

Avoiding Placement Pitfalls in New Adoptive Placements of Children with Special Needs



To trust or maybe not

Take time to learn about your child before expanding trust and privileges. Although you have been given a great deal of information on your child, he is still a new addition to your family and is struggling to fit in. Wanting the child to have a more normal life and to not feel like a “foster child” is a loving, supportive notion, but is frequently not helpful for the traumatized child who is new to your home. Many special needs children come from very structured environments, and removing all or most restrictions, trusting him too much, too quickly sets him and you up for disappointment. Instead, structure your child's environment for success and security while minimizing opportunities for misbehavior, to the extent that you are able. In this way, the child can earn your trust gradually. Give yourself time to get to know your child really well and feel comfortable that the child has good personal boundaries and self-protection skills before allowing the child to spend increasing amounts of time outside your supervision. *Rehearsing with the child expected behavior immediately prior to social situations is sometimes helpful.*

New stuff, new activities

You also don't have to give the child everything all at once. Children who haven't had a lot of nice things often don't know how to care for them. This may lead to disappointment and frustration for adoptive parents or siblings who are trying to share a personal treasure with the child. Take it slow, see what kind of toys/activities the child can handle and build on that. Also remember that children may act like they know how to do something that they really don't know how to do. Many traumatized children have some degree of coordination problems that you'll need to assess, so power tools, mowers and other equipment may present even more of a risk than they might with the typical child.

What is old is new again

With all of the new changes the child is encountering in the process of becoming a member of your family: room, bed, pillow, home, parents, siblings, extended family, pets, house, yard, neighborhood, school, class, teachers, books, desk, routines, culture..., it is not unusual for the child to show some regression to former (younger) fears, anxieties or behaviors. Often, in the past, these behaviors have brought them security. So even if the child has made wonderful progress in her foster home, she may now demonstrate earlier, more troublesome or immature behaviors. Love, commitment and follow through with services will often pull her back from those behaviors quicker than in the past, because she has learned other options and can find them again more quickly. If you have a habit that you have overcome, chances are that you, as an adult, might indulge that habit again when you are under stress. Likewise, stressed children might engage in behavioral habits that they may have tried very hard to overcome.

**Pills and diagnostic labels**

Diagnosing and treating traumatized children who are growing and changing is often difficult for even the most skilled practitioner. Add to that the notion that practitioners have different perspectives based on their practice and educational experiences. As your child is transferred to a new provider in your area, expect that diagnoses may be added, deleted or changed over time based on changes in symptoms, response to treatment, new research or new knowledge on the part of the family or the practitioner.

If your child takes medication to manage mood, attention or behavior, your child may come to your home over or under-medicated. Children in those circumstances will obviously need adjustments if recommended by a physician or nurse practitioner. However, again in the spirit of normalizing the child's situation, adoptive parents often are tempted to try and get the

child off all medications as soon as possible. Your child is going through a lot of adjustments and dealing with many changes already, so keep that in mind when you are considering this issue.

Supervision of medication is also important. Children, even older teens, should not generally have possession of or take their medication unsupervised. All medications in the home should be locked up.



Following up with therapies or counseling

Usually when a child is placed for adoption there is an existing recommendation for the adoptive family to follow up with counseling/therapy. Initially in placement, particularly during the "Honeymoon Phase", it may not seem like the child or family needs therapy, but when services are needed they can take weeks or months to put in place. It's good to get services started soon after placement, even if they aren't used heavily at first. Remember, there is no shame in needing help. In our experience, families who are open to support and assistance are more likely to be successful than those who try to go it alone.

Finding the time for the extra appointments may sometimes be a challenge, but following through with services is often less time consuming than dealing with a crisis later.

Occupational therapy (OT). Your child may have subtle or not so subtle coordination or sensory integration difficulties as a result of a variety of factors. If OT has been suggested, it may not even make sense to you that there is a need, but be aware that some traumatized children with whom we have worked have experienced dramatic behavioral improvement when they get good OT from a highly skilled therapist. Following through with

suggested services, despite the time it takes, may actually make your life easier. Families who have a good experience with these services are more likely to spot difficulties requiring OT and be more aggressive in pursuing it in the future.

When seeking services for a traumatized child, trauma expertise on the part of the service provider is essential. Don't be afraid to ask questions about experience and techniques. Be cautious of extreme interventions. Talk to your worker if any recommendation concerns you.

The family must be involved in therapy at this point in the process. It is essential that the child and family work on their communication, problem-solving and relationship skills.

Keep your adoption green by recycling information.

Re-read your child study on the difficult days and you may think "He's not doing so bad after all". Between the child study and your experiences with your child, you will begin to recognize possible anniversary reactions that will help you and your child plan for the future. Often when children have unusual reactions, something has triggered fear in that child. The stack of laundry that you put in your child's room to be put away, may be interpreted by the child as a sign that you are moving him out.

Some families have found it helpful to keep a log or diary to review the up's and down's and to identify any patterns that may emerge. The diary is also helpful when sharing information with a therapist or counselor. Most importantly, a diary can help you to see that you are making progress....you are becoming a family!

Re-read your pre-service curriculum. When you went through training you were listening with different ears. Once you have some experiences with your child to link it to, you will see likely see more depth in the information than you originally thought. Pre-service handouts are a treasure trove of suggestions and interventions.

Keep going to training and look for resources to read. Ohio adoptive families are entitled and allowed to go to public foster parent or caseworker training

(Caseworker trainings---if all the spots are not taken by caseworkers).

Kids recycle, too. Don't give up if an intervention doesn't succeed the first time. It took lots of repetition to develop the behaviors and it will take consistent intervention to change them.



Siblings

Be prepared for some unhappiness in your permanent (birth and/or previously adopted) child(ren). In birth families, an older child may be excited about getting a new brother or sister, only to wish later she could be sent back where she came from. If you have permanent children in your home, we can provide you with information on helping children to become brothers and sisters.

Keep in touch.

If things are getting rough, tell the caseworker right away. The sooner problems are addressed the easier they are to solve. Waiting to call when you are on your last nerve, just makes problems more challenging to tackle. You don't have to feel embarrassed or ashamed because you are stressed. Caseworkers aren't perfect either, but they are determined to help you find solutions to the challenges that you encounter along the way. Stay connected with your worker and build supports with other adoptive families or families with similar experiences.

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