Competencies

201-04-001	Knows the importance of gathering complete assessment information about children in agency care and their families and documenting this information in family case records				
201-04-002	Knows the types of information needed to select the best placement for a child and possible sources of this information				
201-04-008	Knows strategies to obtain essential historical, developmental, and other assessment information from a child's birth family, extended family, prior caregivers, and service providers				
201-04-009	Knows how to locate and approach absent or uninvolved family members to gather relevant historical information about children and their birth families				
201-04-012	Knows how to document and provide resource families with historical information to share with children as they mature and seek information about their backgrounds				
201-06-003	Knows the benefits of honest communication with children about their histories, future plans, and personal concerns				
201-06-007	Understands children's common misperceptions regarding their birth families, personal histories, and the reasons for placement				
201-07-016	Can prepare adoptive families to share information about the child's birth family and placement circumstances in greater depth and detail as the child grows				
201-08-012	Knows how to elicit and compile detailed family and child history information from birth parents to be shared with an adoptive family for the benefit of the adopted child				
204-01-005	Knows the persons and data sources most likely to provide relevant information for an assessment				

204-01-018	Knows strategies to respond to hostility or resistance to help family members become more comfortably involved in the assessment
210-02-002	Knows the importance of basing a search strategy on an individualized assessment of a child's permanency needs and a plan to address them
210-02-010	Knows how to use assessment tools such as ecomaps and genograms to identify potential permanency resources in a child's extended family and social networks
210-02-011	Knows how to prepare, involve, and solicit feedback from children when seeking permanency options for them
210-02-015	Knows how to implement case mining strategies to identify potential permanency resources for children
210-02-016	Knows how to use technology such as web-based search engines to locate persons identified as potential permanency resources for children
315-01-003	Knows the purposes of case documentation and the types of information that should be included in family case records

TYPES OF WRONGFUL ADOPTION

In legal terms, wrongful adoption is generally based on allegations of **fraud** or **negligence** in regard to sharing information by the placing agency (Freundlich and Peterson, 1997; Kopels, 1995). Below are some examples of the types of errors that have been cited in lawsuits (Hochman and Huston, 1994):

Deliberate Concealment

The social worker withholds known information regarding the child or birth family. For instance, adoptive parents are not told that a birth parent has schizophrenia, that the child tested positive at birth for cocaine exposure in utero, or that the child has sexually molested younger children in the past. (In some cases, the information may be revealed, but discounted, such as presenting it as "normal misbehavior" or the result of a biased reporter, such as a foster parent who "didn't like" the child.)

Intentional Misrepresentation

The social worker knowingly gives the family information that is not true, generally for the purpose of presenting the child in a more positive light than is accurate. For instance, the birth parents are described as healthy teens unable to care for a child, when in fact, the birth mother is a long-term patient in a state psychiatric hospital, and the birth father is unknown.

• Negligent Misrepresentation

"...an agency volunteers information about a child...but the information given is at least partially incorrect. An example is an agency that shares with a family that there is a history of Huntington's disease in a child's family, but relates incorrect information about the possibility that the child will get the disease" (Hochman & Huston, 1994). To avoid such claims, it is

recommended that adoption workers avoid interpreting the meaning of the available facts, but rather, encourage prospective adoptive parents to consult with professionals in the appropriate field (medical, mental health, education, etc.) for help in understanding the facts and reports which the adoption worker can share.

Negligent Nondisclosure

Similar to nondisclosure, the agency provides partial information but omits significant portions. In one lawsuit, (Freundlich, 1997) a social worker told prospective adoptive parents that there may have been incest in an infant's background, and asked the family if they were concerned about this. The family said no, apparently believing that the incest did not involve the child in question. The social worker did not specifically tell the family that the child was the product of an incestuous relationship between a brother and sister.

Affirmative Duty of Disclosure

The requirement to share <u>all</u> information that is <u>known</u> to the agency about the child. This has been upheld in many cases. Some advise that it is also wise to explain the difficulty in obtaining "complete" information, and to note that there may be information <u>unknown</u> to the agency which will have a bearing on the child's development.

Additionally, some cases have sought to prove a "Duty to Investigate" the child's background, that is, to make an aggressive search for thorough information and to independently confirm information obtained from other sources, such as the birth family. As yet, most courts have held that there is not a Duty to Investigate.

The Scope of the Duty to Disclose –

A Look at Practice Issues

The following is adapted from Wrongful Adoption: Law, Policy and Practice by Freundlich, M & Peterson, L. (1998). CWLA Publishers.

I. The Duty to Investigate:

Although no court in an opinion has recognized the duty to investigate, such a duty, according to some writers in the field, should be imposed on agencies to ensure that full and accurate information is gathered and communicated to adoptive parents.

Questions for consideration:

- 1. How much further should adoption agencies go beyond gathering as much information as possible from birth parents?
- 2. Would such investigations violate the privacy of birth parents?
- 3. If agencies were to pursue such investigative efforts against birth family wishes, what effect would such a policy have on birth parents willingness to consider adoption?
- 4. Is investigation an appropriate role for adoption social workers who are counseling birth parents?

II. Communicating Facts versus Suspicions:

The disclosure of background information also raises questions about the duty to communicate not only known information, but information that adoption social workers may suspect or infer from the statements from birth parents.

Questions for consideration:

1. To what extent should the information provided by birth parents be taken at face value?

- 2. Should suspicions, although unverified, be given the same weight as information expressly disclosed by the birth parents?
- 3. Should the impact on a child's opportunities for adoption be taken into account in determining whether to communicate unverified suspicions?

III. Genetic Testing and the Duty to Disclose:

An area of growing concern advocated by some writers is requiring genetic testing as part of the adoption evaluation.

Questions for consideration:

- 1. Should agencies be willing to conduct pre-symptomatic genetic testing of apparently healthy children?
- 2. To what extent should decisions about pre-symptomatic genetic testing take into account the interests and rights of the child?
- 3. What the implications for children when pre-symptomatic genetic testing reveals genetic disposition for significant and non-treatable diseases?
- 4. What are the implications for siblings when one child is found to be genetically desirable and the other is not and decisions in regard to adoption are made on that basis?

IV. Disclosing Facts vs. Interpretative Information:

This issue examines the concern of adoption professionals who desire to communicate full information, but don't know whether or how to <u>interpret</u> information about background facts.

V. The Duty to Provide Updated Information:

Agencies can face a critical question regarding communication of information to the family after finalization. No state currently imposes this as a legal duty.

Questions for consideration:

1. Should agencies automatically communicate any information provided to them after the adoption has been finalized?

- 2. Should decisions to communicate updated information depend upon the nature of the information?
- 2. Should agencies have a policy of routinely disclosing any updated information to adoption families or just informing them that new information is available to them at their request?

Handout #2 Duty to Disclose

The Scope of the Duty to Disclose -

A Look at Practice Issues

The following is adapted from Wrongful Adoption: Law, Policy and Practice by Freundlich, M & Peterson, L. (1998). CWLA Publishers.

II. The Duty to Investigate:

Although no court in an opinion has recognized the duty to investigate, such a duty, according to some writers in the field, should be imposed on agencies to ensure that full and accurate information is gathered and communicated to adoptive parents.

Questions for consideration:

- 5. How much further should adoption agencies go beyond gathering as much information as possible from birth parents?
- 6. Would such investigations violate the privacy of birth parents?
- 7. If agencies were to pursue such investigative efforts against birth family wishes, what effect would such a policy have on birth parents willingness to consider adoption?
- 8. Is investigation an appropriate role for adoption social workers who are counseling birth parents?

II. Communicating Facts versus Suspicions:

The disclosure of background information also raises questions about the duty to communicate not only known information, but information that adoption social

workers may suspect or infer from the statements from birth parents.

Questions for consideration:

- 4. To what extent should the information provided by birth parents be taken at face value?
- 5. Should suspicions, although unverified, be given the same weight as information expressly disclosed by the birth parents?
- 6. Should the impact on a child's opportunities for adoption be taken into account in determining whether to communicate unverified suspicions?

III. Genetic Testing and the Duty to Disclose:

An area of growing concern advocated by some writers is requiring genetic testing as part of the adoption evaluation.

Questions for consideration:

- 5. Should agencies be willing to conduct pre-symptomatic genetic testing of apparently healthy children?
- 6. To what extent should decisions about pre-symptomatic genetic testing take into account the interests and rights of the child?
- 7. What the implications for children when pre-symptomatic genetic testing reveals genetic disposition for significant and non-treatable diseases?
- 8. What are the implications for siblings when one child is found to be genetically desirable and the other is not and decisions in regard to adoption are made on that basis?

