

CHAPTER 4

Understanding Families – Part 1



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CHAPTER 4

Understanding Families – Part 1



Getting in Gear

Begin to gather information about the community resource you selected as instructed in the Looking Ahead section of Chapter 3. Use the Community Resources Reporting In form to organize and document your research. Remember, you will use the information you collect in your work on Chapter 8, and you will submit a copy of the completed Reporting In form at the debriefing session for that chapter.



Goal

In this chapter, I will learn a strengths-based approach to understanding families and children. I will learn about child abuse and neglect—definitions, indicators, and risk factors. I will consider the issue of mental illness and how it impacts families.



Objectives

By the end of this chapter, I will be able to...

- ✓ Identify the strengths and resources of families.
- ✓ Use cultural norms and community standards as a framework for understanding families.
- ✓ Recognize the impact of stress on families.
- ✓ Specify risk factors associated with child abuse and neglect.
- ✓ Recognize how mental illness impacts families and children.



Reporting In

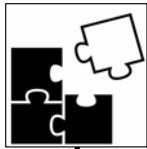
In this chapter you will find one or more assignments identified by the “Reporting In” heading (as seen above). You will need to complete, copy, and submit these assignments as prearranged to CASA/GAL program staff for review at the debriefing session for this chapter.



Parking Lot

At the end of this chapter you will find a page designated as the “Parking Lot.” Find and bookmark this page now, and use it throughout the chapter to note any questions, ideas, or concerns that you wish to discuss with CASA/GAL program staff.

UNIT 1: Family Strengths



Activity 4A: Your Families

Write down both a strength and a deficit (weakness) of your own family (either your family of origin or your current family).

STRENGTH	DEFICIT

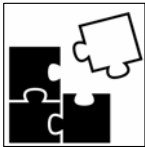
Remember the question about whether the glass is half-full or half-empty? You can ask yourself a similar question about the families you will be working with as a CASA/GAL volunteer. If you look at a family through a “resource” lens, you focus on identifying the strengths; if you look through a “deficit” lens, you focus on the problems. *All families have strengths.* Using a resource lens has many advantages; it creates more options and it empowers and supports children and families.

Seeing the Strengths & Resources in Families

Your ability as a CASA/GAL volunteer to identify strengths in families depends partially on which lens—the resource lens or the deficit lens—you use in your work with families. The lens you choose will also influence your work with others involved in the case. The resource lens can be understood dynamically by asking the following questions as you assess the family:

- How has this family solved problems?
- What activities have family members completed?
- How are family members coping with their present circumstances?

The following chart details the differences between a focus on family strengths and family deficits.



Activity 4B: A Closer Look at the Resource Lens

Read the following chart that compares the resource lens to the deficit lens, and then answer the question below in the space provided.

What might be some benefits of using a strengths-based approach in your work as a CASA/GAL volunteer?

Resource Lens vs. Deficit Lens...	If I look through a RESOURCE LENS, I am likely to...	If I look through a DEFICIT LENS, I am likely to...
	<ul style="list-style-type: none"> ✓ Look for the good ✓ Empower families ✓ Create options ✓ Listen ✓ Focus on strengths ✓ Put the responsibility on the family ✓ Acknowledge progress ✓ See the family as expert ✓ See the family invested in change ✓ Help identify resources ✓ Avoid labeling ✓ Inspire with hope 	<ul style="list-style-type: none"> ✓ Look for deficits ✓ Take control or rescue ✓ Give ultimatums/advice ✓ Tell ✓ Focus on problems ✓ See the family as incapable ✓ Wait for the finished product ✓ See service providers as experts ✓ Impose change/limits ✓ Expect inaction or failure ✓ Label ✓ Deflate family's hope

Adapted from materials developed by the Portland CASA program.

UNIT 2: Resources in Families

People in different socioeconomic classes may use different skills and resources to deal with stress and problems. Material goods are one kind of resource, but some individuals and cultures prize other resources above material wealth. For example:

- ✓ **Mental ability:** allows for the access and use of information;
- ✓ **Emotional resources:** provide support and strength in difficult times;
- ✓ **Spiritual resources:** give purpose and meaning to people’s lives;
- ✓ **Good health and physical mobility:** allow for self-sufficiency;
- ✓ **Cultural heritage:** provides context, values, and mores for living in the world;
- ✓ **Informal support systems:** networks, clubs, or kinship ties provide a safety net (e.g., money in tight times, child care for a sick child, job advice);
- ✓ **Healthy relationships:** can nurture and support; and
- ✓ **Role models:** provide appropriate examples of and practical advice on achieving success.

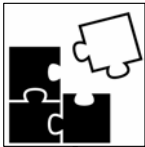
Using a strengths-based approach means acknowledging the resources that do exist within a family and tapping into them. While the CASA/GAL volunteer may impact the financial status of a family through advocating for a referral to a program such as job training, it is far more likely that the volunteer’s influence will be exerted to access other resources. Some examples of this are identifying a tutor for the child, advocating for medical care, assisting the family in locating culturally appropriate support systems, and connecting them with role models in their community.

