

## **Interview with Theresa Ann Fraser, author of *Billy Had to Move***

Today, Tyler R. Tichelaar of Reader Views is pleased to interview Theresa Ann Fraser, who is here to talk about her new book “Billy Had to Move.”

*Theresa Ann Fraser is a mother, foster parent, Child and Youth Worker, Educator and Play Therapist. Her bibliotherapy book, “Billy Had To Move,” is based on the children she has known after working in Children's Mental Health over the last twenty-five years.*

**Tyler:** Welcome, Theresa. I’m happy you could join me today. To begin, will you tell us what first gave you the idea to write “Billy Had to Move”?

**Theresa:** I was attending an International Play Therapy Study group last June organized by Dr. Charles Schaeffer that was held in England. There I met Dr. Steve Harvey who is a U.S. therapist who now works in New Zealand. He asked me why I hadn't just published the book that I wanted to and encouraged me to send off my idea to a publisher. So upon return I sent my story to Loving Healing Press in Michigan because I knew that it published therapeutic books for children. That day the editor, Victor Volkman, emailed me back and told me that he would happily publish this book and so the process began. Now nine months later, “Billy Had to Move” has been released.

Many therapists will create narratives to meet the needs of their clients especially if there isn't a published resource available. There are not many children's books available about foster care and therapy. I hope that “Billy Had to Move” will become a valued resource for therapists, foster parents, child and youth workers and teachers.

**Tyler:** What age group is “Billy Had to Move” written for, and what would you say is the book's goal, or what do you hope children will learn from it?

**Theresa:** I wrote this book primarily as a story that is read to children by an adult. Therefore, even though Billy is seven, older children can connect with his experiences especially when adults and a child (or children) then discuss how Billy might have felt hearing that his Grandmother had died and that he couldn't say goodbye to his cat or piano teacher. These are very real experiences that occur in North America daily when kids enter foster care.

My hope was that children (especially those who have never been touched by foster care) could get a sense of how challenging that experience can be but also gain an understanding that there are very

committed people like foster parents and therapists and social workers who work hard to be child focused in their mission to help children in a Child Welfare system that isn't perfect.

**Tyler:** Will you tell us about Billy himself? How would you describe his character?

**Theresa:** Billy is a little boy who has already experienced some loss in his young life. He is a thinker but also a watchful little boy as evidenced by the ideas he shares with the reader about shoes, and how he worries about getting in trouble. He is understandably quiet when he meets Amy and her baby. As he begins to feel safe in his new home and connected to the people in it, he begins to have what I call "his feet in two houses." I see this time and time again with children who love and grieve for their biological families but are beginning to feel the sense of belonging that they need to begin to heal within their foster families.

**Tyler:** When Billy's grandmother dies, he has to go live with foster parents. What is most difficult for this move for Billy?

**Theresa:** It is all difficult. Sometimes as adults who work in this system we can forget that children grieve not only their primary caregivers but also their communities, the color of their bedrooms, or the noises that they are used to hearing outside their bedroom windows. It is often necessary but none the less traumatizing for children to leave what they know, even if what they know is considered neglectful or abusive. Hence, Child Welfare systems truly attempt to place children in kinship placements first prior to foster care. When this is not possible, foster homes are hopefully carefully chosen to meet not only the child's current needs but also future needs.

**Tyler:** Theresa, will you tell us some facts or information about children in foster homes in this country? How common is Billy's situation—from being placed with a relative like a grandmother, to being with a family made up of people who are initially strangers?

**Theresa:** I can speak to Canada and as I understand it there are many similarities to the U.S. According to the Canadian National Youth in Care Network, there are over 80,000 children in substitute homes (foster homes). Initially, relatives or kinship placements are sought and if available and appropriate, children are placed with people they know with or without formalized supports from government subsidized agencies. There are regular short term placements here in Canada and then therapeutic foster homes that are established to meet the needs of children with extensive trauma or abuse histories or other specialized needs.