IV. Disclosing Facts vs. Interpretative Information:

This issue examines the concern of adoption professionals who desire to communicate full information, but don't know whether or how to <u>interpret</u> information about background facts.

V. The Duty to Provide Updated Information:

Agencies can face a critical question regarding communication of information to the family after finalization. No state currently imposes this as a legal duty.

Questions for consideration:

- 3. Should agencies automatically communicate any information provided to them after the adoption has been finalized?
- 2. Should decisions to communicate updated information depend upon the nature of the information?
- 3. Should agencies have a policy of routinely disclosing any updated information to adoption families or just informing them that new information is available to them at their request?

Information that must be provided to foster parents:

- Any pertinent information about the child which may help the foster parent make an informed decision about accepting the child, such as behaviors and behavioral problems that may be expected, and recommended methods of handling the child's problems; history of maltreatment, special needs, service and educational needs, and plans to meet those needs; type of school the child will attend, child's visitation schedule with parents, and the substitute caregiver's responsibilities.
- For children who have been adjudicated delinquent for the commission of violent acts, a written report must be provided to the foster parents. The report must include a social history, a history and description of violent acts committed by the child, and psychological or psychiatric assessment conclusions and recommendations. If records pertaining to the adjudication of a child as delinquent have been sealed, the agency must provide a written statement to the foster parents regarding the sealed records.
- If, at the time of foster care placement, a psychological evaluation has not been conducted on a child who was adjudicated delinquent, the agency placing the child must conduct a psychological evaluation within 60 days of placement and must provide a report of the assessment conclusions and recommendations to the foster parent.

WHY IS BACKGROUND INFORMATION IMPORTANT?

Short/Long term need for adoptive parents:

1. To answer child's questions honestly and truthfully. Adopted children begin very early in life to ask questions of their adoptive parents. From the most innocent question – "Did I grow in your tummy?" to "Tell me why my birth mother really got rid of me," presents challenges to parents. It is important for the parents to have a firm grasp and



understanding of the details of the child's life so that, age appropriately, they can respond.

- 2. To begin to understand the impact of the trauma and neglect the child has experienced and its relationship to behavior, growth, and family attachment. Neglect, abuse, trauma all impact a child's growth, development and ability to form relationships. It is essential that adoptive parents know the child's history so that they can assess their own expectations and respond with appropriate structure, positive parenting skills and empathy.
- 3. To be able to fill in the gaps in the child's memories both pre-verbal and verbal periods in his/her life. Dr. Randolph Severson, an adoption counselor comments about the results of the lack of memory for an adopted child:

"Many adoptees come to me as adolescents or beyond, saying they feel like a walking time bomb ready to go off. This happens often in those who were under the age of six when the abuse or trauma occurred. They have not seen their family of origin since that time and because of their young age, they do not have any context for relating to persons outside the memory of the abuse.

Life is a continuum of human experience, and the abusive event was so overpowering. It is their only memory from which they can develop a sense of identity and connection to their past from a historical context.

As adoptees move through their teen years and attempt to fill in the gaps of their memories and attempt to develop an identity, two issues present themselves: First, they don't have much memory to serve them and second, what memory they do have is often traumatic and even horrifying."

Dr. Severson uses "explaining therapy": giving adopted persons as much information as possible such as factors that contribute to the intergeneration patterns of abuse, social/economic influences and the psychological makeup of their birth family. Going back to an agency and getting as much information as is relevant is essential.

This rescue work done for the maturing adoptee would not be necessary if adoptive parents were provided with the knowledge of their child's past and the skills to relate that past to their child.1

Short/ Long term need for Adoptee - Why Do Children Need to Know the Facts?

♦ Magical Thinking/Guilt: Some children develop the perception that they are responsible for what happened to them. Young children believe that if one event happened after another event, the first event caused the second. If a child cried and dad hit mom, the child feels responsible. This is what Lois Melina and others in the field call magical

> thinking. Children can develop a deep sense of quilt and shame as they interpret their life circumstances to be their fault.



◆ Unrealistic Fantasies: Without a knowledge of the truth regarding a child's adoption status and the circumstances surrounding the plan, a child can develop unrealistic fantasies involving birth parents, former foster parents, and his/her new adoptive family.

Good Mom and Bad Mom - Unable to deal with the negative emotions regarding his birth mother, a child develops a fantasy that the birth

¹ Schooler, J. (1995). Searching for a Past. Colorado Springs: Pinon Press.

mother is the kind, giving mother, and that foster or adoptive mother is the mean, abusive, scary mom.

- Good memory turns bad All children who must relinquish their first love (a birth mother or foster mother), risk a particular problem of the fantasy life: that first attachment, which was good in reality can turn bad in memory. A happy memory of a loving relationship with a foster parent can be seared as a child breaks that attachment and moves into the adoptive home. The pain of separation and loss creates a fantasy that indeed this loving person, was not that in reality. The lost person becomes, in the child's mind (fantasy), mean and rejecting.
 - ◆ **Divided loyalties:** If communication about adoption is not part of the adoptive family life, a child can develop confusion and conflict when emotions about birthparents remain, and new emotions regarding the adoptive family emerge. One youngster whose family did not discuss any adoption-related issues, blurted out one day to his adoptive parents "What do I do about you? I still love my birth mom and dad. What do I do about how I feel about you?" This family needed to share the facts regarding his adoption and also assure the child that it is possible to love more than one set of parents.
 - ◆ Identity Confusion: Establishing one's identity is not something that happens only during a certain period in one's life. According to author and adoption therapist, Dr. Joyce Maguire Pavao, "identity issues are an on-going process, they just don't start in adolescence. However, the teen years are certainly the major developmental zone for identity formation. It is true every young person is trying to figure out who he is not and who he is. He is trying to play different roles, experiment with different looks and figure out who he is along the way."

Continuing, Dr. Maguire Pavao said, "I think that for adoptees, especially when there is little to no information about where they came from, there is an awareness that they don't really have the genetic information to do that kind of sorting out of their identity. They are basing it on their family of intimacy - their adoptive family, but that's not necessarily where their abilities, interests and traits have come from." For some, the struggle for identity brings about major behavioral changes.

Settling one's identity is more difficult for an adopted teen. "For most children, Dr. Maguire Pavao offered, "the people around them are mirrors on which they measure themselves, until the adolescent years. At that point they look in the mirror and see themselves. They become more and more aware of how different they are. I think it is a complicated process for adoptees during the teen years. It is at this point that they begin to realize that they do not know another person in the world genetically related to them."

Fears and Unanswered Questions about Genetics and Medical History: Having little or no knowledge about one's genetic background and/or medical history can add to the sense of disconnectedness, which will be discussed next. One adoptee summed up the feeling like this:

"Where did I get my red hair? What nationality am I? What kind of body am I growing into? What talents or special skills are in my family line? What hidden illness may show up in my life? All these questions follow me as I move into adulthood, and no one has an answer. I feel like I am walking around with gaps and holes in my life which I cannot fill without answers."

- Feeling Disconnected: Having little or no information about one's past does create for many a deep and pervasive feeling of disconnectedness, of having a piece of themselves missing and incomplete. Many adoptees feel an extreme sense of sadness, pain, and confusion. There is a sense of unreality, of not being born properly...not being real...not being a part of society. Another term for this sense of disconnectedness is genealogical bewilderment. Providing an adopted child information about his birth family, the circumstances of the adoption, and any other pertinent information can do much to alleviate the sense of disconnectedness.
- ◆ Fears of Future Abandonment: A core issue for adopted children which follows them into adulthood is the fear of abandonment. A child's perception of her adoption is that she was abandoned. This perception creates fears as she moves into relationships outside of the adoptive family; such a fear also creates stress within the family as the growing child tests the family's commitment.
- ◆ Lack of Trust in Authority Figures and Control Issues: For children and teens to develop a sense of trust within their family, they must feel that issues of importance to them are shared honestly. A study conducted in 1983, of adults who were adopted as older children revealed that much of their discontent came as a result of never being consulted about what was happening in their life, being moved with little or no

preparation and finally, never being asked about their feelings. All of those in the study felt an incredible lack of control, and the consequences of that powerlessness have followed them into adulthood. Adoptees also must know that talking about those issues openly and freely is permitted in their adoptive home. This awareness, along with the opportunity to be a part of the major decisions made for them will add to their much-needed sense of control. (Adapted from work by Lois Melina and Dr. John Powell Young)

◆ Self-Esteem/Shame: If adopted children and young adults have little or no information about their history, they may assume that this information is purposefully withheld because it is negative or shameful. Adopted persons without well-documented information have also been known to "create" information through fantasies, and this fantasy is very often more negative than the reality.