The “Hidden Rules” of Socioeconomic Class

“Hidden rules” are the unspoken understandings between individuals within one socioeconomic group (class) that helps them recognize if others fit in or are a member of that socioeconomic class.

No matter the class, the rules of socioeconomic class are so “hidden” that they are taken for granted by class members. People assume that everyone knows what they know. Hidden rules govern much of a person’s immediate assessment of an individual and his/her capabilities. People typically assess others from their own worldview. This is often a factor that keeps an individual from moving upward in a career—or even getting a particular position in the first place.

Evaluations of “intelligence” or how a person approaches school or work may be expressions of hidden rules more than any true measure of ability. Many of the attitudes that children and families bring with them are an integral part of their life situation coupled with their culture and belief systems. Middle-class solutions, typical of “the system,” should not necessarily be imposed when other appropriate and workable solutions can be found that better suit a particular family’s worldview.



Activity 4C: “Hidden Rules”—A Quiz

Part 1: Take a few minutes to work through the three quizzes on the following pages.

Could You Survive in Poverty?

Directions: Put a check by each item you know how to do.

<input type="checkbox"/>	1. I know which churches and areas of town have the best rummage sales.
<input type="checkbox"/>	2. I know which rummage sales have “bag sales” and when.
<input type="checkbox"/>	3. I know which grocery stores have the best sales on which days.
<input type="checkbox"/>	4. I know how to physically fight and defend myself.
<input type="checkbox"/>	5. I know how to get a gun.
<input type="checkbox"/>	6. I know how to keep my clothes from being stolen at the Laundromat.
<input type="checkbox"/>	7. I know how to get someone out of jail.
<input type="checkbox"/>	8. I know what problems to look for in a used car.
<input type="checkbox"/>	9. I know how to live without a checking account.
<input type="checkbox"/>	10. I know how to live without electricity and a phone.
<input type="checkbox"/>	11. I know how to use a knife as scissors.
<input type="checkbox"/>	12. I can entertain a group of friends with my personality and my stories.
<input type="checkbox"/>	13. I know what to do when I don’t have money to pay the bills.
<input type="checkbox"/>	14. I know how to move in half a day.
<input type="checkbox"/>	15. I know how to get and use food stamps or an electronic card for benefits.
<input type="checkbox"/>	16. I know where the free medical clinics are.
<input type="checkbox"/>	17. I am very good at trading and bartering.
<input type="checkbox"/>	18. I can get by without a car.

Could You Survive in Middle Class?

Directions: Put a check by each item you know how to do.

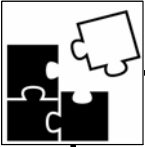
	1. I know how to get my children into Little League, piano lessons, soccer, etc.
	2. I know how to set a table for guests.
	3. I know which stores are most likely to carry the clothing brand my family wears.
	4. My children know and wear the best current name brands in clothing.
	5. I know how to order in a nice restaurant.
	6. I know how to use a credit card, checking account, and savings account—and I understand what an annuity is. I understand term life insurance, disability insurance, and 20/80 medical insurance policy, as well as house insurance, flood insurance, and replacement insurance.
	7. I talk to my children about going to college.
	8. I know how to get one of the best interest rates on my new car loan.
	9. I understand the difference between principal, interest, and escrow statements on my house.
	10. I know how to help my children with their homework and do not hesitate to call the school if I need additional information.
	11. I know how to decorate the house for the different holidays.
	12. I know how to get a library card.
	13. I know how to use the different tools in the garage.
	14. I repair items in my house almost immediately when they break—or know a repair service and call it.

Could You Survive in Wealth?

Directions: Put a check by each item you know how to do.

	1. I can read a menu in French, English, and another language.
	2. I have several favorite restaurants in different countries of the world.
	3. During the holidays, I know how to hire a decorator to identify the appropriate themes and items with which to decorate the house.
	4. I know who my preferred financial advisor, legal service, designer, domestic-employment service, and hairdresser are.
	5. I have at least two residences that are staffed and maintained.
	6. I know how to ensure confidentiality and loyalty from my domestic staff.
	7. I have at least two or three “screens” that keep people who I do not wish to see away from me.
	8. I fly in my own plane, the company plane, or the Concorde.
	9. I know how to enroll my children in the preferred private schools.
	10. I know how to host the parties that “key” people attend.
	11. I am on the boards of at least two charities.
	12. I know the hidden rules of the Junior League.
	13. I support or buy the work of a particular artist.
	14. I know how to read a corporate financial statement and analyze my own financial statements.

“Hidden Rules Quiz” from *A Framework for Understanding Poverty*, Ruby K. Payne, Ph.D., Baytown, TX: RFT Publishing Co., 1998. Used with permission.



