma in the lives of children and youth involved with child welfare often results from the following:

- Physical, sexual, or emotional abuse
- Neglect
- Chaotic and unpredictable parenting
- Parents with mental health, physical health, or substance abuse challenges
- Seeing or being around violence in the home or community
- Separation from or loss of a parent, caregiver, and/or other important relationships
- Placement in foster care and multiple changes in foster homes
- Historical or intergenerational trauma⁶

These experiences can have negative effects on how children and youth develop physically, how they feel, how they learn, and how they relate to others. Sometimes, the symptoms of trauma may not appear right away but show up later, such as during adolescence.



⁶ Historical and intergenerational trauma refers to the long-lasting impact of violent events that continue to affect later generations of certain ethnic/racial groups, such as American Indians and African-Americans.

KEEP IN MIND

Trauma takes many forms and may have lasting effects. Yet, youth in foster care show great strengths. By focusing on youth strengths and supporting them through their challenges, you can help youth heal and learn to manage the effects of trauma.

The effects of trauma may make it harder for youth to do the following:

- Trust others
- Control physical and emotional responses to stress
- Manage emotions
- Form positive relationships
- Learn and function in school or other group situations
- Deal with life's changes and stresses⁷

Early childhood trauma can have a lasting effect on the brain. Those changes in the brain can affect how youth cope with what they view as an unsafe world. Certain behaviors—such as acting aggressively, not sleeping, or “tuning out”—may be their body's way of protecting against potential threats.⁸ These responses may have been protective in the youth's earlier environment yet may no longer be appropriate. The brain and body need to learn new responses once the young person is in a safer setting. The good news is that research shows that the teen brain can be “rewired” and, over time, youth can learn new responses that fit their new situations.⁹

Learn more about the impact of trauma on the brain:

- Child Welfare Information Gateway, *Supporting Brain Development in Traumatized Children and Youth*, at <https://www.childwelfare.gov/pubs/braindevtrauma/>
- Harvard University Center on the Developing Child, *Toxic Stress Derails Healthy Development* [video], at http://developingchild.harvard.edu/resources/multimedia/videos/three_core_concepts/toxic_stress/
- Jim Casey Youth Opportunities Initiative, *The Adolescent Brain: New Research and Its Implications for Young People Transitioning From Foster Care*, at <http://www.jimcaseyyouth.org/understanding-adolescent-brain-and-its-implications-young-people-transitioning-foster-care>

How can you promote healing for youth who have experienced trauma?

You may find it challenging to help youth manage the emotions and behaviors that result from past trauma and current uncertainties in foster care. But the way you interact with youth, along with more formal treatment, can support healing. In particular, it is important to remember that young people's behaviors and emotions

⁷ National Child Traumatic Stress Network. *Effects of complex trauma*. Retrieved from <http://www.nctsn.org/trauma-types/complex-trauma/effects-of-complex-trauma>

⁸ American Academy of Pediatrics, & Dave Thomas Foundation for Adoption. (2013). *Helping foster and adoptive families cope with trauma: A guide for pediatricians*. Retrieved from <http://www.aap.org/traumaguide>

⁹ Jim Casey Youth Opportunities Initiative. (2011). *The adolescent brain: New research and its implications for young people transitioning from foster care*. Retrieved from <http://www.jimcaseyyouth.org/adolescent-brain—new-research-and-its-implications-young-people-transitioning-foster-care>



may be a response to their experiences with traumatic events. Viewing youth behavior through a “trauma lens” can help you keep perspective, reduce frustration, and avoid self-criticism (such as “I’m a terrible parent.”)

Youth who have experienced trauma need to feel safe and cared for. With help, youth can develop resilience—the ability to cope with and recover from challenges.¹⁰ A key to resilience is strong relationships with supportive adults.

You can support youth in developing a positive sense of who they are and what they’re capable of achieving. Focus more on what youth can do rather than what they cannot do. Here are some suggestions:

- Help youth gradually take on responsibilities and develop new skills.
- Promote healthy social interaction, peer support, and a sense of belonging.
- Let youth participate in “normal” activities that other youth participate in (such as afterschool activities, sleepovers, and social media).
- Listen closely to what youth tell you.
- Have fun together.

Another important way you can help youth who have experienced trauma in their healing process is to help them get trauma-focused treatment. Find out whether youth have received trauma screening and assessment by a professional trained to recognize trauma. (Assessment and treatment are discussed further in Chapters 3 and 4.)

KEEP IN MIND

Youth in foster care often feel abnormal, “damaged,” and alone. Remind youth that what they’re feeling and experiencing is a normal response to trauma. Let them know they can take time to heal and that they have your support.

¹⁰ Jim Casey Youth Opportunities Initiative. (2012). *Promoting development of resilience among young people in foster care*. Retrieved from <http://jimcaseyyouth.org/sites/default/files/documents/Issue%20Brief%20-%20Resilience.pdf>

TIPS FOR HELPING YOUTH WITH TRAUMA HISTORIES*

Here are ways you can help youth manage overwhelming emotions and behaviors that result from trauma:

- ❑ **Tune into youth's emotions.** Let youth share feelings without being judged. Remind them that their feelings and reactions are normal given past experiences. Be sensitive to youth's needs, particularly when moving to a new home environment. You can help youth who may not know how to put their feelings into words with statements like "It sounds like you are feeling really frustrated..." or "Some young people might feel angry in that situation, how about you?"
- ❑ **Identify "triggers."** Triggers are reminders of traumatic events (people, places, sounds, smells, words, etc.). While youth may not be aware of specific triggers, they may feel nervous or stressed around them. Notice and try to lessen the things that make youth anxious. Talk with a therapist about helping youth learn positive ways to identify and deal with triggers.
- ❑ **Remain calm.** When youth become overwhelmed and upset, don't yell or match their tone. Lower your voice and acknowledge the seriousness of the situation and feelings.
- ❑ **Be available.** Stay emotionally and physically available, even if youth keep you at a distance. Be ready to listen and don't avoid difficult topics or uncomfortable conversations.
- ❑ **Be consistent and predictable.** Do what you say you're going to do. This can help build trust. With youth input, set routines and schedules that let them know what to expect.
- ❑ **Promote peer support.** Encourage youth participation in group activities, such as clubs, teams, cultural groups, or church or other faith community groups. Help youth find support networks of youth with similar backgrounds. (See, for example, <https://www.fosterclub.com/>.)
- ❑ **Speak of youth's families in positive yet realistic terms.** You can say, for example, "I hear you're disappointed in your mother because she didn't show up for the visit. I know this is hard. She loves you but has a tough time making good choices sometimes."
- ❑ **Be a role model.** Model positive behavior in how you express your emotions, deal with frustration, and show respect for youth and others.
- ❑ **Be patient.** Learning to trust will not happen overnight!