INFORMATION NEEDED TO PREPARE A CASE FOR ADOPTION

Child-Specific Descriptive Information

- Photographs, Videos
- Personality, including positive characteristics
- Cultural, ethnic, racial background
- Religious experiences, preferences
- Likes/Dislikes
- Special hobbies, skills, interests
- > Readiness for adoption (understanding, feelings, preparation)

Prenatal and Neonatal Information

- Course of pregnancy and delivery, including any complications
- Drugs, medications or alcohol taken by the biological mother during pregnancy
- Results of any testing, screening completed after birth for either child or mother, including drug toxicology, PKU, etc.
- Neonatal development, including complications and treatment

Child's Medical History

- Findings from most recent physical exam
- Immunizations
- Childhood illnesses
- Serious illnesses
- Surgeries
- Hospitalizations

- Chronic Medical Conditions or risk factors (ex: diabetes, Sickle Cell Anemia)
- Handicapping conditions or risk factors (ex: mental retardation, Spina Bifada, Cerebral Palsy, etc.)
- Genetic influences
- Identification of medical professionals/facilities involved with care and treatment
- Resources for further information

Child's Developmental History

- Early milestones and subsequent development: motor, speech and language, toilet training, feeding
- Developmental testing results, if any
- Identification of developmental services/professionals involved
- Resources for further information

Child's History of Abuse and Neglect

- Incidents of physical or sexual abuse, neglect or emotional maltreatment experienced by the child prior to placement
- > Abuse or neglect experienced while in placement

Child's Placement History (Child's Placement Trail)

- Reason for initial placement
- Listing of all out-of-home placements, dates
- > Significant events in each placement
- Adjustment in each placement
- > Reasons for moves from one placement to another

Child's Relationships

- Identification of past and current significant relationships
- Attachment history (primary attachment figures)
- Information regarding capacity to attach

Child's Psychological and/or Psychiatric History

- > Temperament
- > Response to stress
- Emotional or behavior problems, current and in the past
- Behavior that has been harmful or dangerous to others or to self
- Counseling or mental health treatment received
- Psychological or psychiatric evaluations, results
- Mental Health, psychological, psychiatric professionals who have provided evaluation or treatment
- Resources for further information

Child's Educational History

- Current school attendance, grade
- Schools previously attended
- Special Education services, current or previous
- Current and previous IEP or 504 documents, if applicable
- Academic Performance
- Behavior Issues
- Extracurricular activities, interests, awards
- Teacher comments
- Identification of schools/teachers or other professionals involved
- Resources for further information

Siblings

- Names, ages
- Current living situation
- Significant conditions or issues
- Special abilities, strengths
- History of relationship/frequency of contact
- > Plans for continuing contact

Birth Family Information

- Photographs (provided only with permission of birth parents in voluntary surrender cases unless child had pictures in a lifebook prior to the surrender; in cases of involuntary termination of parental rights, pictures do not require permission of birth parent for release to adoptive family)
- Non-identifying descriptive information
- Physical characteristics
- Marital status
- Cultural background, including race and ethnicity
- Religious background, preferences
- > Extended family information, involvement
- Special abilities or interests
- > Education, including any special education services
- Employment
- Social Problems
- Medical History
- Chronic Illness
- Handicaps
- > Emotional/psychiatric problems
- Drug/alcohol/tobacco usage
- View of Adoption, including preferences regarding openness, future contact

> Closure with child

Known Gaps in Information

- > Unknown parents
- Missing agency documentation
- > History of many moves by family, multiple agency involvement

INFORMATION NEEDED TO PREPARE A Case for Adoption

Child-Specific Descriptive Information

- Photographs, Videos
- Personality, including positive characteristics
- Cultural, ethnic, racial background
- Religious experiences, preferences
- ➤ Likes/Dislikes
- Special hobbies, skills, interests
- Readiness for adoption (understanding, feelings, preparation)

Prenatal and Neonatal Information

- Course of pregnancy and delivery, including any complications
- Drugs, medications or alcohol taken by the biological mother during pregnancy
- Results of any testing, screening completed after birth for either child or mother, including drug toxicology, PKU, etc.
- Neonatal development, including complications and treatment

Child's Medical History

- Findings from most recent physical exam
- Immunizations
- Childhood illnesses.
- Serious illnesses

- Surgeries
- Hospitalizations
- Chronic Medical Conditions or risk factors (ex: diabetes, Sickle Cell Anemia)
- Handicapping conditions or risk factors (ex: mental retardation, Spina Bifada, Cerebral Palsy, etc.)
- Genetic influences
- Identification of medical professionals/facilities involved with care and treatment
- Resources for further information

Child's Developmental History

- Early milestones and subsequent development: motor, speech and language, toilet training, feeding
- Developmental testing results, if any
- > Identification of developmental services/professionals involved
- Resources for further information

Child's History of Abuse and Neglect

- Incidents of physical or sexual abuse, neglect or emotional maltreatment experienced by the child prior to placement
- > Abuse or neglect experienced while in placement

Child's Placement History (Child's Placement Trail)

- > Reason for initial placement
- Listing of all out-of-home placements, dates
- > Significant events in each placement
- Adjustment in each placement
- Reasons for moves from one placement to another

Child's Relationships

- Identification of past and current significant relationships
- Attachment history (primary attachment figures)
- Information regarding capacity to attach

Child's Psychological and/or Psychiatric History

- > Temperament
- Response to stress
- Emotional or behavior problems, current and in the past
- Behavior that has been harmful or dangerous to others or to self
- Counseling or mental health treatment received
- Psychological or psychiatric evaluations, results
- Mental Health, psychological, psychiatric professionals who have provided evaluation or treatment
- Resources for further information

Child's Educational History

- Current school attendance, grade
- Schools previously attended
- Special Education services, current or previous
- Current and previous IEP or 504 documents, if applicable
- Academic Performance
- Behavior Issues
- Extracurricular activities, interests, awards
- Teacher comments
- Identification of schools/teachers or other professionals involved
- Resources for further information

Siblings

- Names, ages
- Current living situation
- Significant conditions or issues
- Special abilities, strengths
- History of relationship/frequency of contact
- > Plans for continuing contact

Birth Family Information

- Photographs (provided only with permission of birth parents in voluntary surrender cases unless child had pictures in a lifebook prior to the surrender; in cases of involuntary termination of parental rights, pictures do not require permission of birth parent for release to adoptive family)
- > Non-identifying descriptive information
- Physical characteristics
- Marital status
- Cultural background, including race and ethnicity
- Religious background, preferences
- > Extended family information, involvement
- Special abilities or interests
- > Education, including any special education services
- Employment
- Social Problems
- Medical History
- Chronic Illness
- Handicaps
- > Emotional/psychiatric problems
- Drug/alcohol/tobacco usage
- View of Adoption, including preferences regarding openness, future contact

> Closure with child

Known Gaps in Information

- > Unknown parents
- Missing agency documentation
- > History of many moves by family, multiple agency involvement

Case Example #1: Michael, age 2

Michael recently had his second birthday. He is a happy, outgoing toddler, who is very attached to his foster family. His birth mother tested positive for cocaine use at the time of his birth. Michael was a fussy infant and was slow in achieving some of his early developmental milestones. He said his first words at about 14 months, sat alone at eight months and walked alone at 15 months. He has been receiving early intervention services for the past year, and has made a good deal of progress, which has been confirmed by the recent developmental testing that is documented in the file. On average he is about three months delayed in speech and language skills as well as fine motor development, but is now on-target with gross motor skills. In fact, he has become very active and his foster mother has said she thinks he may be "hyperactive". Very little is known about Michael's birth family. He was placed in foster care at birth, and his mother has not visited, attended scheduled appointments with the caseworker or appeared for court hearings. She told the caseworker just after his birth that she had no family members who would be interested in caring for Michael. She did not identify his father

ala nor identity his famer.
What information is missing?
Is it possible that any of this information could be obtained? Where? How?
What gaps should be pointed out to prospective adoptive parents?

Describe any other unique considerations regarding disclosure in this case:

Case Example #2: Maria, age 12

Maria has been in foster care for the past six years. She initially entered care with three siblings due to concerns regarding physical abuse of the older children and neglect of Maria's special developmental and medical needs. Maria has mild cerebral palsy and functions in the moderate range of mental retardation. She is of Puerto Rican heritage. The agency record contains extensive information regarding her special needs, educational placement, and testing results. There is also a good deal of social and medical history and cultural information regarding her birth parents, who voluntarily relinquished permanent custody of Maria four years ago. Maria has occasional visits with a younger sister, who was adopted by relatives. Maria has had four foster placements. She has lived with her current foster family for the past two years and they are interested in adopting her. Maria has asked about her two older siblings repeatedly. It is known that they were adopted by a foster family, who has since moved out of state. Unfortunately, there are many gaps in the agency record. A worker who had the case for three years seldom recorded case notes. It is during this period that Maria's sisters were adopted, and their family moved away. Little was recorded regarding two of Maria's foster placements. The foster parents have asked whether Maria was ever sexually abused, due to sexual play they have noted with dolls. The available records make no mention of abuse or sexual acting out, either in her birth family or in foster care.

