

Middle Adolescence (13–17 years old)

Developmental Milestones

Physical

- 95% of adult height reached
- Less concern about physical changes but increased interest in personal attractiveness
- Excessive physical activity alternating with lethargy
- Secondary sexual characteristics

Emotional/Social

- Conflict with family predominates due to ambivalence about emerging independence
- Strong peer allegiances – fad behavior
- Experimentation – sex, drugs, friends, jobs, risk-taking behavior
- Struggle with sense of identity
- Moodiness
- Rejection of adult values and ideas
- Risk Taking – “it can’t happen to me”
- Experiment with adult roles
- Testing new values and ideas
- Importance of relationships – may have strongly invested in a single romantic relationship

Intellectual/Cognition

- Growth in abstract thought; reverts to concrete thought under stress
- Cause-effect relationships better understood
- Very self absorbed

Suggested Well-Being and Permanency Questions for Birth Parents

What was/is it like for you to care for your young person at home?
What has been the effect on your family of having this youth placed?
What did you expect it to be like? Help me understand what it has been like for you dealing with your youth’s placement in foster care?

What were some of the adjustments you have experienced in parenting your youth as they have become an adolescent?

What do you need to do so that you'll feel good about yourself and in control of your life again?

Scaling Question: Thinking about the problems that led to your youth's placement, on a scale of 1-10, with 10 meaning you have every confidence that these problems can be solved and 1 meaning you have no confidence at all, where would you put yourself today? Can you give me examples of why you chose that number? What would it take to make that score one point higher? What would be different in your life if you were to make a change?

On a scale of 1-10, with 10 being the most willing and 1 being not willing at all, how willing would you say you are to work to solve these problems?

Miracle Question: Suppose that one night, while you were asleep, there was a miracle and all the problems that lead to the placement of your youth were solved. How would you know they were solved? What would be different?

Could you tell me something you like about parenting your youth? What things are not so good about parenting him/her? What might happen if you don't change? How would changing your behavior affect your youth and family?

What is the permanency goal for your youth? What do you think/feel about this? What makes it okay; not okay? How have you been included in the family conferences/treatment team meetings? What are your responsibilities (things you do such as visits, treatment, getting your house ready for your youth to return, etc.) in the case plan? Were you involved in helping to choose the alternative permanent plan (adoption or guardianship) and which family would care for your youth?

In order to have your youth returned to you, what will be the first sign that things are moving in the right direction?

What services do you need in order to care for your youth? What do you think/feel about those?

How have your visits been with your youth? What types of things do you do together during the visits? What could be done by you or others to improve visits?

Who else does your youth visit (friends, siblings, extended family)? How is your youth helped to remain connected to school, religion, culture, neighborhood, etc.?

What services do you think your youth will need in order to return home? To whom do you go when things are going well? To whom do you go if things aren't going too well?

What is your greatest fear about your youth returning home? What is your greatest fear if your youth does not return home?

What things do you need to support your continued care of this young person? How will you help your youth plan for their post-secondary education or vocational school?

Describe who your youth is. What about your youth is easiest and most pleasurable? What was the most difficult aspect of dealing with your youth at home? What are the things about this youth that will help him/her in the future? What will be harder for him/her?

Reviewing Safety Concerns with Birth Parents

- ✓ Who provided supervision for your youth when you were not home? How do you know this person? How old is this person? Is there a way for your youth to reach you when you are away from home?
- ✓ How did your youth get to and from school?
- ✓ Did you know where your youth was when s/he is not at school and away from home? What are your rules for your youth when s/he is not at school or home? Is there a way for your youth to reach you when s/he is away from home?
- ✓ What are the names of your youth's friends? Do you know how to reach them and their parents?
- ✓ Does your youth know your address and phone number?

