

ABC-V Introductory Materials

[1. Parent Handout](#)

[2. ABC-V Visitation Partnership Video](#)

[3. Updated Steps for ABC Visitation Implementation](#)

[4. Flow Chart Experimental](#)

[5. ABC for Visitation Detailed Description](#)

ABC for Visitation

What are the goals of ABC for Visitation?

- Visitations between birth parents and children recently placed in foster care can often go poorly. The goal of the project is to make visitations between children, foster parents, and birth parents in more comfortable and less awkward. Specifically, the program hopes to:
 - Strengthen the relationship between foster parents and birth parents
 - Help parents to have a successful visit, feel less rejected by their children, and so encourage repeated visitation
 - Increase foster and birth parents use of “following the lead” and delight with their children

What do I have to do?

- Families will be randomly selected to be in one of two groups, Enhanced Visitation or Visitation as Usual
- We will collect data from both groups about 5 visitation sessions in order to later compare the groups to find out if the program works.
- In **both** groups:
 - Foster parents will attend visitations with birth parents and children.
 - Visitations will be videotaped. All tapes will be kept confidential and stored separately from your identifying information.
 - After 5 visitations, the foster parent and birth parent will fill out a brief questionnaire, the foster parent will be given a short interview, and both will be videorecorded individually playing for 10 minutes with the child.
- Also in families selected for the **Enhanced Visitation**:
 - Foster parents will attend a 6-hour training about ways to support the birth parent during the visitation and encourage following the lead
 - Birth parents will arrive 15-minutes prior to the start of each of the 5 visitations to meet with a Mentor
 - Foster parents will participate in a 30-minute phone call between each of the 5 visitations to get supervision about how they are implementing the program

If you have any questions, please feel free to ask them. Researchers and experts in foster care and parenting at the University of Delaware are coordinating the study. If you desire information in the future regarding your participation in the study, feel free to contact Dr. Caroline Roben at (302) 319-1229.

ABC-V: A Visitation Partnership

Hear about the benefits of ABC-V from Nikki Jones, Human Services Support Specialist; Molech Blythe, Case Manager; Cindy, Foster Parent; Yolanda, Biological Parent.



If you have trouble viewing this video, please click the following link or copy/paste into your browser:

<http://centervideo.forest.usf.edu/qpi/abc-v/start1.html>



Attachment and Bio-Behavioral Catch-up for Visitation (ABC-V)

1. Review materials and consult with QPI: Youth Law Center and University of Delaware Infant Caregiver Project to determine whether ABC-V is an appropriate match for your agency's situation
2. If there is joint agreement, discuss recruitment strategies and procedures and randomized controlled trial with QPI and UD-ICP. Obtain basic materials.
3. Present the project to other key participants (court, attorneys, CASA or GAL, social workers, etc.) to ensure their support.
4. Submit names of potential foster parent participants for randomization.
5. Develop procedure for selection of birth families and obtaining consent for video recording.
6. Locate a site or sites for visitation equipped with video equipment.
7. Conduct trainings of mentors and foster parents who are in the experimental group:
 - a. Trainings take a few hours and there is a video available for use to assist with training, although one ABC-V expert will need to be available for the training of trainers.
 - b. Individual trainings may be most effective (strategy will be discussed with QPI and UD-ICP).
8. If needed, work with courts to develop a system for identifying birth parents of appropriate children and matching them with ABC-V foster families.
9. Site leader meets with UD-ICP to learn how to administer consent forms, record and transfer data, and discuss other strategies for implementation.
10. Video sessions and continue to consult with UD-ICP on implementation.

How to Create the Experimental Group for ABC-V:

