



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

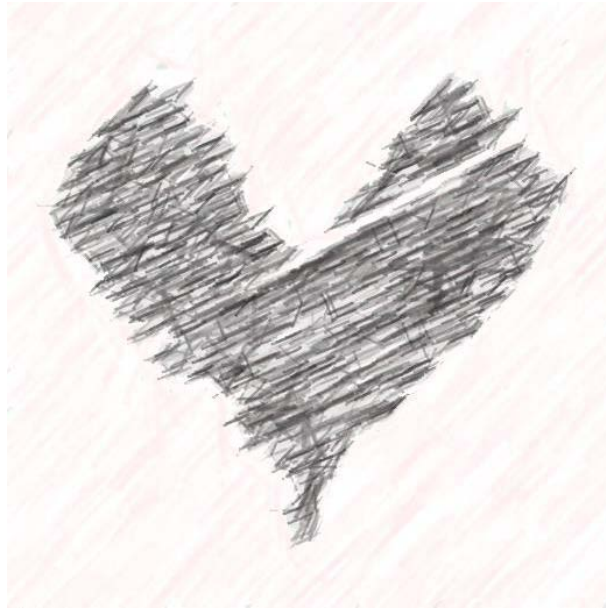
ROY COOPER • Governor

MANDY COHEN, MD, MPH • Secretary

SUSAN OSBORNE • Assistant Secretary for County Operations for
Human Services

ADOPTIONS

in Child Welfare Services



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF SOCIAL SERVICES • CHILD WELFARE STAFF DEVELOPMENT

LOCATION: 820 S. Boylan Avenue, McBryde Building, Raleigh, NC 27603

MAILING ADDRESS: 2401 Mail Service Center, Raleigh, NC 27699-2401

www.ncdhhs.gov • TEL: 919-855-6335 • FAX: 919-334-1018

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

Table of Contents

Competencies & Learning Objectives.....	2
Day One: Working with Systems.....	5
Day Two: Working with Children.....	6
Day Three: Working with Families.....	7
Adoption Policy Information.....	8
Timing it Timely.....	11
Options for Permanency.....	12
Adoption Fact Quiz.....	14
Laws Affecting Adoption.....	16
Attaining Permanence.....	20
Views on Life.....	21
Child Development Overview.....	22
Characteristics of Development.....	25
Information from Birth and Foster Parents.....	51
Stages of Grief.....	52
NC Kids Information Guide for Professionals.....	53
Confidential Intermediary Services Information Guide.....	55
Glossary.....	59
Life Books.....	63
Adoption Process.....	65
Child Process.....	69
Adoption Committee.....	73
Factors Contributing to Placement Success.....	74
Child Pre-Adoptive Summary.....	75
Video Resources.....	79
Life Book Kit.....	80
Adoption Services Checklist.....	81
Criteria for the Preplacement Assessment.....	83
Cultural Questions for Adoptive Parents.....	90
Nationally Based Adoption Search Resources.....	91
Fostering Perspectives Newsletter.....	92
Bibliography.....	93

Competencies & Learning Objectives

Competency: Understands the importance of and has a thorough knowledge of the stages, processes and milestones of normal physical, cognitive, social, emotional and moral development of children from birth through adolescence.

Learning Objective

- Give one example of how each developmental stage is impacted by the adoption process.

Competency: Knows the importance of post-placement supportive and treatment services and can assure that these services are provided to children and their adoptive and foster families.

Learning Objectives

- Explain the difference between post placement services and post adoption services and give an example of each service.
- Explain the worker's role as advisor and consultant to the family after adoptive placement, the need for required contacts during this period and the mandated availability of post adoption services.
- Using case scenarios, explain why adjusting to adoption is a lifelong process and describe post adoption issues, including normalizing the need for post adoption services.

Competency: Knows how to help the child maintain a stable, continuous sense of personal and cultural identity throughout the placement process.

Learning Objective

- Identify two areas of the child's culture which would be important for adoptive parents to understand.

Competency: Can assist the potential foster or adoptive family in deciding whether or not to accept placement of a child, based on a realistic assessment of their ability to meet the challenges presented by that child's needs, for example, physical or mental illness, disability, sexual orientation, race, age, history of sexual abuse, etc.

Learning Objective

- Describe two issues encountered in transcultural placement and how to assist the adoptive family in self-assessment regarding these issues.

Competencies & Learning Objectives *continued*

Competency: Knows the various types of adoptive placements (legal risk, foster-to-adopt, kinship, single parent) and the open and closed approaches to adoption, the benefits and limitations of each, the circumstances in which each is appropriate, and the supportive and therapeutic services needed to preserve these placements.

Learning Objectives

- Name the four types of adoptive placements and the circumstances in which each is appropriate.
- Describe the benefits and liabilities of a kinship caregiver assuming guardianship, becoming licensed as a foster parent, or adopting a child in the caregiver's home.
- Explain the conflicts and dilemmas inherent in legal risk adoptions.

Competency: Can apply the relevant federal, state and local laws, policies, procedures and best practice standards related to their area of practice and understands how these support practice towards the goals of permanence, safety, and well-being for children.

Learning Objectives

- List two federal laws that affect the North Carolina adoption policy as written in Chapter VI of the Children's Services Manual.
- Cite two references that explain the adoption laws and policy in North Carolina.
- Describe the five approved primary and alternative permanent plans and the benefits and liabilities of each.

Competency: Can conduct thorough joint home study assessments with foster and/or adoptive family applicants, including engaging the family in the home study and self-assessment, gathering pertinent information; drawing accurate conclusions.

Learning Objective

- Identify the two sources which list the information that must be covered in a pre- placement assessment.

Competency: Knows effective techniques for interviewing or communicating with children of different ages and developmental levels.

Learning Objective

- Name two tools that can be used to prepare the child for an adoptive placement.

Competencies & Learning Objectives *continued*

Competency: Understands the importance of a comprehensive and balanced assessment, knows what data must be gathered and how to thoroughly assess alleged abuse or neglect, family strengths and needs, and the risk and safety of children.

Learning Objective

- Name three categories of information that must be obtained in the child's social history according to the outline contained in Chapter VI of the Children's Services Manual and give an example of what information would be important to know in each category.

Competency: Can select appropriate techniques and conduct effective social work interviews.

Learning Objectives

- Write two questions that can be used to sensitively elicit information from birth parents about the child they are relinquishing for adoption.
- Explain how information from the birth family (i.e., medical and genetic history; psychological and emotional characteristics of the parents; religious affiliation; interests and talents) will be used to help maintain their child's identity.

DAY ONE: *Working with Systems*

- I. Welcome and Check-In**
- II. Activity: Why Me?**
- III. Positive Learning Experience**
- IV. Presentation: Foundation of Child Welfare Practice**
- V. Understanding Adoption Policy**
- VI. Timing It Timely**
- VII. Presentation: Options for Permanency**
- VIII. Adoption Fact Quiz**
- IX. The Adoption Process**
- X. Presentation: Laws Affecting Adoption**
- XI. Presentation: Attaining Permanence**
- XII. Wrap-Up**

DAY TWO: *Working with Children*

- I. Welcome and Check-In**

- II. Views on Life**
 - A. Activity**
 - B. Presentation**

- III. Child Development and Adoptions**

- IV. Video: Multiple Transitions**

- V. Child Assessment**

- VI. Communicating with Children**

- VII. Preparing the Child**

- VIII. Life Books**
 - A. Presentation**
 - B. Activity**

- VIII. Wrap-up**

DAY THREE: *Working with Families*

- I. Welcome and Check-In**
- II. Working with Birth Parents**
- III. The Grief Process**
- IV. Activity: Imaginary Box**
- V. Activity: A Walk in Their Shoes**
- VI. Pre-Placement Assessment**
- VII. Barriers to Completing an Assessment**
- VIII. Adoption Assistance**
- IX. NC Kids/Confidential Intermediary Services Presentation**
- X. In Case of an Emergency**
- XI. Wrap-Up**

Adoption Policy Information

Services to Birth Parents

The agency shall help parents reaching the decision to relinquish their child to the agency for adoptive placement to have a thorough understanding of the impact of adoption on the child's and their lives.

The individual signing the relinquishment must be offered a copy of the relinquishment, be advised that counseling services are available through the agency and be advised of their right to independent counsel.

Services to the Child

The child's statement should not be the sole determinant of the decision to plan for adoption.

In cases where adoption is the plan:

- The agency should seek relinquishments from the birth parents or a petition for termination of parental rights shall be filed within 60 days of the agency's decision that the goal is adoption.
- The agency must develop a child's specific written strategy for recruitment of an adoptive home if a family is not identified.
- The child's worker shall prepare a written assessment of the child
- The child shall be registered with NC Kids within 30 days of the child's legal clearance.

Each child who is available for adoption shall be assessed for eligibility for adoption assistance based on the child's circumstances and special needs.

Placement with current caretakers for adoption should be the first consideration unless it can be clearly documented that it would be contrary to the child's welfare and best interests.

When a specific family is chosen for the child, the child's worker shall provide the child with information about the family and prepare the child for the anticipated number of visits with the prospective adoptive parents.

Adoption Policy Information *continued*

Services to Adoptive Applicants

The agency shall have a plan for ongoing recruitment of adoptive families for children.

A preplacement assessment:

- Shall be developed with the prospective adoptive family. The preplacement assessment shall be prepared and presented to the adoptive applicants for review.
- The applicants must be provided in writing with notice of the agency's decision regarding approval or denial of approval for adoption within 30 days after the study is completed.
- Each agency shall have a procedure for allowing an individual who has received an unfavorable preplacement assessment to have the assessment reviewed by the agency.

All approved adoptive applicants who are requesting special needs children are to be registered with NC KIDS upon approval of their preplacement assessment, unless they are under consideration for a specific child.

The Agency Adoption Committee shall be composed of a minimum of three persons, including a person from the agency in a management position in children's services, the child's social worker, and the adoption worker.

The possibility and availability for adoption assistance for the child being considered shall be discussed with the adoptive parents.

Post placement services shall be provided to the adoptive family. A face to face visit must be made within the first week of placement and then at least monthly with the child and the adoptive parents by the family's social worker.

The agency will cooperate with the adoptive parents in the legal adoption procedure.

Timing it Timely



1. The Permanency Planning Review meetings are held:
1st meeting _____ Subsequent meeting _____
2. When the plan is changed from reunification to adoption, it must be documented on the Out of Home Family Services Agreement (OH-FSA) within _____ days from the date the plan changes.
3. A child must be listed on the Adoption Resource Exchange within _____ days of being legally cleared for adoption.
4. The agency shall assess the child's eligibility for Adoption Assistance within _____ days of the child being legally cleared for adoption.
5. A written strategy for recruitment shall be developed within _____ days of the child being legally cleared for adoption if a family has not been identified for the child.
6. The agency shall initiate a proceeding to terminate parental rights when a child has been placed outside the home for _____ of the most recent 22 months
7. A petition to terminate parental rights shall be filed within _____ days of the agency's decision that adoption is the goal.
8. Court reviews are held every _____ months until the Decree of Adoption is filed.
9. The DSS record shall contain a photograph of child/children and be updated every _____ months.
10. When a child is placed in his adoptive home there shall be face to face contact with the child and his adoptive parents within _____ days of placement.
11. There must be face to face contact with the child and his adoptive parents at least once every _____ days.
12. Documentation shall be prompt and current within _____ days.

7 DAYS	30 DAYS	60 DAYS	90 DAYS	6 MOS.	12 MOS.
--------	---------	---------	---------	--------	---------

Options for Permanency

- **Agency adoption** occurs when a DSS or other licensed agency that has custody and/or placement responsibility places a child in an approved adoptive home. There may be an approved family waiting, or an appropriate family may need to be recruited. The agency has the responsibility for legally clearing the child and filing the legal documents with the Clerk of Superior Courts.
- **Relative adoption** occurs when the child is placed for adoption by the parent or legal guardian with an adopting family who are grandparents, great grandparents, aunts/uncles, great aunts/uncles, 1st cousins, or siblings of the child. Pre-placements are not required in relative adoptions. Workers should help families consider the conflicts that might arise between the birth parents and the relative adoptive parents; they should also help the child deal with feelings of divided loyalties. Relative adoption helps to preserve the child's sense of identity and family history.
- **An independent/direct placement adoption** is one in which the child is placed for adoption by the parent or legal guardian directly with the adopting family when the child is not in the custody of a county DSS or private child-placing agency. The county DSS may provide the needed services in obtaining sufficient information on the prospective adoptive parents, birth parents, and child to serve as a basis for approval of the placement and prepare the pre-placement assessment as required by law.
- **Stepparent adoption** occurs when the spouse of a biological parent of the child desires to establish a legal parent-child relationship with a child. Consents, relinquishments, or a termination of parental rights must be obtained related to the child's other biological parent. The county DSS may provide the needed services in obtaining sufficient information to produce the Report to the Court on proposed Adoption.
- **International**-is one in which the child legally adopted in a country other than the United States of America. If the adoption is completed in the other country, there is no need for the parents to re-adopt the child once they have returned to the USA.
- **Adult Adoption**-any adult may adopt any other adult (with their consent) with the exception of their own spouse.
- **Foster-to-adopt adoption** occurs when a foster family chooses to adopt the child in its care. It is especially appropriate if the child has formed a close relationship with his or her foster family. This has the advantage of continuity—the child does not have to move and adjust to a new environment.
- **Legal-risk placement** is one in which a child who is not yet legally cleared for adoption is placed in a home which is either licensed as a foster home or approved by court order, with parents who understand that the placement is not secure. It minimizes moves for the child, by moving him or her into a permanent home as soon as possible.

Options for Permanency *continued*

- **Legal guardianship** creates a legal relationship between a child and an adult that is intended to be permanent. North Carolina law allows a judge to appoint a legal guardian for the child who is responsible for the care, custody, and control of the child. Some advantages of guardianship are that parental rights do not have to be terminated, the child can maintain legal rights to the birth parents' inheritance, and the guardian is not subject to supervision by an agency. A disadvantage is that guardians are not eligible for the foster care board rate or adoption subsidy. If a guardian decides to adopt, he or she may be eligible for the subsidy.
- **Legal custody** is awarded by a judge to a relative, foster parent, or other adult person deemed suitable by the court. Legal custody has most of the same advantages and disadvantages as legal guardianship, except custody may be terminated "on the basis of a change in circumstances, regardless of the fitness of the guardian." The court defines the specific rights and responsibilities of a legal custodian. Custodians must show the court order to prove their right to act in a parental role.
- **Another Planned Permanent Living Arrangement (APPLA)** is only an appropriate primary permanency goal for youth who are between the ages of 16 to 18 or as a concurrent permanency goal for youth ages 14 to 16. The youth must have lived with his caregivers in a family setting for at least the previous six months, the caregiver and the youth have made a mutual commitment of emotional support, and the youth has been integrated into the family. The youth and caregiver request that the placement be made permanent. APPLA must be initially approved by the court and the Permanency Planning Review/Child and Family Team prior to the change to this plan.
- **Reinstatement of Parental Rights**-happens when biological parents whose parental rights have been terminated by a court of law have those rights legally reinstated by a court of law.
 - A child must be at least 12 years of age
 - A child must have no legal parent, not be in an adoptive placement, or not likely to be adopted in the immediate future
 - The order for TPR must have been issued at least 3 years previously
 - Only the child, the GAL attorney, or the DSS that holds custody of the child may petition for reinstatement of parental rights and the court has up to 12 months to decide if reinstatement is in the child's best interest
 - If a parent expresses wishes in having their rights reinstated and the above conditions are met DSS is obligated to inform the child of their right to file a petition for reinstatement of parental rights.
 - Child must be 12 or older (except in exceptional circumstances), they must not be adopted, in an adopted placement, or likely to be adopted in the foreseeable future, and the TPR/Relinquishment must be at least 3 years old. Only the DSS that holds custody, GAL attorney, and child can file the motion. If a parent expresses interest and all conditions are met child must be informed of their right to file a motion. The court has 12 months to decide on the motion.

Source: North Carolina Division of Social Services. (2009). Family services manual (vol. I, chap. IV). Raleigh, NC: Author.

Adoption Fact Quiz

1. _____ Number of children in foster care in N.C. in Calendar Year (CY) 2018.
2. _____ Number of children in foster care in N.C. waiting to be adopted (CY 2018).
3. _____ Number of children who exited the foster care system in NC through adoption for State Fiscal Year 2017-2018.
4. _____ Total number of children in the U.S. in foster care (2017).
5. _____ Total number of children in the U.S. in foster care waiting to be adopted. (2017)
6. _____ Total number of children in the U.S. adopted from the public foster care system in FY 2017.
7. _____ Total number of children in the U.S. waiting to be adopted whose parents' rights have been terminated. (FY 2017)
- *8. Percentage of the children in foster care in the U.S. who need adoptive homes who are (2017):
 - _____ Black or African-American
 - _____ White
 - _____ Hispanic (of any race)
 - _____ American Indian, Alaskan Native, Asian, or Native Hawaiian/other Pacific Islander
 - _____ Two or more races
 - _____ Unknown ethnic background
9. _____ Average age of children waiting to be adopted in the U.S. (2017).
10. _____ Average time elapsed from Termination of Parental Rights to Adoption (2017)

11. The percentage of children adopted in the U.S. at the following ages (2017):

_____ Under one year

_____ 1-5 years

_____ 6-10 years

_____ 11-15 years

_____ 16-18 years

12. Percentage of adoptions in the U.S. by the following groups (2017):

_____ Non-relatives

_____ Foster parents

_____ Relative

13. _____ Percentage of children in the U.S. that are adopted.

