

Bridges



Association of Administrators of the Interstate Compact on Adoption and Medical Assistance

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Does Anyone Speak Adoption?

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Adopted children often have difficulties with issues of loss, attachment, and identity formation that can lead to behavioral and developmental problems. Adoptive parents often report that counselors are lacking in the understanding and skills necessary to address the issues particular to adopted children and their families. These issues can also be recurrent, increasing the demand for adoption-competent therapists. Adoption is now understood to have a continuing impact and is seen as a lifetime condition as opposed to a single event. (See Kenneth Watson, M.S.S.S., *The Role of the Public Agency: Delivering Post Adoption Services*, 1991). Therapeutic support services need to consider *everyone* involved in the adoption, not just the child, and that support needs to be on-going. But where are the therapists who understand adoption issues? Does anyone speak adoption?

States began to ask themselves a question: How can we develop an adoption competency training mechanism for therapists that would attract quality clinicians *and* outlive grant funding? The answer: Create university-based professional credit programs for mental health clinicians. Three states worked with local universities to educate therapists on adoption issues and create

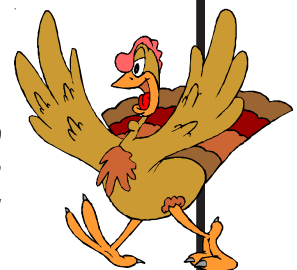
more adoption-competent therapists. This article chronicles the stories behind the creation of three postgraduate certification programs designed to meet the need for adoption competent therapy.

New Jersey

New Jersey has long acknowledged that special needs adoption is a complex undertaking for which families need adequate preparation and support. For this reason, the Office of Adoption Operations under the New Jersey Department of Human Services, Division of Youth and Family Services was one of the first public agencies to fund a no-fee post-adoption service program for adoptive families. The program was developed with the acknowledgement that parents adopting special needs

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children often face challenges they did not anticipate and were not fully prepared for. Not unexpectedly, some enter a period of disequilibrium in the struggle to successfully incorporate their newest member. In more severe situations, the adoptive family itself may be destabilized by the problems that a traumatized child brings to the home. Whatever the degree of difficulty, it is incumbent on placement agencies to help adoptive families find the assistance needed to insure a successful adjustment. Attachment research shows that children often develop their most meaningful connections to those adults willing to stand by them through difficult experiences. For their part, adoption agencies model this belief by their own commitment to actively support families through the difficult stretches.

Between 2000 and 2003, New Jersey's public adoption program received a federal Adoption Opportunities grant - *Forging Family Connections* - to strengthen the placement and support systems available to older children. A primary goal was to train placement and post-adoption counseling staff to function jointly as a family support team geared to increasing parent-child attachment and minimizing the risk of placement disruption. With this in mind the project decided to: (1) develop a higher level of expertise among the post-adoption counseling therapists (2) train key administrative staff in the regional adoption centers and (3) offer community mental health providers an opportunity to expand their clinical knowledge of the issues facing adoptive families. Because staff turnover is a reality in most social service agencies, the project sought more than a one-time professional training series.

In coordination with Rutgers University, School of Social Work and Continuing Education Department, New Jersey's Adoption Program developed a 45-hour post-graduate training program leading to an Adoption Certificate for mental health clinicians. The certificate program is intended to increase the knowledge that mental health practitioners have regarding the core issues facing adoptive families and to expand their clinical skill in attachment-based, family-focused therapeutic interventions. Workshops meet from 9:30 to 3:30 and participants earn 5 clinical Continuing Education Units for each session. Participant's may enroll for individual workshops or may complete the entire program to earn the final certificate. The program consists of seven (7) required workshops and a choice of electives. Each participant must complete two (2) electives in order to earn the 45 hours required to receive the Adoption Certificate. Rutgers charges a \$100.00 fee for each workshop.

The Adoption Certificate Program began three years ago and has consistently attracted a wide variety of

adoption professionals seeking certification. Most workshops fill quickly and many have been offered at satellite sites to meet demand. The response of the mental health community to the certificate program has been intensely favorable proving that access to high quality, adoption-specific clinical training fills a formerly unmet professional need.

Can You Create a Similar Program?

New Jersey's Adoption Program co-sponsors an *Adoption Services Advisory Committee* (ASAC) as a vehicle to bring public and private agencies together with interested child advocates to address issues of importance in the adoption arena. The ASAC is a highly effective advocacy group which has often been instrumental in garnering necessary resources for the public program. The ASAC committee strongly agreed that there was a need in New Jersey to increase support services to adoptive families, especially as the numbers of special needs children placed for adoption increased annually following the Adoption and Safe Families (ASFA) legislation. With the support of ASAC, the project identified a small, but highly credible, subcommittee to reach out to the state university to discuss adoption training possibilities. Rutgers University was eager to develop continuing education programs that filled identified gaps within the community. Agreement was quickly reached that the NJ Adoption Program would fund an initial year in order to develop the training curriculum and would pilot the series with those clinicians providing post-adoption services under contract with the public agency. This pilot group offered valuable feedback regarding the course material before the program was opened to the community on a fee basis. Funding for the pilot year was approximately \$28,000 and was provided through the federal Adoption Opportunities grant. The grant's consulting psychologist took the lead in formulating the overall course outline and identifying adoption-experienced instructors. Individual instructors then developed their workshop curriculum. The University invited the grant manager, consulting psychologist and members of the ASAC subcommittee to form an Advisory Group for the Adoption Certificate Program to aid Rutgers in ongoing program development.

Based on New Jersey's experience, it is well worth the effort to help develop specialized training opportunities for community providers. Ultimately parents and children benefit if their clinicians have a keener understanding of the unique issues faced by families formed through adoption. For further information call Ellen Kelly, at: 973. 742.0063, ext. 2102

Washington

The Northwest Adoption Exchange (NWAE) has assisted tens of thousands of adoptive families in its twenty-seven years of operation. In that time, adoptive families have often reported that post-adoption services are very difficult to find, especially therapy attuned to and appropriate for adoption-related issues. Adoptive parents find that many therapists have a limited understanding of the unique aspects of adoption and fail to recognize how a family built through adoption differs from a biological family. Therapists must understand this key issue in order to achieve therapeutic success with an adopted child. This understanding empowers the family as a unit and does not isolate the child as an individual patient. NWAE decided to meet the need for adoption-competent mental health therapists and create a post graduate certificate program for therapists to work with families who have adopted from the foster care system.

Funding for the program came from two private foundations and was spread over two years. Funding paid for a part-time staff member in the first year to research and document the needs of the adoptive community and assess the skills of the therapeutic community. A community advisory group was formed that included faculty from Antioch University in Seattle, adoptive parents, therapists, Washington State Division of Children and Family services staff, and representatives from private adoption agencies. The group worked to identify faculty and develop the outline for a nine-month certificate curriculum.

An agreement was made with Antioch University that the Certificate program would become a part of their on-going Continuing Education program. NWAE agreed to staff the program with a half-time professional during the planning year and the first year of operation and provide funding to pay the facility for the first operating year. Antioch set the program fee at \$2,000 per certificate. These funds would, in turn, provide seed money for the second year and cover the costs of operation. The University's public relations department incorporated advertising for the new program into their schedule of events. All licensed therapists in the state of Washington were sent flyers about the program and NWAE staff served as the point of contact for persons seeking additional information.

A formal application to the program was required. Although the certificate did not confer University credits, it did provide ninety Continuing Education Units which were spread over two calendar years. Antioch Univer-

sity took over complete fiscal responsibility for the program in year two of operation and NWAE staff served in an advisory capacity. The nine-month program was launched in September of 2001 and had twenty-four participants. Planning is currently underway for year four of the program.

NWAE's Key Elements of Success

- **Community involvement.** Include the adoption community in the creation and maintenance of the program. The need for community involvement cannot be over-emphasized. It is clear that community support for the content of the curriculum is needed to gain validation of both the certificate and the program in the adoption community. Input from adoptive parents, adoption professionals, therapists, and the college operating the program is crucial.

- **Adoption-competent professionals.** Place an adoption-competent individual in the role of contact person for perspective enrollees. This is particularly essential in the first years of a program. It was discovered that enrollment dropped when an adoption-competent person was no longer a prospective enrollee's point of contact.