Part 1: Placement

Identify agency mentors and potential foster parents

- Non-adoptive
- Kids aged 0-6
- Have a bed free in the near future

Give Caroline names for randomization

Recruit Foster Parents

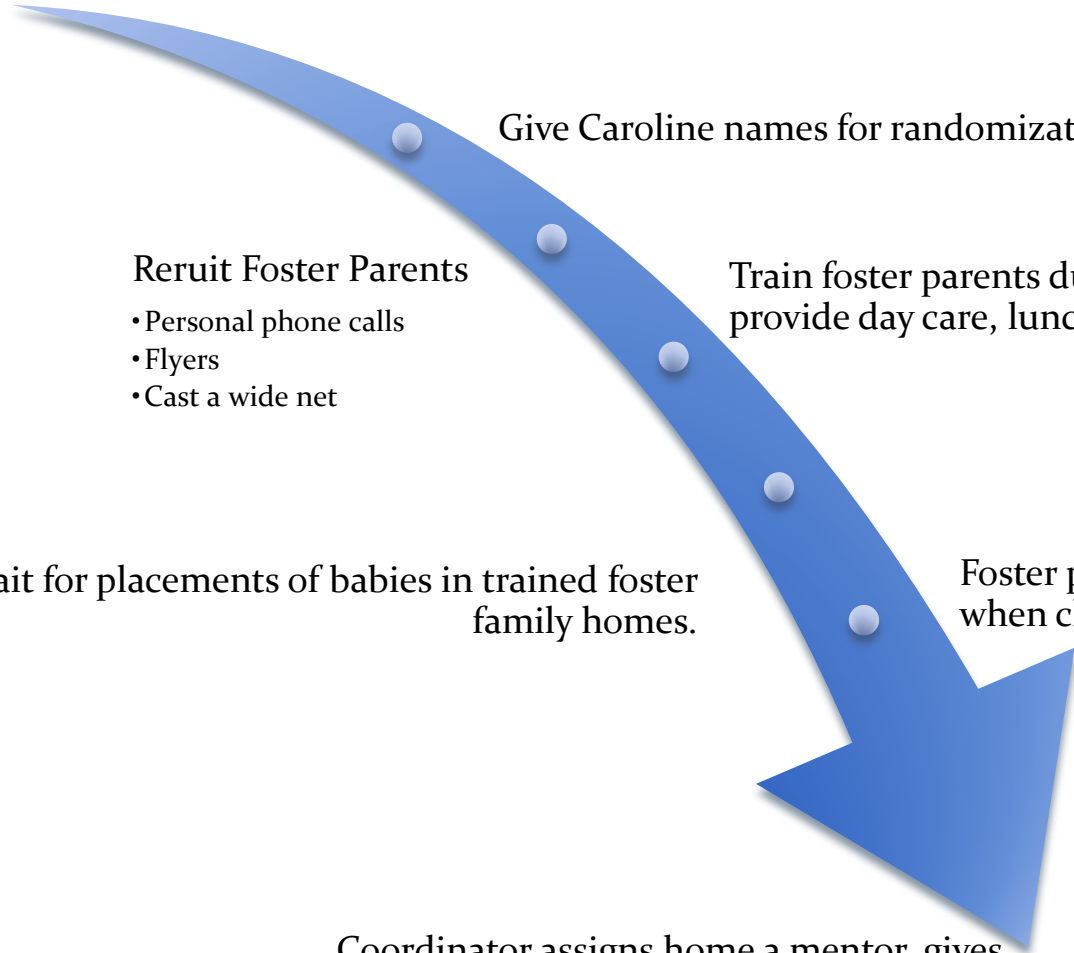
- Personal phone calls
- Flyers
- Cast a wide net

Train foster parents during the day, provide day care, lunch

Wait for placements of babies in trained foster family homes.

Foster parent liaison tells coordinator when child is placed in home.

Coordinator assigns home a mentor, gives ABC-V refresher



How to Create the Experimental Group for ABC-V:
Part 2: Pre-Visit

Mentor Fills out intake forms



Mentor calls bio-family to schedule visit

Gives overview of
program

Explains filming

Explains consents

Answers questions,
concerns



Calls Foster Parent to set up visits

reminds foster parent to be positive



First Visit

How to Create the Experimental Group for ABC-V:
Part 3: The Visit

Mentor sets up room 45 min. early

- Video camera
- Toys

Mentor meets bio parent 30 minutes early in visiting room

- Bio Parent signs consent forms
- Gets training in ABC-V curriculum

Starts video camera

Foster Parent and child come for visit

Visit starts

Visit Ends

- Foster Parent and baby leave
- Mentor meets with Bio Parent for Debrief and Check in