Sources:

Adoption and Foster Care Analysis and Reporting System.

<http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport23.pdf>

AFCARS Report #25 | Children's Bureau | ACF

<https://www.acf.hhs.gov/cb/resource/afcars-report-25>

XLS|AFCARS State-by-State Adoption and Foster Care Statistics

https://www.acf.hhs.gov/sites/default/files/cb/afcars_state_data_tables_fy2015.xlsx

Adopted Children - Child Trends

<https://www.childtrends.org/indicators/adopted-children/>

*For the purposes of this table, relatives who were also foster parents are classified only as relatives.

(updated 07/2019)

Laws Affecting Adoption

The Indian Child Welfare Act (ICWA)

According to the Indian Child Welfare Act (1978), no child who is from a federally recognized Native American tribe can be placed without involving the tribal organization in planning the best placement for the child in a setting that reflects his or her culture. It does not prevent emergency removal to prevent harm to the child. If the identity or location of the Indian parent or tribe cannot be determined, written notice must be sent to the Bureau of Indian Affairs at the appropriate regional office. Although the only federally recognized tribal grounds in North Carolina are those of the eastern band of the Cherokee, many people from federally recognized tribes live and work in North Carolina, and they are also protected under this act. Although ICWA protects only federally recognized tribes, there are state-recognized tribes that merit similar attention.

Multiethnic Placement Act (MEPA)

The Multiethnic Placement Act (1994 and 1996) is an attempt by the federal government to remove some of the barriers toward permanence for children in foster care. Data had indicated that non-white children were typically in foster care for a much greater length of time than were white children.

This legislation requires workers to make individualized placement plans based on the needs of each child, not using race or ethnicity as the basis for those decisions. It specifically states that a worker may not delay or deny a child's foster care (or adoptive) placement on the basis of the child's or the prospective parent's race, color, or national origin.

The intent of MEPA is that placement decisions are made based on what is in the best interests of the child and not on a stereotypical assumption about what kind of foster or adoptive parents should be considered. Research has clearly shown that transracial placements are not detrimental to children and, in fact, children are much better off in a transracial adoption than remaining in foster care.

Workers should carefully document the rationale for their placement decisions in this regard; including all the factors they considered in making that decision based on sound child welfare practices (13). Any violation of MEPA is considered a violation of the Civil Rights Act (Title VI).

Adoption and Safe Families Act (ASFA)

The Adoption and Safe Families Act (1997) emphasizes that children's safety is more important than keeping them in their own home. It promotes adoption and other permanent homes for children by reducing the amount of time until the permanency planning hearings. It also provides incentives to families for adopting a special-needs child and increases funding for family preservation services to support families. Highlights are as follows:

- Reasonable efforts to return child home safely
- Permanency planning hearing held at 12 months rather than at 18 months required by PL96-272
- Required that States provide health insurance coverage for all special needs children in subsidized adoption, regardless of whether they are IV-E adoptions
- Provides for adoption incentive payments to States that increase the number of adoptions of children in foster care as compared with a base year

- Re-authorized and expanded the family preservation and support services program, renaming it 'promoting safe and stable families.' Family reunification services are time limited to the 15 month period beginning on the date the child enters foster care
- States must have procedures for criminal records checks for prospective foster or adoptive parents before a child eligible for federal subsidies is placed with such prospective parents
- States must initiate or join in termination proceedings for all children who have been in care for 15 out of 22 months
- States must develop plans for use of cross-jurisdictional adoption resources and may not deny or delay placement of a child for adoption when an approved family is available outside the jurisdiction responsible for handling the child's case
- State must develop standards to ensure that children in foster care are provided quality services
- References to the safety of a child must be included in planning a case review for children in foster care
- Foster parents, pre-adoptive parents, or relatives caring for children in foster care must be notified of and have the opportunity to be heard in any review process
- New requirements for data reporting and there will be 'State Report Cards'

The Interstate Compact for the Placement of Children (ICPC)

ICPC is an agreement among all fifty states that is supposed to coordinate the transfer of children across state lines for the purposes of adoption. There is some question as to whether it was intended to apply to private or independent adoptions, however the only prudent course of action to take is to comply with the terms of the compact.

Generally, what the compact requires is that the state where the child and birth mother are living and the state where the adoptive parents live both agree that the child can come to live with the adoptive parents. The state where the child is born (the sending state) will want to make certain that the legal rights of birth parents have been either terminated by court proceeding or by signing of their consent. The sending state may also require a genetic history of the birthparents and the hospital medical records of the minor. Once the ICPC coordinator in the sending state has all the documentation they require, they will give their approval to leave the birth state.

There is an ICPC coordinator in the receiving state as well. The ICPC coordinator in the receiving state will typically require a home study of the adoptive family to make certain that they can provide a good, stable home for the child and to make certain that the child will be adequately cared for in the adoptive home. Once the sending state has given its approval and the receiving state has completed its home study, approval is given for the adoptive family to come home with their baby. In some states all this can be accomplished prior to the birth of the child and in other states it can take up to three or four weeks to get approval. It is illegal to leave the sending state or enter the receiving state without ICPC approval.

Interstate Compact on Adoption and Medical Assistance (ICAMA)

An agreement between member states that governs the interstate delivery of and payment for medical services and adoption services/subsidies for adopted children with special needs.

Wyoming is the only state that *DOES NOT* participate in this compact.

This means that if a family living in Wyoming is chosen for a North Carolina child, they would be responsible for the medical insurance of the child. This is something that the child's social worker should discuss with the family prior to visitation. The participating states have agreed to honor Medicaid for the adopted child, and therefore, the family is not responsible for the child's medical insurance.

Fostering Connections to Success and Increasing Adoptions Act of 2008

(H.R. 6893/P.L. 110-351)

The Fostering Connections to Success and Increasing Adoptions Act (H.R. 6893/P.L. 110-351) provided help to hundreds of thousands of children and youth in foster care by promoting permanent families for them through relative guardianship and adoption and improving education and health care. Additionally, it extended federal support for youth to age 21. The act also offered many American Indian children important federal protections and support.

Fostering Connections provides increased support for kinship caregivers, increased incentives for children to be adopted out of foster care, and efforts to improve outcomes for children in foster care and those who age out of care. While North Carolina already had in place some of the mandates of this federal law, the following are provisions that affect child welfare policy and practice in our state:

- **Notice to Relatives When Children Enter Care.** Requires agencies to provide notice to all adult grandparents and other adult relatives of a child within 30 days after the child is removed from his or her home.
- **Adoption Assistance.** Increases opportunities for more children with special needs to receive federally-supported adoption assistance without regard to the income of the birth families from whom they were originally removed.
- **Health Care Coordination.** Requires the state Division of Social Services to work with the state Medicaid agency to create a plan to (1) coordinate health care for children in care to ensure appropriate screenings, assessments, and follow-up treatment; (2) share critical information with appropriate providers; and (3) provide oversight of prescription medications.
- **Educational stability.** Requires child welfare agencies to coordinate with local education agencies to ensure that children remain in the school they are enrolled in at the time of placement into foster care, unless that would not be in the child's best interests. Includes increased federal funding to cover education-related transportation costs.
- **Making older children who exit foster care eligible for additional supports.** Clarifies that children 16 and older who are adopted from foster care or who exit foster care to live with a relative guardian are eligible for independent living services and for education and training vouchers.
- **Helping older youth successfully transition from foster care.** Requires agencies to help youth develop a detailed personal transition plan during the 90-day period immediately before they exit from care.

Attaining Permanence

Before Final Decree

Post-Placement Services

Definition: Post-placement services are services that are provided after the child's placement with his or her adoptive family but before the decree of adoption is issued. The goal of these services is to facilitate the integration of the child and family and the resolution of problems that they may encounter.

Worker responsibilities: When a child is placed in an adoptive home, face-to-face contact shall be made at least once within the first week of placement and then at least monthly with the adoptive parents and the child by the family's social worker. The purpose of the visit shall be for regular and ongoing support, monitoring, and/or counseling of the family and to document the progress of the placement.

Take a couple of minutes to list three reasons for providing post-placement services to families:

1. _____

2. _____

3. _____

Disruption

Definition: Adoption disruption is a term used to describe the interruption of an adoptive placement after actual placement of a child with the adoptive family but before finalization of the legal adoption process. The decision to stop the adoption process should be arrived at between the parents and worker and, when feasible, the child. The decision must be made slowly and carefully, only after all alternatives and resources have been tried. Families considering disruption are distressed and in crisis and are likely to have difficulty in evaluating the situation objectively.

Worker responsibilities: Families should be made aware that disruptions are a possible occurrence in any adoption. If disruption seems likely, the social worker should immediately begin to assess the type of placement that will be necessary for the child and prepare to provide assistance to both the child and the family in dealing with the effects of disruption.

After Final Decree

Post-Adoption Services

Definition: Post-adoption services involve interviewing, counseling, and providing clinical and consultative services for the purpose of ensuring permanence of placement. Such services may be designed to treat problems that developed before or after the date of the decree of adoption.

Worker responsibilities: Post-adoption consultation is not a continuation of supervision but is given as needed and requested by any of the parties involved in adoption. Agencies continue to have a moral obligation and social responsibility for the welfare of the adopted child.

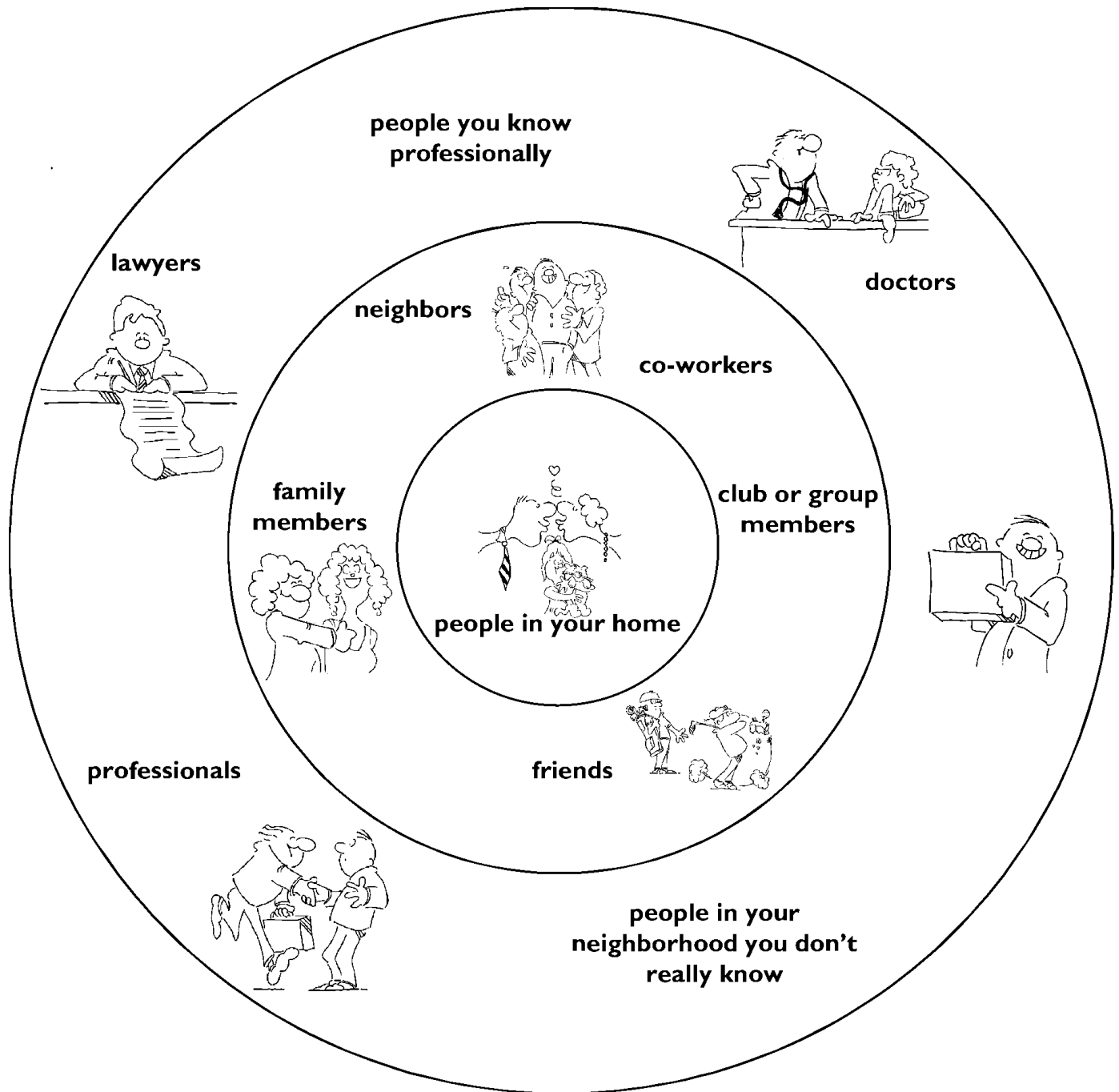
Dissolution

Definition: Adoption dissolution is a term used to describe the interruption of an adoptive placement after the legal process has been completed and the adoption is finalized. This is a much more serious occurrence than a disruption since not only is a placement ending, but the legal rights of the child and responsibilities of the adoptive parents must be addressed.

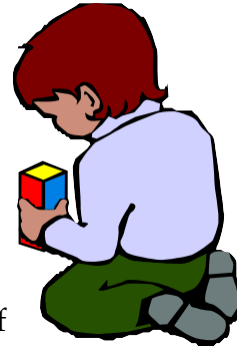
Worker responsibilities: When dissolution becomes a possibility, the DSS in the county where the family resides is the agency responsible for providing assistance to the family (even if it is not the agency that placed or supervised placement of the child). The agency that originally placed the child should be contacted as quickly as possible as a resource about the child's background, including current status of the family of origin.

Views on Life

In the circles below, write the names of people who fall into each category in your life.



Child Development Overview



- ◆ All children move through stages of development.
- ◆ “Milestones” which are defined by a child’s specific physical, mental, social, and emotional achievements mark each stage of development.
- ◆ Each stage is defined by a child’s age, but each child progresses through the stages at different rates. In other words, age gives a rough idea of what milestones a child should be working on, but age should not be the sole basis for defining a child’s developmental stage.



- ◆ Children cannot achieve the milestones in each stage on their own— they must be learned, practiced, and mastered through relationships with others. Therefore it is critical that workers and parents understand the tasks associated with each stage of development so they can help the child move forward.

Group One Scenario

DiShon, 10 months old, has been living with his foster parents (Jane and Bill Evans) since he was four months old. His birth mother is incarcerated (a 10-year sentence), and his birth father is deceased. Prior to entering foster care, DiShon lived with his maternal grandmother (Mrs. James), but when he was two months old; she was diagnosed with breast cancer and began to undergo treatment that ultimately prevented her from being able to care for DiShon. At four months, DiShon came into DSS custody due to dependency. Due to the grandmother's poor health, she was unable to care for DiShon. She has been visiting with him about once a month as her health has permitted, but her illness left her with little energy to interact with him. Now she is expected to make a full recovery and be able to resume care for him within one month. The agency plans to place DiShon with the grandmother for the purpose of adoption. DiShon trusts his foster parents and seeks his foster mother for comfort and support.



Group Two Scenario

Alvin, now six years old, was brought into foster care at age three when he was rescued from a fire at his home. It is suspected that his mother, who had recently stopped attending her AA meetings, fell asleep or passed out with a burning cigarette in her hand. His mother and younger sister did not survive the fire.

Alvin lived with his first foster family for one year, until the family, which was not interested in adoption, relocated to another state. He was then placed with his current foster family (the Alstons), who have begun the process for adopting Alvin. They are also caring for a five-year-old girl, Mary, whom they plan to adopt once the TPR is complete on her birth parents.

Mrs. Alston just called you and in a very upset tone, explained that she just caught Alvin and Mary fighting, and that according to Mary, Alvin had “tried to touch her in her private place and then hit her in the arm when she said she was going to tell.” Alvin says he was just playing and has been crying for almost an hour.

According to his records, Alvin has no history of sexual abuse.

Group Three Scenario

Angela, age 8, has been with her adoptive family (Juanita and John Ramirez) for two years. You hear from Mrs. Ramirez about twice a year, she likes to keep you posted on Angela's progress. Until now, Mr. and Mrs. Ramirez have never contacted you with any problems, but in this last phone call, they expressed deep concern about Angela's progress in school and her recent threats that she is going to run away from home.

In your brief phone conversation with her parents you find out that she has recently begun asking questions about her adoption and has also stopped playing with the group of boys in her neighborhood who had, until then, been her closest friends.



Group Four Scenario



At age 15, Sarah Jane has just been adopted by her aunt (Leslie Morgan) following her mother's incarceration for murdering her boyfriend, who may have been abusing her. This is Leslie's first parenting experience.

Prior to placement nine months ago, Sarah Jane lived with her mother and her mother's boyfriend in Georgia. She had only visited her aunt Leslie (who lives in North Carolina) two times, but her mother and aunt talked several times a year on the phone.

According to Leslie, Sarah Jane has been angry and aloof since she arrived. Leslie says she has been understanding and tried to make Sarah Jane feel welcome. But now she has discovered that Sarah Jane let her believe she was involved in the Drama Club, when in fact she's been spending the time after school with friends Leslie considers to be a "bad" crowd.

Leslie sounds overwhelmed and is asking you about possible group home placements.

Characteristics of Development

Birth to Six Months

Physical Characteristics

Develops own rhythm in feeding, eliminating, much as sleeping.

Grows rapidly.

