

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. list	List of Participants - Adoption Meeting (partial) (2 pages)	08/02/1996	b(6)

COLLECTION:

Clinton Presidential Records
First Lady's Office
Melanne Vermeer
OA/Box Number: 20017

FOLDER TITLE:

Adoption [Folder 1] [1]

2013-0534-S

ry1530

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

ADOPTION

ADOPTION

PHOTOCOPY
PRESERVATION

file adopted

House Adoption Bill

(H.R. 867 - Primary Sponsors: Representatives Camp and Kennelly)

Major Provisions

- Clarifies reasonable efforts by requiring each state to define legislatively the categories of aggravated circumstances under which reasonable efforts *are not required*. In addition to the State's list, the bill provides several specific egregious circumstances in which no reasonable efforts would be required, such as if a parent had murdered or tortured a child, or if parental rights to a sibling had previously been terminated involuntarily. The provision further notes that child health and safety should be the paramount consideration in determining whether or not reasonable efforts should be made to prevent a removal or reunify a child.
- Provides financial incentives to states to increase the number of adoptions from the public child welfare system (per child bonuses).
- Clarifies the purpose of dispositional hearings by renaming them permanency hearings and shortens the timeframe until such a hearing is required from 18 months to 12 months.
- Require states to file a Termination of Parental Rights (TPR) petition or join TPR proceedings after a child under 10 years old has been in foster care 18 of the past 24 months unless (1) at the state's option, if the child is in relative care; (2) a State court or State agency has determined there are compelling reasons why TPR is not in the child's best interests; or (3) the State has not provided the services the State deems appropriate.
- Requires reasonable efforts to find an adoptive home or other permanent living arrangement if reunification is not pursued.
- Requires an annual report on states' performance regarding adoption and permanency for children.
- Increases from 10 to 15 the number of child welfare demonstration waivers authorized.
- Provides that foster parents must be given notice of and an opportunity to be heard in reviews and hearings, although they would not become parties to the case.

Relation to the Adoption 2002 Report

With the exception of the requirement to initiate proceedings to terminate parental rights after a child has been in foster care for 18 months and the foster parent notification, the other major provisions of the bill were all elements of *Adoption 2002*. The one major item from *Adoption*

2002 which was not included in the House measure is funding to identify and remove barriers to permanency and adoption.

Costs

This bill is cost neutral. No additional money would be spent.

Current Status

The bill passed in the House on April 30, 1997 by a vote of 416 to 5. The Administration sent a letter strongly supporting the bill.

Senate Adoption Bills

(Several related proposals are active, the primary of which is S. 511, the Safe Adoptions and Family Environments Act, nicknamed SAFE, sponsored by Senators Chafee and Rockefeller.)

Major Provisions of the Chafee-Rockefeller Proposal

- Clarifies the reasonable efforts requirement by emphasizing child safety and providing for some circumstances under which reasonable efforts are not required. The language in the bill is similar to that in the House bill, although not identical.
- Accelerates the schedule of permanency hearings so that one must be held by the time a child is in foster care 12 months (rather than the current 18). The Senate provision also requires that after the initial permanency hearing, subsequent hearings shall be held every 6 months while the child remains in care. (The House bill does not require these additional hearings.)
- Revises adoption assistance eligibility to remove income of the birth family as a key eligibility criteria.
- Expands the definition of IV-E maintenance payments to include a year's reunification services, including substance abuse and mental health services, etc.
- Authorizes a new series of grants to reduce backlogs/barriers regarding adoptions, authorized at \$50 million per year.
- Amends the Substance Abuse Prevention and Treatment Block Grant to broaden the current preference for services to pregnant women to include also parents with children who have been referred to treatment by child welfare agencies.
- Allows foster care payments on behalf of children living in residential treatment programs with their mothers.
- Broadens the use of foster care training funds for training collaborating agencies on child protection/child welfare issues.
- Requires reasonable efforts to find an adoptive home or other permanent living arrangement if reunification is not pursued.
- Increases from 10 to 15 the number of authorized child welfare demonstration waivers
- Requires each state to implement a child death review team, and requires a federal child death review team to investigate deaths on military bases and Indian Reservations.

- Requires States to develop and implement guidelines for out of home care akin to accreditation.

Other Senate Proposals

While S. 511 has received primary consideration in the Senate, there are several additional child welfare/adoption proposals being considered as well. Senator DeWine has introduced a measure that includes items from the House passed bill that are not included in the Chafee-Rockefeller proposal. Senator Craig has introduced in the Senate a bill nearly identical to the House-passed measure (as S. 827). In addition, Senator Grassley has also expressed an intention to put forward a competing bill, but no such bill has yet been introduced.

Relation to the *Adoption 2002* Report

The Senate bill contains many of the elements from *Adoption 2002*, but goes well beyond it with respect to providing additional funding to address barriers to sound child welfare practice. The Senate bill does not include the concept of financial incentives (bonuses) to states for increasing the number of adoptions beyond current levels.

Costs

No official cost estimates for S. 511 have been released, but it is expected that the current version of the bill will be scored by CBO with a cost of approximately \$3 billion, most of that in the provision which would remove Adoption Assistance eligibility restrictions based on birth family income.

Current Status

Senators Chafee and Rockefeller tried to have their bill considered as part of budget reconciliation, but the proposal was ruled non-germane. Senator Lott has attempted to have the Senate vote on the House bill as passed, but that effort was blocked as well. It is not clear at this time what strategy Senators Chafee and Rockefeller, and others, will next take.

ADMINISTRATION, HOUSE, AND SENATE ADOPTION/CHILD WELFARE PROPOSALS

Adoption 2002 Report	H.R. 867 (Camp-Kennelly) as passed 4/30/97	S. 511 (Chafee, Rockefeller, et al) as introduced
Work with States on numerical goals and targets to double the number of adoptions and other permanent placements by 2002.	No additional legislative authority needed.	No additional legislative authority needed.
Provide technical assistance to State agencies, courts and communities to improve the timeliness of permanency decisions and to increase the number of adoptions and other permanent placements.	Technical assistance authority (Sec. 12)	No provision.
Financial incentives to states to increase the number of adoptions from the public child welfare system (per child bonuses).	Adoption incentives payments (Sec. 4)	No provision.
Continued aggressive implementation of the Multiethnic Placement Act, as amended.	No additional legislative authority needed.	No additional legislative authority needed.
Publish an annual State-by-State report on success in meeting numerical targets for adoption.	Annual report on States' performance (Sec. 10)	No provision.
Recognize successful state efforts.	No additional legislative authority needed.	No additional legislative authority needed.
Provide States with funding to identify and remove barriers to permanency and adoption.	No provision.	Section 401 authorizes 5 year grants to reduce backlogs/barriers regarding adoptions. Authorizes a new funding stream under IV-E (to be section 478) with up to \$50 million for these grants.
Clarify the purpose of dispositional hearings by renaming them permanency planning hearings and shorten the timeframe until such a hearing is required from 18 months to 12 months.	Dispositional hearing renamed as permanency hearing. (Sec. 5) Require permanency hearing no later than 12 months after a child is in care (rather than 18). (Sec. 5)	Same provision, section 302

ADMINISTRATION, HOUSE, AND SENATE ADOPTION/CHILD WELFARE PROPOSALS

Adoption 2002 Report	H.R. 867 (Camp-Kennelly) as passed 4/30/97	S. 511 (Chafee, Rockefeller, et al) as introduced
Clarify "reasonable efforts" requirements to emphasize that child health and safety should be the paramount concern in making child welfare decisions and to illustrate circumstances in which reunification is not appropriate.	Clarify reasonable efforts by requiring each state to define legislatively the categories of aggravated circumstances under which reasonable efforts <i>are not required</i> . In addition to the State's list, the circumstances listed in the CAPTA bill would not require reasonable efforts, nor would efforts be required if parental rights to a sibling had previously been terminated involuntarily. The provision further notes that child health and safety should be the paramount consideration in determining reasonable efforts. (Sec. 2)	Adds language on child health/safety and reasonable efforts similar although not identical to H.R. 867. (Sec. 102) Also adds safety language to provisions regarding the contents of case plans and requirements for case reviews. (Sec. 103)
Establish a reasonable efforts requirement to secure an adoptive home when reunification has been ruled out.	Requires reasonable efforts to find an adoptive home or other permanent living arrangement if reunification is not pursued. (Sec. 2) Section 7 requires that reasonable efforts to find an adoptive home must be documented.	Requires reasonable efforts to find an adoptive home or other permanent living arrangement and requires documentation of such efforts. (Sec. 301)
Encourage States to use the Federal Parent Locator Service to locate absent parents and relatives who might provide a permanent home for the child and to terminate parental rights when appropriate.	Use of Parent Locator Service in TPR cases (Sec. 9)	No provision.
Increase the number of child welfare demonstration waivers.	Increase from 10 to 15 the number of child welfare demonstration waivers (Sec. 11). An amendment added on the House floor provides that one of the additional demonstrations must be on the subject of kinship care.	Increase from 10 to 15 the number of child welfare demonstration waivers, Section 402.

ADMINISTRATION, HOUSE, AND SENATE ADOPTION/CHILD WELFARE PROPOSALS

Adoption 2002 Report	H.R. 867 (Camp-Kennelly) as passed 4/30/97	S. 511 (Chafee, Rockefeller, et al) as introduced
A variety of steps are proposed to encourage more timely decision making, but no specific deadlines for TPRs are proposed.	Require states to file a TPR petition or join TPR proceedings after a child under 10 years old has been in foster care 18 of the past 24 months unless (1) at the state's option, if the child is in relative care; (2) a State court or State agency has determined there are compelling reasons why TPR is not in the child's best interests; or (3) the State has not provided the services the State deems appropriate. (Sec. 3)	No provision.
Not addressed.	Foster parents must be provided notice of and an opportunity to be heard in reviews and hearings. (Sec. 6)	No provision.
Suggests this is an issue that needs further study. Commits to establishing kinship demonstration projects as provided for in the reauthorized CAPTA legislation, and through child welfare demonstration waivers.	Required report and recommendations on kinship care. (Sec. 8)	No provision.
Not addressed.	An amendment added on the House floor provides that states may conduct criminal background checks of prospective foster and adoptive parents and group home staff. (Sec. 17)	Section 205 requires States to conduct criminal background checks for prospective foster and adoptive parents and for staff of group care homes.
Not addressed.	Report to Congress on coordination of substance abuse and child protection/child welfare services. (Sec. 13)	Section 201 requires HHS to prepare an inventory of federal programs providing substance abuse prevention and treatment to families receiving child welfare services, and requires a Report to Congress on issues in providing such services.
Not addressed.	Clarification of population eligible for Independent Living Services. (Sec. 14)	No provision.

ADMINISTRATION, HOUSE, AND SENATE ADOPTION/CHILD WELFARE PROPOSALS

Adoption 2002 Report	H.R. 867 (Camp-Kennelly) as passed 4/30/97	S. 511 (Chafee, Rockefeller, et al) as introduced
Not addressed.	An amendment added on the House floor expresses the sense of Congress that States should consider enacting standby guardianship laws. (Sec.18)	No provision.
Not addressed in Adoption 2002, but CAPTA already encourages States to establish such teams.	No provision.	Section 104 requires each state to implement a child death review team, and requires a federal child death review team to investigate deaths on military bases and Indian Reservations.
Not addressed.	No provision.	Section 202 amends the Substance Abuse Prevention and Treatment Block Grant to broaden the current preference for services to pregnant women to include also parents with children who have been referred to treatment by child welfare agencies.
Not addressed.	No provision.	Section 203 allows foster care payments on behalf of children living in residential treatment programs with their mothers.
HHS will "review and may revise the title IV-E training regulations to assure a comprehensive approach to child welfare training."	No provision.	Section 204 broadens the use of foster care training funds for training collaborating agencies on child protection/child welfare issues.
Not addressed.	No provision.	Section 206 requires States to develop and implement guidelines for out of home care akin to accreditation.
Not addressed.	No provision.	Section 303 revises adoption assistance eligibility so that birth families' low income is not an eligibility requirement. In addition, the bill makes immigrant children in the care of state/tribal child welfare agencies and who otherwise meet IV-E requirements eligible for adoption assistance. (Essentially exempts adoption assistance from the immigrant provisions of the welfare reform bill.)

ADMINISTRATION, HOUSE, AND SENATE ADOPTION/CHILD WELFARE PROPOSALS

Adoption 2002 Report	H.R. 867 (Camp-Kennelly) as passed 4/30/97	S. 511 (Chafee, Rockefeller, et al) as introduced
Not addressed.	No provision.	Section 304 expands the definition of IV-E maintenance payments to include a year's reunification services.
Proposes technical assistance to support the development of collaboratives that encourage placements across geographical boundaries.	No provision.	Section 305 requires HHS to study interjurisdictional adoption issues.

FROM MARY BOURDETTE 96905750

5-07-1997 3:02PM

Adjusting the Census

file
adoption

THE DECENNIAL Census is supposed to be a complete count of the population. The goal is never quite achieved. There is always an undercount; it tends to be greater among some groups—blacks and Hispanics in the inner cities, for example—than among others. The faulty figures can have serious consequences. The population figures are the basis for both congressional redistricting and the apportionment of certain federal funds. A state or city whose population is undercounted can lose a congressman or a sizable chunk of federal aid.

By the 1990 Census, the problem had reached such a point that the possible losers were urging the use of sampling to adjust the numbers. The statisticians say that by extrapolating from samples they can make the numbers more accurate, even if all the people in the new totals won't have been physically counted in the traditional way. Why not, say the jurisdictions and groups that would benefit—and Democrats, who tend to represent the undercounted groups, tend likewise to agree that adjustment would be a good idea. But others say an adjusted count will always be an artifact, subject to manipulation and untrustworthy; they want to stick to what they call hard numbers. Not surprisingly, they include—though they are not limited to—the winners

under the present system, and this has also tended to be the Republican view.

When urban and other advocates pushed for adjustment of the 1990 figures, the Bush administration refused. The courts upheld the decision, saying basically that the executive branch has discretion to do the thing either way. Congress then ordered a study by the National Academy of Sciences. The study found that statistical adjustment would produce more accurate figures at lower cost, also a consideration in a tight budget era. The Clinton administration thus began to prepare to adjust the year 2000 figures. But the fight about whether to do so seems likely to recur.

The Senate Appropriations Committee's first bill of the year included a rider forbidding any further expenditure of funds on the adjustment process. In response to administration objections, the rider was amended the other day to permit further work, so long as it didn't lock the process in. The fight has thus been put off until later. Our own sense is that adjustment is the right thing to do. We used to have doubts about the adjustment process; it seems warranted to us now. Your balance risks in situations such as this. The professionals at the Census Bureau aren't going to play politics with the numbers, and an adjusted Census will be more accurate—and more fair.

From Foster Care to Adoption

ABOUT 15 YEARS ago, Congress enacted legislation directing states to make reasonable efforts to reunify abused children with their families. The law reflected both a strong commitment to parental rights and an uninspected belief that with help, even the most improbable and abusive parents could be counted on to provide suitable care. That is true in some cases. But the dark secret known to people who work in the field, but seldom honestly acknowledged by lawmakers and many others, is that some parents are the worst possible people to care for children. Recent news accounts of toddlers beaten to death by their fathers, of children abandoned while their mother was out looking for drugs or of youngsters bound, gagged and locked in a room for 22 hours a day prove the point.

In dealing with some of these horrible cases, however, states often felt bound by federal law to continue to try to keep the families together. Last week the House took a realistic view of this problem and passed legislation to clarify the responsibility of social workers. The bill, which appears headed for Senate passage soon, is not a reversal of the old policy. But it puts a new and welcome emphasis on the children who should be the focus of society's concern.

Continue reasonable efforts to reunite families, the bill directs. But where parents pose a threat to the children, get tough. Where a child has

been abandoned or subjected to abuse, don't look on foster care as a long-term solution. Begin the process of terminating parental rights and arranging for adoption. Where children under 10 have been in foster care for 18 of the most recent 24 months, begin making permanent plans for adoption. Adoption should be considered for all children in foster care at 12-month intervals instead of every 18 months. States that increase the rate of adoptions from foster care will receive incentive payments: \$6,000 for every hard-to-place child and \$4,000 each for others.

The bill now being considered offers no magic solution. Not every child in foster care will be adopted. But emphasizing the desirability of that step in certain cases, and setting reasonable timetables for action, will change the lives of tens of thousands of children. More adoptions will also better enable social service agencies to manage the badly overburdened foster care system for the benefit of those children who remain.

Overall, the direction of the reform is right. Parents whose conduct demonstrates an indifference or hostility to their children should not retain the power to leave them in limbo or prevent their adoption into loving homes. When family reunification is not possible or wise, the rights of parents should be considered but not controlling. The well-being of the children should control.

The Washington Post
SATURDAY, MAY 10, 1997

file
adoption

MARY McGRORY

A Chance to Put Children First

A lot of people in this city profess to be champions of children. Sen. Mike DeWine (R-Ohio), an earnest, unpretentious, conservative first-term is the real thing. He is pushing a bill that gives children a break under the infamous Family Reunification Act that is responsible for so many grotesque returns of children to dangerous families.

"He's a tiger," says Rep. George Miller (D-Calif.) who, with the best intentions in the world, sponsored the original Family Reunification Act in 1980, but who now feels that DeWine's revision is appropriate in a post-crack world. He protests his bill is not responsible for the injuries and deaths that sometimes result, "it's the stupidity of people interpreting it."

DeWine's interest goes back to his days as a junior prosecutor in Ohio. Later, as lieutenant governor, he was in charge of the state's juvenile justice system. He was appalled by the almost casual dispatch of children to bad homes. He would ask a social worker the reason and be told, "We had to, it's the federal law."

Actually, the law mandated "reasonable efforts" to reunify the family. Reason has long since disappeared from the equation. Social workers and judges are so under the sway of reunification that they close their eyes to the history of parents and define a family as a single mother on crack.

What seems to matter to social workers and judges is a compliant attitude. A mother who killed her baby but filled out all her forms correctly, attended parenting classes regularly and never gave anyone any sauce is in a good way to get a child back. Every mother is Mother Machree to some family advocates. Their philosophy seems derived from the headquarters of the Hallmark Greeting Card Mother's Day unit rather than firsthand observation of total irresponsibility.

A leading expert on child abuse, Richard Gelles of the University of Rhode Island—he is the author of "The Book of David", the story of a baby killed by its mother, while child welfare workers wrung their hands—says that social workers like anyone "who isn't yelling at them and trying to kill them. They mistake compliance for real change."

Two recent cases of family reunification should be raising the capital's consciousness on the issue. The father of 11-year-old Robert

Williams allegedly punched the boy, causing his strangulation. In the other, 5-year-old Richard Holmes was bound hand and foot by his father and his girlfriend, was gagged with duct tape and tethered to his bed for some 22 hours. The father had abused him as a baby, but the judge overlooked that and the social workers sedulously ignored the complaints of teachers who reported bruises and other evidence of violence.

The scene was Montgomery County, which is one of the 10 richest in the country and has unusually well-educated social workers. An official report exonerated them.

DeWine says he doesn't know if his bill would have saved Robert and Richard. He is the father of eight, and so pro-child that he keeps an entire shelf of Dr. Seuss books in his office. The trouble, as he sees it, is that "we as a society have got to stop worrying about the parents and focus on our kids. We have got to change the culture. My bill will change attitudes, I hope. It makes the welfare and safety of the child the paramount issue, put the emphasis on saving the child, not the family. It will take away any excuse for social workers or the judge to find automatically in favor of the family."

DeWine's bill recently sailed through the House as part of the Camp-Kennelly Adoption Promotion Act, which passed by 418 to 5. Its prospects in the Senate, however, are not brilliant. A competing bill, which has large sums for unification efforts, has preference. Sen. John H. Chafee (R-R.I.) is a co-sponsor of the Safe Adoption and Family Environment Act, and he has domain over the Environment and Public Works Committee. No one wishes to alienate him. He and his co-sponsor, Sen. "Jay" Rockefeller (D-W.Va.), have let it be known that they wish their bill to take precedence over the House measure.

"I intend to be very aggressive and obnoxious until I get this done. I don't know how," says DeWine.

In a well-run world, his views would prevail. He merely asks to give children a chance to be children, to be watched over and taken care of. But the word "family" is such a talisman in U.S. politics that politicians leap to salute whenever they hear it. But they ought to think of the cost of putting the burden on children. They should not have to be sacrificed to polish the egos of parents who want society, or their circle, to think of them as fit parents. Children shouldn't have to suffer to redeem the reputations of people who don't treat them right.

The Washington Post

THURSDAY, MAY 8, 1997

Talking It Over

By Hillary Rodham Clinton



Our foster care system urgently needs reform

The reality of foster care was brought home to Bill and me when we met a teen-age boy at the White House this winter. Bill asked him where he was from. "Fairfax County," the boy said. When Bill asked where in the county, the boy shrugged and answered, "All over."

Because of the complex regulations, outdated assumptions, and understaffed and overwhelmed agencies of our child welfare system, many children spend their formative years shuttling from one foster home to another. Today, even children lucky enough to find adoptive families will have waited an average of three years or more in a series of temporary homes.

But that can change. The Senate and the House of Representatives are both considering bills that will take important steps toward making sure that no child languishes in foster care.

Currently, a child's case can drag on for years in the foster care system as authorities make repeated attempts to reunite a child with his or her biological parents. Often these parents, for a variety of reasons, are unable to change the behavior that caused them to lose their child in the first place. If either bill becomes law, "reasonable efforts" to return a child to his or her family would not be required in extreme cases such as torture, abandonment or physical or sexual abuse. Court hearings to determine the placement of a child would be required within 12 months — instead of the current 18 months — of his or her arrival in the foster care system. To make clear their purpose, these hearings would be renamed "permanency planning hearings."

As a children's advocate and lawyer who has represented parents and children in their struggles with the foster care system for more than 25 years, I believe these steps are long overdue. In 1973, I wrote an article about children's rights under the law, specifically their rights in family situations that pose serious threats to their health and safety. Even a few years ago, some considered this view controversial. Critics suggested that by supporting a child's right to a loving family, I advocated giving government more power to break up biological families and giving children the right to bring trivial disputes with their parents — such as bedtime or who takes out the garbage — to court.

Thankfully, that erroneous interpretation of my views has given way to a new bipartisan consensus around the idea that protecting our children from harm and working to provide them with permanent, loving

families — even when that may entail separating them from their biological parents — should be a priority of our child welfare system. Finally, we are recognizing that there are parents who will never be able to care for their children. And, in order to secure a foster child's well-being and stable development, we as a society have the responsibility to decide as quickly as possible whether a child can return home safely.

Many of the provisions in the House and Senate bills reflect recommendations made in Adoption 2002, a report prepared by the Department of Health and Human Services in response to the president's directive to identify the barriers to adoption and double the number of children placed annually in permanent homes by the year 2002.

Over the years, my husband has dedicated a great deal of time and energy to improving foster care and promoting adoption. As a result of the administration's efforts, it is now illegal to deny or delay an adoption simply because the prospective parents and child are not of the same race. And last year, the president signed into law a \$5,000 tax credit to help families adopt children.

Federal leadership is crucial, but it will take the commitment of people from all corners of our country to bring about the sweeping change our child welfare system requires. This week, I'll be speaking at a national conference on adoption and child welfare reform sponsored by the W.K. Kellogg Foundation. The conference will bring together business and religious leaders, policy-makers, elected officials, judges, child advocates, and foster and adoptive families to discuss strategies to reduce the number of waiting children and limit the time a child spends in foster care to no more than one year.

The Kellogg Foundation has been working to reform child welfare systems in 11 states and localities. Last year alone, the foundation helped find permanent families for 7,000 children. This was possible because the foundation worked with churches and mounted aggressive media campaigns to recruit prospective adoptive families. And it helped child welfare agencies reform casework procedures, consolidate records and modernize data collection methods so that no child becomes lost in the system.

Now we must build on their work. With thousands of children leading transient lives in foster care, we cannot afford any more delays. We need to encourage Congress to pass the best adoption bill possible. Thousands of innocent children are counting on us.

The Washington Times

THURSDAY, JUNE 26, 1997

Business, parties split over proposal

By Lorraine Woellert
THE WASHINGTON TIMES

A1

President Clinton yesterday endorsed a sweeping plan to eliminate soot and smog that would establish the toughest air pollution standards in U.S. history.

Backyard barbecue grills and lawn mowers might be forbidden under the regulations, industry groups say.

Speaking at a family conference in Nashville, Tenn., Mr. Clinton tried to quiet critics by promising a flexible, long-term approach to meeting the new pollution limits.

Reaction from the business community, however, was swift and blunt.

"It's going to be tragic," said Harry Alford, president of the National Black Chamber of Commerce. "It's a sad day."

Mr. Clinton acknowledged the new standards would be "somewhat controversial" but appealed to opponents to hold their criticism.

"Those who have opposed the higher standards, I want to just tell you, read the implementation schedule, work with us," he said. "We will find a way to do this in a way that grows the American

see EPA, page A9

EPA

From page A1

economy."

He pledged to give states and businesses time, flexibility and technical support to meet the new rules. The health of the nation, particularly children, is at risk, he said.

"We have to keep having a clean environment if we want healthy children," Mr. Clinton said, noting the rising incidence of asthma among schoolchildren. "Children with asthma don't do very well in school."

His announcement follows criticism at the Group of Seven summit in Denver, where Mr. Clinton successfully blocked strong language calling for global clean-air standards.

The proposed U.S. regulations, which would be the first in a decade, have been under fire since November, when they were first revealed by Administrator Carol Browner, head of the Environmental Protection Agency.

After the regulations are published July 19, Congress will have 60 days to review them, and a bipartisan group already is working to derail the proposal. A 1996 law designed to cut red tape also permits "aggrieved" businesses or towns to sue to block the regulations from taking effect.

The standard would put hundreds of counties and cities, including the Washington region, out of compliance with the Clean Air Act and force states to impose costly controls on emissions.

The plan limits ozone, an ingredient of smog, to 0.08 parts per million, compared with 0.12 parts per million now, and makes other changes to more accurately measure air quality. The government also would regulate microscopic soot particles that are 1/28th the width of a human hair. Health experts say these particles become lodged in the lungs and might be more dangerous than larger particles already regulated.

It will be up to states and cities, not the EPA, to decide how they meet the new standards, whether restricting utility emissions, car exhaust, or the use of old lawn mowers.

The move has split nearly every constituency imaginable, including scientists, environmentalists and even local governments; none agree on the need for or impact of the new regulation.

Many states, particularly those in the Midwest, say the new standards will damage economies by pushing manufacturing companies, and their jobs, to other countries where pollution standards are less strict. The U.S. Conference of Mayors opposes the EPA plan.

But some urban areas, especially those along the East Coast, back the proposal because it would bring Midwestern states under the same pollution restrictions. Sen. Alfonse M. D'Amato, New York Republican, yesterday pledged to resist attempts to delay or weaken the standards. Rep. John Dingell, Michigan Democrat, vowed to block the new rules.

"The administration has chosen to ignore the legitimate concerns expressed by ... nearly 80 Democratic members of the House and several of the president's own Cabinet," Mr. Dingell said.

Health groups claimed bipartisan support for their cause and were confident in their victory.