Complete working alliance inventory

How to Create the Experimental Group for ABC-V:
Part 4: Between Visits

Coordinator uploads
videos to Caroline via
Dropbox

Mentor watches video to
give bio-parent positive
comments next visit

- Prepares for call with Caroline

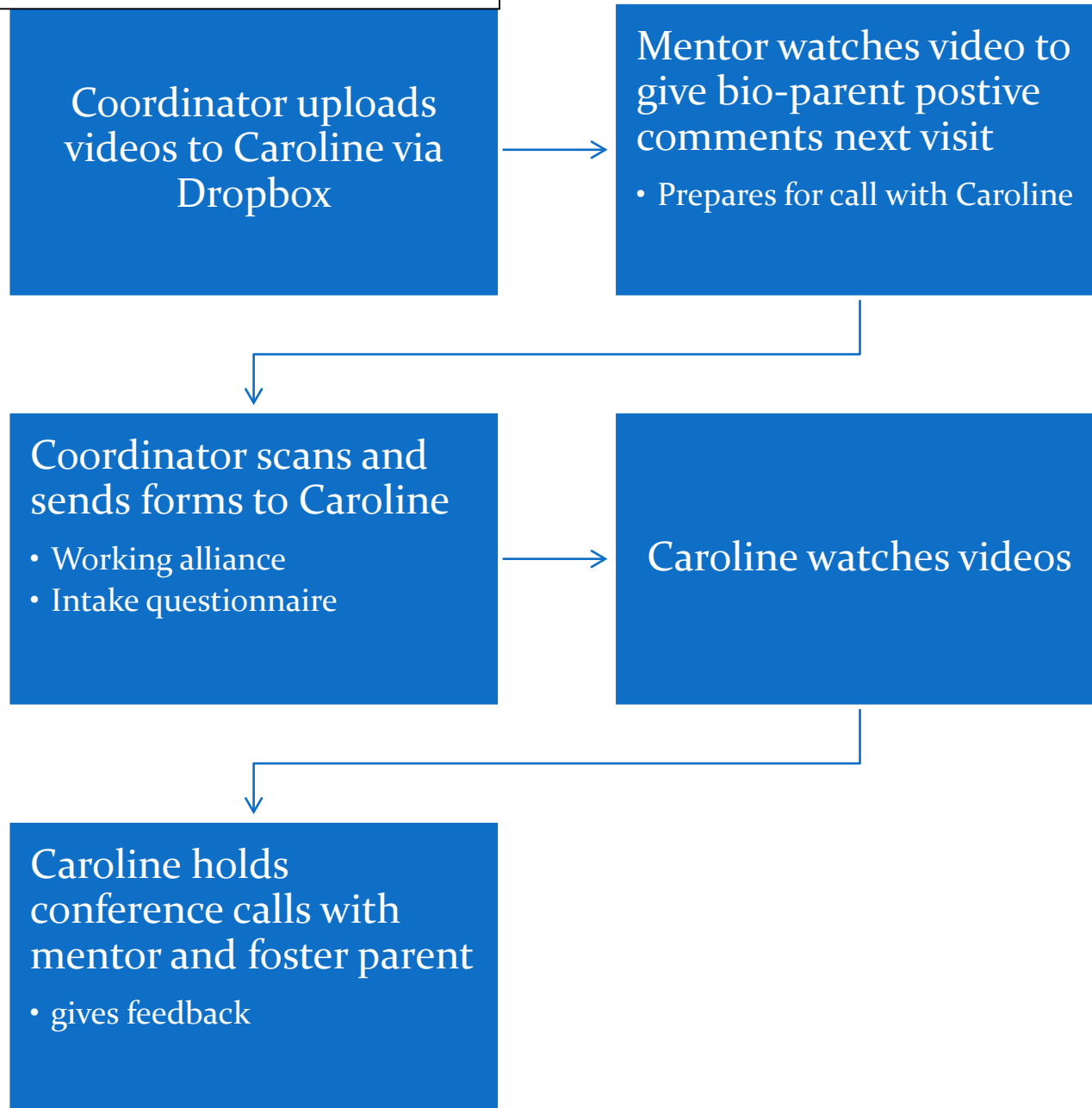
Coordinator scans and
sends forms to Caroline