* Adapted from American Academy of Pediatrics, & Dave Thomas Foundation for Adoption. (2013) *Parenting after trauma: Understanding your child's needs. A guide for foster and adoptive parents.* Retrieved from <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/healthy-foster-care-america/Documents/FamilyHandout.pdf>; National Child Traumatic Stress Network. (2010). *Caring for children who have experienced trauma: A workshop for resource parents.* Retrieved from <http://learn.nctsn.org/course/view.php?id=67>.

Learn more about supporting youth who have experienced trauma:

Resources for foster parents and other caregivers:

- American Academy of Pediatrics, *Parenting After Trauma: Understanding Your Child's Needs*, at <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/healthy-foster-care-america/Documents/FamilyHandout.pdf>
- Child Welfare Information Gateway, *Parenting A Child Who Has Experienced Trauma*, at <https://www.childwelfare.gov/pubs/factsheets/child-trauma/>
- National Child Traumatic Stress Network, *Resources for Parents and Caregivers* [website], at <http://www.nctsn.org/resources/audiences/parents-caregivers#q7>
- National Child Traumatic Stress Network, *Complex Trauma: Facts for Caregivers*, at http://www.nctsn.org/sites/default/files/assets/pdfs/complex_trauma_caregivers_final.pdf
- National Child Traumatic Stress Network, *Caring for Children Who Have Experienced Trauma: A Workshop for Resource Parents*, at <http://www.nctsn.org/products/caring-for-children-who-have-experienced-trauma>



Resources for child welfare workers and supervisors:

- Chadwick Center for Children and Families, *Desk Guide on Trauma-Informed Mental Health for Child Welfare*, at <http://www.chadwickcenter.org/CTISP/images/TICW-PracticeToolkit.pdf>
- Child Welfare Information Gateway, *Trauma* [website], at <https://www.childwelfare.gov/topics/systemwide/mentalhealth/common/trauma/>
- National Child Traumatic Stress Network, *Child Welfare Trauma Training Toolkit*, at <http://www.nctsn.org/products/child-welfare-trauma-training-toolkit-2008>
- National Technical Assistance Center for Children's Mental Health, *Trauma Informed Care: Perspectives and Resources* [website], at <http://gucchdtacenter.georgetown.edu/TraumaInformedCare/index.html>

Learn more about building resilience:

- American Psychological Association, *Resilience Guide for Parents and Teachers*, at <http://www.apa.org/helpcenter/resilience.aspx#>
- Jim Casey Youth Opportunities Initiative, *Promoting Development of Resilience Among Young People in Foster Care*, at <http://jimcaseyyouth.org/promoting-development-resilience-among-young-people-foster-care>

Learn more about youth's behavioral/mental health needs:

- American Academy of Child and Adolescent Psychiatry, Family Resources [website], at http://www.aacap.org/AACAP/Families_and_Youth/Family_Resources/Home.aspx
- Find Youth Info, Youth Mental Health [website], at <http://findyouthinfo.gov/youth-topics/youth-mental-health/mental-health-disorders>
- National Institute of Mental Health, Publications About Children and Adolescents [website], at <http://www.nimh.nih.gov/health/publications/children-and-adolescents-listing.shtml>



3

UNDERSTANDING DIFFERENT TREATMENTS

This chapter describes different treatments that can be used to help youth heal from trauma. Effective treatments can improve youth's well-being, placement stability, and transition to healthy adulthood. Youth may benefit from different treatments, including therapy and other alternatives to medication. (Chapters 4 and 5 provide more guidance on steps you can take to help youth and find the right treatment for each young person.)

How is treatment different for youth who have experienced trauma?

A trauma-informed approach recognizes trauma symptoms and the impact of trauma on youth's thoughts, feelings, and behaviors.¹¹ A trauma-informed approach asks "What happened to you?" instead of "What's wrong with you?"¹² Such an approach also helps foster parents, caseworkers, and service providers interact with youth in a way that prevents additional trauma.

Trauma-focused (or trauma-specific) treatments look for root causes and not just the resulting symptoms (depression, an inability to concentrate, an eating disorder, etc.). Trauma-focused treatment can help youth understand how trauma affects their emotions and how to cope with related feelings.

Trauma-focused treatment generally supports youth with the following:

- Identifying their feelings and managing anxiety, sadness, anger, and other difficult emotions
- Understanding the connection between thoughts, feelings, and behaviors
- Learning to replace hurtful thoughts with more helpful ones
- Reframing traumatic experiences so that they are viewed as only one part of many life experiences
- Learning about personal safety and how to develop healthy boundaries
- Identifying strengths that help them cope with ongoing grief, loss, and uncertainty in foster care¹³



¹¹ U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (2014). *SAMHSA's concept of trauma and guidance for a trauma-informed approach*. Retrieved from <http://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf>

¹² National Technical Assistance Center for Children's Mental Health, & JBS International. (2014). *Trauma informed care: Perspectives and resources*. Retrieved from <http://gucchdtacenter.georgetown.edu/TraumaInformedCare.html>

¹³ Chadwick Trauma-Informed Systems Project. (2012). *Creating trauma-informed child welfare systems: A guide for administrators*. Retrieved from <http://www.chadwickcenter.org/CTISP/images/CTISPTICWAdminGuide2ndEd2013.pdf>

You can speak with health- and mental health-care providers to find out more about what trauma-focused options are appropriate for youth in your care. When programs or providers trained in research-based, trauma-focused treatment are not available in youth's communities, you can look for other services by professionals who may not be trained in specific research-based treatments yet have an understanding of trauma and its effects.

