



The 3–5–7 Model: Preparing children for permanency

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Abstract

This article introduces a practice model for the preparation of children for permanency. It is based on three components: (1) the completion of three tasks—clarification of life events, integration of all family memberships, and actualization in belonging to a new family; (2) the answering of five conceptual questions relevant to each child living in placement, Who am I? What happened to me? Where am I going? How will I get there?, and When will I know I belong?; and (3) the use of critical skill elements in the preparation work: engaging the child, listening to the child's words, speaking the truth, validating the child's life story, creating a safe space, going back in time, and recognizing pain as part of the process. By incorporating this model, workers and families conducting the preparation work, assist the child in grieving losses, formulating self-identity, establishing trust and security through attachments, and building relationships and openness to join families on a permanent basis. © 2004 Elsevier Ltd. All rights reserved.

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1. Introduction

There is no systematic model currently in practice to guide permanency work for those children living in out-of-home care within the child welfare system. The purpose of this paper is to describe a model to guide social work interventions with these children. The

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model proposes specific intervention areas that will meet the needs of children who are dealing with issues of trauma, loss and grief. Although these areas have been previously identified as theoretically important, the model links these concepts to specific intervention strategies and an overall approach to facilitate permanency.

The 3–5–7 Model is a newly developed method that provides a specific approach for those who work and live with children in temporary care, remain in care and are making the transition to permanency through reunification, kinship care, adoption, or permanent legal custodianship. Much of the work done with children is predicated on the assumption that children in care have many unresolved losses. Therefore, the model incorporates activities involving the reconciliation of these losses, which can be accomplished through the exploration of three tasks, the answering of five conceptual questions, and the incorporation of seven critical skill elements.

2. The model

Central to successful transition of a child from uncertainty to permanency is the ability to understand and assess the child's readiness for permanence. The 3–5–7 Model is based on a formula that weaves together three components through a variety of activities that will assist the child in making a successful transition from uncertainty to permanency as he/she reconciles the separations and trauma of his/her life. These components are:

- Completing three tasks (CIA): clarification, integration, actualization
- Answering five questions: Who am I?, What happened to me?, Where am I going?, How will I get there?, When will I know I belong?
- Implementing seven critical elements: engage the child in the process; listen to the child's words; when you speak, tell the truth; validate the child and the child's life story; create a safe space for the child as he/she does this "work"; it is never too late to go back in time; pain is part of the process

By applying these skills and exploring the answers to these questions, the child is able to clarify life events, integrate family memberships and accept membership in various family systems, and, in the process, actualize belonging to one "permanent" family.

The core work of the 3–5–7 Model focuses on the issues of loss, identity, attachment (Morton, 1984), relationships, and safety (Henry, 1999). Siu and Hogan (1989b) presented a continuum for the clinical themes of separation, loss, identity, continuity, and crisis. Ignoring continuity increases the child's confusion about identity; loss is connected to the child's identity; separation from a significant person constitutes a crisis for the child; and threat to identity increases the child's vulnerability to crisis.

3. Tying the model to literature

Henry (1999) explored safety and relationship building. An abused and/or neglected child has an enduring need for safety. The child's perception of safety subsequently

becomes a critical element in the placement of many children. Although foster care is meant to provide a safe environment for the child, the child's perception is that foster care is a change that results in feeling unsafe. Children develop instincts in their social contexts and relationships as to whether this new environment will be a safe environment in which to complete their grief work (or to at least begin the grieving process). Although placement intentions are always intended to assure safety for children, the child alone determines whether he/she perceives a feeling of safety in his/her connections with others.

A review of the literature shows that no standard approach to preparing children for permanency has been established. Although the issues (separation/loss, abuse/neglect, and attachments) for children have been identified and treatment approaches have been suggested, a model for intervention that provides consistency for the child and a common framework and language for those engaging the child in this preparation work is missing. A 2002 survey conducted by the Pennsylvania statewide adoption hotline, Helpline, revealed that, of 32 states responding, only 5 (Maine, Massachusetts, Missouri, Mississippi, and New Hampshire) had a state sponsored initiative for preparing children for adoption/permanency.