- Working alliance
- Intake questionnaire

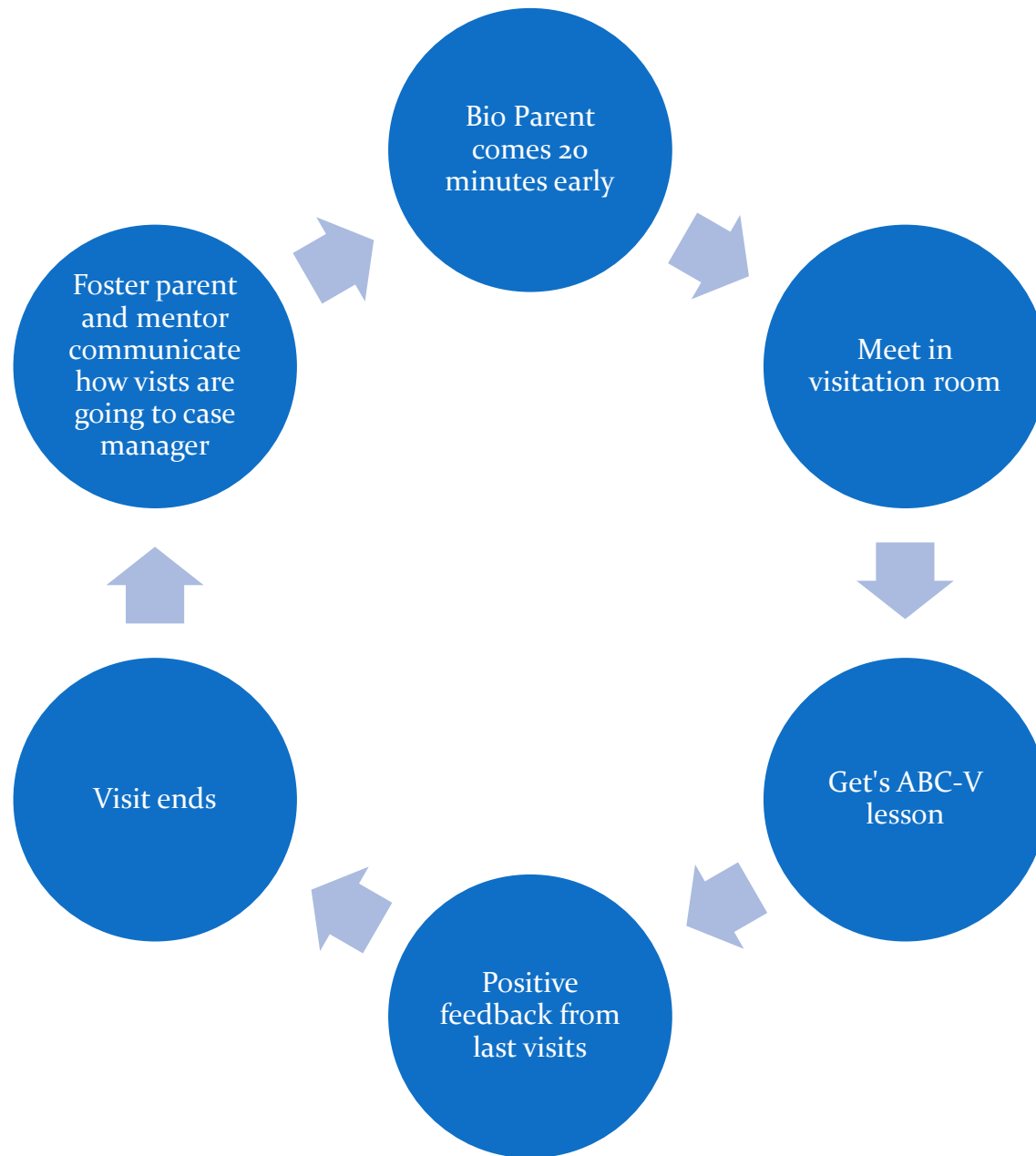
Caroline watches videos

Caroline holds
conference calls with
mentor and foster parent