Learn more about evidence-based, trauma-focused treatment:



- California Evidence-Based Clearinghouse for Child Welfare, Trauma Treatment [website], at <http://www.cebc4cw.org/topic/trauma-treatment-for-children/>
- National Child Traumatic Stress Network, Empirically Supported Treatments and Promising Practices [website], at <http://www.nctsn.org/resources/topics/treatments-that-work/promising-practices>
- National Technical Assistance Center for Children's Mental Health, Evidence-Based Treatments Addressing Trauma [website], at <http://gucchdtcenter.georgetown.edu/TraumaInformedCare/Module4.html>
- Substance Abuse and Mental Health Services Administration, National Registry of Evidence-based Programs and Practices [website], at <http://www.nrepp.samhsa.gov>

How can therapy help?

Approaches other than medication, particularly therapy or counseling, can help youth cope with their thoughts, feelings, and behaviors and contribute to healing. Health- and mental-health experts advise that, ideally, therapy should be considered before or at the same time as psychotropic medication.¹⁴

Therapy can help identify and address the root causes of youth's emotions and behaviors. As previously discussed, trauma-informed therapists can help youth better understand their traumatic experiences and identify ways to manage resulting stress, difficult emotions, and behaviors. Through therapy, youth receive emotional support and encouragement in trying new strategies to build healthy behaviors.

Talk with the mental health professional and the young person to find the approach (or combination of approaches) that best fit each young person's needs. Also, it will be important for you and the young person to work with treatment providers to

¹⁴ American Academy of Child and Adolescent Psychiatry. (2012). *A guide for community child serving agencies on psychotropic medications for children and adolescents*. Retrieved from http://www.aacap.org/App_Themes/AACAP/docs/press/guide_for_community_child_serving_agencies_on_psychotropic_medications_for_children_and_adolescents_2012.pdf; American Academy of Pediatrics. (n.d.). *Mental and behavioral health*. Retrieved from <http://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/healthy-foster-care-america/Pages/Mental-and-Behavioral-Health.aspx>

ensure the young person receives help that is sensitive to his or her cultural and sexual identities. (See also the section in Chapter 5, "How can you support youth participating in therapy or other helpful approaches?")

Learn more about counseling and therapy:

- American Academy of Child and Adolescent Psychiatry, *Facts for Families: Psychotherapies for Children and Adolescents*, at http://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/Facts_for_Families_Pages/Psychotherapies_For_Children_And_Adolescents_86.aspx
- National Child Traumatic Stress Network, Resources for Parents and Caregivers [website], at <http://www.nctsn.org/resources/audiences/parents-caregivers>
- National Institute of Mental Health, Psychotherapies [website], at <http://www.nimh.nih.gov/health/topics/psychotherapies/index.shtml>

What other approaches can be helpful?

In addition to therapy, other helpful approaches may be considered instead of or in addition to medication. Work with youth and health- or mental health-care providers to explore appropriate options:

- **Meditation, exercise, and changes in diet.** Exercise for the mind and body can help youth reduce stress and feel calmer. Changes in food and getting enough sleep also may boost mood and energy levels.
- **Self-expression.** Keeping a journal, doing art work, participating in social media, and similar activities can help youth explore their emotions and identities.
- **Family routines.** Spending time together, creating new traditions, and having fun with other foster family members can build ties and offer an emotional lift.
- **Clubs or volunteer activities.** Group activities and "giving back" can help youth experience a valuable sense of belonging to a community, group, or cause.
- **Faith and cultural activities.** Cultural practices and being part of a faith community (church, synagogue, mosque, etc.) can help strengthen youth's sense of identity, serve as protective factors, and contribute to healing.
- **Traditional healing approaches.** Youth and their families may have preferences for practices that fit with their cultural beliefs and traditions.

KEEP IN MIND

Some youth may not be ready right away to discuss the trauma that they have experienced. A good, trauma-informed counselor or therapist will know when and how to help youth talk about their pasts.



Refer youth to Section #3 of *Making Healthy Choices (Considering Your Options)* and talk about which approaches they may want to explore.

Learn more about healthy approaches to youth wellness:

- Mental Health America, Living Well [website], at <http://www.mentalhealthamerica.net/live-your-life-well>
- National Center for Complementary and Integrative Health, Mind and Body Practices [website], at <http://nccam.nih.gov/health/mindbody>
- National Clearinghouse on Families and Youth, *Creative Coping: Using the Arts to Foster Youth Engagement and Resilience*, at <http://ncfy.acf.hhs.gov/features/thinking-creatively-family-and-youth-work/creative-coping>



What is the possible role of psychotropic medication?

Psychotropic medications are drugs that target the brain and affect a person's mind, emotions, moods, and behaviors. Studies have found them to be effective for specific conditions. Psychotropic medications include antianxiety medications, antipsychotics, antidepressants, mood stabilizers, sleep medications, stimulants and other medications for attention deficit/hyperactivity disorder, and others.

Doctors may prescribe such medications to help youth control symptoms and function better at home, in school, and in the community. Sometimes, long-term use of medications is needed to treat specific mental health disorders, like schizophrenia. Other times, medications may be used for a short time to lessen symptoms while a healing process begins. **Medication should be only one part of a comprehensive treatment plan.**

Psychotropic medications may have serious, mild, or no side effects. Side effects can be very different for different people and may include the following:

- Stomach upset or headaches
- Appetite loss or weight gain
- Sleepiness or sleep problems
- Nervousness, tearfulness, or irritability
- Disturbing thoughts
- Medical problems, such as a racing heart or dizziness
- Long-term illness

In recent years, many people have become concerned about the inappropriate use of psychotropic medications among youth in foster care for a number of reasons:

- Many youth in foster care who may need counseling and other trauma-focused mental health services do not receive them.
- There are potential serious side effects to many psychotropic medications.
- The medications have not been tested widely with children and youth.
- Dosages are often higher than might be normally used.
- Monitoring of medications is not always well coordinated across all individuals involved in youth's treatment.
- When prescribers are not aware of all medications youth are taking, some youth may be prescribed several different drugs that have unintended interactions.