- ✓ Can you show me the family's list of phone numbers for your doctor, local hospital, police, fire department, poison control center and a friend or neighbor near the phone?
- ✓ What is the emergency plan for your family in case of fire? Does your youth know where smoke alarms and carbon monoxide alarms are located in your home?
- ✓ If the worse case situation were to occur and your youth was in danger of being abused again, does your youth know what to do? Is there someone besides you available 24/7 the youth can call for help?
- ✓ Did this youth have any serious injuries, either before or since coming into your care? How did you handle them? How is this condition being handled since foster care placement? How will you handle this condition when your youth returns home?
- ✓ Have you noticed any physical or emotional changes in your youth? As your youth is becoming a teenager, are there changes in his/her behaviors? How has that changed your relationship with your youth? Has it changed how you discipline your youth or the rules you have for your youth?
- ✓ Does your youth have any chronic health conditions? Do you have the necessary medications, medical equipment, and medical staff support to adequately deal with this condition? How will handle this condition when your youth returns home?
- ✓ Do you have a First Aid Kit in your home? Does your youth know where it is and how to use it?
- ✓ When your youth was living at home did you feel they were able to exhibit good judgment when approached by strangers? Could you give me an example?
- ✓ Have you explained the concept of date rape to your youth? How have you empowered them to resist being pressured or forced into unwanted sexual activity? Could you give me an example of things you have said in your conversations with him/her?
- ✓ How have you talked to your youth about the health risks of alcohol, tobacco and drug abuse? If they have a problem with these issues, how will you deal with them when they return

home? What is the safety plan if your youth is abusing substances upon return home? Who can you call to help you?

Well-Being Questions for Middle Adolescents Living with Their Family

Living Arrangements:

What is it like living with your family again?

On a scale of 1-10, with 10 being everything is great, what is it like at your home now? What could make that better? What is the best thing about being at home? What is the worst?

My biggest fear is.....?

Who else lives here with you? What do you think about the other people who live here? What is it like living with them?

What are some of the rules your family has? What happens if you break a rule? How often does this happen?

Daily Routine:

Tell me what a typical day is like from when you get up to when you go to bed. (Get the youth to tell their story rather than just asking a list of questions.) Here are some prompts if you are having difficulty getting the child to answer:

- How do you wake up in the morning?
- What do you do in the morning to get ready for school?
- Does anyone make breakfast for you? Who? What are some things that you eat for breakfast?
- Do you bring lunch with you to school or do you get lunch at the school cafeteria? What are some things that you eat for lunch?
- Who makes you dinner? What are some things that you eat for dinner?
- What do you do after dinner?
- What time do you go to bed?
- Where do you sleep? Do you share a room with anyone? Who? What is this like for you?

Goal Setting and Planning

What are your goals for the future?

Do you feel listened to by the adults in your life about your future plans?

Do you feel included in the agency conferences?

Social/Emotional:

If you are upset or angry about something that happens, is there anyone that you can go to? Who?

What happens when your parents or the adults in the house get angry at you, each other, or someone else who lives in your house? How often do they get angry? What does it feel like for you when they are angry? What are some of the things that they get angry about?

Is there anyone at home or anywhere else that you go who makes you feel scared? Are there any adults or kids who do things that make you feel sad, mad, scared or confused?

Do you ever wake up in the middle of the night? If so, what happens? Do you ever get scared hanging out in your neighborhood or anywhere else you go? If so, what are the things that make you scared? Is there anyone who you are able to talk to about this?

If something is really worrying you, who can you talk to?

If you need to get in touch with me, do you know how to do that? How?

Family and Friends:

What types of activities do you do with your family? Do you see other members of your family (e.g. grandparents, aunts, uncles)?

Do you see your brothers and/or sisters who are in foster care or live somewhere else? How is it to see them?

Who are your friends? What do you like to do with them? Where do you see them?

Is there anyone who you miss or would like to visit (e.g. foster parents, other kids in the foster home, school friends, family, etc.?)

Do you have someone in your life that you consider your mentor? What are the qualities that person possesses?