Activity 4C: “Hidden Rules”—A Quiz

Part 2: With respect to the three quizzes you just completed, answer the following questions:

Did you relate to the “hidden rules” for one or more of the socioeconomic classes identified in this exercise?

What are the implications for CASA/GAL volunteer work of knowing the “hidden rules” of socioeconomic class?

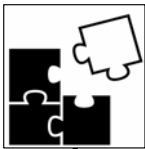
UNIT 3: Understanding Families Through Culture

The Cultural Sensitivity Lens

Another lens that you need to use when you look at a family is the lens of cultural sensitivity. Family structure, rules, roles, customs, boundaries, communication styles, problem-solving approaches, and values may be based on cultural norms and/or accepted community standards. “Cultural norms” are behavioral expectations that are based on cultural beliefs and practice. “Community standards” are the shared values and expectations of a group of people living in geographical proximity.

It is important to understand the role of the extended family in raising children. In many cultures, including Indian ones, extended family may be expected to play an extensive role.

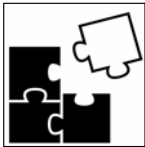
As a CASA/GAL volunteer, your assessment of a family’s situation will be affected by whether you focus on strengths or deficits and by your awareness of how cultural issues can impact your ability to see the situation objectively. In the next activity, you will use the three lenses—strengths/resources, deficits, and culture—to evaluate a family situation.



Activity 4D: How Do You See the Parker-Solano Family?

Part 1: Think about the family in the Parker-Solano training case using a resource lens (i.e., consider this family in terms of its strengths). Note as many of this family’s strengths as you can in the space provided. Then use the deficit lens and name as many of the family’s deficits as you can. For assistance, refer to the Parker-Solano training case found in the Resource Materials section of Chapter 1.

STRENGTHS	DEFICITS



Activity 4D: How Do You See the Parker-Solano Family?

Part 2: After you have considered the strengths and deficits of the family in the Parker-Solano training case, answer the questions below.

What was the impact of the lens you used on your feelings about the family?

On your assessment of the family?

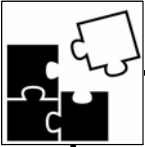
On what you might recommend to be in the children's best interest?

What cultural issues do you see in this situation?

How do you think the family in this case might be similar or different from families you will work with as a CASA/GAL volunteer?

As a CASA/GAL volunteer, you will work with families who all have strengths that they can choose to employ to follow the orders of the courts and, ultimately, to become reunited with their children and end their involvement with the child protective services system.

The Strengths in Families Worksheet on the following pages assesses a family using both a resource lens and a culturally sensitive lens. This worksheet is an excellent tool for you to use when working with the families of the children to whom you are appointed as an advocate. It is helpful to let the family tell you about what they see as their strengths. You can also share with the family some of the strengths you identify in order to encourage them to begin to view themselves as having strengths.



Activity 4E: Strengths in Families Worksheet

Part 1: Read the Strengths in Families Worksheet that appears on the following pages. As you review the items in each category, think about how you would determine whether or not the statements on the worksheet are applicable to a particular family.

STRENGTHS IN FAMILIES WORKSHEET

Parent-Child Relationship	1. Parent shows empathy for the child.
	2. Parent responds appropriately to the child's verbal and nonverbal signals.
	3. Parent has the ability to put the child's needs ahead of his/her own.
	4. When they are together, the child shows comfort in the parent.
	5. The parent has raised the child for a significant period of time.
	6. In the past, the parent has met the child's basic physical and emotional needs.
	7. Parent accepts some responsibility for the problems that brought the child into care or to the attention of the authorities.
	8. The parent uses positive, nonviolent discipline.
<p>The first items focus on the parent's relationship with the child because the quality of the parent/child bond is one of the strongest predictors of the success or failure of treatment (Wasserman 1986). To accurately assess the parent/child bond, it is important to know the attachment behaviors of the parent's culture. How does this culture display empathy? What are appropriate verbal and nonverbal cues? For example, language is highly valued in some groups, and not in others. Eye contact between parent and child is expected by some but considered disrespectful by others. The ability to put the child's needs before the parent's own is crucial. Irrespective of culture, prognosis is good for parents who have the "ability to accept significant responsibility for their contribution to the development of the problem or their past failure to deal with it" (Steinhauer 1983).</p>	
Parental Support System	9. The parent has positive, significant relationships with other adults who seem free of overt pathology (e.g., spouse, parents, friends, relatives).
	10. The parent has a meaningful support system that can help him/her now (e.g., church, job, counselor).
	11. Extended family is nearby and capable of providing support.
<p>All families require a positive support system to survive adversity. Items 9 through 11 reflect the quality of the parent's relationships with the current support system. The ways in which support systems function vary depending on culture. Because of the value European-American culture places on self-sufficiency and independence, parents are expected to make their own decisions, live independently, and use the family for emotional support. Other cultures, most notably Native American cultures, expect the total group, biologically related or not, to function collectively to resolve problems (Horejsi 1992). Resolution of the problems may lie in the hands of the elders in other ethnic groups (Rottman 1982).</p>	

