

November 14, 2005

Dear members of the CJI-AOD State Advisory Committee:

We are pleased to provide this report including a summary of comments that were heard in a recent series of focus groups with people who have had experience with alcohol and other drug problems and child protection. We hope this report will aid the Children's Justice Initiative – Alcohol and Other Drugs (CJI-AOD) Project in building the capacity of the chemical health, county and court systems to address problems, further develop cross-functional systems, and improve practices.

Danisa Farley, author of the report, is a former recipient of services involving all three systems and was successful at reunification and recovery. Her past numerous affiliations with community and county projects are included in her attached report. As a parent with first-hand involvement with the three systems and now as a member of the Core team of the State Advisory Committee, Ms. Farley is committed to bringing the perspective of parents like herself to the table. This report is one outcome of that effort.

All of the comments reported here were taken from nine focus groups in nine different locations that were held during the months of May through September. These groups were held to include the parent voice in our project work, specifically related to developing best practice guidelines. Three focus groups were held in counties that are directly involved in the In-Depth Technical Assistance (IDTA) Project as pilot projects: Ramsey, Itasca and Stearns. Five groups were held in various community locations. To refine the focus group process, an initial group was organized and was made up of parents with a history of alcohol and other drug use and involvement with child protection as well as a few interested professionals, to review our methods and questions. This helped ensure that we would get valuable information. In total, we heard from over 50 people. Each focus group was led by Ms. Farley and another member of the CJI-AOD Advisory Committee Core attended each group.

Eight nonprofit agencies and one American Indian reservation were instrumental in organizing this effort. Each organization hosted one group. All of them helped identify potential participants by mailing written letters of invitation by the CJI-AOD Advisory Committee Core to prospective participants. Partners assisting with the focus groups and a description of the structure of the groups are included in the attached report. The 12 questions asked are also in the report.

Summary of Focus Group Findings

The attached report contains many verbatim comments. While rich in detail, several themes did emerge in this process.

Intervention deemed warranted. Although parent experiences were individual in nature, there were some experiences that rang true in many of the individual family

instances. Parents agreed that at the time of intervention from child welfare that the intervention was warranted. Parents unanimously expressed that the drug activity took over areas of reasoning when it came to caring for and the safety of their children.

While parents believed that intervention was needed, it was the services themselves that seemed to alienate the parent from wanting, believing and in some cases succeeding in doing better with the now limited time frames for permanency. Parents repeatedly suggested that the services they needed were not offered in a manner that counted them as individuals. They also suggested their encounters discouraged them in most instances from admitting their need for recovery in an environment that was conducive for recovery. Neither did their encounters always reinforce their willingness to seek the services needed for their families to become healthy. A large number of parents voiced that they found themselves working through a sometimes endless stream of rules, requirements and paperwork of a system that they did not understand. Parents continually asked for understanding of a system that is designed to help families and questioned how that system justifies separating the family in treatment and recovery.

Fathers often feel removed. When it came to involving fathers, fathers tended not to express themselves as openly as the mothers did. Many said there was a grievous wound between the father (non-custodial) and the child that only understanding, information, education and advocacy could begin to repair.

Parents want advocates. It is evident that parents want help, but it's the manner in which the help is being offered that impairs their ability to attain realistic and measurable goals. While child safety and permanency is paramount for children to develop and become healthy productive members of society, we must also consider, as stated by Danisa Farley, that a parent's heart never forgets.

Please review the enclosed report and share it with others. It is our hope that the voice of parents will be heard as you read the report. We believe that their experiences will guide us in our mutual work and result in improved outcomes for families.

Respectfully submitted,

Dan Griffin, CJI-AOD Tri-team member
Minnesota Supreme Court
State Courts Administrator's Office

Carole Johnson, CJI-AOD Tri-team member
Minnesota Department of Human Services
Child Safety and Permanency

Tanya Refshauge, CJI-AOD Tri-team member
Minnesota Department of Human Services
Chemical Health Division