- **State welfare agency involvement.** Include the state's child welfare agency in the Advisory Group. Their participation adds competency and legitimacy to the program. Note: This involvement will also enable the state agency to use the certification program in their PIP to strengthen post adoption services in the state.

- **Cost considerations.** Offer some financial flexibility. The cost of Washington's program, although competitive, is high. NWAE was not able to offer scholarships and this ability would broaden the participant pool. A good suggestion: Offer flexible payment schedules which ease financial concerns, making the program more accessible.

- **Fluid curriculum.** The certification curriculum must be fluid in order to incorporate new research and clinical approaches which are continually evolving. Therapists enrolled in the program want and need the most current information, so it is imperative for curriculum to be updated and faculty to be evaluated annually. Note: Students were given evaluations and asked to assess faculty skills after each of the nine weekend sessions. This process enabled faculty to fine-tune their curriculum material and adjust to meet the needs of the participants.

Oregon

Shortly after opening its doors in 1999, the staff of the Oregon Post Adoption Resource Center (ORPARC) visited adoptive parent support groups throughout the state. ORPARC sought to determine adoptive families' needs and to develop a program to meet them. In every setting, from urban Portland to small rural communities, the call for "therapists who truly understand adoption" topped the list of unmet or under-met needs.

In the following year, ORPARC conducted an extensive statewide post adoptive family needs survey which echoed this view.¹ A similar need had been identified by a post adoption survey by the state's Department of Human Services a few years earlier. While these research undertakings documented and collected information, they did not reveal new insights. Adoptive parents and professionals have long known there were few adoption competent therapists. For many years, anecdotes circulated about therapists who attributed a child's maladaptive behaviors to poor parenting, or insisted on establishing a confidential, exclusive relationship with a child, or worse – recommended dissolving the adoption. Oregon lacked mental health providers who understood both general adoption issues and the challenges inherent in the adoption of children from the public child welfare system.

Because of ORPARC's association with the Northwest Adoption Exchange, ORPARC was aware of and peripherally involved with the start-up of Washington State's post-graduate certificate program in adoption for therapists. Using the Washington and New Jersey programs as models, ORPARC teamed up with a professor from Portland State University's Graduate School of Social Work – a former adoption social worker and therapist herself – to approach the Department of Human Services about the need for a similar education program for Oregon therapists.

Under the direction of the Oregon State Adoption Manager, the Department offered to partner in the creation of the Oregon Post-Graduate Certificate in Adoption program, and to provide start-up funds for a half-time Program Developer. An Executive Committee was formed of representatives from the State Adoption Program, ORPARC, the State Office of Mental Health Services, and Portland State University's Graduate School of Social Work and Graduate School of Education. Portland State was eager to host the program.

Adhering to "*NWAE's Key Elements of Success*" detailed above, the Executive Committee sought community input on the course curriculum through a questionnaire sent to state adoptive families and adoption professionals. Answers to the questionnaire provided the Committee with ten core topics for its curriculum. Curriculum issues included children adopted from the child welfare system, diverse children and families, developmental effects of abuse and neglect, positive sexual development, trauma and dissociative disorders, attachment and bonding, mental health and neurological disorders, behavior management, and adoption theory and practice.

With input from adoptive parents and adoption professionals, the Committee then identified national experts on each topic. Instructors were recruited, a website was developed, a brochure was prepared, and articles were written and sent to mental health organizations for inclusion in their newsletters. Program announcements were also mailed to all licensed clinical social workers and licensed mental health therapists in Oregon. Announcements in adoptive family newsletters and at parent support groups were used to encourage adoptive parents to spread the word to their mental health providers.

Upon successful completion of the 100 hour course, students receive a Certificate and are added to the list of Adoption Certified Therapists in Oregon. Successful completion is defined as attendance of all sessions and submission of an approved final project. The list of Adoption Certified Therapists is made available to all adoption units and private adoption agencies in the state. Certification participants may apply the course hours to Continuing Education credits required for Oregon or Washington counseling or social work licensure.

The certification program consists of one weekend class a month for ten months, offered at Portland State University. Through the continued commitment of the Oregon Department of Human Services, the Committee has a half-time staff member with a strong background in adoption that serves as a Program Liaison. This is the first year certificates will be awarded, and plans are underway for the second year. Student course evaluations will shape the faculty and curriculum offerings for next year.

For more information on the Postgraduate Training Certificate in Therapy with Adoptive Families, go to the Portland State University Continuing Education in the Graduate School of Education, Extended Studies Program page at:

www.ceed.pdx.edu/adoption/

¹ Fine, D.N. (2000). *Adoptive Family Needs Assessment: Final Report*. Salem, OR; Oregon Post Adoption Resource Center, Oregon Department of Human Services.

Examples of Curriculum Topics and Workshops in Adoption Competent Training

Curriculum Topics

- ◆Adoption: A Systems View
- ◆Clinical Practice with Children Adopted from the Child Welfare System
- ◆Clinical Practice with Diverse Children and Families
- ◆The Impact of Abuse and Neglect on Child Development
- ◆Promoting Positive Sexual Development after Abuse and Neglect
- ◆Assessment, Diagnosis, and Intervention: Trauma and Dissociative Disorders
- ◆Assessment, Diagnosis, and Intervention: Attachment and Bonding
- ◆Assessment, Diagnosis, and Intervention: Mental Health and Neurological Disorders
- ◆Specific Behavior Management and Family-Based Strategies in Work with Special Needs Adoptions
- ◆Putting Adoption Theory into Practice

Workshops

The Psychology of Adoption

Contemporary Trends in Adoption
Psychological Benefits & Risks Associated with Adoption
Stress and Coping Models in Adoption
Family Life Cycle Tasks in Adoption
Implications for Post-Adoption Services

Life Cycle Experience of Children Adopted as Infants

Core Issues of Adoption at Various Ages and Stages
Differences Between Families formed by Birth and by Adoption
Dimensions of Loss for an Adopted Child
Managing Sibling Relationships Within the Family
Using Normative Crisis to Support Families and Children

Issues in the Adoption of Older Children

Adoption as the Permanency Plan
Life in the Child Welfare System/ Common Survival Behaviors
Developmental Tasks of Middle Childhood
Interplay between Adoption and Child Development
Family Building/ Characteristics of Successful Adoptive Families

Attachment-Focused Therapy for Adoptive Families

Recognizing the Symptoms of Impaired Attachment
Understanding the Impact of Impaired Attachment on the Adoptive Family
Facilitating Family Attachment
Assessment/Treatment/Clinical Strategies/ Stages of Healing

Family-Focused Therapy for International or Post-Institutional Children

Behavioral Symptoms Common to Post-Institutionalized Children
Impact on the Adoptive Family
The Adoptive Family as the Primary Source of Care and Healing
Assessment/Treatment/Clinical Strategies/ Stages of Healing

Management of Behavior Problems & Discipline for Traumatized Child

Discipline as Protection and Care
Supervision as a Form of Discipline
Testing, Limit-Setting, Rewards, Consequences, Incentives, and Punishment
Skill Building for Adoptive Parents
Crisis Intervention
Common Problems of Traumatized Adopted Children

Individual Therapy for Adopted Children, Teens & Families

Assessment
Treatment Approaches
Strategies and Techniques

Additional Workshops: Electives

Transracial Issues in Adoption
Maintaining Birth Family Connections
Group Therapy Services in Adoption
Clinical Work with Birth Families
Diversity in Adoption
Impact of Deprivation and Trauma on Development
Children with Sexual Behavior Problems

Child and Family Service Reviews Examine Mental Health Issues

In April 2004, The National Technical Assistance Center for Children's Mental Health and the Technical Assistance Partnership for Child and Family Mental Health released a report analyzing 38 states' performance on the mental health items contained in the CFSRs. The report also examined the Program Improvement Plans (PIPs) submitted by 28 states to assess state plans for addressing the mental health needs of children and families. Overall, both the CFSR Final Reports and the state PIPs described the constant challenges child welfare agencies face in their efforts to meet the mental health needs of children and families.