"The public still overwhelmingly supports these standards, despite this multimillion-dollar campaign. They know the air is dirty," said Paul Billings, deputy director of government relations at the American Lung Association.

He dismissed claims that the regulations would drastically alter the suburban lifestyle as "scare tactics," saying technological advances will accomplish most of the reductions. He noted the introduction of clean-burning gasoline and catalytic converters in recent years.

"The public isn't going to see dramatic changes in the way they live," Mr. Billings said. "We're going to see incremental changes, and technology is going to carry the day."

Mrs. Browner said the plan will focus on electric utility emissions and will allow areas at least until 2004 to comply.

Because this is the first time the EPA has tried to regulate soot, the agency will spend five years just to build a system to monitor the fine dust. The plan includes an emissions trading program, in which states that exceed standards would be able to sell their "pollution credits" to other states.

"As important as the public health protections are, equally important is sensible, reasonable implementation," Mrs. Browner said yesterday.

Industry groups said the fight against the proposal is just beginning. "I think you'll see an even larger coalition developing as more and more people understand how bad a decision this is," said Jerry Jasinowski, president of the National Association of Manufacturers. "The standards, if implemented, would have a devastating effect on businesses and jobs."

• Warren P. Strobel, traveling with the president in Nashville, contributed to this article

The Washington Times

THURSDAY, JUNE 26, 1997

ate struggles to adopt w system of foster care

Sheryl Wetzstein
WASHINGTON TIMES

Kevin Green, a Mississippi teenager who grew up in foster care and is speaking about it today in Washington, might have found a permanent home if congressional reforms proposed this year were in place during his childhood.

But those reforms are now on hold because lawmakers have "diametrically opposed" ideas about how to fix the foster-care system, top GOP aides said this week.

Senate Majority Leader Trent Lott, Mississippi Republican, has asked senators with competing ideas to begin forging a consensus bill, his spokesman said this week.

The delay disappoints Republican leaders, who hoped after a 416-5 vote in the House on a foster-care reform bill to get a quick, decisive and bipartisan "win" on a family issue by Mother's Day.

Instead, they watched as the House bill was derailed in the Senate, an industry-supported Senate bill strangled on its budget-busting price tag, and a third closely guarded and possibly radical approach developed among Senate conservatives.

The current cease-fire — the first in several months of vigorous behind-the-scenes discussions — pleases adoption advocates such as Maureen K. Hogan, executive director of Adopt A Special Kid.

As evidenced by the court-ordered supervision of foster care programs in 22 states and the District, "the system is literally in failure, massive systemic failure," she said. "For Congress to do a reform that's anything less than a really thoughtful approach isn't just irresponsible, it's immoral."

Each year, some 600,000 abused, neglected or abandoned children enter foster care. Most — 66 percent — are eventually returned home, but many repeatedly re-enter the system and "lan-

guish."

Critics say children get stuck in foster care because states and agencies receive per diem payments for each child in care. Unwilling to give up the money, they won't give up the child — at least for a few years, critics say.

In Mr. Green's case, his mother gave him to foster care soon after he was born prematurely and drug-addicted. She would have terminated her parental rights anytime, he said, but she didn't do it until he was 16 — well past an "adoptable" age in many eyes.

As a result, he grew up in a succession of foster homes while his social workers tried in vain to reunite him with his mother.

Last year, he became one of nearly 15,000 children to "age out" of the foster-care system. He attends classes, works two jobs and lives on his own, thanks to the moral support he got from one of his foster families and several "independent-living" programs.

At 19, he knows that what he got from the system wasn't enough. "I always really wanted to be adopted," said Mr. Green, who will speak at a conference sponsored by the W.K. Kellogg Foundation.

Members of Congress have been working all year to pass legislation to promote the adoption of foster-care children like Mr. Green.

At the heart of the debate is a national policy that tells social workers to make "reasonable efforts" to reunite children with their families — a compassionate approach to handle families who are only temporarily distressed, child welfare advocates say.

The policy has unfortunately forced too many children back into unsafe homes, said Reps. Dave Camp, Michigan Republican, and Barbara B. Kennelly, Connecticut Democrat, who sponsored an adoption-promotion bill that passed the House in April with an overwhelming vote of 416-5.

Thompson prods GOP to comply in probe

ASSOCIATED PRESS

Sounding a warning to his own party, the Republican head of the Senate campaign-finance inquiry has told the GOP national chairman not to shield "important facts" from investigators.

In a letter written June 11 and obtained Wednesday by the Associated Press, Sen. Fred Thompson, Tennessee Republican, demanded "complete cooperation" by the Republicans.

"With respect to witnesses, I would also urge you to counsel your attorneys not to attempt to shield important facts with broad and specious assertions of privilege," as others have done, Mr. Thompson wrote Republican National Committee Chairman Jim Nicholson.

Mr. Thompson, chairman of the Senate Governmental Affairs

Committee, said he wrote the letter because the Democratic minority complained that Republicans held back key information from investigators.

The Republican National Committee sent Mr. Thompson's panel several boxes of documents in response to a Senate subpoena, but many of the records contained major deletions.

Mr. Thompson wrote the Republican Party chairman at a time he's seeking Democratic support to grant limited immunity to low-level witnesses in the probe. At least two Democratic votes are required for the immunity, which needs a two-thirds committee majority.

On June 12, Democratic committee members blocked Mr. Thompson's initial request to compel testimony from 18 witnesses by

giving them limited immunity from prosecution.

Mr. Thompson urged Mr. Nicholson to "permanently look into this matter and ensure that RNC compliance will be prompt and complete."

Mr. Nicholson wrote Mr. Thompson and the ranking committee Democrat, Sen. John Glenn of Ohio, on June 11 that the GOP organization tried to answer committee concerns.

"Indeed, we invite the committee to pose substantive questions rather than issue inflammatory comments to the media," he wrote.

Republican attorneys, he added, were searching "every file" at Republican headquarters and at a warehouse in an effort to comply. Only material "which has no relevance to the committee's investigation" has been deleted, he

wrote.

Committee Democrats have insisted that Republicans provide their documents without any deletions.

Meanwhile, Rep. Gerald Solomon, New York Republican and chairman of the House Rules Committee, demanded that President Clinton persuade former Democratic fund raiser Charlie Yah Lin Trie to return from China to testify before Congress.

"How do you explain that the U.S. government cannot locate Charles Trie, but Tom Brokaw can?" Mr. Solomon wrote, referring to an NBC News interview with Mr. Trie. In a letter to Mr. Clinton, Mr. Solomon asked that Secretary of State Madeleine K. Albright determine Mr. Trie's location in China.

The Washington Times

THURSDAY, JUNE 26, 1997

Democrats turn up rhetorical heat as tax, budget votes loom

By Patrice Hill
THE WASHINGTON TIMES

House and Senate Democrats used yesterday's balanced-budget debate to sharpen their rhetoric for the larger battle over tax cuts being waged the rest of this week in Congress.

Senate Democrats unveiled their alternative to the bipartisan tax bill pending on the Senate floor, cutting taxes by the same net amount of \$77 billion over five years, but shifting more of the benefits from wealthier taxpayers who save and invest to working-class families who pay no taxes.

"It is important that Americans know what would have been done

if Democrats were in the majority," said Senate Minority Leader Tom Daschle, South Dakota Democrat.

The bipartisan tax bill already gives part of a \$500-per-child credit to working-class families that currently zero out their tax bills by using the Earned Income Tax Credit. The Democratic plan would enable them to take the full credit, covering an additional 7 million children, sponsors say.

The Democratic bill provides \$41 billion in education tax breaks — more than President Clinton requested. It pares back Mr. Clinton's HOPE tuition credit less severely than the bipartisan bill, provides a tuition deduction of 20 percent to people who have ex-

hausted the HOPE credit, and adds funds for school construction.

On capital gains, the Democratic plan dramatically cuts back on breaks enjoyed by wealthier Americans by substituting a 30 percent exclusion from income for the GOP's dramatic rate reductions. It targets maximum capital-gains relief as well as all of its estate tax relief on small businesses and farms.

In the House, Democrats got a head start on today's daylong tax-cut debate by using much of yesterday's balanced-budget debate to attack the Republican tax bill.

House Minority Leader Richard A. Gephardt led the charge by proclaiming that today's vote on tax

cuts "is one of the most important votes that will be taken in this Congress." Meanwhile, House Minority Whip David E. Bonior led a liberal assault on the GOP tax and budget bills on the House floor.

In a theme that Democrats hope to amplify in next year's election campaigns, Mr. Gephardt, Missouri Democrat, said the parties' differing tax plans "offer a stark contrast between the values of Republicans and Democrats in our approach to helping middle-income families."

Republicans aim to provide the most tax relief to middle-income families who pay the most in taxes, while Democrats target their relief to families who currently pay little

or no taxes.

"What we have is a replay of the last Congress. They are taking care of the biggest corporations in this country ... while children don't get the necessary health insurance they need and legal immigrants go without," said Mr. Bonior, Michigan Democrat.

While Democrats heaped criticism on the GOP tax bill, the House approved some last-minute changes, primarily to counter criticism from conservative and farm-state Republicans and ensure near-unanimous GOP support in today's vote.

One of the changes would address concerns of conservatives who want to deliver the bill's \$400

child tax credit to constituents before next year's election. It would require the Internal Revenue Service to notify all taxpayers that the credit is available on Jan. 1, 1998, and adjust tax withholding to reflect the tax cut.

In a second change demanded by legislators from corn-growing regions, House Ways and Means Committee Chairman Bill Archer dropped his plan to accelerate the elimination of tax subsidies for ethanol producers. The Texas Republican's proposal would allow the subsidies to expire as currently scheduled in 2000.

• Nancy Roman contributed to this report.

The Washington Times

THURSDAY, JUNE 26, 1997

Rochefeller trust
MELANNE VERVEER Am.

- had no choice
- precedent ^{to} process

blocking house bill facing
true negotiations

substitute

his comment not real

Lott surrendered

threw Craig, Chopper,
Boch, DeWine
Coats + Dennis

report to Landrum +
Dodd

offset - cost allocation idea
welfare reform b. grant →

MELANNE VERVEER

Cap on adon cap -
revenue of family preservation
+ \$ for other services

It would have had
no leverage but up
down on house bill

file —
adoption



file adoption

Arizona - Pima County, Kansas, Northeast Ohio, Massachusetts, Michigan - Kent County, Mississippi, Montana, New York City, North Carolina, South Carolina, Washington

July/August 1997

On June 25 and 26, nearly 250 key national, state, and local leaders gathered in Washington, DC, for a foster care and adoption policy conference, **Policy Perspectives on Permanency**, hosted by the W.K Kellogg Foundation as part of the Families for Kids Initiative (FFK). The goal of the conference was to focus national attention upon the critical issue of waiting children and create a sense of urgency about their plight that would compel action and systemic change at all levels. The conference provided opportunities for FFK to leverage sustainability efforts; communicate with broader audiences about FFK and children in foster care waiting for permanent homes; sustain the adoption reform momentum generated over the last two years; and engage federal, state, and local policymakers in exchanging solutions and perspectives.

First Lady Hillary Rodham Clinton, Kansas Governor Bill Graves and First Lady Linda Graves, and New York City Mayor Rudolph Giuliani were among the keynote speakers who presented their perspectives on solutions and systems changes. Other national, state, and local advocates from across the United States, as well as adoptive families, brought their first-hand experiences to the discussion. The audience included leaders from religious groups, child advocates, community activists, top child welfare administrators, the judiciary, state and local elected officials, and Congress.

First Lady Hillary Rodham Clinton noted that the conference could not have been more timely given that federal policymakers are forging a bipartisan coalition on some crucial child welfare issues that put the country "within reach of bringing common sense to the overburdened and outdated foster care system." She emphasized the need to recognize and work harder to reduce the disproportionate representation of children of color within the foster care system and to redefine reasonable efforts and offer financial incentives to those interested in adopting children, especially special needs children, from the public system. Underscoring the President's commitment that no child should be deprived of a safe and permanent home for longer than necessary, she summarized current efforts to highlight successful strategies; breakdown financial and other resource barriers to permanency; and make tax credits available for adoptive parents. Mrs. Clinton offered support and gratitude to FFK for its commitment and leadership in reform efforts.

W.K.KELLOGG FOUNDATION

One Michigan
Avenue East
Battle Creek, MI
49017-4058
USA
616-968-1611
TDD on site
Telex: 4953028
Facsimile: 616-968-0413

*To help people
help themselves
through the practical
application of knowledge
and resources to improve
their quality of life and
that of future generations*

- more -

FROM: COMMUNICATION CONSORTIUM TO: 23382391 0432 571 AUG 22, 1997 4:10PM #818 P.01

Members of Congress speak up. . . The conference's plenary and breakout sessions on June 26 were preceded by a reception and dinner on the evening of June 25 featuring federal policymakers who shared their perspectives on child welfare reform. Senator Mike DeWine (R-OH), Congressman Dave Camp (R-MI), Congresswoman Barbara Kennelly (D-CT), Congresswoman Carolyn Maloney (D-NY), and Olivia Golden from the Department of Health and Human Services emphasized the importance of both Republicans and Democrats working together to reform the system and were hopeful that Congress would act this year on legislative reforms. In the opening prayer, Judge Julian Pinkham, Yakima Nation Tribal Court judge and spiritual leader, urged participants to protect the health and well-being of children in foster care.

Envisioning change. . . On June 26, Dr. Valora Washington of the W.K. Kellogg Foundation opened the conference, calling it a clarion on behalf of waiting kids as well as an opportunity for conferees to share what they know about what works. "Increasing the chances of permanency for children drifting in the system requires new potential allies to elevate the dream of change above the intimidating presence of things as they are," said Dr. Washington. "This is what FFK reformers have succeeded in doing and what all reformers must do if we are to enact what 25 years of research has already taught us about children's needs and proven systems solutions."

Through the eyes of children and youth. . . To underscore the urgency of the issue, the opening speakers were veterans of child welfare systems that failed to find permanent homes for them. Shane Salter, who is currently the deputy director of For Love of Children in Washington, DC, spoke about his experiences in nine foster homes, two group homes, and an orphanage before he "aged out" of the system. Mr. Salter was followed by Kevin Green, a member of the Mississippi SUN (Speak Up Now) Team, who told his story of his foster care placements. He indicated that his FFK advocacy work as part of the SUN team was helping fill a hole in his heart as a result of being without a family. "Why we turn our backs on kids, I don't know," Mr. Green said.

Community visioning, community leadership. . . Judge William Byars, Jr., Fifth Circuit Family Court Judge in Kershaw County, S.C., spoke to the participants about the paradigm shift needed, including in the court system, to "see the system through the eyes of a child." He has been an acknowledged leader in South Carolina's legal reform movement, which has embraced family preservation, emphasized permanency, supported kinship care, increased terminations of parental rights by a factor of 10, and increased adoptions by a factor of six.

State perspectives on permanency. . . Kansas Governor Bill Graves and Mrs. Linda Graves, adoptive parents themselves, shared with the audience Kansas' approach to reform. The change process had three immediate goals: above all, to protect kids; to focus on outcomes, not social service process; and to deliver services more effectively. Kansas pursued these goals by privatizing the bulk of their child welfare services, the first state in the nation to do so. He stated that the initial results of this approach are encouraging, with fewer children entering foster care each year, more children returning home, children staying in foster care for shorter periods of time, and reunified families remaining together longer.

- more -

FROM: COMMUNICATION CONSORTIUM TO: 23382391 0432 571 AUG 22, 1997 4:11PM #818 P.02

Achieving permanency: What we must do. . . A panel of child welfare commissioners shared their philosophies and strategies for improving the foster care and child welfare systems. Nicholas Scopetta, commissioner of New York City's Administration for Children's Services, talked about several of their strategies that have steadily increased the number of adoptions since 1994. A new focus on permanency and adoption and the support of key members of the judiciary are among the factors of their success. Donna Starr, president of the Native American Commission on Children and Families in Washington state and a member of the Muckleshoot Tribe, emphasized that tribal people do not believe in severing their blood ties (as is often the case in the mainstream formal adoption process); instead, they favor using guardianships, relying upon open adoptions as a last resort. Jim Clarke, state director of the South Carolina Department of Social Services, stressed improving the management of systems serving children. Kevin Fitzgerald, director of the North Carolina Division of Social Services, cited the success of North Carolina's eight "FFK counties" in outperforming all other counties in terms of increasing adoption rates and stabilizing expenditures. JoAnn Lawer, deputy secretary for the Office of Children, Youth and Families in Pennsylvania, discussed her agency's collaborative efforts with the Annie E. Casey Foundation's Family to Family initiative to develop reliable data on children in the foster care system. Marva Hammonds, director of the Michigan Family Independence Agency noted several positive developments throughout the state, including legislative initiatives that would require legal personnel to recognize a child's sense of time.

The FFK Mandate: Reduce the backlog and change the system. . . Thursday's luncheon featured Mayor Rudolph Giuliani speaking about New York City's approach to reducing the backlog of kids waiting to be adopted and reforming the child welfare system so that it serves children and families better. He spoke about the need for the agency to shift from a culture of unaccountability to one of accountability in order for it to effectively protect children. He also emphasized that local governments, particularly city governments, are in the best position to help kids and families because they are the closest to their problems and their needs.

Implementing change: Conversations about permanency. . . In the afternoon, the conference divided into five breakout sessions to allow participants to engage in concrete discussion about various aspects of reform.

Taking action to achieve permanency for kids. . . This session explored putting state policy and legislative frameworks in place by addressing issues such as reasonable efforts, court management, and enforcement of timeframes and permanency options in statute and policy. The panel featured Mark Hardin, director of Child Welfare at the American Bar Association, Center on Children and the Law in Washington, D.C.; Cassie Bevan, staff professional assistant to the U.S. House of Representatives Committee on Ways and Means, Subcommittee on Human Resources in Washington, D.C.; Barbara Pryor, legislative assistant to Senator John D. Rockefeller (D-WV) in Washington, D.C.; and Judy McKenzie, executive director of the Spaulding Center for Children in Detroit, Michigan.

Building blocks for permanence addressed the question of whether the movement to restructure or privatize child welfare services will ensure permanency for children. The session included discussions of public and private sector roles, the need for integrated children's services and the implications of managed care. Teresa Markowitz, commissioner of Children and Families in Kansas, Karabelle Pizzigati, the director of public policy at the

- more -

FROM: COMMUNICATION CONSORTIUM TO: 23382391 0432 571 AUG 22, 1997 4:12PM #818 P.03

Child Welfare League of America, Gary Crow, executive director of Lorraine County Children's Services in Ohio, and Michael Weekes, deputy commissioner of quality management and program development in Massachusetts lead the discussion.

Funding mechanisms for outcome-based systems looked at innovative alternatives that address the reduction of mainstream funding and how states are developing new resources. The panel included Isaac Palmer, deputy commissioner for the Ohio Department of Human Services; Fred Wulczyn, Chapin Hall Center for Children at the University of Chicago; Chuck Harris, chief of the Children's Services Section in North Carolina; and MaryLee Allen, senior public policy director at the Children's Defense Fund in Washington, DC. The panelists and participants discussed managed care, outcome-based contracts, and new approaches to IV-E & IV-B federal funding waivers, among other issues.

Promising practice solutions: Early interventions highlighted innovative solutions that include intervention before removing children from their families; reducing foster care drift; and identifying critical cultural issues. Some of the programs designed to achieve this include kinship care models, concurrent planning, family decision-making conferences, and family advocacy. This session was led by Linda Katz, program director at the Lutheran Social Services of Washington and Idaho; Veneese Chandler, executive director of the Family Outreach Center in Grand Rapids, Michigan; and Ernesto Loperena, executive director of the New York Council on Adoptable Children in New York City.

Promising practice solutions: "The Backlog Blitz". . . "How best can we achieve the outcome of moving children into permanent families?" was the central question in this session. A panel including Ruth Amerson, executive director of Another Choice for Black Children in Sanford, N.C., Polly Pfeuffer, a permanency planning specialist for Arizona Families for Kids in Tucson, and Kim Stevens, family advocacy coordinator for Massachusetts FFK in Boston shared their successful approaches to increasing the number of children who find permanent homes.

For more information. . . Complete summary highlights of Families for Kids national policy conference, *Policy Perspectives on Permanency*, will be available in early September from the W.K. Kellogg Foundation at 800/819-9997. Visit the W.K. Kellogg Foundation web site at www.wkkf.org for a press release on the conference and press kit including several downloadable publications and fact sheets on FFK. Go to the "Newsroom" in the "Resources" section of the web site, and click on "Adoption Reform Conferences."

* * *

Successes and Challenges is a monthly fax providing information about the W.K. Kellogg Foundation's Families for Kids Initiative. We have recently added the participants in the African American Leadership Summit and national adoption policy conference, *Policy Perspectives on Permanency*, to the distribution list. If you have moved, changed your fax number or do not want to be on our distribution list, please contact us by phone: 202/326-8713, fax: 202/682-2154, or e-mail: nora@ccmc.org. Thank you.

###

Prepared by the Communications Consortium Media Center, 1200 New York Avenue, NW, Suite 300, Washington, DC 20005. We welcome your comments, questions or suggestions.

16-SEP-1997 15:01

Gold-Fax Message

Page 2/6

Sixth Floor
1250 H Street, N.W.
Washington, D.C.
20005-3908
(202) 737-4700
FAX (202) 626-3471

D.C. BAR PUBLIC SERVICE ACTIVITIES CORPORATION
September 16, 1997

MEMORANDUM

TO: Members, Task Force on Children At Risk

FROM: Noël Brennan
Theresa Mihalik

Thank you for your contribution to a good opening discussion of issues surrounding children in the neglect system. As D.C. Bar President Carolyn Lamm indicated in her remarks, our charge is to:

- Develop a project (or couple of projects) involving lawyers in our bar to help provide representation to affected parties & help reduce the backlog in processing adoptions and;
- Identify a couple of other reform and/or systemic issue areas and the appropriate role for the Task Force to effectively address them.

It was clear from your comments that each of you has thought a great deal about these issues and we have attempted to capture a number of these ideas/concerns/issues below:

- Lots of people/committees etc. have and are looking at these issues. They have been effective in varying degrees. We need to set some limits on ourselves and identify a small number of realistic projects/issues to tackle and then see where we are.
- Any efforts must be balanced in approach. Adoption and reunification must each be considered as an alternative.
 - ◆ Adequate representation is needed for all parties.
 - ◆ Welfare reform changes add burdens to custodial parents.
 - ◆ For the court to do its job, kinship alternatives need to be thoroughly explored. DHS social workers need adequate training regarding their roles and responsibilities.
 - ◆ In nearly all cases of reunification, substance abuse must be addressed yet inadequate treatment resources exist in our community.

16-SEP-1997 15:01

- ◆ Housing and employment can be issues in reunification.
- ◆ Brokering needs to occur between D. C. Housing Authority and DHS to help alleviate this barrier to reunification.
- ◆ Where cases are set for trial, the waiting time needs to be shortened.
- ◆ What are the issues related to Court procedures that may need improvement?
- ◆ The current state of the adoption laws and procedures in the District of Columbia are not "user friendly" particularly in the area of foreign adoptions.
- ◆ DHS is currently revamping its approach to subsidy awards, and the District of Columbia is without regulations.
- The Task Force should draw in others / groups, where it makes sense, who have worked in this area.

We have asked Diane Weinroth and Harvey Schweitzer to prepare a list of the entities currently in place and providing legal services. Jeanne Jones has agreed to follow up with Diane and Harvey to help pull these materials together. We will provide you with the list as soon as it is compiled. It is our hope that this list will help identify some of the gaps in the services that are being provided. The goal of the projects that develop from this Task Force is to bridge some of those gaps in the provision of services in particular.

Potential Projects Involving D.C. Bar PSAC and Pro Bono Assistance

Since the D.C. Bar will be developing a project for lawyers, we'd like your help in identifying some ideas for Maureen and Jeanne to explore. Here are a few thoughts for potential projects.

- PSAC training project for lawyers doing pro bono adoption cases (what training currently exists? What else is needed?)
- PSAC recruitment effort with law firms to place lawyers in Office of the Corporation Counsel to terminate parental rights where adoption is the goal (can OCC absorb this help? Could this be accomplished with a few phone calls from Carolyn Lamm?)
- PSAC project to recruit and train pro bono lawyers to serve as system advocates/court advocates to represent children, birth mothers / putative fathers, etc. in adoption proceedings--contested and uncontested. (What would such a project cost and how would it be managed?) Such representation would include representation to help obtain housing. Can PSAC's current mentoring clinic be expanded to include adoption cases and provide representation to all parties?

16-SEP-1997 15:01

- A pro se project to develop pleadings and handouts for the clerk's office.
- A project to produce a videotape on pro se adoption. (How much would this cost?)
- A project to develop recommendations to the Court as to how its procedures can be improved.

Issues/Roles for Task Force in Addressing Systems Issues

The more challenging opportunity for our Task Force relates to the role we can play in identifying some modest goals and topics towards broader reform. In reviewing our discussion, there are a myriad of topics/issues, any one of which is a huge undertaking (e.g., the drafting of regulations, including but not limited to regulations governing subsidies). I hope each of you will come to our next meeting with one idea for us to pursue, either from this list or from your own experience. After discussing the topics, we need to make a decision on which 1 or 2 to pursue. To the extent we hope it will be helpful, I believe we can get the assistance of a number of federal agencies, e.g., HHS, HUD to focus attention and resources on the issue of adoption/unification in our community.

Jeanne Jones has provided here a list of Task Force members and phone numbers.

The date of our next meeting needs to be changed to September 30 at 5:00 p.m. in Judge Burnett's jury room, # 415 (on the Fourth Floor of D.C. Superior Court, 500 Indiana Ave., N.W.). We apologize for any inconvenience and we look forward to seeing you. In the meantime please feel free to call either of us with issues and ideas.

Thank you.

THE DISTRICT OF COLUMBIA BAR

TASK FORCE ON ADOPTION
(Special)

Created June 17, 1997
Appointments September 1997

Chairpersons

NOEL ANN BRENNAN
U.S. Department of Justice
OJP-OAAG Room 6400
810 7th Street, N.W.
Washington, D.C. 20531
307-5933 Fax: 514-7805

THERESA M. MIHALIK
Kuder, Smollar & Friedman, P.C.
1925 K Street, N.W.
Room 200
Washington, D.C. 20006
331-7522 Fax: 331-0388

Members

HON. ARTHUR L. BURNETT SR.
Superior Court of the District
of Columbia
500 Indiana Avenue, N.W.
Washington, D.C. 20001
879-4883 fax: 879-0133

Washington, D.C. 20008
362-7602 fax: 727-2132

HON. JUDITH BARTNOFF
Superior Court of the District
of Columbia
500 Indiana Avenue, N.W.
Washington, D.C. 20001
879-1988 fax: 879-0171

KALA SHAH
Sherman, Meehan, Curtin & Ain
1900 M Street, N.W. - Suite 600
Washington, D.C. 20036
530-3300 fax: 296-1529

SUSAN M. HOFFMAN
Crowell & Moring
1001 Pennsylvania Avenue, N.W.
Washington, D.C. 20004
624-2591 fax: 628-5116

LESLIE SCHERR
Seymour & Scherr, PLLC
815 Connecticut Avenue, N.W.
Suite 500
Washington, D.C. 20005
833-5555 fax: 828-5393

DEBORAH Y. LUXENBERG
Luxenberg & Johnson
1244 19th Street, N.W. - 3rd Floor
Washington, D.C. 20036
265-3340 fax: 265-0101

HARVEY SCHWEITZER
5409 Glenwood Road
Bethesda, Maryland 20817
547-1840 fax: 547-1857
(301) 656-2775

MELISSA G. REINBERG
Legal Aid Society
666 11th Street, N.W. - #800

- 2 -

TASK FORCE ON ADOPTION CONT'D.