Gains early control of eye movements. Develops mobiles. motor control in orderly sequence: balances head, rolls over, pulls self to sitting positions, sits alone momentarily.

Begins to grasp objects.

Mental Characteristics

Learns through her senses. Discriminates mother grasp. from others and is more responsive to her.

Coos and vocalizes spontaneously. Babbles in deal. two-word syllables.

Social Characteristics

Imitates movements. Gazes at faces. Smiles a-boo. to be friendly.

Likes to be played with, tickled, and jostled.

knees. Smiles at self in mirror.

Plays with hands and toes.

Emotional Characteristics

Shows excitement through waving arms, kicking, frowning, and wriggling. Shows pleasure as she anticipates bottle or being picked up.

Cries in different ways when he is cold, wet, afraid of hungry.

Fears loud or unexpected noise; strange objects, situations, or persons; sudden movements; pain.

Cause for Concern

No vocalization.

Failure to respond to sounds.

Implications for Parents

Adapt schedule to baby's rhythm as possible.

Supply adequate food. Change baby's position frequently. Exercise baby's arms and legs as you bathe and change her.

Supply visual stimuli, such as

Let baby grasp your fingers as you pull him up.

Provide objects to see, hear, and

Talk to him a great

Play pat-a-cake and peek-

Bounce her on your

Provide a mirror.

Allow freedom for his hands and legs.

Show facial expressions of smiling or

Learn to "read" his cries. Don't be spoiling him. A cry is his main way of communicating needs.

Six Months to One Year

Physical Characteristics

Largemuscle:

8 months on—crawls.

9 months on—may begin to walk.

Smallmuscle:

Learns to let go with hands.

Puts everything in his mouth.

Begins to have teeth come in.

Cannot control bowels.

Mental Characteristics

Learns through his senses—especially his mouth.

Likes to put things in and take things out.

Likes to do things over and over.

Language:

begins to understand such familiar words as *eat*, *mama*, *bye-bye*, and *doggie*.

May not speak until age one or later.

Likes to hear you name objects.

Social Characteristics

With adults:

Finds mother or mother substitute extremely important.

Will “talk” to you using babbling sounds.

Will start to imitate.

Has eating as a major source of social interaction.

With peers:

Will not play with other infants—will poke, pull, push, etc., instead.

Implications for Parents

Be sure dangerous objects are out of reach. Provide experiences that involve arm and leg exercise.

Child will play “dropping things” game—this helps her understand his world.

Provide him with some foods he can eat with his hands and some other activities involving exercise of fingers.

Child may be cranky. She’ll need special patience and things to chew on.

Do not try to potty train.

Provide toys and games that involve hearing, seeing, smelling, tasting, and touching.

Be sure there are no toys with small or loose parts.

Repeat words and activities.

Say the names of objects as the child sees or uses them.

Begin to look at very simple picture books with the child.

One person should be in charge of most of the child’s care.

Talk to the baby.

Do the things you want the child to do.

Don’t expect her to play with others.

Source: Group Child Care Consultant Services. *Special needs adoption curriculum*. Chapel Hill, NC: Author.

Six Months to One Year

Emotional Characteristics

Needs:

To be held and cuddled with warmth and love
comfort.
to feel sure that someone will take care of him.

afraid

Personality traits:

Becomes unhappy when mother leaves her.

Draws away from strangers.

Same fears as before.

Cause for Concern

Failure to respond to you.

Too much crying or “fretting.”

Even worse is a sad expression and failure to cry.

Implications for Parents

A special person should provide physical

His needs of hunger, cleanliness, warmth,
holding, sensory stimulation, and interaction
with an adult should always be met. Don't be
of spoiling him.

If mother must leave, a special person should
provide care.

Proceed slowly in introducing the child to new
people.



Source: Group Child Care Consultant Services. *Special needs adoption curriculum*. Chapel Hill, NC: Author.

One to Two Years

Physical Characteristics

Large muscle:

Begins to walk, creep up and down stairs, climb on furniture, etc.

Enjoys pushing and pulling toys.

Small muscle:

Begins to feed himself with a spoon and can hold a cup.

Can stack two to three blocks.

Likes to take things apart.

Likes to put in and take out things.

Takes off pull-on clothing.

Cannot control bowels.

Mental Characteristics

Learns through his senses.

Is curious—likes to explore—poke fingers in holes.

Language:

Can say the name of some common objects.

Uses one-word sentences: “no,” “go,” “down,” and “bye-bye.”

Can point to common body parts and familiar objects. Can understand simple directions such as “get your coat.”

Social Characteristics

With adults:

Still finds mother very important.

Enjoys interaction with familiar adults.

Imitates—will copy your behavior.

Demanding, assertive, and independent.

Implications for Parents

Provide large, safe space for exercising arms and legs.

Push or pull toys help her balance in walking.

He'll be messy, but allow the child to feed himself sometimes. Fix food he can eat easily.

Provide toys or games she can take apart, stack, squeeze, pull, etc.

Let the child try to dress himself.

Do not try to potty train.

Have toys or play games which make sounds, have different “feels,” involve color and shape, etc.

Be sure area is safe—allow child to explore.

Talk to the child often. Say the names of objects she sees or uses. Talk about activities as you bathe and dress her.

Teach names of body parts.

A special person should provide most of the care.

Be sure you do the things you want the child to do.

One to Two Years

Social Characteristics

Waves bye-bye.

With peers:

Plays by himself but does not play well with others his age.

Possessive of own things.

Emotional Characteristics

Needs:

The love, warmth, and attention of a special adult.

To develop trust—the feeling that someone will take good care of her.

Personality traits:

Often reaches a peak of thumb sucking at 18 months.

May throw temper tantrums.

General emotion is happy.

Anger chiefly aroused by interference with her physical activity.

Cries because he can't put wishes into words.

Moral Characteristics

Conscious of adult approval and disapproval.

Implications for Parents

Although he likes to observe other children, he may want an adult close by.

A special, caring adult should look after the child.

Ignore thumb sucking. Calling attention to it will only make it worse.

Do not give in to his demands, but do not punish child—he is expressing himself the only way he knows how. Be sure you are not demanding too much of the child.



Source: Group Child Care Consultant Services. *Special needs adoption curriculum*. Chapel Hill, NC: Author.

Two to Three Years

Physical Characteristics

Largemuscle:

Runs, kicks, climbs, throws a ball, jumps, pulls, pushes, etc.

Enjoys rough-and-tumble play.

Smallmuscle:

Can turn some doorknobs.

Scribbles. Eats easily with a spoon. Helps dress and undress himself. Can build a tower of six to seven blocks.

Can begin to control bowels—bladder control comes slightly later.

Mental Characteristics

Continues to learn through her senses.

Still is very curious.

Has a short attention span.

Language:

Uses three- to four-word sentences.

Begins to enjoy simple songs and rhymes.

Social Characteristics

With adults:

Still considers mother very important; does not like strangers. Imitates.

Dawdles.

Helpful with adults.

With peers:

Enjoys playing by himself.

Enjoys having other children near but does not play with them much.

Pinches, kicks, bites, and pushes when angry—usually caused by interference with her physical activity or possessions.

Implications for Parents

Provide lots of room and many experiences in which the child can use her arms and legs.

Provide activities that use fingers—clay, finger paint, pick-up objects, stacking objects, and large crayons for scribbling.

Gradually start toilet training—consult an authority if unsure of methods.

Provide sensory experiences.

Allow the child to explore—leave as few “no-no’s” as possible.

Don’t make him do one thing for more than a few minutes.

Talk often with the child. Explain things simply.

Songs need to have repetition, be low in key, and have short range.

Allow her time to do things for herself and to explore.

Provide the child chances for uninterrupted play.

Don’t force children to play together.

Do not allow children to hurt each other.

Two to Three Years

Emotional Characteristics

Needs:

Begins to develop a sense of self.

Needs to do some things for herself; enjoys praise.

Personality traits:

Tests his powers—says, “no!” often.

Shows lots of emotion—laughs, squeals, throws temper tantrums, cries violently, etc.

Fears:

Loud noises, moving quickly, high places, large animals, mother’s departure.

Moral Characteristics

Child usually appears self-reliant and wants to be good, but is not yet mature enough to be able to carry out most of her promises.

Implications for Parents

Provide simple experiences in which the child can successfully do things for himself. Praise him often.

Be firm in following through with your instructions, but do not punish the child for expressing her feelings and independence.

Avoid sudden situations involving these fears; do not force the child or ridicule him.

Source: Group Child Care Consultant Services. *Special needs adoption curriculum*. Chapel Hill, NC: Author.

Three to Four Years

Physical Characteristics

Large muscle:

Runs easily; jumps.

Begins to climb ladders. Can start to ride tricycles. Tries anything. Is very active.

Small muscle:

Dresses himself fairly well—cannot tie shoes.

Can feed herself with a spoon or fork. Scribbles in circles. Likes to play with mud, sand, finger paints, etc. Can begin to put together simple puzzles and construction toys.

Takes care of toilet needs more independently—can stay dry all day but may not stay dry all night.

Sex:

Becomes very interested in his body and how it works.

Mental Characteristics

Continues to learn through her senses.

Uses his imagination a lot—starts dramatic play and role playing.

Begins to see cause and effect relationships.

Language:

Likes to learn simple songs and rhymes; likes to play around with sounds; knows more than he can say in words. Is curious and inquisitive.

Social Characteristics

With adults:

Can leave mother for short periods of time though she is still very important.

Begins to notice differences in the way men and women act. Imitates adults.

Implications for Parents

Carefully supervise opportunities for large muscle activity.

Set limits for distances. Child tends to wander too far.

Provide many opportunities for child to practice small muscle skills.

These activities strengthen and coordinate small muscles.

All body parts should be labeled without judgement and questions about body functions answered simply and honestly.

Provide many sensory experiences.

Provide props for dramatic play.

Point out and explain common cause and effect relationships—how rain helps flowers grow, how dropping makes glass break, and how hitting makes a person hurt.

Explain things to the child, answer his questions honestly, and help him put his feelings and ideas into words.

At the start of sex-role development she will act in ways she sees you act—so do what you want the child to do.

Three to Four Years

Social Characteristics

With peers:

Starts to be more interested in others, begins group play, and likes company.
Is not ready for games or competition—has loosely-organized group.

Emotional Characteristics

Is anxious to please adults and is dependent on others' approval love and praise.

May strike out emotionally at situations or persons when he has troublesome feelings.

Is sensitive to the feelings of other people herself.

Is developing some independence and self-reliance.

May have fear of unusual people, the dark, and animals.

Moral Characteristics

Begins to know right from wrong.

Finds others' opinions of him important.
Increased self-control and less aggression.
Uses verbal threats, such as, "I'll kill you."

Implications for Parents

Provide enough materials so that several children can use them together. Help the child find out socially acceptable ways of dealing with others.

Give your approval through facial expressions, gestures, and verbal responses. Avoid negative remarks about the child. Emphasize the teacher's and family's love for the child.

Offer love, understanding, and patience. Help him work with and understand his own emotions.

Develop a warm relationship with her. Express toward and show love for her and confidence in her.

Encourage him to do things for himself.

Don't force the child to participate in frightening activities, and don't ridicule her.

Provide clear limits—enforce them consistently but not harshly.

Praise the child honestly whenever you can.



Source: Group Child Care Consultant Services. *Special needs adoption curriculum*. Chapel Hill, NC: Author.

Four to Five Years

Physical Characteristics

Average height—40.5 inches
Average weight—36 pounds

Is very active—constantly on the go. Is out. sometimes physically aggressive.

Has rapid muscle growth. Would rather talk or play than eat.

Mental Characteristics

Has large vocabulary—1,500 to 2,000 words.

Has strong interest in language. Fascinated by words and silly sounds.

Likes to shock adults with bathroom language.

Has insatiable curiosity. Asks innumerable questions—incessant talker.

Can reason a little, but still has many misconceptions.

Social Characteristics

Really needs to play with others. Has relationships that are often stormy. Has tendency to exclude some from group.

Likes to imitate adult activities. Good imagination—loves to pretend.

Relies less on physical aggression.

Is learning to share, accept rules, and take turns.

Emotional Characteristics

Exhibits a great amount of demanding, threatening, and name-calling.

Often is bossy and belligerent. Goes to extremes—bossy, then shy. Frequently whines, cries, complains.

Often tests people to see who he can control.

Implications for Parents

Provide plenty of play space both indoors and

Provide for rest—she will fatigue easily.

Child needs ample protein in diet. Nutrition is important.

Provide interesting words and stories. Play word games.

Ignore bad language.

Answer questions patiently.

Provide experiences that will expand his reasoning ability such as riddles and guessing games. Be alert to clarify misconceptions.

Send her to a good nursery school or play group, if possible.

Provide props for dramatic play.

Help him learn positive social behavior without punishing or scolding.

Expect her to take simple responsibilities and follow simple rules, such as taking turns.

Keep a sense of humor.

Provide outlets for emotional expression through talking, physical activity, or creative media.

Establish limits and adhere to them.

Four to Five Years

Emotional Characteristics

Is boastful, especially about self and family.

Has growing confidence in self and world.

Beginning to develop some feelings of insecurity.

Moral Characteristics

Is becoming aware of right and wrong. Usually has desire to do right. May blame others for his wrongdoing.

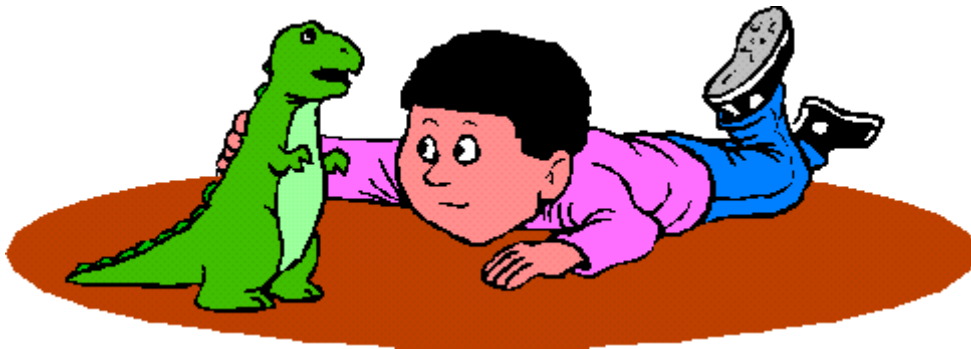
Implications for Parents

Provide opportunities for talking about self and family.

Strengthen his positive self concept by pointing out the things he can do for himself.

Assure her of your love and her parents' love.

Help him learn to be responsible for his own actions and behavior, and teach him the importance of making right choices.



Source: Group Child Care Consultant Services. *Special needs adoption curriculum*. Chapel Hill, NC: Author.

Five to Six Years

Physical Characteristics

Can dress and undress herself.

Has tendency to be farsighted—may cause hand-eye coordination problems.

Prefers use of one hand or other.

Toileting:

Is able to care for own toilet needs independently.

Sex:

Knows differences in sexes—interest lessening: more modesty, less bathroom play.

Interested in babies and where babies come from.

Eating:

Has bigger appetite; may have stomachaches or vomiting when asked to eat disliked foods.

Prefers plain cooking but accepts wider choice of foods.

Mental Characteristics

Language:

May stutter if tired or nervous.

Tries only what she can accomplish.

Will follow instructions and accepts supervision. Knows colors, numbers, etc. Can identify a penny, nickel, and dime. May be able to print a few letters.

Social Characteristics

With adults:

May fear mother won't return for him—mother is the center of his world.

Copies adults. Likes praise.

With peers:

Plays with both boys and girls.

Is calm and friendly.

Is not too demanding in relations with others.

Can play with one child or group of children.

Implications for Parents

Don't try to teach a child skills that require continued eye coordination such as reading.

Do not force child to change hands.

Offer simple, accurate explanation.

Offer appealing variety in food *without force*. He's more sensitive to spicy foods than adults.

Do not emphasize—it's only temporary.

This is a good age to begin group experiences on a half-day basis.

Avoid leaving until child is prepared—he needs mother's reassurance of return.

Encourage child to find activities at school she enjoys; offer comfort; provide a secure non-critical environment.

Five to Six Years

Social Characteristics

Likes conversation during meals.

If doesn't like school, may develop nausea and vomiting.

Is experiencing an age of conformity. Is critical of those who do not conform.

Emotional Characteristics

In general, is reliable, stable, and well-adjusted.

Though not a fearful age, may show some fear of dark, falling, dogs, or bodily harm.

If tired, nervous, or upset, may develop tension outlets of nail biting, eye blinking, throat clearing, sniffing, or nose twitching.

May still suck thumb.

Is concerned with pleasing adults.

Is easily embarrassed.

Moral Characteristics

Is interested in being good. May tell untruths or blame others for wrongdoings because of her intense desire to please and do right. Is aware of right and wrong. Teach right behaviors and living.

Implications for Parents

Help child learn the value of individual differences.

Increases in temporary nervous habits are normal. Try not to appear overly concerned. Deal with cause of tension rather than the habit. Offer distractions.

Child still may need rest or quiet times.

Show your love.

Be sensitive to things that embarrass him.

Help her know right from wrong. Do not be shocked if she tells an untruth, but help her to learn to accept responsibility for her own actions. attitudes that can be incorporated into her daily



Source: Group Child Care Consultant Services. *Special needs adoption curriculum*. Chapel Hill, NC: Author.

Six to Seven Years

Physical Characteristics

Is vigorous, full of energy; has general restlessness.

Is clumsy; poor coordination. Is in an ugly duckling stage.

Toileting:

Rarely has accidents—may occur when emotionally upset or over-excited.

Sex:

Has marked awareness of sexual differences.