- gives feedback



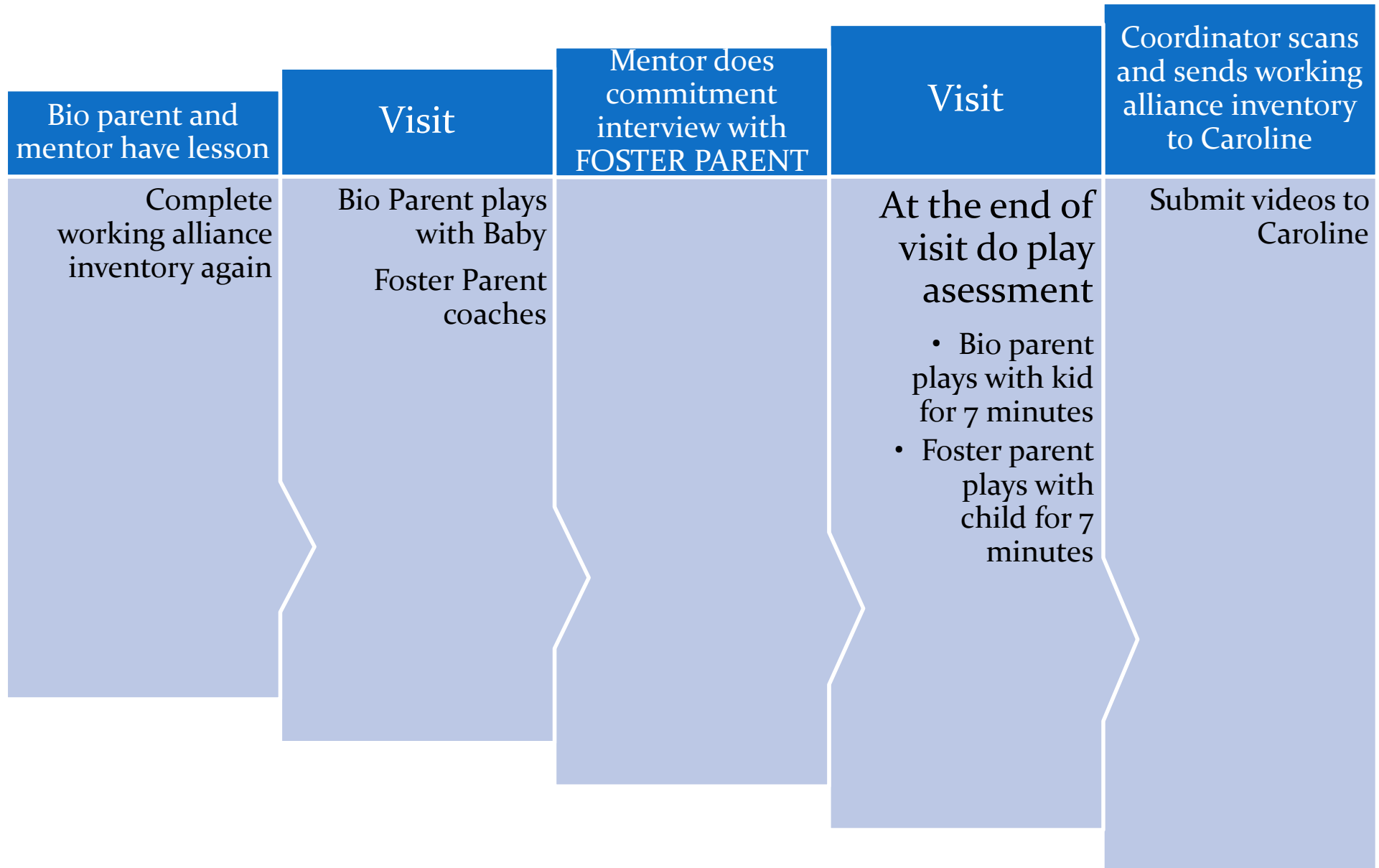
How to Create the Experimental Group for ABC-V:
Part 5: The Visit Cycle (visits 1-3)