What information is missing?

Is it possible that any of this information could be obtained? Where? How?

What gaps should be pointed out to prospective adoptive parents?

Identify any other unique considerations regarding disclosure in this case:

Case Example #3: Gary, age 13

Gary is a guiet teen who has been adjusting well in his current foster placement of two years duration, where he is the only child in the home. He initially entered foster care four years ago due to physical abuse and neglect (inadequate clothing, food and supervision). Permanent custody was granted to the agency one year ago. Gary has lived in three foster homes. The first was an emergency placement of one month's duration. The second home was a placement of nearly two years, and he has lived with his current family for two years. He was precipitously removed from the previous foster home after the foster parents reported that he tried to "lure" their grandson, two years younger, into sexual activity. This was the last and most serious of an ongoing series of rather vague complaints by the foster family regarding Gary's behavior and apparent lack of interest in "fitting in" with their family. The previous foster family soon moved away and has been unresponsive to attempts from the agency to obtain details about the sexual incident. There has been no evidence of inappropriate sexual behavior in the current home, and his foster parents say they doubt whether the initial report was even true. They like Gary and report that he has settled in well with their low-key lifestyle. He is especially close to his foster father. Gary has been involved in counseling since the alleged incident, but his therapist says he has been steadfast is denying it, and in fact, refuses to discuss whether he may have been sexually abused in his birth family. The case record contains extensive birth family social and medical history, medical records, school and counseling reports.



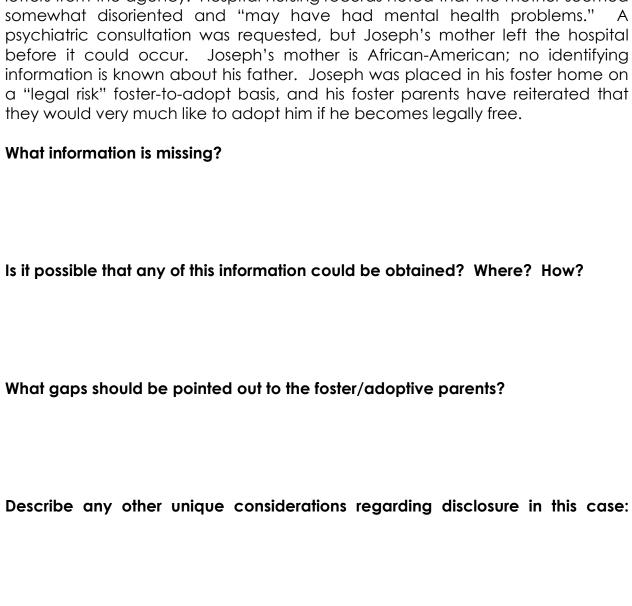
Is it possible that any of this information could be obtained? Where? How?

What gaps should be pointed out to prospective adoptive parents?

Describe any other unique considerations regarding disclosure in this case:

Case Example #4: Joseph, age 4 weeks

Joseph has been in foster care since discharge from the hospital at three days of age. He was born at full term, and the delivery was without complications. Newborn toxicology screening indicates no evidence of drug exposure. His APGAR scores were 8 at one minute, and 10 at five minutes. His foster parents report that he is eating and sleeping well. He is alert and responsive and seems to enjoy being held and rocked. Joseph's mother abandoned him in the hospital, signing herself out one day after his birth. She has not responded to letters from the agency. Hospital nursing records noted that the mother seemed somewhat disoriented and "may have had mental health problems." A psychiatric consultation was requested, but Joseph's mother left the hospital before it could occur. Joseph's mother is African-American; no identifying information is known about his father. Joseph was placed in his foster home on a "legal risk" foster-to-adopt basis, and his foster parents have reiterated that they would very much like to adopt him if he becomes legally free.



Case Example #5: LaKeisha, age 3

LaKeisha is a very active, talkative toddler. She is living in foster care with her only sibling, a sister, age six. Permanent custody was recently granted to the agency; a prospective adoptive family for the two girls has just been identified. LaKeisha entered foster care at the age of seven months, when her older sister was physically abused by her mother's boyfriend. There is no evidence that LaKeisha was abused in her birth home, but neglect is suspected. At the time she entered care, she was found to be several pounds underweight, had not yet received any immunizations, and was limited in her responsiveness to adults. She was also somewhat developmentally delayed in both motor development and language. She vocalized or "babbled" very little and did not sit alone for several weeks after she entered foster care. She began walking at about 15 months. She quickly adapted to her foster home, and appears to have a strong relationship with both her foster mother and her sister. Her foster mother has cared for more than 100 children in the past 20 years, and feels that LaKeisha is "normal in every way" and has fully "caught up" in her development. LaKeisha has not been involved in early intervention programming and has not had developmental testing. She spends much of her time playing with her sister and with the two other pre-school foster children currently in the home. The agency has extensive involvement with LaKeisha's birth mother and her extended family, and thorough family history information is contained in the case record. Notable history information includes several deaths from breast cancer in the extended family, and the death of the maternal grandfather from alcoholismrelated liver disease.

What information is missing?

Is it possible that any of this information could be obtained? Where? How?

What gaps should be pointed out to prospective adoptive parents?

Describe any other unique considerations regarding disclosure in this case:



Gathering Background Information: It's a Team Effort

Why??

In child welfare practice today, there is increasing emphasis on *concurrent case planning*, working on two goals simultaneously in seeking permanency for children. Our first permanency alternative for children who are removed from their homes continues to be reunification with the primary family. In the past, child protective services workers worked on reunification efforts for months or years prior to even considering other permanency alternatives. Today's worker has a back-up plan, a concurrent plan, for other permanency alternatives (often kinship placement with guardianship or adoption) when children cannot be safely reunited with their primary families. A worker utilizing concurrent case planning prepares cases for adoption from the onset of the case, thereby drastically reducing time children wait for permanency if the agency does move forward with adoption planning. Concurrent case planning calls for a team effort by intake workers, child protection workers, and foster and adoption workers in the preparation of children for adoptive placement.

Children need information, pictures, mementos to:

- understand what has happened in their lives and why;
- connect them to their past;
- assist in the establishment of identity as they mature;
- maintain attachments and positive memories;
- have medical information/history for health care practitioners;
- > enhance self-esteem through positive feelings about the birth family.

Adoptive parents need information to:

- make a more informed decision about their ability to parent a child;
- > make good decisions about the level of openness in their adoption that would be comfortable for both the child and themselves:
- have medical information/history for health care practitioners;
- > help the child understand what has happened in his life and why;
- foster positive self-esteem in the child;

preserve permanency through empathy, better decision-making, and preventive post adoption services.

What??

The following **information** could be invaluable to the child and/or adoptive family:

- Ethnicity/ Culture of both sides of the birth family
- > Developmental history of the child
- Placement history of the child, including informal placements with relatives or friends that occurred prior to agency involvement
- Health information regarding the child
- Health information regarding the birth family
- > Religion of birth family and other caretakers of the child
- Information regarding all siblings, including those who have been previously adopted
- Information about child's attachment figures
- School adjustment/ assessments/ special programming
- Psychological information regarding child and birth parents
- Social situation leading to termination of parental rights
- Child's prenatal exposure to drugs/alcohol
- ➤ History of abuse/neglect
- History of mental illness, mental retardation, depression, addictions in birth family
- Cognitive functioning of birth family
- Special talents of child, birth family members
- Wishes of birth family members for the child's future
- Employment/ educational level of birth parents and grandparents

Pictures, Videotapes

- Baby pictures, pictures of child at earlier developmental stages
- Pictures of birth parents, siblings, grandparents, other relatives
- Earlier foster or kinship placements
- School pictures of self and friends
- > Pets

- Earlier homes
- Schools attended
- Significant events

Mementos

- Small family heirlooms (e.g. grandfather's watch)
- Lock of baby hair
- > Baby blankets or other items made by family members or foster parents
- Gifts from birth or foster family
- Souvenirs from events or places important to the child
- Awards or certificates earned by child for school, sports, scouts, etc.

Where??

Caseworkers should ask the following individuals involved with the child for information, pictures, or mementos that can be shared with the child:

- Birth parents
- Birth grandparents
- Aunts, uncles, older siblings of the child, other relatives
- Earlier caregivers (kinship or foster)
- Earlier school placements
- Earlier caseworkers, at the time of case transfer
- Other service providers working with the family
- Foster parents of other siblings

Information should be documented on the Child Study Inventory and in the case dictation.



