

KEEPING YOUR CHILDREN & GETTING THEM BACK

GUIDEBOOK AND PRESENTATION MATERIALS ABOUT CHILD ABUSE LAWS & CHILD PROTECTIVE SERVICE SYSTEM FOR PARENTS IN RECOVERY FROM PSYCHIATRIC DISABILITIES



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A Project of the
UPENN Collaborative on Community Integration of
Individuals with Psychiatric Disabilities

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KEEPING YOUR CHILDREN & GETTING THEM BACK

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INTRODUCTION

INTRODUCTION TO A PRESENTATION ABOUT CHILD ABUSE LAWS & CHILD PROTECTIVE SERVICE SYSTEM FOR PARENTS IN RECOVERY FROM PSYCHIATRIC DISABILITIES: *KEEPING YOUR CHILDREN & GETTING THEM BACK*

By Edie Mannion, MFT

Background

It has become increasingly clear that adults with psychiatric disabilities are just as likely to be parents as the general population (Nicholson, Biebel, et al 2002). Based on the U.S. Comorbidity study of 1990-92, two thirds of American women with psychiatric disabilities are mothers and about half of American men with psychiatric disabilities are fathers. However, parents with psychiatric disabilities are at increased risk of child custody loss. Custody loss rates for parents with psychiatric disabilities have ranged as high as 70-80%. (Nicholson, J., Sweeney, E., & Geller, J., 1998). Only one third of children who have a parent with a psychiatric disability are being raised by that parent. In one large study that was completed at the UPenn Collaborative, child custody loss was compared in Medicaid-eligible mothers with and without claims for psychiatric services (N=4,827) to examine their involvement with the child protective service system in Philadelphia. The results showed that mothers with a claims for Medicaid funded psychiatric services were three times more likely to have children receiving child protective services and three times more likely to have children in out of home placement than mothers with no claims for Medicaid funded psychiatric services. Having had a psychiatric inpatient hospitalization increased the likelihood of child welfare involvement two times and having a child in out of home placement nearly three times (Park, J., Solomon, P., & Mandell, D., 2006).

Many scholars in the area of parenting and psychiatric disabilities endorse the need for adapting behavioral health services to include a parenting educational component and other parenting supports so that these families have a greater likelihood of remaining intact (Fox, 1999; Brunette & Dean, 2002; Ackerson, 2003; Azar, Bejet et. al., 2003; Brunette, Richardson, et. al., 2004). One important educational component would be information that would assist parents in maintaining and regaining child custody from CPS systems, such as information that would help them understand their state's child abuse laws as well as the do's and don'ts of navigating their local system. Such information could minimize parental choices that put them at risk for losing custody of their children due to child abuse or neglect, especially inadvertent child abused or



neglect, or having their parental rights terminated once they are involved with CPS due to lack of knowledge and skills for dealing with that system.

To this end, the UPenn Collaborative piloted a parent training project to disseminate this type of information to parents with psychiatric disabilities. In August of 2006 we conducted a focus group with seven parents from a support group of graduates from a parenting education program for parents with psychiatric disabilities. They included 5 mothers and 2 fathers, with 5 parents who had CPS involvement and 2 parents who had not CPS involvement as of that meeting. Our goal was to gather information about their preferences for learning about child abuse laws and dealing with CPS.

Summary of Focus Group Questions and Responses:

1. **Question:** For those of you who have been involved with DHS, is there anything you wish you had known that might have helped you avoid DHS?
Responses:
 - A. Don't make enemies in your neighborhood.
 - B. Keep up your household. They'll look in your refrigerator.
 - C. Find out who to call for different problems other than DHS.
I called DHS for a domestic violence issue, and they'd only give services if I signed their agreement. I didn't know who else to call.
 - D. That if you drop your kids off at your mom's to watch them, she can get custody.
 - E. Fathers should get paternity tests. If I had known I was the father of my son sooner, I could have exercised my parental rights sooner.
 - F. Things you say can be used against you, especially once they know you have a mental health issue.
 - G. Who are the mandated reporters, and what do they have to report?
 - H. They can ask your child questions without you being there.
 - I. They won't tell you who reported you.

2. **Question:** For those of you who have your children placed, is there anything you wish you had known that might have made things go better?
Responses:
 - A. Information about different policies in different counties. I live in one county and had my baby in another county, and the rules were different.
 - B. I wish they were more helpful, not scary.
 - C. Sign the release of information form about your treatment.
 - D. There should be a "buddy-system." ...Somebody to tell you what to do next along the way.