Key findings in the CFSRs

The report examined a key index that assessed whether services were being provided to meet the mental health needs of children in the child welfare system. Results showed that mental health services provided varied considerably by state, but common mental health-related concerns were identified across all states reviewed. Nearly all states (37 of 38) report an ongoing lack of mental health services for children in foster care. The Final Reports identified several mental health services that were consistently in limited supply: substance abuse services, specialized mental health services for foster children, sexual abuse treatment, and domestic violence services. In addition, 5 states reported waiting lists of 4 - 24 weeks for some services.

The lack of mental health services was most often attributed to a widespread shortage of mental health providers with expertise in treatment of issues affecting children who have suffered abuse and neglect. Funding shortages were also cited by several states. The report stated that due to budgetary constraints, states adopted measures restricting access to services to those children with a diagnosis of Serious Emotional Disturbance (SED) and reduced community mental health contracts.

Planned approaches in state PIPs

Aware of gaps in the choice and availability of mental health services, all 28 states who submitted PIPs incorporated goals and strategies for addressing mental health issues. Several approaches to build services and increase capacity to provide these needed services were proposed, including:

- ◆ Developing assessment or screening tools in order to better ascertain the mental health needs of foster children (11 states)
- ◆ Implementing a statewide needs assessment to identify strengths and service gaps (8 states)
Note: Assessment data will be used to support legislative requests to obtain resources, negotiate with Medicaid, and support the hiring of additional mental health professionals
- ◆ Expanding mental health services by monitoring and appealing Medicaid denials of mental health claims or negotiating for expanded Medicaid coverage (4 states)
- ◆ Implementing training for child welfare staff, mental health staff, and foster parents on mental health topics associated with the foster care system (22 states)

Full report available on the ACF website: http://cbexpress.acf.hhs.gov/articles.cfm?article_id=823

For additional reading, see also: *Mental Health Services for Children in Foster Care*. A separate study analyzing mental health in placement was issued by Health Services for Children in Foster Care, UCLA Center for Healthier Children, Families and Communities. The policy brief from the Study of Services for Children in Foster Care "examines the role of mental health agencies in the provision of mental health services to children in the child welfare system." Three questions are posed:

1. What roles do public mental health agencies play in the delivery of mental health services to children in the child welfare system?
2. What are the barriers in organizing and delivering mental health services to children in foster care?
3. What funding sources are used for mental health services to children in foster care?

The brief offers suggestions and analyzes their potential to improve the relationship between child welfare and mental health agencies to, in turn, improve the delivery of mental health services to children in foster care. The brief is available at:

<http://www.healthychild.ucla.edu/Publications/ChildrenFosterCare/Documents/Mental%20health%20brief%20final%20for%20distribution.pdf>

In its last publication, *Bridges* began the column, The Medicaid Exchange. *Bridges* continues the column in this issue with a Frequently Asked Question spotlighting the relationship between federal and state law in the provision of Medicaid.

Question: Can a State law or policy delay or deny Medicaid to a Title IV-E adoption assistance eligible child?

Answer: No. Medicaid is a federal law and federal law in this area supercedes state law and policy. (See below for details.)

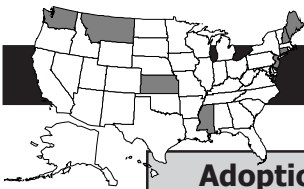
Medicaid and the Intersection of Federal and State Law

States cannot, for any reason, withhold Medicaid benefits for which a child is otherwise eligible. Federal law overrides state law, and administrative and policy concerns. The reason for this regarding Title XIX (Medicaid) of the Social Security Act (SSA) begins with the Constitution. Article VI, Clause 2, of the United States Constitution states:

This Constitution, and the Laws of the United States which shall be made in Pursuance thereof; and all Treaties made, or which shall be made, under the Authority of the United States, shall be the supreme Law of the Land; and the Judges in every State shall be bound thereby, anything in the Constitution or Laws of any state to the Contrary notwithstanding.

Known as the Supremacy Clause, the Supreme Court interpreted the doctrine to include acts of Congress because, as a body of American government, it acts "under the Authority of the United States". The Court declared this to mean, "the States have no power to retard, impede, burden, or in any manner control, the operations of the constitutional laws enacted by Congress to carry into execution the powers vested in the general government...". Under the Supremacy Clause, when Congress legislates pursuant to its delegated powers, federal law supersedes conflicting state law. The Court ruled that the Supremacy Clause power was implied when states accept federal money as in the instance of funding received through the SSA. Under the Social Security Act of 1935 (*49 Stat. 620, 42 U.S.C. Sec. 301 et seq.*), Congress created numerous programs effective in the States which enacted complying state legislation to join the system. State participation in the programs is voluntary and no State is compelled to enact legislation complying with the requirements of federal law. If a State chooses to participate and accept federal dollars under any SSA program, the State brings itself under the Supremacy Clause of the Constitution and its power to nullify state legislation and policy contrary to federal requirements. The reason states cannot deny or delay Medicaid benefits to an otherwise eligible child stems from the application of the Supremacy Clause to acts of Congress- to include Title IV-E of the SSA.

In an act of Congress, the foster care and adoption assistance programs were created thorough its passage of Sections 472 and 473, respectively, of Title IV-E of the Social Security Act. As a part of the SSA, acceptance of federal funding under the Act for Title IV-E programming obligates state compliance with the federal eligibility laws and requirements of the Act. The Act requires recipients of Title IV-E foster care and adoption assistance to be mandatory eligible for Medicaid. This, in turn, obligates the states who participate in the Medicaid program to provide Medicaid to Title IV-E eligible children. The Centers for Medicare and Medicaid Services (CMS) is the federal agency designated to work in partnership with the States to administer Medicaid. CMS states, "To be eligible for Federal funds, States are required to provide Medicaid coverage for most individuals who receive federally assisted income maintenance payments, as well as for related groups not receiving cash payments." An example of a mandatory Medicaid eligibility group is recipients of adoption assistance and foster care under Title IV-E of the SSA.



STATE INFORMATION EXCHANGE

Adoption Laws Enacted During 2002 and 2003 State Legislative Sessions*

Colorado: 2002 Colo. Sess. Laws, HB 1312, Chap. 329

Law requires that any hearing concerning a petition for adoption or a petition for relinquishment shall be given priority on the court's docket.

Illinois: 2002 Ill. Laws, HB 4208, PA 92-666

Law requires the state to inform adoptive parents whenever a sibling of the adopted child becomes available for adoption. Law specifies factors that must be considered in deciding whether to place the child with the adoptive parents of the child's siblings.

South Dakota: 2002 S.D. Sess. Laws, SB 170, Chap. 130

Law repeals a provision that required a foster parent to care for a child for at least two years before the foster parent could adopt the child.

California: 2003 Cal. Stats., SB 169, Chap. 19

Law authorizes a child who was adopted as part of a sibling group and who has been separated from his or her siblings through re-adoption to petition the court to enforce any agreement for visitation or to order visitation in the absence of such an agreement.

North Carolina: 2003 N.C. Sess. Laws, HB 397, PL 284

Law creates a Special Needs Adoption Incentive Fund to facilitate the adoption of certain children residing in licensed foster homes. Law specifies that the funds shall be used to remove financial barriers to the adoption of such children by their foster families and requires county matching funds.

Ohio: 2003 Ohio Laws, HB 95

Law revises the Post Adoption Special Services Subsidy (PASSS) as follows:

1. Requires the state to establish clinical standards to assess a child's need for post-adoption service;
2. Eliminates the requirement that each agreement undergo an annual redetermination-of-need process;
3. Limits to \$10,000 (\$15,000 if there are extraordinary circumstances) the value of services the child may receive during a single year;
4. Requires the adoptive parent to pay at least 5 percent of the total cost of services;

5. Requires the state to adopt rules establishing the method for determining the scope, amount, and duration of assistance provided to a child; and
6. Lowers the age limit for eligibility from 21 to 18, except for children who are mentally or physically handicapped.

*Extracted from the NCSL report on child welfare legislation

Maine: Camp for Separated Siblings

Sixty children in the custody of the Department of Health and Human Services participated in the first *Camp to Belong Maine*. The program is hosted by Camp Wigwam and takes siblings who have been placed in separate foster, adoptive, or kinship homes and brings them together for a shared camp experience.