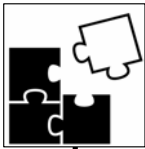
Past Support System	12. Extended family history shows family members able to help appropriately when one member is not functioning well.
	13. Relatives came forward to offer help when the child needed placement.
	14. Relatives have followed through on commitments in the past.
	15. There are significant other adults, not blood relatives, who have helped in the past.
	16. Significant other adults have followed through on commitments in the past.
	Items 12 through 16 look at extended family and friendships that have been helpful in the past and can be tapped again. In this section, the CASA/GAL volunteer needs to assess whether this family system has demonstrated healthy coping abilities in the past consistent with their cultural norms.
Family History	17. The family's ethnic, cultural, or religious heritage includes an emphasis on mutual caretaking and shared parenting in times of crisis.
	18. The parent's own history shows consistency of parental caretaker.
	19. The parent's history shows evidence of his/her childhood needs being met adequately.
	Items 17 through 19 look at the parent's own history and cultural heritage. To answer number 17, it is important to know to what extent the family has identified with and participated in its ethnic community.
Parent's Self-Care	20. Parent's general health is good.
	21. Parent uses medical care for self appropriately.
	22. Parent's hygiene and grooming are consistently adequate.
	23. Parent has a history of stability in housing.
	24. Parent has a solid employment history.
	25. Parent has graduated from high school or possesses a GED.
	26. Parent has skills that contribute to employability.
Items 20 through 26 highlight the parent's ability to function in an adult mode (according to the expectations of his/her culture) in areas that contribute to his/her parental functioning.	

- 27. Child shows age-appropriate cognitive abilities.
- 28. Child demonstrates an age-appropriate attention span.
- 29. Child shows evidence of conscience development.
- 30. Child has appropriate social skills.
- 31. Major behavioral problems are absent.

Finally, items 27 through 31 focus on the functioning of the child. The more a child's behavior challenges the parent, the more difficulty the parent will have feeling successful. The stress of parenting a difficult child increases the risk of a relapse to old behaviors and emotions.

Adapted from *Concurrent Planning: From Permanency Planning to Permanency Action*, Linda Katz, Norma Spoonemore, and Chris Robinson, Seattle: Lutheran Social Services of Washington and Idaho, 1994.

(Note: When using the Strengths in Families Worksheet in domestic violence situations, keep the following information in mind: Batterers often isolate the victim, thus preventing easy flight. The current parental support system may be very limited due to the isolation. The past support system may be a better predictor of possible help. It is also important to build up the current support system by identifying resources, such as a faith community or community agencies, that can help the victim and children. Also, if the parent has been a victim of domestic violence and was forced to flee to shelters or move frequently, a lack of stable housing or employment history should not be used against him/her. Domestic violence is a topic that will be addressed at some length in the next chapter of this training.)



Activity 4E: Strengths in Families Worksheet

Part 2: Use the following Assessing Strengths in Families Reporting In form to write down one or two ways that you might gather the information you need to evaluate the validity of the statements in each category. When you have completed the Reporting In form, make a copy of your work to submit to CASA/GAL program staff at the debriefing session for this chapter.



REPORTING IN

Assessing Strengths in Families...

Directions: In the space provided below, write down one or two ways that you might gather the information necessary to evaluate the validity of the statements in each category.

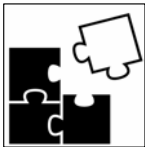
CATEGORY	I could gather information by...
Parent-Child Relationship	
Parental Support System	
Past Support System	
Family History	
Parent's Self-Care	
Child's Development	

Submit a completed copy of this form to CASA/GAL program staff.

UNIT 4: Stress in Families

As a CASA/GAL volunteer, you need to understand the families of the children with whom you will work so you can succinctly, accurately, and objectively describe the entire family situation. This ability to clearly view the situation is a critical step in making recommendations about what the child needs.

At some point all families encounter change, stress, and perhaps even crisis—the family moves, a parent is laid off, child-care arrangements fall through, a new step-family comes into being, the car breaks down, a child becomes ill, the rent is increased, and on it goes. The families you will encounter in your work as a CASA/GAL volunteer are, by definition, under stress and are likely to be in crisis—if for no other reason than that the state is now involved in determining whether their child remains in their care and custody.



Activity 4F: Assessing Your Own Stress Level

This activity will give you a baseline for comparing your own stress level with the stress level of families you will meet in your work as a CASA/GAL volunteer. It can also help you view your own strengths and needs. Take a few minutes to complete the Social Readjustment Rating Scale “stress test” to assess your stress level.

In Chapter 10 you will work on ways to build personal support to stay healthy as you do this important CASA/GAL volunteer work.