Investigate each other.

Engages in sex play and show.

May play doctor and hospital.

Begins to suppress masturbation.

Eating:

Has unpredictable preferences and strong refusals. Often develops a passion for peanut butter.

Uses fingers and talks with mouth full.

Has more colds, sore throats, and other diseases.

Should have been inoculated for chicken pox, measles, whooping cough, diphtheria, German measles, and mumps.

Mental Characteristics

Language:

May develop stuttering when under stress.

Wants all of everything—finds it difficult to make choices.

Begins to have organized, continuous memories; can read and write.

Implications for Parents

Accept accidents calmly—child is apt to be embarrassed.

The child will accept idea baby grows in womb.

These are attempts to gather information.

This is usually just curiosity.

Child needs honest, simple answers, given in a calm manner.

You are a model for good habits.

Be aware of disease symptoms. Ill health may result in crankiness.

Child needs plenty of rest and balanced meals.

Remember, the symptom is temporary—may disappear of own accord.

Do not offer excessive choices, but provide opportunities for making decisions.

Six to Seven Years

Social Characteristics

With adults:

Blames mother for anything that goes wrong.

Identifies more strongly with father.

Doesn't like being kissed in public.

Expands outside the family.

Considers teacher important.

With peers:

Friendships are unstable. Is sometimes unkind to peers.

Gives negative response often. Is a tattletale.

Must be a winner—changes rules to fit own needs.

Has no group loyalty.

In school, may develop problems if over-placed. Can't keep mind on work, fools around, whispers, and bothers other children.

When eating, makes meals difficult because of perpetual activity.

Feels school pressure, so breakfast most difficult meal. Is not a good meal finisher.

Emotional Characteristics

Feels insecure as result of drive toward independence.

Finds it difficult to accept criticism, blame, or punishment.

Is the center of his own world and his main concern—is boastful.

Generally is rigid, negative, demanding, unadaptable, and slow to respond; exhibits violent emotional extremes; tantrums reappear. If not winner, often makes accusations of cheating.

Moral Characteristics

Is very concerned with good and bad behavior—particularly as it affects his family and friends. Sometimes blames others for wrongdoing.

Implications for Parents

Help the child to see adults care about him. Do not attempt to replace parents.

Needs guidance in making and keeping friends.

Needs help in learning to be a good loser.

Allow children time for peer interaction.

Allow extra time for morning meals.

She may need time, leeway, or more chances.

The child will require patience and understanding.

While he's attempting self-identity, support drive for independence by providing opportunities to do things for himself.

Set reasonable limits, offer explanation of limits, and help the child keep within the limits. Be consistent. Avoid games that designate a winner.

Teach the child to be concerned and responsible for her own behavior and how to perfect it. Assure her that everyone makes mistakes. Teach simple repentance.

Seven to Eight Years

Physical Characteristics

Largemuscle:

Drives herself until exhausted.

Smallmuscle:

May have permanent pout on face.

Has minor accidents.

Loves pencils instead of crayons.
tion.

Sex:

Is less interested in sex—drop in sex play and experimentation. Can be very excited about new babies in family.

Eating:

Has less appetite.

In general:

Has fewer illnesses but may have colds of a long duration.

May develop nervous habits or assume awkward positions.

Mental Characteristics

Is eager for learning. Uses reflective, serious late thinking. Thoughts beginning to be based on logic, and she can solve more complex problems. Attention span is good.

Enjoys hobbies and skills. Likes to collect things and tell about things he has worked on such as projects, writings, and drawings.

Favors reality.
reality.

Likes to be challenged to work hard and to take time completing a task.
task.

Social Characteristics

With adults:

Will avoid and withdraw.

Has strong emotional responses to teacher—
may complain teacher unfair or mean.
Is often concerned that he will not do well.
Likes more responsibility and independence.

Implications for Parents

Distract child before she gets to the point of complete exhaustion.

He now has well-established hand-eye coordination.

Be patient with annoyances, and do not draw attention to awkwardness.

Ask many thought-provoking questions. Stimulate her thinking with open-ended stories, riddles, thinking games, discussions, etc. Give many opportunities for decision making and selecting what she would do in particular situations.

Encourage the pursuit of hobbies and interests.

Most stories and situations should deal with

Give challenges that are right for her level of ability. Allow plenty of time to accomplish a

Show understanding and concern.

Assign responsibility and tasks that he can carry out and then praise him for his efforts and accomplishment. Help him assume responsibility for wrongdoing.

Seven to Eight Years

Social Characteristics

With peers:

Participates in loosely-organized group play; concerned with herself and how other people treat her.

May fight or battle out problems.
Starts division of the sexes (girls play with girls, boys with boys).

School:

May fear being late. Has trouble on the play-ground; “kids are cheating” or “teacher picks on me” often said.

Emotional Characteristics

Complains a lot: “Nobody likes me,” or “I’m going to runaway.”

May not respond promptly or hear directions—may forget.

Is easily distracted.

May stay on the edge of the scene in an attempt to build a sense of self through observation.
Is attempting to control nervous habits but blinking, scowling, headaches, and dizziness appear.
Has visual fears—night, scary places, people.

Is less domineering and less determined to have his own way.

Dislikes criticism. Is eager for peer approval.
Wants to please peers and be like her age group.

Is more sensitive to his own and others’ feelings.
know
Is often self-critical and a perfectionist.
him.

Is often dreamy, absorbed, and withdrawn. More inhibited and cautious.

Is less impulsive and self-centered.

Implications for Parents

Provide peace and quiet.

Attempt to prevent conflicts before they get to fighting stage.

Help child see his interactions realistically.

She needs reasonable sympathy.

He may need reminding and checking.

She needs personal support and reassurance.

Continue to help the child develop social skills.

Give praise for positive behavior, such as waiting his turn, sharing, and giving other children a chance to express their ideas.

Build her confidence instead of criticizing, look for opportunities to give approval and affection. Accept her need for peer approval and her need to belong.

Offer love, patience, and sensitivity. Let him
he has progressed, and continue to encourage

Encourage her and give her self-confidence.
Accept moods and aloofness.

Encourage him to express himself and to turn his interests to others.

Eight to Nine Years

Physical Characteristics

Is busy, active, speedy. Has frequent accidents.

Makes faces.

Toileting:

May need to urinate in connection with disagreeable tasks.

Sex:

May handle genitals if worried. Tells dirty jokes—laughs, giggles. May peep at each other and parents. Wants more exact information about pregnancy and birth. May question father's part.

Eating:

Has good appetite; wolfs down food; belches spontaneously; may accept new foods.

In general:

Has improved health with a few short illnesses.

Mental Characteristics

Wants to know the reason for things.

Often overestimates her own ability.

Often cries if fails—"I never get anything right."

Social Characteristics

With adults:

Demands close understanding with mother.

With peers:

Makes new friends easily. Works at establishing good two-way relationships.

Enjoys school, doesn't like to miss school, and tends to talk more about school.

Develops close friend of own sex—separation of the sexes.

Considers clubs and groups important.

Implications for Parents

Continue to be available to answer questions.

Direct child toward attempting what she can accomplish, but still provide a challenge.

Stress what child has learned, not his end product.

Provide the opportunity for peer interaction not only on a personal level but also on a group and club basis.

Eight to Nine Years

Social Characteristics

Eating:

Is not as interested in family table conversation; will want to finish meal so she can go about her own business.

May become sensitive to killing of animals for food. feelings.

Emotional Characteristics

Has more “secrets.”

May be excessive in self criticism — tends to efforts dramatize everything; is very sensitive. Teach

Has fewer and more reasonable fears; may have some earlier tension patterns but will be less persistent.

May argue and resist requests and instructions unnecessary but will obey eventually. know”

Could want immediate (cash) reward.

Is usually affectionate, helpful, cheerful, emotions outgoing, and curious; but can also be rude, interest selfish, bossy, and demanding — variable.

Is sometimes giggly and silly.

Moral Characteristics

May experience guilt and shame.

Implications for Parents

Offer simple explanation for the killing of for food — remain understanding of his

Needs a locked box or drawer.

Praise, do not criticize. Encourage and let her know you see her progress.

that others also make mistakes.

Keep directions simple, and avoid urging in order to avoid the “I already responses.

Guide him toward overcoming negative and developing positive ways of showing and enthusiasm.

Let him enjoy humor when appropriate, and be patient with giggling.

Do not compare one child to another. Praise and build self-confidence.

Nine to Ten Years

Physical Characteristics

Active, rough and tumble play is normal, interest, especially for boys. Great interest in team games.

Has good body control. Is interested in such as developing strength, skill, and speed.

Likes more complicated crafts and shop work.

Girls are beginning to develop faster than boys.

Mental Characteristics

Has definite interests and lively curiosity; seeks use the facts. Capable of prolonged interest.

Can do more abstract thinking and reasoning think, on his own. Likes to memorize.

Individual differences become more marked.

Likes reading, writing, and using books and and references.
child.

Likes to collect things.

Social Characteristics

Boys and girls differ in personalities, characteristics, and interests. Is very group- and have of club-oriented, but is always with the same sex.

Sometimes silly within the group.

Boys, especially, begin to test and exercise a reasonable great deal of independence.

Friends and activities absorb her. Likes group who may adventures and cooperative play.

Emotional Characteristics

Worries.

May have some behavior problems, especially accept if he is not accepted by others.
his behavior.

Implications for Parents

Provide many activities to sustain
Include team games.

Give opportunities for developing skills, handicrafts and active games.

Include many activities in which she uses her hands and has an opportunity to use small muscle skills.

Do not compare boys to girls or force them to interact.

Give specific information and facts, and children's interests.

Do not give all the answers; allow time to meditate, and discuss.

Respect and be aware of individual differences when making assignments and giving responsibilities.

Provide opportunities for reading, writing, checking references; however, do not tire the child.

Help with hobbies.

Accept natural separation of boys and
Recognize and support the need they acceptance from the peer group.

Be warm but firm. Establish and enforce limits.

Encourage friendships, and help children have few or no friends.

Use positive guidance. Let him know you him, even though you do not approve of

Nine to Ten Years

Emotional Characteristics

Is becoming very independent, dependable, exercising his and trustworthy.
Praise these

Moral Characteristics

Is very conscious of being fair. Is highly with her. competitive. Argues over fairness. but help

Has difficulty admitting that he behaved badly wrong- or has made a mistake, but is becoming more responsibility capable of accepting his own failures and mistakes—takes responsibility for his actions.

Is clearly acquiring a conscience.

Is well aware of right and wrong; wants to do often. right, but sometimes overreacts or rebels against an overly-strict conscience.

Implications for Parents

Provide many experiences for independence and dependability.

positive characteristics.

Be fair in dealings and relationships
Give her opportunities for competing,

her learn to be a good loser.

Do not ridicule him or tear him down for doings, but help him learn to take for his own behavior.

Express your love and support for her



Ten to Eleven Years

Physical Characteristics

Girls are concerned with style. Boys are more active and rough.

Girls may begin rapid increase in weight.

nutrition. Has motor skills well in hand.

Has 14 to 16 permanent teeth.

Mental Characteristics

Is alert, poised. Begins to use fractions. reasoning. Argues logically.

Likes to read.

interests. Has rather short interest span.

Begins to show talents.

Concerned with facts.

Social Characteristics

May develop hero worship.

Is affectionate with parents. Finds mother child. all-important. Has great pride in father.

Is highly selective in friendship—may have one best friend.

Important to be “in” with the gang.

Emotional Characteristics

Is casual and relaxed.

Likes privacy.

Girls maturing faster than boys.

Seldom cries but may cry in anger.

Not an angry age. Anger when it comes is violent and immediate.

Main worry concerns school and peer relationships.

Moral Characteristics

Has a strong sense of justice and a strict moral code.

More concerned with what is wrong than with what is right.

Implications for Parents

Help with

Use

Provide books geared to

Provide lessons for music, art, or other interests.

Good time to discuss drug abuse.

Spend time with

Provide locked cupboard or box for “treasures” and a “Keep Out” sign for door.

Eleven to Twelve Years

Physical Characteristics

Girls begin to show secondary sex characteristics.
menstruation. Boys are ahead of girls in endurance.

Is increasingly aware of body. Has increase in appetite but muscle growth.

May show self-consciousness about learning new initiative, skills.

Implications for parents

Explain

Rapid growth may mean large less energy.

Let child take

Mental Characteristics

Challenges adult knowledge. Has increased ability to use logic.

May have interest in earning money.

Is critical of own artistic products.

Is interested in world and community.

This may be a good time for a paper route or other job.

The child may like to participate in community drives.

Social Characteristics

Is critical of adults—obnoxious to live with. Strives for unreasonable independence.

May be quiet around strange adults.

Has intense interest in teams and organized, sports or competitive games. Considers membership in clubs important.

Provide for organized activities in clubs.

Emotional Characteristics

Anger is very common. Often is moody.

Resents being told what to do. Rebels at routines.

Dramatizes and exaggerates his expressions (“worst mother in the world”).

Many fears, many worries, many tears.

Let child help set the rules and help decide on own responsibilities.

Be understanding.

Moral Characteristics

Has strong urge to conform to group morals.

Twelve to Fifteen Years

Physical Characteristics

Onset of adolescence is usually accompanied by more food. sudden and rapid increases in height, weight, and size.

Girl has gradually reached physical and sexual not to maturity.

Boy is beginning physical and sexual maturity. Development is rapid.

Acne.

treat acne. Physical strength increases greatly.

Concerned with appearance.

Mental Characteristics

Thrives on arguments and discussions.

arguments. Ability to memorize usually increases.

Able to think logically about verbal propositions.

Developing the ability to introspect and probe are truly into her own thinking.

Able to plan realistically for the future.

Idealism.

Reads a great deal.

Social Characteristics

Withdraws from parents who are “old-fashioned.”

Boy usually resists any show of affection.

Usually feels parents are too restraining.

Needs less family companionship and

interaction. Rebels. Strives to be

independent.

Has less intense friendships with those of the same sex.

Usually has a whole gang of friends.

Implications for Parents

Will need

Explain to child what is happening—worry if not like all the rest.

May need special diet/medication to

Don't let discussions become

Don't put down her ideas—for they hers—but do help her to see the reality.

Help this planning.

Needs to feel important in world—to know they have something to believe in, a cause to fight for.

Don't feel hurt or take it personally. Remember you still are important but not in the same way as when they are children.

Twelve to Fifteen Years

Social Characteristics

Implications for Parents

Girls show more interest in opposite sex than do boys.

Annoyed by younger siblings.

Emotional Characteristics

Sulking is common.

Fewer anger responses but main ones are verbal retort and leaving the room.

More worried than fearful about grades, appearance, and popularity.

Withdrawn and

introspective.

Moral Characteristics

Knows right and wrong.

Tries to weigh alternatives and arrive at

Provide opportunities. decisions by himself.

Is concerned about fair treatment of

minorities. Is usually or reasonably

thoughtful.

Is unlikely to lie, but doesn't always tell the whole truth.

Source: Group Child Care Consultant Services. Special needs adoption curriculum. Chapel Hill, NC: Author.

Sixteen to Nineteen Years

Physical Characteristics

Has essentially completed physical maturity.

less food. Physical features are shaped and refined.

Mental Characteristics

May need some special testing to help determine
Encourage future educational plans.

If she reads, tends to read

exhaustively. Prefers the books and

magazines of adults.

Social Characteristics

Can maintain friendly relations with parents.

Sometimes feels that parents are too “interested.”

May date actively — varies greatly in maturity.
Some are uncomfortable with opposite sex
while others talk of marriage.

Enjoys activities with friends of the
opposite sex. Usually has many friends
and few confidants.

May have a job.

Emotional Characteristics

Worried about future — what to do.

listen. Anger responses less frequent.

Still worries about appearance.

Moral Characteristics

Knows what is right and wrong, but doesn't
always do right.

Thinks more like his parents.

Takes blame well and is not likely to
blame others without just cause.

Wants to find the meaning of life
and feel secure in it.

Implications for Parents

Needs

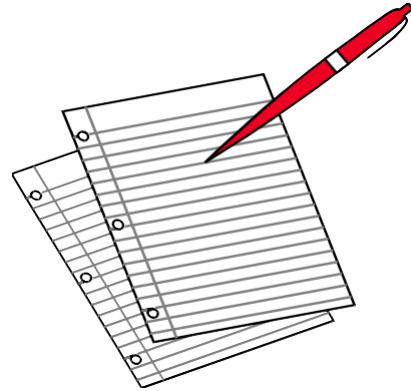
Help arrange testing at school.
talking about the future.

Try not to pry.

Be available to talk *and*

Information from Birth and Foster Parents

Birth and foster parents are an excellent resource for information about the child. Some ideas of information to get from them include:



- Nicknames
- Endearing qualities
- Favorite foods
- Favorite songs
- Times the child seems happiest
- Things that upset the child
- Things the child is afraid of
- Stories about the child
- Favorite toys
- Pictures of the family, including date taken/child's age at the time
- Pictures of the home, including date taken and address
- Pictures of pets, including date taken and name of pet
- Videos of the child and family
- Audio/cassette tapes with each member of the family talking to the child
- Notes or letters from the foster family members
- Artwork made by the child
- A favorite blanket or pillow
- Illnesses...what they were and when the child had them
- School records and achievements
- Baby teeth, locks of hair
- Names and pictures of friends
- Mementos from trips taken with the foster family

Stages of Grief

(As described by Elizabeth Kübler-Ross)

Shock/Denial

This stage is temporary and usually short-lived, lasting a few hours or a few days. The worker must assess the parent's reactions over time to differentiate the normal absence of emotion during the shock/denial stage from the emotional remoteness of a parent who has not attached to the child.