Article link: <http://tinyurl.com/5qjzk>

New Hampshire: Legislators Approve Open Adoption Records

The New Hampshire House passed a bill (SB 335) allowing adopted people 18 years and older access to their original birth certificates upon request. The NH Senate passed the bill last month. Current law permits the release of identifying information to adoptees 21 or older only if a court has found "good cause" or if birth parents have filed a release with the child-placement agency and have "been contacted, if possible, by the agency, and reaffirmed [their] desire to be contacted." Existing law also gives agencies receiving requests from adoptees and birth parents discretion in cases where no release of information has been filed for contacting birth parents and adoptees to discover their preferences. SB335 permits adult adoptees access to their original birth certificates on request and replaces references to "natural" parents with "birth" parents.

Bill link: <http://www.gencourt.state.nh.us/ie/billstatus/quickbill.html> (Search for SB 335 in the bill number field)

Alabama: How to be a Voice for Children

Sponsor a foster doll or similar project. Many groups have used a foster doll project to promote understanding of and support for needed services. The Alabama Foster and Adoptive Parent Association recently delivered 140 thrift store dolls to the governor, legislators, and child welfare administrators and asked the officials to care for the dolls. Then they sent letters highlighting needed policy changes. Due to these efforts, legislators voted to increase adoption assistance benefits.

Article available at: <http://www.adoptionweek.com/article.php?articleid=454>

Pennsylvania: County CYF Program Celebrates Reunions of Troubled Families

The Allegheny County Office of Children, Youth and Families celebrates the stories many people don't hear about - the reunion of once-troubled families. The agency for the past five years has held parties for parents who have overcome adversity and regained custody of their children, which is actually the majority of cases, officials said.

Complete article: <http://www.phillyburbs.com/pb-dyn/news/103-08282004-356759.html>

California: Adoption Officials Strive to Find Older Children Homes

Foster care and adoption officials from across the country met in San Francisco, California to discuss strategies for helping older foster kids find homes and support. An expert notes that adoptive families, social workers, and even foster kids themselves perceive older children to be 'unadoptable'; a viewpoint that is not true, and might be limiting options for kids. San Mateo, CA is targeting older children this year with a program that will delve into the background of the child with the purpose of identifying relatives or friends who might be willing to help youths as they 'age out' of the system.

Kansas: Program Pairs the Elderly with Children in Foster Care

At Royal Terrace Nursing and Rehabilitation Center in Olathe, Kansas, a new program called the Foster-Grandparent Program has been created which allows senior citizens to become foster grandparents. Residents are given the opportunity to volunteer some of their time to connect with younger children who have been abused or neglected and are in need of someone to show they care about them. The program goal is to have approximately one visit per week that would allow the child and the foster-grandparent to engage in various activities such as playing games, reading, and taking walks together.

HHS Announces \$424,000 Adoption Bonus for Maine

The state of Maine was awarded \$424,000 as a result of the state's work to increase the number of adoptions from the public child welfare system. The funding comes from the Adoption Incentives Program, which totals \$17,896,000 in bonuses to 31 states and Puerto Rico that were successful in increasing the number of adoptions from the public child welfare system over the number of adoptions in 2002. This is the first time that bonuses have been given to states and territories since the program was revised and strengthened in

December 2003. The bonuses go to state child welfare agencies for a variety of child welfare and other related services including adoption and adoption-related services.

The revised Adoption Incentive Program adds a focus on the growing proportion of children aged nine years old and older who are in dire need of adoption before they "age out" of foster care without being adopted. Two key changes which strengthen states' adoption and child welfare services are:

- ◆ An additional bonus of \$4,000 is now given to states for each child aged nine and older adopted from the public child welfare system, on top of the current \$4,000 provided for each child and the \$2,000 for each special needs child adopted; and
- ◆ The threshold to receive incentives has been reset based on the number of adoptions in FY 2002, making states that reached their highest number of adoptions in the earlier years of the program more likely to qualify for a bonus.

Currently, there are 129,000 children in the public child welfare system waiting to be adopted. Of this number, approximately 50,000 children each year are placed into adoptive families. Approximately 19,000 children "age out" of the foster care system without ever having the opportunity to be adopted.

The adoption bonus and the website previously launched by ACF — www.adoptuskids.org — are aimed at the recruitment and retention of adoptive families for children in the foster care system.

"Adoption is a wonderful option for families and must be promoted by all levels of government," said HHS Secretary Tommy G. Thompson.

Adoption Incentive Program FY2003 Earning Year for Maine:

Baselines:		Actuals:	
Placed by total:	379	Placed by total:	297
Under age 9:	112	Under age 9:	137
9 and older:	133	9 and older:	109
Amounts:			
	Placed by total:	\$328,000	
	Under age 9:	\$0	
	9 and older:	\$96,000	
	TOTAL:	\$424,000	

In its last publication, **Bridges** launched its new column, *Parent Perspectives*. As noted, the material **Bridges** provides has historically been directed toward the adoption professional. In our efforts to bring a new focus to the multiple actors integrally necessary to adoption success, we are expanding our content to include adoptive families. In this issue, we turn our attention to parent support groups. Long known to be a valuable source of informational and emotional support, parent support groups also provide important links for adoptive families. Parent support groups link families to one another, providing ideas and understanding, as well as linking families to the larger adoption community of medical, therapeutic, and educational professionals.

Following up on **Bridges'** lead article in the Summer 2004 edition, and the *Parent Perspectives* column providing information about grants for parent support groups, The Collaboration to *AdoptUSKids* announces this year's grant recipients. One of the mandates of the Collaboration to *AdoptUSKids*, a five-year, federally-funded initiative of the Children's Bureau, is to provide support to new and existing adoptive parent organizations throughout the country. *AdoptUSKids* understands the importance of adoptive parent support organizations both as an effective vehicle to recruit new families for children awaiting adoption and as a network to nurture and support existing families already created by adoption.

Since the beginning of *AdoptUSKids* (October 2002), 105 mini-grants have been awarded to parent groups in 44 states. Additional mini-grants will be awarded each year of the *AdoptUSKids* project. The next funding cycle will be posted on the *AdoptUSKids* website beginning April 1, 2005. Awards were announced in late August and grant projects begin October 1, 2005. The updated grantee booklet of the parent support groups is also available. As a part of the grant award, all mini-grant recipients are invited to a Parent Leadership Training immediately following the announcement of the awards. This year's training will be held in St. Louis, Missouri, October 21-24, 2004. You can find training, funding-cycle, and parent-group information on the *AdoptUSKids* website at: <http://www.adoptuskids.org>. The following is a link to this year's list of grant recipients- be sure to check out their activities and experience their support at a meeting or event near you. Link: http://www.adoptuskids.org/servlet/page?_pageid=409&_dad=portal30&_schema=PORTAL30