**Tyler:** How often do foster children have to readjust to new lives?

**Theresa:** Any child who is removed from his or her home has to readjust to a new life.

**Tyler:** Theresa, would you elaborate on reasons why children go to foster homes. For example, what percentage of children are like Billy where a grandparent or other relative cares for them but passes away, compared to children given up at birth, or children removed from abusive parents and then sent to a foster home?

**Theresa:** It is really hard to give you percentages, Tyler, because sometimes there are only statistics kept on the children who become wards of the court or state. Children come into care when they are physically, sexually or emotionally abused or when neglected. Sexual abuse and

physical abuse are widely accepted by the general public as reasons for apprehension; however, neglect and emotional abuse can impact the child's development seriously as well.

Just today in the Sacramento County news there was an article about how eleven children have died in that County in 2008 as compared to four in 2007.

<http://www.sacbee.com/302/story/1685572.html>

These are the cases we all hear of; however, there are many, many children who have long-term developmental issues because they were left in emotionally neglectful environments particularly from ages 0-5 years of age.

**Tyler:** Is it typical or an exception to the rule that a foster child might live with two or more families while growing up?

**Theresa:** Unfortunately, it is often common for children to live in one or more foster homes. This is an event that anyone working in the field abhors. However, no matter how much preparation occurs and how much support is provided, there will still be times when placements break down even though we know that multiple placements are counterproductive to the healing of children. I myself was in foster care as a child for a period of time. My parents were quite young and my mother needed medical care. My sister and I lived in two homes. Our first foster father died and then we moved to another foster home until our parents could care for us again.

As a foster parent, I have experienced the loss of a little girl that we loved but could not love us back because she had promised her biological mother never to share her heart with anyone else. Her loss in our lives motivated me to shift gears professionally and become a play therapist so I could help families "reach" kids earlier. I heard that she is doing well as an only child in a two parent family. She had a much harder time functioning in a home as one of four children; the opportunity to be an only child was the environment that she needed to heal. That is hard to hear when you are a foster parent and love a child.

**Tyler:** Thank you, Theresa, for sharing your personal connection to foster homes with us, which makes it easier to understand why you chose to write your book. You mentioned you and your sister were in a foster home together. How common is it for siblings to be kept together by going to the same foster home?

**Theresa:** Most child protection agencies will attempt to place siblings together in order to decrease the potential experience of loss. That said, when there are large sibling groups it can become more difficult to find a home with multiple openings. Today for example, I was called in to assist in providing support and consultation to a foster parent who was expecting four children to be placed with her because there had been a domestic homicide. This home had no other current foster children so she was in a position to provide a home for the entire sibling group.

In most Canadian provinces, foster homes can only provide care to up to four children except through special permission from the Government. In the U.S. this can vary state by state. One of our foster sons is from a large family; hence, three of his siblings live in a foster home quite close to us; so our two families spend time together and the children visit back and forth where possible. In some cases, however, children find it difficult to interact with siblings as this contact can trigger negative reminders of past experiences. Therefore, the appropriateness of sibling or family contact

needs to be decided by members of the child's treatment team. Also, additional supports such as therapy can assist children in working through these issues.

**Tyler:** In general, do foster children tend to be placed where there are not other children, or are there not enough volunteers for that luxury? Are there issues in homes, real or just as a fear on the part of foster children, that the foster parents won't love them as much as their own children?

**Theresa:** Agencies attempt to match children's needs with available resources. If for example a child has demonstrated sexualized behaviour as a result of past victimization, in this case it would make sense that this child is not sharing a room with other children so to protect the child from being further victimized or from victimizing other children. Supportive supervision and adapting the environment are therefore important factors in order to set the child up for success.