The Social Readjustment Rating Scale:

Directions: For each event that occurred in your life within the past 12 months, record the corresponding score in the box in front. If an event occurred more than once, multiply the score for that event by the number of times the event occurred, and record that score. Total all the scores and compare to the range of scores to determine whether your susceptibility to illness and mental health problems in the near future is low, mild, moderate, or high.

✓	LIFE EVENT	VALUE
	1. Death of spouse (significant other).	100
	2. Divorce.	73
	3. Marital Separation.	65
	4. Jail Term.	63
	5. Death of close family member.	63
	6. Personal injury or illness.	53
	7. Marriage.	50
	8. Fired at work.	47
	9. Marital reconciliation.	45
	10. Retirement.	45
	11. Change in health of family member.	44
	12. Pregnancy.	40
	13. Sex difficulties.	39
	14. Gain new family member.	39
	15. Business readjustment.	39
	16. Change in financial status.	38
	17. Death of a close friend.	37
	18. Change to different line of work.	36
	19. Change in number of arguments with spouse (significant other).	35
	20. Mortgage or loan for major purchase (home, etc.).	31
	21. Foreclosure of mortgage or loan.	30

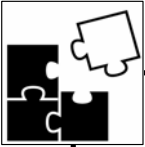
Assessing Your Stress Level...

	22. Change in responsibilities at work.	29
	23. Son or daughter leaving home.	29
	24. Trouble with in-laws.	29
	25. Outstanding personal achievement.	28
	26. Spouse begins or stops work.	26
	27. Begin or end school.	26
	28. Change in living conditions.	25
	29. Revision of personal habits.	24
	30. Trouble with boss.	23
	31. Change in working hours or conditions.	20
	32. Change in residence.	20
	33. Change in schools.	20
	34. Change in recreation.	19
	35. Change in church activities.	19
	36. Change in social activities.	18
	37. Mortgage or loan for lesser purchase (car, tv, etc.).	17
	38. Change in sleeping habits.	16
	39. Change in number of family get-togethers.	15
	40. Change in eating habits.	15
	41. Vacation.	13
	42. Christmas.	12
	43. Minor violation(s) of the law.	11

Your Susceptibility to Illness & Mental Health Problems:

- LOW** = less than 149
- MILD** = 150 to 200
- MODERATE** = 200 to 299
- HIGH** = more than 300

Adapted from the Social Readjustment Rating Scale, *Journal of Psychosomatic Research*, T. H. Holmes & R. H. Rahe, 1967.



Activity 4G: Assessing Stress in the Parker-Solano Family

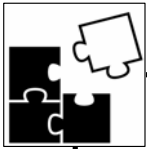
Put yourself in the shoes of Suzanne Solano, the mother in the Parker-Solano training case, and then answer the following questions:

How do you think Suzanne would score on the “stress test”? <i>(circle one)</i>			
LOW	MILD	MODERATE	HIGH
What factors influenced your response?			

There is a certain level of stress that comes with a family’s involvement in the child protective services system. Additionally, many individuals and families have to deal on a daily basis with the stress of societal prejudice because they are people of color, gay or lesbian, poor, disabled, or Jewish; because they do not speak English fluently; or because of many other “differences.”

Some families cope well and adapt effectively to stress and crisis; others do not and become overwhelmed. Families that are not able to cope well are often isolated from resources, face a variety of challenges, and are stressed by numerous problems that compound one another. These families may develop patterns that lead to and then perpetuate abuse and neglect.

UNIT 5: Risk Factors Associated with Child Abuse & Neglect

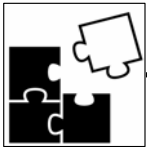


Activity 4H: Why Do People Abuse and/or Neglect Their Children?

On the lines below, list as many reasons as you can think of that might cause parents to abuse or neglect their children. There are no right or wrong answers.

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

The source of child maltreatment is typically some combination of people, environment, opportunity, and needs. Risk factors for child abuse and neglect include child-related factors, parent/caretaker-related factors, social-situational factors, family factors, and triggering situations. These factors frequently co-exist. Poverty is often a complicating issue, creating problems in a family and reducing the resources they have for addressing problems. Poverty in and of itself is not child neglect.



Activity 4I: Conditions That May Lead to Abuse & Neglect

Part 1: Read the material that follows on conditions that may lead to abuse and neglect. Note your questions in the margin.