DIANE WEINROTH
1727 Church Street, N.W.
Washington, D.C. 20036
232-2083 / 274-4155
fax: 274-0659

HON. JOAN ZELDON
Superior Court of the District
of Columbia
500 Indiana Avenue, N.W.
Washington, D.C. 20001
879-1590 fax: 879-0137

Ex-Officio

CAROLYN B. LAMM
White & Case
601 13th Street, N.W. - #600 South
Washington, D.C. 20005
626-3600 Fax: 639-9355

ANDREW H. MARKS
Crowell & Moring
1001 Pennsylvania Avenue, N.W.
10th Floor North Tower
Washington, D.C. 20004
624-2920 Fax: 628-5116

Staff Liaisons

MAUREEN THORNTON SYRACUSE
The District of Columbia Bar
Public Service Activities Corporation
1250 H Street, N.W. - 6th Floor
Washington, D.C. 20005
737-4700 Ext. 290
Fax: 626-3471

JEANNE JONES
The District of Columbia Bar
Public Services Activities Corporation
1250 H Street, N.W.
Washington, D.C. 20005
737-4700 Ext. 295
Fax: 626-3471

Thursday, June 6, 1996

THE ALGONA
Upper Des Moines

Kossuth County, Iowa
Now In Its 145th Year

Algona Founder
Ass C. and
Ambrose A. Cal
July 1854



PHOTOCOPY
PRESERVATION

file adoption

JOHN F. YARBROUGH
124 West 73rd Street, #7 New York, NY 10023
Phone 212.724.7465 Fax 212.875.1440

September 2, 1997

Ms. Melanne Verveer
Chief of Staff
First Lady Hillary Clinton
The White House
Washington, DC

Dear Ms. Verveer:

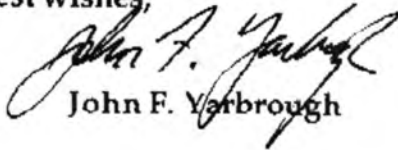
I am writing an article about Birthright, the newly formed adoption activist group whose founding members include Isabella Rossellini. You met with founders Shirley Kirshbaum and Phyllis LaBella last month in Washington, and I was hoping I could talk to you briefly for the article, which I am submitting to the *New York Times* Living section this week.

Your thoughts about the group's potential, the climate in Washington on adoption issues, as well as the First Lady and the President's passion regarding adoption issues, would be helpful to the article.

I am faxing to you several of my clips. My work has appeared in *George*, the *Washington Post*, *Los Angeles Times*, and elsewhere. Also, I worked for several years on Capitol Hill for Congresswoman Nancy Pelosi, and worked for the 1993 Presidential Inaugural Committee.

Thank you for your consideration, and I hope to talk with you soon.

Best wishes,


John F. Yarbrough

DALLAS LIFE MAGAZINE

The Dallas Morning News

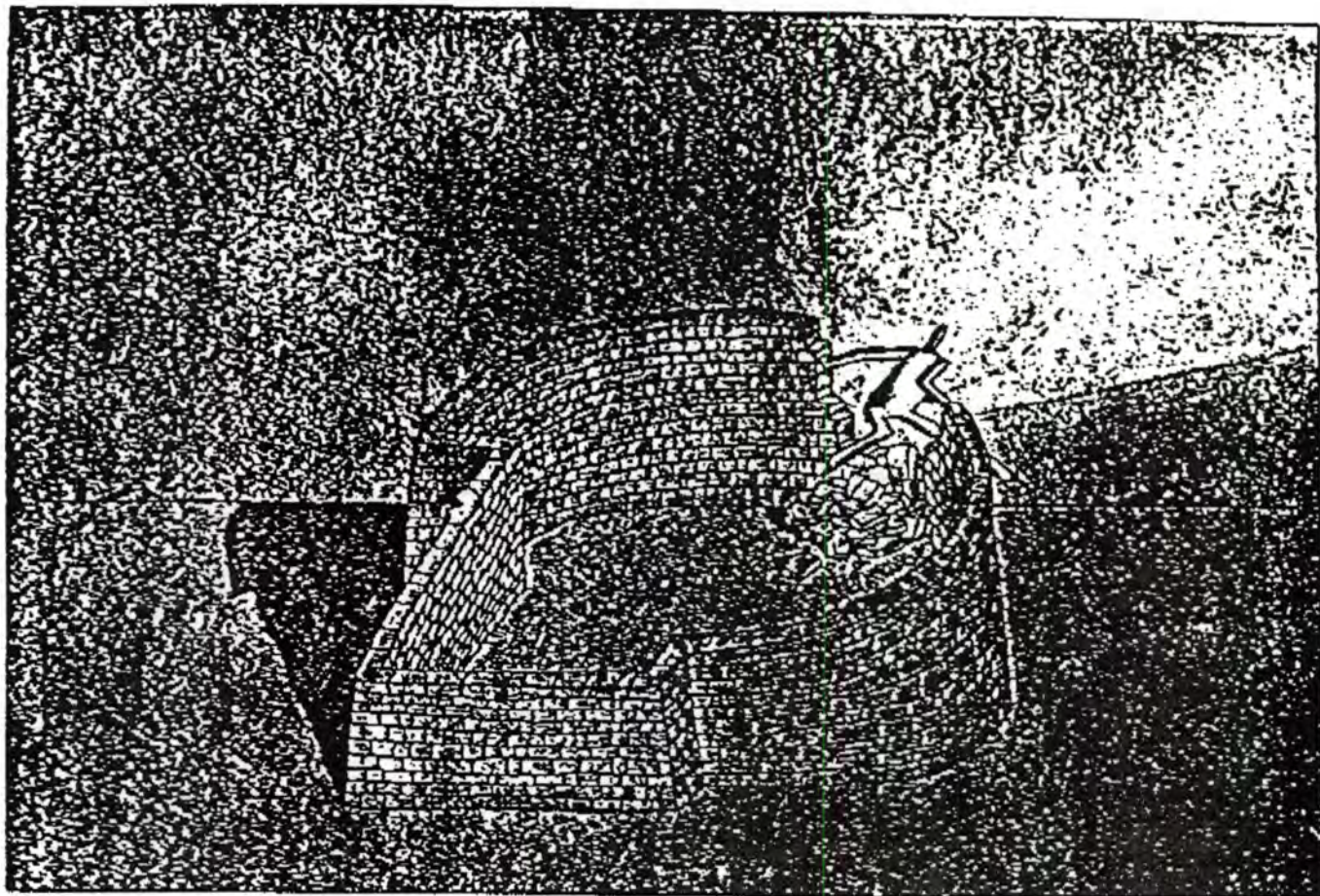


ILLUSTRATION: DAVID MOWATTS

The appointments with my neurologist began like those before it, in the same kind of waiting room I had known for years. Going to the doctor increasingly seemed pointless — almost every treatment open to me had been exhausted, and hospitals had long ago become a reminder of what was wrong with me, not a symbol of hope. But this time I had come as a patient who aggressively wanted a change. "I want to see if I can have brain surgery," I told my doctor.

That was how, nearly three years ago, I decided to actively combat my epilepsy. Since 1967, when an ambulance had rushed me to Children's Medical Center during my first seizure, epileptic spells had thrown me into trance-like states in which I was totally oblivious to what was going on around me. I had spent my whole life saddled with the feeling that this disorder had denied me the kind of life that everyone else enjoyed. At 23, with my undergraduate degree in hand and the biggest part of my life ahead of me, I wanted to fight back.

And that is what I did. Last July, I had part of my brain removed at the University of California at Los Angeles Medical Center, one of the premier surgery centers for epilepsy in the world. The procedure may have ended my epilepsy. In the 10 months since, I have not had a seizure — before the surgery they were occurring as often as 100

Why I Chose Brain Surgery

One man's battle against epilepsy

By John F. Yarbrough

times a year.

Epilepsy is a neurological disorder that encompasses 30 types of seizures, ranging from 10-second staring spells to convulsive attacks lasting minutes. The spells that I had, called complex partial seizures, cause a person to move aimlessly around, go through lip-smacking or chewing motions and stare off for about a minute. Half the cases of epilepsy are like mine — there is no traceable cause. Among the rest, some of the most frequent causes are head injuries, high fevers in infancy or difficulties during birth. About two million Americans have epilepsy, many of whom are able to control their seizures through medication. Of those whose seizures can't be controlled, only about 100,000 are suitable for surgery. Due to the small number of centers that perform the surgery and the reluctance of many neurologists and physicians to recommend it, the number who actually undergo it each year is even smaller, between 500 and 1,000. Patients can expect a minimum price of \$25,000.

Much of what I first learned about the surgery came through my volunteer work for the Dallas Epilepsy Association in the fall of 1986, and through doctors at the epilepsy treatment center at Parkland Memorial Hospital. When I decided to pursue surgery, though, few initially thought I should have it — including my neurologist, physician and parents. My episodes were minor compared to those of most patients who pursue surgery, many of whom have tonic-clonic seizures in which the entire

body shakes. Most of the time I looked normal and talked normally. To those around me, I was articulate and seemed to handle my handicap with ease. I had graduated from Tulane University and was working toward a master's at Northwestern. Why did I need surgery?

What most people couldn't perceive, though, was the hidden impact of epilepsy. Throughout my life, I had been coming out of seizures only to confront something worse: The stares of both friends and strangers. My entire team would look at me, bewildered because I had run out of bounds with the ball; at parties I would suddenly find myself the object of attention of a whole room, or, during puberty, I would discover other students in class looking at me after I wet my pants during a seizure. It was a struggle to explain my behavior — why I walked away with your briefcase, or why I poured my drink on your food.

But my desire for change went beyond that. I was also afraid of being dependent on others for the rest of my life. Because my disorder had kept me from driving, friends and family often had to help me get around. No matter how independent I strove to be — and in fact I probably became more self-reliant than my friends who drove — there was always the feeling of dependency.

I was someone who needed to be cared for.

Room 453!" announced the hall intercom on the UCLA epilepsy ward. "Seizure in room 453!" Suddenly, three nurses hurried into the room, gathered around my bed and barraged me with the usual questions. "What is your name? Where are you? Who is the president of the United States?" All were ways of gauging the extent to which the seizure was affecting me. The seizure was also being videotaped by VCR cameras and recorded by an electroencephalograph (EEG), which would be marked for the doctors to review later.

This was a typical scene in the UCLA epilepsy ward, where I spent weeks having my seizures monitored during two testing phases, one in the summer of 1987 and the other in the spring of 1988. Although epilepsy surgery has been available since it was first performed in England in 1886, advancements over the past 30 years — pioneered at the Montreal Neurological Institute — have helped epilepsy specialists locate seizure-causing areas of the brain more precisely than ever before. While at UCLA, I went through the most intense examination imaginable. Electrodes were glued on my head and put inside my head, tubes were navigated through my body, needles were stuck into my jaw, and entire hemispheres of

my brain were put to sleep. There were countless tests: MRI scans, CAT scans, PET scans, a pneumoencephalogram and a wada angiogram. And some of it was risky. Before the piece of tissue causing seizures could be removed, it first had to be located. In order to get the clearest reading of my brain waves, during the second phase of testing doctors implanted 14 thin electrode needles — depth electrodes — into my brain, a procedure that itself involved surgery.

But for me, the most difficult part was the monotonous process of having my seizures recorded by the EEG. With epilepsy, you cannot make yourself have seizures, then go out to lunch and come back later for more testing. I had to spend six weeks lying in bed so that my spells could be monitored; during the depth-electrode testing I was strapped to the bed. Overall, I had about 10 seizures, and altogether, they probably lasted no more than 10 minutes.

In the fall of 1987, I almost changed my mind. The doctors told me I would have to go through the depth-electrode testing. I had hoped to avoid this and go straight to the final surgery, as a fourth of all patients do. The depth electrodes, which are implanted for weeks, are actually riskier than the final surgery. To me, this was a sudden setback.

But the trepidation I felt went beyond the depth electrodes. For the first time I was scared of the whole idea. So far, everything had been safe and easy, and it had always been uncertain whether I would get to the riskier phases of the program. Now things were different. It was frightening that this decision made with such hope could instead hurt me. My head throbbed just thinking about it.

The chances of something going wrong, although less than 1 percent, were substantial. The brain is a sensitive organ, and hundreds of things could happen, including death. I must have walked around my back yard a hundred times, rethinking what before had seemed so resolved.

When I look back on those doubtful moments, sometimes I wonder how I had the courage to continue. It seems so incredible. But then, after a moment, I remind myself. Frustration may have given me the desire for surgery, but it could have never given me the strength to face it. My family understood and gave me that strength — they didn't show that they were frightened even though they were. And that reinforcement kept my fear from surfacing. Alone, I not only would have backed out before the depth electrodes, I wouldn't have gotten to UCLA in the first place.

Taking their support with me, I went back to California and completed the

Texas Treatment Options

Epilepsy surgery has been available in Dallas since 1985 at Parkland Memorial Hospital. A part of the hospital's Epilepsy Treatment Center, the surgery program is one of only two in Texas — the other is through the Baylor College of Medicine at The Methodist Hospital in Houston. During the past 3½ years, the program has had 70 surgery patients, and 70 percent have become seizure free.

"The surgery adds a whole new alternative to treatment," says Dr. Robert LeMay, director of the Epilepsy Treatment Center and assistant professor of neurology at the University of Texas Southwestern Medical Center at Dallas. "The fact is that there are probably 15 percent of adults with epilepsy that

medications don't work with. Surgery holds a hope for better control."

Within the last year, the program has expanded to include nearby Children's Medical Center. Patients are put through intensive evaluation, using an electroencephalograph, along with other tests. Initially, only scalp electrodes are used to record seizures, but if more information is needed, patients undergo more invasive testing. The program recently began using a SPECT scanner, which helps find seizure point of origin by examining blood flow in the brain.

A staff of 25 runs the surgery program; the program also has had the active participation of the neurology and neurosurgery departments at Southwestern Medical Center. —J.F.Y.

depth-electrode testing. It confirmed what the doctors had long suspected: My surgery would be an anterior temporal lobectomy, the most common surgical procedure for epilepsy, one with a very high success rate. Of all those who had had the same type of surgery at UCLA in the 30 years before me, 98 percent had experienced some improvement in their seizure control. Of those, 75 percent remained on their medication and were seizure-free for long periods of time; 20 percent were completely seizure-free for life and able to stop medication; and 3 percent experienced a lower seizure rate but never went an entire year without a seizure. The remaining 2 percent showed no improvement in seizure control.

A number of factors made my surgery safe. The first was that my seizures were coming from a part of my brain no bigger than a quarter. Second, the area causing seizures was located in my right temporal lobe. Two of that lobe's usual jobs are to assist with non-verbal memory and the senses of hearing, smell and taste, but it's also an area not close to any vital functions of my brain and easily accessible to the neurosurgeon. Last, the affected part was not on my language dominant side. Change just one of those factors and the surgery would have been riskier and perhaps impossible.

I checked into the UCLA neurosurgery ward July 27, 1988, a day before my operation. Strangely, during that day and evening I was not really afraid, nor did I ponder the possibility of how wonderful life ahead might be. The biggest obstacles had already been overcome, and thinking about a glorious future seemed premature. It was sort of like the opening night of a play, where the actor, having persevered through tryouts, rehearsals and moments of indecision, knows he is ready to perform — but he doesn't dare predict what the critics will say.

My eyes opened. I looked around what seemed to be a busy room. I heard voices talking, machines running and strange beeping noises. My head hurt. A nurse walked over to me, and I looked up at her and opened my mouth.

"Am I OK?"

I heard myself say those words and heard the nurse's positive response. I was alive. My legs and arms moved, and I could see and talk. I even had enough energy to reach over to snail some ice to moisten my dry mouth. On that first blurred day after surgery, in the middle of a bustling intensive care unit, this was all that mattered to me. The prospect that I might be free of seizures was a fleeting thought.

What was impossible to imagine was how the removal of that piece of cortex would so radically change my life. I had always wanted to stop my epilepsy, had always assumed that my life would be better without it, but I had never actually pondered how my life would change. That is why my life now is so incredible that at times it's like a dream.

Having gone the past nine months without a seizure, I have become a more confident person. I feel I can say or do anything, with new acquaintances and old friends. And I'm much more relaxed, less sensitive than before. No longer is there this feeling that I have to prove something.

Despite the lack of seizures to date, there is still another step to be taken before the surgery's success is fully realized. That step, which will occur sometime in the next year if I continue seizure-free, is for me to go completely off my medication. In doing so, I may continue to be free of seizures and may never have to take medicine again.

If the seizures resume, my first reaction will probably be anger. I did not intend to run 95 yards and get tackled just before the end zone. I wanted, and still want, all semblances of the disorder removed forever.

That is how, down deep, I feel. But my immediate anger toward staying on medicine, if that is the case, would subside. I would realize just how wonderful an outcome the surgery had, even if that outcome didn't also include doing away with medication. Recently, something happened that made me feel ashamed for worrying about all of this. I learned that one of my UCLA roommates died in a coma following surgery. I was shocked and scared. The danger of months ago, strangely, was never more real to me than at that moment. And the fact that his death had occurred more than a year ago didn't matter. He had been my friend. In the months since my surgery I had allowed myself to feel so good, so wonderfully optimistic, that his death seemed beyond belief.

After hanging up the phone, I walked into the kitchen and told my mother what had happened. We just stood there together silently, listening to the hum of the refrigerator. For the longest moment we didn't even look at each other. Then suddenly a sound came from my mother. I can't remember whether it was a moan or cry, but it came just as she cleared her throat to speak.

"I'm more scared now than I was when you were going through it," she said.

"So am I," I said. "So am I."

The parking lots at NorthPark shopping center are virtually empty of traffic on Sunday mornings. It makes a wonderful place for a father to teach his son how to drive. That I will be able to get a driver's license has given my dad and me the chance to make up for something we missed 10 years ago.

"When you come to a three-way stop like this, you have the right of way because you are on the through street," my dad says as we approach the stop sign. His voice has the same inflection it probably had when he showed me how to hit a baseball, or when he told me to stand up for myself at school.

"And since you got here before the car coming toward us, you have the right of way over him, too," he adds.

I put my foot on the gas, turn the wheel to the left, make a slow but confident turn. Half-way down the road I realize that I have had the wrong blinker on the whole time. My dad chuckles. It wasn't a left turn worth bragging about, but it was a good start.

John F. Yarbrough is a Dallas-based writer.

The Washington Post

A WEEKLY JOURNAL OF MEDICINE,

HEALTH

SCIENCE AND SOCIETY

INFANT FORMULA

Pediatricians rankled by television ads 6

JUVENILE DIABETES

Rate is rising in Europe 7

SPINAL CORD INJURY

New drug shows promise 8

OVERNIGHT SHIFTS

A psychiatry resident recounts his final night on call 9

CANCER THERAPIES

A physician's advice 15

LABELING FRUIT JUICES

FDA's new proposal 16

AVOIDING TICKS For kids ... 18



WHEN THE NEAREST DOCTOR IS ACROSS THE CHESAPEAKE BAY

BRINGING MEDICAL CARE
TO SMITH & TANGIER ISLANDS

DENTIST DALE LANGE
monitors the
progress of a storm
over Tangier Island
that delayed his
departure for several
hours



PHOTO BY MICHAEL GOODMAN FOR THE WASHINGTON POST

WHEN THE NEAREST DOCTOR IS ACROSS THE CHESAPEAKE BAY

BRINGING MEDICAL CARE TO SMITH & TANGIER ISLANDS

By John F. Yarbrough
Special to The Washington Post

slightly larger neighbor to the south; lack of access to basic medical care.

While Tangier, population 660, has a resident nurse who doubles as the island's lone high school teacher, there hasn't been a doctor or nurse on Smith Island for several years. The closest hospital is in Crisfield, which, weather permitting, is a 45-minute ferry ride away. Most medical emergencies are sent to Peninsula Regional Medical Center in Salisbury, a trip that takes another 45 minutes by car from Crisfield, much of it over a two-lane road.

The geographical isolation of these insular Eastern Shore communities and the fact that ferries make a single daily roundtrip to the mainland limit islanders' ability to obtain basic health services and can make emergencies that are handled routinely elsewhere life-threatening.

The difficulties are compounded by weather. Fog, storms and ice frequently prevent boats from leaving and helicopters from landing and, especially in winter, can isolate residents for days at a time. When weather is not a factor, distance can pose a problem. Although several residents on each island have basic training in emergency medical techniques, it can take as long as 90 minutes for a helicopter to arrive from Salisbury or Norfolk, Va., and for a patient to be stabilized enough to be moved. To people suffering from heart attacks, strokes or uncontrolled asthma, that critical time may mean the difference between life and death.

Several years ago, a heart attack victim had to remain overnight on Tangier because rough winds prevented a helicopter from making the trip. He died at an Eastern Shore hospital after undergoing surgery. In 1988, a 19-year-old resident broke his back during a swimming accident. Because thick fog had enveloped the island, the youth had to wait 24 hours before

being airlifted to the mainland. Residents immobilized him by placing sandbags around his head and neck; he recovered without suffering permanent damage.

Pregnant women frequently leave the islands for the mainland before their babies are due, particularly if there is fear that bad weather will prevent travel. Smith Island women often move in with relatives or friends in and around Crisfield; some Tangier women wait until they experience the first contractions and then climb on a boat bound for the mainland. Five years ago, one Tangier mother gave birth on a speedboat 10 minutes from the Crisfield dock.

"People here just can't go down the street to the local doctor any time they want or need to," said David Nichols, a physician in White Stone, Va., who since 1979 has been making the 30-minute flight to Tangier to see patients several times each month. "As a result, they let things go too long. There's not much in the way of regular checkups or the preventive medicine sort of thing. It's more 'Treat me now because I need it.' I had one person wait three days with a broken arm to see me. You never hear of that in our world."

No Doctor Since 1968

The problems of recruiting—and retaining—doctors and nurses may be particularly apparent on these islands, but they are not unique to them, rural health experts say.

"Different geographic areas have different problems," said Frank Park, program management officer for the U.S. Public Health Service district that includes Smith and Tangier. "Some are economic problems, in other areas it is an access problem, or a maldistribution of doctors problem. You see it in the mountains of Appalachia in southwest Virginia, where people are just so darn isolated that it's a disincentive

SMITH ISLAND, Md.

When 61-year-old Mary Evans died of an acute asthma attack at 1 a.m. one Sunday last February, her death shocked many of the 400 residents of this remote archipelago in the Chesapeake Bay. Because there is no doctor or nurse here, several times in the months before her death Evans had made the three-hour round trip to

the mainland to see a doctor.

About an hour before she died, Evans, gasping for breath, telephoned her sister Charlotte Duse who lived nearby and begged for help. Duse immediately called the 911 operator in Crisfield, Md., the closest mainland community; the operator dispatched a Medevac helicopter. Duse then rushed to her sister's house, dialed 911 again and, following the instructions of an emergency medical technician, began trying to perform cardiopulmonary resuscitation.

By the time the helicopter arrived about 30 minutes later, Evans was dead. "She just needed to be in a hospital, to be seen by a doctor or nurse," said Duse. "We need a doctor or nurse on the island. I don't know if they could have saved her in this case, but there are cases [here] where people could be saved."

The death of Mary Evans illustrates a problem that has long plagued the residents of this tiny insular fishing community and those of Tangier Island, Va., its

Eight-year-old Irene Pruitt, left, watches from the clinic's doorway with her friends Lonnieann and James Parks while her mother, a dental assistant, helps with a patient.



for doctors to practice. You see it on Indian reservations, or out West where there are great distances."

As is the case in other rural communities around the country, both islands have experienced an exodus of younger residents who have left for the mainland in search of jobs and better opportunities. Smith Island has lost 200 people since 1980. Some are victims of the economically depressed seafood industry, the lifeblood of both islands, which were settled in the 1600s by British sailors.

The insularity of the islands has made it hard to attract health care workers. Tangier has not had a fulltime doctor since 1968. Smith's last resident physician left four years ago to work in a Maryland state prison, partly, he said, because he was unable to earn enough money to support his family.

These days, Tangier residents rely on Nichols and another physician, as well as a rural health nurse and dentist Dale Lazar, each of whom flies to Tangier to see patients several times a month. They operate out of a three-room white clapboard clinic on Tangier's main street named after Charles F. Gladstone, a physician who retired in 1954 at age 76 after practicing on the island for 37 years.

Few doctors have stayed nearly as long; some have left in less than a year. Over the years, Smith and Tangier have been forced to try unorthodox methods to recruit doctors, including several worldwide appeals by ham radio operators.

In 1957, after a four-year campaign, Tangier attracted international publicity when Mikio Kato, a 33-year-old Japanese surgeon who had trained in America, traveled 8,000 miles from his home in Kobe, Japan, to serve as the island's doctor. One of his first official acts was to pronounce the death of a 60-year-

See ACROSS THE BAY, Page 12

Cover Story

ACROSS THE BAY, From Page 11

old woman who had collapsed in the island's Methodist church, where she had gone as part of a committee to welcome the new physician.

Eight months after his arrival, Kato married his 21-year-old secretary, Emma Sue Crockett, a descendant of one of Tangier's original families. Within 18 months, the couple departed for western Maryland, after Kato complained that he was unable to practice his specialty and went "days without a patient to attend."

"It is not possible to expand my practice since the community is so isolated," he told a Post reporter at the time. "There just isn't enough practice to support a man with a wife. I have not been able to make a living, and my loan from the bank is getting larger and larger."

Some doctors seem to have suffered from as many medical problems as their patients. A retired 54-year-old Deever physician arrived on Tangier in the mid-1960s, having had five heart attacks in the previous four years and after losing a finger to bone disease. He died on the island three years after his arrival.

For acute health care workers, living and

working on the island has proven to be an emotional burden as well as a financial one. "It wore me down," Lynette Becker, a nurse who practiced on Smith from 1972 to 1979, told a local author. "I had gotten too close, tried so hard to carry everyone's medical burdens. I could never bear to charge people, and when I finally sat down and took a look at my last year's salary, it was \$6,700 and more than a third of that went for expenses—for boat repair and gas to get around."

Eric Soler, Smith's last fulltime doctor who left in 1987, said he had to supplement his income by working a 32-hour shift every week at a mainland hospital emergency room. He said that despite the financial disincentive to practicing in Smith, he enjoyed living on the island. "It was a big change, but I felt at home right away," said Soler, who arrived in 1983. "I felt like I had 100 grandparents, and in many ways the work seemed quite real. A lot of life and work is spent dealing with ideas and abstractions, but this was up front and tangible."

A nurse practitioner, who replaced Soler in 1989 and was paid \$50,000 by the Maryland State Department of Health, resigned and left the island last fall. Some Smith residents expressed dissatisfaction with her care, partly because they felt she was sending too many residents to the mainland and



MAP BY LARRY FORD—THE WASHINGTON POST

because she was gone on weekends when most emergencies occurred. The nurse could not be located for comment.