(in separate file on website)

INTENSIVE RELATIVE SEARCH Contact INFORMATION

Potential Relationships and/Or Sources of information

Date of File Review:	Child's Name:
Reviewed by:	Child's Age:
	Child's ID#:

Name:	Relationship to Child:	Quality of Relationship	Dates Appeared in File:	*Contact Information:	Follow Up Ideas:

^{*} Phone number, last known address, person this individual was in the company of or is known to.

Contacts may be found in many places – for example a birthday card, court appearance, letter, reference in case

note.
Additional Information Provided:
 Placement History Printout Case Manager History Printout Other (specify):
Notes:
Louisell, Mardith J. (2008.) Six Steps to Find a Family: A Practice Guide to Family Search and Engagement. The National Resource Cente for Family-Centered Practice and Permanency Planning at the Hunter College of Social Work. http://www.hunter.cuny.edu/socwork/nrcfcpp/downloads/SixSteps.pdf

FAMILY FINDING SEARCH TOOLS²

FREE SITES

Criminal Records

Family Watchdog (www.familywatchdog.us) National sex offender registry

Federal Bureau of Prisons (www.bop.gov)

Can **search for Federal inmates** incarcerated from 1982 to the present.

The search page is here: www.bop.gov/iloc2/LocateInmate.jsp

Megan's Law (www.meganslaw.ca.gov)

VINElink (www.vinelink.com)

VINELink is the online version of VINE (Victim Information and Notification Everyday), the National Victim Notification Network. VINE is a service through which victims of crime can use the telephone or Internet to search for information regarding their offender's custody status and register to receive telephone and email notification when their offender's custody status changes. If the inmate for whom you're searching is in custody at a corrections facility that participates in VINE, you should be able to locate custody information on VINELink.

Email

About.com: Top 9 Tips to Find Anybody's Email Address

(http://email.about.com/od/addresssearchtip/tp/find_email.htm)

In addition to the actual tips to look for email addresses, there are multiple links to other search sites, and a list of related About.com articles.

Genealogy

Access Genealogy (www.accessgenealogy.com)

Search a wide variety of genealogical records

Indian Tribal Records (www.accessgenealogy.com/native)

The Native American Rolls (www.accessgenealogy.com/native/rolls.htm) contain records related to treaties, trade, land claims, Native American removal to Oklahoma, allotments, military affairs, military service and pensions, trust funds, and other activities.

² California Youth Permanency Project, Seneca Center for Family Finding and Youth Connectedness—adapted with permission

Latter Day Saints (LDS) Genealogy Search (www.familysearch.org)

Genealogical records from the Mormon Church

General Search Engines

Google (www.google.com)

General search engine. Try searching on a person's name. Sometimes you can find a current address, genealogy or other interesting information on individuals online. If you Google an address, you can obtain a map and/or satellite view of the location. For more in-depth searching, try Google Advanced Search (www.google.com/advanced_search?hl=en)

Mamma.com

Another general search engine; good for preliminary information

Obituaries

Obitsarchive.com (free/paid)

Newspaper obituary search. Searching through ObitsArchive.com's vast collection of obituaries and death notices is free and unlimited. Users then pay to view a specific item.

Obituaries.com

Links to obituary listing in the United States and Canada

People Finders

123people.com

People finder which searches "images, videos, phone numbers, email addresses, social networking and Wikipedia profiles and much more." Also does international searching.

Classmates.com

Searches high school yearbook/class information

Federal Parent Locator Service (www.acf.hhs.gov/programs/cse/newhire)

Site for public use. This website is sponsored by the Administration for Children and Families. Los Angeles County accesses this site through their District Attorney's office. The site includes information from the child support services system, and the social security death index.

iSearch (free/paid) (www.isearch.com)

People finder with the option to search by screen name, in addition to name, email, and phone. Initial search is free; pay to view more detailed information supplied by Intelius.

Jigsaw (free/paid) (www.jigsaw.com)

Provides professional contact information, including names, titles, email addresses. Obtain information by purchasing it or by submitted others' contact information.

Peoplefinder.com (free/paid)

This site is run by Intellius. Preliminary information is free; additional information costs (through

Intellius)

Pipl.com

People finder using more robust technology to search the "deep web," a vast repository of underlying content, such as documents in online databases. According to Pipl.com, general-purpose web crawlers cannot reach the deep web. Its content is estimated at 500 times that of the surface web, yet has remained mostly untapped due to the limitations of traditional search engines.

Privateye.com (free/paid)

The free portion lists places that people have worked, towns they have lived in, and possible relatives. The paid portion lists people the search subject has lived with.

Spock.com (free/paid)

People finder. The free portion searches social networking sites and the Web. Includes links to other sites.

Wink (www.wink.com)

People finder for the US, Canada, and UK. Includes email search and search of social networking sites such as Facebook and MySpace. Also search for people by school, interests, career, photo, etc.

Zabasearch (free/paid) (www.zabasearch.com)

Search by name or phone number. Initial search is free; fee-based (through Intelius) for additional information.

Public Records/Vital Statistics

blackbookonline.info (free/paid) (www.blackbookonline.info)

This site includes links to several other search engines, including state, local, and federal information.

Crimetime.com (free/paid)

Geared for private investigators, this site includes links to public record searches and other information.

Marriage Records (http://www.knowx.com/mr/search.jsp?userid=guest&password=welcome) Includes records for several states, including Florida, Nevada, Ohio, and Texas, and portions of California.

Rootsweb Death Records (www.rootsweb.com)

Site also has links to several other genealogical/public records sites

- Social Security Death Index (http://ssdi.rootsweb.ancestry.com/)
- California Death Records (http://vitals.rootsweb.com/ca/death/search.cgi)
- Kentucky Death Records (http://vitals.rootsweb.com/ky/death/search.cgi)
- Maine Death Records (http://vitals.rootsweb.ancestry.com/me/death/search.cgi)
- Texas Death Records (http://vitals.rootsweb.com/tx/death/search.cgi)

Note: The California records have more information than the Federal records, such as, birth state, mother's maiden name, father's name.

SearchSystems.net (free/paid) (www.searchsystems.net)

Very large public record directory online. Provides links to over 35,958 searchable public record databases, many of which are free. A good site for finding municipal records and death certificates. SearchSystems also offers a premium service, which is charged on a per-search basis: \$29.95/year or \$9.95/month. Recommended by Kevin Campbell.

Social Security Death Index (http://helpdesk.rootsweb.com/ssdi)

This link gives an introduction and directions on how to use the site. To bypass the instructions and go directly to the search page, go to: http://ssdi.rootsweb.ancestry.com/.

SSN Allocation Table (www.ssa.gov/employer/stateweb.htm)

Shows the first three digits of assigned SSNs and the state or U.S. Possession in which the SSN was issued.

Social/Professional Networking

Facebook (www.facebook.com)

Social networking site

LinkedIn (www.linkedin.com)

Professional networking site. Although it is free, you have to join to use the site.

MySpace (www.myspace.com)

Social networking site

Spokeo (www.spokeo.com)

Social-networking aggregator; searches 43 major social networks. According to their website, "Spokeo is a friend finder/tracker that automatically brings you friends' updates across the Web."

Telephone Directories/Reverse Lookup

411.com

This site has both reverse phone and reverse address lookup. You can also search for neighbors.

Argali White & Yellow (free/paid) (www.argali.com)

Directory lookup that searches and aggregates results from several web-based phone and email address databases, along with several other directory searches. Requires software download. Free version allows ten searches per month; paid version allows unlimited searching and is \$29.95 per user per year with quantity discounts.

Anywho.com (free/paid)

This is AT&T's online directory; advanced searches are done through Intellius. The site includes white pages and a people finder. Using the free portion, you can find towns and sometimes ages.

Area Codes (www.allareacodes.com)

Look up area codes for all the states, cities, and other areas serviced under the North American Numbering Plan, including Canada.

MSN white pages (http://msn.whitepages.com)

White pages search, including reverse phone and address lookups

Superpages.com

Site includes yellow pages, people finder (including reverse phone number), and business search using a map.

White Pages

Superpages.com Ultimate White Pages (www.theultimates.com/white) Whitepages.com

Yellow Pages

Superpages.com Ultimate Yellow Pages (www.theultimates.com/yellow) Yellow.com Yellowpages.com

SUBSCRIPTION SITES

Accurint (www.accurint.com)

A division of LexisNexis. Key features include:

- People Search... locates neighbors, associates and possible relatives.
- Phones Plus... tracks down phone numbers not typically available to increase your chances of finding your subject. Access over 268 million non-directory assistance records, including cell phone numbers.
- People at Work... links more than 287 million individuals to businesses and includes information such as business addresses, phone numbers, and possible dates of employment.
- RelavintTM... visually links individuals with businesses, addresses, relatives and vehicles.
- Advanced Person Search... helps find individuals when only old or fragmented data is available.