Preparing children for adoption/permanency has long been recognized as a goal for children living in placement with the child welfare system: "Effective preparation of special-needs children for adoption is essential to a successful adoption program" (McInturf, 1986). Since the mid-1960s numerous researchers and practitioners have discussed the need to prepare children for this process, and they have identified a variety of techniques and approaches to do this work (Alexander, 1999; Brodzinsky & Schechter, 1990; Fahlberg, 1991; Fahlberg & Jewett, 1982; Horner, 2000; Jewett, 1978; Kagan, 1980; Komar, 1991; Morton, 1984; Rycus & Hughes, 1998; Siu & Hogan, 1989a).

Jewett (1978), Fahlberg (1979, 1991), Fahlberg and Jewett (1982), and Donley-Zeigler (1996) have been pioneers in the field of placement issues and preparing children for permanency. Each has made significant contributions towards understanding the issues for children in placement and provided practical approaches for working with children.

The primary goal in preparing children for permanency is to assure readiness (the child's acceptance of a new family) for placement with a permanent family. Preparation for permanency must address the major issues of loss, identity, and attachment (Jewett, 1978; Morton, 1984) through a process of clarifying life events with the child (what has happened), integrating experiences with past families and/or caregivers (the experience of being a member of more than one family), and helping the child actualize permanency (reunification or adoption) (Child Welfare League of America, 2000; Donley-Zeigler, 1996; Gries, 1986; Rycus & Hughes, 1998).

The language, "preparing children for adoption", has been used as a description for two distinct, but interrelated goals in permanency planning. Field Guide to Welfare Child (Rycus & Hughes, 1998) outlines two activities for permanency planning: actual placement work, and the assessment of the child's development in a conceptual framework for preparing the child for adoption.

The first activity, in this guide, includes concrete steps toward the placement of a child, primarily telling the child about the family, arranging for visitation, and evaluating the "success" of these preliminary contacts so that a match is made between the interested family and the waiting child. The second activity references the process in which the child

is helped to cope with and to understand feelings. Efforts are made to identify/assess the steps to help the child process and resolve past issues of abuse and prior placement experiences. This second activity towards preparing children for permanency is the focus of this article.

3.1. Clarification, integration, and actualization

The tasks of clarification, integration, and actualization (Donley-Zeigler, 1996) guide our interventions with children in preparation for readiness to accept membership in new families. Although these tasks provide a method to assess readiness, they are also indicators of where the child is in moving towards reconciliation of losses (Wolfelt, 1996) and resolution through the grief process.

Clarification is the task of assisting the child in understanding what has happened in life. Essentially, clarification means to identify and make sense out of the events of his/her life, to provide a factual base to understanding and to clarifying what is real and what is unreal for the child. Clarification is a lengthy process. Progress depends upon where the child is developmentally and cognitively as well as his/her readiness to accept information about his/her history and life events. This is not a linear process, but one that ebbs and flows in the ongoing work being conducted with the child.

Integration is the process through which children develop the ability to understand their membership in numerous families. Many children in placement have lived with a variety of individuals or families prior to coming into care. Their membership in all of these family systems needs to be explored so that children begin to understand who had meaning to them and for whom they had meaning. As a result, they gain the perspective that they belonged to more than one family. During integration, children accept that they do not have to choose membership in one particular family. Moreover, they begin to deal with loyalty issues towards their biological parents, and biological family members, if they are not going to return home.

Actualization is the ability of children to begin visualizing their membership in one specific family. Whether they move towards permanence through adoption, reunification, kinship care, or permanent legal custodianship, they visualize what it is going to be like to be a member of the family. Too frequently, this process does not occur until after children have been in their adoptive or permanent family placement. In an ideal world, this process would be conducted or completed during the pre-placement phase as children are developing relationships with their new permanent family.

3.2. Five questions

Children living in the child welfare placement system experience multiple losses due to the traumas of abuse and separations (Donley-Zeigler, 1996). Many of the issues related to behavioral difficulties, behaviors that are difficult to manage in the foster care system and subsequently in adoptive homes, are the result of the unresolved grieving process for children who have been in the system.