The decision to use psychotropic medication should never be made lightly.

If a doctor or specialist recommends the use of psychotropic medications for youth in your care or supervision, there are important things to consider in making an informed decision. Considerations include benefits, risks, side effects, and youth and family preferences. (See questions on page 30.)

KEEP IN MIND

While medications may have benefits for some youth, they should not be seen as the only solution or as a quick fix.

Learn more about psychotropic medication:

Resources for foster parents and other caregivers:

- American Academy of Child and Adolescent Psychiatry, *Psychiatric Medication for Children and Adolescents Part 1—How Medications Are Used*, at http://www.aacap.org/aacap/Families_and_Youth/Facts_for_Families/Facts_for_Families_Pages/Psychiatric_Medication_For_Children_And_Adolescents_Part_I_How_Medications_Are_Used_21.aspx
- American Academy of Child and Adolescent Psychiatry, *Psychiatric Medication for Children and Adolescents: Part II—Types of Medications*, at http://www.aacap.org/aacap/Families_and_Youth/Facts_for_Families/Facts_for_Families_Pages/Psychiatric_Medication_For_Children_And_Adolescents_Part_II_Types_Of_Medications_29.aspx
- National Institute of Mental Health, Mental Health Medications [website], at <http://www.nimh.nih.gov/health/publications/mental-health-medications/index.shtml>

Resources for child welfare workers and supervisors:

- Children's Bureau, *Information Memorandum on Promoting the Safe, Appropriate, and Effective Use of Psychotropic Medication for Children in Foster Care* (IM-12-03), at <http://www.acf.hhs.gov/programs/cb/resource/im1203>
- Child Welfare Information Gateway, *Use of Psychotropic Medications* [website], at <https://www.childwelfare.gov/systemwide/mentalhealth/effectiveness/psychotropic.cfm>



4 SEEKING HELP FOR YOUTH

You are one of the adults who can assist youth in recognizing that they may need help. This chapter will help you recognize warning signs that youth are struggling and suggest steps you can take to get help.

TIPS FOR RECOGNIZING AND ADDRESSING YOUTH NEEDS

Taking time to build connections with youth and nurture their trust is a critical first step in understanding their needs and strengths. Here are some other important things you can do:

- Be aware of signs and symptoms that youth may be struggling with emotions, thoughts, or behaviors.
- Reassure youth that symptoms may be a normal reaction to what has happened to them.
- Focus on youth strengths and resources as well as needs.
- Let youth know there are adults in their lives who are there to support them.
- Listen carefully and calmly to what youth have to say.
- Remain in contact with others who are involved in youth's lives, such as caseworkers, caregivers, teachers, coaches, health- and mental health-care providers, and family members.
- Raise your concerns and ask for help from specialists.

How do you know youth are struggling and may need help?

These are some warning signs that youth may be struggling:

- Physical symptoms, such as illness, headaches, weight loss or gain, or sleep problems
- Concerning behaviors or changes in behavior at home, school, or work
- Relationship problems, such as trouble with friends or a lack of friends
- Troubling thoughts and feelings, such as feeling very sad or lost, having emotions that change quickly, overreactions, or unexplained fears
- Risky or dangerous behaviors, such as setting fires, cruelty to animals, drug or alcohol abuse, or inappropriate sexual behavior

KEEP IN MIND

Making the decision to seek help for a young person is not easy. There is not always one right or wrong answer.

SEEK IMMEDIATE HELP from a doctor or mental health professional if you suspect a young person is experiencing any of the following:

- Thoughts of hurting him or herself or attempting suicide
- Thoughts about hurting someone else
- Feeling depressed, hopeless, or worthless for several days and being unable to take care of himself or herself
- Hearing or seeing things that others do not hear or see

Not all young people who have experienced trauma or who need help will show these signs. Also, not all youth who experience an occasional symptom will need treatment. You need to consider how frequent and how serious the symptoms are. If you have questions or concerns, talk with a doctor.



Section #1 of *Making Healthy Choices, Recognizing You Need Help*, provides symptom checklists for youth to record the ways they are feeling and behaving. You may go through the symptom checklists with youth or suggest other adults with whom they might feel more comfortable talking about concerns. Talk with youth about what you or others have noticed during your time together. It's important for youth to have honest feedback so that they can better understand their strengths and needs.

If you have concerns and a young person is unwilling to talk about his or her symptoms, try to quickly coordinate a team meeting with the caseworker, caregiver, and family members who are involved with the young person. The team should brainstorm options that are available to engage the young person and help him or her access needed services. Let the young person know up front that you are concerned about him or her and need to ask for help.

How do you get a professional assessment and evaluation?

Based on the symptoms a young person exhibits, you may want to talk with him or her about requesting a professional assessment. This may take place in a two-step process:

- 1.** The young person may complete an assessment with his or her primary care doctor. By consulting first with a primary care doctor, the young person can create a “medical home” that helps coordinate services over time.
- 2.** If the primary care doctor determines that a more comprehensive mental health evaluation is needed, the doctor may refer the young person to a behavioral/mental health specialist, such as a psychiatrist or psychologist.

Caregivers and caseworkers are encouraged to work together with youth to identify an appropriate mental health specialist. Some child welfare agencies have designated service providers (through Medicaid or a special contract) that will be contacted for an evaluation.