Some children respond better in a home when there are other children. For example when we first started to foster, our home provided care to adolescents while our first biological son was a baby. This was a wonderful match as the adolescents saw that parenting a baby was hard work and the baby was not negatively affected as a school age child might be from hearing adolescents attempting to initiate parent/child conflict. As this infant became a toddler we could use him for the excuse to go see children's entertainers that the adolescents would otherwise be too embarrassed to be excited about. We also could easily have children's tea parties and play dollhouse or Barbie's because there was a "baby" in the house.

Yes, there are always going to be foster children who feel that they are treated differently; some of this is due to their attachment challenges. They have always had to worry about making sure their needs are met because the adults in their early lives didn't do so. However, there are also homes unfortunately that could do better at facilitating a sense of belonging for all children in their homes.

That said the *system* often reminds foster parents that they are not the legal guardians and at times foster parents are worried about children being moved if they are perceived not to be doing well in the foster home.

Of course, we know that all children struggle at different developmental phases and it makes more sense to support and promote attachment with the primary care-giver as the issues that arise will do so again until they are worked through. This is again where therapy can be very helpful to supporting placement permanency.

**Tyler:** Theresa, in case our readers aren't clear, will you explain the difference between being a foster child and being adopted? I ask because I wonder whether foster children find it hard to adjust to a foster home because they believe the situation is only temporary, while an adopted child might find the adjustment to be easier? How often do foster parents end up adopting children, and what are reasons why they don't always?

**Theresa:** Here again there are differences in our two countries. In the United States, there is a big push for adolescent adoption, whereas in Canada children are less likely to be adopted as they get into the double digits.

Long-term foster care can be a wonderful route for kids with special needs who need lots of supports that foster parents can't provide though they are committed to long-term placement. In

Canada children can be in a foster home from placement date to adulthood; however, while in this placement they also have a Social worker and other supporting adults who assist them with their various issues. In Canada if a child is school age and has lots of siblings with court ordered access, they will more likely be placed in a long-term foster home.

Generally if access to the biological family is determined to be healthy and required, that child will not go up for adoption because there is no legal way that the adoptive families are required to facilitate ongoing contact once the adoption is final. If, however, the court determines that the family contact is not conducive to the child's development and the child is considered to be adoptable, then the quest for a "forever family" begins. I personally hate that term because the child's biological parents are forever too; they are just not people that child has contact with. Adoption means that the child can settle in with this family with no further contact with the system or Social Workers.

In Canada we also have Guardianship. Guardianship was also described in the Batman series where Bruce Wayne was the Guardian to Dick Grayson a.k.a. "The Boy Wonder."

If you are a Guardian of a Crown Ward in Canada, this means that at eighteen the teen can re-approach the Children's Aid Society for assistance with Independence preparation or College. However, until eighteen, an adult is named as totally financially and legally responsible because of the Guardianship order.

**Tyler:** A major part of Billy's adjustment to his new life comes from working with his play therapist, Ms. Woods. How does Billy, or most children in his situation, come to have a play therapist?

**Theresa:** Play therapy is for children and teens what talk therapy is for adults. That said, play therapy methods can be very helpful for adults, groups and families. We all play. We learn by playing our whole lives. Play is powerful, play can be life changing. Play can be cathartic. Do you remember the first time you picked up a toy and pretended to be a super hero who saved the world? You felt powerful afterwards right? All of the Billy's of the world share that experience. Social workers, physicians or kids themselves can recognize that play therapy can be a helpful intervention. Play therapists work in hospitals, community mental health clinics, schools or private practice with many children not just foster children.

**Tyler:** How is Ms. Woods able to help Billy?

**Theresa:** Play therapy provides children with the place and time to make sense and express their often confusing feelings. Dr. Athena Drew (PsyD, RPT-S; Director of Clinical Training, The Astor Home for Children, Poughkeepsie, N.Y.) read the manuscript of "*Billy Had to Move*" for me and suggested that I add in the dialogue that the toys can become the tools or words for Billy. This is in keeping with Play therapy methods. Therapists can use directive or non-directive interventions to help children address their loss and/or trauma. The tools can include books, art supplies, puppets or a sandtray with sand and miniatures.