Critical knowledge of the impact of separation and loss influences the assessment of and interventions with children who present these behavioral reactions. Too frequently,

children are viewed as disturbed rather than grieving (Fahlberg, 1991; Rycus & Hughes, 1998). Brodzinsky and Schechter (1990) have suggested that much of what has been called pathogenic in the adopted child's behavior is nothing more than the unrecognized manifestation of an adaptive grieving process. In her work on treating complicated mourning, Rando (1993) describes intensified rage states and categorizes three states of pathological grief—fear, rage, and deflection; however, no diagnostic category has been established for children experiencing long-term “temporary” losses.

These symptomatic children are commonly diagnosed with adjustment disorders, conduct disorders, oppositional defiant disorder (ODD), and attention deficit hyperactivity disorder (ADHD) (Gries, 1986; Kagan, 1980). Rycus and Hughes (1998) state that the anger and oppositional behavior in children is often diagnosed as severely behaviorally handicapped or emotionally disturbed.

Children have many conceptual questions related to their losses, subsequent feelings, and uncertainties about where they will be living. The answers to these questions are critical to their readiness to transition to permanency: Where have I been? Who am I? Where am I going? How did I get separated from my family? What will happen to me? Why did this happen to me? Why didn't my parents raise me? Will my adoptive parents keep me? What did I do to deserve this? Does anyone know I am here, or even care? (Bothun, 1994; Brodzinsky & Schechter, 1990; Grabe, 1990; James, 1994; Jewett Jarrati, 1994; Littner, 1975). In the 3–5–7 Model, five questions emerge to provide a frame of reference that addresses the issues of loss, identity formation, attachment, relationship building, and claiming/safety. Each question correlates to these five issues.

What happened to me?	Loss
Who am I?	Identity
Where am I going?	Attachment
How will I get there?	Relationships
When will I know I belong?	Claiming/safety

Exploring these five questions and issues organizes the work to be done through various activities and techniques, such as life books, timelines, and collages. As each of these questions is addressed, the child also moves through the tasks of clarification, integration, and actualization.

3.2.1. *What happened to me?—(loss)*

The first question, “What happened to me?”, addresses children's losses in placement. Children placed into foster care experience the loss of biological family members, friends, pets, schools, previous caregivers, their familiar environment, and established relationships. By clarifying for children what has happened in relation to the events under which they came into care, their understanding of why they are now currently living where they are, and where they have lived in the past, this review provides the opportunity for the child to integrate new family memberships. Clarification here also makes efforts to answer why they may no longer be returning to the care of a biological family member.

Even though life may have been less than perfect, as the question “What happened to me?” is answered, children will grieve these losses (Donovan & McIntyre, 1990; Edelstein,

Burge, & Waterman, 2001; Rycus & Hughes, 1998; Timberlake & Verdick, 1987). For many children in care, contact has been ongoing with biological families, due to delays in termination of parental rights and goal change to adoption if the child will not be returned to parental custody. However, children still have the feelings of loss that occurred at the point of removal from this parenting relationship. Hence, grief work should begin at this point. Where possible, families can assist their children in forming relationships with new caregivers by giving them their blessing to do so.

Children grieve and adults must understand their intensely painful responses to trauma and loss (Rando, 1993). Many children in the child welfare placement system experience non-resolution of their losses. Although endeavoring to mourn, they find minimal consistency or validation to support this mourning process. As a result, there is an increasing intensity of their unexpressed feelings and behaviors, deepening depression and the progression of protest into anger and ultimately rage.

Children whose grief has not been recognized, increase shock/protest behaviors, and the behaviors progress from protest to anger to rage. Frequently, the rage behaviors of children are layers of unresolved grief. Understanding normal consequences of loss provides prerequisites for treatment and helping children mourn losses. The emotions of anger, hostility, and frustration in children who mourn manifest as difficult behaviors to tolerate.

Children who do well in foster homes and adoptive placements may do so because of the conscious or unconscious ability of those foster and adoptive parents to assist children in grieving their losses. By understanding that the behaviors of most children in care are the result of unresolved loss, a different perspective can be taken on how to work towards the resolution and reconciliation of their previous losses. Rycus and Hughes (1998) suggest that, if behavior is properly identified as an expression of normal grieving, caregivers are more able to support, and provide opportunities to express angry feelings, while setting limits. It should always be assumed that children are experiencing separation trauma.