When looking for a mental health specialist, consider providers who:

- Specialize in working with teens
- Have experiences with youth in foster care or high-risk youth

- Are familiar with the signs and symptoms of trauma and trauma-focused treatment
- Have experience working with youth from the youth's culture, ethnicity, and/or sexual identity (if this is not possible, make efforts to provide relevant cultural information to the provider)
- Conduct interviews with youth and their families (foster parents and/or birth family members) as part of the evaluation
- Work with the school to find out if the child has a learning disability, communication delay, or other issue that may affect their learning or emotions

KEEP IN MIND

The first weeks in foster care are a major adjustment period. Youth may need time to process the big changes in their lives. They need additional support as well as time to have some fun.

For questions to ask providers, see the "How do you find a treatment provider?" section of this chapter.

INFORMATION TO PROVIDE DOCTORS OR SPECIALISTS BEFORE AN ASSESSMENT OR EVALUATION

Make sure that health- and mental health-care providers have as much information as possible to develop a full understanding of youth during assessments or evaluations. Caregivers, caseworkers, and youth can partner to provide information, as available and appropriate, about a variety of topics:

- Current symptoms and concerns
- Developmental, medical, mental health, and trauma history
- Strengths and interests, including hobbies
- Family information, including supports and stressors, reason for the youth's out-of-home placement, and current involvement with birth family members
- Child welfare involvement, placement history (length of time in care and number of placements), and permanency goals
- Education status (including copies of past and current educational testing and individualized education programs [IEPs] or other school intervention plans) and any concerns about behavior or learning raised by teachers
- Social or community factors that affect youth and their families
- Records of previous medication and nonmedication treatment (e.g., counseling)
- Input from other professionals involved with youth and their families (e.g., teachers, coaches, juvenile justice professionals)

KEEP IN MIND

A written diagnosis can be very scary for youth. It can feel like they are being negatively labeled. They may have concerns based on other people they know with similar diagnoses. It's essential that adults provide a lot of reassurance that a diagnosis does not set the path of the young person's life.

Learn more about the screening, assessment, and evaluation of mental health issues:

- California Evidence-Based Clearinghouse for Child Welfare, Child Welfare Measurement Tools [website], at <http://www.cebc4cw.org/assessment-tools/>
- Center for Health Care Strategies, *Clinical and Functional Well-being Assessments: Technical Assistance Tool*, at http://www.chcs.org/media/Clinical-and-Functional-Well-Being-Assessments_FINAL.pdf
- National Child Traumatic Stress Network, Assessment of Complex Trauma [website], at <http://www.nctsn.org/trauma-types/complex-trauma/assessment>
- U.S. Substance Abuse and Mental Health Services Administration, *Identifying Mental Health and Substance Use Problems of Children and Adolescents: A Guide for Child-Serving Organizations*, at <http://store.samhsa.gov/shin/content/SMA12-4700/SMA12-4700.pdf>

How is a treatment plan made?

The assessment or evaluation should support the development of an individualized treatment recommendation. Some evaluations may result in a diagnosis, while others may rule out diagnoses (that is, they may determine that the youth does *not* have a certain condition that was thought possible). Depending on a young person's specific diagnosis (if any), needs, and circumstances, recommendations may include



therapy and other types of nonmedication treatment. Medication, if considered, should be a last resort and should be used in combination with therapy and other nonmedication treatments.

It's very important to talk about assessment and evaluation findings with youth.

The specialist who conducted the evaluation should go over the results with the young person. It's helpful for the specialist to explain any diagnoses and treatment recommendations in a positive way using words the young person understands. For example, the specialist might emphasize that seeking treatment is a positive step in dealing with past trauma and is not a sign that something is wrong with the young person. Also, the young person may disagree with a diagnosis. As such, it is important for the specialist to take time to explain what led to the diagnosis and openly discuss any concerns.

The doctor, caseworker, caregivers, and young person should talk about a plan for treatment that includes approaches other than medication. Medication also may be recommended if appropriate for the diagnosis. The young person's biological family should be involved in this discussion as long as they are still involved in the young person's life and there are no safety concerns. As always, talk with the young person before sharing information. (See "A few words about confidentiality" on page 5.)

When talking about treatment plans, consider the following:

- Expected treatment results and benefits
- Negative side effects and possible risks of treatment
- How long treatment will take
- What research says about "what works" for youth
- The young person's and his or her family's preferences and concerns



Refer youth to Sections #3 (Considering Your Options) and #4 (Making Your Decision) of *Making Healthy Choices*. Point out questions youth can ask and worksheets that explore pros and cons.

KEEP IN MIND

When helping youth make decisions about treatment and medication, it's important to take a look at your own biases. Be aware of how your own trauma history, attitudes about medication or therapy, and beliefs may affect the guidance that you provide to youth.

What is informed consent?

Informed consent is a process in which doctors or specialists provide information about possible treatment options to youth and the people responsible for making health decisions for those youth (parents, guardians, child welfare administrators/supervisors, courts, or others). This information should include treatment benefits and risks and factors that might support or interfere with treatment effectiveness.

Each State has different laws and policies about informed consent for psychotropic medication and youth in foster care. These laws and policies guide the following:

- Who is allowed to make the final treatment decision (child welfare agency staff, health administrators, courts, parents, guardians, or others)
- Which procedures must be followed in obtaining consent
- Requirements for youth assent (agreement)

Know the laws and policies in your State, as well as your responsibility in decision-making. If you are a foster parent and have questions about legal rights, ask your caseworker. If you need additional information, contact a State or district child welfare attorney, a guardian ad litem (GAL), or a court-appointed special advocate (CASA).



Refer youth to Section #2 of *Making Healthy Choices (Knowing Your Rights and Who Can Help)* so they understand informed consent and their rights related to health care and medication.

QUESTIONS TO ASK ABOUT INFORMED CONSENT

Here are questions to ask to learn more about informed consent policies in your State:

- How is informed consent defined in my State?
- Who has the right to make decisions about youth's health treatment?
- What steps or protocols are required before decisions can be made?
- If psychotropic medications are going to be prescribed, who must be notified?
- What is the role of the birth parents/guardians in health decision-making?
- What is the role of youth in making decisions regarding treatment options?