- ◆Alabama Foster & Adoptive Parent Association (*Cullman, AL*)
- ◆Arizona Association for Foster & Adoptive Parents (*Phoenix, AZ*)
- ◆Families Are Special, Inc. (*Sherwood, AR*)
- ◆Supporting Parents Adopting At Risk Kids (*Sacramento, CA*)
- ◆Legal Advocates for Permanent Parenting (*San Mateo, CA*)
- ◆Colorado State Foster Parent Association (*Wheat Ridge, CO*)
- ◆Faith Weavers Adoption Support Systems (*Meriden, CT*)
- ◆Assistance & Support for Adoptive Parents (*Pinellas Park, FL*)
- ◆The Giving Tree (*Decatur, GA*)
- ◆Hawaii Foster Parent Association (*Kailua, HI*)
- ◆Idaho Foster & Adoptive Parent Coalition (*Idaho Falls, ID*)
- ◆Adoption Mutual Support Service Group (*Hazel Crest, IL*)
- ◆T.A.L.K.: Together, Attached and Loved for Keeps (*Indianapolis, IN*)
- ◆Black Hawk Foster & Adoptive Parent Support Group (*Elk Run Heights, IA*)
- ◆Foster Children of Johnson County, Inc. (*Olathe, KS*)
- ◆University of Kentucky Research Foundation for Adoption Support for Kentucky (ASK) (*Lexington, KY*)
- ◆Adoptive Families Together, Inc. (*Boston, MA*)
- ◆Southeast Michigan Regional Resource Families (*Detroit, MI*)
- ◆Families on the Move (*Detroit, MI*)
- ◆Redeemer Center for Life, the Harambee Project (*Minneapolis, MN*)
- ◆Missouri Foster Care & Adoption Association (*Cape Fair, MO*)
- ◆Foster Parents of Southern Nevada (FPSN) (*Las Vegas, NV*)
- ◆New Hampshire Foster & Adoptive Parent Association (*Concord, NH*)
- ◆Capital Region Adoption and Foster Care Consortium (CRC) (*Albany, NY*)
- ◆Onondaga County Foster & Adoptive Parent Support Group (*Syracuse, NY*)
- ◆FAST: Foster and Adoption Support Team (*Fairfield, OH*)
- ◆Oklahoma Family Connections, Inc. (*Guthrie, OK*)
- ◆All in the Family (*Portland, OR*)
- ◆Families All Together In Their Hopes (*Levittown, PA*)
- ◆Parents by Choice (*Memphis, TN*)
- ◆Sharing Adoptive Family Experience Through Networking (S.A.F.E. Net) (*Fort Worth, TX*)
- ◆Utah Foster Care Foundation (*Salt Lake City, UT*)
- ◆The Hampton Roads Foster/Adoptive Family Foundation (*Norfolk, VA*)
- ◆FAS & Friends Family Support Group (*Camano Island, Washington*)
- ◆Errands of Mercy, Inc. (*Beckley, WV*)
- ◆Uniquely Ours Support Group (*East Troy, WI*)

Highlight: Georgia District Court Case
Carol Harris v. Jim Martin *Civil Action No. 1:03-CV-2535-JTC, August 17, 2004*

by Sharon McCartney, JD, Analyst, APHSA, AAICAMA

In its Spring 2004 edition, **Bridges** reported on the Children's Bureau Information Memorandum on the *Rosales* decision. *Rosales* was a California case heard by the Ninth Circuit Court of Appeals that redefined "home of removal" for the states within the Circuit. (See *Cal. Dept. of Soc. Servs. v. Thompson*, 321 F.3d 835 (9th Cir. 2003)). The issue was the conditions necessary for kinship foster parents to be eligible for the Aid to Families with Dependent Children Foster Care Program (AFDC-FC/Title IV-E). In *Rosales*, a child had been removed from their home and was placed in the home of a relative seeking AFDC-FC benefits. The relative's home met the eligibility requirements for the AFDC program. However, HHS based eligibility for the benefits on whether or not the *original* home in which the child lived, the home that was determined to be against the best interests of the child to return to, qualified for AFDC. This original home did not qualify and it was this home that HHS defined as the "home of removal". The Ninth Circuit Court ruled that HHS misinterpreted the law to impose, "a limitation that the child must be eligible for AFDC benefits when the petition is filed in the home from which he or she is removed, rather than in the home of some other relative." In the Ninth Circuit, it was now permissible for the home of another relative to qualify as the "home of removal" for AFDC-FC/IV-E eligibility. The legal effect of the decision could have ended there. States outside of California, Oregon, Washington, Arizona, Nevada, Idaho, Montana, Alaska, and Hawaii have no obligation to follow the decision. The U.S. District Court for the Northern District of Georgia, Atlanta Division (the Court), however, decided in *Carol Harris v. Jim Martin* to follow the decision.

In *Harris*, a grandmother in Georgia had custody of two grandchildren with special needs. The grandmother was awarded custody after a judicial determination was made that it was against their best interests to return to the home of their biological parents. In her custody since 1996, the grandmother had petitioned to adopt the children and applied for both nonrecurring and on-

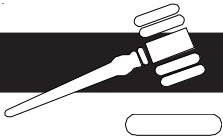
going adoption assistance under Title IV-E. She was awarded nonrecurring expenses and denied on-going adoption assistance based on the January 2001 HHS Policy Announcement, ACYF-CB-PA-01-01 (PA). The grandmother then brought suit against the Georgia Department of Human Resources (DHR) and the U.S. Department of Health and Human Services (HHS). DHR followed the HHS definition of "home of removal" outlined in the *Rosales* case above. DHR and HHS claimed that the PA clarified the law on Title IV-E eligibility regarding "home of removal" and that Ms. Harris's home did not meet these eligibility requirements.

There are two main "doors" through which most children enter

Title IV-E adoption assistance eligibility; one is eligibility for the former AFDC program. The PA made several clarifications, including the following: 1) Qualification for AFDC eligibility must be demonstrated in the "home of removal" rather than the home of the adopting relative, 2) Judicial determination must occur within six months after a child is placed with a specified relative after removal from their biological home, and 3) Title IV-E eligibility based on AFDC eligibility must be demonstrated twice, once at the time of legal removal from the biological home, and secondly at the time when adoption proceedings are initiated. Both parties in this case agreed to resolve all issues in the case based solely on the issue of "home of removal".

The Court declared that the federal law "...imposes no requirement on Plaintiff that she establish her grandchildren's eligibility for AFDC in the home from which they were removed rather than Plaintiff's home." The Court declared invalid that portion of the HHS Policy Announcement in ACYF-CB-PA-01-01 that requires otherwise eligible children to demonstrate eligibility for the former AFDC program in the home from which they were removed. The Court found the HHS "home of removal" definition followed by DHR to have no support in the legislative history of the law or the plain meaning in the language of the law. The decision denying on-going adoption assistance benefits to Ms. Harris was reversed.

The Court declared federal law
"...imposes no requirement on Plaintiff that she establish her grandchildren's eligibility for AFDC in the home from which they were removed rather than Plaintiff's home."



CASES OF INTEREST

ADOPTION ASSISTANCE

In re Hennessey-Martin *Cite: No. 2003-531, 2004 N.H. LEXIS 120 (N.H. June 30, 2004)*

The Supreme Court of New Hampshire affirmed the appellate court's ruling that an adoption subsidy would not count as a set-off against the non-custodial parent's child support obligation and was not sufficient cause to deviate from the state support guidelines. The Court interpreted *RSA chapter 458-C* to mean that, in New Hampshire, adoption subsidies qualify as gross income and therefore the petitioner was not entitled to a tax credit. The court also held that the adoption assistance payments do not, in and of themselves, justify a deviation from the child support guidelines under *RSA 458-C:5* absent an unsustainable exercise of discretion.

Case link: <http://www.courts.state.nh.us/supreme/opinions/2004/whitn088.htm>

Glassco v. Ohio Dep't of Job & Family Servs. *Cite: No. 03AP-871, 2994 Ohio App. LEXIS 1866 (Ohio Ct. App. Apr. 29, 2004)*

An Ohio Court of Appeals reversed and sent an order back down to the lower court that had affirmed an order of the Ohio Department of Job and Family Services denying an adoptee's application for post-finalization adoption assistance benefits. The appellate court found that the agency and lower court decisions failed to analyze the issue of whether the child was eligible to receive benefits in the proper context. The appellate court found that the trial court should have first examined the requirements under a relevant state statute to determine if the child was eligible for future assistance benefits and then determine whether the child was eligible for retroactive assistance benefits. The appellate court found that the trial court erred by requiring the adoptee to prove she was a "special needs" child, as she only had to prove that her adoptive parent had not been informed of the adoption assistance program prior to the finalization of adoption to show her eligibility for future benefits under the state statute.

Case link: <http://www.sconet.state.oh.us/rod/documents/10/2004/2004-ohio-2168.doc>

ADOPTION, RIGHT TO ADOPT

Jeffrey Buckner and Debbie Buckner v. Family Services of Central Florida, Inc.

Cite: No. 5D03-3217, 2004 Fla. App. LEXIS 10982 (Fl. Ct. App. July 23, 2004)

The Florida Court of Appeals upheld the trial court's order dismissing the petition by the Buckners seeking visitation or adoption of the minor child, S.H. The trial court dismissed the Buckner's petition for "failure to state a cause of action", meaning that the family had no legal right to the child and therefore no basis to sue alleging that a right had been violated. The court ruled that the court had no authority over placement of the child, except to review the appropriateness of the adoptive placement, or to interfere with the Florida Department of Children and Family's selection of an adoptive family, and, further, that the Buckners failed to allege acts showing they had legal standing to pursue the action on behalf of the minor child. The Court held that the efforts of the Buckners to self-appoint themselves as "next friends" and initiate an action under *Florida Rule of Civil Procedure 1.210* on behalf of a minor in DCF custody would usurp DCF's statutory authority and interfere with the jurisdiction and procedures of the dependency court. As held in *Lofton v. Sec'y of Dep't of Children and Family Services*, 358 F. 3d 804 (11th Cir. 2004), a fundamental right to adoption does not exist under the Constitution and, therefore, the Buckners do not have constitutional protection.