Ancestry.com

Contains immigration, military, census, birth, marriage, and death records; Jewish family history; African American family history

Offers 2 week free trial

Pricing for U.S. only/worldwide searches: Annual membership: \$12.95/24.95 month Three months: \$16.95/27.95 month

Monthly: \$19.95/29.95 month

Entersect (www.entersect.net)

Entersect Public Records (EPR) offers searches on a variety of public records with as little

information as a name, social security number, or cell phone number.

Individual searches range from \$1 to \$21, plus a one-time application fee of \$49 No monthly service fee or minimum usage fee

Global-Locate (www.global-locate.com/v4.1/page.asp)

Global-Locate, by Integrity, provides accurate address, phone and identification details on citizens of 207 nations. Powered by worldwide Government issued ID data, Global-Locate can help determine a current address, an active landline phone number, a cell phone number or an unpublished number, plus identity and age verification information such as date of birth, passport number or government-issued ID number, where available. Global-Locate was designed specifically for use by government, law enforcement and child welfare agencies to help locate individuals world-wide.

Monthly fee of \$199/user for unlimited access; site pricing available.

Intelius (www.intelius.com)

People search, as well as background and criminal check

Per-use fee for each report requested (\$1.95 for a people search report)

24-hour pass for unlimited search is \$19.95

Quantity discount pricing is available; contact Intelius for more information.

Merlin Information Services (www.merlindata.com/databases.asp)

A wide variety of searches available, including address, phone, social security number, court records, births, deaths, marriages, etc.

Cost per search ranges from 25 cents to \$17.50, depending on the type of search People Finder unlimited for one user - \$999.00 annually

Obituaries (www.obitsarchive.com)

Contains archived obituaries from 87 different newspapers in California alone There are also archives available from all other states. If your local newspaper is not included here, check with them to see about adding a subscription to their online archives, if available. Search by name, publication date, or obituary text.

Single Article: \$2.95

100 articles every 30 days: \$19.95 (billed monthly)

The Work Number (www.theworknumber.com/socialservices)

The Work Number is an income and employment verification service used by social service workers nationwide to determine eligibility for TANF, food stamps, low-income housing, welfare-to-work programs, cash assistance, Medicaid and other benefits. It's also used by Title IV-D directors to find child support evaders in cases where court orders have been established. The fee for a pay date summary (SSN Search) is \$3.00; the fee for an Income Verification is \$6.50.

US Search (www.ussearch.com)

Provides a variety of search services on address, phone, social security number, email address, maiden name, criminal records, and court reports.

Cost per search ranges from \$1.95 (simple name and address) to \$295.00 (due diligence background check with criminal search)

OTHER SOURCES

- Absent Parent Department
- Assessors Office/assessors records
- Child Support
- County/State Resources
 - SACWS/Children Services Case File
 - o History in hard case file
 - County Automated Welfare System
 - Statewide Child Support System
- Coroner
- County jails
- County vital statistics
- Department of Justice
- Bureau of Motor Vehicles (BMV) records
- District Attorney's office
- Eligibility Worker
- Emergency contact information card from school
- Family members
- Family Services
- Friends
- Immigration Services/Consulates
- Interviewing the child
 - Use this database to look up SSI information, death information, social security numbers, and search for addresses
- Medical records (death code)
- Military agencies (Social and Family Services Departments)
- Obituaries (funeral homes)
- Parole and Probation
- Postmaster
- Red Cross
- Registered voters
- Tribes
- White & yellow pages (work phone)

GATHERING BACKGROUND INFORMATION: TIPS FOR WORKING WITH RELUCTANT BIRTH PARENTS

By Cheryl Reber, Maureen Heffernan, and Jayne Schooler

A. Affirm the parent/child relationship with a sensitive and respectful invitation for a meeting.

"Hi, I'm Kathy and I'm working with your son, Jamie. He really misses you. We were talking about you on Wednesday, and he has some questions. I wanted to get it right – it is important to Jamie. Could you meet with me to get this information together for him?"

B. Bring a gift made by the child.

During an earlier visit with the child, have him/her draw a picture to send to their parent(s). When you have the first information-gathering meeting with the birth parent, give him/her the child's drawing. Now you and the birth parent(s) are connected through the child. The worker may want to offer bringing a current photo of the child as an additional or alternative suggestion to the birth parent.

C. Distance yourself from the court proceedings, affirm their situation, and acknowledge their loss.

"I don't know a lot about what is happening in court, but your worker told me that you really love Jamie. Jamie tells me good things about you, too. I know what is happening is really hard for you. You and I can't change any of that, but what we can do is make sure Jamie has what he needs to be happy and healthy."

D. Inquire about the child's likes and dislikes.

"What are some of Jamie's favorite foods, his favorite TV program? What does he like to do for fun?"

A favorite question that always makes the parent feel like the worker is on their side is – "Kids always like to know why they have the name they do. Why did you pick the name 'Jamie' for your son?"

E. Recall pleasant, happy, important memories about the child.

"Can you tell me a funny story about when you were pregnant with Jamie or when he was very little? What kind of things did he do to make you laugh? What very special memory do you have of a birthday or holiday with Jamie that would be important to help him remember?"

F. Recall pleasant, happy, difficult, or important memories about the birth parent's (parents') childhood experiences.

"Kids almost always want to know what their mom and dad were like when they were their age. What do you want me to tell Jamie about when you were young?" (Keep a pad and pen close so that each word the parent shares can be recorded.)

G. Ask the more difficult questions.

At this point, it is time to begin asking the more difficult questions – like prenatal and postnatal history, extended family medical history, educational background, talents and interests...

H. Ask to borrow pictures and suggest the possibility of making a video.

Ask the parent for pictures of birthdays, holidays, of themselves, and of extended family members. Promise to have them copied and returned to them in 10 days. Some parents will jump at the opportunity to make a video. They will make an effort to have the tape just right – so you may have to practice with them. Tell them what things the child needs to hear such as:

- > They are doing ok
- > The child is loved
- The child will always be remembered
- > The child is wished well

Occasionally, parents cannot get the words together. You may have to ask questions and then have parents respond with a "yes" or "no." If they respond inappropriately, start over again, after telling them what they just said will not be helpful to their child.

I. Leave on a positive note that will keep the door open for a return visit.

- > Ask if they may be re-contacted if child needs more information;
- Ask them to contact you if they think of something they want the child to know.
- Be grateful on the child's behalf.
- Offer something in return such as updated information about the child, current pictures (make sure promises made can be promises kept)
- > Thank them and again acknowledge that you appreciate their time and effort in this difficult time.



Ten Principles of Adoption Presentation

The following are principles of presentation that will aid workers in sharing information with families:

- 1. Share the information incrementally. Do not save all the "bad" stuff until last.
- 2. Introduce prospective adoptive parents to other professionals/ child welfare team members that have worked with the child (prior to meeting him/her). These professionals should include:
 - a. Foster parents
 - b. School teachers/daycare providers
 - c. Therapists
- 3. Parents should be told information at least three times prior to beginning visitation. Parents hear different "pieces" at each telling.
- 4. Adults have different learning styles and should be told information in a variety of ways:
 - a. In writing
 - b. Face-to-face verbal communication
 - c. Record the telling session, either using audio or video recordings, so that the presentation can be replayed (the agency may keep a copy of the taping to protect their liability in case of wrongful adoption allegations in the future).
- 5. Employ active listening skills. Ask prospective adoptive parents questions that will provide you feedback on their understanding of the information shared with them.
- 6. Don't forget to share the positives regarding the child or birth family. Those are important details for future reference in talking with children about their birth

families.

- 7. Use caution in <u>interpreting</u> medical or psychological information to the adoptive parents. Refer parents to their own family doctor or other professional for such interpretation and prognosis.
- 8. Avoid "blind" presentations such as casual encounters in a restaurant or park, when the child has not been explicitly told of the meeting's purpose. Honesty and truthfulness should be at the forefront of this process. If families are unsure of their willingness to parent a child, or if a child has suffered earlier rejections, workers can use a video presentation of the child so that parents can view the child before a face-to-face meeting. If families decide they do not wish to proceed with placement after meeting or visiting with a child, the worker should explain to the child that the agency had decided to wait for a "better match." It is preferable that the child blame the worker or agency, rather than himself, for such a decision.
- 9. Allow private time for the parents and child during the presentation meeting. Whether the youngster is an infant or older child, the worker should plan time for the prospective parents and child to visit without agency scrutiny.
- 10. Avoid giving adoptive parents the message that a decision regarding placement of this child is expected or will be accepted "on-the-spot." Excitement and overanxiousness about the prospect of a child entering their family can obscure wise judgment. Give them a time frame that will allow a reasonable amount of time to process the decision. Inform them of what will be the next step in the process.