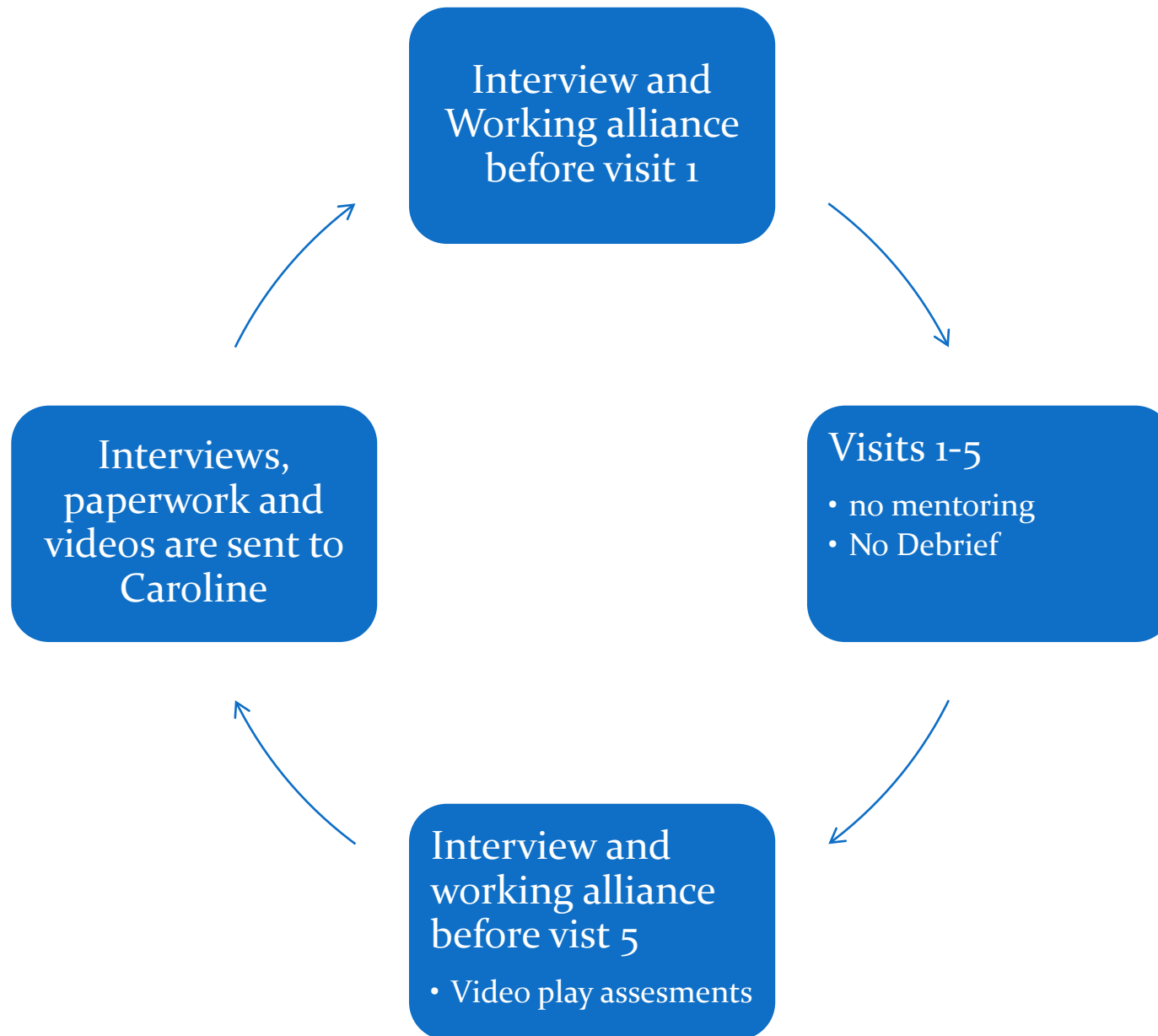
How to Run the Experimental Group for ABC-V:

Part 6: Visit 5, the last visit

TIP! REMEMBER TO STOP THE CAMERA AFTER THE VISIT AND BETWEEN PLAY ASSESSMENTS!



How to Run the CONTROL Group for ABC-V:



Attachment and Biobehavioral Catch-up for Visitation (ABC-V)

Project Description and Research Question:

In the first years of life, young children are dependent on their parents not only for meeting their basic needs and safety, but also for help regulating their physiology, attention, behavior and emotions. When infants and young children experience caregiving failures through adverse conditions such as neglect, maltreatment, and exposure to violence, they are at risk for many problems, including challenges with self-regulation and disorganized attachment. Dr. Dozier and her lab have followed several populations of at-risk children, studying the effects of early adversity on development in early childhood. We developed a parent training program, Attachment and Biobehavioral Catch-up (ABC), which is a 10-week intervention that specifically targets several key issues with parents of very young children. The intervention has been shown to be effective in improving young children's attachment status, biology (cortisol levels), executive functioning, and emotion regulation compared to a control intervention. The goal of ABC is to enhance parents' capacities for interacting with their children in nurturing, synchronous, and non-frightening ways.