3. **Question:** Once we design a handout or pamphlet with information about child abuse, DHS and parenting resources, what do you think is the best way to get the information to parents, especially those who might get involved with CPS?

Responses: Delivery rooms, doctors' offices, pediatricians' offices, schools, churches, daycare centers, special hospital delivery rooms for mothers with psychiatric issues, programs for young parents, other community locations; Make sure to include important phone numbers

4. **Question:** How long should presentations to parents last?

Responses:

- A. One session should last 60-90 minutes
- B. It should be a series of sessions

5. **Question:** How should the material be presented?

Responses:

- A. Half presentation, half questions and answers
- B. Include colorful slides
- C. Give handouts, especially with important phone numbers
- D. Show a video
- E. Scenarios should be acted out to show what we should do or not do

6. **Question:** Who should the presenters be?

Responses:

- A. They agreed the presentations should be a combination of people, not just one person or one "type of person"
- B. Combinations recommended included pairs of representatives of the following roles:
 - A DHS worker who gives an insider perspective
 - A mental health professional familiar with helping parents with mental illness
 - A parent with a psychiatric disability who lost custody but got their child back
 - A lawyer who represents parents
 - A social worker who works with lawyers because some parents perceived lawyers as too cold and uncaring
 - An adult or young adult who got placed as a child



Replicating and Adapting Ways of Teaching Parents about Child Abuse Laws and the Child Protective Service System:

What follows is an outline of a 1.5 hour pilot presentation made to parents with psychiatric disabilities, as well as the slides used in the presentation. The outline and slides were developed based on the ideas generated in the focus group and on child abuse law in Pennsylvania, since this work was done in Philadelphia. However, providers throughout the US could use this pilot work to conduct similar focus groups in their area, use the responses elicited in this focus group to develop a similar or different educational program to meet local needs and program constraints, and change the child abuse law information to fit the laws in their respective states.

Presentation Outline:

1. **Welcome, Facilitator Introductions & Opening Remarks** *(10 minutes)*
(Co-Facilitators Included the author, a family therapist and trainer in a parenting education program for parents with psychiatric disabilities who has helped parents with child custody issues but also experienced post-partum depression, and a parent with depression and post-traumatic stress disorder who lost and regained custody of her 4-year old son and 6-year old daughter.)
 - A. Statistics on parents with mental illness *(See above.)*
 - B. Statistics on child custody loss *(See above.)*
 - C. Expert recommendations for parenting education and supports, including parenting on child abuse laws and navigating child protective service systems
 - D. Brief summary of how this training came about (i.e., summary of focus group, etc.)
 - E. Learning Objectives:
 1. To help parents avoid unintentional child abuse neglect through improving their knowledge of state child abuse laws;
 2. To help parents who have not lost custody to keep their families together
 3. To help parents who have lost custody regain it within the 1-year window allowed by federal law before they risk having their child adopted and their parental rights terminated
2. **Presentation Overview and Guidelines** *(5 minutes)*
 - A. Since this presentation is only 1.5 hours, there will be no break, but help yourself to the refreshments and restrooms are available if needed
 - B. The first half of the presentation will be discussing the slides, followed by the story of a parent who successfully regained custody of her 2 children from CPS, with time for questions and answers at the end. Due to time constraints, please hold all but your burning question or comments for the discussion at the end.
 - C. Guidelines to Aid Adult Learning:



1. Be respectful: Raise your hand if you would like to speak. No sidebar conversations.
 2. Respect everyone's privacy. Do not mention names of anyone who participated in this group outside of this group.
 3. Turn off all cell phones or put them on vibrate.
 4. Other suggestions?
3. **Discussion of Slides on Child Abuse Laws** (*15 minutes*)
 4. **Discussion of Slides on Do's and Don'ts** (*20 minutes*)
 5. **A Mother's Story (including tips about what she's glad she did and what she wishes she had done differently)** (*20 minutes*)
 6. **Large Group Discussion** (*20 minutes*)

Handouts and Materials:

1. Sign-in sheet
2. Copies of the Power Point Slides, with 2 slides per page for easy reading
3. List of phone numbers for key local legal, parenting and recovery resources for parents; Flyers about other relevant programs
4. Refreshments (optional)
5. Transportation tokens (optional)

Lessons Learned:

1. Ask the Parent Co-facilitator for a summary of what they plan to say. Despite explaining our objectives and guidelines for a balanced message, we were somewhat surprised at some of her comments, and may have asked her to omit them if we had known ahead of time more specifically what she planned to say.
2. Parents have a lot to teach each other and trainers! Have someone take notes and offer to send them a list of the tips generated in the discussion. We learned a lot, and new ideas can be incorporated into future presentations.
(e.g., Have a witness when dealing with CPS so that it's not just your word against the system if a difference in memory of facts arises.)
3. Either allow more time OR consider allowing the Parent Co-Facilitator to tell their story before presenting the slides. Our parent facilitator had some of her allotted time reduced due to getting started late, and she was upset about it.
4. Providers asked to register, and though this presentation was meant for only parents, we chose to allow them to participate. We found that they enriched the discussion, and also learned a lot.



