



Rhode Island Department of Children, Youth & Families

Face to Face Family Time for Babies and Toddlers

Additional Information

Beginning June 1, 2020

As Rhode Island begins to “re-open,” our priority is to safely reconnect babies and toddlers with their parents in person to reduce the stress associated with disrupted relationships. Babies and young children benefit from moments of being held, comforted when upset, and having their emotional needs met. These essential interactions cannot happen virtually. As we move through this pandemic, we need to focus on ways to build positive relationships so babies and their families can thrive.

Preparing Babies for Seeing Parents with Face Covering

It is important to prepare babies to resume **Face to Face Family Time**. Babies and toddlers “soak up” the stress that adults feel about the pandemic like a sponge. Babies and toddlers will have varied reactions to seeing their parent wearing a face covering. Some may not recognize their parent and others may express confusion or fear. While this is understandable and expected, it is stressful for babies and parents alike. We will need to help parents follow the child’s cues in rebuilding a sense of trust and reconnection.

Foster and biological parents can work together to help prepare babies by having **Virtual Family Time** before **Face to Face Family Time**. During the Virtual Family Time, parents may show their children what they look like with and without a face covering on while the foster parent reassures the child, “That’s mommy!” or “That’s daddy!,” when she or he has the face covering on and off. Babies gain emotional control through mastery—this may become a “game” the baby might want to repeat. It will also be helpful to bring familiar toys or toys that have been part of the **Virtual Family Time** to the **Face to Face Family Time**.

Remembering the Connection

Reconnecting with a child takes patience and persistence. It is important for foster and biological parents to keep in mind a child’s developmentally expected responses to grief and loss as well as to separations and reunions. The child may appear nervous and unfamiliar with the parent, may not want to separate from the foster parent, and be fussy or withdrawn. Adults need to work together to understand what the child might be communicating through behaviors when they don’t have words to express big feelings.

In general, it’s good to keep in mind that one size does not fit all. Each child is different--what seems to work best for this child (e.g., time of day, length of visit, etc.) may not work for other children. Each family situation is unique—what supports are needed to be successful? The child’s developmental stage matters—what is the child’s capacity to communicate distress, engage in interaction (through play or storytelling), and regulate emotions during visit transitions? Above all, what is the child communicating about what s/he needs. It’s best for all the adults to work together and take the child’s lead while considering the child needs.

Foster parents play a critical role in supporting healthy reconnections with the child’s biological family.



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Foster Parents and Face to Face Family Time

It's best for babies when foster parents are directly involved with biological families between and during visits. They can offer biological parents updates about the baby, interaction guidance, and emotional support. The child will experience less confusion and disruption when the adults work together to meet the child's needs. It may be helpful to consider these questions before the first **Face to Face Family Time**:

1. How has **Virtual Family Time** been going so far? What have you learned about the baby's needs during this time? What's it been like to connect with the child's family? How has it been to problem solve with the family about making visits successful for the child?
2. What supports might you need to prepare? It may be helpful to have a three-way virtual call with the family, yourself, and the Social Caseworker (SCSW) to prepare for visits. Discuss expectations and plan how to start and end the visit during this call.
3. Who should attend the visits? In some cases, it may make sense to have a third person present with you at the first few in-person visits as you and the family establish a routine and assess the baby's needs. We can work together to have a Child Support Technician (CST), SCSW, or agency staff present to assist with this.
4. What other supports might be helpful? The Department will offer early relational health consultation sessions with the Rhode Island Association for Infant Mental Health (RIAIMH) to help with this process. These forums are intended to be a safe place to discuss implementing developmentally sensitive Family Time strategies, strengthening partnerships with families, guiding families to have successful visits, and setting expectations. They will offer opportunities to connect with others doing this work and to share ideas.
5. How can we safely manage transitioning the child(ren) between families during **Face to Face Family Time**? Place the child's stroller or baby carrier six feet from the parent and then step back to allow the parent to come to the child. This transition may need to take place slowly, keeping in mind that the baby or toddler may not recognize their parent. This is okay and to be expected.

We are here to help if you need assistance and support to prepare for **Face to Face Family Time**.