Anger/Protest

It is important for workers to recognize this as a normal response to loss, a stage that the parents are working through. Workers should not label the person as “emotionally disturbed” or see him or her as generally ill tempered. The worker must remember that it is typical human behavior to initially blame others rather than face our own inadequacies.

Bargaining

Often, this is the point when workers see renewed investment in the services agreement activities on the part of family members. This is the people's attempt to regain some sense of control over their environment. They are trying to negotiate an agreement that will allow things to return to the way they were. This is generally only a surface-level change. Again, these stages are temporary, and workers should expect these types of responses and see them as a normal part of the grieving process.

Depression

If the person's depressive symptoms remain present for more than two weeks, represent a change from their previous functioning, and are causing significant impairment in their ability to function at home or at work, or if the person expresses thoughts of hurting or killing himself or herself, the worker must consider the need for mental health intervention as soon as possible.

Acceptance/Resolution

In other situations, displaying behaviors suggesting resolution is usually a positive sign. But it is inappropriate for a family to accept the loss of a child if the services agreement involves reunification. This usually means that our intervention activities have not been sufficient to strengthen attachment or to enhance motivation to reunite the family. If the family grieves and then comes to accept the loss of the child, it becomes much more difficult to reconnect them. Continual contact between children and parents is essential.

Yearning

Maciejewski & colleagues (2007) did a study in which they found that in addition to the feelings above, most grieving people also experience yearning. Grieving participants in the study described yearning as a sense of heartache. Longing for the lost person—sometimes called “pangs of grief”—is a dominant emotion during the grieving process.

NC KIDS INFORMATION GUIDE for Professionals

What is NC Kids?

NC Kids is North Carolina's statewide adoption exchange. We are a statewide, comprehensive resource for children, families and agencies where we answer questions directly, through our hotline, general email account and adoptuskids.org. NC Kids connects waiting children with prospective adoptive families. Our contact information is:

NC Kids – NC Division of Social Services
Raleigh, NC 27699-2445

1-877-625-4371 (Toll-Free Hotline) 820 South Boylan Avenue
1-877-625-4374 (Toll-Free Fax) 2445 Mail Service Center
Email: <mailto:nc.kids@dhhs.nc.gov>

How does NC Kids work?

All children who have a permanent plan of adoption, are legally free for adoption, and do not have an identified adoptive placement are required by policy to be actively registered with NC Kids. All children who meet the above-mentioned criteria should be registered within 30 days following legal clearance. The NC Kids registration packet includes the registration form (1820), a strengths-based child profile and an up to day photo. The NC Kids Consultant will use this information to create a profile and maintain information regarding the child or sibling group on www.adoptuskids.org and the NC Kids website housed on the Division's website. We respond to all inquiries and screen potential adoptive families before forwarding their information to the child's social worker.

To register an approved family, a current approved Pre-Placement Assessment (PPA) and the DSS-1821 Family Registration form is sent to NC Kids and maintained in the NC Kids database for matching purposes.

When NC Kids receives a referral for a waiting child or sibling group, the assigned Consultant will seek to match the child with a family who has the strengths and attributes to meet the child's specific needs. We can then help facilitate contact between the child's agency and the family (or family's agency) if the family is determined to be a potential match.

Additional ways our Consultants assist potential adoptive families and county DSS social workers:

- Providing information and education to families interested in adopting children through the foster care system, including how to obtain a Pre-Placement Assessment
- Answering questions from interested families and their agencies about waiting children
- Promoting county adoption events on www.adoptnckids.org website
- Utilizing widespread recruitment efforts including printed media, Heart Gallery photo displays, Adoption Perspectives newsletter and other media sources when possible
- Serving as an adoption resource at the Division of Social Services for County DSS social workers

What forms do I use to register a waiting child or approved adoptive family with NC Kids?

For legally free children...

Workers can download the Child Registration form DSS-1820 from the DHHS forms website (see web address below) and send it to NC Kids with a current, quality photograph of the child and a Child Profile. Profiles will not be provided to families, but can be provided to their agency social

worker. Consultants will use information in the child's profile for matching and registration purposes. Registration updates are required every 12 months.

For children in legal-risk status...

Information on children who are in legal risk status can be submitted with the DSS-5225 form. Although they cannot be added to the public website, NC Kids can do an internal search on the adoptive parent database and provide workers with a list of potential families with approved PPA's.

For children with an approved exemption...

If a child is legally free and 1) has an identified adoptive placement, or 2) is undergoing a diagnostic evaluation, or 3) is receiving mental health or medical treatment AND has documentation from their doctor or therapist that adoption is not in their best interest at this time, then social workers should submit the NC Kids Registration Exemption form DSS-5303. Per policy, this form must be submitted to NC Kids within 30 days of legal clearance for adoption. These are valid for up to six months, so we encourage regular review of children with exempt status. Your Consultant will contact you regularly for updates, but you are also encouraged to contact us with any changes in the child's status. Exemptions will not be approved for more than twelve consecutive months.

For pre-adoptive families....

For families with an approved Pre-Placement Assessment, families or their social workers can send a copy of their current PPA and the Family Registration form DSS-1821. The family will be added to the NC Kids database. When the family is identified as a potential match for a child, the family and/or their social worker will be contacted to see if they are interested in the identified child, and if they are, their PPA will be forwarded to that child's worker for consideration and follow-up.

All DSS forms can be obtained at:

<https://www2.ncdhhs.gov/info/olm/forms/dss/>

For additional assistance:

Erin Baluyot
Interim Adoption Services Program Manager
919-527-6369
Erin.Baluyot@dhhs.nc.gov

Shirley Williams
NC Kids Consultant
919-527-6404
Shirley.Williams@dhhs.nc.gov
Alamance-McDowell (except Dare, Franklin and Guilford)

Mary Mackins
NC Kids Consultant
919-527-6287
Mary.Mackins@dhhs.nc.gov
Mecklenburg-Yancey (plus Dare, Franklin and Guilford)

CONFIDENTIAL INTERMEDIARY SERVICES INFORMATION GUIDE

For Professionals

What is a Confidential Intermediary?

A Confidential Intermediary (CI) is a licensed child-placing agency that may act as a third party to facilitate the sharing of adoption information between a biological parent, an adoptee and/or other eligible family members.

What are the eligibility requirements to apply for CI Services?

- the adoption must be finalized and indexed in North Carolina
- the adoptee must be 18 years old

Who is eligible to apply for CI Services?

- a biological parent
- an adult adoptee
- an adult biological sibling of an adult adoptee
- an adult biological half-sibling of an adult adoptee
- an adult family member of a deceased biological parent
- an adult family member of a deceased adoptee
- an adoptive parent of a minor adoptee may request CI services solely to request updated non-identifying information from the birth parent(s)

For the purposes of CI services the definition of family member includes spouse, child, stepchild, parent, stepparent, grandparent or grandchild

Who is entitled to non-identifying information?

Any adoptive parent, an adoptee who has reached the age of eighteen (18) or a minor adoptee who is a parent or an expectant parent.

As of October 1, 2010 any individual who is eligible to participate in CI services is also entitled to non-identifying information.

How does an individual initiate the process?

Those requesting CI services will typically begin their search by making a written request to the Division of Social Services for confirmation of: 1) the approving agency and 2) the county of jurisdiction. Included in the written request should be a copy of the searchee's photo ID, the searchee's adopted name, and their adoptive parent(s) name(s). The Division will verify if the approving agency is providing CI services and, if it is, will instruct the individual to contact that agency to begin the application process.

If the approving agency is not providing CI services the Division will provide the requestor with a list of agencies who have agreed to conduct CI services for any eligible applicant and the individual may select the agency of their choice.

Is the individual initiating the search limited to using the agency that approved the adoption?

No, a searchee may use any North Carolina licensed child-placing agency to conduct a CI search on their behalf.

What steps should an agency take to complete the screening process?

An individual may submit their request for a search in person, in writing or by phone. Once a notarized Application for Confidential Intermediary Services (DSS-5031) is submitted, the agency must verify the identity/eligibility of the applicant and provide the applicant with a written copy of the fee policy. For safety purposes the CI service provider has the discretion to evaluate and deny any potential client. Criminal background checks may be used in determining suitability.

How are fees determined?

Participating agencies set their own fees based on the cost necessitated to perform searches, share information and facilitate meetings. Each agency has the discretion to waive or amend their fees to meet the needs of indigent or low-income clients.

The client has been approved and the CI provider has accepted the case, now what?

The client and the agency should complete the Confidential Intermediary Agreement (DSS-5030) wherein the agency will describe in detail the duties they will perform and the time frame in which the duties will be completed. The client must also complete Consent to Release of Information and/or Contact (DSS-5032) and a Release of Liability and Agreement to Hold Harmless (DSS-5033).

Is the consent of a living biological parent(s) required before a CI can initiate a search for an adult sibling, half-sibling or an adult family member of a deceased adoptee or a deceased biological parent?

Yes, written consent of a living biological parent is required before a search can be initiated and before any identifying information can be shared with a sibling or family member.

What adoption records can be accessed by a CI provider in order to conduct a search?

If the agency providing CI services is the agency that approved the adoption they may access their own in-house DSS records. If the DSS records are missing or incomplete the agency may make a written request of the Division of Social Services for a copy of the indexed file.

A written request for an adoption file may be directed to the approving agency and/or the Division for those agencies conducting CI services in which they were not the approving agency. Signed

copies of the Confidential Intermediary Application and the Confidential Intermediary Agreement must be attached to the request.

All records shared between agencies should be sent via certified mail.

What other resources can a CI provider access to assist with a search?

Use of certain public records such as DMV records, tax records, obituaries, phone books and internet search engines may be used to conduct a search. Also, CI service providers may retain the services of a private investigator to conduct a search on behalf of an agency.

Are there any limits to the resources a CI provider may access to assist with a search?

Any system protected by either federal or state confidentiality laws may not be accessed for the purposes of conducting a CI search. This includes Child Support Enforcement records or Child Protective Services records. However, CPS records may be used if they are included in the adoption file.

How to proceed once a party being sought has been successfully located:

The CI should inform the party being sought who initiated the search and their desired outcome (i.e. written or telephone communication, face-to-face meeting, update of non-identifying information). The decision to comply with a searchee's request is left solely in the discretion of the party being sought. Should they choose to comply both the Consent to Release Of Information and/or Contact (DSS-5032) and a Release of Liability and Agreement to Hold Harmless (DSS-5033) must be obtained before the CI may share any information. CI-facilitated meetings between parties should be scheduled within thirty (30) days of the signed consents of all parties.

If the party being sought decides that they do not wish to participate in the sharing of identifying information the individual who initiated the search should be informed and the case should be closed. However, nothing precludes a CI from inquiring of a birth parent if they would be willing to provide updated non-identifying information.

What information can be shared once it has been determined that the individual being sought is deceased?

If a CI determines that the person who is the subject of a search is deceased, the agency may obtain a copy of the death certificate and deliver it to the person who requested the service.

The agency should make provisions to include the cost of obtaining a death certificate in their fee policy.

What are the requirements for keeping an individual informed about the status of a search?

A CI should send a written report to the individual who initiated the search informing them of the efforts taken and any subsequent findings within ninety (90) days of the signed CI Agreement. The

client and the CI may agree to extend the time of the search, amend the plan, renegotiate fees or terminate the service.

A searchee has inquired about obtaining a copy of an adoption file, what are their options?

Should an individual seek the disclosure of an adoption record they must petition the Court in the county where the adoption was finalized. A hearing will be set and a judge will determine if the contents of the adoption file will be released to the petitioner.

How should CI services be coded (for DSS providers)?

Intake and inquiries should be coded on the Day Sheet (DSS-4263) as 017, program code "N"

Completed Applications (DSS-5031) and Agreements (DSS-5030) should be coded on the Day Sheet as 018, program code "N"

All time spent during the search process for cases with an I.D. # should also be coded on the Day Sheet as 018, program code "N"

Who is the contact person for CI related questions?

Rose Pulley, Administrative Associate II
820 South Boylan Avenue, 2425 MSC
Raleigh, NC 27699
(919)527-6372
Rose.Pulley@dhhs.nc.gov

Erin Baluyot, Interim Adoption Services Program Manager
Erin.Baluyot@dhhs.nc.gov
(919)527-6369

Glossary

application	An application is a written request for services completed by interested persons to an agency to evaluate them as prospective adoptive parents.
affidavit of parentage	This document attests to the names, last known addresses, and marital status of the child's birth parents or possible birth parents.
agency placement	This is a placement where the agency has legal custody of a child and is responsible for the placement of the child in an adoptive home.
amendment to birth certificate	When the decree of adoption has been issued, the original birth certificate is sealed, and a new birth certificate is issued which lists the adoptive parents as "parents" and contains no reference to the birth parents. It can also be used to change the name of the child, but all other original information must remain the same.
consent	The act of releasing a child for adoption by the birth parents, the agency that has custody of the child, a guardian or the court.
child's consent	Consent signed by a child age 12 or older approving his/her adoption.
child summary	A written assessment of the physical, mental, and emotional condition of the child, including the child's strengths, needs, and non-identifying history.
confidential intermediary	A public or private child placing agency acting on behalf of the birth parent, adoptive parent, adult adoptee or adult linear descendents as a go between to facilitate contact or share identifying information
disruption	Adoption disruption is a term used to describe the termination of an adoptive placement after actual placement of a child with the adoptive family but before finalization of the legal adoption process. The decision to stop the adoption process should be arrived at between the parents and the worker and, when feasible, the child. The decision must be made slowly and carefully, only after all alternatives and resources have been tried. Families considering disruption are distressed and in crisis and are likely to have difficulty in evaluating the situation objectively.
dissolution	Adoption dissolution is a term used to describe the termination of an adoptive placement after the adoption is finalized. This is a much more serious occurrence than a disruption since not

	only is a placement ending, but the legal rights of the child and responsibilities of the adoptive parents must be addressed.
direct placement	An adoptive placement facilitated by the biological parents. The parent voluntarily consents to legal custody directly to the adoptive family.
Decree of adoption	A legal order that finalizes the adoption. It gives the adoptee all rights of a biological child, and it severs the relationship and responsibilities of the former parents, except that of past-due child support.
foster-to-adopt	This kind of adoption occurs when a prospective adoptive family chooses to foster prior to adoption.
kinship adoption	An adoption where the adoptive parents are biologically related to the child to be adopted. Workers should help families consider the conflicts that might arise between the birth parents and the kinship adoptive parents and should also help the child deal with feelings of divided loyalties. Kinship adoption helps to preserve the child's sense of identity and family history.
legal clearance	The process of making a child legally free for adoption through voluntary surrender of the child, by signing consent or relinquishment documents or through a court decision to terminate parental rights.
legal-risk placement	This involves the placement of a child with a prospective adoptive family when a child is not yet legally cleared for adoption. The family is either licensed as a foster home or approved by court order, with parents who understand that the placement is not secure.
legal guardianship	A judicially created relationship between a child and a caretaker that is intended to be permanent and self-sustaining as evidenced by the transfer to the caretaker parental rights with respect to the child's protection, education, care, and control, custody and decision making. Parental rights do not have to be terminated; the child can maintain legal rights to the birth parents' inheritance, and the guardian is not subject to supervision by an agency. Guardians are not eligible for the foster care board rate or adoption subsidy. If a guardian decides to adopt, he or she may be eligible for the subsidy.
legal custody	Legal custody is awarded by a judge to a relative, foster parent, or other adult person deemed suitable by the court. Legal custody has most of the same advantages and disadvantages as legal guardianship, except custody may be terminated "on the basis of a change in circumstances, regardless of the fitness of the guardian." The court defines the specific rights and responsibilities of a legal custodian. The custodian must show the court order to prove his or her right to act in a parental role.

life book	A photographic and diary representation of the child’s life designed to help the child make sense of his unique background and history before and during his or her experience in foster care and adoption. The life book includes birth parents, other relatives, birthplace and date, etc. and can be put together by social workers, foster parents, or adoptive parents with the child.
TIPS-MAPP	This is the acronym for Trauma Informed Partnering for the Safety and Permanence-Model Approach to Partnerships in Parenting. It is a 30-hour program for foster and adoptive parents designed to assist families in making decisions about their ability, readiness, and willingness to foster or adopt. If a family is unable to attend TIPS-MAPP, an individualized program called Deciding Together is also used to help families make informed decisions about fostering or adopting.
matching	The process of linking preferences of prospective adoptive families and waiting children to find suitable placement resources. Potential adoptive parents review the information about available children and assess their strengths and needs in relation to the strengths and needs of those children.
NC Kids	NC Kids is the adoption resource exchange for North Carolina. It is a system of exchanging information among local agencies about children available for adoption and prospective adoptive parents. NC Kids relies on print, radio, television and internet recruitment
order for the report to the court	An order issued by the Clerk of Superior Court requesting that an adoption agency make an assessment of a prospective adoptive family to assist the court to determine if the proposed adoption of the minor by the petitioner is in the child’s best interest
permanency planning family	Foster families are recruited and trained to provide foster care and work with the team toward reunification, but they are willing to consider committing to the child permanently through adoption if reunification is not possible.
petition for adoption	A legal document through which prospective parents request the court’s permission to adopt a specific child. This can be done on the form DSS-1800.
placement	Transfer of physical custody of a minor to the selected prospective adoptive parent.
post-adoption services	Services provided subsequent to legal finalization of the adoption to support and sustain the adoptive placement. Post-adoption services involve interviewing, counseling, and providing clinical and consultative services for the purpose of

	ensuring permanence of placement. Such services may be designed to treat problems that developed before or after the date of the decree of adoption. Post-adoption consultation is not a continuation of supervision but is given as needed and requested by any of the parties involved in adoption.
post-placement services	Services that are provided after the child's placement with his or her adoptive family but before the decree of adoption is issued. The goal of these services is to facilitate the integration of the child and family and the resolution of problems that they may encounter.
preplacement assessment	A written report containing the findings of the social worker who has met on several occasions with the prospective adoptive parents, has visited their home, and who has investigated the health, medical, criminal, family and home background of the adoptive parents. The purpose of the report is to help the court determine whether the adoptive parents are suitable to adopt a child, based on the criteria that have been established by state law.
recruitment plan	An agency strategy for locating placement resources reflective of child in its custody. Within 30 days of a child becoming legally clear for adoption, the agency must develop a child-specific recruitment plan to locate potential adoptive parents. This does not apply in situations where a potential adoptive family has already been identified, as when a foster child is being adopted by the family with whom the child already lives.
relinquishment	The voluntary surrender of a minor to an agency for the purpose of adoption.
report to the court	The written report to the court describing any changes since the preplacement agreement and any concerns about the adoption. It includes an assessment of the relationship between the child and the adoptive parents and an update on the physical, mental, and emotional condition of the child. It includes a recommendation as to whether the adoption should be approved.
review by adoption committee	An adoption committee includes a minimum of three people (a manager in children's services, the child's social worker, and the adoption worker) who meet to select a family whose strengths meet the needs of the child or to approve a preplacement assessment of a prospective adoptive family.
visitation	Visits between waiting child and prospective adoptive parents.