ABC-V is an extension of this work to an especially vulnerable population, young children (ages 6 months through 5 years) who have recently been placed in foster care. After foster care placement, birth parents are often limited to supervised visitation at an office or "visitation center". Foster parents, now the child's primary caregiver, are only sporadically present at these visits. Such visits can go poorly; children and parents are upset; there is little structure or preparation for the visit; parents have unrealistic expectations and children may feel anxiety in the absence of their caregiver, causing feelings of rejection by the birth parent. As a result parents often miss visits in the beginning of a placement period causing further distance between parent and child, distrust between foster and birth parent, and delays in reunification. This research will test an adaptation of ABC to be used as a method for improving visitation visits between children, foster parents, and birth parents.

The goals of ABC-V are:

- 1) Strengthen the relationship between the foster parent and birth parent
- 2) Help the birth parent to have a successful visit, feel less rejected by ~~their~~ his or her child, and so encourage repeated visitation
- 3) Increase foster and birth parent use of synchrony (also known as "following the lead") and delight with his or her child

We use questionnaires to assess birth parent and foster parent perceptions of their relationship, child, and parenting (see below for more detail). We also use video observation for objective measurement of foster parent supportive behaviors, and foster and birth parent use of synchrony and delight.

Design and Methodology:

Four individuals are involved in each implementation of the intervention: Mentor, Foster Parent, Birth Parent, and Child. Mentors are staff members, case workers, or experienced foster parents at your agency. Prior to the intervention during visitation, Mentors and Foster Parents will attend a 1-day training to learn the adaptation of ABC that will be used for the enhanced visitations. Following the training, Mentors and Foster Parents will meet with Birth Parents and facilitate the visitation. Specifics about all parts of the procedure, Training, Implementing Enhanced Visits, and Data Collection, are below.

Training. The University of Delaware will be responsible for developing and presenting the initial training in ABC for Visitation via webinar, ensuring model fidelity, and conducting research on the effectiveness of the program. A video has also been created for use in training.

Implementing Enhanced Visits. There will be 5 enhanced visits between birth parents and their children. Prior to each visit, the Birth Parent will meet with the Mentor for at least 15 minutes at the foster care center for the *Pre-visit session*. At each *Pre-visit session*, the mentor will discuss concepts adapted from ABC with the Birth Parent, such as ways her child might respond to seeing her, suggested strategies for interacting with her child after a separation, and how to follow her child's lead. Directly following the *Pre-visit session*, the Birth Parent will join the Foster Parent and Child for the *Visit*. All *Visits* will be video-recorded for supervision. During the *Visits* the Foster Parent will supervise interactions between the Birth Parent and Child, act as a support for the Birth Parent, and encourage the Birth Parent to follow her child's lead with delight. All *Visits* will be videorecorded in order to monitor treatment fidelity and for program evaluation.

Pre-visit sessions and *Visits* will be monitored for adherence and fidelity to the treatment model by the University of Delaware. *Visit* videos will be watched and then Mentors and Foster parents will be contacted to discuss the *Visit* and ways to improve interaction with the Birth Parent. and meet weekly with Mentors and Foster Parents via video-conference.

Data Collection. Program evaluation will be conducted through questionnaires and video data. Questionnaires will be used to measure the Birth Parent and Foster Parent relationship. We will also monitor the record of the Birth Parent's attendance to the visitations as a proxy for Birth Parent motivation and involvement. The following questionnaires will be administered after the 5th Visit. They should only take a few minutes to complete.

1. Working Alliance Inventory for Foster Parent
2. Working Alliance Inventory for Birth Parent
3. Commitment Interview for Foster Parent
4. Record of Birth Parent Attendance (Mentor will Complete)

Video data from the *Visits* will be used in supervision to monitor adherence and fidelity to the ABC Visitation model. Video data will also be collected during Play Assessments. Foster

parents and children will participate in a 10-minute play assessment before and after the enhanced visitation. Birth parents will participate in the same procedure with their children only after the enhanced visitation is completed. During the procedure the parent and child are provided with several toys and video-recorded while playing together as they usually would. This play will later be coded for parent use of synchrony and delight.