See *Archived Opinions*, week July 16th, 2004:

<http://www.5dca.org/Opinions/OpinionFrameset.htm>

P.B. v. T.H. *No. A-0726-03T4, 2004 N.J. Super. LEXIS 254 (N.J. July 8, 2004)*

The Superior Court of New Jersey affirmed the trial court's ruling, after remand, that a third party had standing in a custody dispute under the test set forth in *V.C. v. M.J.B.*, 163 N.J. 200, 748 A. 2d 539. That case established a four prong test to determine whether a third party had become a psychological parent to a minor. Initially, the trial court determined that the test was not applicable and determined that the correct standard was a best interest of the child analysis. Under that standard, the trial court concluded that the third party was the psychological parent of the minor child, thereby entitling her to the ability to bring suit. The Superior Court found error in the trial courts application of the best interest test and sent the case back

down to the trial court with instructions to apply the four prong test set forth in *V.C. v. M.J.B.* Under this test, the petitioner must demonstrate the existence of four elements: (1) the biological or adoptive parent consented to, and fostered, the petitioner's formation and establishment of a parent-like relationship with the child; (2) the petitioner and the child lived together in the same household; (3) the petitioner assumed the obligations of parenthood by taking significant responsibility for the child's care, education, and development, including contributing to the child's support, without expectation of financial compensation; and (4) the petitioner had been in a parental role for a length of time sufficient to establish with the child a bonded, dependent relationship that was parental in nature. The trial court deemed the third party to be the psychological parent under this test. Custody and visitation issues were then determined under a best interest of the child standard, and custody was awarded to the third party.

Case link:

<http://www.judiciary.state.nj.us/opinions/a0726-03.pdf>

ADOPTION, INDIAN CHILD WELFARE ACT (ICWA)

In re Elizabeth W. v. Jackson W. Cite: No. B172202, 2004 Cal. App. Lexis 1150 (Cal. July 21, 2004)

The California Court of Appeals affirmed in part, reversed in part, and remanded with directions in part, the trial court's orders in relation to a termination of parental rights. Parental rights were terminated by the trial court on recommendation of the Los Angeles County Department of Children and Family Services, which had found the child's condition significantly improved after placement with prospective adoptive parents. On appeal, the child's father argued the notice requirements of the Indian Child Welfare Act (ICWA) had not been properly followed. The Court of Appeals agreed and reversed the order terminating parental rights and remanded the case to the dependency court with directions to comply with ICWA notice requirements. ICWA requires the interests of Indian children to be protected and provides for tribe jurisdiction over proceedings involving the custody of an Indian child. Proper procedures under ICWA require notice on a prescribed form given to the proper tribe or Bureau of Indian Affairs, sent by registered mail with return receipt requested. The Court of Appeals found that there was an absence of notice because no return receipt was filed, no response from the proper tribe was filed, and

there was no information about the manner in which the reply was sent. The Court of Appeals ruled that if after proper procedure is followed if the child is found to not be an Indian child or if the tribe does not respond indicating the child is an Indian child, then the order terminating parental rights shall be reinstated and the child will be freed for adoption.

Case link:

<http://www.courtinfo.ca.gov/opinions/documents/B172202.PDF>

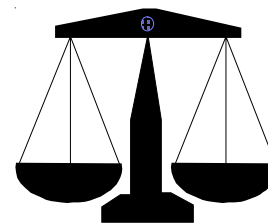
REASONABLE EFFORTS

In the Interest of D.C. Cite: No. 91,419, 2004 Kan. App. LEXIS 683 (Kan. App. Ct. July 9, 2004)

The Kansas Court of Appeals determined that under the law K.S.A. §38-1584, the district court was well within its authority to review the reasonable efforts of the Kansas Department of Social and Rehabilitative Services and the contracting agencies' efforts in placement determination. The court concluded that when viewing sources for placement of a minor, primary consideration must be given under the statute to granting custody to a relative of the child. In determining whether an agency fulfilled its "reasonable efforts" obligations in the placement of a minor, the district court reviews findings of fact for substantial competent evidence of such efforts. Here, due to the agency's failure to send the Interstate Compact for the Placement of Children (ICPC) request for an adoptive placement home study to the relatives after being notified of their interest in adopting, and its failure to comply with statutory notice requirements, the Kansas Court of Appeals affirmed the district court's ruling that the agency failed to implement their policies and procedures equitably in an attempt to find the best possible placement for the minor child.

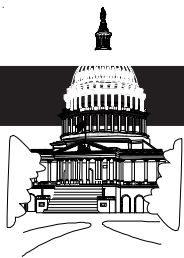
Case link:

<http://www.kscourts.org/kscases/ctapp/2004/20040709/91419.htm>



Case Summaries adapted from:

- ◆ The National Center for Adoption Law & Policy at Capital University Law School, *Weekly Case Summary*
- ◆ *Evan B. Donaldson Adoption Institute Newsletter*, Laws, Policy, & Practice



House Passes Bill to Reform Interstate Placement Compact

On October 5, 2004, the Safe and Timely Interstate Placement of Foster Children Act of 2004, H.R. 4504, passed by voice vote in the House under a motion to suspend the rules. The legislation would place a new 60-month time limit on the completion of interstate home studies. In addition, the bill introduced on June 3 of this year by House Majority Leader Tom DeLay (R-Tex.), saw several revisions before final passage by the House. The more significant changes include allowing up to 75 days to complete a home study during the first two years of the new law if the delay is beyond control of the state; exempting education and training of prospective foster and adoptive parents from any home study time limit; increasing the number of days to 14 in which a state has to accept a home study; increasing the amount of the incentive payment for home studies completed within 30 days to \$1,500; requiring states that have opted out of the Adoption and Safe Families Act criminal records check requirements to opt back in within 2 years; specifying that \$10 million would be available for the home study incentive payments for each year through FY 2008; and adding new requirements for assessments conducted with court improvement grant dollars. Also mandated is a study by the Government Accountability Office on criminal background checks for the purpose of interstate placements.

Bill link: <http://thomas.loc.gov/cgi-bin/bdquery/z?d108:h.r.04504>:

Senate Introduces Companion Bill to Reform Interstate Placement Compact

On September 8, Sen. P. Domenici (R-N.M.) introduced S. 2779, a companion bill to the Orderly and Timely Interstate Placement of Foster Children Act of 2004. The House version, H.R. 4504, was passed by the House on Oct. 5th. The language in both versions is identical. Sen. B. Lincoln (D-Ark.) is a cosponsor of the bill, which has been referred to the Senate Finance Committee.

Bill link: <http://thomas.loc.gov/cgi-bin/bdquery/z?d108:s.02779>

ACF Updates Child Welfare Policy Manual

On July 14, 2004, the Administration for Children and Families (ACF) Children's Bureau made several updates to the child welfare policy manual. Additions were made to sections pertaining to independent living, Title IV-B programmatic requirements, calculating Title IV-E administrative claims, Title IV-E agreements, Title IV-E foster care maintenance payments program related to eligibility of the child of a minor parent, voluntary placement agreements, AFDC eligibility requirements, and fair hearings. Modifications were made to sections pertaining to the foster care maintenance payments program related to eligibility for children placed in child-care institutions and reasonable efforts to achieve a permanency plan.

Additions found at: http://www.acf.hhs.gov/programs/cb/laws/cwpm/updates_add.jsp

Modifications found at: http://www.acf.hhs.gov/programs/cb/laws/cwpm/updates_update.jsp

State Child Welfare Legislation 2002–2003

In March 2004 the National Conference of State Legislatures released a report, *State Child Welfare Legislation*, which documents state legislation related to child welfare issues enacted during the 2002 and 2003 calendar years. The *Adoption and Guardianship* section is excerpted below.