Special Interests:

What kinds of things do you like to do for fun (sports, music, art, video games, etc.)? Do you do these things while you are living with _____? Are there any things that you'd really like to be doing that you aren't doing now?

What are some things you do that nurture your spirit (art/drawing, journaling, reading, martial arts, meditation, religious classes, going to church, prayer groups, etc.)?

What do you do on the weekends or during your free time? Who do you do this with?

Education:

What are some of the things that you like best about school?

What are some of the things that you like least?

Are there any subjects at school that are hard for you? If so, do you get any kind of special help with these subjects?

What types of activities are you involved in after school? How do you get there? Do you like doing these things?

Who helps you with homework or other school assignments?

Do you have access to a computer or other things you need to do your school work?

Have you thought about what you would like to do after high school? What types of careers are you interested in?

Employment:

Have you had a part time job? What types of jobs have you held?

What types of jobs have you liked best?

What part of the job did you enjoy most?

Health:

When was the last time you went to the doctor? What did you see this doctor for?

Have you been to any other doctors? If so, why?

Do you take any medications?

Have you seen a dentist in the last six months?

Who do you go to when you have questions about your health or body?

On a scale of 1 to 10, where 10 is: I have adults I trust and can talk to about this, where would you place yourself regarding:

- smoking
- drugs
- changes in my body
- sex and sexuality

What can I do to help with any of these important issues?

Do you go to see a counselor or therapist? What is this like for you? Do you know why you are seeing them?

Reviewing Safety Concerns with Middle Adolescents Living with Their Family

- ✓ Who takes care of you when your family is not at home? How do you feel about staying with this person? Do you know how to reach your parents when they are away from home?
- ✓ What is your safety plan if your parent or someone else tries to harm you or is just getting out of control? Who can you call if something happens in the middle of the night? What are your fears? (Specific questions related to the type of maltreatment the child experienced should be included. Example: When you see your mother's red flags that she might be thinking about taking drugs, what is your plan for safety?)
- ✓ Do you know what to do in case of an emergency, like a fire? Can you tell me what you would do?
- ✓ Do you know where the first aid kit is kept? Do you know how to use the different items in it?
- ✓ Are you ever left alone without any adults around? What is this like for you?
- ✓ Do you ever stay over at someone else's house? How often do you do this? Do you like this?
- ✓ How do you get to and from school?
- ✓ Does your family know where you are when you are away from home and not at school? What are your family's rules about

being away from home or school (i.e. curfew rules, reporting in rules, who you are with, where you can or cannot go, etc.)?

- ✓ What do you do if a stranger talks to you on the street or asks you to go somewhere with him or her? Does anyone you know ever ask you to do things you are not sure are ok?
- ✓ Have you ever had strangers on the internet ask you to do something? What was it?
- ✓ What can I do as your caseworker to help you?

Sources:

Youth Welfare League of America. (2003). *PRIDEbook*. Washington, D.C.: Youth Welfare League of America.

Illinois Department of Youthren and Family Services. (2003). *PRIDEbook*. Washington, D.C.: Youth Welfare League of America.

Maine Department of Human Services. *Youth Well-Being and Safety Review*.

Ozretich, R., & Bowman, S. (2001). *Middle Youthhood and Adolescent Development*. Corvallis, OR: Oregon State University Extension Service.

Pennsylvania Youth Welfare Training Program. Module 11: Family Service Planning Process/Case Transfer and Closure. Handout #16. Retrieved April 23, 2009 from: http://www.pacwcbt.pitt.edu/curriculum/CTC/MOD11/Hndts/HO16_SltnFcsdQstns.pdf

Strengths/Needs Assessment. Adapted from Scott, R. and Houts, S. (1978). Individualized Goal Planning with Families in Social Services.

United States Department of Health and Human Services. Family and Youth Services Bureau. (1997). Understanding Youth Development: Promoting Positive Pathways of Growth.