Control Group. Half of the Foster Parents, Birth Parents, and Children recruited for the study will not initially undergo the training and enhanced visitation. Instead, they will conduct “business as usual” visits at your agency. This group will be compared to the trained group to measure changes in parenting, feelings of support, and the parent-child interaction as a result of our intervention. However, because this training is expected to benefit all participants, the training will be offered to Control Group Foster Parents after they have completed 5 visits and all research measures. The only difference between the typical procedure and this group is that Foster Parents in the Control Group will be asked to attend the *Visits*. We do this so that if we find differences between ABC-V and the Control group we can ensure that it is due to the additional training and not due only to the Foster Parent’s presence in the *Visit*.

Sampling Method:

Prior to training, foster parents who are eligible to receive a child in the correct age range and have consented to being involved will be randomized into the ABC-V group and the Control group. Those randomized into the ABC-V group will be asked to attend training with the Mentors. *This part can often be tricky for site leaders to coordinate. We will consult with you over the phone about the best procedure for randomization.*

Data Analysis:

T-tests and ANOVAs will be used to compare the ABC-V group with the Control Group on a variety of measures. We will compare ratings of the relationship between the Foster and Birth Parents as assessed through questionnaire, and we will compare scores on the Play Assessment video observation. We will also compare rates of attendance on visits. Last, we will code the *Visits* themselves for target behaviors (e.g., Following the Lead) and can compare rates of these behaviors between the group across the 5 sessions.

Potential Benefit for Families:

It is hoped that the enhanced visitation will provide benefits to foster parents, birth parents, and children. We hypothesize that the enhanced visitation could strengthen the relationship between the foster parent and birth parent, help the birth parent feel less rejected by her child, and increase foster and birth parent use of synchrony and delight with her child. Foster parents randomly assigned to the control group will be given the opportunity to participate in the enhanced visitation after the conclusion of the study in order to receive potential direct benefits as well.

The research is expected to provide valuable information about how a much-needed program designed to improve what can be a difficult experience for a vulnerable population, visitation between birth parents and children recently separated by the removal of the child into the foster care system. If successful, this program could be used on a wider scale to improve

visitation for many families. If it is not successful, the information could provide valuable information for how to design a program that could be more successful.

Consent Procedures:

The following script should be used by when approaching selected foster parents:

“As you may know, supervised visits between birth parents and their children can be challenging. The University of Delaware is conducting a study to evaluate an enhanced visitation procedure called ABC for Visitation. It would involve participating in a 1-day training to learn strategies for supporting birth parents during the visit and encouraging them to interact with their children in a way that helps their development. The study will evaluate 5 supervised visits, and before each you would meet briefly with a supervisor over the internet to review ways to support the birth parent. Because we want to see if the training works, only half of the people in the program will initially complete the training. All enrolled foster parents would complete some questionnaires and be videorecorded during play with the child in foster care. If you are not randomly selected for the training you will have the opportunity to be trained afterwards if you would like. We think this could benefit birth parents, your relationship with birth parents, and the children. Would you be interested in participating?”

The following script will be used by the foster care agencies when approaching selected birth parents:

“The University of Delaware is conducting a study evaluating an enhanced visitation program. If you and the foster parent agree to participate, the foster parent would either have visits as usual, or receive training and you would meet with a mentor before each of five sessions. We would ask you to fill out questionnaires before and after the five sessions. If you are interested in hearing more about this, we’ll have researchers meet with you to explain everything and see if you are interested.”

Procedures to Maintain Confidentiality:

Parents participating in the study are assured of full confidentiality. Participant confidentiality will be protected by storing data and consent forms in locked cabinets. Video recordings, which are electronic files, are downloaded to a secure server that is stored in a locked room on campus. The computer file, developed for data management and analysis, will not identify participants by name. Because participants will return for repeated visits, the study requires a master list linking respondents, ID numbers, addresses and phone numbers. The master list will be stored on password-protected computers that are stored in locked offices at the University of Delaware.