- ◆ Nevada and Oregon codified procedures for the placement of abused or neglected children in permanent guardianships.
- ◆ California and Illinois enacted legislation to protect sibling relationships in adoption.
- ◆ North Carolina created a Special Needs Adoption Incentive Fund to remove financial barriers to the adoption of children by their foster parents.
- ◆ Ohio tightened eligibility criteria for its Post Adoption Special Services Subsidy in response to budget constraints.
- ◆ Washington appropriated funds for a new service program to assist children affected by maternal substance abuse and biological, foster and adoptive parents.
- ◆ Colorado, North Carolina and South Dakota passed legislation to expedite the adoption process.

Note: See the **State Information Exchange** on pages 8-9 of this **Bridges** for specifics on new state adoption laws.

House Ways and Means Committee Releases 2004 Edition of Green Book

On May 3, 2004, the U.S. House of Representatives' Committee on Ways and Means released the 2004 edition of the publication, ***Background Material and Data on the Programs within the Jurisdiction of the Committee on Ways and Means***, informally known as the "Green Book." Compiled by the Ways and Means Committee, assisted by the Congressional Research Service and various federal agencies, the 2004 edition provides detailed data on Medicare, Social Security, welfare, poverty, the elderly, children and families, and other issues and programs. Section 11 of the *Green Book* covers child protection, foster care, and adoption assistance.

Link: <http://waysandmeans.house.gov/media/pdf/greenbook2003/Section11.pdf>

Pew Commission Releases Recommendations on Foster Care Financing and the Court System

On May 18, 2004, the Pew Commission on Children in Foster Care released its report, *Fostering the Future: Safety, Permanence and Well-Being for Children in Foster Care*. The report outlines the commission's recommendations for financing child welfare and strengthening courts.

The financing recommendations include retaining federal foster care maintenance and adoption assistance as an entitlement with coverage for every child in foster care in a cost-neutral manner; allowing subsidized guardianship to be a Title IV-E expenditure; combining Title IV-B, Title IV-E administration, and Title IV-E training into an indexed grant; allowing the reinvestment of federal dollars saved by states that have reduced foster care cases; encouraging the use of longitudinal data in Child and Family Services Reviews; allowing the federal match for state data systems to remain an entitlement; suggesting a National Academy of Sciences panel on outcomes and measures; expanding the child welfare waiver program; providing incentives for child welfare workforce improvements; and creating an incentive that rewards permanency, including adoption, guardianship and reunification.

The court system recommendations include adopting court performance measures; using data for accountability purposes; collaborating on court and state federal plans; establishing broad state commissions; enabling children and parents to participate in the court proceedings; supporting, attracting, and retaining qualified attorneys; and strengthening the leadership capacities of chief justices and other state court personnel.

Press release, executive summary, event transcript, and full report link: <http://www.pewfostercare.org>

Child Welfare Financing Reform Bill Introduced

On July 19, 2004 Rep. Wally Herger (R-Calif.), chair of the House Ways and Means Human Resources Subcommittee, introduced the Child Safety, Adoption, and Family Enhancement (SAFE) Act of 2004 (H.R. 4856). The key provisions in the bill are expansion of eligibility for adoption assistance and foster care with a reduction in the federal matching rate; a cap on foster care maintenance payments available; direct access to federal funding for tribes; the consolidation of IV-B, IV-E administration, and IV-E training funds into a grant; expansion of child welfare waiver demonstration authority; and offsets from TANF and Supplemental Security Income to pay for the costs of the legislation. Cosponsors include Reps. Tom DeLay (R-Tex.), Dave Camp (R-Mich.), Ron Lewis (R-Ky.), Eric Cantor (R-Va.), and Nancy Johnson (R-Conn.). The bill has been referred to the House Ways and Means Committee.

More details can be found online at <http://waysandmeans.house.gov/Links.asp?section=1444>



RESOURCE NOTES

Respite Care

Respite Care for Adoptive Families: A video training and packet for adoptive parents and respite care providers Produced by: Oregon Post Adoption Resource Center, October 2000

This video emphasizes the value of regular respite care for families whose children have special needs and explains the variety of forms and purposes that respite care can take. Practical advice is presented on identifying existing sources of respite care within one's own community, choosing and training respite providers, introducing the child and the provider to ensure a smooth transition, addressing issues of liability, and designing respite to meet individual family and child needs. Individual adoptive parents, agencies, or parent groups can use the second section of the video to orient new respite care providers. The section presents an overview of the "Core Issues of Adoption." Issues of loss, abuse, and attachment are discussed, with adoptive parents giving pointers on the need for individualized supervision. Parents also identify ways in which respite providers can enhance the adoptive family's attachment and functioning. *Length: 80 minutes Cost: \$30*

Also available through Oregon Post Adoption Resource Center: *A Training Manual for Respite*, by Project AFIRM (Adoptive Families Individualized Respite Model). Photocopying and postage cost for manual: \$20, video and manual cost (when ordered together): \$45

Send request and payment to: Oregon Post Adoption Resource Center; 621 SW Morrison St, Suite 450; Portland, Oregon 97205. Phone: 503.241.0799

Website: www.orparc@nwresource.org

State Innovations in Permanency Planning

Achieving Permanence for Children in the Child Welfare System: Pioneering Possibilities Amidst Daunting Challenges. This report provides descriptions of state innovations in permanency planning. Written by Lorrie Lutz, MPP, and published by the National Resource Center for Foster Care and Permanency Planning in November 2003.

Report link: <http://www.hunter.cuny.edu/socwork/nrcfcpp/downloads/achieving-permanence.pdf>

HHS Launches New Campaign to Encourage Adoption from Foster Care

Secretary of HHS Tommy G. Thompson announced a new national public service advertising (PSA) campaign which will focus on encouraging families to adopt children in foster care. The new campaign will educate adults about the processes one must go through to adopt as well as the assistance that is available to people who wish to adopt. The PSA will run the ads during donated advertising times and can be seen at the campaign web site, <http://www.AdoptUSKids.org>

See also the U.S. Newswire, link: <http://releases.usnewswire.com/GetRelease.asp?id=152-07152004>

Court Appointed Special Advocates

Court Appointed Special Advocates (CASAs) are volunteers who advocate for the best interests of children in foster care. Across 45 states, there are more than 52,000 volunteers in more than 900 CASA/GAL programs. The May/June 2004 issue of *Fostering Families Today* offers a special section on Court Appointed Special Advocates. Topics include:

- ◆ Overview of the National CASA Association
- ◆ Description of the role of a CASA/GAL and how foster parents can benefit from having a CASA/GAL volunteer
- ◆ Synopsis of how to improve understanding and cooperation between CASA/GAL volunteers and resource families
- ◆ Reflections from a CASA/GAL trainer

Fostering Families Today link:

www.fosteringfamiliestoday.com/FFT/fft_web/su_subscription.html

Orphanages in the US

A Return to Orphanages? Authors: Madelyn Freundlich, Leslee Morris, and Emily Blair

Released August 3, 2004, this report provides results from the first methodical study detailing where "new orphanages" are being established in the U.S., the nature of those facilities, and the factors associated with their development. In spite of research about the highly negative impact of institutional care on children,

this report reveals growing efforts across the country to create new institutions that will house foster children for most or all of their childhood.

Press release and report link :

http://www.childrensrights.org/press_releases/08-03-04.htm

KIDS COUNT Data Book Released

On June 3, 2004, the Annie E. Casey Foundation held a conference in Washington, D.C., to review the findings of its 15th annual *KIDS COUNT Data Book*. The 2004 report examines national and state trends on 10 indicators of child well-being, including the infant mortality rate; the rate of teen deaths by accident, homicide, and suicide; the percentage of teens that drop out of high school; and the percentage of children living in poverty. The findings indicate that 8 of the 10 indicators of child well-being have improved nationally. The two indicators that did not show improvement are the rates of low-birth weight infants and the proportion of children who live in single-parent homes. One highlight of the report is the decrease in teen pregnancy rates both nationwide and in every state; the teen birth rate decreased 24% between 1996 and 2001. Despite the many positive findings in the report, the authors note that the United States continues to have one of the highest overall poverty rates in the developed world. In addition, one in six young adults is unemployed, not enrolled in school, and has no education beyond high school. The report's accompanying essay, "Moving Youth from Risk to Opportunity," provides a special focus on the challenges faced by at-risk youths and highlights the supports that these individuals need in order to successfully make the transition into adulthood.

