ABSTRACT

Children and families involved in the foster care system present with unique needs requiring support from diverse professionals. Because of the range of stakeholders involved with children and families in the foster care system, play therapists must become knowledgeable and skillful consultants and collaborators to best facilitate holistic wellness for these families. Through this chapter, the authors seek to provide play therapists with a strong foundation of knowledge and skills to draw upon when working with this population. First, readers are introduced to the mental health needs faced by foster care children and families. The authors then describe the diverse roles frequently fulfilled by play therapists as consultants and collaborators within various systems impacting children in foster care. Finally, a case study is included to provide a practical description of how play therapists can integrate a greater use of consultation, collaboration, and advocacy into their work to better meet the needs of foster care children and families within their care.

INTRODUCTION

Through their work, play therapists have the opportunity to work with many distinctive populations. One such population includes children and families involved with the foster care system. These children and families face unique challenges and diverse needs, requiring support from various professionals. Because of the range of stakeholders involved with children and families in the foster care system, play therapists must become knowledgeable and skillful consultants and collaborators to best facilitate holistic wellness for these families.

In this chapter, the authors first examine the current status of children in the foster care system and explore some of the unique mental health needs faced by these children. This information helps cultivate an understanding of the need for specialized consultation and training for play therapists and other important stakeholders. Important terms related to the foster care, the legal systems, and consultation interventions are included and defined to provide foundational knowledge necessary for understanding and working within this system. Next, the authors describe numerous roles that play therapists enact with essential stakeholders in foster children’s lives. These stakeholders include parents and caregivers, caseworkers, legal professionals, and other professionals providing care for foster children and families. These roles are further explained through a clinical case example to provide an opportunity for readers to explore how a play therapist can integrate a greater use of consultation, collaboration, and advocacy to best meet the needs of children and families in their care.

CURRENT STATUS OF CHILDREN AND THE FOSTER CARE SYSTEM

Rates of children in the welfare system vary per year. In 2015, the United States foster care system served over 670,000 children including those who remained in foster care from previous years and those who entered during the course of the year (U.S Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau, 2016a, p. 2). Children enter the foster care system for various reasons including abuse or neglect, severe behavioral problems, and parental illness, substance abuse, or death (American Academy of Pediatrics [AAP], 2016). These children frequently experience trauma and early attachment disruptions prior to entering the foster care system and experience further trauma within the system through disrupted placements, inconsistent care, and extended time spent in foster care (Klain & White, 2013). Fortunately, the child welfare system has made progress in reducing the length of time children spend in foster care by improving the timeliness of adoptions and permanent placements. Currently less than 26% of children remain in the foster care system for more than 2 years (U.S Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau, 2016b, p. 2). Reasons for discharge from the foster care system include reunification with primary caregivers, kinship placements, adoption, emancipation, legal guardianship, death of the child, running away or transfer to another agency (U.S Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau, 2016b, p. 3).
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