Conditions That May Lead to Abuse & Neglect

Child-Related Factors

- **Chronological age of child:** Fifty percent of abused children are under the age of three; ninety percent of deaths are under one year of age; first-born children are most vulnerable;
- **Mismatch** between child's temperament or behavior and parent's relating style and expectations;
- **Physical or mental disabilities;**
- **Attachment problems** or separation from parent during critical periods or reduced positive interaction between parent and child;
- **Premature birth or illness at birth:** Financial stress, inability to bond, parental feelings of guilt, failure, or inadequacy; and/or
- **Unwanted child or child who reminds parent of absent partner or spouse.**

Parent/Caretaker-Related Factors

- **Low self-esteem:** Neglectful parents often neglect themselves and see themselves as worthless people;
- **Abuse as a child:** Parents may tend to repeat their own childhood experience if no intervention occurred in their case and no new or adaptive skills were learned;
- **Depression:** May be related to faulty brain chemistry and/or a result of having major problems and limited emotional resources to deal with them. Abusive and neglectful parents are often seen and considered by themselves and others to be terribly depressed people;
- **Impulsive:** Abusive parents often have a marked inability to channel anger or sexual feelings;
- **Substance abuse:** The "high" resulting from drugs and/or alcohol serves as a temporary relief from insurmountable problems but, in fact, creates new and bigger problems;
- **Character disorder or psychiatric illness;**
- **Ignorance of child care and child development and unrealistic expectations;**

- **Isolation:** Abusive and neglectful families may tend to avoid community contact and have few family ties to provide support. Distance from, or disintegration of, an extended family that traditionally played a significant role in child rearing may increase isolation;
- **Sense of entitlement:** Belief that it's acceptable to use violence to ensure child's or partner's compliance;
- **Mental retardation or borderline mental functioning.**

Social-Situational Factors

Abuse occurs in the family context. It is important therefore to understand the factors that may affect the family unit as a whole.

- **Structural/economic factors:** The stress of poverty, unemployment, little mobility, and poor housing can be instrumental in a parent's ability to adequately care for a child. The child needs to be protected from separation from his/her family solely because of stressed economic conditions. Middle- and upper-income abusive parents may use the excuse of job or financial stress as well—abuse is not limited to families in poverty;
- **Domestic violence:** Children may be injured while trying to intervene to protect a battered parent or while in the arms or proximity of a parent being assaulted;
- **Values and norms** concerning violence and force, including domestic violence; acceptability of corporal punishment and of family violence;
- **Devaluation of children and other dependents;**
- **Overdrawn values of honor between men,** with intolerance of perceived disrespect (“dissing”);
- **Abnormal child-rearing practices** (e.g., genital mutilation of female children, father sexually initiates female children);
- **Cruelty in child-rearing practices** (e.g., putting hot peppers in child's mouth, depriving child of water, confining child to room for days, or taping mouth with duct tape for “back talk”); and/or
- **Institutional manifestations of all of the above** in law, health care, education, welfare system, sports, entertainment, etc.

Family Factors

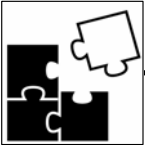
- **Domestic violence** can indicate an inability of one parent to protect the child from another's abuse because the parent is also being abused;
- **Stepparent, or blended, families are at greater risk:** There is some indication that adult partners who are not the parents of the child are more likely to maltreat. Changes in family structure can also create stress in the family;
- **Single parents are highly represented in abuse and neglect cases:** Economic status is typically lower in single-parent families, and the single parent is at a disadvantage in trying to perform the functions of two parents;

- **Adolescent parents are at high risk because their own developmental growth has been disrupted:** They are ill-prepared to respond to the needs of the child because their own needs have not been met;
- **Child-rearing styles** that are punishment-centered have greater risk of promoting abuse;
- **Scapegoating** of a particular child will tend to give the family permission to see that child as the “bad” one; and/or
- **Adoptions:** Late in childhood, special needs, or with a temperamental mismatch; Indian children not culturally matched or given a culturally responsive placement.

Triggering Situations

Any of the factors above can contribute to a situation in which an abusive event occurs.

- **There has been no systematic study of what happens to trigger abusive events.**
 - Some instances are acute, happen very quickly, and end suddenly.
 - Other cases are of long duration.
- **Examples of possible triggering situations include:**
 - A baby who will not stop crying;
 - Frustration with toilet training;
 - An alcoholic who is fired from a job;
 - A mother who, after being beaten by her partner, cannot make contact with her own family;
 - Being served an eviction notice;
 - The cessation of prescription drug used to control mental health problem;
 - Law enforcement is called to the home in a domestic violence situation, whether by the victim or a neighbor; and
 - A parent who was disrespected in the adult world later takes it out on the child.



Activity 4I: Conditions That May Lead to Abuse & Neglect

Part 2: Choose one of the five categories of factors that may lead to abuse and neglect. Complete the form below.

Indicate your selection by circling one of the categories below.

Child-Related
Factors

Parent/Caretaker-
Related Factors

Social-Situational
Factors

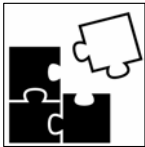
Family
Factors

Triggering
Situations

List the issues present in the Parker-Solano training case that relate to the factors in the category you selected.

Name one reason that knowing these conditions will be helpful to you when you take your first case.

Name one reason that knowing these conditions will still be helpful to you on your fifth case.