How can a planning team help?

Making decisions about assessment and treatment should not be the responsibility of just one person. If a planning team is not already in place, you and the young person may consider asking to have one established to provide input and guidance about health-care decisions.

Planning teams should include youth. While some young people may not want to participate at first, always encourage their involvement in decision-making and ask who else they would like to have involved. If the youth are over the age of consent in your State, they must agree before information is shared with others.

The planning team may include:

- Youth
- Individuals selected by youth (peers, mentors, teachers, coaches, etc.)
- Caseworkers and supervisors
- Birth parents, siblings, or other family members (if they are involved with youth's health care)
- Foster parents or guardians
- Attorneys, guardians ad litem (GAL), or court-appointed special advocates (CASA) (people assigned by a judge to look out for the youth's best interests while in care)
- Doctors, nurses, or other medical professionals who help with youth's health care
- Behavioral/mental health specialists
- Independent living or other service providers

KEEP IN MIND

Youth should be actively involved in planning and decision-making activities. When youth are involved in making decisions, they are more likely to participate in treatment, and they build their decision-making skills for when they leave care.



When forming a planning team, youth can complete the *Worksheet on Who Can Help Make Decisions* in Section #2 of *Making Healthy Choices (Knowing Your Rights and Who Can Help)*. Ask youth if there are trusted people that they would like to include on the team.



How do you find a treatment provider?

Foster parents, caseworkers, youth, and others on youth's planning teams can work together to identify appropriate treatment providers. Ask questions of potential providers to find a good fit with youth's needs (see box).

QUESTIONS TO ASK POTENTIAL TREATMENT PROVIDERS WHEN SEEKING HELP*

Experience and approach

- What is your approach or philosophy in working with youth?
- What is your experience in working with youth with issues like the ones this young person has?
- Are you aware of effective treatments for this young person's issues?
- In what ways will treatment be sensitive to the young person's cultural and sexual identity?
- Are you open to incorporating cultural, religious, or spiritual beliefs and practices into treatment?

Trauma-informed treatment

- Are you familiar with the research on the effects of trauma on children and youth?
- What is your experience working with youth who have experienced trauma?
- How do you determine whether youth's emotional and behavioral symptoms may be caused by trauma?
- How do trauma symptoms influence the way you provide treatment?

School partnership

- How will you work with youth's schools to make sure that there aren't learning issues that are negatively affecting the youth?
- How will you work with the school to find out if a medication (if any is taken) is working or is leading to side effects that could impact school performance?

Caseworker/caregiver involvement

- How involved will I be in setting goals and participating in treatment?
- How will I know if the young person is getting better?
- How will you keep me informed of progress?

*Adapted from FindYouth Info. (2013). Treatment options for youth with mental health disorders. Retrieved from <http://www.findyouthinfo.gov/youth-topics/youth-mental-health/treatment-options-youth-mental-health-disorders>

For information on finding treatment providers and services:

- American Psychological Association, Psychologist Locator [website], at <http://locator.apa.org/>
- National Child Traumatic Stress Network, Finding Help [website], at <http://www.nctsnet.org/resources/audiences/parents-caregivers/finding-help>
- Substance Abuse and Mental Health Services Administration, Behavioral Health Treatment Services Facility Locator [website], at <https://www.findtreatment.samhsa.gov/>



What questions should you ask providers about medication and treatment plans?

When a treatment plan has been recommended, there is a lot of information to consider. Some questions to ask when making decisions about medication and other treatment options are on page 30 of this guide.

Doctors should let youth know when information is being shared with caregivers or caseworkers. If youth are over the age of majority in your State, they must consent before information is shared with anyone.



Ask youth to look at Section #4 of *Making Healthy Choices* (Making Your Decision) for additional questions they may want to ask doctors or specialists about treatment plans or medications.

KEEP IN MIND

If you or the young person are worried about the type or number of medications prescribed, or how medication is being monitored, you may want to request a second opinion from another behavioral/mental health professional.

QUESTIONS TO ASK PROVIDERS ABOUT MEDICATION RECOMMENDATIONS*

Diagnosis

- What is the young person's diagnosis (or diagnoses)?
- What symptoms led you to this conclusion?

General information about medication

- What diagnosis or symptoms is medication being prescribed for?
- What is the name of the medication? Is it known by other names? Is a generic version available?
- How, when, and for how long should this medication be taken? Is a refill needed? If so, when and how can we get the refill (e.g., is an appointment needed first)?
- Is there written information available about how to use the prescribed medication?
- Should the medication be taken with or without food?
- What foods, drinks, other medicines, or activities should the youth avoid while taking this medicine?
- Are there any laboratory tests (blood tests, heart tests, etc.) that need to be done before the youth begins taking the medication?
- How should the medicine be stored?
- When and how should the young person stop taking the medication?

Benefits of the medication

- How will this medication help this young person?
- What is known about this medication's helpfulness with other youth who have similar conditions?
- How long will it take before we see improvements in emotions or symptoms?

Potential side effects of the medication and safe-use measures

- Is there written information available about potential side effects?
- What side effects should I keep in mind? Can they be prevented?
- What should I do if the young person experiences these side effects?
- Will the medication interact with other medications (prescription or over-the-counter medication) the young person currently takes?

continued on next page

QUESTIONS TO ASK PROVIDERS ABOUT MEDICATION RECOMMENDATIONS* *CONTINUED FROM PREVIOUS PAGE*

- What should the young person do if a dose is missed?
- Is this medication addictive? Can it be abused?
- What should I do if I become aware that the medication is being used for recreational purposes?
- What should I do if the young person attempts to commit suicide using this medication?

Monitoring medication

- How will we know if the medication is working?
- What should I watch for while the young person is taking the medication?
- How often should the young person see the doctor (or specialist) who prescribed the medication?
- What follow-up tests need to be conducted? How often? Who will order such tests?
- If prescribed to be a temporary treatment, when will we know it is safe to discontinue use?