"People thought they'd be getting more hands-on treatment," said Jennings Evans, president of the Committee for Smith Island Affairs, the community's informal governing body. "[I think] anybody would be better

than nobody, but that's the way it is in health care here. Someone's always desisted with something."

The lack of medical care may also reflect the ambivalence islanders feel toward what they regard as intrusions from the outside. Although they depend on and tolerate the estimated 30,000 tourists who visit the islands each summer—few of whom stay the night—local residents are leery that too much contact with non-residents could be a cherished way of life.

Several years ago, Smith Islanders, who did not get electricity or telephone service until the 1940s, successfully battled construction of an airstrip that would have lowered regular visits by the health workers who serve Tangier.

Tangier residents may be more accepting of such a trade-off. "There are a lot of times when, if we had a steady doctor here, people wouldn't have to be taken away when they are sick," said Emma Dine, a 79-year-old widow who runs a boardinghouse. Dine, who is reluctant to leave the island, even briefly, "I do my shopping over there [the mainland] but I go and I come back don't ever stay away from home at night."

Tangier Disease and Heredity

Partly to address the problem of limited access to medical care, about 100 health care workers from Maryland and Virginia make an annual day trip to Tangier every fall for Tangier Health Day, an event sponsored by Eastern Shore Rural Health Inc., community health center in Onancock. The program attracts more than half of the island's population, particularly those over age 45.

The group, which includes pediatricians and a surgeon, sets up clinics in the Methodist church (virtually all the residents both islands are Methodists), the Gladys clinic and the school. Most of their services are provided free to the islanders, who return host a seafood supper at the end of the day.

In addition to providing on-site care in the form of a mammography van, pharynx cholesterol testing, psychological counseling and a gynecology clinic, the medical team seeks to increase the residents' awareness of health issues. Among the efforts are educational programs about cancer risks—especially skin cancer, which is common among the watermen—as well as high blood pressure and elevated cholesterol from high-fat diets.

In recent years, health day has proved to be more than just a convenient way to bring health care to Tangier. Several years ago, doctors discovered that a waterman in his sixties had an abdominal aneurysm—ballooning of an artery caused by the pressure of blood flow through a weak area. It had been left untreated, it would have killed him within six months, doctors said.

Two years ago, the team was on the island when 63-year-old Andrew Parks cut three of his fingers in a chainsaw accident. A surgeon reattached the fingers and saved the use of Parks's hand.

The problem of access to medical care is compounded by the fact that increasing numbers of residents are elderly. According to Jennings Evans, one third of Smith islanders are over 60 and many of the 15 houses on both islands are inhabited by aging widows who live alone.



Receptionist Wanda Parks, left, and dental assistant Inez Pruitt carry Dale Lacer's dental equipment to his plane at the end of the day.

BY GERALD MARSHALL—THE WASHINGTON POST



At the Gladstone clinic on Tangier Island, visiting physician David Nichols examines 22-month-old Christopher Lance Daley as his mother Stephanie watches.

"People here just can't go down the street to the local doctor any time they want or need to. As a result, they let things go too long. There's not much in the way of regular checkups or the preventive medicine sort of thing. It's more 'Treat me now because I need it.' I had one person wait three days with a broken arm to see me. You never hear of that in our world."

—David Nichols, MD
White Stone, Va.

Their problems are typical of the elderly elsewhere: hypertension, heart disease, arthritis, a high-fat diet—in this case fried crab and oysters—and diabetes. In the past two years, 26 of Smith Island's 400 residents have died.

On Tangier, chronic illness is partly the result of heredity. Forty percent of adult islanders have heart disease or diabetes or both, and seemingly healthy men in their thirties have died of heart attacks, according to Jean Crockett, the island's registered nurse. Since April, three Tangier residents between the ages of 51 and 66 have died of heart attacks, Crockett said.

Because of intermarriage, some residents suffer from an extremely rare cholesterol disorder called Tangier disease.

The disease was discovered in the 1960s when researchers from the National Insti-

tutes of Health found that two young brothers on the island were missing the beneficial form of high-density lipoprotein while retaining the harmful low-density lipoprotein. Symptoms of the disease include an elevated cholesterol level, enlarged liver and spleen and enlarged orange tonsils.

The deficiency can cause premature coronary disease, according to Victor McKusick, a professor of genetics at Johns Hopkins Hospital in Baltimore. "It's inherited as a recessive disorder," said McKusick. "The close marrying, the marrying within the group is responsible for it coming out." The boys' parents had a recessive gene for the disorder.

About 30 cases of the disorder have been reported worldwide, including the two on Tangier, according to physician Donald S. Fredrickson, the former NIH director who

and a study of island residents in the 1960s and discovered and named the disease.

Over the years, studies of health problems on Tangier have brought teams of medical researchers to the island.

An outbreak of tuberculosis, a disease that had then been virtually eradicated in the U.S., prompted a 1970 study by the Virginia State Health Department and Columbia University doctors. They found that the incidence of tuberculosis was more than twice the national average and that 25 percent of the then 800 residents had been exposed to the airborne infection. Testing revealed that three residents had active TB.

Disturbing Signs of Change

While the islands often are portrayed as quaint communities unchanged by time, there are signs that they are becoming more like the mainland. Many homes have cable TV hookups and on Tangier, white picket fences have been replaced by chain link. Smith also has cars—hundreds of them, mostly junkers bought cheaply on the mainland and then driven until they stop running and are abandoned in the marsh.

There are other changes as well. Although alcohol is not sold on Smith Island, alcoholism is a problem, according to former Smith Island doctor Eric Soler and his former wife Lynaya Soler, who worked as a drug and alcohol counselor on the island.

In the past decade, at least five deaths are believed to be related to alcoholism, she said. Drug use on both islands, some residents believe, is the result of a limited social network for the young.

Elderly residents face different obstacles. Despite the hardships of living on the islands and the risk that they may go without timely medical care, many who have families to care for them choose to stay on the islands.

"They're physically isolated, but they're not isolated in the most important sense," said Eric Soler. "They're with their ancestors' graves and with people they have known since they were children."

For some, however, the danger and difficulty of staying can become too great and they leave for a mainland nursing home or to be near a hospital. Some depart with the dream of eventually returning to the island: every Sunday in each of Smith Island's three churches, parishioners offer prayers for local residents in mainland nursing homes.

Among the names they mention is that of Edward Cortin, 71, who left Smith seven months ago for a nursing home in Salisbury. Jennings Evans, who visited him there shortly after his arrival, said that Cortin took particular comfort from the fact that he could see Peninsula hospital from the window of his room.

"That was important to him," Evans said. "He waited it out [as long as he could on the island], but he saw the advantage of being near a medical facility."

John F. Yarbrough is a writer in Salisbury, Md.

file

Adoption



BIRTHRIGHT INC.

19 East 88th Street April 25, 1997

Suite 1-D

New York NY 10128

212/753-0048

Dear Adoption Advocate:

If you are an adoptive parent, thinking about adoption, experiencing infertility issues, an adult adoptee, a birth parent who has experienced relinquishment, or know and care about someone who is, please read on.....

FOUNDING MEMBERS

Marcelle Clements

Nancy Kellogg Gray

Nunzio Gubitosa

Shirley Kirshbaum

Phyllis L. LaBella

Isabella Rossellini

Michelle Murphy Strada

Robert Strada

Birthright, Inc., a non-profit organization founded in the fall of 1995 will have its first public meeting on Wednesday May 21, 1997 from 7:00 to 8:30PM. It will take place at the Annunciation Greek Orthodox Church on the corner of West End Avenue and West 91st Street (entrance on W. 91st) in the Green Room. Future meetings will take place on the third Wednesday of each month (except for August) at the same location. We invite you to join us in our goal of educating the public of every child's right to a family.

As a newly formed organization founded in our living rooms, we eagerly anticipate your support in helping us branch out into the community. We wish to advocate the positive aspects of families being formed in many ways. We can make a difference and hope you will join us in this effort. Your attendance and/or contribution will help facilitate our goals. Contributions can be sent to Birthright, Inc. at the above address.

With best wishes,

Phyllis L. LaBella
Marcelle Clements
Nancy Kellogg Gray
Nunzio Gubitosa
Shirley Kirshbaum
Isabella Rossellini
Michelle Murphy Strada
Robert Strada

CHATTER

by Kim Cunningham



TAKING IT PERSONALLY

Isabella Rossellini guest-stars on *Chicago Hope* this month (Feb. 10 and 17) as an infertile college professor who wants to adopt a baby. "They wanted [to portray] an independent, intelligent career woman who finds herself middle-aged and without children, like a lot of women in our generation," says

▲ Rossellini: Adopting on *Hope*.

Rossellini, 44, who has an adopted son, Roberto, 3, and a daughter, Elettra, 13 (with ex-husband Jonathan Wiedemann). "I generally don't do things close to me, but this was an exception. With adoption, the story is often told only if there is some sense of drama, like Baby Jessica or Baby Richard. We wanted to tell the story of a normal adoption, the kind that happens to thousands of Americans each year." Does she plan to show the tape to her son someday? "Yes, but it will be like 10 years from now when he can follow it."



The author and her son, Luc.

Adoption:
A Romance
As Marcelle Clements discovers,
there's nothing **arbitrary** about
the **love** of family, no matter
how its members have come together.
Photographed by Marc Hom

"Nipples. Bottles. Diapers. Wipes. Receiving blankets. Booties. Maybe six or so little undershirts. Onesies."

"What are *onesies*?" I asked my friend Nancy, who was listing the objects I should take with me to Texas. She, too, was waiting to hear that labor had begun, and had already packed what she and her husband needed for the drive to Massachusetts.

Who knows what to bring? After all, there's no way to tell exactly when the baby will be born, how long the trip will be. The carefully organized baby bag, though, wouldn't take up all that much room. You don't want to bring anything excessive. You feel tremulous about bringing anything at all, in case it all goes wrong and the birth mother changes her mind and—without dramatizing in the least—your life is simply shot to hell for good. That's what one thinks about while packing. Will the birth go well? How will the baby be? Will she change her mind? Will everything be all right?

I couldn't even bear to think about it not being all right.

"Ask the caseworker at the agency if the hospital will provide formula," Nancy said in a voice that was low, uninflected, and slightly constricted by the knowledge that it isn't possible to relinquish yourself to your emotions and stay sane. People are fond of talking of joy around the time of a birth, but joy in this case is purely theoretical, conditional, pending. Luckily, as prospective adoptive mothers rather than "regular" mothers, Nancy and I had no tradition of happy optimism to enforce, and we could be frank with each other. In fact, I now realize, talking with women who are "irregular" mothers was my first experience of real freedom of thought around the subject of children.

When Angela and Steve called, and each of them in turn said, "I think you should come," everything happened so fast that I didn't have to ponder the problems of any more arrangements. I took my bags downstairs and got in a taxi for the airport. In San Antonio I picked up a rental car equipped with a car seat and, after getting lost only once or twice, got to the motel and checked in. It was almost 3 A.M. by then. I hadn't even sat down when the phone rang. "We're at the hospital," Steve said. "Come over right away." Considering my nonexistent sense of direction and the utterly deserted nocturnal landscape, it is one of the most astonishing accomplishments of my life that I managed to zap up the road, careen around the complex of hospitals, and somehow, having gone the wrong way down one-way streets as many times as possible, turn into the correct parking lot in a flurry of flying gravel. By the light of the EMERGENCY sign I saw a good-looking kid standing there wearing a baseball cap and smoking a cigarette, and it was Steve. "Not bad," he said. Five hours later Angela gave birth, and I was, if you will, a mother.

My son, Luc, now a year and a month old, sometimes points his index finger at me and, with his most eloquent, emphatic tone, asks, "Mama?" and then firmly waits for the answer. Perhaps that is meant for me. I can't be too sure, since he also often says, with no less eloquence or emphasis, "Pokega!"

That's what I often think about when people ask, "Is he yours?"

"Tommy and my sister's kid were visiting at my mother's house," one of my friends recently told me, "and my mother introduced them to someone by saying, 'This is Philip, my grandchild, and this is Tommy, my adopted grandchild.'" I'm happy to report that this could never have happened with my own mother, who is uninterested in any dialogue except for the declarations of ardent admiration she considers Luc's due. "My grandson ..." many of her sentences begin.

Yet as any adoptive mother has noticed, there are many people who refer to someone's "real" child and never think twice of it, especially if they haven't been taught all those words, all the postmodern adoption words that strike some people as so odd or even comical but that are so vitally necessary to the psychological survival of child and family. Now, perhaps because I've heard Luc's magisterial "Pokega" and "Mama" so often, I no longer internally flinch quite so hard when people ask, "Where was his real mother from?"

Angela was more than generous in granting me maternal rights. She had chosen me, after all, as his mother, just as I had chosen her. Indeed, she coached me as much as possible. It was she, for instance,

who, in the course of one of our frequent calls in the weeks before she gave birth to Luc, first asked me whether I had gotten what I needed to bring to Texas.

"No," I admitted somewhat sheepishly.

"Why not?" she asked.

"I don't know for sure," I said, thinking it was probably out of fear—just plain cowardice.

"Well, hey, you better get going," she said.

That's when I called Nancy, she of the calm voice and the reliable list.

"Don't forget," Angela added a day or two before the birth, "there's a lot of air-conditioning here. Bring some blankets."

"Take a lot of books," said my friend Paula, who called from London to give me last-minute advice, "even though you won't be able to read."

"The hotel will have a crib," my friend Lee told me. She'd spent months in Eastern European hotel rooms under similar circumstances.

"And be sure to arrange for a car seat," said Nikki, the caseworker.

And so the accessories for Luc's debut came

Sometimes Luc points at me, asks, "Mama?" and waits for the answer. Perhaps that is meant for me. I can't be sure, since he also says, with no less emphasis, "Pokega!"

In fact, it was just such a photo album that tilted my decision toward adoption. I think Luc was conceived in my mind when the friend of a friend told me about her experience with this particular agency. She invited me over and showed me the book she was keeping for her son. He was named Antonio, for her Italian father, though the child is African-American. "But he looks like an Antonio, doesn't he?" she

In fact, it was just such a photo album that tilted my decision toward adoption. I think Luc was conceived in my mind when the friend of a friend told me about her experience with this particular agency. She invited me over and showed me the book she was keeping for her son. He was named Antonio, for her Italian father, though the child is African-American. "But he looks like an Antonio, doesn't he?" she

Hide-and-seek is every adoptive family's game, you might say. "You don't know—you have no idea how the child will develop," points out my friend Phyllis. "So everything is a surprise and a delight. And there's something else that's special about this union, an odd thing, because when you think about it, you don't choose your parents or your siblings. But as an adult, you do choose your lovers or your spouses; you choose your great loves. And this has the quality of chosenness."

For many, one of the special pleasures of adoption is that the child isn't implicated in the unhappiness of the adoptive mother's own family. "I look at her, and I

don't see my mother," says one friend. "I don't have to repeat all of the bad things,



SECRET	3:30
Born 1944 The defendant, along with those he calls his "close friends," is heavily into drugs, including marijuana, cocaine, heroin, and hashish. He has been arrested several times, but has no criminal record. He is currently living in a small, one-bedroom apartment in the Bronx in a general neighborhood known to police as "the bums' hole."	was a regular was a member of apartment "bums" a few articles and had been in his day some in his day some with a few
SECRET	SECRET



Clockwise from far left: Children available for adoption through the Virginia (left) and New York State (right) Social Services departments; children in a Romanian orphanage; four Russian children waiting to be adopted; Ethiopian orphans; abandoned children in a Thai group home.



You wonder if your **child** has a **sibling** in Ecuador or India, still needing a **mother**, whom you could **bring** back. Your **sense** of family becomes **strangely** capacious, quickly overcoming **fear** of the unknown.

said. She flipped the pages that documented her son's first days, the agency, Nikki. Antonio smiled. He was about six weeks old at the time and had just begun to smile. He smiled every time she looked at him, smiling. She smiled. He smiled. It was not possible to see who started it. It was precisely the right accompaniment to the family album.

My guess is that I must feel mighty real to Luc, just as he cannot feel anything but real to me, as he blows raspberries and kisses, leans over the high chair and carefully drops tiny morsels of lunch overboard, or sings to himself in his crib, one plump leg draped over the side, when he's supposed to be napping. He still often wears onesies, and I guess one of his most real attributes is the phenomenal amount of laundry he generates, especially now that he's up on his feet. Still unsteady, he toddles and waddles and staggers at top speed through the apartment, busy, busy, busy, emptying drawers whenever he gets enough of a head start—

the relationship the two of us will develop."

Who does Luc look like? All of us, I imagine: his birth family, and also we who surround him now and whose facial expressions, mannerisms, tones of voice, and moods he so naturally mimics. In that sense, as in many others, we all share him still.

About a month ago, when we spoke long distance in honor of Luc's first birthday, Angela told me she had just gotten her driver's license and her high school diploma and that she was going to go to college next semester. She also had learned how to make jam. "Do you like strawberry?" she asked. In my refrigerator now there's a jar that bears a homemade label: ANGEL JAM.

I can't imagine having any other birth parents. Indeed, nothing about or around Luc feels incongruous. Social rules simply have rearranged themselves around him. One of the things that almost any adoptive mother will tell you is that if one's life changes drastically after giving birth to a child, one loses one's moorings en-

tirely after adopting. In the best possible way, that is: An adoption easily becomes a kind of free fall into the present. And the great emotional luxury is the feeling that it's a present you can actually improvise. It's amazing how quickly the outlandish becomes natural when you know that it is caring and fair and decent. Relationships that were unimaginable a few months earlier establish themselves as permanent fixtures of the heart. My friends no longer even notice anything odd about the locution "my birth mother," just as Angela and her friends say, "my adoptive mother."

"My birth mother, who didn't even know my last name," says Nancy, "knew the most intimate details about me. Things nobody knows." After a while you forget there's anything odd about it.

Or maybe you don't even know your birth mother. Maybe you wonder, maybe you worry about how she managed. "The missing voice in all this," says Lee, "is that of the birth mothers in foreign adoptions. Nobody talks about them. They're never quoted anywhere." Lee could get hardly any personal information about her child's birth mother beyond the fact that she is a Gypsy, as is the father. "All I know is that she was 15 years old," Lee says. "And on the birth certificate she wrote that the father was 22."

Your daughter is Korean, or Russian, or mixed race. You wonder if there's a sibling still in Eastern Europe, India, Ecuador, still needing a mother, whom you could bring back. Your sense of family becomes strangely capacious, quickly overcoming ethnic barriers, fear of the unknown past, the instinctive need for your own genetic survival.

"Is it painful to think of not having had a biological child?" I asked several of my friends recently. "It's a loss," says Nancy, "but you get so much more." "What I learned from it," says Phyllis, mother of six-month-old Isabelle, "is that you expand your sense of what it means to be human."

Maybe all that one must surmount only enriches this motherhood, and that this is the meaning of the journey that begins in loss, veers toward life again in that moment when one signs a piece of paper creating a legal relationship with a child, and culminates when one is anxiously packing a bag for the trip to another woman's delivery.

It's funny how seldom we talk about those days, the days just before the baby, spent either anguished or anesthetized by fear, depending on one's psychology. Yet when I listen to my friends who have adopted in the last few years, they express the same feelings, despite their wildly varied circumstances.

"No one could continue thinking of those days and weeks," says Lee, who spent her waiting time in Bulgaria, where the 15-year-old Gypsy mother had placed her newborn child in an orphanage. It was after a two-year battle with legalities that Lee met her little girl, now named Sophie. But it took three more months to process the paperwork, while Sophie remained in the orphanage. "The wait is so painful," says Lee, "that, like with childbirth, no one could function if they continued to think about it." ➤ 294

THE ABC'S OF ADOPTION

As the opportunities for adoption increase, so does the red tape. The following is an overview of the often complicated adoption process.

What Are the Terms?

Public: Adoption of children in foster care through a state agency.

Private agencies: Adoption via organizations that seek out adoptable children through doctors, hospitals, and birth parents.

Independent: Adoption through individuals (lawyers or birth parents, for example).

Related: Adoption between relatives or stepfamilies.

Intercountry: Adoption of foreign-born children.

Open: Adoption of children whose birth parents are known to the adoptive parents. (This could range from onetime meetings to ongoing relationships.)

Who Gets Adopted?

Approximately 100,000 adoptions are completed each year in the U.S.; more than half of these are related.

Last year, about 500,000 children were part of the foster-care system, though most were not available for adoption. In 1990, the last year such statistics were available, 17,000 children in foster care (out of 20,000 children available to be adopted) were placed with adoptive families. African-American children often remain in foster care up to one third longer than the median time of all other children.

Less than 30 percent of all unrelated adoptions are handled through private agencies. With some private agencies, an adoptive parent may have to wait between three and five years for a healthy white American infant; the average waiting time for a minority infant is usually between three and six months.

Intercountry adoptions account for less than one fifth of all unrelated adoptions in the U.S. In 1994, there were 8195 intercountry adoptions. Of those, the most children came from Korea (1795), followed by the Russian Federation (1530), China (787), Paraguay (483), and Guatemala (436).

Who Can Adopt?

The requirements for adoptive parents vary among states and agencies. In many instances, unrelated adoption is facilitated if the youngest parent is no more than 40 years older than the child. It also helps to be married for a few years, healthy, and financially stable.

How Much Does It Cost?

While some state agencies charge a minimal fee (rarely more than \$200), independent adoptions can cost as much as \$40,000. Private agencies charge as much as \$25,000 for infant adoptions.

—Brenda C. Coughlin

ADOPTION: A ROMANCE
(continued from page 287)

"About eight weeks before we were to leave for China, they sent us a picture," says Phyllis. "We were both very struck by these intelligent eyes looking out at us from the picture. She was so alert. That photograph became very important to us, in what we went through internally. There's a process that gets set in motion, an emotional preparation. You begin to have this child in your mind, and already something is at work in forming an attachment. There's something transformative going on: You're becoming a parent."

Women who adopt older children always keep the precious photographs within reach during the weeks and months of waiting. Women who adopt children from other countries buy books to look at while they're waiting, books that will begin their education about another culture. They study the features of their children's racial groups. And of course, the women who wait for babies still in utero have memorized the file and the photographs of the birth parents, and often keep the printout of the sonogram to look at again and again.

As I set all this down here I realize that it is really too poignant, too sentimental, to convey. To tell you the truth, if I say this much, it's because of my feeling that so little of all this is ever talked about, except by the women themselves, on the phone, sitting on one another's couches looking at photo albums. Even while all the talk

shows spill scandal and bitterness onto the airwaves. Even while hardly a week goes by that you don't read of some awful new trial in the papers, study the picture of a desperate woman wearing sunglasses, her lips set tightly, a four-year-old child crying. These are the images that define adoption for much of America, despite the fact that they represent such a very small portion of cases.

For instance, you might be surprised by the number of birth mothers who also keep photographs, not only of the babies but of the new parents to whom they entrusted the babies, sometimes framed and set alongside other family pictures.

Why is it that these stories are so seldom told? Granted, it is irresponsible to recommend adoption to anyone without caveats of many sorts, but why—in this era when “regular” parenthood seems to be idealized more than any other institution—is this other, profoundly compelling desire to raise a child so often seen as preposterous? Yet adoption is as old as biological parenthood. There has never been a time when orphans weren't raised by aunts, grandparents, strangers. There has never been a time when mothers didn't ensure their children's welfare by placing them with other families. There is not a place in the world where, if they can afford it—and often even if they can't—people will not welcome other women's children into their homes.

Somehow, though, in this country at this particular time, these acts of love are often seen as bizarre. *Surrogacy*, *egg donors*, *birth fathers*—all these new terms are triggers for images of court cases, the misery of the parents, the tragedy of the child. As for adoption, the oldest and most blatantly needed unconventional arrangement, it is seen in many quarters now as an act of emotional violence, the parties as venal, crazy, selfish, and cruel to one another and, even worse, to the child.

It sometimes seems to me that the more open adoption becomes, the more intense the opprobrium it gathers. The more it becomes accepted, overtly longed for, allowed to fill the

great need of some, the more it appears to enrage others. And infertility procedures stir up such conflicts that hundreds of thousands of people have made it their business—whether financial or moral—to involve themselves in the most intimate affairs of the heart. Long-awaited foreign adoptions as well as nontraditional domestic arrangements are often viewed with, at worst, disgust, at best, suspicion and distaste. To a surprisingly large segment of the population, the passionate desire for a child in any but the regular way is seen as absurdly compulsive, dangerously unnatural, unnecessary, or even ridiculous. Why?

It can't only be the shock of the new. Granted, open adoption and the increasingly varied circumstances of the children as well as of the parents are multiplying so quickly that everyone—participant and observer alike—is reeling a bit. Still, the widespread hostility is so disproportionate that it seems to correspond with a deep and primitive fear.

So far, though, there seems to be no analysis of the intense reaction. Even the psychotherapists I queried were hesitant to formulate any theories. I asked some to take a guess.

“Everyone is deeply sensitive to issues of abandonment,” one psychoanalyst suggests. “The very idea of a mother giving up her child is very frightening.” Perhaps the prejudice expresses horror at the symbolic role of the birth mother.

Another analyst I spoke to suggested that, on the contrary, many of the problems may arise from an idealization of the birth mother, the mysterious good mother as opposed to the known bad adoptive parents. “It's common to be angry at your parents and to have a fantasy that you were adopted but never told and that you don't really belong to these people who call themselves your parents, that there is a real mother and father whom you might discover one day, to whom you could flee for safety and love.” In this scenario, the diabolically bad adoptive parents are pretending to be real and thereby preventing the child from growing up > 298

ADOPTION: A ROMANCE (continued from page 295)

happy and loved by the good parents.

Either of these possibilities, certainly, would lend more plausibility to the wicked, sadistic shadow plays evoked by the talk-show spectacles in which every birth parent is either an extortionist or a victim, every adoptive parent an exploitative and easily exploited subject, every child a forbidden prize.

Of the thousands of adoptions that proceed each year without betrayal, in a spirit of mutual respect and increasing understanding, not much is reported. In fact, the bugaboo of the successfully challenged adoption has been realized very few (but invariably sensationalized) times in the last five years, while close to 500,000 American adoptions have been completed during the same period, to say nothing of the more than 38,000 foreign adoptions. While there is no doubt that disappointments and dishonesty are not rare, the proportions are insanely distorted by what the TV shows, incredibly, often present as the official version.

Still, the more diversified and heterogeneous adoption becomes—the more little Chinese girls there are in New York and little Russian boys in Michigan, the more older children, older parents, same-sex parents, single-women parents—the more taboos will recede, the more “natural” adoption will become. If the government doesn’t hamper the process any more than it does already, the radical changes that are the source of resentment and fear cannot but eventually create a new context that will make the resistance obsolete.

Paradoxically, what is most threatening to many people about modern adoption is the lack of secrecy. What was clandestine is now publicly disclosed; where there was shame there is now pride. It’s increasingly unnecessary to base the present on an unacknowledged past that condemned all parties to a false reality in perpetuity. Honesty, too, no less than hate, is self-perpetuating.

And perhaps new traditions will then begin to fall into place, and packing that small bag to go to the other end of the country, or of the

world, to pick up an infant who needs a parent will become as common and thrilling a romance as it should be. And it is a romance. In the end, it’s a reality you feel you have created more deliberately, with no imperative but the love you want to give and receive.