**Tyler:** Theresa, above I referred to "*Billy Had to Move*" as a bibliotherapy book. Will you explain what that means for readers not familiar with the term?

**Theresa:** Bibliotherapy is the use of books to assist in the healing process. Specific stories are chosen that will have relevance to the individual's life, current challenges or future struggles. "Billy Had to Move" touches on themes of loss through death and separation. Foster care, sharing love with more than one family as well as the process of therapy.

**Tyler:** Theresa, will you tell us a little about the illustrations by Alan Walton? In creating the illustrations, what was the goal in terms of the message or tone you and Alan Walton wanted to convey?

**Theresa:** First of all I have to say that Alex Walton is a gifted artist. I looked around for a long time to find someone who would be willing to help me make Billy come alive. He read the story and knew exactly which parts of the story stood out and were in need of visual representation. We both felt that we didn't want the characters to be of a cartoon style or anime. We also knew that the illustrations needed to be in color so they were appealing to children. We wanted the reader to know that this story was like his or her story. Given that Alex uses watercolors, his illustrations are vibrant and realistic. Alex spent lots of time attempting to represent Billy feeling a variety of emotions.

I shared with him photos of a colleague who has also worked with children for over twenty-five years named Mike Murphy. For the last ten years, Mike has helped to find foster homes for children in need of a therapeutic placement with an Ontario agency known as Carpe Diem. He has made a difference in the lives of many children.

The therapist Shirley Woods is also based on a Child Welfare worker who works in Ontario at the Hamilton Children's Aid Society. She is committed to the children she serves. She encapsulates commitment and caring for these children.

However, our North American Child Welfare systems are full of Mike's and Shirley's who are doing their best to serve these very vulnerable children. The illustrations of Amy (Billy's foster mom) came from Alex's imagination as did her daughter, Colleen Patricia. Billy begins to care about these characters as the story unfolds.

The illustrations of Billy are based on our youngest son who was placed with us when he was eighteen months old and is now seven years of age. My publisher donated a copy of "Billy Had to Move" to our kids' school library and my youngest son was the first to take it out of the library. Our six boys are so proud of this book as they have been involved in approving the copy and illustrations at every stage of the product.

**Tyler:** Theresa, would you tell us more about your own background? I mentioned above that you've been involved in children's mental health services for twenty-five years. How is that relevant to your book and your writing about foster children?

**Theresa:** Well my personal life is just as relevant as my professional life. As I said, I was a foster child. When my mother was healthy and in a different position, she and my father became foster parents to help children who also needed a safe and stable home to live in until their families' circumstances changed.

One of my foster sisters permitted us to view her as a sister and she is one of nine children my parents raised long-term (seven girls, two boys). Almost all of us have jobs in the service industry, a police officer, coordinator of Air Ambulance/paramedic, nurse in training, Red Cross Emergency Site coordinator, two therapeutic Recreationists, a stay at home mom, a business woman, and myself the Therapist. My father is a writer too (but is waiting to be published so he too is very proud of this book).

My husband and I have also fostered for almost twenty years. Our biological children have experienced challenges as well as gifts because they have been foster siblings. The children in our family now have lived with us for at least five years and will live with us until they leave home to become independent. That is our hope for them. We love our foster children as much as our biological or adopted children which can be tough sometimes because we are told that we can love them but remember that they are not legally ours. In our hearts they are ours.

I started my career as a Child and Youth worker. In Canada this is a three-year long college program that specializes in learning about the normal development of children and youth, and then we learn how emotional and mental health issues affect development and functioning. I then spent twenty years working with children/youth in mental health settings or foster care settings as well as working with adults with psychiatric illness until I decided to continue my education to specialize in Play therapy. I will be finishing my Master's degree at the end of this year and can then be registered as a Child Psychotherapist in Canada. Currently I have written a book and I am still in my Play therapy internship stage!

