Making the Most of Therapy for the Child in Your Care

Mental health providers, such as therapists, can be invaluable navigators on a child's or youth's healing path. As a caregiver, your involvement in therapy can range from providing transportation to sitting in on sessions and helping develop therapy goals. The child in your care may have a long-standing relationship with a particular therapist, or you may be actively involved in finding a therapist who is a good fit for the child's personality and needs. Regardless of the level of involvement the child's team asks you to provide, there are things you can do to help make the most of this critical component of healing.

Establish good communication with the child's mental health provider.
Although the child's therapist may be the expert on therapeutic approaches, you bring invaluable information about the child's day-to-day behaviors. Do your best to share anything relevant and notable with the child's therapist. For example, if you notice specific behavioral triggers; patterns of moods or behaviors; changes in moods or behaviors; or information the child has shared with you that may be relevant. Depending on the child's situation, it may be appropriate for you to sit in on at least part of the child's session or meet with the therapist separately to discuss concerns or progress. In some situations, birth parents or other family members may also be part of the child's therapy. Whether and how they take part is guided by the child's case plan and the direction of the caseworker, court, and therapist, so check with the child's team about what your role looks like.

Be responsive to the child's feedback concerning therapy or the therapist.
If the child says they do not like or are not comfortable with the therapist, share that information with the child's case manager. Pay particular attention if the child has not made any progress over an extended period, is triggered by the mention of therapy, and/or is resistant to a particular therapist. Not every therapist or therapy approach will be a good fit for every child, and that child may need your help advocating for someone they are more comfortable with. Progress may mean working through difficult memories or issues that leave the child feeling shaken or emotional, but that is different from the child saying they do not feel safe with or trust their therapist. If the child strongly dislikes a particular provider, they are unlikely to progress toward therapeutic goals or healing.

Be present to talk with the child before and after therapy sessions.
The child may or may not want to talk about therapy, but knowing you are available to listen actively can go a long way toward making sessions more productive. Some children and youth express that they don't know what to say in therapy or how to bring up what they'd like to address. The drive to the therapist's office can be a non-threatening time to offer suggestions if the child is open to it. You may offer a gentle reminder of something that came up since the last session that was difficult or

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challenging. ("Remember how angry you got with Maya last week, and you didn't even understand why?") Is there anything on their mind that they'd like help processing? Be careful to approach the conversation in a supportive, helpful way rather than an accusatory one. Be available to help the child process their feelings after a session, without pressing the issue if they don't wish to talk.

Advocate for a foster care- or adoption-competent therapist.

Not all therapists are experienced with children and youth who have experienced the grief, loss, and trauma of foster care and adoption. It makes a difference. Don't be afraid to ask mental health providers about their experience with foster care and adoption.

Check your feelings about therapy.
Perhaps you came from a family culture that believes that "family business" should remain in the family, and you've had little to no experience with therapy or mental health professionals. While that approach may work for you, children and youth in out-of-home care have experienced trauma that is going to require some level of intervention. Regardless of your feelings about the value of therapy or your comfort level with it, supporting the child's established therapeutic plan is crucial.

Remember to be mindful of confidentiality.
What's said in therapy should stay in therapy. If you are a part of the child's therapy session or if the child shares with you things discussed in sessions, it's crucial not to betray that trust by using that information against the child or sharing it with anyone else. The therapist's office needs to be a sacred, safe place where things don't get leaked to birth family members, other foster family members, etc. Ultimately, the most important thing you can do to help make the most of the child's therapy is to be cooperative and supportive of the process. Just as teachers alone cannot be responsible for a child's education, mental health providers don't solely hold the healing for children who have suffered trauma. Open communication can help ensure you and the child's team are on the same page about the therapeutic plan and goals and how they can be collectively supported outside the therapist's office.

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Resources

From the Resource Library

- The Wider Scope of Therapy
- Partners in Healing: Separating Therapy Myths from Reality
- In Their Own Words: Reflections on Parenting Children with Mental Health Issues, by Linda Grillo, Dee Meaney, and Christine Rich
- Parenting with Theraplay – Understanding Attachment and How to Nurture a Closer Relationship With Your Child, by Helen Rodwell and Vivien Norris

Learn in the Champion Classrooms

- Youth and Mental Health (Recorded Webinar)
- An Introduction to Trauma's Influence on the Brain, Body, and Behavior (Recorded Webinar)
- Mental Health 101: An Introduction to NAMI (National Alliance on Mental Illness) Wisconsin (Recorded Webinar)

Additional Resource

- Wisconsin Adoptee Therapist Directory, an outside directory from Beyond Words Psychological Services of therapists who are adoptees. Providers submit their own listings.

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