No, said several adoptive parents when I pointed out that well-meaning friends often insist that a parent’s feelings about biological and adopted children are exactly the same. “There’s no difference,” say those friends. “Your child is your child.” Of course your child is your child. But there is a difference. To parents I know who are raising adopted children, this relationship seems more romantic, more miraculous.

“When you’re in a group of people and their biological children, do you feel excluded?” I asked Lee. “No,” she said. “I feel luckier than they are.”

“I feel as if Hannah had to be my child. It could only have been her,” says Paula. “Sometimes I tell myself, ‘Thank God Mark and I didn’t start four years earlier, or we wouldn’t have had Hannah.’”

As for me, I don’t even want to consider the possibility that another woman could have been the one pulling into the hospital parking lot that night when Luc was wending his way at last into our world. I am not a superstitious person, nor a fatalist, but I do feel there was some natural dynamic, some break in the randomness, some right pattern that fell into place that night, as if there were a fate or a will or a choice on all our parts, whichever you prefer—I don’t care—that brought these particular people, and no others, together. There’s only one Angela, one Steve, one Luc, one me. We are it. And at this moment, when I find—to my surprise—that all the anxiety is now far enough behind me that I can afford to scan the world for different possibilities and alternate realities, there is no doubt in my mind that I am the only creature who could or should have been the audience for Luc’s pranks, the mediator in his relationship with the cat, the chief dispenser of hugs, kisses, and futile exhortations to enter the world of language by way of French and ► 300

Cartesian thinking, the nevertheless attentive and grateful recipient of his Pokega and Mama declarations. It’s terrible to contemplate anything else. But, fortunately, I don’t have to: We already have a past together, even though the present now takes up all the available space. And that, in my view, is real family. ■

It really doesn't matter

By Jacquelyn Mitchard

MILWAUKEE

I READ in Parade that movie mogul Steven Spielberg and his wife, Kate Capshaw, are so busy because they have five children — "one of whom is adopted."

Later the same week, a Big Ten basketball coach is grieving. His "adopted daughter" has lapsed into a coma.

I've been a reporter my whole adult life, and I understand the importance of detail. But when I read these descriptions, there is an unmistakable subtext. The Spielberg family is way busy — and the fact that one of those five kids is different suggests that things are even more hectic. As for the coach, there is the unintentional hint that the tragedy might have been even more substantial had he been related to his daughter by birth.

In a People magazine story about the death of actor Carroll O'Connor's son, his adoption is emphasized not once, but three times. Does the writer intend to suggest this detail helps us understand his death by drug overdose?

In a story about a book I wrote, a writer from Boston asks me to identify which three of my five children were adopted.

I decline.

"You really should," she says, "though I understand, you don't want to make a distinction be-

*It's just a fact.
Legal, social and
emotional.*

tween them." This story isn't about how I built my family, I point out; mentioning how I got my kids would be like describing each one's hair color.

"But otherwise," she persists, "people will think you gave birth to all these children."

"So what?" I ask.

"It's like lying," she says, "because you didn't."

"Nevertheless, they're my children."

"I know, I know," she sighs. "I have a friend who adopted a little girl from Peru, and she says the same thing."

Her tone, however, suggests that it is just as tedious when her friend says it as when I do. In the nicest possible way, of course.

People don't think I'm a bad woman when I bristle over the adoption distinction in every story about Tom Cruise and his children. They just think I'm hysterical. Even friends and family who love my adopted children just as much as they do my non-adopted children roll their eyes (in the nicest possible way, of course) when I chide the neighbor who says, of my son Dan, "You can sure tell that this one is yours."

In fact, by that standard, that one isn't, but he bears a strong resemblance. In lots of families, that's touching and dear — three little redheads at the library with Dad. Even I think so. It doesn't signify much in my family, but that doesn't make my children less my children. And it would do me good if my press colleagues stopped thinking this is just a sentimental notion that makes adoptive parents feel more like families who have "their own."

It's just a fact. Legal, social and emotional.

I know plenty of parents who have given birth to children they don't like much, and so do you. But in media and even family law, intelligent people cling to a stubborn belief that inherited bonds are most potent. It is, I believe, this attitude (unintended, almost invisible) that makes some adopted children feel so lonesome, that changes natural curiosity and yearning into obsession.

In fact, one of the most common gifts an adoptive parent gets is a poem that begins, "Not flesh of my flesh nor bone of my bone, but still, undeniably, my own."

It's meant to be sweet. But to hell with it.

Whether or not I made it with my proteins, the flesh and bone in my house — which I nurture and embrace and protect — is indeed "of" me. From whatever genetic backgrounds my children came, their heritages are now folded into our common destiny. I don't have gray eyes, but I'll probably have gray-eyed grandchildren. Of my own.

I can't change the world, or even my block, but there was a time when we writers thought it necessary to describe the makeup and clothing of every woman we interviewed. We stopped. It just didn't matter.

Hasn't the time come to do that with the origin of families, unless that is what the story is about? Do we include details (dyed hair, third husband) that, under the guise of detail, betray a judgment?

People who love me are rolling their eyes.

"But it really doesn't matter," they'll say.

My point exactly. So don't do it.

About Letters

Readers may drop off, mail, fax or e-mail letters. The Eagle's address is found over the editorials. Fax to 499-3419. E-mail to eagle@berkshire.net

Letters should be signed and include the writer's address and a daytime telephone number. E-mail letter writers should include a mailing address and phone number.

Shorter letters are preferred. The Eagle edits all letters and tries to condense the longer ones. The Eagle does not accept thank you letters.

The Eagle will not publish letters that violate standards of good taste, make libelous accusations or ad hominem arguments, or endorse commercial products.

Non Sequitur



©1996 Washington Post Writers Group

E-mail: SEQUITUR@aol.com



Birthright, Inc., a non-profit organization, was formed with the intention of educating the public at large of every child's right to a family. It is the birthright of every child brought into this world.



BIRTHRIGHT, INC.



BIRTHRIGHT, INC.

DEFINITION OF FAMILY

It is the intention of our organization to broaden the context of the term "family". It has many variations and is formed in many different ways. The one thread that unifies them is that they are all based on unconditional love.

We want to promote and legitimize the concept of families formed through varied means:

- Adoption
- Single-parent families
- Step-children
- Children from second marriages
- Ethnically and racially mixed families
- Gay parenting

In all their manifestations, we wish to stress the important concept of family rather than the "labels" which define their formation.

EMPHASIS ON THE POSITIVE ASPECTS OF ADOPTION

Too often the media and general public focus on the sensational and questionable cases (which are the rare exceptions). Throughout it all, the children are regarded as chattel and discussed as objects "owned" by various sources. Statistics of legally uncomplicated adoptions (foreign and domestic) far exceed the exceptions. In fact, one rarely hears about stories of these families unless there is a "problem". Out of all adoptions finalized in this country, only 1% ever encounter legal difficulties.

The birth mother is rarely discussed in a manner cognizant of her sacrifice. No matter what the circumstances are, the decision to place a child for adoption is one born out of love for the child and respect for their birthright of a "family".

FOUNDING MEMBERS

*Marcelle Clements, Nancy Kellogg Gray,
Nunzio Gubitosa and Shirley Kirshbaum,
Phyllis L. LaBella, Isabella Rossellini,
Robert and Michelle Murphy Strada.*

WAYS OF ACHIEVING GOALS

Building a strong organization of supportive families dedicated to enlightening the public.

Working with the White House, the entertainment world, legislators, and educators to make sure that laws protect and advocate children's rights.

Work closely and passionately with the press and media through interviews, television shows, seminars and conference exposure.

The purpose is ultimately to change the stigma attached to birth mothers, children, and parents in adoptive families.

My Children's Other Moms

BY ANTOINETTE MARTIN

I want my two adopted children to be close to their birth mothers. People tell me I'm risking everything, that I may lose my kids someday. But to me, being open is the only loving thing to do.

Last June, I traveled with my 3-year-old daughter from Montclair, NJ, to Jackson, MI, so we could attend her birth mom's graduation from high school.

Yes, I know. You need a minute. Shall I run it by again?

Slowly, then: Eighteen-year-old Angie was graduating from Jackson High, and she wanted us there—Mariah, the small curly locked dynamo she gave birth to and who looks so much like her, and me, Mariah's mom.

Angie was only 14 when she met my husband, Ted, and me in a social worker's office, and chose us to adopt her newborn preemie girl. She'd managed to hide her pregnancy from her grandparents, who were raising her, until two days before she gave birth. She also managed to stay on the honor roll at school. She assumed she'd keep Mariah—until she brought home the tiny bundle and realized there was no way it would ever work.

When Mariah joined our family, it seemed obvious that the teenage girl who loved her so would remain part of our lives. After all, that's the way it was when we adopted Charlie, our now-6-year-old son. Charlie's birth mom was in Texas, so the connection mostly involved the telephone, photos, and videos. But at the time, we lived only 90 miles away from Angie. She could even visit every few months to see Mariah grow.

What we are doing is called open adoption. The practice, which is on the rise across the country, means that birth mothers and adoptive parents are known to each other and, to varying degrees, stay in touch indefinitely. Back when we adopted Charlie, we were given no instructions about how to handle the complicated relationship we were entering. We just went ahead and fell in love with Charlie's birth mom,



and wanted to be close to her. Then we proceeded to do the same with Mariah's birth mom.

The day of Angie's graduation was swelteringly hot. The sun beat down on the football field, where the graduates were gathered, and in the bleachers, where we well-wishers sat. Next to me, Angie's grandpa mopped his brow. Mariah sat in my lap and seemed to melt there, our dresses and legs glued together like cheese on a burger. Still, a chill went down my spine when the superintendent took the podium and announced: "Graduates, please rise. I want you to show your gratitude and respect to all the parents, counselors, and those who may have helped along the way." Applause erupted on the field. They were clapping for us! Even for me.

I owe the joy I felt that day to the complicated family ties we've patchworked together. *My girl!* I sighed as Angie sashayed up for her sheepskin. *My girl's girl,* I corrected myself, looking down at Mariah. Whatever. There is no luckier or prouder mom who has ever lived.



The morning after graduation, Angie, her grandma, Mariah, and I went out for breakfast. Over her pancakes, Grandma reminisced about how shocked she was when Angie had turned up pregnant while still in junior high.

"They used to try to find out how I was gonna react," Grandma said of Angie and Mariah's birth father, Brian, three years Angie's senior. "I'd be driving them someplace, and they'd point out a girl they knew, and say she was pregnant. And I'd say, 'Oh! So young!'"

"You nearly blew a gasket when you found out," groused Angie, who was wan and grouchy from partying until 4:00 A.M. "You were so mean to me. You came down so hard. That's why Mariah came early."

"Oh, Angie!" I blurted. Her grandmother sat motionless. "I don't think so," was all I could manage to say.

Mariah piped up and said she had to go potty. Thank goodness. It gave me a few minutes' reprieve to think of how to soothe tempers back at the table. Being a mom always requires a lot of instinct, but at least there are signposts. Being an open-adoption mom is an utterly improvised dance—and sometimes a glide onto ice as thin as tissue.

"You know," I said when we returned to the table, "I have always admired the way you both handled things when our little sweetie was born."

They looked at me quietly.

"There was bound to be tension in a situation like that," I said. "But you guys managed to hold your family together. And you found a good home for Mariah. A lot of girls like Angie wind up being thrown out on the street, and then their babies are *really* in trouble."

They both murmured agreement. We moved on, talking of Angie's plans for college and her hope of becoming a nurse.

By the time the check came, Angie and Grandma were congenial again. Angie swung Mariah upside down, then flipped her up to give Grandma a kiss on the cheek. We had all groped our way through a crisis once again.

It's what we do. We grope, and hope for the best.

"Aren't you afraid you're going to lose those beautiful children?" asks a friend of mine who was a social worker before she retired.

She has grandchildren who are adopted. She is a warm, generous woman who thinks I am completely out of my mind.

"You're risking everything!" she's been saying for six years. Ted and I had no set plan about open adoption back then. I'd found Charlie's birth mom through a woman in my mom's square-dancing class. This woman had written to thousands of doctors and midwives around the country, saying she wanted to adopt. After she did, she still got calls, and she sent one of them, from Texas, my way. We brought Charlie home when he was 9 months old.

I remember how my friend reacted when I told her how I had flown from Michigan to Texas to meet Charlie's birth mom and her mom, how we talked for hours about their family lore, and how I invited them back to our hotel room to help us settle Charlie in for a nap. "But now they will know how to find him!" my friend said. Other friends, who'd seen us through six years of infertility treatments and the loss of a baby girl I carried nearly to term, also had fits of anxiety on our behalf.

Charlie's birth mom, Angel, was 22 when we adopted Charlie. Aside from Charlie, she already had two other boys, born during an early first marriage to another man. Angel and I had bonded on the telephone, but I had not met her until she walked into the adoption agency in San Antonio and delivered her son to me. "From mama," she said as she placed him in my arms, "to mama." I never have the sense I am her mother, the way I sometimes do with Angie. But Angel made me a mother after years of questing, and that makes for a powerful connection too.

After Angie's graduation, I visited my elderly friend, who was still nervous. She watched Mariah cavort on the carpet, and listened to my proud prattling about Angie.

"She's going to want that child back someday," my friend insisted. "You could be in for great, great pain."

Later, I relayed to Angie what my friend and others thought she might feel, and do. She was shocked.

"I would never do that!" Angie said. "I might have carried her, but you guys are her parents. I gave you that in life. That was my choice. I wanted to make Mariah happy, and she is! And I wanted to make *you* happy. Once I met you guys, I really, really cared about you. It's like, you know—you're Mom and Dad."

I do know. When I met Angie, I was 42, exactly three times her age. Angie's mom had been dead four years, killed by her father—who will most likely be imprisoned for that act of jealous rage for the rest of his life. I had lost a daughter. She had lost a mother. Once I met her, I really, really cared about her too.

I have learned much from our birth mothers. How could I ever banish them from my life, let alone my children's?

Mariah is on the phone with Angie: "Um..." she says, trying to summon something interesting

to say. "I was in your tummy."

"That's right," Angie says. "You were."

She is pleased to hear the recitation, I think, but nob, expects a preschooler to fully understand the implications.

But Charlie is old enough now to begin considering his adoptive status. I've been trying to broach the notion of genes, telling him about Angel's great-uncle who patented a tool for analyzing engines and suggesting it might be why Charlie is such a genius with Legos. But Charlie is pretty sure he got those gifts from Ted, who's a builder and a fixer too. Maybe, I concede, it's a combination.

One question people always ask is: "Won't the kids be confused about who is Mommy and Daddy?" No, I don't think so, not for a minute—because none of us adults are. The children call their birth parents by their first names just as Ted and I do. The birth parents call Ted and me by our first names too. But everyone refers to us as Charlie and Mariah's mom and dad.

"What makes a baby?" Mariah asked Angie one day. "Oh, gosh," Angie said, rolling her eyes. "You better ask your mother."

But another time, a year or two ago, Angel left a phone message for Charlie, saying "Mommy" called. I chalked it up to habit, because her other two sons now live in Kansas with their father, and she probably leaves such messages for them all the time. Still, I figured it was worth mentioning: "Charlie just can't grasp that yet, Angel," I told her.

She agreed, and it never happened again. But she still sends cards signed "Mom." Angie does too. I think that's lovely, and I keep every one in the kids' albums, because I know—if my children are anything like sentimental old me—they will cherish those mementos.

Actually, Charlie doesn't seem ruffled by the suggestion that he has another set of parents. What bothers him is those brothers. I sense this will be our most intense family issue for some time.

"When I think of my brothers, I feel like I'm going to cry," he tells me sometimes when we're snuggling in his bed just before sleep. He

frequently asks why Andrew, 8, and Jake, 7, cannot come live with us.

Andrew, for his part, wants to know everything about Charlie—what he likes and doesn't like, and about our new house in New Jersey. He absorbs the tidbits, rapt. "Oh, I was just looking at that picture of Charlie you sent me, and praying that I could talk to him," Andrew gushed last time we called.

We visited the brothers once. It was a bit awkward for some of the adults. Andrew and Jake's grandparents were understandably taken aback to be hosting the adoptive family of their son's ex-wife's son.

But the boys got on famously, racing mini-cars all over the house, performing somersaults on the sofa, pushing each other on the porch swing. I was struck by how much they all looked like Angel, and like one another. That was four years ago. Charlie was only 2—he has no memories of it, only pictures.

Arranging the next visit is a top priority. For now, Charlie has the phone, the mail, and what psychologist Betty Jean Lifton, Ph.D., calls the Ghost Kingdom—meaning the shadow life of "what might have been" that haunts those who grow up in families other than the one they were born to.

The dark corners are not so dark for children of open adoption, says Lifton, who herself was adopted under the system where everyone kept the identities of her birth parents a secret. "But there is a loss whenever there is an adoption,



Charlie, 6, and Mariah could "pass" as Toni and Ted's biological children. But Toni, who prefers to be open about their adoption, says such secrecy goes against her grain.

even when the adoption is open," she reminds me. "The shadow world of what might have been still comes into being."

Once, I took Mia—she had nicknamed herself by then—to get her cut lip treated. "She's so gorgeous!" the doctor said, shooting a glance at me. "Hey, don't look over here," I said, laughing. "She's got a gorgeous birth mom."

Lifton thinks my response was unnecessary—that there is such a thing as being too open. "Listen," she exhorts me, "Mia and Charlie don't want to be reminded all the time that they weren't born into your family. And they may not want the whole world to know they're adopted. Kids want to be the same, not different. When they're a little older, they could get teased. Some kids say mean things about adoptees not having 'real' parents."

"And after all," she adds, "it's not like a foreign adoption where the nature of the relationship is literally written on the child's face. Charlie and Mia can 'pass'—and that gives them options."

This unnerves me and goes against my grain. Why should they "pass" as my biological children? Doesn't conceding to a prevailing prejudice mean quashing pride in oneself?

"But the children should be able to choose for themselves who to let in on their story," Lifton argues. "You don't want to experiment with your children to see if you can change the minds of others who might be inclined to be nasty."

Eventually, I'll be able to ask Charlie and Mia what they think. For now, I ask myself, "What would I want if it were me?" I'm the oldest of eight children born to my biological mother and father, so I haven't been there in the way Lifton

was arranged between my mother and Emily's adoptive mother to speak of Patrick's death. "You have all of our sympathy," Emily's mom said with great sorrow. And she added: "I'm afraid that's all I can offer."

No contact. No letters. No information. No pictures.

After we adopted Charlie and Mia, I passed a letter to Emily's parents, via the obstetrician. I strove to be gentle, respectful, and grateful. But I did tell them I feared Emily might someday weep for all she had missed—just as some of us in her birth family do now. My mother, I wrote, cries each year when our family gathers at Christmastime. "A picture, I'd just like to see a picture," she always says.

Emily's parents responded with a picture for my mom—a splendid one of a striking blond girl standing outside on the porch in the California sun. She has my brother's dimples. They also sent a note saying Emily will likely want to meet us someday—and they will support her in that. After she is 18. "Meanwhile," they wrote, "please do not contact us again."

"Okay, Mia," I said, as we hovered at the edge of the field, watching the graduates file toward us. "Here comes Angie!"

Mia plunged into the sea of white robes and found her birth mom, who swooped her up in her arms and carried her the rest of the way. I stepped forward and took a close-up photo of the two of them. In the picture, Angie has a blazing grin of pride and satisfaction on her face, Mia a more thoughtful look. Mia is hugging Angie, and gazing straight at me.

How I love that picture. Every time I look at it, I smile a smile just as big as Angie's. That picture speaks to me. It says: We are doing the right thing. ★

two moms and a baby

An intimate story of adoption by Marcelle Clements

I often find myself musing about Angela, wondering how she's doing, whether she's all right, whether she's in a good enough mood, whether her mother is being nice enough to her, whether she's still eating all that unbelievable fried food they love in Texas, whether her figure has gone back to normal since the pregnancy, whether she's being more careful now with birth control. It may seem odd to you, but I really like to think about her. Angela just had her twenty-first birthday last week. She's the mother of an adorable 2-year-old boy, and last spring she gave birth to the baby I adopted.

Sometimes she telephones me: they're moving and she wants to be sure I have her new address, or maybe she just wants to talk. Sometimes I call her. Often, I think of her and I don't allow myself to call her. I don't want to have any relationships that will become confusing for my son as he gets older. So, as per the agreement we both made with the adoption agency, I restrict myself to the photos I'm to send once a month for six months and then once a year for five years.

But I've had the sense all along—and I know Angela has, too, because we've

talked about it a lot—that we will always feel connected to each other. It's a strange and powerful connection. I guess we'll have it until one of us dies, and maybe beyond, as embodied in the life of this child who will continue in the world when we are gone.

In many ways, we make up our families as we go along. Almost from the start there is the favorite baby-sitter, the nursery school teacher, the best friend, or the delightful creature yearned for as the best friend. Twenty, 30, 50 years later these people live in our memories, many of them stilled in the perpetual smiles of youth, the eerie freeze-frames of loving memory. They are the families of the heart, the real families, as poignantly and affectionately remembered as the siblings and uncles who populated the world of our childhoods, if we were lucky. As time goes by, we add to our families, but less and less as we grow older. We know, now, what the implications are. Do we want to become intimate with this stranger? Do we want to forever be bound? This is what makes so many decisions difficult in adulthood and none, perhaps, as complex and risky as adoption. Will we allow ourselves to love and be loved

by this tiny genetic foreigner for whom we will be all of family?

Many of us answer yes. More and more of us, lately. And as adoption becomes more common, more open, and less secret, shameful, and silent, the ties that bind all the participants are being re-examined, re-created. And that is how I, a single French Jewish woman in her 40s, have come to feel that one of the people in the world I am closest to is a wise-cracking, gum-chewing 21-year-old kid in San Antonio whose favorite expletive actually is "Dang!"

FRIENDS WHO ARE NOT FAMILIAR WITH the new world of adoption ask me if I'm not scared to keep Angela in my life. "What if she shows up at the door someday?" they ask.

Well, what if she does? Will it be as an enemy or as a friend?

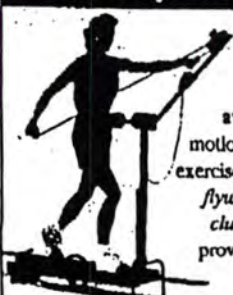
My guess is that someday he'll want to meet her, and she has told me that she'll be ready for that and so will the rest of her family. That's a great gift for my son, isn't it?

We agree that there should be boundaries and that these need to be carefully established for the sake of the child. But I know that all (continued on page 138)



The author with
her son, Luc.

You can afford a NordicTrack. Why settle for anything less?



While other ski exercisers provide an awkward shuffling motion, a NordicTrack® exerciser uses a patented flywheel and one-way clutch mechanism to provide a smooth non-jarring workout.

NordicTrack Challenger™... only \$339⁹⁹
 NordicTrack Sequoia™... only \$429⁹⁹
 NordicTrack Excel™... only \$499⁹⁹
 Other models priced from \$599⁹⁹ to \$1499⁹⁹

30-day in-home trial!

NordicTrack

A CML Company

FREE Video and Brochure

Call 1-800-942-1890 Ext. 25814

or write: NordicTrack, Dept. 25814

104 Peavey Road, Chaska, MN 55318-2355

©1994 NordicTrack, Inc., A CML Company • All rights reserved.
 Shipping, handling and applicable tax are extra.

TWO MOMS AND A BABY

continued from page 82

children thirst to hear where they came from, that they need to know that they were desired, that their birth was a wonder, and that they were always the object of love and care. My guess is that at some point during or after his adolescence the time will seem right for a meeting.

Meanwhile, Angela has asked me to call her from time to time, maybe once a year around his birthday, to let her know how he is.

"Are you sure it won't be too painful for you?" I asked her.

"No," she said. "Not as painful as never knowing anything."

There's no doubt that adoption is a risky relationship, as risky as that of mothering any child or, indeed, of entering into any relationship so loving that one's happiness depends on it forever: so many, many terrible things could happen. We hope none of them will. But, surely, to give Angela news of the child she gave birth to, to let her know that he's all right, that he's loved, can only lessen the possibility of anxiety and fear and remorse.

Surely, he'll want to know someday that she wanted news of him, that she

cared—and also that she cared enough not to disorient him, that she'll be willing to be there for him when he needs her and not before then.

And, let's be frank, what is the real fear my friends feel on my behalf? Either that she will one day want him back or that he will one day wish he were her son and not mine. But the truth is that both these things will happen sometimes. She'll have those feelings and he'll have those feelings and all three of us will have to live with that.

And I'm betting my happiness on it—and the child's—that we will. Sure, the stakes are high, but aren't they always? Do I owe him any less?

One hundred thousand children are adopted each year in this country, yet the terms birth mother and adoptive mother are still strange on our tongues, describing function in the coldest fashion, and only in relationship to a child. What about us, Angela and me? What are we to each other?

Well, of course, to me Angela is not a generic "birth mother." She has a tattoo on her shoulder, loves to zone out watching MTV, is interested in photojournalism, and is trying to get herself together to go to college—as hard as that is with no money and a 2-year-old. Yes, she's a birth mother, if you like, but to me she is the woman who, early in the morning of a hazy spring day, gave birth to Luc, who weighed seven pounds, 13 ounces. In the birthing room, she rested on a pillow they'd allowed her to bring from home. The pillow case had a leopard-skin pattern. When I arrived, her attractive young husband, Steve, was there, her solemn friend Rachel, and a young barefoot cousin who had beautiful long blond hair. In the middle of the night, her mother and her sister arrived from another town.

We all alternated spending time sitting next to Angela. In my hand her hand seemed small, her fingers thin and a little cold. Sometimes she closed her eyes and a half hour slipped away. There was time to talk, but the night sped by with astounding rapidity. Up on the top floor of the hospital there were some coffee machines, and Steve and I shuttled back and forth. One could step out on the roof and watch the lights of San Antonio twinkling and winking in the darkness and then grow fainter toward morning. On the roof, there was a gust of heat and humidity such as I'd only experienced in the tropics. Back in the room, it was cool and the lights were low, and I began to feel as if we'd all been there for a very long time.

When I would come back into the room, I felt almost as if it were in motion—as if the room were a train or a boat and we were all on a journey.

A graph next to the bed showed the intensity of the contractions. We could see it and Angela couldn't, so we often knew before she did that she was about to be in pain. But it wasn't nearly as bad, she told me, as with her first child.

There was another interesting machine next to the bed; it broadcast the sound of the baby's heart. The sound of the baby's heart became to me the counterpoint to every conversation in the room. I couldn't stop listening to it. It made every exchange seem resonant and intense, as if it were the call of all the most powerful mysteries.

It was all so odd, and yet I felt everything so viscerally. I knew that this was a very strange thing I was living. But I felt hyperalert. I guess that sound, that heartbeat, let me know not only that he was alive, but that I was too. And that feeling—in case you're wondering whether I did the right thing—that feeling has never gone away.

And what did Angela feel? The mirror of my feelings, I think. Relief, excitement, fear, hope, loss, love.

He was born not long after dawn. She gave him to me to hold, and I was holding him when he opened his eyes. She was moved by how thrilled I was.

I'd been told by the hordes of people who give unsolicited advice in these circumstances exactly how I would feel at that moment.

"As soon as you hold the baby, it's as if he were your biological child; there's no difference," is how one version goes.