Alternatives and options

- Are there alternative treatment options available that do not include a prescribed medication?
- Are there other types of treatment that should be used in combination with medication (counseling, exercise, changes in diet, physical therapy, or faith or cultural activities)?

*Adapted from the American Academy of Child and Adolescent Psychiatry. (2012). *Psychiatric medications for children and adolescents part III: Questions to ask*. Retrieved from http://www.aacap.org/App_Themes/AACAP/docs/facts_for_families/51_psychiatric_medication_for_children_and_adolescents_part_three.pdf. Reprinted with permission from the American Academy of Child and Adolescent Psychiatry ©2014. All rights reserved.

5 MONITORING TREATMENT AND SUPPORTING PROGRESS

Addressing the behavioral/mental health needs of youth in care is an ongoing process. This chapter talks about how you can support youth in whatever treatment they need.

INFORMATION NEEDED BY NEWLY ASSIGNED CASEWORKERS AND CAREGIVERS

For newly assigned caseworkers and new caregivers of youth who are already on medication, make sure you obtain the following information as soon as possible:

- Names of medication(s) the young person is currently taking or recently was prescribed
- Date the young person started taking the medication and the reason for the prescription
- Young person's experience with medication, including any side effects
- Date when the young person was last evaluated and date scheduled for follow-up, if any
- Most recent formal assessment or evaluation (such as psychological assessment) to understand the current diagnosis and treatment recommendations
- Date of the young person's last physical examination (check-ups should occur at least once a year and perhaps more frequently)
- Date when any current prescriptions will run out and need renewal

How can you support youth in taking medication safely?

You can play an important role in helping make sure that medicine is taken safely and that any concerns are addressed.

- **Talk with the prescribing doctors/specialists about medication use and monitoring.** See the questions on page 30. Engage youth in discussions with the doctors about expected results and when you and the youth should expect to see changes.



- **Ask questions of the pharmacists** filling the prescriptions. The pharmacist can provide information about how to use the medication, side effects, potential interactions with other medicines, etc.
- **Keep medications secure.** All medication in foster homes should be kept in locked areas and given out by foster parents.
- **Make sure that youth are taking the medication as instructed** and following other treatment recommendations.
- **Encourage youth to talk openly to you, their providers, or other trusted adults about progress,** concerns, and how they feel treatment is, or is not, helping. Ask youth if they are experiencing side effects.
- **Assist youth in understanding their rights** in using (or declining to use) medications and understanding other options. (Refer to Section #2 of *Making Healthy Choices*.)
- **Assist youth in obtaining a copy of their medical records for future use.** Write the name of each medication taken, for how long, and its effects.

KEEP IN MIND

When youth begin to feel better, they may want to stop medication or other treatment. Suddenly stopping certain medications can have harmful side effects. Instead, youth should talk with their doctors or mental health specialists about when and how to safely stop taking medications.



Section # 5 of *Making Healthy Choices* (Maintaining Treatment) talks about continuing and stopping treatment. Take some time to review this information with youth in your care or supervision.

How can you support youth participating in therapy or other helpful approaches?

Support systems are an important part of the treatment process. As with medication, it is helpful to check in routinely with youth and their treatment providers to see how youth are doing in therapy or other approaches. Observe youth's emotions and behaviors, and talk with therapists or other providers about signs of progress. Support youth in practicing new strategies for managing emotions and behaviors.

QUESTIONS TO ASK YOUTH ABOUT THERAPY

You may want to have conversations with youth about their treatment as a way of showing support and checking in to see if therapy is helpful to them.

- Do you feel as if you can be honest and open with this therapist about what you are feeling and experiencing?
- Are you able to understand what the therapist says to you? Does he/she offer helpful advice and suggestions to you?
- Since you've been in therapy, in what ways do you think you've changed? Do you feel more hopeful that you will achieve your goals?
- Do you feel like you're starting to understand yourself better?
- Are you learning skills from your therapist about how to handle emotions and/or change behaviors?
- How can I best support you while you are in therapy? What is most and least helpful?

How can you watch for changes and check progress over time?

Assessing youth's progress in treatment is important to ongoing care. Youth and their service providers should talk about their expectations and goals for treatment outcomes and regularly assess progress toward those goals. Having clear, realistic goals and expectations at the beginning of treatment will help guide later assessments of whether treatments are "working."



After a period of time in treatment, ask youth to go back through the symptom checklists in Section #1 of *Making Healthy Choices* (together with caseworkers or caregivers, if youth so choose). Look for changes in symptoms, feelings, or behaviors that had previously been a concern.

Caregivers and/or caseworkers who can provide feedback about youth's behaviors, moods, etc., are encouraged to go with youth to their appointments. First, let youth know that you would like to provide feedback to their doctors or therapists and what kind of information you'd like to share. Consider the following areas:

- Compliance with prescribed medications (do youth take the required dosages regularly?)
- Any changes in behavior, mood, appetite, sleep habits, weight
- How youth are functioning in school, work, and personal relationships
- Any physical health reactions (stomachaches, nausea, headaches, rashes)
- Any significant events since the last appointment (placement changes, legal status changes, separation from siblings, issues related to visits with family members)
- Any suspected or confirmed drug or alcohol use
- Whether desired changes in emotional well-being or behaviors specific to youth's goals for treatment are being achieved and how youth are reacting to such changes

KEEP IN MIND

Therapy may bring up memories and trigger emotions that don't always feel pleasant. This doesn't mean that the therapy is not effective. Making peace with the past is an important part of a young person's journey of healing.



Involve youth in assessing progress. Talk with youth about what you have noticed, such as changes in physical reactions (for example, fewer stomachaches), moods (calmer), or behaviors (fewer angry outbursts and paying more attention in school). Youth may have unrealistic expectations about how medication and therapy will or will not help them and how quickly they should be seeing changes. You can help youth understand that many things influence changes in their minds and bodies.