Case History: Talking About Adoption



Molly was born to a single woman addicted to "crack" who was unable to provide care for her infant daughter while using drugs. Further, the mother was supporting her habit through prostitution as the advanced level of her addiction made it impossible for her to maintain employment. While seeking drugs or "dates," the mother occasionally left her infant in the apartment alone. Neighbors heard Molly crying for long periods of time while the mother was unable to meet her needs. Finally, when Molly was eight months old, neighbors called the police to express concern about the baby's safety. The Children Services agency became involved, and Molly was placed into foster care.

The mother made little progress on her case plan for reunification; there were frequent drug relapses, and she often missed visits with her daughter. After 12 months of unsuccessful efforts toward the goal of reunification, Children Services filed a court case to terminate the mother's parental rights. Molly became legally free for adoption just after her second birthday, and her foster parents adopted her a month later.

The agency and adoptive parents determined that the level of openness in the adoption would be limited to periodic pictures and letters shared through the agency; the mother's behavior was erratic, and her associations could not be predictably safe for Molly or the adoptive family.

How would you explain this story to Molly as she grows up? What would you say to her at age three? Seven? Ten? Twelve?

The TRUTH

By Jayne Schooler

"The Truth and Nothing but the Truth"

Sharing with Children about Their Unpleasant Past: The Adoptive Parents' Challenging Task

"If we aren't straight with our children about their past, they will pick up on it and fantasize something that may be much worse." Carol Williams, University of North Carolina

Why is it difficult to do?

Sharing with a child about an unpleasant past is difficult for both workers and parents. The details seem far too painful. Yet, according to Claudia Jewitt, the missing pieces are often those pieces that make sense to the child and fill in the blanks.

"The information is a relief for these children," Jewitt says "because it takes the responsibility for what happened off the child. They need to know that they weren't placed for adoption because of something they did."

Knowing that it is the right thing to do, and knowing just how to do it are two different things. Just how does a worker or parent carry out this an unpleasant task?

Sharing about Abandonment

Adults abandon children when life circumstances become overwhelming. One thing a parent can point out, according to Jewitt is to ask the child, "Have you ever had a real hard thing to do? Did you get frustrated? What did you want to do?" "Leave it" is generally the answer. The child perhaps can relate to the emotion of frustration.

Points parents and workers can make:

- People abandoned children out of fear, confusion and frustration
- Children are hard to care for and some people can not handle the responsibility
- A child's behavior is not the cause of an abandonment
- Adoptive parents will not abandon the child in tough times

Sharing about Physical Abuse

A child is not slapped, screamed at, or hit because he is a bad child. He is treated that way because the adults in his life are out of control.

In helping a child to understand parental anger, Jewitt suggests to ask the child, "When you are angry, do you feel like hitting someone?" This question will help a child understand in a small way why people hit when they are angry, even though they know it is wrong.

Points parents and workers can make:

- When children are hit, the adult is out of control.
- Parents, often frustrated by life circumstances, take their anger out on their children, even when they know it is wrong.
- It is possible that their parents experienced the same trauma of abuse growing up, and it is the only way they know to handle their anger.
- What the parent does is not the child's fault.

Sharing about Sexual Abuse

Sexual abuse is a type of abuse that causes children to feel partially responsible. Perhaps the abuser indicated this to the child. An abuser

³³ Quoted from The Adopted Child, June, 1985. 2 Ibid.

perhaps told the child he wanted to be close to him in a special way, yet he knew it was wrong. The child often suffers with fear by keeping the secret and guilt after releasing the truth. Both those emotions must be recognized by parents and workers and addressed.

Points parents and workers can make:

- Sexual abuse is never the fault of the child
- The abuser touched you in ways that were not right, and he/she is totally responsible for their actions.
- The child was completely right in disclosing the abuse, even if the non-offending parent expressed anger or unbelief.
- The child may have feelings of anger and confusion that he/she should feel safe to express.

Sharing about Substance Abuse

Children who were placed for adoption may have vivid or vague memories of what life was like living with someone who abuses alcohol or drugs. Children need to have the opportunity to talk about their memories of not having food to eat, not having clean clothes to wear or a clean bed to sleep in. Children need to share their fears of the chronically absent, abusive or "spaced-out" parent.

Points parents and workers can make:

- You did not cause your parent's drinking or drug problem.
- Your parent acted like they did toward you because he/she was taking drugs or drinking too much.
- They did not have control over their problem, and you needed to be in a safe and secure place to finish growing up.

Sharing about Mental Illness

Claudia Jewitt says "children who are placed for adoption because of a parent's mental illness can be helped to remember or understand behavior that was not consistent with appropriate parenting." Perhaps the child remembers the parent being depressed...or observed rapid mood changes, making it hard to know what to do. Jewitt encourages adoptive parents or workers to help the child make the connection with their life

Gathering and Documenting Background Information --Ohio Child Welfare Training Program-- September, 98 experiences. "They may have been afraid of something that other people told them not to fear, or they may have had difficulty knowing if they were dreaming or awake."

Points parents and workers can make:

- Your parent was very upset in his feelings, and that kept him/her very confused. They couldn't make good decisions on how to take care of you.
- It was important that you could finish growing up in a safe home.
- Your parent had this problem before you were born.
- You didn't cause your parent's condition.

Sharing about Lawbreaking

Occasionally, children enter into the system, and eventually foster care and adoption, because their parent is incarcerated. Although this knowledge casts a shadow over the child's perception of his parent, it is important he knows the truth. Children need to understand that sometimes adults make bad decisions that have long term consequences. When their parent chose to break the law (and name the offense age-appropriately), he or she had to suffer long term consequences.

Points parents and workers can make:

- Your parent chose to break the law because he/she thought it would help him/her solve her problems. It did not.
- Your parent's decision resulted in his/her being sent to jail for a long time.
- Because they will be in jail for a long time, the court decided that it would be too long a time for you to be without a family.

Whatever the situation regarding a child's history, the truth is paramount. One adult adoptee, in learning of the criminal past of her parents said. "It is not a pretty truth, but at least it is the truth. Now I can go on with my life without the makebelieve."

4		
•	ı	nıa
	•	DIG

POSITIVE ADOPTION LANGUAGE Parenthesis Post Adoption Program

Words and phrases to watch for positive and negative connotations.

POSITIVE	NEGATIVE
Birthparent (father, mother) Biological (parent, child, ancestry) Woman (lady) who gave birth	Real parent Natural parent
Adopted person Adoptee Adult Adoptee	Adopted child (when speaking of an adult
Adoption Triad Adoption Triangle Adoption plan was made for The baby joined the family The older child moved in with his/her family An adoption was arranged for He/she was placed	Adoption Triad (when it applies to the negative connotation associated with triangulation) Adopted out Put up for adoption given away given up
Birth child	Their own child Their real children
To opt for, to take on, to choose, to continue Parenting	Keeping

POSITIVE	NEGATIVE
Born outside of marriage Born to a single person (Divorced Single, Never married, Unwed mother)	Illegitimate child Bastard Unwanted child
Termination of parental rights; unable to continue parenting (older child) Court termination	Gave up
Made an adoption plan Legally released Voluntary release	Gave away
My child	Adopted (when it is used constantly, it can become a label)
The waiting child Special needs child Child available for adoption	Hard to place child
Search Reunion Making contact	

- Language is important in describing adoption.
- Adoptees are sensitive to feeling different
- We want to try to avoid negative terms and use less judgmental language.
- How is language manifested in your own family? What does Grandma say? Peers? Outsiders?

PREPARING A CHILD FOR THE FUTURE

Guide to Your Child's History



Seven Reasons Why Children

Need Their Life History

by Dr. Denise Goodman, ACSW, LISW, PH.D

I don't have any memories of the important people in my past. I wonder if the important people in my past have any memories of me. An adopted teen

lifebook is a book that records a child's family and placement history. It is a tool that gathers information about a child's growth and development, feelings, ideas and hopes and dreams for the future. It is a vital resource in helping a child to understand the past and prepare for the future.