No. I didn't feel that. I didn't immediately feel euphoric, maternal, as if I'd been born for this and my whole life had led to this moment.

"When you first hold the baby, you feel that he's a stranger. It takes some getting used to," is what the other faction of unsolicited advice-givers will tell you.

No, I didn't feel that either. I wasn't alienated, assailed by second thoughts, weirded out or freaked out.

I felt completely engaged and fascinated. How amazing it was to hold him. What an astonishing sight he was.

"See?" said Angela. "No fur."

For months, it had been a joke between us that perhaps had stood for all of our common fears about whether the baby would be healthy. Some babies are actually born a bit on the furry side. It's called lanugo. It's shed within a few weeks. But when Angela and I had kidded around

early on in her pregnancy about what secret desires I might have, appearancewise, I had said that my only special request was that the baby not be furry.

"I promise," she had said. "No fur."

We had talked once or twice a week for most of her pregnancy. We got to know each other very, very well. I think I understand how she feels about giving up this baby. "I feel," she told me—and I think this was her greatest gift—"I feel as if it's less a loss than a new beginning, for all of us." But I know that it was indeed a loss. And I think she understands how I feel about the miscarriages I had when I was trying to have a baby. We know a lot, in other words, of each other's family fantasies. She knows I gave up smoking. I know she loves to swim. She knows I like to travel. I know the kind of books she likes, and she knows the kind of music I like. In fact, while she was pregnant I would send her cassettes and she would put the earphones from her Walkman on her belly, especially at night when she wrote in her diary. The baby loved Mozart. How do you like that? And also Duke Ellington. I know Angela also played him some country music, and I'm not a big fan of country music.

But there you go. What can you do? . . .

There were dramas along the way. There always are, not just in an adoption process, but in any pregnancy. But looking back now, I feel as if even the difficult moments wound up solidifying our connection. We shared them as well as we could, and can one ask for anything more, even from one's family?

I know what you're thinking. I was really lucky. I agree. But maybe there's a lot more luck in the world than is commonly imagined, when strangers decide to take a risk together, to behave well.

And, mind you, it's not as if there hasn't been a lot of longing on all sides for life to have turned out differently. And perhaps that is part of what will bind us forever: the losses that we've had, each in our own way, the families we once wanted or should have had. Not just Angela's and mine, but Luc's, too. Maybe he had a sense, right at the start, of this larger family, that there was not one but two sets of eyes, smiles, arms to hold him in a special motherly way.

It was Angela who showed me how to feed him and burp him. Now I always stop halfway through to burp him, just like she told me, even though some of the books say otherwise. It was Angela

who showed me how to diaper him, and I have photos of the first time we did it, on his first day of life. He is tiny and red in the middle of the frame of our two sets of hands. My guess is that someday he'll love those pictures. Someday he'll stare at all these pictures taken in Texas, and—whatever else he sees in those photographs—he'll see that there was nothing secretive or shameful about his beginnings and that the first two women who were his family had come to be each other's family as well.

So little is known about babies, of course, that it's impossible to conjecture how aware Luc may have been of his first experience of loss, never to be verbalized, but it's one of the things I think about, sometimes, when I think about the circumstances of his birth.

But, of course, in many ways, he still has Angela. Perhaps she actually does live somehow in that inchoate baby memory. But in any event, she certainly lives in my memory, in the photographs I took and, of course, she lives in him, in his every cell, and always will. □

Marcelle Clements, a contributing editor at New Woman, also writes regularly for Premiere.

One little boy
redeems his
grandmother's
legacy
of sorrow.
by Marcelle
Clements

SUNDAYS WITH MY MOTHER

My mother is only 89, so it's a bit early to write this: I might have waited until her ninetieth birthday or until her next major accomplishment. I'm sure she's got some goal up her sleeve, and once she sets her mind on something nothing will deter her. These days, for instance, she's working on a book, and I remember what she told me a couple of years ago while I was with her in yet another emergency room. (It was during her phase of undergoing major emergency surgery on an average of once a year.) She'd been hit by a truck a block away from her house, on her way to the post office to mail some package of war-timelike supplies to some relative in Europe. She had a number of broken bones in her legs and hands, and we weren't sure what might be bleeding internally.

"Don't worry," she said just before they wheeled her away to reset God knows what. "I'm not going to die—I've got to finish my book." Then she had a sudden grave and pensive look, as if she were going to talk to me about something she wanted me to remember. "Do you think maybe I should switch from autobiography to fiction?"

Come to think of it, actually, my mother has always had great last lines before going off to her emergencies, though I think my favorite was when I was leading her out of her apartment to a waiting ambulance. She was passing a kidney stone and was in such atrocious pain that she could barely walk. But just before we reached the door she turned to me and, suddenly finding some new source of strength, said, "Don't forget—there's a whole chicken in the refrigerator."

Well, anyway, with Mother's Day coming up and the baby due to reach his first birthday a few weeks later—already!—I figure I might as well write this now so, as she would put it, "That way, it'll be done, and I'll be rid of it."

Mind you, it's only because it's in public in this magazine and because it's Mother's Day that I'm taking such a direct approach. We have a major difference of opinion on the subject of procrastination, as on many others. "You waste your energy with your indecision," my mother tells me. She hasn't wasted a drop of energy in all these years, is my guess. You wouldn't believe how much energy my mother still has, even



**The author's son, Luc,
with his grandmother,
Chaja Kleinweckaler.**

now that one of her greatest sorrows is that she can't lift the baby. And it's the low-wattage version of how she used to be. In the 1950s, I remember, my father used to call her *The Atomic Woman*. Or, rather, *La Femme Atomique*, because we lived in Paris, but that's another story.

Every Sunday we have lunch, my mother and the baby and I. And, come to think of it, she's right that I should be well rid of this task if it's at all true that telling helps even a little bit to lessen some of this painful, wrenching feeling I always get when I see my mother and my baby together, my mother so old and my son so young, and their communication so perfectly direct and so perfectly loving and so perfectly happy. It is the first time in my life that I've seen my mother so happy.

There's a lot I could tell you about that, and her Polish childhood, but that's yet another story. There are many stories in such a long life, and you may read them soon, if my mother manages to finish her book despite my procrastinating on having our interviews transcribed. She has already written a couple of hundred pages herself, encouraged by

her Hunter College professors a few years ago. (She was majoring in political science but plowed her way through the required English and math courses, gathering new friends in the various departments as she went along.)

My mother insists that she has had a good life: "I was loved," she points out. "I know what great passion is." But on much of the sadder material, my mother instructs me, in case I have to finish the book by myself, to leave out many of the really painful parts. "It's not what people want to read," she says.

So I won't tell all of them to you either, but, trust me, many of my mother's stories are unhappy. Most recently, there was my father's death and, because of the move to America, having to live so far away from my sister Odette and her husband, Salomon, and their children and their children's children. What's left of the family—there's almost none—is scattered. Here there's only me and, of course, her friends, her studies, her memories, her stories, her dead, who all live with her still, all the lives and deaths, all the old, unburied sorrows she relives daily. ▷144

Thanks to you, all sorts
of everyday products are
being made from the paper,
plastic, metal and glass that
you've been recycling.

But to keep recycling
working to help protect the
environment, you need to
buy those products.

BUY RECYCLED.



AND SAVE.™

So look for products made
from recycled materials, and
buy them. It would mean the
world to all of us.

For a free brochure, write
Buy Recycled, Environmental
Defense Fund, 257 Park Ave.
South, New York, NY 10010.
or call 1-800-CALL-EDF.

ENVIRONMENTAL
DEFENSE FUND **EDF**

Ad
COUNCIL

EPA

SUNDAYS WITH MY MOTHER

continued from page 89

Even in her childhood she'd already gotten the full quota: the crib deaths of a little brother and sister; the 5-year-old brother who fell out a window; the adored mother who died when my mother was 10. The life of the household was cold and hard and her father was sometimes tremendously tender, sometimes ferocious. "Don't say anything bad about him," says my mother. "The Germans burned him in their ovens."

So I won't. He was handsome, young, and by various accounts, brilliant and highly cultivated, and he allowed my mother to take singing lessons, though he didn't know she was planning a career in opera and he certainly didn't pay for her classes. She gave violin lessons to get through her training in the basic repertoire: she had a big, lyric, soprano voice. And she was lucky that her father thought girls should be educated. The Jews of Radom, Poland, were very religious. Not that it necessarily did them all that much good: there were 60,000 of them before the war and I've heard that there were two or three left afterward.

Well, I guess I'll skip the war. You can read about it in my mother's book, as well as her first husband's death and my parents' love affair. Her firstborn, Marcel, died the spring after the war, age 19, and I was born to replace him. "Your father wanted to console me," my mother has always explained.

But she was inconsolable. Every day, my mother came into my room—it had been his room and all his books were still there, the dark-green velvet drapes, the rather austere dark mahogany desk, bed, armoire, and a big picture of him in a leather frame, which used to often scare me at night. Every morning my mother came in and kissed the picture. There would be her lipstick on the glass. She had very red lips in the 1950s and wore rouge as well and very elegant dresses and amazing hats with feathers and carried astonishing and frivolous objects like Persian lamb muffs and silver fox stoles and small, exquisite mother-of-pearl binoculars when she went to the opera.

In her unending grief, she managed to be very beautiful. It suited her, this sorrow, and she always attracted love and admiration, as if the poignancy of the underlying tragedy only made

her charm more urgent and available. After all, even though she had ended her career as a singer, she was still a soprano. Being a soprano is perhaps most of all a state of mind in both the singer and the listeners.

"How I could have sung to you!" she says to the baby every single Sunday. But if he is missing out on the big Italian arias of my own childhood, he gets the benefit of dozens of cheerful tunes and ditties, most of which I had never heard and I would never have imagined were part of her repertoire.

*Oui, j'arrive au bon moment
J'suis content, j'suis content
Tous les rois ont fichu le camp
J'suis content, content.*

It's their theme song, I guess, because she sings it to him all the time, and he smiles as soon as she starts. It's an untranslatable little song about arriving just in time because all the kings have left, and about being happy.

Happy?

"Where did you learn that?" I ask her.

"Do you think I remember?" she says.

But she barely pauses to answer my questions. She's busy with him, and for the first time in my life she forgets to coerce me into eating too much, though, as always, the heavy, white, hand-embroidered linen, the gold leaf china, and the crystal wineglasses are on the table, and there is a four-course meal ready for me. She's on a special diet and can't eat anyway, she says, so she concentrates entirely on him. She is his greatest fan and his chief interpreter. "He thinks he's going to get the sounds out of my mouth so he can have them too," she explains when he puts his hands on her lips while she is singing.

"He is trying to get the flowers," she points out as he paws at the tablecloth.

She gives him everything he wants. "Only one cookie," I sermonize, and she has bought him the world's most gigantic cookie. She gives him the one, and when he has finished it or hurled it on the floor, he looks at her, piteously mewling and pleading. As she ambles wavily down the hall, forgetting her cane as usual, he promptly stops the wailing and regards her retreating back with interest. She returns with some other treat, and he taps the table with both hands. "He's only lacking the words," my mother says of his ability to communicate. If I leave the room for a moment, I often catch them upon my

return, in flagrante delicto, his bib rakishly slung over his shoulder, as he is rummaging through the cookie box for an extra cookie or (God only knows how many) several extra cookies.

She was against the adoption at first. It seemed to her like the ultimate insult among all the damages of life—her life—and all of the sorrows and exasperation that could be provided by an unruly, indecisive, and ungrateful daughter (that's me), and she did everything she could to talk me out of it. There would be no father. I would have no more liberty. There was the money. There were all the potential disasters. My mother was at her most eloquently tragic. *La Traviata*. "But wouldn't it make you happy to have a little child around here?" I had asked her.

"I've already had my own children," she informed me.

She'd changed her mind even before he arrived because of a phone conversation she'd had with my sister in Paris, in the course of which my sister had pointed out that without a child I would have no structure, no regular hours. "You're right," my mother had said. And that was that. (She told me so, I recall, while I was waiting for her to be wheeled into surgery for her emergency appendectomy last year.)

But anyway, as soon as he arrived, and she saw how Exceptional, how Gifted, how Extraordinarily Beautiful and Uniquely Sociable he is, there was no more question of any ambivalence.

She keeps trying to lift him up into her lap. "I forget," she says. "I forget my age." But he can be placed in her arms, and he has special sounds for her, special coos, gurgles, squeals, raspberries. "That particular scream," she says of one of his especially delighted noises, "I have exclusivity on that one, don't I?" He generously treats us to more of his repertoire. Then she announces, sotto voce, to me: "These will be his cries one day when he makes love."

And then she turns back to him. "Oui, mon chéri, oui."

Her friend Dorothy, who sometimes joins us for lunch—though she's on a special diet and can't eat much—not only approves of my mother's point of view but actually manages to add her own fillip now and then.

"He's absolutely magnetic," Dorothy points out with emphatic amazement. "I can't take my eyes off of him!"

My mother gravely assents. She brings her face nearer to his and peers into his eyes and addresses him directly. He looks back, with that way he has of looking. "Will you be a great musician or a great philosopher?" she asks him.

The baby bursts into smiles, squeals, and sweet, thrilled screeches, which seem to come as a novel and delightful surprise to the two ladies. Dorothy emits a little shriek of pleasure and my mother, peals of laughter.

"Oui, mon chéri," she coos to him. "Oui." And he coos back.

And seeing what he has in her and what she has in him, I see now, I almost see how it could have been, in her life.

Or, for that matter, in mine. Thank goodness it's that song he hears, and I hope he remembers it so that one day he can recall some happy moments and forget his own sorrows. I hope he'll only have little ones, only little sorrows, in a long happy life.

*Oui, j'arrive au bon moment,
J'suis content, j'suis content.*

Which reminds me that I should ask my mother to teach me the rest of the words so that I won't forget them. I keep meaning to ask her but never get around to it. I should do it and be rid of it because, as she would be quick to point out, there's not a moment to waste. How long we wait for our happiness. □

**"We all say to ourselves,
if I could just find some
way to exercise at home
that didn't take very long,
didn't cost an arm and
a leg, and really worked...
I'd do it in a heartbeat.
Well, you know what
you just found it!"**

—Greer Childers

**"So, now that you've found the HealthRider,
what are you going to do about it?"**

"We're all in the same boat. We really are. We need an exercise program that really works, but one that doesn't require a second mortgage on the house or dressing up and spending two hours at a spa. Who has time for that? Don't these people have jobs?"

in the world.

Well you did—and it is! If you're really serious about getting fit, call HealthRider's toll free number immediately."

Greer Childers

What we need is the most efficient machine possible. One that gives us maximum fat burning in minimum time. One that stretches, exercises and even tones all muscles at the same time. If you found it, it would be the most popular total body fitness machine

☐ Yes! I want to order my new HealthRider and experience the benefits of total body fitness.

Or write: ExerHealth, Inc. 1276 South 500 West, Salt Lake City, Utah 84101 to order your HealthRider for just \$499 plus \$45 shipping and handling. Or pay just \$169 down and 4 monthly payments of only \$99. Tax additional where applicable.

☐ Please send me a free VHS video brochure.

Name (Please Print) _____

Address _____

City _____

State _____

Zip _____

Telephone () _____

Method Of Payment: ☐ Check ☐ Money Order ☐ Visa ☐ MasterCard ☐ American Express

Card # _____

Exp. Date _____

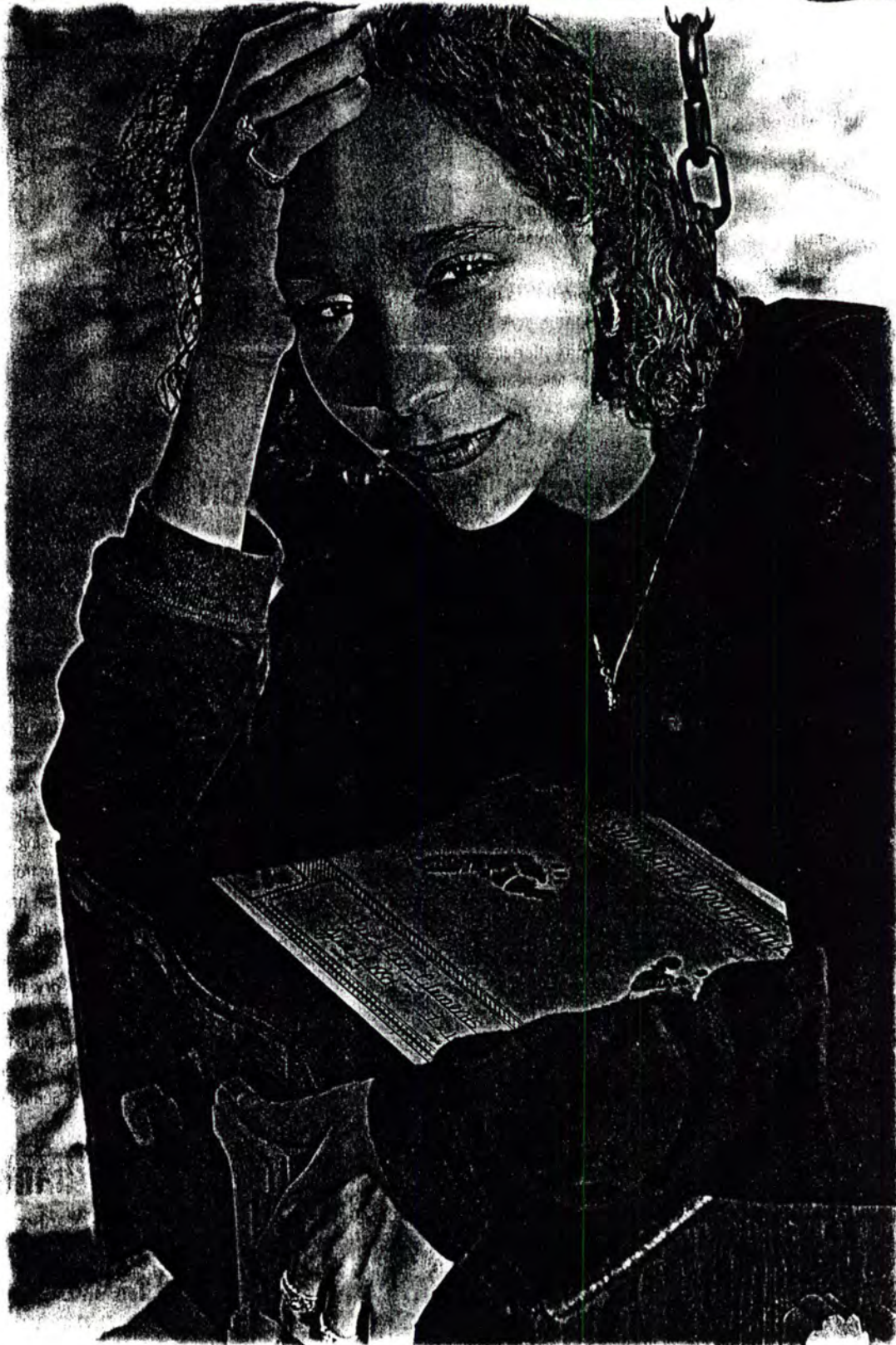
Signature _____

**1-800-441-5615
Extension 1359**



HealthRider

The Birth



"All I wanted was for Luc and his mom to be happy," says Angela Owens.

Mother

GIVING YOUR CHILD TO
ANOTHER WOMAN TO RAISE
IS MORE THAN AN ACT
OF DESPERATION. IT'S
AN ACT OF LOVE.

This can't be happening. This really CANNOT be happening!

That was all I could think as I took my sixth home pregnancy test and read the positive result. I had no morning sickness, no weight gain, no appetite change, no fatigue, none of the symptoms I had with my first pregnancy. I convinced myself I wasn't pregnant and believed it for about another month. I had it in my head that there wasn't a baby.

I can't say when or why I changed my mind. Maybe it was maternal instinct. Or maybe it was because my clothes were too tight. Either way I finally believed, and I was petrified. Depressed. My husband, Steve, and I were broke. He was 19, I was 20. We both had lost our jobs, plus we were losing our apartment and our car. We were going downhill. Where the hell did I get off bringing another child into this mess? We were barely feeding Blayne, our 9-month-old son. Where the hell did I get off loving this unborn baby?

For the next month we kept this child a secret. As planned, we visited all our relatives at the holidays. What a disaster! My husband's grandparents asked his parents if I was pregnant. They said, "Not that we know of."

My mother cornered me in her kitchen and asked me when the baby was due. I looked appropriately horrified and said, "What? I'm not pregnant, I'm just gaining weight." And then I sat down and tried to hide my stomach for the rest of the night.

I guess it was after the holidays—when I could stay clear of everybody—that I first thought about giving the baby up for adoption. So I let myself relax for a while—what a joke. Just when I believed everything was going to be fine, my brother decided to get married. In January. I was one month bigger. One month harder to hide. As I sat there at my brother's reception he asked, "Hey, Angel, when's the baby due?" The whole table was staring at me, so I laughed and said, "Yeah, whatever, I'm not pregnant." Then I excused myself and went to the bathroom to let my unborn baby rebel at my lie. My first bout of morning sickness. Perfect.

I was so scared. As my husband and I moved from relative to relative, my pregnancy became very obvious. I was so worried, I couldn't sleep. I decided that abortion was my only option. So we borrowed the money and off I went to the abortion clinic.

I sat there upset and terrified. *I don't believe in this*, I kept telling myself. But I was too scared to back out. I was taken to an examination room and told to get undressed and lie on the table. Lying there, I noticed two glass jars next to me. *That is where my baby will end up!* No way! I had to leave.

The doctor walked in and asked how far along I was. He had his hand on my abdomen, and when I answered, "About two-and-a-half months," his eyebrows shot up. Just to make sure, he ordered a sonogram. The doctor moved the machine away from

by Angela Owens

Adoption today

me and turned the volume off. I had no idea what they were seeing, but their words were like music to my ears. "We are sorry, but you're too far along for us to do an abortion—that is, unless you want to pay another two hundred dollars and have the two-day procedure done." Never. And so my journey began.

I was so relieved. I knew then and there I would give the baby up for adoption. I didn't know exactly how to begin, but through a friend of a friend, who had gone through something similar, I got the name and number of a respected adoption agency in San Antonio.

On my first visit there, I felt so many things. I felt worthless as a mother. Even though I was sure I was doing the right thing, I was still a mother—one who was planning to give her baby away. I also felt unsure that anyone besides me would want my baby and love it as much as, if not more than, I would. I wouldn't settle for anything less. Not even if they were millionaires. They had to prove to me they could handle this responsibility.

I use "they" loosely. I never actually pictured a "they." Sound weird? Not really. You see, I think God planned this. He knew who would get this child. And when the time was right, God would let me know.

On my second visit to the agency, my husband and I looked through portfolios of adoptive parents. We looked at happily married couples with good homes, substantial amounts of money, and unsure smiles on their faces. We read a few of the profiles they wrote, but nothing clicked. I picked up the last portfolio. It was a picture of a woman. Only a woman. I didn't read her profile, I didn't ask her name, I just said, "I want her." She looked so strong and sure—not desperate like the others. She seemed kind and like nothing could shock her. I knew she would never judge me.

The agency told me they would contact the woman and let her know we had picked her.

Our relationship with Marcelle started right away. She called us every week. Sometimes she called twice a week to see how my doctor appointments went or to tell me that she was gaining weight too. "Don't worry," I told her, "you'll lose it after the baby is born." We both laughed at the irony of it.

Every night I would write my feelings and dreams in my diary. I would write how many times the baby kicked. While I was writing, I would put headphones on my stomach so the baby could hear the music I played. Duke Ellington was a favorite. The baby would kick and roll inside me, and a tiny foot would poke out right under my breast. I would rub the little knot it formed and pretend I was tickling the baby's foot. I will always remember the feeling of that tiny foot. I want that child back in my body. It was the longest time I ever spent with him.

As sure as I was that I was doing the right thing, I still had bouts of depression. I wouldn't see this child grow up. He would have no memory of me, of my embrace, of my love for him, of my smile or scent. But I also knew that Marcelle could and would love this child just as much, maybe

What are the adoption options?

Public agencies are run by the local branches of states' social services departments and mostly place children who have been abused, abandoned, or orphaned. There is usually only a small fee (if any).

Private agencies, which are licensed and approved by the state, handle the largest number of domestic and inter-country adoptions. Flat fees range from \$8,000 to more than \$20,000. Often the birth mother chooses the adoptive parents, usually from a profile and photo. Agencies provide counseling for the birth mothers and short-term supervision of the adoptive parents.

In an independent adoption, the preg-

nant woman or would-be parent seeks each other out on their own—often through classified ads. Adoptive parents who don't fit the traditional mold are more likely to choose this option. Why? Since there are so many people looking to adopt, agencies tend to reject first those who are too old, have not been married long enough, or who do not have enough money. For independent adoptions, cost varies; adoptive parents must pay the birth mother's legal and medical expenses—which can skyrocket if she isn't insured.

What are a birth mother's rights after the adoption?

Technically, she has none. Once the papers are signed—about six months lat-

even more. And that's exactly what I needed.

When I was six months pregnant, I had a sonogram to determine the sex of the child. The first sonogram showed we had a girl. I was delighted; Marcelle was satisfied. It was healthy, she said, and that was all that mattered. I had a second sonogram at eight months that showed we were having a boy. Marcelle was ecstatic, and so was I.

He was to be named Luc Leon. That was perfect. Just like Marcelle and our friendship. Yes, we are friends. Great friends. I love her, and I love the fact that I gave her something she wanted. I feel as though it was meant to be. People say that they feel this way when they find their "perfect mate." Well, Marcelle was meant to be my light—you know, the one that is supposed to shine at the end of the dark tunnel.

The months seemed to fly by. My due date was June 10, exactly one year and six months after Blayne was born. By now my family knew of my plans to give my child up for adoption. They kept asking why—"How could you?" and "What about us, his grandparents?" Nobody ever asked if I was going to be okay or how I felt. Nobody asked if Marcelle was nice or if she was happy. Nobody except my father.

The only thing that ever came up was her religion. My father is Catholic; Marcelle is Jewish. He said it didn't matter. If I was comfortable with the decision, he would stand by me. My sister accepted it too. But my mother was a different story. She accused me of doing this just to hurt her. She said that I was selfish. I haven't talked to her in almost a year. Maybe someday she'll change. Maybe someday I will forget her words.

On June 10, my labor started. Right on time. I went into immediate denial. *I need more time*, I thought as I tried to sleep. My husband kept saying we should go to the hospital, that we should call Marcelle. But I wasn't ready. I would never be ready.

When I finally went to the hospital, everything went wrong. I had planned for me, Steve, and Marcelle to be in the room. But it turned into a circus. My friend went with us, as well as a cousin, my mother, and my sister (at my invitation).

Marcelle arrived a few hours later. She and Steve went to get something to eat and came back to find Luc hanging upside down, screaming, attached to the cord. So much for wanting

...the one who are adopting legally become the child's only parents.

Is there any room for her to change her mind?

Yes. In some states the birth mother can revoke consent up to ten days after she signs the papers. But afterward the only way the birth parent can get the child back is to prove the adoption is fraudulent or to find a loophole in the highly publicized (and partly untrue) Baby Jessica case, for instance. In the birth parents won custody because the father was able to prove that he'd never been told the baby was adopted.