Life Books

What Goes in the Life Book?

A life book is both a tool and a process which can be used to assist a child in gaining information and dealing with emotions in reference to his or her experiences. This record of facts and feelings should help the child to know not only the “how” and “why” of what happened, but it should also enable him or her to fill in and heal the holes and scars that result. The life book



construction should be an experience in which the worker joins with the child in an exploration of historic events and their effects. This is not just a collection of data but an opportunity to help the child grieve over the losses and begin to heal in preparation for making new attachments.

A. Things that should be included

1. Child's birth information- a copy or a certified birth certificate or date of birth, time of birth, location (where child was born), weight at time of birth, and length at time of birth
2. Child's family tree- genogram, dates of parents' births, locations of parents' births, physical description of parents, educational/employment experiences of parents, special health information about parents, statements of reason for placement away from parents, number of siblings of parents, number and ages of other children of the parents
3. Foster homes and relatives' homes where the child has lived names and addresses of foster families, dates of placements and moves from placements, reasons for moves
4. List of schools and day care centers attended by the child
5. Child's medical information, especially any special medical experiences
6. Pictures of the child at various ages
7. Names and pictures of siblings
8. Names and pictures of social workers and agencies involved with the family
9. Letters and mementos from parents, relatives, or significant others

B. Other helpful information

1. Pictures- pictures of the birth parents, the birth parents' home, friends, foster families, pets, schools, and special occasions (birthdays, graduation, Christmas, vacation, awards, etc.) If actual pictures are not available, (e.g. Picture of birth mom), the child might select a picture from magazines that he thinks looks like his mother. This should not take the place of an honest effort to obtain real pictures.
2. Drawings by the child
3. Comments by the child regarding drawings or feelings

4. Child's achievements- school, church, athletics, hobbies, activities, developmental milestones
5. Report cards- teachers' comments, samples of school work
6. Stories from foster parents and social workers
7. Anecdotes- funny occasions, a scary time, an important experience, jokes
8. Friends' comments about the child
9. Health and medical information- process of dealing with loss, separation and attachment, and past abuse; therapists' names; frequency and duration of therapy; therapy goals; correspondences; medical information; immunizations; diseases; allergies; medical history of birth family

C. Other Items

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

Source: North Carolina Division of Social Services. (1998). *What goes into the life book?* [On-line].
<<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/appendixc.htm#TopOfPage>>.

The Adoption Process

Adoptive Parent Process

1. **Initial Application** – *each county has a form that interested individuals must complete order to begin the process of being approved as an adoptive parent.*
 - a. prospective adoptive parents
 - b. no mandated time
 - c. county application
2. **TIPS-MAPP Training** – *Trauma Informed Partnering for Safety and Permanence-Model Approach to Partnerships in Parenting. This tool provides an opportunity for families to identify both their strengths and needs for adopting and gives social workers and prospective adoptive families a means for mutually assessing the parents' abilities and readiness to participate in the adoption program. It can occur before or as part of the preplacement assessment. *TIPS-MAPP training is recommended though not required for adoptive parents.*
 - a. prospective adoptive parents; TIPS-MAPP leader
 - b. prior to preplacement assessment
 - c. none

Ch. VI, Section 1301, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

3. **Preplacement Assessment** – *this is the total collection of information designed to document and consolidate the preparation and selection process for each adoptive family. It must be completed prior to and included as part of the Petition to Adopt.*
 - a. DSS
 - b. Within 90 days of request
 - c. no specific form, but must follow guidelines in G.S. 48-3-301

Ch. VI, Section 1301, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

4. **Criminal Records Check** – *this is a basic requirement for the approval of a prospective adoptive parent. All persons ages 18 and older who reside in the home must also have a thorough criminal records check. This process must be initiated as part of the preplacement assessment and results are to put in the adoption record. State statutes give the county DSS Directors the authority to determine how and when a person's criminal history affects their application to become an adoptive parent. Therefore, if the county DSS director (typically upon the recommendation of the agency's adoption committee) has approved the preplacement assessment, which included the criminal history check, the placement is not in violation of ASFA.*
 - a. DSS with state and federal law enforcement
 - b. Prior to placement of child with the family
 - c. State and federal forms

Chapter VI, Section 1302, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

5. **NC Kids**—NC Kids is the adoption exchange for North Carolina. It is a system of exchanging information among local agencies about children available for adoption and adoptive parents with an approved preplacement assessment.
 - a. agency social worker
 - b. after completion of preplacement assessment and approval of family
 - c. DSS 1821 – Family Registration Form

Chapter VI, Section 1304, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

6. **Matching**—*if a prospective adoptive family is not currently caring for a child whom they are interested in adopting, social workers will use available resources (NC Kids) to match a child with that prospective family based on the strengths and needs of both the child and the family.*
7. **Review by Adoption Committee**—*With reference to parents, the purpose of the Adoption Committee is to confirm the adoptive placement with a family with whom the child presently resides or adoption by a family already selected with whom the child has significant attachments. The adoption committee also approves the preplacement assessment of the family.*
 - a. DSS
 - b. As soon as one family is identified as a possible adoptive placement for the child and/or whenever the preplacement assessment is completed by the social worker.
 - c. Suggested guide in Chapter VI appendix

Ch. VI, Section 1301, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

In foster-to-adopt cases, the child will already be placed with the family and the preplacement visits and placement will have already occurred.

8. **Preplacement Visits**—*all parties, including foster parents, the adopting parents, the child, and the child's social worker are involved in planning the preplacement visits. Visits should take into consideration the needs of each particular child and be well thought out and outlined so that child, his/her worker, the prospective adoptive parents and their social worker, and the child's foster parents know what is being planned and the general timing of the various visits.*
 - a. social worker, foster parents, adoptive parents, and the child
 - b. as long as needed to successfully transition the child
 - c. Out of Home Services Agreement/Case Documentation

Ch. VI, Section 1301, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

9. **Placement**— *during the preplacement period a mutual decision about the actual placement date will be made with the adoptive family and the agency. (Placement can occur any time before the Order for Report to the Court.)*
- a. DSS or licensed adoption agency
 - b. As soon as the child is ready following a period of preplacement visits
 - c. DSS 5094 – Status Change Form

Ch. VI, Section 1301, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

10. **Petition for Adoption of a Minor Child**— *the formal request to the Court of Adoptions which initiates the legal adoption proceeding in order to legally establish the parent-child relationship.*

- a. prospective adoptive parents (or their attorney)
- b. No time frame
- c. DSS 1800 – Petition for Adoption of a Minor Child
DSS 5162 – Petition for Adoption of a Minor Child (stepparent)
Or in some other form drawn up by an attorney that includes information required under G.S. 48-2-304

Ch. VI, Section 1302, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

11. **Order for Report to the Court**— *when a Petition for Adoption of a child is filed, the court shall order the agency (that placed the minor or made the preplacement assessment) to make a report to the court to determine if the proposed adoption of the minor by the petitioner is in the child's best interest.*

- a. Clerk of Court
- b. Within 10 days of Petition for Adoption is filed
- c. DSS 1807 – Order for Report on Proposed Adoption

Ch. VI, Section 1302, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

12. **Report to the Court**— *The agency provides a written report to the court describing any changes since the preplacement assessment, an assessment of the relationship between the child and the adoptive parents, an update on the physical, mental, and emotional condition of the child, and a recommendation as to whether the adoption should be approved. The agency has 60 days from the time it receives the Order for the Report to the Court in which to provide to the court its findings and recommendation.*

1. DSS
2. Within 60 days after delivery of the Order for Report to the Court
3. DSS 1808 – Report on Proposed Adoption
4. DSS 1811 – Medical Examination as Part of Report to the Court

Ch. VI, Section 1302, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

13. **Adoption Assistance Agreement**— *as part of the placement process, the possibility and availability for adoption subsidy for the child being considered shall be discussed with the adoptive parents. The*

Adoption Assistance Agreement is signed by the adoptive parents after the placement of the child with his adoptive family and before the Decree of Adoption is issued

- a. DSS
- b. Prior to Decree of Adoption
- c. DSS 5012-- Adoption Assistance Eligibility Checklist (Revised 8/2018)
DSS 5013 – Adoption Assistance Agreement (Revised 8/2018)
DSS 5095
DSS 5112
DSS 5113
DSS 5145 – Application for Reimbursement on Non-Recurring Adoption Costs
DSS 5715

Ch. XIII, Section 1600, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

14. Decree of Adoption – *legally establishes the relationship of parent and child between the petitioner and individual being adopted. Adoption entitles the child to inherit real and personal property from the adoptive parents in accordance with the statutes of descent and distribution.*

- a. Clerk of Court
- b. 90 days after Petition for Adoption has been filed unless waived by the court
- c. DSS 1814 – Decree of Adoption

Ch. VI, Section 1302, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

Child Process

1. **Legal Clearance** – *the first legal steps necessary to clear the child for adoption. Legal clearance can occur two ways:*

➤ **Termination of Parental Rights (TPR)** – *petitions filed with the Clerk of Superior Court to terminate the parental rights of the parent or parents whose consents have not been obtained.*

➤ **Consents and Relinquishments** –

❖ *“Consent” means voluntary surrender of a child for adoption by parent or guardian in a direct or independent placement.*

❖ *The term “consent” is also used when an agency has received a relinquishment from a parent or guardian and consents to the placement of a child in an adoptive home. Further, a child 12 or more years of age must execute a “consent” for adoption, except that such consent may be waived by the court upon finding that it is not in the child’s best interest to require consent.*

❖ *“Relinquishment” is the voluntary surrender of a minor to an agency for the purpose of adoption.*

a. DSS and Court if TPR, DSS only if consent/relinquishment

b. The agency should seek relinquishments from the birth parent or guardian, or a Petition for Termination of Parental Rights should be filed within 60 days of the agency’s decision that the goal for the child is adoption (Section 1301 p. 3)

❖ TPR should be pursued if:

• A child has been in foster care for 12 of the previous 22 months

• Immediately if the court deems an infant abandoned, a parent attempts murder or commits manslaughter of a child, or the parent commits felonious assault resulting in serious injury to the child

❖ In cases of consent:

• Mother can do it only after the birth of the child

• Father can do it before or after the birth of the child

• A child 12 years old or older can give consent at any time

c. Possible forms depending on specifics of the family and child:

DSS 1801 – Agency’s Consent to Adoption

DSS 1802 – Consent to Adoption by Parent, Guardian ad Litem or Guardian

DSS 1803 – Consent of Child for Adoption

DSS 1804 – Relinquishment of Minor for Adoption by Parent or Guardian

DSS 1805 – Revocation of Relinquishment for Adoption by Parent or Guardian

DSS 1806 – Revocation of Consent to Adoption by Parent, Guardian ad Litem or Guardian

DSS 1809 – Affidavit of Parentage

DSS 5102 – Non-Identifying Background Information

DSS 5103 – Adoption Health History

DSS 5118 – Denial of Paternity

Ch. VI, Section 1302, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

2. **Eligibility for Adoption Assistance** — *Within 30 days after the child is legally cleared for adoption, the social worker must determine a child's eligibility for adoption assistance. Adoption Assistance is based on the child's circumstances and special needs and is not based on the income of the prospective adoptive parents. Eligibility criteria include: medical, mental, or emotional conditions that will require periodic treatment or therapy; membership in a sibling group to be placed together; ethnicity or membership in certain minority groups; age of the child; need for placement with a known and approved family for whom the child's care would be an undue financial burden; or a hereditary condition, congenital problem, or other documented high risk factor leading to substantial risk of future disability.*
- a. DSS
 - b. Within 30 days of child being legally cleared for adoption
 - c. DSS 5012-- Adoption Assistance Eligibility Checklist (revised 8/2018)

Ch. XIII, section 1600, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

3. **Recruitment Plan** — *The agency must develop a child-specific recruitment plan to locate potential adoptive parents. This does not apply in situations where a potential adoptive family has already been identified, as when a foster child is being adopted by the family with whom the child already lives.*
- a. DSS
 - b. Within 30 days of the child being legally cleared for adoption
 - c. Out of Home Family Services Agreement

Ch. VI, Section 1301, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

4. **Child Summary** (also called Child Profile) — *this written assessment of the child forms the basis of the child's record and includes a current medical evaluation; information about the child's family; information about the child's background and life experiences; information about the child's development; results of any psychological evaluations; observations of the child's progress, personality, and appearance; verifications of the child's date and place of birth, and of the birth parents' marital status; verification of the child's legal status; and present and past photographs of the child.*
- a. DSS
 - b. Within 30 days, once the agency decides that adoption is the goal
 - c. No specific form, use guidelines found in Chapter VI appendix

Ch. VI, Section 1301, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

5. NC Kids

- NC Kids is the adoption exchange for North Carolina. It is a system of exchanging information among local agencies about children available for adoption and prospective adoptive parents who have an approved preplacement assessment.
 - This service provides pictures and descriptions of children with special needs who are currently awaiting adoption. The visual interpretation of a child's characteristics coupled with a narrative description of his or her personality, interests, abilities, problems, etc. is widely accepted as being of great help in finding an adoptive family for that particular child.
- a) DSS

- b) Within 30 days of the child being legally cleared for adoption (if the child is not already placed with prospective adoptive parents)
- c) DSS 1820 – Child Registration Form

Ch. VI, Section 1304, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

6. **Matching** – *if there is no family identified who is interested in adopting the child, social workers will use available resources (NC Kids) to match the child with a prospective family based on the strengths and needs of both the child and the family.*
7. **Review by Adoption Committee** – *with reference to children, the purpose of the Adoption Committee is to select an adoptive home for a child from among those families who have shown an interest in adopting the child. There is no need to delay a committee meeting until there are several families to consider for a child’s placement as long as at least one family has been identified.*
8. **Preplacement Visits** – *once a child has been matched with a prospective adoptive family, all parties, including foster parents, the adopting parents, the child, and the child’s social worker are involved in planning the preplacement visits. Visits should take into consideration the needs of each particular child and be well thought out and outlined so that the child, his/her worker, the prospective adoptive parents and their social worker, and the child’s foster parents know what is being planned and the general timing of the various visits.*
 - a) social worker, foster parents, prospective adoptive parents, and the child
 - b) as long as it takes to successfully transition the child
 - c) Out of Home Family Service Agreement

Ch. VI, Section 1301, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

9. **Placement (SAME AS PARENT)** – *during the preplacement period a mutual decision about the actual placement date will be made with the adoptive family and the agency. (Placement can occur any time before the Order for Report to the Court.)*
 - a) DSS or licensed adoption agency
 - b) As soon as the child is ready following a period of preplacement visits
 - c) DSS 5094 – Status Change Form

Ch. VI, Section 1301, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

10. **Petition for Adoption of a Minor Child (SAME AS PARENT)** – *the formal request to the Court of Adoptions which initiates the legal adoption proceeding in order to legally establish the parent-child relationship.*

- a) prospective adoptive parents (or their attorney)
- b) No timeframe
- c) DSS 1800 – Petition for Adoption of a Minor Child

DSS 5162 – Petition for Adoption of a Minor Child (stepparent)

Or in some other form drawn up by an attorney that includes information required under G.S. 48-2-304

Ch. VI, Section 1302, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

11. **Order for Report to the Court (SAME AS PARENT)** – *when a Petition for Adoption of a child is filed, the court shall order the agency (that placed the minor or made the preplacement assessment) to make a report to the court to determine if the proposed adoption of the minor by the petition is in the child’s best interest.*

- a) Clerk of Court
- b) Within 10 days of Petition for Adoption is filed
- c) DSS 1807 – Order for Report on Proposed Adoption

Ch. VI, Section 1302, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

12. **Report to the Court (SAME AS PARENT)** – *The agency provides a written report to the court describing any changes since the preplacement assessment, an assessment of the relationship between the child and the adoptive parents, an update on the physical, mental, and emotional condition of the child, and a recommendation as to whether the adoption should be approved. The agency has 60 days from the time it receives the Order for the Report to the Court in which to provide to the court its findings and recommendation.*

- a) DSS
- b) Within 60 days after delivery of the Order for Report to the Court
- c) DSS 1808 – Report on Proposed Adoption

DSS 1811 – Medical Examination as Part of Report to the Court

Ch. VI, Section 1302, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

13. **Decree of Adoption (SAME AS PARENT)** – *legally establishes the relationship of parent and child between the petitioner and individual being adopted. Adoption entitles the child to inherit real and personal property from the adoptive parents in accordance with the statutes of descent and distribution.*

- a) Clerk of Court
- b) 90 days after Petition for Adoption has been filed unless waived by the court
- c) DSS 1814 – Decree of Adoption

Ch. VI, Section 1302, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

14. **Amendment of Birth Certificate** – *once the Decree of Adoption has been issued, the original birth certificate is sealed and a new one issued. In North Carolina the new birth certificate makes no reference to the adoption, and the names of the adoptive parents are shown as though they were the birth parents of the child. The original certificate is placed under seal which may not be broken except as provided in G.S. 48-9-105 and 106*

- a) DSS and Vital Records
- b) Upon receipt of the Court’s report that the Decree of Adoption has been issued and that the change of name is authorized
- c) DSS 1815 – Report to Vital Records

Ch. VI, Section 1302, http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/menu.htm
<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-50/man/index.htm>

These citations apply to the entire exercise:

Ch. 48 of the North Carolina General Statutes (2001). Joyner, C. (1999). *Yahweh Center adoption handbook*. Wilmington, NC: Yahweh Center.