KEEP IN MIND

Youth are much more likely to stay engaged in treatment when they see that things are changing and they are feeling better. Take time to celebrate progress with youth and acknowledge their commitment to the treatment plans.

In some cases, you and the young person may find that the current treatment plan is not working as well as you and the young person had hoped. A team meeting could be held to talk about any concerns with the quality of the providers, the quality of treatment, or the need for a second opinion on prescriptions or therapies used.

How can you help youth who are transitioning out of foster care?

When youth are getting ready to transition out of foster care, you can prepare them to take care of their ongoing health and mental health needs. This may include helping youth with understanding how to accomplish the following:

- Maintain connections to caring and supportive adults
- Get health insurance, including Medicaid (see text later in this section for more information)
- Find affordable, quality health and mental health services
- Continue or discontinue medication safely
- Make doctor's appointments and go to the pharmacy for medication refills (have them practice with your guidance)
- Gather medical records (including information on health-care providers, major illnesses and conditions, and treatments and responses)

KEEP IN MIND

Preparing for adulthood should occur over time. Young people need gradually changing levels of responsibility balanced with continued support. Start early by including young teens in decision-making and planning processes to prepare them to make decisions on their own.

A transition plan is a valuable tool for youth leaving care. Federal law requires the development of a transition plan during the 90-day period before youth turn 18 (or older if the State has extended the age at which youth can leave care). This plan must be developed in partnership with youth. The plan talks about ways to address specific needs after youth leave care, including health and mental health services, health insurance, housing, education, employment, and community support.

As part of transition planning, it is important to prevent any gaps in health insurance coverage for youth. **Medicaid** is an important source of health insurance to pay for treatment services and supports. Youth leaving foster care at age 18 or older who were enrolled in Medicaid while in care are automatically eligible for continued Medicaid health insurance coverage up to their 26th birthdays.

Youth who previously aged out of care but are under the age of 26 are also eligible for Medicaid coverage until their 26th birthdays. The enrollment process at www.healthcare.gov will identify former foster care status and provide information on coverage options for youth formerly in foster care. This is also true for youth who were enrolled in Medicaid when they left foster care and had a lapse in coverage for any reason. Options for health insurance coverage for those 26 and older also can be found on www.healthcare.gov.

After you explain to youth that they are eligible for health-care coverage, work with them to understand what they need to do to get and stay insured. For example, talk about what forms they might need to fill out.

Learn more about transition planning:

- American Academy of Pediatrics, *Moving to Adulthood: A Handout for Youth Aging Out of Foster Care*, at https://www.healthychildren.org/English/family-life/family-dynamics/adoption-and-foster-care/Documents/AAP%20Fostercare_AgingOut_FINAL.pdf
- Child Welfare Information Gateway, *Working With Youth to Develop a Transition Plan*, at <https://www.childwelfare.gov/pubs/transitional-plan/>
- Child Welfare Information Gateway, *Helping Youth Transition to Adulthood: Guidance for Foster Parents*, at <https://www.childwelfare.gov/pubs/youth-transition/>
- Foster Club, *Transition Toolkit*, at <https://www.fosterclub.com/transition/article/transition-toolkit>



Sit down with youth and talk about “What Should I Do About Medication When I’m Leaving Foster Care” in Section #5 of *Making Healthy Choices*. This section addresses some important things for youth to know about future medication and treatment, health insurance, and medical records.

Learn more about health insurance for youth transitioning out of foster care:

- American Academy of Pediatrics, Health Insurance for Youth Who Used to Be in Foster Care [website], at <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/healthy-foster-care-america/Pages/Health-Insurance-Foster-Care.aspx>
- Child Welfare Information Gateway, *Health-Care Coverage for Youth in Foster Care—and After*, at <https://www.childwelfare.gov/pubs/issue-briefs/health-care-foster>
- Healthcare.gov [website], at <https://www.healthcare.gov/>
- Young Invincibles [website], at <http://health.younginvincibles.org/>



How can you help yourself when working with youth in care?

Caseworkers and caregivers may experience stress or secondary trauma symptoms when working with youth who have experienced trauma. As you help youth address their trauma symptoms and deal with difficult emotions and behaviors, it's important that you have realistic expectations for you, the youth, and your relationship. If you have a trauma history of your own, be particularly aware of how your feelings and experiences may affect how you react to youth's trauma. Be sure to take care of yourself and find ways to seek support from friends, family, and professionals.

KEEP IN MIND

When you take care of yourself, you will be better able to help youth in your care.

TIPS FOR SELF-CARE*

Some things you can do to take care of yourself when working with youth in foster care:

- Live a healthy, balanced life.** Eat right, exercise, and get enough rest. Spend time with friends and family and do things that bring you joy and relaxation.
- Know your limits.** Set realistic expectations and clear boundaries. Learn to say “no.”
- Spend some quiet time alone.** Make time for yourself. Take breaks from caring for others or add meditation to your daily routine.
- Be aware of things to avoid when you're stressed.** Don't make big decisions when you feel worn out.
- Ask for and accept help from others.** Find support through family, friends, and peers. Ask for assistance in getting things done. If needed, seek professional guidance.

*Adapted from National Child Welfare Resource Center for Adoption. (2013). *Compassion fatigue: Secondary traumatic stress disorder, burnout, vicarious trauma. Adoption Competency Curriculum, Trainer's guide.* Retrieved from <http://spaulding.org/wp-content/uploads/2014/10/TG-Compassion-Fatigue-7-131.pdf>.

To learn more on taking care of yourself when working with youth who have experienced trauma:

- Child Welfare Information Gateway, Secondary Trauma [website], at <https://www.childwelfare.gov/topics/responding/trauma/secondary/>
- National Child Traumatic Stress Network, Secondary Traumatic Stress [website], at <http://www.nctsnet.org/resources/topics/secondary-traumatic-stress>

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The guide is available online at <https://www.childwelfare.gov/pubs/mhc-caregivers>.

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