Activity 4J: Which Situation Is Hardest?

Part 1: Review the following chart, “Which Situation Is Hardest?” Use the column on the right to indicate the three situations that you would find the hardest to work with.

Part 2: Based on your responses in Part 1, answer the question below.

How might your values, thoughts, and feelings about these situations impact your effectiveness as a CASA/GAL volunteer?

Which Situation Is Hardest?

Directions: Which of the following situations would you find hardest to work with? Rank the three that you personally would find the most difficult from one to three (one being the hardest).

- | | |
|--|--|
| 1. A parent who spends most of her money on drugs. | |
| 2. A parent who believes his wife/partner deserves the beatings he gives her. | |
| 3. A parent who lies to you. | |
| 4. A parent who fondles his four-year-old child. | |
| 5. A parent who used drugs during her pregnancy. | |
| 6. A parent who refuses to take the medication that controls his mood swings. | |
| 7. A parent who left his children in the car in a parking lot while he went drinking at bars until closing time. | |
| 8. A parent who won't leave the man who physically abuses her in front of her children. | |
| 9. A parent who is so depressed she doesn't get out of bed for weeks at a time, which means her children do not eat regularly. | |

The situations described in Activity 4J involve mental illness, substance abuse, and domestic violence—three factors that put children at high risk for abuse and neglect. Consider these statistics:

- ✓ Estimates are that fifty percent of men who batter their female partners also abuse the children in the home.
- ✓ Fifty to eighty percent of all substantiated child abuse and neglect cases involve some degree of substance abuse by the child's parents.

From Violence and the Family: Report of the American Psychological Association Presidential Task Force on Violence and the Family, American Psychological Association, 1996.

The rest of this chapter and the following chapter examine individually mental illness, substance abuse, domestic violence, and poverty to see how they impact the families and children with whom the CASA/GAL volunteer works. The chapters explore what the CASA/GAL volunteer can do when faced with these issues in families.

UNIT 6: The Impact of Mental Illness on Children & Families

The last unit examined many factors that contribute to the abuse and neglect of children. Some of these included depression, character disorder, and psychiatric illness. In addition, there are many other mental health issues that impact specific individuals and their families. This unit focuses specifically on issues of mental illness in families.

Issues of Mental Illness in Families

The Facts

- ✓ Today, in the United States, over thirty-five million people suffer from some sort of mental illness.
- ✓ Mental illness affects one in four families and is more prevalent than cancer and heart and lung disease combined.
- ✓ The vast majority of people with a mental illness are not dangerous.
- ✓ Mental illness is treatable with various combinations of therapy and drugs.

Statistics from the National Resource Center on Child Maltreatment, www.gocwi.org/NRCCM.

Definition

Definitions of mental illness have changed over time, across cultures, across national—and even state—boundaries. Mental illness is diagnosed based on the nature and severity of an individual's symptoms. If a person meets the diagnostic criteria as set forth in the *Diagnostic and Statistical Manual of Mental Disorders (DSM)*, currently in its fourth edition, he/she may be diagnosed with a particular disorder such as depression, anxiety, post-traumatic stress disorder, schizophrenia, alcohol dependence, and so on. The term “dual diagnosis” indicates that an individual has two sets of problems, such as a substance abuse problem and a psychiatric disorder.

Ethnic & Cultural Considerations

There is increasing recognition that the standards for research and definitions of health and illness (and treatment) are biased because they are derived from a white, middle-class perspective. Although special efforts were made in the development of the *DSM-IV* (the standard medical diagnostic resource) to incorporate cultural information to try to reduce bias, it is important to remember that the assessment and treatment of mental illness are ethnically and culturally biased.

Causes

There is no single model or perspective that accounts for all instances of mental illness. Some disorders have a predominately biological or neurological basis; others seem to be more related to life experiences and trauma, or difficulties in communication. Many see the genesis of a mental illness as a complex interaction between innate or inherited traits and stressors. The most helpful stance for a CASA/GAL volunteer to take is to accept that mental illness affects the whole person—mentally, physically, psychologically, socially, emotionally, and spiritually.

Impact on Children & Families

The biggest obstacle facing those suffering from mental illness is the lack of appropriate, effective treatment. This lack may be a result of misunderstanding the need for treatment or being afraid to seek it due to the stigma associated with mental illness in U.S. culture. Untreated mental illness can lead to isolation and despair for individuals and families. A parent may be so incapacitated by anxiety or depression that he/she is unable to care for his/her child. Or a parent may have hallucinations or delusions, which make him/her a danger to himself/herself, or his/her children. Regardless of the type of disorder, people suffering from mental illness have a diminished ability to cope with the normal demands of life. The degree to which their functioning is impaired varies from mild to severe. It is important to note that with medication and/or therapy, most people with mental illness can function normally.