What is open adoption?

An informal term, generally used to refer to arrangements in which the birth and adoptive parents know something

about one another—how much depends on what the parties agree to (like making occasional phone contact or actually visiting each other's homes regularly). The National Council for Adoption maintains that open adoption interferes with parenting and confuses the child. Others argue that it helps adoptive parents feel secure that the birth mother has thought through her decision, frees the child from nagging questions about his biological mother, and gives the birth mother confidence in the baby's new home.

Where would I start?

If you want to put your baby up for adoption or if you want to adopt, call the National Council for Adoption ([202] 328-1200) for more information.

—Tamar Schreibman

her to be there at his birth. I wanted her there so he could identify her smell right away. I also wanted her support, and I wanted to be the one to hand her Luc. I wanted to show her that I loved her and trusted her.

After the doctor cut the cord, I held him, Steve held him, and my mother held him. I took him from my mother, turned toward Marcelle, and said, "Congratulations, you have a son." She smiled, just a little. She looked down at him, and he wrapped his fingers around her index finger then opened his eyes. It was perfect. And for a split second I hated her. She would have my son. I wanted to scream. I wanted to get up and walk out of my life. Fortunately, I was too drugged up to do any of those things.

I fell asleep, and when I awoke the next day, I felt relieved. Marcelle and I took pictures and talked. I taught her how to change Luc's diaper and how to feed him. We laughed at his expressions and Blayne's reaction to him. They got along famously.

It's a harsh reality from my son's point of view. At least Steve and I have a few precious memories to hold dear. Blayne will have none. Just curiosity and probably some anger. I will have to deal with all this when the time comes, just as Marcelle will have to deal with Luc. We have faith in each other to do the right thing by our children, who are brothers. Marcelle and I decided that when the boys are old enough, they could meet each other if they wanted to, and Luc could meet me if he wanted to.

That night I lay in my hospital bed holding Luc and crying. I told him how much I loved him. How perfect he was. I felt his skin and memorized his face, his feet, his hands, his smile. Yes, he smiled at me. Just once.

The next day I had to sign the papers. Once the papers were signed, I couldn't change my mind. I thought about the finality of it just the same. I wanted my tiny new son to have a good life. I wanted Marcelle to have this perfect child. They needed each other. I needed both of them to be happy. I had that power, so I signed the papers. While I was signing my papers, Marcelle was signing hers, and so she officially became Luc's mom.

After everybody left that night, I fell asleep holding Luc.

The nurse came in and told me I wasn't allowed to let him sleep in the bed with me, as he could fall. I put him in his bed beside me; I was tired but didn't want the nurses to take him. After a few minutes he woke up and stared at me. He looked sad. Or maybe I wanted him to look sad. Anyway, I took him out of his bed and held him while he slept in my arms. He was content. He didn't know it would be the last time I would hold him this way. But I did. I cried for hours.

My mother came to the hospital that night. My sister held him while my mother and I talked. She told me that she had tried to find out if she could take him from me. I told her she was too late, that I had already signed the papers. She insisted she could still do some-

thing if she had enough money. I sat there, dazed. Couldn't she see my swollen eyes? Why couldn't she hug me and tell me that she loved me and Luc?

The next day I was discharged from the hospital. Marcelle, Steve, and Nikki, the caseworker, came to see me out. I was wheeled out of the hospital in a wheelchair with empty arms. No balloons. No hint that I had a newborn son. I stared straight ahead, my eyes glued on a woman and her baby being wheeled out. She had balloons and flowers and her baby. She was complete; I wasn't. I wanted to cry, but I had to be strong. I had to get myself through all of this. I think I did a good job; in fact, I'm pretty sure of it.

Marcelle spent a week in San Antonio waiting for approval to take Luc across state lines. We spent a lot of that week together. Steve and I showed her the Alamo, the Tower of the Americas, and the Riverwalk. I loved her more each day, as a person and as a mother.

When she called to tell us she was leaving, I wanted to drive to her hotel and get my baby. I wanted to hold him again, to bring him home. I ached for my baby, and I always will.

To heal myself, I went out and bought a small cedar chest. In it I placed every piece of Luc I had: his hospital shirt, his first bottle, his hospital cap, and all the pictures that were taken.

I longed for so many things I would never have. I would never see him take his first step or hear him say his first word. There was a very real possibility that I would never see him in person again. I really didn't know what would happen.

Life moved very fast. I experienced two more losses in a short time. My best friend's son died at 14 months of age. One week after that my sister's fiancé committed suicide. I had no time to mourn my own loss. I was too busy pulling everybody else together. All I wanted to do was sleep. I couldn't move forward. I couldn't see past my pain that Blayne needed me and I wasn't there.

After several months I came around. At least I could hope that I would see Luc again. I lived on that hope, and all my hopes came true.

Marcelle came back to San Antonio in December to finalize the adoption. She brought Luc with her. I guess ▷ 158

Sensual Aides

How to order them
without embarrassment.
How to use them
without disappointment.

If you've been reluctant to purchase sensual aides through the mail, our unique, three-way, 100% Guarantee might change your mind.

1. We guarantee your privacy.

Everything we ship is plainly and securely wrapped, with no clue to its contents from the outside. All transactions are strictly confidential, and we never sell, rent, or trade any customer's name.

2. We guarantee your satisfaction.

If a product is unsatisfactory, simply return it for replacement or refund.

3. We guarantee that the product you choose will keep giving you pleasure.

Should it malfunction, simply return it to us for a replacement.

What is the Xandria Collection?

It is a very special collection of the finest and most effective sexual products from around the world. It is designed for the timid, the bold, or for anyone who has ever wished there could be something more to their sexual pleasures.

The Xandria Gold Collection celebrates the possibilities for pleasure we each have within us. Send for the Xandria Gold Edition Catalogue. Its price of just \$4.00 is applied in full to your first order.

Write today. You have absolutely nothing to lose and an entirely new world of enjoyment to gain.

The Xandria Collection, Dept. NW0396
P.O. Box 31039, San Francisco, CA 94131-9988
Please send me, by first class mail, the Xandria Gold Edition Catalogue. Enclosed is my check or money order for \$4.00 which will be applied towards my first purchase. (\$4 U.S., \$5 CAN., £3 U.K.)

I am an adult over 21 years of age (signature required):

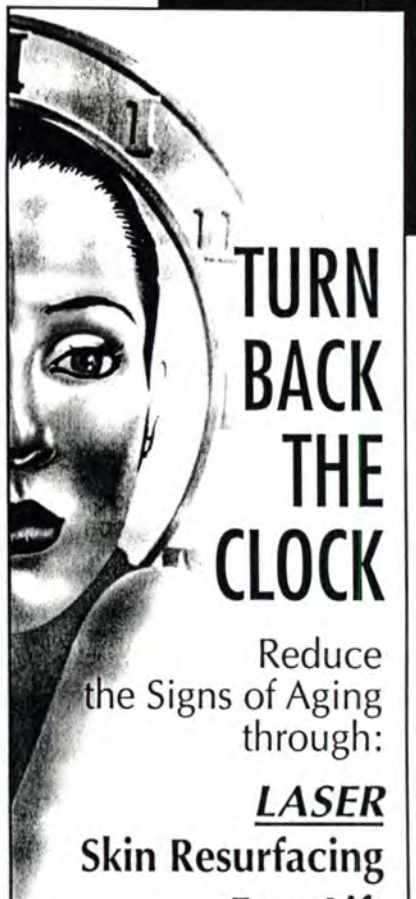
Name _____

Address _____

City _____

State/Zip _____

Xandria, 165 Valley Drive, Brisbane, California 94005-1340
Void where prohibited by law.



TURN BACK THE CLOCK

Reduce
the Signs of Aging
through:

LASER

Skin Resurfacing

Face Lift

Eyelid & Brow Lift

Liposuction

State-of-the-Art Procedures

**BOARD CERTIFIED
PLASTIC SURGEONS**

Convenient Hours

Major Credit Cards Accepted
Personal & Confidential Setting

Computer Preview

Your Possibilities

Aesthete 
ALLIANCE OF PLASTIC SURGEONS, INC.

 For Your Consultation, Call 

800-985-6657

Ask about our complimentary seminars

Copyright AAPS, Inc. 1996

Visit our Web Site -

[HTTP://WWW.AESTHETE.COM](http://WWW.AESTHETE.COM)

BIRTH MOTHER

continued from page 105

she thought that I could handle seeing him.

They pulled up to my apartment, and I came down to help them carry all their stuff in. Luc was sitting in the backseat, wide awake. He was staring straight at me, so I walked up to him and picked him up. He never took his eyes off me; he gave me the biggest smile and kicked his feet like he knew me. I couldn't stop myself from taking him out of the car seat so I could hold him. I didn't want to put him down, and I didn't want to hold him too much. I didn't want Marcelle to think I was desperate to hold him. I didn't want her to see how much pain I was in. I just wanted her to see me happy. Don't get me wrong—I was happy. But I was also sad. I knew they would leave again.

They spent a couple of hours with me and Steve, and she promised they would come back the next day before they left. I went to bed that night and cried for hours. Then I was struck with a horrifying thought: *He really wasn't mine anymore. I gave him up.* It took six months for this to sink in. Sometimes I cried all night.

I woke up full of anticipation. I was going to see Marcelle and Luc again. Then my phone started ringing, and I thought it would be them to tell me they weren't coming. I didn't want to answer it, but I did, only to hear my sister crying. My grandmother had died. I had to leave for Iowa immediately. I called Marcelle, who said she would come over so I could see them before I left.

As we said good-bye, Marcelle promised that she would visit again. That was nine months ago.

Luc's first birthday came, and I sent him a bracelet that says I LOVE YOU on it. I think about both of them every day.

I think about the future all the time. Will Luc ever want to meet me or Blayne? Will I be somebody he will be proud of? Marcelle and I have an agreement that we are both very comfortable with: we will never do anything that would confuse or disorient Luc.

No, I will never show up on her doorstep and ask to have Luc back. Nor will she insist that Luc meet me. Although we have a great friendship, we understand that everything we've done has been for Luc's sake. □

Angela Owens, who lives in Schertz, Texas, is planning to go to college this year.

In America

BOB HERBERT

Turning Children's Rights Into Reality

"If we could have but one generation of properly born, trained, educated, and healthy children, a thousand other problems of government would vanish."

Herbert Hoover said it, nearly 16 years before Bill Clinton was born.

The lead story in The New York Times of Nov. 20, 1930, opened as follows: "Demanding 'a fair chance' for every child, President Hoover called tonight for the mobilization of the best thought of the nation to prepare a program to fit the nation's youth for 'a complexity of life for which there is no precedent.'"

Nearly seven decades later the Children's Defense Fund has organized a rally in Washington ("Stand for Children," Saturday at the Lincoln Memorial) geared to essentially the same end. With children still in deep trouble, and with existing services so clearly in the sights of G.O.P. budget sharpshooters, there is no telling how many more decades this effort might take.

A couple of Times readers, Judith Ward and Bernie Tuchman, recently visited the Hoover Institution at Stanford University in Palo Alto, Calif. They came across a Presidential policy statement known as "The

Hoover's goals remain a dream.

Children's Charter," which had grown out of a White House Conference on the Health and Protection of Children that was convened by Mr. Hoover in 1930.

Ms. Ward and Mr. Tuchman sent a letter to me that said, in part, "This Children's Charter, which we are enclosing, stands in sad counterpoint to the current climate in American politics."

The charter, extremely progressive for its time, consisted of 19 "rights" of the children of America. Three examples:

- "For every child a school which is safe from hazards, sanitary, properly equipped, lighted and ventilated."

- "For every child who is in conflict with society the right to be dealt with intelligently as society's charge, not society's outcast."

- "For every child the right to grow up in a family with an adequate

standard of living and the security of a stable income as the surest safeguard against social handicaps."

There is no controlling the ironies when such a document emanates from an Administration like Mr. Hoover's. The Children's Charter may have championed "a stable income as the surest safeguard against social handicaps," but it was issued the same year that Mr. Hoover signed the infamous Smoot-Hawley tariff legislation that contributed so mightily to the Great Depression.

And no sooner had the Presidential commission completed its work than its chairman, Mr. Hoover's Interior Secretary, Ray Lyman Wilbur, was issuing public statements aimed at soothing fears that the Government might try to do too much good. "No one," said Mr. Wilbur, "should get the idea that Uncle Sam is going to rock the baby to sleep."

But whatever the shortcomings of Mr. Hoover and his times, there is little doubt the President felt deeply about the plight of America's children. He helped draft the charter himself, and his penciled notes on society's obligations to children (according to an essay by Vaughn Davis Bornet) included the following: "Ad-

equate care at maternity." "Frequent medical inspection — (a) By family doctor (b) By school or community clinic." "Rigid inspection and control of food and water against infection." "Special education for [the handicapped]."

The relevant question now is how to translate some of the goals established by a conservative Republican President in the first third of the 20th century into a reality for children struggling (in some cases for survival) as we approach the beginning of the 21st century.

Marian Wright Edelman, president of the Children's Defense Fund, recites like a mantra some of the ills currently facing children. She will tell you that every 9 seconds a child drops out of school, every 14 seconds a child is arrested, every 15 minutes a baby dies, every 2 hours a child is killed by a firearm, every 4 hours a child commits suicide, every 7 hours a child dies from abuse or neglect.

The ultimate irony related to Herbert Hoover's Children's Charter is the amount of energy his own party has invested in fighting efforts to improve the well-being of the nation's children. That fight continues with no sign of a letup.

In My Opinion:

Adoption Today - the truth

By Geraldine-Grena-Daneman

I have just finished reading a letter to the Edition titled "Isn't Anyone Outraged", by C. Catherine Marangos. The real outrageousness of the letter is the misconceptions and comparisons of adoptions today versus those of yesteryear.

I am the adoptive mother of a 2 ½ year old son. My husband and I adopted from a non-profit agency in Texas. We had a five month relationship with our birth mother. She was counseled on her adoption decision with independent and group counseling through our agency. She always knew she could change her mind. I held her hand and spoke with her through a C-Section delivery and visited her and my son during a 5 day hospital stay. I shared both tears of joy and sorrow with her. We spoke about her past and future and together we faced her decision. I continue to this day to send pictures and letters regarding our son. She was and always will be a precious part of my life for without her, I would never be a parent. My son's birthmother gave me every bit of information about my child's birthfather. He denied paternity, but was still informed of the child's birth through registered letters, public notices in his local paper and given 30 days to contest the adoption. He never did.

My son's birthmother was honest and informative about my son's birthfather's name and whereabouts.

In the cases of "Baby D" and "Baby Richard" the birthmother most likely lied about the name, whereabouts or existence of the child's birthfather. In Baby Richard's case, the birthmother claimed the birthfather had died. In "Baby D's" case, the birthfather's in jail. "Baby D" was returned to his biological father at 3 ½ years. "Baby Richard" at 2 ½ to his biological mother and father (they later married). The birthmothers were not held responsible for their deceptive action.

In these cases, the courts, lawyers and judges look too long for decision of custody to be given. In the best interest of the child, it is not taking 2-3 years to decide. We must make laws to govern how long an adoption contestment case can take. I am sure both cases had long complicated details, but I am not in agreement with Ms. Marangos that biological is always better. Maybe shared or joint custody could have been worked out or even visitation. This seems so much kinder than taking a three year old from the only home and parents they have come to know and love. Afterall, many children grow up with 2,3 even 4 parents in these days of divorce and step-parents. We all make mistakes but children should not be forced to suffer because of actions of adults.

Most children today are given up for adoption because the biological parent(s) feel they cannot give their child the life they want for them. Adoption comes from the heart, the heart of the biological parent to the heart of the adoptive parent. They both

love very much, though very different. Together they will create and pray for the life every child deserves.

Today there are choices. A birthparent can choose a closed adoption where no identity is given, a semi-open adoption, where birthparents pick and choose the adoptive couple, and remain on a first name basis only and have limited contact throughout the child's life or an open adoption, where all identities are known and contact will remain open throughout the child's life.

The days of the orphan train are gone and non existent, Adult adopters are now petitioning the courts for their adoption, medical and genetic records. Lawyers and agencies are allowed to charge only fees to facilitate adoptions not to make profits. The lawyers Ms. Marangos speaks about in her letter are corrupt and should be disbarred. You cannot force a birthmother to sign adoption papers through threats and illegal channels. Bad people exist in many aspects of life. I truly believe that most adoption attorneys only operate within our legal laws.

Last of all our adoption system is not just for children without birthparents. A lot of the children in the foster care system are from abusive or neglectful homes. Unfortunately, due to the belief that biological is best, most of these children sit and wait to be put on a list as an adoptable child. Some even get returned to homes where biological parents will abuse and neglect them again.

Adoption does not exist for lawyers and agencies to make money. It does not exist to take children forcibly from their misinformed birth parents. Adoption exists to create families for children who need to be loved and nurtured and need to be given a stable, loving home environment. Adoption is the fulfillment of the gift of a child to an infertile couple or the addition to a family filled with love and comfort for a neglected child. It is not a supply and demand business. It is a state of heart.

As an adoptive mother, I can tell you my son did not grow in my belly, but another woman's womb. God placed him there just for me and my husband. My birthmother told me this and I have felt him in my heart since the day he was born.

Adoption creates families, it does not pull them apart.

Not in a Vacuum

To the Editor:

(An open letter to Red Bank Mayor McKenna)

Thank you very much for your long letter of March 27, 1997 concerning the fate of the Rullman House. I was most impressed that you took the time and thought to respond to my letter to you. It's been my experience that most public officials, if and when they do respond, do so in the most brief and superficial manner. I am appreciative of your effort to explain your position regarding the Rullman House.

However, I feel that you need to understand that Red Bank doesn't exist by itself in a vacuum. We silent shoppers may not be residents of Red Bank, but we are indeed helping to pay the taxes with every cent we spend in Red Bank stores. It seems to me that the continued commercial success of Red Bank is very dependent upon people who live outside the borough who come to Red Bank to shop. Many of us care very deeply about the future of the borough. We could just as easily go to the Grove, the Monmouth Mall, or any number of bland, featureless discount malls. But Red Bank has something unique to offer, the vanishing old-fashioned ambience of the traditional small town downtown, and the personalized service offered by many Red Bank merchants. We should not be treated like carpet baggers whose opinions don't matter.

I would like to point out that when Mrs. Margaret Rullman died, she left her house and property to her son, as most parents do. It was not Mrs. Rullman who sold it. It was her son who made the decision not to relocate, and who subsequently sold the house. The Rullman house has long been recognized by preservationists as a significant structure in Red Bank's streetscape, and is listed in the Monmouth County Historic Sites Inventory. Sooner or later the borough council is going to have to recognize the special nature of Red Bank, that it is a threatened resource of historic buildings. Is the future of Red Bank to look like the sterile anonymous design of the City Centre?

Red Bank is so fortunate that there is a large group of citizens who care, and who came forward at a recent council meeting with such an impressive, workable plan to reha-

bilitate the Rullman house. Their community spirit and innovative ideas are remarkable. How can the borough council ignore the sincerity and generosity of so many people willing to donate their labor to enhance the whole concept of the Riverside Gardens Park? The talent and will are there. It just needs to be matched by the leadership of Red Bank. There is a unique opportunity here to act for the best long-term interest of the borough, and yes, the surrounding community.

Mary Lou Strong
Middletown Township

Isn't Anyone Outraged?

To the Editor:

Isn't anyone outraged that an infant can be turned over to total strangers without anyone telling the father?

Isn't anyone upset that foster parents (no legal adoption took place) can use the courts to thwart a birthparent's legal right to his child for years of a baby's life.

Isn't anyone angry that Trenton gives me legal rights to signers of contracts to buy dinette sets than to mothers of babies?

There is a lot of misguided chatter about Judge Helen Hoens decision returning Baby D to his biological and lawful father.

Yes, I do remember Baby Jessica. *Newsweek* reported, 3-21-94, that Anna Jacqueline Schmidt is happy and content one year after being returned to her biological family.

I also remember the roots of the adoption system in America: the Orphan Train. Tens of thousands of New York City kids were sent to homes in the West. They were removed from their families among "the dangerous classes of New York" (to quote Charles Loring Brace) by his organization, the Children's Aid Society (and others, including the Catholic Sisters of Charity). It was seen as being in the best interests of these children to remove them from their Italian, Irish and Jewish families and send them west to work and learn English.

Is the public aware that when a birthmother signs relinquishment papers as early as three days after childbirth, she is given no legal representation and of independent counseling. It is an uninformed consent—no one will tell her what most birthmothers experience after relinquishment. She is given no hearing. Her parental rights are terminated—even if no one ever adopts her child. She is never informed if her child is ever adopted, or even if the child is alive or dead.

As an attorney I know that a contract signed by a minor is

voidable—that is a contract to buy my dinette set. But, a minor may sign away an infant, without counseling or representation, without a parents co-signature. The minor's relinquishment or her own child may not be voided.

As an attorney I may not represent a mortgage company without making sure that the borrower has his or her own legal counsel. I cannot put a mere mortgage on someone's home without advising them of their right to their own independent counsel. Isn't anyone outraged that I can take away someone's flesh and blood forever without ensuring that amount of protection?

The focus of the adoption system is to provide babies for people who want to adopt. It's really a matter of supply and demand, not "the best interest of the child." Agencies and lawyers earn no fees without relinquished babies. I have been told of coercive practices used to get the birthmother's signature to relinquish such as: "It's illegal for you to take the baby home unless you pay the hospital bill first," and "This signature is just for foster care until you can pay the bill." No parental relinquishment should be legal without independent legal representation. Babies are more important than home equity loan and dinette sets.

Every adoption takes place under a virtual "gag order." Adoptions are generally completed in a single closed hearing—the press and the public are excluded. The birthparents of the child are given no notice nor opportunity to be heard, the child has no independent counsel.

As an adoptee I know first hand what it is like to be turned over to strangers, to lose both parents, medical history, extended family, cultural and genealogical heritage. Under the closed records system this loss is forever. Do any of you in the editorial department know that pain? Neither of my parents had the fortitude to do what Baby D's father is doing, though our separation through adoption caused a great deal of pain to us and ripped through our families.

As a mother of three I fear a system that takes children away from their families because there are people who may believe they would be better parents. Young lives are not commodities.

The Racks, like the DeBoers, chose to ignore the genetic and legal bond between a parent and child. From the time Baby D was ten months old, the Racks, whose application to adopt had not yet been ruled upon, have engaged in court battles that have robbed this child of years with his lawful family. There are children who have no parents and who would benefit from adoption. That is not this case.

C. Catherine Marangos
Fair Haven

Green For A Day

Presented on this week's OpEd page are opposing views on the state of the environment in the immediate wake of the 27th Annual Earth Day observance. While numerous grassroots activities took place over this past weekend (Earth Day itself was Tuesday), in general the day was marked by apathy.

We watch as Earth Day becomes an ever-larger bandwagon for corporations, many of whom are chronic polluters, to jump upon. And we wonder: are we delusional enough to believe them; have we become such that we will let them get away with anything?

Governor Whitman must think so. She has private industry to monitor itself. It is a plan that would foxes guard the hen house — if one doesn't care.

As the OpEd piece written by the director of EPA at Washington, D.C.-based Citizens for a Sound Clear, (though perhaps not entirely intentionally more important than the environment. Unfortunately "green for a day" mentality of too many disinterested author is just about right. Too many people are more economics than with clean water and clean air. The selfishness for which we all at sometime will dearly sentimental tree-huggers? We call it common sense.

It is true that much progress has been made since Day in 1970. New Jersey today is a model to emulate recycles some 60% of in-state garbage. The spectacular "ery facility" at the Monmouth County Reclamation Falls (see next week's TRT) will utilize methane, gas (once burned off as waste), to convert to electricity. And, thanks to the relentless efforts of local organizations Clean Ocean Action, the Baykeeper, the Littoral Society oceans and beaches are cleaner than they were in 1970 dramatic improvement in the quality of the Navesink Rivers, too — to the extent that shellfish beds have been the Oceanic Bridge for the first time in nearly 30 years due local water monitoring groups, the state DEPE, Frank Pallone, and increased awareness of our water about by events that include the annual Navesink River Festival slated for Red Bank's Marine Park June 22.

It is true also that much — too much — is being done in this awareness and progress.

As Assemblyman Bob Smith notes in his OpEd, Whitman has slashed the state's Department of Environmental Protection budget by 30%; abolished the state's Laboratory; abolished the office of the Environmental reduced anticipated fees for industrial pollution by pollution sampling of New Jersey air; and has proposed, pollution-oriented enforcement of water pollution.

Citizens for a Sound Economy, content with the status quo, asks why some people are still fearful of the answer, "the organization writes, "may rest with the movement itself. As challenges are met in one area movement, for its own survival, had to find new crisis surprise of most experts, we have been told that the in fact, still very harmful."

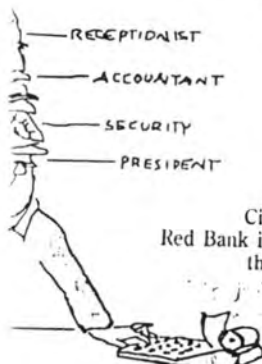
It is?

According to statistics reportedly from Governor's office, 75% of our freshwater rivers and streams fail to meet quality safe for swimming; 65% are so polluted to support a healthy aquatic community; and 100% of the water were found to be either threatened or in an poor water quality.

Are the experts surprised by this, too? Are you? We cannot rest on our environmental-progress laurels allow our political leaders to ignore their constituents selves with big business, and assume that we are too thetic to see through their facades.

For what good is a sound economy to our children if it is not a healthy place for them to live?

A fourth-grader could tell you that. One told us.



749-2625

PHYLLIS L. LaBELLA, CSW
Board Certified Diplomate
in Clinical Social Work
(NYS Certification #PR 015507-1)
(NJ License #SC 00809)

792 Columbus Avenue, Apt. 11-0
New York, New York 10025
Tel. #: 212/663-8613

19 East 88th Street, Suite 1-D
New York, New York 10128
Tel. #: 212/987-0077

Fax #: 212/749-2625

QUALIFICATIONS

Master of Science Degree in Social Work from Columbia University; Certificate in Psychoanalytic Psychotherapy from Washington Square Institute; Clinical Diplomate and Past First Vice President of New York State Society of Clinical Social Work Psychotherapists; Past President of the Metropolitan Chapter of the New York Society of Clinical Social Work Psychotherapists; Consultant, Field Representative and Lecturer for Adoption Services Associates (a Texas based adoption agency licensed in New York, New Jersey, and Connecticut), The New York Office of Heart of America Adoption Center (a Kansas based adoption agency licensed in New York), Consultant to various Adoption Agencies, Adoption Attorneys, Adoption Groups and Infertility Groups.

PROFESSIONAL MEMBERSHIPS: Clinical Diplomate and Past First Vice President of the New York State Society of Clinical Social Work Psychotherapists and Past President of its Metropolitan Chapter; Clinical Diplomate and Member of the National Association of Social Workers, Board Certified Diplomate in Clinical Social Work, (American Board of Examiners in Clinical Social Work). The Committee on Psychoanalysis of the National Federation of Societies of Clinical Social Work; National Registry of Health Care Providers; American Orthopsychiatric Association; American Anorexia/Bulimia Association, Inc.; Columbia University School of Social Work Alumni Association; North American Council on Adoptable Children; Adoptive Parents Committee; National Infertility Network Exchange (NINE); The Resolve Infertility Group; Stars of David Adoptive Parents Group; Concerned Parents for Adoption; Families with Children from China; and Founding Member of Birthright, Inc.