Children may express grief through acting out and engaging in aggressive behaviors with the only available adult, frequently the new foster parent. Asking the child to make a commitment to a family brings him/her into conflict with the internal controls that may have been developed for survival (Grabe, 1990). Within the child welfare system, it is often at this point that foster parents may have reached their limit of tolerance and have asked for the removal of that child. The removal of the child then establishes another loss—another unresolved loss, once again contributing to that sense of “unsafeness” for a child in transition. It also increases the child’s behaviors around raging and/or withdrawal.

“What happened to me?” speaks specifically to the loss issues for children and clarification of life events assists the child in the reconciliation of their previous losses. Throughout the work, in finding answers to this question, activities are focused on helping children find ways to grieve these losses. It is painful work for the child and can be painful for the worker helping the child through this grieving process.

According to Grabe (1990), children do not understand the meaning of “temporary” and they are expected to absorb anger from all of the moves. Successfully facilitating the grieving process will bring out angry feelings that must be managed in the child (Fahlberg,

1991). However, as children move through understanding to acceptance of the losses, they are better able to do the tasks of the integration phase.

Exploring loss and disruption from the perspective of meaning and concerns of the child frequently differs from what is assumed by an adult, who looks at loss from an adult perspective (James, 1994). It has been well documented that the preparations of a child are essential to the success of placement and that the child needs to work through grief issues to be able to bond with the new family (Berman, 1986). The use of life books, timelines, life maps, and collages are excellent tools for this process.

3.2.2. *Who am I?—(identity)*

Children's identity is formed through a variety of interactive patterns with those individuals in their lives. Identity formation is a developmental process, traditionally culminating in adolescence with a sense of self (Erikson, 1963). The loss experienced by adopted children centers as much on self-identity as on the lost relationship with the birth parent(s). Their lives are forever different (Van Gulden & Bartels-Rabb, 2000). Identity confusion results from having a variety of caregivers, the loss of biological parent connections, and subsequent caregivers in the placement system.

Because children in care have lived in a variety of home environments with various caregivers, this question, "Who am I" is more difficult to answer. The challenge for children in placement, in terms of knowing who they are, is putting together fragments of information in a confusing puzzle. They have received a variety of messages regarding who they are, what has been acceptable about them, and what has been liked or not liked about them. The activity and techniques used here provide children with a more complete sense of identity in the ongoing search for self.

For separated children growing up in "substitute" forms of care, studies (Jewett Jarrati, 1994; Siu & Hogan, 1989b) suggest that the achievement of a clear sense of identity and sense of security are linked to several factors: (1) the childhood experience of being wanted and loved within a secure environment with quality attachments; (2) knowledge and awareness about personal history, heritage, and genealogy; and (3) the experience of being perceived by others as a worthwhile person. The need for connectedness and continuity in family ties is crucial for emotional growth (Brodzinsky & Schechter, 1990; Martin & Groves, 1998; Rosenberg, 1992).

As children find answers to the question, "Who am I?", through clarification and integration, they develop a more complete picture of self, a sense of identity, and an integration of life events and family memberships. This clarification process helps them sort out what may be factual and what may be non-factual.

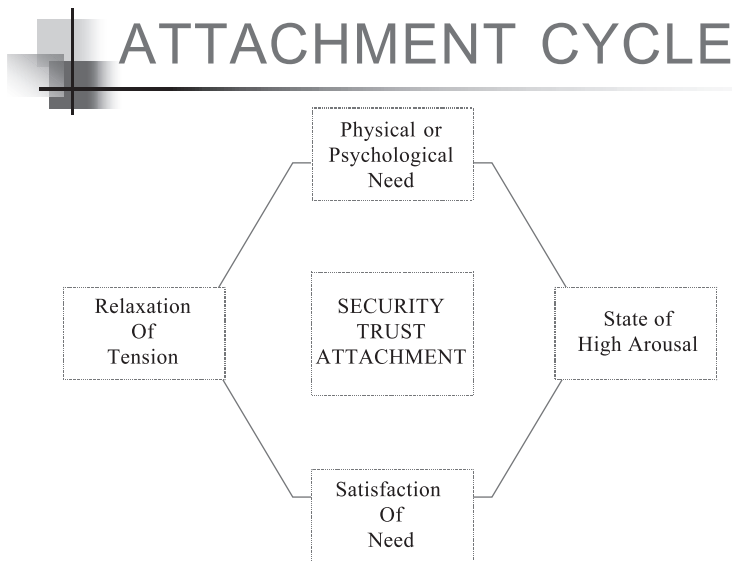
The integration process involves dialogue and interactions with children to help them look at all of their families. It provides the opportunity for children to think about their own family, what have been their memories of those individuals, and what messages they have been given about who they are.