In addition to understanding mental illness, it is critical to have some idea of the parent's level of functioning in order to make recommendations that address the likelihood that parents can remedy the problems that initiated their involvement with the child protective services system. A person's level of functioning can be affected by many factors; some, not all, are related to mental illness. It is important to distinguish between mental illness and other kinds of limitations. For example, many adults have limited intellectual abilities (the term formerly used was mentally retarded) or specific learning disabilities. These limitations, just like physical ones, have a range of severity. At the mild end, parents with diminished intellectual capacity may not be able to understand the court system with its complex language or the many written documents presented to them by the child protective services agency. At the severe end of the scale, parents with grave intellectual limitations may not be able to provide basic daily care for themselves, much less for a child. The CASA/GAL volunteer must look beyond IQ or any other diagnostic term to assess how a parent functions on a day-to-day basis.

Treatment

Availability of mental health treatment varies and its effectiveness depends on a variety of factors. People are unique, possessing their own strengths, weaknesses, and cultural differences. A well-designed treatment plan takes these differences into account. Healers and practices from the person's cultural tradition (e.g., the use of prayer or meditation) can be included with other, more "Western," approaches, which might include specialized inpatient treatment (e.g., for substance abuse), medication, individual and/or group counseling, self-help groups (e.g., Alcoholics Anonymous, Overeaters Anonymous, and other Twelve Step programs), and education or training (e.g., parenting classes, anger management training).

What Can a CASA/GAL Volunteer Do?

It is not your task to diagnose mental illness. However, it is important to be aware of warning signs or indicators so that you can alert the caseworker about your concerns. How will you know mental illness when you see it? Your own internal cues are your best initial indicators that something is "off" or "not right" about a person.

Following are some indicators that may point to the need for professional assessment:

Social Withdrawal

Characterized by "sitting and doing nothing"; friendlessness (including abnormal self-centeredness or preoccupation with self); dropping out of activities; decline in academic, vocational, or athletic performance.

Depression

Includes loss of interest in once pleasurable activities; expressions of hopelessness or apathy; excessive fatigue and sleepiness, or inability to sleep; changes in appetite and motivation; pessimism (such as perceiving the world as “dead”); thinking or talking about suicide; a growing inability to cope with problems and daily activities.

Thought Disorders

Evidenced by confused thinking; strange or grandiose ideas; an inability to concentrate or cope with minor problems; irrational statements; peculiar use of words; excessive fears or suspicions.

Expression of Feelings

Such as hostility from a person formerly passive and compliant; indifference even in important situations; inability to cry or excessive crying; inability to express joy; inappropriate laughter; anger and hostility out of proportion to the precipitating event.

Behavior

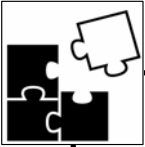
Such as hyperactivity, inactivity, or alternating between the two; deterioration in personal hygiene; noticeable and rapid weight loss; changes in personality; drug or alcohol abuse; forgetfulness and loss of valuable possessions; bizarre behavior (such as skipping, staring, or strange posturing); increased absenteeism from work/school.

(Note: As part of the assessment, it is important to determine if domestic violence and/or substance abuse are contributing or causal factors. This is a task for professionals.)

In Your Capacity as a CASA/GAL Volunteer...

- ✓ You can recommend a mental health assessment of a parent or child; and
- ✓ You may request consultations with a parent’s mental health care providers.

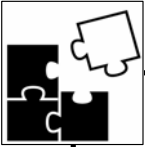
Although the parent’s mental health providers are ethically and legally required to maintain their client’s confidentiality, they may be willing—with their client’s permission—to talk with you about their perspective on the situation and any concerns you have. Your CASA/GAL volunteer supervisor will be able to answer your questions about gaining access to this confidential information.



Activity 4K: Mental Illness

Once again, review the chart “Which Situation Is Hardest?” used in Activity 4J. Using the form below, write the numbers of those situations that may involve mental health issues in the boxes on the left, and use the space on the right to write one possible recommendation for working with a family in each situation.

RECOMMENDATION	



Activity 4L: The Advocate

Read the poem “The Advocate.” Based on the chapter you have just completed and your own reflections and thoughts about families, list three key aspects of working with families that might be important in your work as a CASA/GAL volunteer.

KEY IDEAS

1. _____
2. _____
3. _____



The Advocate

This is not about
rescue, so as to feel good
when the child lights up with a
smile.

This is not about
the comfort of compassion.

This is hard work,
struggling with ripped families
and children in clouds of pain,
anger dancing round their heart
in the turmoil of a world
made crazy. This is caring,
yes, but also what is just,
what should be demanded.

It takes love
and a certain measure of courage,
and in the simple act
of person helping person,
it becomes extraordinary.

By Mercedes Lawry.



LOOKING AHEAD

Community Resources...

Reminder—Assignment for a later chapter of training

Continue to gather information on the community resource you selected for the Looking Ahead assignment in Chapter 3.

You will use the materials and information that you gather in Chapter 8.