Adoption Committee

Purpose of the Adoption Committee

The purposes of the adoption committee are:

- ◆ to confirm the adoptive placement with caregivers with whom the child presently resides or with a family already selected with whom the child has significant attachments and
- ◆ to select an adoptive home for a child from among those families who have shown an interest in adopting the child.

(Note: Only one family has to be identified in order to hold a committee meeting – workers should not delay a meeting in order to wait for several families to be identified.)

Who Serves on an Adoption Committee

A minimum of three people serve on the adoption committee, including:

- a person in a management position in children’s services,
- the child’s social worker, and
- the adoption worker.

The Guardian ad Litem should be invited to give input but shall not vote on the decision.

Criteria for Selecting a Family

When selecting a family, the following criteria should be considered:

- ◆ the family’s ability to meet the physical, emotional, and mental needs of the child;
- ◆ the compatibility between the child’s personal characteristics and the expectations of all members of the adoptive family;
- ◆ the specific experiences and training the family has had that prepares it to provide for the special needs the child may have;
- ◆ the resources in the family’s community that are available to meet the child’s special needs;
- ◆ the degree to which the family is willing to initiate and participate in medical and therapeutic treatment, if the child is in need of such; and
- ◆ the degree to which the family can accept the child’s need for contact with siblings and other birth and foster family members (if such a need is indicated).

Factors Contributing to Placement Success

- The family is given realistic expectations about the adoptive parenting experience.
- The worker carefully assesses the family's ability to meet the needs of the specific child being considered for a match.
- The family is given detailed information about the child's strengths and needs prior to placement.
- The worker is sensitive to doubts the family has about the child and the timing of the placement and does not pressure the family to accept a child.
- The worker is able to provide ongoing, timely support to the child and family throughout the process.
- The worker is able to connect the family to supportive resources, such as adoptive parent associations, neighborhood networks, or buddy systems.

Child Pre-Adoptive Summary

Suggested Outline

I. Identifying Information

- Child's first name.
- Child's date of birth.
- Child's race/ethnicity.
- Child's religious heritage.

II. Legal Status

- If child is legally free for adoption, give dates of parent's relinquishment(s) and/or termination of parental right order(s) or death.
- If child is not legally free for adoption state what needs to take place make child legally free for adoption.

III. Placement History

- Reason child came into care
 - Describe in detail why, when and how the child was placed in agency's custody.
- Number of placements
 - List all of the child's placements since initially coming into care, giving dates of each placement
 - Describe in detail why the child was removed from each placement,
 - Describe in detail the child's emotional and physical condition at the time of each move.
 - Describe child's relationship with each placement resource.
- Current Placement
 - Describe type of placement (i.e., foster care, relative, residential, group home, etc.)
 - Describe child's relationship with current family

IV. Physical Description

- Height
- Weight
- Hair and eye color
- Distinguishing features or characteristics, etc.

V. Personality/Disposition

- Tell what is likeable about this child.
- Describe challenges that the child presents.

VI. Birth Information

- Child's weight at birth.
- Describe significant details of child's birth (i.e., delivery complications, tests administered and results.
- Genetic traits inherited by child.

VII. Developmental Milestones

- Describe any developmental delays the child has.
- Tell when the child first crawl, babble, took first step, walk, talk, etc.
- Describe the child's current level of developmental functioning.

VIII. Personal Relationships

- Describe how the child interacts with other children, siblings, adults, animals, friends, etc.
- Describe the child's current feelings about birth family, siblings, foster family, caretaker, others, etc.
- Describe siblings, including plans for siblings, if not seeking placement together.
- Describe the child's interaction and relationship with the birth family.
- Describe current and anticipated involvement of birth family with child.
- Describe the caretaker, therapist, social worker's, etc. assessment of child's ability to trust and attach to new family.
- Describe any unusual or difficult behaviors the child has.

IX. Health Information

- Describe any physical, medical or health conditions.
- Describe child's current health condition.
- List child's current medications.

X. Psychological Information

- Discuss the child's need for psychological treatment.
- If child is currently in therapy, give frequency of appointments.
- Describe child's diagnosis and prognosis.
- Describe behavioral issues, if any.
- Describe separation, loss and attachment issues.

XI. Daily Routine

- Describe what a typical day is like for this child.
- Describe what it is like to for this child on a daily basis.
- Describe the child sleeping pattern.
- Describe if the child have recurring nightmares.

XII. Eating Habits

- List the child's favorite and least favorite food(s).
- Describe any food allergies including and symptoms and severity.
- Describe any eating difficulties such as hoarding, gorging, swallowing or stealing food.

XIII. Educational Information

- What is the child's current grade?
- Is child functioning at, above or below grade level?
- Describe any educational test administered and results.
- What, if any, special education needs does the child require?
- In which subjects does the child excel?
- What subjects, if any, are difficult for the child?
- Describe any academic, social and/or behavioral gains the child has made in school.

XIV. Birth Father and Birth Mother Information

- Physical Description of birth mother and birth father
 - Height
 - Weight
 - Hair and eye color
 - Distinguishing features or characteristics, etc.
 - Tattoos or scars
 - Right or left handed
 - Glasses or contacts
 - Favorite style of dress

- Personality
 - Describe the birth parents disposition.
 - Describe the birth parents' lifestyle.
 - Describe the birth parents interests and talents

- School Information for the Birth Parents
 - What level of education did the birth parents complete?
 - What was the birth parent favorite and/or least favorite subjects?.
 - Did the birth parents have any special education needs?

- Health/psychological Information for the Birth Parents
 - Describe the birth parents general health.
 - Are there any family health issues or pre-disposition conditions?
 - What was the birth parent favorite and/or least favorite subjects?
 - Describe any psychological diagnosis, giving information on hospitalizations and treatments.
 - Describe birth parents' chemical dependency including age the parents started using and their drug of choice (include alcohol and prescription drugs), treatments and outcomes
 - Describe behaviors of birth parents that impacted the child being removed from the home or released to agency.

- Birth Family Network
 - List information regarding all known relatives and their whereabouts (even if they have never met the child).
 - List close family friends, godparents, and other non-relatives who played significant roles in the child's life..

XV. Child's Preparation for Adoption

- Describe the child's understanding of why s/he is being adopted.
- Describe how the child is being prepared for adoption, including any issues regarding transitioning to a new family.
- Describe the child's expectation of an adoptive family.
- Describe recruitment efforts made on behalf of the child.

XVI. Agency's Recommendation for Adoptive Placement

- Describe desirable characteristics of a potential adoptive family which would be suitable for the child.
- Describe the strengths and needs (not to be confused with special needs status for adoption assistance eligibility).

_____ Social Worker's Signature	_____ Print: First Name MI Last Name	_____ Date
_____ Supervisor's Signature	_____ Print: First Name MI Last Name	_____ Date

Video Resources

The Dave Thomas Foundation for Adoption makes several videotapes available free of charge. The series addresses the Adoption and Safe Families Act of 1997 and includes the following videos:

- *Fast Track to Permanency*
- *Why Legislators Must Make It Happen*
- *How Judges Can Make It Happen*
- *The Essential Voice of Child Advocates*
- *Creative Strategies for Permanency*

For more information, contact the foundation directly:

Dave Thomas Foundation for Adoption

4288 West Dublin-Granville Road

P. O. Box 7164

Dublin, OH 43017

(614) 764-3009 phone

(614) 764-6707 fax

Life Book Kit

Here are just a few of the resources available to help you create a Lifebook.

- ◆ ***The Child's Own Story: Life Story Work with Traumatized Children*** by Richard Rose and Terry Philpot (Jessica Kingsley Publishers, 2005). Available from: www.jkp.com
- ◆ ***Making History: A Social Worker's Guide to Lifebooks*** by Joann Harrison, Elaine Campbell, Penny Chumbley (2010). Available from: <http://1.usa.gov/XUfB11>
- ◆ ***Lifebook Pages from the Iowa Foster and Adoptive Parents Association.***
Available from: www.ifapa.org/publications/ifapa_lifebook_pages.asp
- ◆ ***My Foster Care Journey*** by Beth O'Malley (2001). Available from: www.adoptionlifebooks.com
- ◆ ***My Awesome Life*** by Lutheran Social Services of Illinois.
Available from: <http://www.lssi.org/SUPPORT/MyAwesomeLife.aspx>
- ◆ ***Shelby and Me: Our Journey through LifeBooks***, by Donna Foster.
Available by email: DonnaFoster@shelbyandme.com

Source: Foster Perspectives May 2019 Vol. 23, No. 2

<http://fosteringperspectives.org/wp-content/uploads/2019/05/fpv23n2.pdf>



Adoption Services to the Child Checklist

Name of Child	Social Worker			Date
Service/Activity/Task	Completed			Comment
	YES	NO	N/A	
1. Is there indication that child may be of Indian heritage/ancestry?				
2. If child is of Indian heritage/ancestry, has Indian Child Welfare Act Compliance Checklist DSS-5291 been completed?				
3. Is child legally free for adoption?				
4. Has child been registered on NCKids?				
5. If child is not registered on NCKids, has an exemption been granted by NCDSS?				
6. Is this a legal risk placement?				
7. If this is a legal risk placement, has the Legal Risk Placement Agreement, DSS-5304 been completed?				
8. If this is an interstate placement, does Interstate Compact on the Placement of Children (ICPC) apply?				
9. Has Interstate Compact on the Placement of Children (ICPC) compliance been met?				
10. If ICPC placement, has ICPC packet been sent to NCDSS for approval?				
11. Has an adoption record been set up for the child?				
12. Has appropriate security been initiated to restrict access to adoption record?				
13. Does child have rehabilitative and/or medical needs covered under the Children's Special Health Services (CSHS) Program?				
14. If yes, has pre-adoptive application been made coverage under CSHS program?				
15. If approved for coverage under CSHS program, has the adoptive family been informed?				
16. Has eligibility for Adoption Assistance been established?				
17. Has child's Preadoptive Summary been completed?				
18. Are recent photos of child available?				
19. Was a Lifebook prepared for the child?				
20. Does child need supportive/therapeutic services to help resolve adoption related issues?				
21. Is the foster parent or a relative being considered as a placement resource?				
22. If purchase of adoption services with out of state agency is needed, has approval for reimbursement of payment by State Office been requested?				
23. Has pre-placement visits schedule been				

developed?				
24. Has the following documents been given to the prospective adoptive parents:				
(a) DSS 5102 – Non Identifying Background Information?				
(b) DSS 5103 – Adoption Health History, Part 1?				
(c) Lifebook?				
(d) Letter(s) from birth parents, if applicable?				
(e) Copy of school record?				
(f) Copy of medical record?				
(g) Social security number?				
(h) Adoption assistance agreement?				
(I) Adoption assistance payment instruction?				
(k) DSS 5346 –Information Sharing Acknowledgement?				
25. Has DSS 5094 been closed, if applicable?				
26. Has DSS 5095 been opened, if applicable?				
27. Was application made for Special Children Adoption Incentive Fund, if child is receiving supplemental foster care payment?				

Criteria for the Preplacement Assessment

1. **Description and identifying information**
 - Names of all people living in the home (including all names the person has had – maiden name, other married names, middle names), birth dates, places of birth
 - County, race or ethnicity or nationality, marital status
 - If applicable, date and place of current marriage
 - Educational background
 - Occupation, ability to function in employment situation
 - Income and sufficiency of income to meet their own needs
2. **Contact summary**
 - TIPS-MAPP attendance, participation, and graduation
 - Dates and purposes of meetings with family, telephone contacts
3. **Family background and history**
 - Applicant's parents, siblings, childhood
 - Past and present family relationships
 - Any and all divorces and partner deaths
 - Family members' roles, both past and present
 - Grown children and children living out of the home
 - Applicant's educational history, extracurricular, and dating experiences
 - Influence of applicant's extended family on present relationships
 - Significant events or patterns in the family history
 - Genograms can be used to explore extended family
4. **Personality traits, attitudes, qualities, beliefs, and values**
 - Overall impression of each family member
 - Outstanding or obvious personality traits
 - Capacity for patience, compassion, empathy, caring, and responsiveness to others, attentiveness, openness to difference
 - Emotional maturity and stability, tenacity, confidence, self-concept, self-esteem
 - Presence of prejudicial or judgmental attitudes
 - Visible attitudes toward life or particular aspects of life
 - Values, moral and ethical foundations, reputable character, standards conducive to the well-being of children

- General social, intellectual, and cultural level of family
 - Capacity to love and ability to handle loss
 - Adequate functioning in terms of family responsibilities and employment, both currently and in the past
 - History and ability to handle difficult and stressful situations
 - Ability of the children of the family to handle a new sibling
- 5. Value base, including spiritual and religious beliefs and affiliations**
- Involvement in a religious organization, strength of commitment, religious preference
 - Degree of acceptance of other religions
 - Personal qualities stemming from spiritual beliefs
 - Role of spirituality within the family
 - Expectation for children in the home regarding spiritual beliefs and affiliations
 - Ability to respect broad religious and spiritual preferences or lack of religious background of the child's birth parents
 - Opportunity for child's spiritual development and freedom to practice his or her own spiritual beliefs
- 6. Intimate relationships**
- Courtship history
 - Previous romantic partnerships marital status and history to include, separations or divorces, deaths and verifications of each.
 - Quality, strength, and stability of present marital or intimate relationship
 - Satisfaction with sexual identification
 - How people learned about sex when growing up, any negative sexual experiences (that might make it difficult for them to work with a child who was sexually abused)
 - For couples, degree of unity in thoughts and beliefs
 - For couples, degree of unity in desire to adopt
 - For people without partners, how intimacy needs are met
- 7. Physical health**
- General health of applicants, physical ability to care for a child
 - Diet, exercise
 - Use of or addiction to recreational drugs, alcohol, or cigarettes
 - Hereditary diseases or disabilities, infectious diseases
 - Presence of stress and stress-management skills
 - All members of the household are required to receive a physical examination, including a TB skin test

- A full medical history must be provided to ensure that there are no complications that could endanger the health and safety of the child; if necessary, an applicant can provide a letter from a physician stating an applicant's ability to provide care for a child

8. Mental health

- Emotional and mental stability, as evidenced by past and present behaviors
- Presence of any mental disorders or disabilities that may interfere with appropriate care for a child
- History of use of mental health services

9. Family and interpersonal relationships

- Flexibility of family system
- Strength of personal boundaries
- Presence of meaningful positive relationships with members of own family and with persons outside the family
- Satisfactory and stable adult relationships, free from severe or chronic conflict, anger, or frustration
- Pets within the home

10. Parenting experiences

- Children in the home
- Children out of the home
- Children in the extended family
- Relationships with biological children and other adopted children
- Enjoyment of and satisfaction with parenting
- Attitudes toward parenting and towards children in general
- How they were parented, what they would do differently or the same
- Ability to handle difficult children
- Support system
- Flexibility in expectations, attitudes, and behavior in relation to the age, needs, and problems of children
- Ability to use help when needed in problems of family living
- Ability to give affection and care to a child without expecting immediate returns
- Volunteer- and job-related experiences

11. Financial information

- Income
- Employment status and history
- Insurance (life, home, health, car, disability, etc.)
- Will, who will be the legal guardians
- Budget
- Special skills

12. Home and community

- Physical layout of the home, how it is maintained
- Services in the neighborhood for children
- Community involvement
- Length of time lived in the community

- Patterns of daily living
- Regularity of schedule
- Work hours
- Primary caretaker
- Involvement in outside activities (both type and amount of time spent in activities), what will stay the same and what would change after an adoption
- Evidence of sufficient time to care for a child
- Evidence of suitable childcare if both parents are employed

13. Interactional styles

- Communication styles
- Patterns of interaction, both verbal and non-verbal
- Expression of emotions
- Crisis management skills, problem-solving skills
- Ability to handle stress, frustration, and crisis

14. Methods of managing children's behavior

- View of discipline
- Family history of discipline, what would they do the same or differently
- Expectations of how children in the child welfare system will behave
- Household rules, flexibility or rigidity of rules
- Consistency of disciplinary actions
- Ability to establish appropriate guidelines for behavior and methods to enforce such guidelines
- Understanding of state-acceptable discipline standards, willingness to sign an agreement

15. Capacity to support and encourage an adoptive child

- Ability to understand the adoptive child's feelings about and relationship with child's own birth parents (both positive and negative)
- Ability to help child maintain connectedness to birth family and community when appropriate (not necessarily actual contact, but sense of family history, etc.)
- Ability to understand child's birth parents and birth family
- Capacity to absorb the changes and the pressure to the family that occurs when adding an adoptive child
- Parents' capability to share the responsibility and care of an adopted child
- Personal experiences with separation or loss
- Ability to work with the agency and with other agencies in attaining the goals for children
- Ability to advocate on behalf of children
- Expectations for child's achievement ("All our children graduate from college")

16. References and verifications

- Personal references for all adult members of the family regarding their suitability to care for children. References should be encouraged to provide specific characteristics of the applicant (i.e., caring, patient, sensitive), rather than general, broad statements of "worthy character" (Costin & Gruener, 1965).
- A criminal record check must be done on each adoptive applicant and anyone in the home age 18 or older.