Report link: <http://www.kidscount.org>

Ad Council Study

Turning Point: Engaging the Public on Behalf of Children
A report from the Ad Council presents compelling new findings from a recent public opinion study and offers communication strategies that can effectively motivate the public to act on behalf of children. These strategies are the result of over thirty interviews with leading experts in marketing, advertising, communications and community outreach. The goal of this report is to give advocates new communications tools and ideas they can use to effectively reach out to the public on behalf of children.

Report link: http://www.adcouncil.org/research/commitment_children

National Adoption Month

Thanks to a collaborative effort on the part of the National Adoption Information Clearinghouse and The Collaboration to AdoptUSKids, both services of the Children's Bureau, the 2004 National Adoption Month was launched September 13, 2004 to allow for plenty of time to plan events for November. This year's theme, "Answering the Call—You don't have to be perfect to be a perfect parent," builds on the Collaboration to AdoptUSKids' national recruitment campaign, "Answering the Call". It also builds on the adoption public service campaign launched early this summer by the Ad Council which uses print, radio, television, and internet Public Service Announcements to encourage families to step forward to become adoptive parents. View the ads at:

<http://www.adcouncil.org/campaigns/adoption/>

Highlights of the 2004 National Adoption Month website include: November 2004 Calendar with suggested activities to celebrate adoption in November. Calendar link:

http://naic.acf.hhs.gov/general/adoptmonth/activities_calendar.cfm

National Adoption Day, Saturday, November 20, 2004, is a day when hundreds of children around the country will have their adoptions finalized in local courts and jurisdictions throughout the nation. For information:

<http://www.nationaladoptionday.org/2004/>

Link to resources for professionals on recruiting and retaining foster and adoptive parents.

http://naic.acf.hhs.gov/general/adoptmonth/resources_profess.cfm

Link to resources for parents and teachers:

http://naic.acf.hhs.gov/general/adoptmonth/resources_parents.cfm

Visit the 2004 National Adoption website at:

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ICPC REFORM

ICPC REFORM UPDATE: ON THE ROAD TO CHANGE

Background

The Interstate Compact on the Placement of Children (ICPC) was drafted in 1960. There has been growing dissatisfaction from a wide variety of sources with the compact as it is currently written and implemented. Criticisms include: that its scope is overly broad, its procedures are out-dated, its current structure lacks enforcement and accountability, and placements for children are not completed in a timely and effective manner. Members of the American Public Human Services Association (APHSA), that is, the CEOs of the state departments of human services asked APHSA to address the issue of improving interstate placements. In July 2003, APHSA formed a task force to identify the steps necessary to improve the process of placing children across state lines. The ICPC Task Force recommended both short term reforms and a rewrite of ICPC. The Task Force agreed that there are a number of interim steps that can be taken to improve the interstate placement process, but true reform will require a new compact. In March 2004, APHSA's leadership adopted a policy resolution directing APHSA to dedicate staff time and resources to making immediate short term improvements in the administration of the compact and long term reform entailing the drafting of a new interstate compact and securing enactment of the new compact by all states.

Since the last issue of *Bridges*, a number of short term reforms have been made. The short term reforms are aimed at improving the day-to-day administration of the compact. The Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC) is working to implement reforms to improve practice and administration of the current compact. Since March 2004 the AAICPC has:

- (1) Developed training on issues that cause confusion and delays in interstate placements. These include: training of the Indian Child Welfare Act (ICWA), and training on the intersection of the Interstate Compact for Juveniles (ICJ) and the current ICPC.
- (2) Reviewed ICPC regulations, making revisions to ensure that the regulations are consistent with the purpose and language of the compact.
- (3) Reviewed and made recommendations for revising or repealing Secretariat opinions that contradict each other, do not accurately reflect practice, or are outside of the compact language.
- (4) Developed a piece outlining all the types of placements currently covered under the compact and outlined the public policy supporting the applicability of the current compact in each placement type.

The policy resolution also required that a team be assembled to draft a new compact. In July 2004, the ICPC Development and Drafting Team (DDT) met for the first time. The ICPC DDT is comprised of 3 state CEOs; 2 ICPC compact administrators; 2 child welfare directors; representatives from the Children's Bureau, ABA Center on Children and the Law, National Council of Juvenile and Family Court Judges (NCJFCJ), American Academy of Adoption Attorneys, Child Welfare League of America, National Indian Child Welfare Association, National Association of Attorneys General, National CASA Association, and the National Center for State Courts.

The ICPC DDT's role in the rewrite of the ICPC is to provide insight and advice on: (1) the components of a new Interstate Compact for the Placement of Children, (2) the development of educational materials on the new compact, and (3) a strategy for introduction and passage of the rewritten compact. A subgroup of the ICPC DDT and APHSA staff in consultation with staff of the Council of State Governments will draft the new compact that will be sent to the states and all stakeholder groups for review and comment. After the reviews and comments have been considered and incorporated, the final draft will be presented to state human service commissioners for final sign-off. It is expected that a draft of the revision will be completed by December 2004 or no later than March 2005.

Subcommittees include both ICPC DDT members and area experts. The sub-committees are chartered to make recommendations regarding issues that were identified at the first meeting of the DDT as needing further research and consultation. To date, the following subcommittees have been put together:

Final Decision Making Authority Subcommittee: make recommendations regarding which state should have the final decision making power for placements and what are the appropriate roles of the sending and receiving states.

International Adoptions Subcommittee: make recommendations regarding the role of public child welfare agencies in international adoptions (adoption has not been completed abroad in concert with federal law) when the residence of the prospective adoptive parents is different from the agency, lawyer or persons making the placement.

Military Subcommittee: make recommendations regarding the best process for ensuring safety, suitability, and timeliness of placements of children being placed with military families in the U.S. across state lines.

Indian Child Welfare Act and Interstate Placements Subcommittee: examine issues surrounding the interstate placement of Indian children and make recommendations regarding how these placements should be handled. Jurisdictional Issues committee: identify a strategy for facilitating and coordinating the consistent application of the Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA), Parental Kidnapping and Prevention Act (PKPA), the Interstate Compact for Juveniles (ICJ) with the new ICPC.

Independent and Private Agency Adoptions Work Group: make recommendations regarding what type of interstate mechanism is needed, if any, to address concerns raised when these types of adoptions are made across state lines.

The first meeting of the ICPC DDT addressed: the purpose of a compact, types of placements that should be covered, types of protections that need to be in place, and jurisdiction of the compact. While the purpose will continue to be refined, it was agreed that, at a minimum, the compact's purpose needs to be that of ensuring that children are placed in a safe and suitable homes in a timely manner.

The discussion regarding coverage reviewed the types of placements that are currently "covered" by ICPC including those specifically identified in the compact language and those that have been included via secretariat opinion or practice. The ICPC DDT also reviewed the recommendations of the APHSA ICPC Task Force on specific types of placements in the new compact and the outlined arguments regarding the public policy supporting and not supporting inclusion. The following questions were considered:

- (1) For each of the types of possible interstate placements, what concerns are raised if they are or are not covered under the revised ICPC?
- (2) If you have concerns regarding not including a particular type of placement in the compact, are there options for addressing your concerns?
- (3) What is different in an interstate placement that necessitates a different process than would be used for the same type of placement if it were intrastate?

In discussing jurisdictional issues, it was noted that the current compact uses the word jurisdiction in a number of ways that are confusing, 'jurisdiction' needs to be clearly defined in the new compact. There should be a distinction between jurisdiction in the legal sense and the respective roles and responsibilities of the agency making the placement and the state in which the child is being placed. In addition, it was agreed that there needs to be a clear understanding of any potential conflicts that a new compact may have with the other statutes that are used to determine jurisdiction in child custody proceedings as well as with the Interstate Compact on/for the Placement of Juveniles (ICJ).

APHSA is committed to ensuring that the process of reform is open and that all stakeholder concerns are considered resulting in a broad investment in the reform effort.

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We welcome comments or contributions.

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