3.2.3. *Where am I going?—(attachment)*

The process of answering this question, "Where am I going?", integrates aspects of all five questions for children: losses, identity, and forming new relationships (attachment) in a perceived safe environment. This is central to helping children make the transition from

the past to the present and develop a plan for the future. Foster children know there are no guarantees or assurances that, where they awoken in the morning, is where they will be sleeping that night.

The work of Bowlby (1980, 1988, 1982) on separation and attachment provides a foundation for understanding how children experience and respond to loss. Children living in placement have experienced numerous disruptions to their relationships. If they receive prompt, accurate information about what has happened, are permitted to ask questions and receive honest answers, then they usually have the capacity to establish new relationships and form attachments within the construct of family settings (Jewett Jarrati, 1994).



As children successfully engage in the grieving work, their ability to attach improves. What is the children's capability to attach? What attachment difficulties have they had in the past? Who is relevant and meaningful in their lives? What traits and qualities are important to them in peers, adults, and other individuals? Answers to these are all critical components helping children to know where they are going.

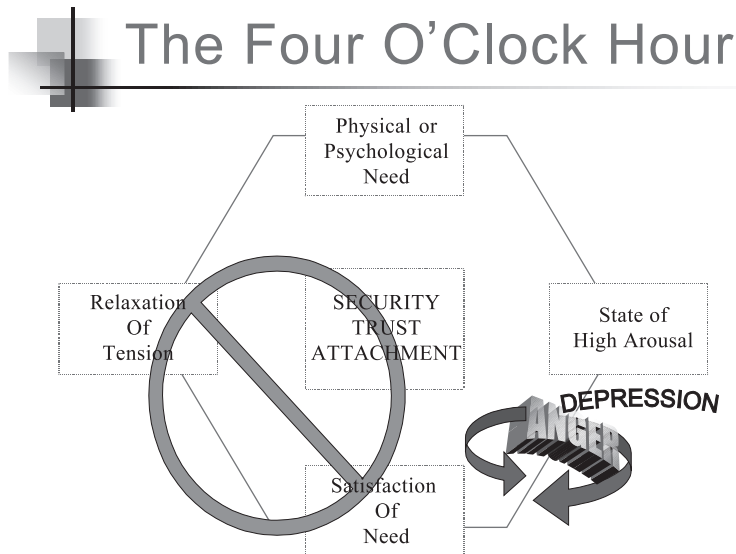
Fahlberg (1979) developed the following arousal relaxation cycle (also known as the need cycle and the attachment cycle), a visualization of the attachment process, to guide understanding of what happens when children have needs, how need satisfaction affects attachment, and how the cycle ultimately affects trust and security.

This cycle is predicated on the meeting of needs to establish a sense of security as well as a sense of trust that these needs will be met again as they arise in the future. When physical and/or psychological needs are responded to consistently, a child learns to trust caregivers to satisfy needs. Ultimately, the child perceives the individual as safe and a feeling of trust/security is established as a basis of building the relationship. Without this need-response reaction—trust and security may be tentative, thus resulting in insecure

attachments/relationships throughout a child's life. The attachment cycle is critical to understanding how children form attachments.

The strength of attachments is based on the elements of stability, continuity, and mutuality (Hess, 1982). Stability consists of a supportive environment that does not interfere with parent–child relationship building. Continuity assures that the parent or adult will be available to respond to the child's needs. Mutuality is the interaction between the child and adult/parent, which reinforces the experience that each is important to the other. For children to reconcile losses, a secure environment and positive relationships are essential. This allows them to integrate emotions and behaviors preparing them to move forward. Grieving children who do not find continuity, stability, and mutuality in relationships become stuck and express behaviors on a continuum from attachment difficulties to reactive attachment disorder.