**Tyler:** Theresa, what happens to foster children when they reach the age of independence? Are there any resources to help them find jobs or go to college? It sounds like you've stayed in touch with your foster siblings—is it common for foster children to stay in touch with their foster families when they reach adulthood?

**Theresa:** Often what happens in Canada is at eighteen those kids who want to go to college or remain affiliated with the Child Protection agency can do so with supports that include dental care, prescriptions, monthly support for room and board as well as access to some college scholarships if the individual has the grades and has demonstrated the commitment to continue his or her education. There are a few agencies that I have heard of that have continued supports up to age twenty-one but this is rare.

Often kids seek out their biological families so it makes sense to try to help them have some sort of contact where possible so they do not conjure up images of their parents being undetected royalty or individuals who are misunderstood. If there has been contact, often kids have a clear picture of what issues their parents are dealing with and what precipitated the interference in their family by Child Welfare workers.

Also, they will have received ongoing support so they can problem solve issues with their families as they are growing instead of at eighteen firing the Children's Aid Society to then go home and discover in a few months that this decision was not in their best interest.

**Tyler:** If you had one wish for the children you work with, or one message you wanted to get across to the American public about children, what would it be?

**Theresa:** We need to invest in children early, while we are pregnant and when they are little, which means that we need to invest in families. Kids who don't attach to parents and parents who don't attach to children create a challenge that can take a lifetime to address. We have the resources to do better. Play therapy is also not a quick fix! Cognitive Behavioural Therapy methods can be successfully used within the play therapy relationship; however, sometimes it takes more than twelve sessions to address early trauma and attachment disruptions. It is also a successful intervention when used as part of a team approach so involving the Primary Caregiver makes a lot of sense.

**Tyler:** Theresa, do you plan to write any more books?

**Theresa:** The awareness of the effect of attachment and trauma on the development of children has impacted those working in the Child Welfare field. A respected American child psychiatrist, Dr. Bruce Perry, is doing much with his organization the Child Trauma Academy to "improve the lives of high-risk children through direct service, research and education." <http://www.childtrauma.org/>

This means that everyone working with children needs to recognize how important it is to respond to the behaviours and challenges of kids only after finding out how their past history impacts their current functioning. Sometimes the impact is grave and seems irreversible which means that as clinicians we are responsible to adapt the environments and offer specific interventions in order to address their very specialized needs. These children are often described as attachment resistant and are often the kids who break down placement after placement. I want to create some children's books that address some of these issues including adoption.

**Tyler:** Theresa, if people are interested in becoming foster parents, what is the process for them to follow?

**Theresa:** They should contact their local child protection agency. Every state and province has requirements and training that needs to be adhered to and prepares potential foster parents for this privilege of providing a home to truly deserving kids.

At the back of my book there are helpful web sites such as the Foster family treatment association of America. These web sites offer lots of information about training and some of the specialized needs of foster children. I would encourage folks to read, read, read. Dr. Bruce Perry's book entitled, "The Boy who was Raised as a Dog" is an amazing book for foster parents because it helps the reader to understand that children need to be cared for based on their developmental needs and age not chronological age.

**Tyler:** Thank you, Theresa, for the opportunity to interview you today. Before we go, will you tell our readers about your website and what additional information they may find there about "Billy Had to Move"?

**Theresa:** Please do—my website is [www.theresafraser.com](http://www.theresafraser.com). My web site lists more information about illustrator Alex Walton with links to his web site as well as my publisher, Loving Healing Press. I also have listed a Workshops page that lists workshops I have presented to social workers, parents and foster parents of children who have specialized needs. Thank you so much, Tyler, for taking the time to chat with me.

**Tyler:** Thank you, Theresa, for the informative interview. It's been a pleasure. I hope "Billy Had to Move" and your personal work help many children and foster families.

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