


Slide 1

**G.A.L. TO G.A.L. . . . TALKING TO PEERS**  
**CIP: Thoughts on "Finding the Scoop"**  
**About Young Clients**



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Robert Noone Legal Services  
November 2014

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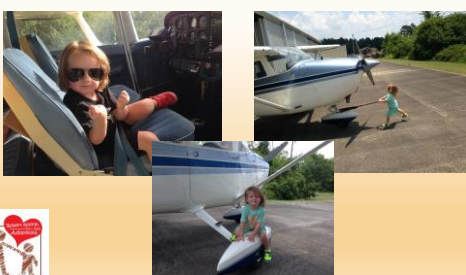
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Slide 2



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Slide 3

**WHAT FLYING TAUGHT ME ABOUT**  
**ADVOCATING AS A GUARDIAN AD LITEM . . .**



**GOOD APPROACHES**  
**MAKE GOOD LANDINGS**



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Slide 4

**GETTING THE SCOOP and AVOIDING MALPRACTICE**

- Days are GONE when we jokingly called ourselves “Kiddie Lawyers” doing Kiddie Law.
- No other law touches and impacts lives more than Chapter 49 of WV Abuse Neglect law
- The Sanctions to the Parents and Effect on Kids make it the civil equivalent of the **DEATH PENALTY**
- Until Jeffery R.L. & the Recent 2014 GAL RULES our “local standard “ for representing Children would have been considered malpractice in other areas of law. (like meeting client 2 minutes before hearing in the hall, not returning calls, failing to keep client informed...)



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Slide 5

**RECOMMEND: “Trial Advocacy for the Child Welfare Lawyer”** by Marvin Bentrell - ABA Bookstore

- Those same skills that made you like trial work –
- Openings/closings
- Expert prep (not while they are on the stand)
- Memos to persuade
- Learning to “channel” your client
- All related to the foot work involved in finding the scoop!



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Slide 6

**The Horse Whisperer . . .**  
**Lessons from “The Man Who Listens to Horses”**  
**by Monty Roberts**

**“THE MAN WHO LISTENS TO . . . HOUSES”**  
**Tips from Bob on Home Visits:**

- Beware Hovering Parents
- Common Sense on living arrangements – view the “love nest”
- Something seem “Staged” (The Honeymooner’s first Fridge)
- Utilities – running water, electricity, TV, Flushing Toilets
- Critters – (Pet the dog!)
- Anyone wearing diapers? Are there enough? Formula Check?
- Belonging of kids – Pawned?
- Closed Doors?
- Checklists



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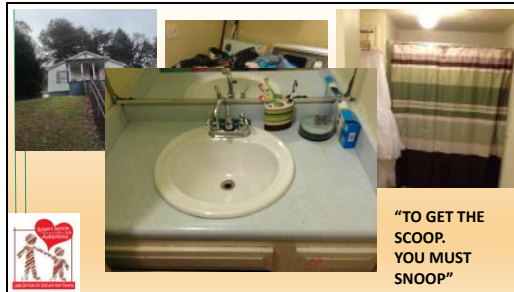
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Slide 11



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Slide 12

**GOT DRUGS???**

- The secrets to your client's treatment @ home may be in the parent's urine. **How the Money and Time is spent?**
- Children can describe events well – discussion starter: "Has a police car ever been to your house?"
- Meth Making, crushed pills, strange smells, late night dealers or friends stopping by wayyy after kid's bed time.
- Making addiction recovery part of the case plan early.
- "Can't Fix what you don't think is broke!" (a twist on Doris S.) *Name a concurrent plan to deal with parental drug denial.*
- Measurable expectations (screens, AA/NA, therapy, etc.) with clear goals that are either met or not.



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**THREE AREAS TO BE AWARE OF:**



- 1. UNDERSTAND THEIR TRUST AND ENGAGEMENT.** Difficulty trusting! **Building a relationship** helps you build a case and improves their engagement.
- 2. THEIR INTERACTION WITH ATTORNEY.** Early childhood trauma affects cognitive and psychosocial development. . . . **Don't expect chronological age.**
- 3. MODELING POSITIVE RELATIONSHIPS.** They expect new relationships to reinforce their negative beliefs. Modeling safe positive relationship is healing.




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Slide 20

**SOME THINGS WE KNOW ABOUT TRAUMA IN KIDS:**

- Impacts psychological AND PHYSIOLOGICAL. Young incomplete brains develop ways to handle traumatic stress. (Aside: Study of Chronic Toxic Stress and changed in developing brains. *Biological Psychiatry.*)
- Amygdala- survival mode: Flight, Fight or Freeze.
- Once activated in a child, hard to turn switch off.



- **So how do we build relationships with our kids of trauma?**

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**BUILDING RELATIONSHIPS:**  
**Know they have an impaired sense of safety!**

1. Even a "neutral office" may be threatening. Survival Behavior when there is no real danger is maladaptive. **Tune into "Triggers"**
2. Hyper-aroused states... heightened energy, jumpy, frequent outbursts, confrontational.
3. **Dissociative behavior** – zoned out. Appears indifferent? Nightmare to attorney planning a case. Involve therapist.
4. **Emotional Control?** Tough for traumatized kids. "Alert button" always on. How develop the tools to calm self and self-regulate.
5. **Lack of Trust.** They don't trust adults (and you counselor are an adult!)
  1. Adults did not keep them safe.
  2. Push you away – modeling how they were treated in the past by adults.
  3. "Testing" to see if you will disappoint them like all the other adults did.