5. Allow enough time for outreach about your program so you can recruit enough parents. Even though we allowed 6 weeks, we only got 6 parents (and 10 providers.)

6. Be prepared for a lot of emotion! Parents are angry and scared. Facilitators need to find a balance of validating parents' fear and anger AND reassuring them that learning to use these tips can help tremendously. There's hope for keeping their children and getting them back! (You may want to require registration and screen out parents who have lost parental rights because their story may be counterproductive if it creates unmanageable levels of fear and anger. Such parents deserve a separate place to vent their emotion and get help with their trauma and grief, but this venue may not be appropriate for them or the group.)



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A Presentation to Help
Parents in PA
Understand PA Child Abuse Law
& the **Do's/Don'ts**
of Dealing with DHS



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through the UPenn Collaborative
on Community Integration
In cooperation with the
PA Family Support Alliance



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UPENN Collaborative on Community Integration: The RRTC Promoting Community Integration of Individuals with Psychiatric Disabilities



- Based at the University of Pennsylvania with The Clearinghouse at the Mental Health Association of Southeastern Pennsylvania, and The Matrix Center at Horizon House, Inc.
- Conducting research, training and technical assistance on diverse topics, i.e., housing, education, employment, citizenship, Olmstead implementation, peer support, and others.
- Visit our website <http://www.upennrrtc.org> to learn more and access information, products and links.



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WHY PARENTS NEED THIS INFORMATION



- To help them avoid unintentional child abuse
- To help them keep their families together
- To help parents who have lost custody regain it as soon as they are able ***because a child can be put up for adoption if the child is in foster care for 15 out of the last 22 months (Only a 1-year window!)***



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UNDERSTANDING THE LAW FOR PROTECTING CHILDREN



- Every state has laws to protect children from abuse or neglect in their homes...



- For example, in Pennsylvania, this law is called the **Child Protective Services Law**, which establishes agencies in every county that *must investigate reports* of child abuse & refer families for services if needed

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WHAT THE PA LAW REQUIRES TO CALL AN ACT “CHILD ABUSE”



A Child (someone under 18)

+ **A “Perpetrator”** (a parent, someone 14 years of age or older living in the same home as the child, or a caregiver of the child)

+ **An Act** (1 of 5 types of abuse)...

= **CHILD ABUSE**



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Type 1: SERIOUS PHYSICAL INJURY



- Any **recent** (within last 2 years) **ACT** that leaves a mark or causes serious physical injury to the child

AND

- Was **NOT an accident**



Examples of intentional acts that can cause serious physical injury: Pushing, shoving, hitting, slapping, kicking, strangling, burning, stabbing, drowning, punching, throwing, shaking

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Type 2: NEGLECT (most common type)



- * Anything that threatens a child's life or functioning
- * Mandated reporters are only required to report serious physical neglect



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Types of Neglect: PHYSICAL NEGLECT



Examples include:

- *Starving a child
- *Not seeking medical help for a very ill child
- *Raising children in a home with unhealthy, filthy conditions



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Types of Neglect: MEDICAL NEGLECT



Examples include:

- * Not taking a child for medical check-ups or shots
- * Not following up on medical instructions from the child's doctor



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Types of Neglect: EDUCATIONAL NEGLECT



Examples include:

- *Not registering a child 8 or older for school
- *Not working with the school to make sure child attends school



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Type 3: Sexual Abuse or Exploitation



- Any act that gives an adult sexual gratification from a child
- Always also considered a criminal act
- A parent is held accountable if anyone 14 or older living in the house sexually abuses or exploits a child

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Examples of Child Sexual Abuse or Exploitation



- *Showing a child pornography
- *Touching a child's genital areas for sexual gratification
- *Getting a child to engage in sexual acts
- *Taking pictures or filming a child engaging in sexual acts

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Type 4: Mental Injury (Psychological/Emotional Abuse)



A psychological condition, **diagnosed** by a physician or licensed psychologist...