In the 3–5–7 Model, the Kubler-Ross (1969) stages of grieving (denial, shock/protest/anger/rage, bargaining, depression, and acceptance) are overlaid with the attachment cycle to provide an understanding of the behaviors that children may be presenting in the context of the separation/grieving process.



The behaviors (state of high arousal) occur as a result of feelings associated with hurt and pain, due to loss/abuse/neglect, and may range on a continuum from angry, hostile expressions to passive, withdrawn activities. If reconciliation of the needs is not satisfied, the child will accelerate and/or intensify the behaviors. Caretakers may see a variety of behaviors ranging from deep depression to raging destructive actions. Often, between the expression of behaviors and interventions for satisfaction of need, children are moved, again creating new losses and another layer of unmet needs within the grieving process. Thus, a connection is made between rage and grief.

Euphemistically, this event is referred to as the “4 o’clock hour”—as the request for removal of the child is sometimes made at this time on a Friday afternoon. Placement decisions are then made for expedience and “bed availability” rather than the best plan to meet the child’s needs. Frequently, children remain in these temporarily planned placements and experience another crisis of loss with minimal recognition given to their hurt and pain and no continuity in the grieving process.

The attachment process demonstrates the need for repeated application of the need satisfaction cycle. As the child expresses his/her needs through various behaviors, if the child is satisfactorily responded to, the child will relax until the need/pain is felt again. Understanding this cycle and its interruptions is the work of helping children grieve through the attachment process. Noncompletion of the cycle, in response to a child’s needs, either by a caretaker, or through moving the child, interrupts the grieving cycle and does not allow the child to integrate feelings and behaviors and move toward self-understanding (actualization).

3.2.4. How will I get there?—(building relationships)

The fourth question, “How will I get there?”, is an extension of the third question. Children grieve and reconcile losses in the context of a relationship (Wolfelt, 1996). When the relationship-building process is terminated, children experience new losses, and further their grieving needs. As the attachment process is “recycled”, children build relationships through the establishment of trust and perceptions of security and safety. Safe relationships enable children to reconcile losses as they move through placement into relationships within new families.

As children do this, they are moving through integration into the actualization phase. The repetitive interactions of a reciprocal attachment process, with elements of stability, continuity, and mutuality, will assure that children and families are building more permanent relationships. Fahlberg (1991) noted that children’s perceptions and environment affect the resolution of their grief.

3.2.5. When will I know I belong?—(claiming/safety)

The fifth question advances the resolution of issues from the previous four questions. As children receive more consistency in their need satisfaction and move through the attachment cycle, they are building relationships. The question of “When will I know I belong?” is answered in the claiming process that occurs between children and families. It should also be noted that it frequently occurs at differing rates for a child and family. Repetition of the cycle ensures ongoing interaction between caregiver and child as they attempt to build a relationship around the meeting of needs. For many children and families, this is an ongoing, life long process that requires steady attention and conscious effort.

That sense of belongingness for children where they feel secure, where they have a sense of safety, and where the family is sensitive to their loss issues, helps children with the process of actualizing who they are in new family relationships.

These five questions are intertwined and ongoing. The length of time needed to answer these questions to assist children in their readiness for permanency is undetermined. It is specific to each individual child, to the understanding, patience, and skills of the workers

engaging the child, and the foster and adoptive families caring for the child, as they prepare the child for permanency.

3.3. *Critical elements to preparing children*

Seven critical elements to preparing children have been identified (Damiano, 2002) and set the tone and philosophy for working with children. Workers

- must engage the child in the process,
- listen to the child's words,
- speak the truth,
- validate the child and the child's life story,
- create a safe space for the child to do his/her work,
- allow that it is never too late to go back in time, and
- acknowledge that pain is part of the process.

Regardless of which developmental pathway the attachment process has taken, children must be assisted in mourning their loss and separation from loved ones. For many this means going back and reexperiencing the traumatic events. It means teaching the caregiver how to give the child permission to feel angry or how to deal with his/her aching sadness. The clinician may need to probe for feelings the child had hidden from self, and then teach the child various ways in which feelings can be expressed (James, 1989).