The Seven Reasons Why

- 1. Recreates child's life history. This is important, as many of our children have had very confusing lives. They have been in and out of care and shuffled between family members. Each child's reaction to the separation from the birth family presents its own set of unique individual responses. These painful feelings weave a common thread throughout the lives of older adopted children. For children whose memories of former relationships smolder vaguely in their minds, frequent themes revisit during the healing process. They need to have an accurate record of their past, because it will help them look forward to the future without fear.
- 2. Gives a child information about his or her birth family. Many foster and adopted children do not have a lot of information about their birth families. What did their parents look like? What talents did they have? What about their extended family? In fact, some kids have no information at all. Each of us has a "genetic road map", which is our parents. This "roadmap" helps us when we begin to develop our identity. We decide what traits we like and we keep them. The traits we do not like, we reject. Youngsters, who have no information, make it up and usually, it is negative. For kids who only have negative information about their parents, that is the only source they have to keep for their identity. Children need both positive and negative details about their birth family.

- 3. Gives reasons for placement. Frequently, children have the wrong idea about why they have been removed from their homes. Many times, they believe that it was their fault! This leads to feelings of guilt and sometimes, children will try to punish themselves. Therefore, children must have accurate and honest information about why they are in care.
- **4. Provides photos and a pictorial history.** Even when information is given in written form, kids generally want to know what their families look like. In addition, photographs also record family events such as holidays, birthdays and special times. Children need pictures of themselves to trace the changes that have taken place.
- **5. Records child's feelings about their life.** Too often, children are not given an opportunity to talk about their feelings regarding their life and being in out of home care. The lifebook, in some ways, is a diary or log children can use to keep their personal thoughts or feelings.
- 6. Gives the child information about his or her own development. How many people have baby books? If you are not the first born, you probably don't have one. How would you like a recording of all your important milestones? Your first tooth, your first step, your first word, along with a record of all the other special things you've done. This is another important role that the lifebook plays.
- **7. Is a useful tool when working with children.** Being a way to organize information, the lifebook is a helpful tool for foster parents, adoptive parents, caseworkers, and therapists who must assist children who are struggling to cope with being away from their parents, siblings, and homes.

History for Infant's and Toddlers

Gathering information for the lifebook for an infant or toddler is far more important than one might assume. Children at these ages have no memory of their birth parents, foster parents, or other significant people who cared for them. They often have no pictures of themselves or any significant person to help fill in the gaps. Completing an infant's lifebook while in foster care, whether the child returns home or moves to adoption is a crucial activity.



INFANTS AND TODDLERS LIFEBOOK (0-2)

What to include	Where To Find It
Birth Information: birth certificate, height, weight, time and date of birth, hospital (picture if possible from brochure or taken by family) names of doctors, special medical information or circumstances of birth, pictures of birth family, and cultural history	Bureau of Vital Statistics, case record and social/medical hospital, WIC clinic, hospital records, birth parents, extended family
Placement Information: reasons for placement, include journal entry, chronological list for each move, good-bye letters from caregivers, names of other children child was close to, pictures of their caretakers, their birth and foster homes, bedroom, pets, etc.	Court records, intake worker, birth family, caseworker, previous caretakers
Medical Information: list of medical providers, immunization record, list of childhood diseases, injuries, allergies	Case record, health department, caretakers, pediatrician, WIC clinic
Developmental Information: significant milestones of development	Previous caretakers, care record, medical history
Adoption Information: Finalization, adoption party pictures, special mementos	Adoptive family and adoption caseworker



HISTORY FOR SCHOOL-AGE CHILDREN

Children removed from their home during the early school age years may have memories of those important people in their lives, but those memories are usually vague and fleeting. Those memories may also be attached to the trauma of abuse, neglect and the experience of removal. The lifebook should be that tool that fills in the memory gaps for these children and also replaces the fantasies that have developed. The school age child's lifebook should include the birth, developmental, and medical information listed above. It should also include the following:

In addition to the information already cited, include:	Where To Find It
Placement Information: reasons for removal or placement, include journal entry, chronological list for each move, good-bye letters from caregivers, names of other children child was close to, pictures of caretakers, their birth and foster homes, bedroom, pets, church and recreational activities, neighborhood friends, letters from birth family or other friends, names and addresses of separated siblings	Court records, intake worker, birth family, caseworker, previous caretakers, school teachers, counselors, adult leaders, ministers,
Educational Information: lists all daycare and schools attended with dates, names and addresses and photos, if possible, pictures of classmates, teachers and other important adults, copies of report cards, samples of homework, special projects, pictures and mementos of special events, awards,	School personnel, teachers, yearbooks, school and community newspapers, coaches, school records
Adoption Information: tools used to prepare child for adoption (coloring books), date of finalization, adoption day pictures,	Adoptive family, foster care and adoption caseworker

Gathering and Documenting Background Information – 201-A10-S Written by IHS for the Ohio Child Welfare Training Program –Revised 1998

HISTORY FOR TEENS

Teens who have spent any amount of time in foster care and enter adoption or independent living have probably lost track of the important details of their lives. They probably do not have many mementos of their past - little or no birth information or pictures. They do not have a record of where they lived and the people with whom they lived, the schools they attended, and the achievements they obtained. Putting a lifebook together for a young teen requires investigative work and perseverance. However, it may be the youngster's only link from a confusing and disjoined past to an uncertain future. The lifebook for the teen should include as much information from birth, medical, and developmental records that can be traced. It should also include the following:

In addition to the information	Where To Find It
already cited, include:	7711616 16 11114 11
Placement Information: chronological listing of places where teen lived, with whom, reasons for moving, pictures of people and places that were important in the development of the teen	Previous caregivers, caseworkers, case record,
Educational Information: list schools attended with dates, names and addresses and photos, if possible, pictures of classmates, teachers and other important adults, copies of report cards, samples of homework, special projects, pictures and mementos of special events, awards, achievements and certificates	School personnel, teachers, yearbooks, school and community newspapers, coaches, school records, band/music directors, drama teachers,
Independent Living Information: information and mementos gleaned from teen's groups and classes, pictures of other teens in independent living, group leaders, pictures of graduating from group and moving- in day into the new apartment	Caseworkers, foster care and independent living caseworkers
Adoption Information: tools used to prepare teen for adoption finalization, and adoption day pictures, any special mementos	Adoptive family and foster care and adoption caseworker



Gathering and Documenting Background Information

PA-AS 2.05

Information is gathered from birth parents and maintained for the child's future use, including:

- a. the child's medical and social history;
- b. contact information for organizations, medical facilities, or others involved in services to the birth parents and the child;
- c. all available information about the medical and social history of the birth parents and the pregnancy; and
- d. photographs or a physical description of birth parents.

Interpretation: A birth parent's social history can include information about: marital status, family history, employment, education, religion, interests, and talents. Provision of information by birth parents is voluntary, and necessary consent forms must be obtained. When the agency is unable to obtain this information, documentation of efforts to do so are included in the case record. The agency may consider how appropriate and necessary it is to keep identifying information in a separate record, and should seek legal consultation regarding the collection and maintenance of identifying information. In foster care adoptions, information from the foster care record should be obtained before the record is sealed, and appropriate information is shared with the prospective adoptive parents.

PA-AS 8.04

Prospective adoptive parents are provided with sufficient information and time to make an informed decision about the placement, and assurance that the child is legally available for adoption.

Interpretation: Information includes all available non-identifying child and birth parent information, and information about the general circumstances leading to the decision to place the child for adoption. Prospective adoptive parents should be given sufficient time to comprehend large amounts of information about a child. If the agency develops a process to share information over time with parents, it should carefully consider what information must be shared prior to the decision to adopt. Intentional misrepresentation or concealment and negligent disclosure or withholding of information can put the

agency at risk for wrongful adoption lawsuits. Practices that may limit exposure to liability include: informing prospective adoptive parents of limits on information gathering and disclosure, provision of information in writing, and training staff on procedures for collecting and disclosing information.

Research Note: Literature suggests that adoptions are more successful when adoptive parents have realistic expectations about the adopted child. This is of particular importance for children with special needs or children at greater risk for disruption.

PA-AS 12.05

Records are retained for the period required by applicable law, or in the absence of such law for at least 99 years, and the agency has a plan for transfer of records if the adoption program is closed.

PA-AS 12.06

All releases of identifying information about adopted persons, birth parents, and adoptive families are in accordance with individual wishes and applicable regulation.

Interpretation: In cases where an individual waives confidentiality, informed consent is obtained in the form of a notarized affidavit before any contact or exchange of identifying information occurs.

PA-AS 13.03

Adoption workers have the competencies to:

- a. facilitate adoptions that meet applicable legal requirements;
- b. conduct assessments and identify children with special needs;
- c. provide support to persons touched by adoption to cope with social and emotional issues;
- d. facilitate adoptions for children with special needs; and
- e. maintain and protect confidential information and assist persons served to access information, as outlined by applicable law.

Interpretation: Competency can be demonstrated through education, training, or experience.