- Applicants must sign a consent form for a criminal history check and submit the signed consent form to the DSS.
- Two sets of fingerprints must be obtained on SBI identification cards. Fingerprints are obtained in different ways by various counties. Some counties bring in a member of the Sheriff's Department and offer fingerprinting during one of the MAPP sessions. Other counties simply send families directly to the Sheriff's Department.
- The State Bureau of Investigation and the Federal Bureau of Investigation (SBI and FBI) must perform the criminal record checks on adoptive applicants. It is important that a good quality set of prints be submitted on the first submission. These prints can be submitted electronically, and results returned in four to six weeks.
- If the first set of prints are returned as unreadable, the next prints must be sent via the mail system and the process is much slower. It will take 2 to 4 months each try for these subsequent checks to be made. If after the third try, the fingerprints are still not readable, there will need to be further documentation regarding health history, work history, etc. that might explain why fingerprints cannot be read.
- Check with your agency about policies concerning violent felonies, crimes of a frequent or significant magnitude, DWI convictions that have occurred within the last five years, drug convictions, or murder charges.
- If a criminal record check is returned with convictions or charges, DSS workers need to discuss the fact that there is a criminal history that has been reported. They cannot share the results they received as federal law prohibits the sharing of that information even with the person to whom it applies. Private Agencies will only be told that there is a history and the Clerk of Court's office they might check. The worker can ask the applicant if they can provide additional information regarding their criminal history. The agency will then make the decision regarding the information shared. It is recommended that no approvals be made when there has been documentation of DWI convictions occurring within the past five years, drug convictions, murder charges or any violent felonies or crimes of a significant magnitude. Convictions for non-violent felonies should be handled on a case by case basis taking into account the nature of the offense, the length of time elapsed since the event and the individual's life experiences during the ensuing period of time.

The following information must also be verified:

- Any previous request for an assessment or involvement in an adoptive placement and the outcome of the assessment of placement.
- Whether the individual has ever been a respondent in a domestic violence proceeding or a proceeding concerning a minor who was allegedly abused, dependent, neglected, abandoned, or delinquent, and the outcome of the proceeding.
- Whether the individual has ever been convicted of a crime other than a minor traffic violation.
- Whether the individual has located a parent interested in placing a child with the individual for adoption and a brief, non-identifying, description of the parent and the child; and
- Any other fact or circumstance that may be relevant to a determination of the individual's suitability to be an adoptive parent, including the quality of the environment in the home and the functioning of any children in the household.
- When any of the above information is not reasonably available, the preplacement assessment shall state why it is unavailable.

- The preplacement assessment shall be prepared and typed and presented to the adoptive parents for review. If, for any reason, the applicant is not accepted by the agency as a potential adoptive parent, the agency shall share with them the reason a child cannot be placed with them, and they shall have the right to have their summary reviewed by the agency. During the preparatory phase of approval, each prospective adoptive parent will be provided a handbook that outlines the relevant agency policies and procedures.
- The agency is required to provide the family with a copy of the preplacement assessment. Each agency shall have a procedure for allowing an individual who has received an unfavorable preplacement assessment to have the assessment reviewed by the agency.
- The applicants must be provided in writing with the notice of the agency’s decision regarding approval or denial of approval for adoption within thirty days after the study is completed. (APA 10NCAC 41P .0109)
- Source: Costin, L. B., & Gruener, J. R. (1965). *Licensing of family homes in child welfare: A guide for instructors and trainers*. Detroit, MI: Wayne State University Press.

17. Motivations to Adopt

Areas of Concern

These issues aren’t necessarily bad reasons to adopt—they can be positive or problematic. So they should be carefully explored to truly understand whether the motivation will allow parents to meet the needs of the child:

- **Desire to derive income**
Often, mothers who desire to stay home with their own children will decide to foster so that they can supplement their income at the same time—the foster placement may lead to adoption. However, children must be protected from exploitation, and parents must be capable of providing adequate care. Foster and adoptive families must be able to demonstrate financial stability, and they must understand that reimbursement is often minimal while care is required 24 hours a day.
- **Companionship for birth children**
This is also a frequently expressed motive. Again, this is not necessarily a poor motive, but it must be explored. To desire a “sibling” for one’s own child for the betterment of both children may be one appropriate reason to adopt, but it should not be the primary motivation for adoption. A parent may want to give his or her own children less direct attention, which is an unsuitable motivation. Also unacceptable is a parent who may be looking for a child to use as a comparison for his or her own child, to demonstrate the child’s superiority over the adoptive child (or vice versa). A parent may desire a teenager to provide childcare, which is an unacceptable motivation.
- **Life dissatisfaction**
A person may be motivated by loneliness, a need to dominate others, or dissatisfaction with life at present and may be looking for a child to “fix” his or her situation.
- **Insecurity and need to be needed**
Some people have to be depended on by young children to feel useful or to build up their own self-esteem.
- **Replacement of losses**
Some people may want to adopt in order to replace a child or significant other that died.
- **Rescue**
Some people want to live out a rescue fantasy—they desire to be the rescuer of a child.

Unacceptable Motivations

There are motives, however, that some believe are never acceptable motives for adoption.

These include the following:

To preserve a shaky marriage-

To conform to the expectations of others, such as a spouse or friends

To prove to self or others that one can be a successful parent or a giving person

To make up for past wrongs, whether real or imagined, or to counteract feelings of guilt

To make money

To have someone be grateful

18. Conclusions and recommendations

- Strengths and needs of the family
- Relevant strengths, qualities, actions, and accomplishments of the family that can be built on, supported, and reinforced by the agency
- Services and supports that match the needs of the family
- Areas for continued development, possible obstacles to successful adoption
- Family's responsiveness to the adoption process and the agency
- How the agency can best support the family
- Recommendations in regard to approval for adoption
- Motivation
- There may be many motivations behind a family's desire to adopt a child. Specific motivations may or may not be appropriate, given the family's attitude and situation. Thus, an in-depth exploration of motivation is a crucial element in the selection process. Possible motivations include:
 - Fertility issues
 - Desire to nurture children; desire to adopt
 - Altruism/social conscience
 - Identification with deprived children--some adoptive parents were adopted themselves, and have a desire to help children in need of permanent homes.



Cultural Questions for Adoptive Parents

You may want to consider asking prospective adoptive parents to complete the “Views on Life” exercise. It can help them examine the diversity in their lives, which is important when adopting any child (because every family’s culture is different), but especially important in transracial or transcultural adoptions.

The following questions can also be useful in helping potential adoptive parents look at their own family culture and their expectations of children. Behaviors and routines that seem normal and standard to them may be completely new to an adopted child. If they can understand that the child may be coming from a completely different background, then they can learn to use their differences as opportunities to learn, share, and potentially join together more as a family.

Ask parents to identify aspects of their family’s culture:

- **Religion**
Which holidays are celebrated and how? (Some Christian families open gifts on Christmas Eve, while others do it in the morning; some African-American families celebrate Kwanzaa while others don’t.)
- **Birthdays**
Are birthdays a big deal in your family? Do people always exchange gifts?
- **Meals**
Does your family cook? Do you eat meals together? Are there any family meal rituals—saying grace, seating arrangements, time of day? Are there “policies” about snacking?
- **Personal appearance**
How does your family dress at home? In the community? What are your expectations for a child’s personal appearance?
- **Home maintenance**
What is your desired cleanliness level? Who is responsible for cleaning? What are your expectations for the children’s involvement in household chores, etc.?
- **Privacy**
What are your privacy boundaries? Are doors kept open or shut in your home? How do you manage privacy needs?
- **Child-adult interactions**
How are children in your family expected to behave toward adults? Do they say “sir” and “ma’am”? What do you like to be called by children (first name, Mr., Ms., Mrs., etc.)?
- **Other areas**
How will people in your family react to an adopted child? To an adopted child of a different culture or race? If you adopt a child of a different culture or race, how will you specifically involve him or her in his or her race and culture?

Adapted from: Forbess-Greene, S. (1983). *The encyclopedia of icebreakers*. San Diego, CA: Pfeiffer & Company.

Nationally Based Adoption Search Resources

U.S. DHHS Administration for Children & Families/Child Information Gateway
National Foster Care & Adoption Directory Search

- The National Foster Care & Adoption Directory (formerly the National Adoption Directory) offers adoption and foster care resources by State. For more customized search results, you may enter one or more keywords. <https://www.childwelfare.gov/nfcad/>
- **FREE ADOPTION RECORDS SEARCH**
Almost all of the U.S. Adoption Record Search links, adoption resources and Adoption related webpages:
http://freerecordsregistry.com/adoption-search-resources.htm?comments_page=32
- Searching for U.S. Adoption Records_
<http://freerecordsregistry.com/searching-for-adoption-records-the-only-adoption-and-birth-websites-and-adoption-links-that-matter.htm>

Fostering Perspectives Newsletter

Fostering Perspectives is sponsored by the North Carolina Division of Social Services, the North Carolina Foster and Adoptive Parent Association, SAYSO (Strong Able Youth Speaking Out), and the Family and Children's Resource Program, part of the Jordan Institute for Families at University of North Carolina at Chapel Hill School of Social Work. These organizations contribute to the development and production of each issue in an effort to improve the quality of foster care in North Carolina.

Fostering Perspectives exists to promote the professional development of North Carolina's child welfare workers and foster parents and to provide a forum where the people involved in the child welfare system (especially foster children) can exchange ideas about foster care in North Carolina.

Fostering Perspectives is issued twice a year, in May and November and is only available online at https://fosteringperspectives.org/fp_mainpage/fp_about_fp.htm

If you wish to receive notification via e-mail when new issues of *Fostering Perspectives* appear online, please visit <http://eepurl.com/brPe9b> and sign up.

Address correspondence to *Fostering Perspectives*, UNC–Chapel Hill School of Social, CB# 3550, Chapel Hill, NC 27599-3550. E-mail: jdmcmaho@unc.edu.

Views on Foster Care in North Carolina

fostering perspectives

Sponsored by the NC Division of Social Services and the NC Family and Children's Resource Program

What does NC's focus on permanence mean for foster parents?

Every child deserves a loving, nurturing, permanent family. This simple—but so obvious—belief in each child's right to a permanent family is the driving force behind changes that are happening in foster care in North Carolina today, changes that will have a significant impact on foster parents.

Emphasizing Permanence

Of course, this belief in the importance of permanence is not really a new idea. It is why we have a child welfare system in the first place, and it is the reason so many foster and adoptive parents and social workers do what they do. Yet somehow our belief in the importance of permanence has not always been reflected in what happens to children in foster care. Historically, many children have languished in foster care for years without a permanent home. Some of these kids spend years moving from placement to placement, some never achieve permanency. This experience only compounds the hurt of the abuse or neglect that brought them into care in the first place, leaving children feeling unloved, unwanted, and damaged.

To correct this situation, North Carolina is now engaged in an effort to bring the idea of permanence to the forefront of child welfare practice. This effort really began in 1994, when North Carolina was selected to be one of the sites for Families for Kids, a national initiative sponsored by the W. K. Kellogg Foundation. Planned for three years in eight counties (Harrcombe, Catawba, Cleveland, Edgecombe, Guilford, Iredell, Richmond, and Wayne), Families for Kids challenged communities and county departments of social services to accept and work toward five goals:

1. Community-based support for families in crisis.
2. One coordinated assessment process for each family.
3. One case worker or case work team for each family.
4. One stable foster care placement for every child.
5. A permanent home for every child within one year.

Guided by these goals, DSS's in these eight counties took a hard look at the way they did business and made changes that dramatically improved outcomes for the children in foster care. For example, these agencies reallocated resources to increase the number of children being adopted. At the same time, they increased support for families in crisis, reducing the number of children entering foster care in the first place. The book *Permanence*, p. 2

Taking it to the top: SAY SO members go to Washington

by Ricky M and Erica Bailey

We were very excited when our independent living (IL) social worker told us about the opportunity to attend a youth leadership conference in Washington, D.C. Of course, we would not want to pass up the chance to miss a few days of school and go on a small, very needed vacation. We didn't know what we were getting into.

The conference was called Destination: Future '98 Youth Leadership Conference and was sponsored by the National Resource Center (NRC). After much pleading and begging, our IL social worker, Sherry McKinney, convinced our DSS agency to allow us to attend. So, on September 10, 1998 we began our long journey by car. When we got to the conference there were hundreds of foster youth from across the country there, and they were all in foster care, too. Everyone was talking and having a good time. Soon the keynote speaker walked in: Hillary Rodham Clinton.

She talked about kids in foster care and even told us that her own mother grew up in a foster care-type situation where she was a teenager! We had never heard that before and thought it was great that Hillary knew a little about foster care and what it was like.

When Mrs. Clinton was done speaking and was leaving the podium, that was when Erica decided she wanted to talk to the First Lady! Erica just went right up to Mrs. Clinton and pulled her aside (we wouldn't suggest doing this again—the Secret Service agents weren't very happy) and introduced herself. Erica told Mrs. Clinton about SAYSO (Strong Able Youth Speaking Out) and how we were involved. The First Lady seemed very interested and asked Erica for her address to get



see page 6, p. 12

Bibliography

- Adoption and Foster Care Analysis and Reporting System. (1999). *Foster care and adoption statistics current reports* [On-line]. <<http://www.acf.dhhs.gov/programs/cb/stats/afcars/index.htm>>.
- Bayless, L., & Craig-Oldsen, H. L. (1990). *Model approach to partnerships in parenting: Group preparation and selection of foster and/or adoptive families*. Atlanta, GA: Child Welfare Institute.
- Blanton, T. L., & Deschner, J. (1990). Biological mothers' grief: The postadoptive experience in open versus confidential adoption. *Child Welfare*, (69) 6, 525-36.
- Child Welfare League of America. (1993). *Foursquare for families: The new shape of adoption*. In *Children's Voice* (vol. II, no. 3). Washington, DC: Author.
- Costin, L. B., & Gruener, J. R. (1965). *Licensing of family homes in child welfare: A guide for instructors and trainers*. Detroit, MI: Wayne State University Press.
- Dolan, G. (1996). What it means to be adopted. In J. Canfield, M. V. Hansen, & P. Hansen (Eds.), *Condensed chicken soup for the soul*. Deerfield Beach, FL: Health Communications.
- Fahlberg, V. (1991). *A child's journey through placement*. Indianapolis, IN: Perspectives Press.
- Forbess-Greene, S. (1983). *The encyclopedia of icebreakers*. San Diego, CA: Pfeiffer & Company.
- Future Families. (1991). *A family album: Stories of adoption* [videotape]. (Available from Future Families, 3233 Valencia Avenue A-6, Aptos, CA 95003, 408-662-0202)
- Group Child Care Consultant Services. *Special needs adoption curriculum*. Chapel Hill, NC: Author.
- Joyner, C. (1999). *Yahweh Center adoption handbook*. Wilmington, NC: Yahweh Center.
- Kirby, A. (1994). *Great games for trainers*. Amherst, MA: Human Resource Development Press, Inc.
- North Carolina Division of Social Services. (1998). *Adoption assistance* [On-line]. <http://ChildrensServices.dhhs.state.nc.us/policy_and_planning/manuals/1305main.htm>.
- North Carolina Division of Social Services. (1998). *Family services manual (vol. I, chap. IV)*. Raleigh, NC: Author.
- North Carolina Division of Social Services. (1999). *Understanding the North Carolina adoption laws*. Raleigh, NC: Author.
- North Carolina Division of Social Services. (1998). *What goes into the life book?* [On-line]. <<http://ChildrensServices.dhhs.state.nc.us/adoptionresources/forms/lifebook.htm>>.
- Reitz, M., & Watson, K. (1992). *Adoption and the family system: Strategies for treatment*. New York: Guilford Press.
- Scott, R., & Houts, P. (1978). *Individualized goal planning in social services: Procedures for developing individualized goal plans with families in child welfare*. Hershey, PA: Department of Behavioral Science, Pennsylvania State University, College of Medicine.
- Smith, D. G. (1995). *The impact of adoption on birth parents*. [On-line]. National Adoption Information Clearinghouse. <<http://www.calib.com/naic/factsheets/birthpar.htm>>.
- Taylor, C. (1992). The company needs me because. . . . In A. Kirby (Ed.), *A compendium of icebreakers, energizers and introductions*. Amherst, MA: Human Resource Development Press, Inc.
- Trout, M. (Writer and Producer). (1997). *Multiple transitions: A young child's point of view on foster care and adoption* [videotape]. (Available from the Infant-Parent Institute, 328 North Neil Street, Champaign, IL, 217-352-4060)
- Usher, L. (1998). *Children's services data*. Raleigh, NC: Division of Social Services.
- Watson, K. (1997, Summer). What adoption is and what it isn't. *Decree*, 14, 4-8.