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Type 4: Mental Injury (Psychological/Emotional Abuse)



- This diagnosed condition renders the child **chronically** and **severely**:
 - Anxious or
 - Agitated or
 - Depressed or
 - Socially withdrawn or
 - Out of touch with reality or
 - In fear for his/her life or safety
- OR **seriously interferes** with the child's ability to accomplish age-appropriate developmental tasks



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Examples of Mental Injury



A **persistent pattern** of demeaning or threatening a child which ignores a child's basic need for a **sense of safety**, **self-worth** and **unconditional love...**
such as repeatedly telling a child s/he is worthless, repeatedly making fun of a child, repeatedly calling a child names meant to humiliate, repeatedly threatening to harm or abandon the child

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Type 5: Putting a Child in Imminent Risk



A **recent** (within 2 years) **action or lack of action** that leaves a child at risk of **physical injury** or **sexual abuse**



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Examples of Putting A Child in Imminent Risk



- *Leaving a child with a person you know has a history of physically or sexually abusing children
- *Shooting a gun at a child and missing
- *Leaving a young child locked in a hot car

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Endangering the Welfare of Children



- This **offense** is when a *parent, guardian or other person supervising the welfare of a child under 18 or a person that employs or supervises such a person knowingly endangers the welfare of the child by violating a duty of care, protection or support*



- Any person in an official position who *prevents or interferes with the making of a report of suspected child abuse* can also be charged with this offense

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How Is Child Abuse Reported?



- Anybody can report child abuse by calling the child protective agency in their county OR **the statewide, toll-free, 24-hour Child Line at 1-800-932-0313**
- PA law **requires people who come into contact with children as part of their job** to report suspected child abuse by calling Child Line
- These people are called **“MANDATED REPORTERS” ...**

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More Facts about Mandated Reporters



- They can report anyone for child abuse, not just people who fit the law's definition of "perpetrator" (See *slide #6*)
- They must report even if the child does not come before them IF they have reasonable cause to suspect child abuse based on their medical, professional, or other training or experience

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Examples of Mandated Reporters



- Health care workers (*doctors, nurses*)
- School staff (*teachers, counselors*)
- Law enforcement officers (*police*)
- Clergy (*priests, ministers, rabbis*)
- Social service providers:
 - Counselors & in-home social workers*
 - Case managers*
 - Foster parents*

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When Are Mandated Reporters excused from reporting?



- Clergy have been excused from mandated reporting if they learn of child abuse in a confidential communication



- Attorneys are now also excused from mandated reporting if they learn of child abuse in a confidential communication



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What Happens Once A Report of Child Abuse Is Made?



- Intake workers at ChildLine decide if a report warrants investigation
- If so, the case is forwarded to the county's child protective service agency, which has **24 hours** to see the child and if they are not sure if the child is safe, must see the child **immediately**



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Facts about Investigations



- Interviews of the child are often done **without the parent knowing** (e.g. at school, daycare)
- Investigators can **take pictures** of any physical injuries to be **used in court** as evidence
- Investigations can include **inspecting the home**, including **other children in the home**, and **speaking to neighbors, relatives, babysitters, & teachers**

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PARENTS WHO ARE BEING INVESTIGATED HAVE SOME RIGHTS AND CHOICES...



*...THEY CAN HELP THEMSELVES & THEIR CHILDREN BY LEARNING THE **DO'S** & **DON'TS***



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PREVENTION DO's & DON'Ts



- **DO** what you can to stay mentally and physically healthy so you can be the best possible parent and **DO** communicate and work with your doctor or service provider if you go for help.
- **DON'T** ignore signs that you may be ill or need help and **DON'T** just stop treatment if you disagree with the doctor or service provider, but try to communicate your needs or concerns.



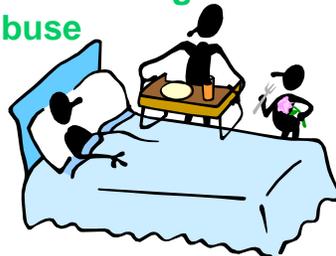
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PREVENTION DO's & DON'Ts



- **DO** get to know cues that you need help with childcare in order to avoid possible neglect or abuse
- **DON'T** deny that you may need help caring for your children, especially if you have a physical or mental illness or disability **AND** you are a single parent



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PREVENTION DO's & DON'Ts



- **DO** identify family, friends or community resources who can care for your children on short notice or if DHS decides to remove a child from your home.
- **DON'T** put off making arrangements for back-up emergency child care, or you may not be able to avoid getting involved with the child protective service system (DHS) or having your child placed in foster care.