Preparing children for permanent placements depends on age and circumstances, the philosophy and techniques of those doing the preparation, and the agency's approach to the work to be done (Cole & Donley, 1990). Efforts are made to demystify the child's background, explain current and future behaviors, and prepare the child and new parents for a longer period of adjustment. Several things must happen for children before they are ready for adoption/permanency. These include facing their feelings about their biological family and the separation from them, and dealing with feelings about various moves that may have occurred while in placement. They must realize that as foster children they may be moving again, and be allowed to express feelings of sadness, anger, rejection, or anxiety about the move. Their understanding of adoption and their entitlement to a permanent family must also be addressed.

All of this should be done in the context of going to the "child's world", meeting each child where he/she is to establish a relationship with the worker, foster family, and/or permanent family (adoption, kinship, legal custodianship, biological). The pace at which this work will be done will vary with each child (and the skills of the worker). The child must be told the truth about any loss in a manner appropriate to his/her developmental level. Not telling the child the true facts may cause further trauma because he/she will feel betrayed (and lose trust) when the truth is revealed. Caregivers can inadvertently block the child from going through the grieving process by congratulating the youngster for cooperation, for being "good", and a "quick adjustment". Children may also block their feelings, numbing themselves emotionally, because they are fearful of behaving badly, believing that worse things may happen (James, 1989).

Children are often presumed to be prepared for their move into an adoptive home, but they may have never been helped to understand their past separations and grieve their past losses. According to Jewett (1978, p. 62), the key to implementing the preparation process rests on the knowledge and skills of the worker.

One of the most important things in the preparation of children for adoption is that the worker herself be properly trained and able to operate effectively; there must be enough time allowed for the child to establish a supportive relationship with the worker, and for the child to do the necessary emotional work to be ready to move.

Siu and Hogan (1989b) identified that the reluctance of child welfare workers to deal with separation is due to their own separation anxiety as well as “rescue” fantasies to provide safe environments for abused and neglected children. Palmer (1995) conducted a research project that trained workers, and followed their practice, in helping children deal with separation. She references case illustrations that show how difficult it is for workers to deal with children’s feelings during the painful process of moving from one place to another. If workers have their own unresolved, unpleasant or threatening feelings, if they have avoided helping the child to deal with loss and rejection, the child may enter a new family still hurting from the past. More time is needed to heal and the trust-building relationship must begin again for the child (Jewett, 1978).

4. Implementation of practice and training

In 2003, the Pennsylvania Department of Public Welfare’s Office of Children and Youth adopted the 3–5–7 Model as the basis of practice in preparing children for permanent placement for all children living in the child welfare system. Public and private child care agencies have received training on the model through regional and statewide workshops. On-going training continues to be provided on evaluation findings and specific techniques to advance the quality of these services.

Throughout 2002, a committee of public and private personnel met to formalize activities/exercises as intervention tools and techniques. These were formalized in a manual entitled “recipes for success”, which correlates these activities to the tasks and questions of the model. Within the manual, all activities are identified by a symbol to suggest usefulness with each of the five questions. This provides a quick reference for the worker in planning activities with a child. This can be determined by developmental age level, and on which question the child might be working. The activities are child directed depending on comfort level with the exercises. An example of an activity is called: “yellow brick road”. In this activity, the child is asked to create on paper, a picture of the type of family they would like to belong to on a permanent basis. This helps the child explore types of families while integrating previous family relationships. It assists in answering the questions of Who am I?, How will I get there?, and When will I know I belong? It is useful for all developmental age levels.

5. Life story books and other tools

A substantial literature base (Alexander, 1999; Aust, 1981; Backhaus, 1984; Fahlberg, 1991; Fahlberg & Jewett, 1982; Jewett, 1978; Keck & Kulpecky, 1995; McInturf, 1986; McMillan & Wiener, 1988; Rycus & Hughes, 1998) has emphasized the importance and value of the life story book or life book for all foster children. Life books are a part of treatment. They connect the past with the present (Aust, 1981) helping the child to resolve losses through a grief process. “Even children resistant to adoption usually commit themselves to completing a life book” (Backhaus, 1984; McInturf, 1986).