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**COMMUNICATION WITH YOUR CLIENT – BECAUSE OF TRAUMA YOUR CHILD MAY :**

- Have trouble processing information. They are focused on survival.
- Be unable to express themselves – due to early life instability.
- Have family secrets and won't disclose.
- Be unable to give you a smooth narrative on trauma history, so don't expect one – particularly if they grew up in homes where adults told them NOT to talk about things (like the abuse). . . Or when they talked, no one believed them. Loyalty to Family.




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- Be unable to make DECISIONS in their case – a cognitive impact from trauma. "Cause and Effect" thinking is impaired. Remember they suffered harm without any apparent cause... the reality – they can't count on adults to follow a linear pattern.


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Slide 24

**GUARDIAN AD LITEMS – TIPS FOR OUR CLIENT RELATIONSHIPS IN TRAUMA CASES?**

- Get a **STRONG** working relationship - valuable in the life of the client.
- No formula, but don't make their unsafe feelings worse. Don't worsen ability to trust. . . Don't encourage negative self beliefs.
- **TRANSPARENCY** – in age appropriate terms. Promotes **TRUST** and helps negate the feeling of powerlessness – a trigger to the traumatized.
- **Predictability** – both in the relationship with the client and with the legal process.
- **THE VOICE** – give them a sense of control. Also critical for post-trauma development.
- **RELIABILITY** – do what you say... with responsibilities, commitments, etc. You kid understands betrayal and disappointment – don't reinforce that.
- **ANTICIPATE** – predict issues – de-escalate triggers.
- **PATIENCE** – Remain present, available and patient, even when pushed away or bumps in the road.




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**THE GAL NEEDS TO UNDERSTAND THE TREATMENT OPTIONS  
ONCE SIZE UP CLIENT'S ISSUES:**

- Not all Treatment is Equal. Is there a specialty needed (attachment, trauma, play therapist, etc.)
- Start with a good evaluation or initial interview.
- Docket to follow up on evaluations and with updates from providers.
- Licensed Masters Level professional therapist/counselor (versus the supervisee) should be on your more difficult cases. I put it in my court orders. (Usually costs the same)
- When is out of state care called for --- when do you bring them back .
- **ADVOCATE for PROPER TREATMENT, the clock is running on your client.**



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**THOUGHTS ON "REVERSE CROSS OVER"**

- **Call it out when you see it.** A Juvenile matter that is really an abuse and neglect case should not be treated like a "mini-delinquent."
- Likewise when an abuse and neglect client "FINALLY" arrives in juvenile court, follow the money (or lack thereof) to where treatment was ignored, denied, and client pushed through cracks. . .
- Get dismissal and ramp-up care in the abuse case.



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As GALs, we will daily deal with the effect of BAD PARENTING . . .

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Slide 28



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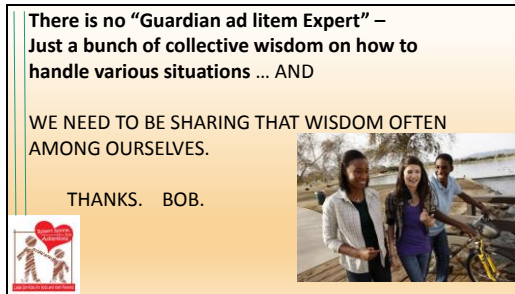
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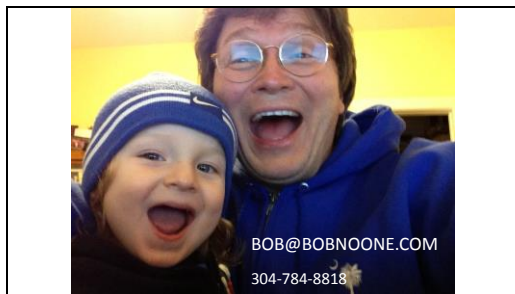
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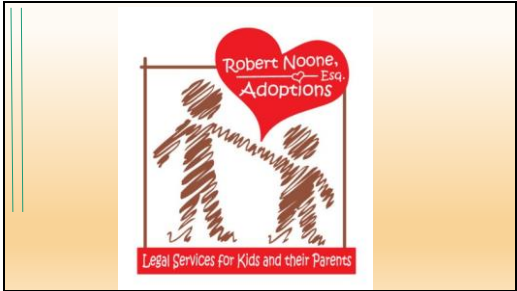
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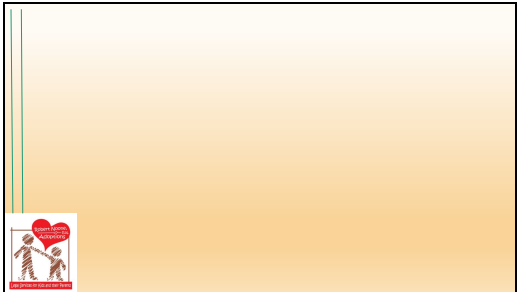
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Slide 33



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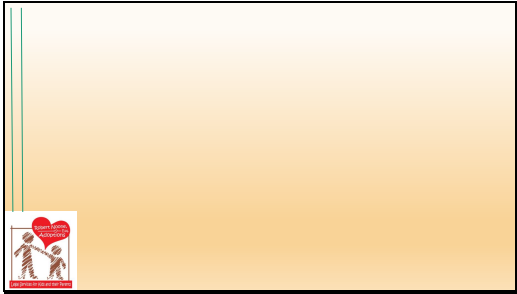
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