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DO's and DON'Ts OF BEING INVESTIGATED



- **DO** let investigators enter your home even though you may feel angry or fearful.
- **DON'T** refuse to let investigators enter your home because they can get a court order and return with the police, and they could interpret your refusal as trying to hide something from them.



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DO's and DON'Ts OF BEING INVESTIGATED



- **DO understand that you have the right to refuse to sign a Voluntary Placement Agreement, which gives DHS 30 days after removing your child to have a hearing to prove that out-of-home placement is necessary.**
- **DON'T sign the Voluntary Placement Agreement so that DHS has to have a hearing within 72 hours after removing your child to prove that out-of-home placement is necessary, and you have more time to contact a lawyer.**

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DO's and DON'Ts FOR FAMILY COURT HEARINGS



- **DO understand that you have the right to a family law attorney to represent you at the hearing, and one will be appointed if you cannot afford one (In Phila., the Family Advocacy Unit of Community Legal Services may have an attorney available).**
- **DON'T avoid hiring a family law attorney, and if you cannot afford one and live in Phila., don't put off calling the Family Advocacy Unit at 215-215-981-3765 to see if an attorney is available and to get their legal recommendations.**

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DO's and DON'Ts FOR FAMILY COURT HEARINGS



- **DO** work with your attorney, who will have to address questions about your present ability to parent, handle daily responsibilities, provide a safe home, and get treatment for any illness or disability and **DO** educate your attorney about your condition.
- **DON'T** refuse to talk to your attorney about your condition and **DON'T** refuse to sign a release form that permits your service provider to share key information with your attorney about your diagnosis, treatment recommendations and your cooperation.

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DO's and DON'Ts FOR FAMILY COURT HEARINGS



- **DO** dress neatly for court and speak politely and respectfully to the family court judge as you try to show the judge you are able to conduct yourself maturely and appropriately
- **DON'T** dress in casual clothes (like shorts, t-shirts or jeans) **AND** **DON'T** lose your temper and speak impolitely or disrespectfully to the judge. These behaviors would raise the judge's concerns

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DO's and DON'Ts WHILE PARENTING FROM A DISTANCE



- **DO** get a notebook and keep names and phone numbers of everyone involved in your case, including dates and brief summaries of all meetings and calls, as well as all letters you receive.
- **DON'T** avoid staying organized and informed as your case proceeds. This would show that you are not an organized parent who is serious about getting your child back.

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DO's and DON'Ts WHILE PARENTING FROM A DISTANCE



- **DO** help your children with their feelings of distress and fear. Explain to them:
 - Why they were removed
 - All you're doing to see them and be reunited
 - It was not their fault
 - The role of your illness
- **DON'T** leave your child guessing or hearing from others about:
 - Why they were removed
 - Your illness or condition
 - What you are doing to get them back

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DO's and DON'Ts WHILE PARENTING FROM A DISTANCE



- **DO** maintain as much quality contact with your child as possible to comfort your child and show the court that your child is your top priority
- **DON'T** miss visits or phone calls with your child and **DON'T** act in ways that will add to your child's distress during phone calls or visits



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DO's and DON'Ts WHILE PARENTING FROM A DISTANCE



- **DO** meet your Family Service Plan (FSP) goals fast and **DO** attend all FSP meetings and court hearings. *(Make sure everyone has your correct phone number and address.)*
- You only have 1 year to show you are meeting your goals or you could lose parental rights and your child could be adopted!!!
- **DON'T** be afraid to ask for assistance and support in meeting your FSP goals and attending all meetings and court hearings *(and DON'T forget to give everyone new phone numbers or address changes).*



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DO's and DON'Ts WHILE PARENTING FROM A DISTANCE



- **DO** be careful about what you say and do with everyone involved in your case because it can be used against you in court.
- **DON'T** act in ways that show you are immature or not serious about getting your child back!



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Philadelphia Resources for More Information or Support



- Family Advocacy Line of Community Legal Services
215-981-3765
- Parenting classes at Parenting Plus of the Mental Health Assoc. of Southeastern PA
215-751-1800 x229
- PA Family Support Alliance **1-800-448-4906** or
www.pennsylvaniasupportalliance.org
- Fact Sheets by the UPenn Collaborative on Community Integration at www.upennrrtc.org and Mental Health America at www.nmha.org/children/invisible.cfm

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Using this information to plan ahead, know your rights and reach out for support can help you keep your family together or get reunited as soon as possible!