The life book is a useful tool in working with children in the preparation/permanency process towards resolution of losses, formulation of identity, recognition of relationships, and security of the future built on a foundation of the past. It is important that information about the biological family be included, via stories, pictures and other related mementoes that connect the child to his/her biological family. Sykes and Palmer (2003) conducted a life book project detailing biological family background information obtained through contact with the child’s family.

Life books are a critical tool for the integration and actualization of the preparation process. The life book process assists the child, worker and families in completing the tasks of clarification, integration, and actualization. It also provides, through pictures and words, a tool to assist the child in the grieving process. As a life book is completed with the child, the three elements and five questions help workers and families to know where the child is in the preparation process.

In clarifying who the child has lived with, who they are in terms of their appearance, growth, development of personalities, likes, dislikes, and interests, making journal entries in a life book helps the child formulate a sense of identity (who they are—[identity]). It also allows the child to grieve those losses and feel the hurt and pain of leaving those for whom they have had feelings and those who have cared for them (what happened—[loss] and where are they going—[attachment]).

Integration occurs as the child recognizes membership in a variety of families (loss, identity, and attachment) and uses these experiences towards acceptance of “new” family membership (how will I get there—[relationship building]).

In actualization, the child sees him/herself as a member of the final placement family (when will I know I belong—[claiming] and the acceptance of new identity and relationships).

The seven critical elements form the context for the life book process. Engaging the child and listening to his/her words, in a safe space where the child can do this work, sets the tone for giving the child facts about her/his life and telling the truth using pictures, timelines, and life history grids (McInturf, 1986). Validating of the child and his/her life story encompasses addressing the child’s interpretation of life (the whys) and helps eliminate self-blaming, fantasies, or magical thinking (Fahlberg & Jewett, 1982). It is never too late to go back and take the child through his/her life story while asking why he/she thinks particular events happened, expressing feelings and understanding, and eliciting his/her emotional response to his/her life story. As a child disengages with past relationships (closure/good-byes) from the biological family and turns from the past to

the future, pain will be part of the process. Workers can help the child understand and safely experience that pain.

Other useful tools and techniques that may be used in conjunction with the life book process include life maps, timelines, collages, water, clay, pictures, role plays, picture taking, books and movies, audio and video taping, and genograms. A variety of activities and techniques are discussed in the book “Adopting the Hurt Child” (Keck & Kulpecky, 1995).

6. Summary

Implementing the 3–5–7 Model of child preparation as a standard of practice establishes a common language among those working with children in placement situations. Within a framework of helping the child to understand life events (the three tasks), the worker uses a variety of techniques/tools to assist children in answering conceptual questions (the five questions) that help them make the transition from primary and secondary traumas to permanency. All of this is conducted within the context of practice skills (the seven skill elements) to engage the child in a process to reconcile their losses as they move towards permanency in a family. Standardizing language and practice is useful in assuring continuity in the preparation process. If the preparation becomes interrupted because the child is moved or assigned a new worker, the preparation work can continue. Subsequent workers and/or families can resume the effort at the point of interruption so that the child does not have to restart the entire emotional/grieving process. Documentation will confirm what work has been completed within the model and what remains to be done. The 3–5–7 Model provides continuity and consistency towards the goal of permanency.

7. Implications for research

Results-based research of this model is now being developed to support the usefulness of this intervention as a best practices approach to working with children. Pre- and post-preparation surveys will be conducted with workers implementing the model, with children (age appropriate) who participate in this preparation process, and with families who currently parent the children. Data will also be collected to determine to what degree children have reconciled losses, achieved attachment, affirmed identity, and exhibited a willingness to commit to a family.

Outcomes will measure the usefulness of the model in terms of the goals of safety, permanency, and well-being; for example, knowing if and how children, who have been in out-of-home care, reconcile losses; predictors of those children who “make it” and those who do not; do those children who are ready have a higher self esteem; and can success for children in new families be predicted? Although there is consensus within the child welfare field that these goals are valid, there are no established outcome measures to assess performance related to them. This model provides an exciting new practice approach to guide the work with our children towards having permanent families where they feel safe and will have their needs met.

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