Guiding Principles for the Placement of Children

Guiding Principles

In making decisions regarding placement of children, there are a large number of factors and conditions that need to be taken into account. There is a particular group among these that should be viewed as generally taking priority, and which we can reasonably view as our core guiding principles. It is impossible to rank these principles in a precise order of importance, and in fact what makes our most challenging decisions so hard is usually that they involve two or more of these principles being at odds with each other. Our task is sometimes to choose between prioritizing one at the expense of others or satisfying each a little without satisfying any fully. There is not necessarily a "right" choice in these instances, and there is nothing to be done that could eliminate such challenges from occurring. The intent of this document is to provide some definition to these principles in the hope that it may be helpful when processing decisions.

We keep siblings together

The sibling relationship is among the most important in a child's life, and a growing body of research shows clearly that maintaining it needs to be a priority. Visitation can help where necessary, but nothing can truly substitute for keeping siblings in the same home. Reunification for our families brings many challenges; they are increased when the adjustments have to include siblings becoming re-acquainted. And for children who are not ultimately reunified with parents the stakes are even higher, because being placed separately for even short periods creates the risk that permanency will ultimately be achieved separately as well, which should be acceptable in only the rarest instances. All of the children in care have experienced significant loss; fulfilling our responsibilities to keep siblings together is one of the ways we can prevent them from losing even more.

We want children to have the fewest number of placements possible

Children need stability. That means keeping the same people, activities, schools, supports and actual physical surroundings in their lives. The relationship a child has with their caregivers at any given time is among the most critical, as it should be a primary source of love, comfort, safety and guidance. The other current members of a household and participants in ongoing routines play supporting roles in that process, as does the familiarity of the associated surroundings and activities. Every time a child moves there is a disruption to all of these critical components and an interruption to the developmental processes that rely on them. It is our responsibility to match children with homes that are most likely to be successful, and also to provide the support and assistance necessary to keep placements healthy and stable.

We place children in or near their home community

Guiding Principles for the Placement of Children

Children need to be able to visit with their parents, and they do better in environments with which they are familiar. Changing schools creates disruption of academic progress, travelling often or far for visits or court creates excessive transition and adjusting to entirely new communities pauses - or disrupts entirely - the feelings of stability and connection that are necessary for children to thrive. In general, the further a child is placed from their geographic origin the more complicated their development and recovery become. It is our responsibility to do everything we can to keep children near their families and home communities.

We place children in the least restrictive setting appropriate for their needs

The standing belief within our field is that children are better served in family settings than in group settings. This is rooted in the idea that the benefits a child gains from having a primary parent-child relationship with one parent or couple are diminished in settings that involve rotating adults bearing responsibility for the child's well-being. In general, this is true, and we accordingly promote placement of children in "family" settings whenever it is appropriate. There are limits on the structure, supervision, and therapeutic skill set that can reasonably be expected to be available in a family setting, and some of our children, for widely varying reasons, require these things in amounts that can only be obtained in other settings. Often these other settings bring with them loss of both freedom and normalcy, and they are most appropriately viewed as treatment alternatives to be used only as long as necessary. It is our responsibility to thoroughly and objectively assess the individual needs of each child in our care and actively seek to not only place in the least restrictive setting that meets these needs but to continually promote efforts that support therapeutic progress and long-term independence.

We place with biological family members or people connected with family whenever possible

The best way to promote and maintain healthy relationships within families is to keep them together. So when we are able to place children with members of their extended family, or with individuals who have a direct connection to their family, we need to do so. Not only is this best practice, it is the law. Because individuals who meet these criteria may share similar challenges to those that led to the children coming into our care, extra supports and services may be necessary in order to make these placements feasible. These may include material or financial assistance as well as education, guidance and behavioral support. It is our responsibility to find ways to make these types of placements work as opposed to finding or accepting reasons why they may not.

We strive to ensure healthy transitions

Guiding Principles for the Placement of Children

When children change placements and caregivers, they experience loss and a period of transition that places them at risk for disrupting developmental progress and sometimes even undoing progress already made. This is true even when the reason for the move is a "happy" or "good" one. Transitions are healthiest when all involved – including the child – are communicated with clearly and effectively, given the time to process both the impending departure and the upcoming arrival, and supported through the challenges inherent in the process. Ideal transitions involve current and future caregivers establishing functional relationships and participating in an exchange that displays mutual support and approval. Geography, interpersonal dynamics, and external factors beyond our control sometimes make achieving this extremely difficult, but it is our responsibility to consistently promote efforts designed to ensure all transitions are given the time, attention and support necessary to make them healthy.