Twenty-five years of experience in the adoption field as consultant, lecturer, counselor and psychotherapist dealing with the multiple aspects of infertility, the adoption triad (birth parents, adoptive couples and adoptees), and all phases of the adoption process and child rearing. Extensive public speaking before various self-help groups dealing in infertility, adoption, and/or child rearing, as well as at local, national and international adoption conferences. Appearances on local and national television and local radio. Extensive experience in doing custody evaluation, as well as giving expert witness testimony in court cases.

PHYLLIS L. LaBELLA, CSW
Board Certified Diplomate
in Clinical Social Work
(NYS Certification #PR 015507-1)
(NJ License #SC 00809)

792 Columbus Avenue, Apt. 11-0
New York, New York 10025
Telephone: 212/663-8613

19 East 88th Street, Suite 1-D
New York, New York 10128
Telephone: 212/987-0077

Fax #: 212/749-2625

EDUCATION

Certificate in Psychoanalytic
Psychotherapy (1977)

Washington Square Institute
for Psychoanalytic Psychotherapy
(New York City)

MSSW (1974)

Columbia University School of
Social Work
Casework/Group Work

BA (1972)

City College of the City
University of New York
Major: Psychology
Minor: Sociology

HONORS

Columbia University Tuition Grant, Veterans Administration Training
Grant, Honor Society of City College

PROFESSIONAL EXPERIENCES

1978 to Present	Private practice in Psychoanalytic Psychotherapy
1972 to Present	Twenty-five years of experience in the adoption field as consultant, lecturer, counselor and psychotherapist dealing with the multiple aspects of infertility, the adoption triad (birth parents, adoptive couples and adoptees), and all phases of the adoption process and child rearing. Extensive public speaking before various self-help groups dealing in infertility, adoption, and/or child rearing, as well as at local, national and international adoption conferences. Appearances on local and national television and local radio. Extensive experience in doing custody evaluations, as well as giving expert witness testimony in court cases.

January 1992 to
December 1993

Appointed to serve on the New York State Task Force on Waiting Children, which had as its fundamental premise that every child has the right to a stable and permanent home as soon as possible. The objective of the Task Force was to examine and make recommendations as how best to facilitate the adoption process. The Task Force served a two year term.

1995 to Present

Founding member of Birthright, Inc. The intention of our organization is to broaden the context of the term "family". It has many variations and is formed in many different ways. The one thread that unifies them is that they are all based on unconditional love. We want to promote and legitimize the concept of families formed through varied means:

- Adoption
- Single-parent families
- Step-children
- Children from second marriages
- Ethnically and racially mixed families
- Gay parenting

Our ways of achieving goals is building a strong organization of supportive families dedicated to enlightening the public. Working with influential individuals connected with the White House, the entertainment world, legislators, and educators to make sure that laws protect and advocate children's rights. Working closely and passionately with the press and media through interviews, television shows, seminars and conference exposure. The purpose is ultimately to change the stigma attached to birthmothers, children and parents in adoptive families.

1985 to Present

Consultant, Field Representative and Lecturer for Adoption Services Associates (a Texas based adoption agency licensed in New York, Connecticut, and New Jersey).

1994 to Present

The New York Office of Heart of America Adoption Center (a Kansas based adoption agency licensed in New York).

1980 to Present	Active in adoption work, and as a psychotherapist specializing in pre and post adoption counseling and family therapy, and as a Home Study Specialist.
1984 to Present	Clinical Supervision of psychotherapists in private practice.
1984 to 1986	Clinical Supervision of psychotherapists in psychoanalytic psychotherapy at the Bronx Center for Community Services, Bronx, New York.
July 1974 to June 1981	New Home Guild, 150-20 88th Street, Howard Beach, New York 11414. Long term individual, marital and family psychotherapy with varied age ranges and diagnostic categories.
November 1975 July 1976	Queensborough Community College, Bayside, New York. Counsellor a variety of students of all ages and backgrounds (including veterans) regarding studies, program selection, personal problems, housing, etc; collateral field work attending veterans organizations and American Legion meetings, researched and wrote a Veterans Handbook which included information on services available to veterans and their families (i.e. housing, social security, Medicaid, medical and dental coverage, education, mental health services, job and school information).
June 1974 to November 1974	McMahon Services for Children, 1011 First Avenue, New York, New York. Caseworker and group worker. Ran groups for Agency Operated Boarding Home Housemothers, foster mothers and foster children, intensive counselling with birthmothers and birthfathers, house-parents, adopted children and foster children; worked cooperatively with community resources and the schools; supervised several workers regarding adoption (home studies, adoption law, etc.)
September 1973 May 1974	Veterans Administration Psychiatric Outpatient Division, New York City. Field Placement/Second year internship. Long and short term casework and group work with Viet Nam Era, Korean and World War II veterans, marital counseling, and family therapy, intake interviews, concrete services.

September 1972

Spence-Chapin Adoption Services, 6 East 94th Street, New York City. Field Placement/First year internship. Intensive counseling with birth mothers, foster parents and adoptive parents; liaison to community resources and the schools; handled selected adoption situations of a special nature (home studies, analysis, working through feelings regarding relinquishment by birth parents, and adoption of children from varied cultural backgrounds). Full time employment after completion of field placement (May to September 1973).

PUBLIC SPEAKING ENGAGEMENTS

Topics related to:

- Infertility
- All phases of the adoption process
- Anxiety
- Depression
- Employment pressures (i.e. ethics, stress management)
- Addictions
- Health problems
- Marital discord
- Eating disorders
- Childhood trauma
- Incest survivors

Speaking engagements:

Numerous workshops, meetings, and annual conferences of:

- The North American Council on Adoptable Children (NACAC) throughout the United States and Canada
- American Adoption Congress Annual Conferences
- Adoptive Parents Committee (APC), a New York/New Jersey support group
- Resolve, an infertility group
- Stars of David, a support group of adoptive couples on the multiple aspects of infertility, adoption and child rearing
- Families with Children from China
- Concerned Parents for Adoption, a New Jersey support group of adoptive couples on the multiple aspects of infertility, adoption and child rearing

PROFESSIONAL MEMBERSHIPS

Clinical Diplomate, Fellow and Past First Vice President of the New York State Society of Clinical Social Work Psychotherapists and Past President of its Metropolitan Chapter; Clinical Diplomate and Member of the National Association of Social Workers, Board Certified Diplomate in Clinical Social Work, (American Board of Examiners in Clinical Social Work). The Committee on Psychoanalysis of the National Federation of Societies of Clinical Social Work; National Registry of Health Care Providers; American Orthopsychiatric Association; American Anorexia/Bulimia Association, Inc.; Columbia University School of Social Work Alumni Association; North American Council on Adoptable Children; Adoptive Parents Committee; National Infertility Network Exchange (NINE); The Resolve Infertility Group; Stars of David Adoptive Parents Group; Concerned Parents for Adoption; Families with Children from China; and Founding Member of Birthright, Inc.

REFERENCES FURNISHED UPON REQUEST

COMMONWEALTH OF MASSACHUSETTS

DIVISION OF REGISTRATION

**BOARD
SW**

**IN SOCIAL WORK
LIC INDEP CLIN SOCIAL WORKER**
ISSUES THIS LICENSE TO

TYPE

PHYLLIS L LABELLA

-1

**792 COLUMBUS AVE
APT 110
NEW YORK NY 10025-5110**

Signature

435971

107862

10/01/98

435971

LICENSE NO.

EXPIRATION DATE

SERIAL NO

The University of the State of New York

THIS IS TO CERTIFY THAT QUALIFICATIONS FOR PROFESSIONAL
PRACTICE IN NEW YORK STATE HAVING BEEN APPROVED

THE STATE EDUCATION DEPARTMENT

HAS REGISTERED 30494170UP

LABELLA PHYLLIS L

APT 11-0

792 COLUMBUS AVENUE

NEW YORK

NY 10025-5149

FOR PRACTICE IN NEW YORK STATE AS A (N)

CERTIFIED SOCIAL WORKER

08/31/99

PR015507-1

LICENSE/CERTIFICATE NO.

Phyllis L. LaBell
SIGNATURE OF REGISTRANT

COMMISSIONER OF
EDUCATION

REGISTRATION CERTIFICATE -- NOT A LICENSE

STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS

013155

THIS IS TO CERTIFY THAT
BOARD OF SOCIAL WORK EXAMINERS
HAS LICENSED

PHYLLIS L LABELLA
792 COLUMBUS AVE APT 11-0
NEW YORK NY 10025

FOR PRACTICE IN NEW JERSEY AS A(N) LIC CLINICAL SOC WORKER

09/01/96

EFFECTIVE DATE

08/31/98

EXPIRATION DATE

SC 00809

LICENSE NO.

SIGNATURE OF REGISTRANT

DIRECTOR

Fax (212) 749-2625

PHYLLIS L. LABELLA, CSW, BCD
PSYCHOTHERAPIST

19 East 88th Street
Suite 1-D
New York, NY 10128

Hours By Appointment
(212) 987-0077

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. list	List of Participants - Adoption Meeting (partial) (2 pages)	08/02/1996	b(6)

COLLECTION:

Clinton Presidential Records
First Lady's Office
Melanne Verveer
OA/Box Number: 20017

FOLDER TITLE:

Adoption [Folder 1] [1]

2013-0534-S
ry1530

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

Adoption

LIST OF PARTICIPANTS

ADOPTION MEETING
8/2/96 9:15 am
MAP ROOM

Michael Barr

(b)(6)

[001]

Ms. Mary M. Bellor

(b)(6)

Ms. Ellen Block

(b)(6)

Ms. Barbara B. Blum

(b)(6)

Lois Brown

(b)(6)

Mr. Calvin Cafritz

(b)(6)

Ms. Nancy M. Daly

(b)(6)

Christine Ellertson
Passholder

Tom Freedman

(b)(6)

Ms. Jan Heffner

(b)(6)

Lyn Hogan
Passholder

Olivia Golden

(b)(6)

Wendy Jacobson

(b)(6)

Ms. Carol Larson

(b)(6)

Mr. Theodore E. Lobman

(b)(6)

Mr. Michael Levine

(b)(6)

Ms. Ruth Massinga

(b)(6)

Mr. Douglas W. Nelson

(b)(6)

Ms. Susan Notkin

(b)(6)

Ms. Julie L. Rogers

(b)(6)

Mr. Robert Rogers

(b)(6)

Mr. Leonard Smith

(b)(6)

Mr. Paul Vander Velde

(b)(6)

Ms. Kathy Whelpley

(b)(6)

Carol ~~Wendy~~ Williams

(b)(6)

file adoption

September 23, 1997

MEMORANDUM

TO: Hillary Rodham Clinton
FROM: Nicole Rabner, Jennifer Klein
cc: Melanne Verveer
RE: Tomorrow's Meeting on Adoption

The purpose of tomorrow's meeting is to be briefed by HHS on the recently introduced Senate child welfare bill and explore Administration strategy. We participated with HHS in a briefing by key staff of Senators Rockefeller and Chafee on the PASS Act, and they expressed an eagerness to work with the Administration. Rockefeller and Chafee plan to hold a one-day Finance Committee hearing on the bill on October 8th, and hope that it goes directly to the floor for speedy passage. They urged our support.

As you know, the other important purpose of this meeting is to speed up what might otherwise be a lengthy Administration review.

Background

As you know, on Thursday, September 18, a bi-partisan group of Senators -- including Senators Rockefeller, Chafee, Craig, Jeffords, Dewine, Bond, Coats, Levin and Landrieu -- announced an agreement on child welfare legislation, called the Promotion of Adoption, Safety and Support for Abused and Neglected Children Act (PASS). The PASS Act represents the Senate version of the House adoption legislation which passed this past Spring, which the Administration endorsed. Through the Spring and Summer, Rockefeller had prevented speedy Senate consideration of the House bill, in order to work on more ambitious Senate legislation. The PASS Act incorporates many elements of the Administration's *Adoption 2002* initiative, including the principle of health and safety for children in foster care, financial incentives for states to meet adoption targets, clarification of the "reasonable efforts" standard, and shortened waiting times for children in foster care. The PASS Act also includes other measures, including judicial reforms and health coverage for special needs children who are adopted (effectively de-linking adoption assistance from IV-E eligibility).

Unlike the House bill, the Senate Act, as you know, has budget implications (roughly estimated at \$2.4 billion, although CBO has not yet scored the bill), paid for by savings from "cost-allocation" -- ensuring that states do not shift TANF administrative costs to other federal entitlement programs, such as Medicaid and food stamps. The Administration has been on record as supporting some version of cost allocation. As you might suspect, however, there are many competing causes trying to capture this pot of savings (for instance, Agriculture research spending). Rockefeller's argument is that if we are going use this savings for something, it should be for measures that re-invests in this same population.

Attached please find a one-page description of the PASS Act, the Congressional Research Service side-by-side of the introduced legislation from the House and Senate, and the PASS legislation, as introduced on 9/18/97, as well as the *Adoption 2002* report.

Meeting Participants

The First Lady
Melanne Verveer
Bruce Reed
Elena Kagan
Gene Sperling
Janet Murguia
Jennifer Klein
Nicole Rabner
OMB TBD

Donna Shalala
Olivia Golden
Rich Tarplan
Mary Burdette

Promotion of Adoption, Safety and Support for Abused and Neglected Children Act (PASS)

The result of a comprehensive bi-partisan effort on behalf of children and families, the purpose of PASS is to promote adoptions and safety for abused and neglected children by clarifying that a child's health and safety are the paramount considerations when a state makes any decision concerning the well-being of a child in the foster care system.

I. PROMOTES ADOPTIONS

- Rewards States that increase adoptions with bonus of \$2000 for adoptions of foster children and \$4000 for adoptions of children with special needs
- Requires States to use "reasonable efforts" to move eligible foster care children towards safe adoptions
- Promotes adoption of all special needs children and ensures health coverage for special needs children who are adopted
- Breaks down unnecessary geographic barriers facing adoptive families
- Requires States to document and report adoption efforts

II. ENSURES SAFETY FOR ABUSED AND NEGLECTED CHILDREN

- Ensures that health and safety are paramount concerns when a State determines placements for abused and neglected children
- Adds "safety of the child" to every step of the case plan and review process
- Requires criminal records checks for all foster and adoptive parents
- Allows children to be freed for adoption more quickly in extreme cases such as murder or severe abuse by their parents

III. ACCELERATES PERMANENT PLACEMENTS

- Cuts by 1/3 the time a child must wait for a plan to achieve a safe and permanent home
- Requires states to initiate court proceedings to free a child for adoption once that child has been waiting in foster care for one year or more
- Gives judges the discretion not to initiate legal proceedings in special circumstances such as when a child is safely placed with loving relatives
- Shortens a child's wait for adoption by allowing states to develop a standby (or concurrent) permanency plan
- Prevents long, legal delays through the appeals process

IV. INCREASES ACCOUNTABILITY AND REFORMS

- Establishes new outcome measures to monitor and improve state performance
- Requires states, for the first time, to document child-specific efforts to move children into adoptive homes
- Introduces innovation grants to reduce backlogs of children awaiting adoption
- Strengthens and integrates substance abuse treatment with protections for children
- Continues investments in strengthening families at the community level
- Establishes a plan for public oversight of suspicious child deaths

would support an expanded harvest level. However, New England's past has taught us that in an unregulated environment, this current healthy condition could rapidly be reversed. Given the present lack of a Federal fishery management plan for herring and questionable scientific information on the status of the stocks, the uncontrolled expansion of this fishery could have devastating consequences.

We need to slow down the increase in fishing power entering the herring fishery, and we need to give the New England Council the time to develop a thoughtful Federal management plan for herring that responds to local interests and needs. While I had hoped that the council and the Secretary of Commerce would be able to accomplish these goals through the process established by the Magnuson-Stevens Act and other fishery laws, it has become clear in recent weeks that we must impose temporary legislative safeguards until that process is complete.

The bill which Senators SNOWE, KENNEDY, and I are introducing today, the North Atlantic Fisheries Resource Conservation Act, provides those safeguards. First, by September 30, 1998, the New England and Mid-Atlantic Councils and the Secretary of Commerce are required to develop and implement both a fishery management plan for herring and a plan amendment for Atlantic mackerel. Second, a fishing vessel that is longer than 165 feet or has engines that exceed 3,000 horsepower is prohibited from harvesting either herring or mackerel until the councils and the Secretary have addressed the potential impact of such vessels in the management plan.

While the provisions of the North Atlantic Fisheries Resource Conservation Act are specific to two Northeast fisheries, the issues which they address should become part of a broader national policy debate about our vision for the American fishing industry in the 21st century. For over two decades, our fishery policies have focused on two goals: conservation and management of U.S. fishery resources and development of the domestic fishing industry. We have succeeded beyond our expectations in achieving the second goal of developing the U.S. fishing industry. I am optimistic that the Sustainable Fisheries Act will move us toward achieving the first goal of improving conservation and management. With the achievement of those goals, however, come new questions. What do we want our fishing industry to look like in the years to come? What should we as a nation do to preserve traditional coastal communities centered on small-boat fishermen? What restrictions if any should be placed on enormous factory trawlers? In New England, these large ships conjure up memories of foreign factory trawlers vacuuming up and destroying U.S. fishery resources in the days before the Magnuson-Stevens Act. Are such ships an appropriate element in other U.S. fisheries?

The legislation before us today focuses on the actions needed to safeguard the Atlantic herring and mackerel fisheries. However, I look forward to the broader debate. By the prompt enactment of this legislation I hope we can contribute to that debate and begin to shift the national example set by New England fisheries from one of overfishing and painful rebuilding toward one of conservative management that is successful in preserving both the fishermen and the fish.

By Mr. CHAFEE (for himself, Mr. CRAIG, Mr. ROCKEFELLER, Mr. JEFFORDS, Mr. DEWINE, Mr. COATS, Mr. BOND, Ms. LANDRIEU, and Mr. LEVIN):

S. 1195. A bill to promote the adoption of children in foster care, and for other purposes; to the Committee on Finance.

THE PROMOTION OF ADOPTION SAFETY AND SUPPORT FOR ABUSED AND NEGLECTED CHILDREN ACT

Mr. CHAFEE. Mr. President, I am pleased to introduce the Promotion of Adoption, Safety and Support for Abused and Neglected Children Act, the so-called PASS Act. This legislation will make critical reforms to the Nation's child welfare and foster care system and will go a long way toward improving the lives of the hundreds of thousands of abused and neglected children across America. These are children without a safe family setting. They are children who face abuse and neglect every day of their lives. They are America's forgotten children. And, all too often, they are children without hope.

This chilling picture has brought the sponsors of this bill together to take immediate action. The goals of the PASS Act are twofold: to ensure that abused and neglected children are in safe settings, and to move children more rapidly out of the foster care system and into permanent placements.

While the goal of reunifying children with their biological families is laudable, we should not be encouraging States to return abused or neglected children to homes that are clearly unsafe. Regrettably, this is occurring under current law.

About 500,000—half a million—abused or neglected children currently live outside their homes, either in foster care or with relatives. In Rhode Island alone, there are nearly 1,500 children who have been removed from their homes and are in foster care. The Rhode Island Department of Children and Families has an active case load of about 7,700 children who have been abused or neglected.

Many of these children will be able to return to their parents, but many will not. Too often, children who cannot return to their parents wait for years in foster care before they are adopted. In today's child welfare system, it has become a lonely and tragic wait with no end. To us, that is an unacceptable way of life for any child to have to endure.

The PASS Act seeks to shorten the time a child must wait to be adopted, all the while ensuring that wherever a child is placed, his or her safety and health will be the first concern.

The PASS Act also contains important new financial incentives to help these children find adoptive homes. State agencies will receive bonuses for each child that is adopted, and families who open their hearts and their homes to these children will be eligible for Federal financial assistance and Medicaid coverage for the child.

I believe the PASS Act is a good bipartisan, compromise package. The sponsors of this bill have worked hard to come together in support of a child welfare reform bill. And we expect this new, revised legislation to move quickly through the Senate, as the Majority Leader has indicated that adoption legislation is one of a select few priorities to be dealt with before expected adjournment in early November.

But the real reason we need to move this bill is not because of legislative haste. It is because each passing day we do not act to bring hope and relief to abused and neglected children is a dark day for Congress and the Nation.

Finally let me thank my friend JAY ROCKEFELLER, who has worked so tirelessly on these issues and whose leadership was key to this bill. I also want to pay special tribute to LARRY CRAIG—without his commitment to these children this agreement would not have been possible. I am proud of this bipartisan effort, and I hope all of my colleagues will support this measure. I ask unanimous consent that the full text of the legislation be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 1195

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the "Promotion of Adoption, Safety, and Support for Abused and Neglected Children (PASS) Act".

(b) TABLE OF CONTENTS.—The table of contents of this Act is as follows:

- Sec. 1. Short title; table of contents.
- TITLE I—REASONABLE EFFORTS AND SAFETY REQUIREMENTS FOR FOSTER CARE AND ADOPTION PLACEMENTS
- Sec. 101. Clarification of the reasonable efforts requirement.
- Sec. 102. Including safety in case plan and case review system requirements.
- Sec. 103. Multidisciplinary/multiagency child death review teams.
- Sec. 104. States required to initiate or join proceedings to terminate parental rights for certain children in foster care.
- Sec. 105. Notice of reviews and hearings; opportunity to be heard.
- Sec. 106. Use of the Federal Parent Locator Service for child welfare services.
- Sec. 107. Criminal records checks for prospective foster and adoptive parents and group care staff.

Sec. 108. Development of State guidelines to ensure safe, quality care to children in out-of-home placements.

Sec. 109. Documentation of efforts for adoption or location of a permanent home.

TITLE II—INCENTIVES FOR PROVIDING PERMANENT FAMILIES FOR CHILDREN

Sec. 201. Adoption incentive payments.

Sec. 202. Promotion of adoption of children with special needs.

Sec. 203. Technical assistance.

Sec. 204. Adoptions across State and county jurisdictions.

Sec. 205. Facilitation of voluntary mutual reunions between adopted adults and birth parents and siblings.

Sec. 206. Annual report on State performance in protecting children.

TITLE III—ADDITIONAL IMPROVEMENTS AND REFORMS

Sec. 301. Expansion of child welfare demonstration projects.

Sec. 302. Permanency planning hearings.

Sec. 303. Kinship care.

Sec. 304. Standby guardianship.

Sec. 305. Clarification of eligible population for independent living services.

Sec. 306. Coordination and collaboration of substance abuse treatment and child protection services.

Sec. 307. Reauthorization and expansion of family preservation and support services.

Sec. 308. Innovation grants to reduce backlogs of children awaiting adoption and for other purposes.

TITLE IV—MISCELLANEOUS

Sec. 401. Preservation of reasonable parenting.

Sec. 402. Reporting requirements.

Sec. 403. Report on fiduciary obligations of State agencies receiving SSI payments.

Sec. 404. Allocation of administrative costs of determining eligibility for Medicaid and TANF.

TITLE V—EFFECTIVE DATE

Sec. 501. Effective date.

TITLE I—REASONABLE EFFORTS AND SAFETY REQUIREMENTS FOR FOSTER CARE AND ADOPTION PLACEMENTS

SEC. 101. CLARIFICATION OF THE REASONABLE EFFORTS REQUIREMENT.

Section 471(a)(15) of the Social Security Act (42 U.S.C. 671(a)(15)) is amended to read as follows:

"(15) provides that—

"(A) in determining reasonable efforts, as described in this section, the child's health and safety shall be the paramount concern;

"(B) reasonable efforts shall be made to preserve and reunify families when possible—

"(i) prior to the placement of a child in foster care, to prevent or eliminate the need for removing the child from the child's home when the child can be cared for at home without endangering the child's health or safety; or

"(ii) to make it possible for the child to safely return to the child's home;

"(C) reasonable efforts shall not be required on behalf of any parent—

"(i) if a court of competent jurisdiction has made a determination that the parent has—

"(I) committed murder of another child of the parent;

"(II) committed voluntary manslaughter of another child of the parent;

"(III) aided or abetted, attempted, conspired, or solicited to commit such murder or voluntary manslaughter; or

"(IV) committed a felony assault that results in serious bodily injury to the child or another child of the parent;

"(ii) if a court of competent jurisdiction determines that returning the child to the home of the parent would pose a serious risk to the child's health or safety (including but not limited to cases of abandonment, torture, chronic physical abuse, sexual abuse, or a previous involuntary termination of parental rights with respect to a sibling of the child); or

"(iii) if the State, through legislation, has specified cases in which the State is not required to make reasonable efforts because of serious circumstances that endanger a child's health or safety;

"(D) if reasonable efforts to preserve or reunify a family are not made in accordance with subparagraph (C), and placement with either parent would pose a serious risk to the child's health or safety, or in any case in which a State's goal for the child is adoption or placement in another permanent home, reasonable efforts shall be made to place the child in a timely manner with an adoptive family, with a qualified relative or legal guardian, or in another planned permanent living arrangement, and to complete whatever steps are necessary to finalize the adoption or legal guardianship; and

"(E) reasonable efforts of the type described in subparagraph (D) may be made concurrently with reasonable efforts of the type described in subparagraph (B);"

SEC. 102. INCLUDING SAFETY IN CASE PLAN AND CASE REVIEW SYSTEM REQUIREMENTS.

Title IV of the Social Security Act (42 U.S.C. 601 et seq.) is amended—

(1) in section 422(b)(10)(B) (as redesignated by section 5592(a)(1)(A)(iii) of the Balanced Budget Act of 1997 (Public Law 105-33; 111 Stat. 644))—

(A) in clause (iii)(I), by inserting "safe and" after "where"; and

(B) in clause (iv), by inserting "safely" after "remain"; and

(2) in section 475—

(A) in paragraph (1)—

(i) in subparagraph (A), by inserting "safely and" after "discussion of the"; and

(ii) in subparagraph (B)—

(I) by inserting "safe and" after "child receives"; and

(II) by inserting "safe" after "return of the child to his own"; and

(B) in paragraph (5)—

(i) in subparagraph (A), in the matter preceding clause (i), by inserting "a safe setting that is" after "placement in"; and

(ii) in subparagraph (B)—

(I) by inserting "the safety of the child," after "determine"; and

(II) by inserting "and safely maintained in" after "returned to".

SEC. 103. MULTIDISCIPLINARY/MULTIAGENCY CHILD DEATH REVIEW TEAMS.

(a) STATE CHILD DEATH REVIEW TEAMS.—

Section 471 of the Social Security Act (42 U.S.C. 671) is amended by adding at the end the following:

"(c)(1) In order to investigate and prevent child death from fatal abuse and neglect, not later than 2 years after the date of the enactment of this subsection, a State, in order to be eligible for payments under this part, shall submit to the Secretary a certification that the State has established and is maintaining, in accordance with applicable confidentiality laws, a State child death review team, and if necessary in order to cover all counties in the State, child death review teams on the regional or local level, that shall review child deaths, including deaths in which—

"(A) there is a record of a prior report of child abuse or neglect or there is reason to

suspect that the child death was caused by, or related to, child abuse or neglect; or

"(B) the child who died was a ward of the State or was otherwise known to the State or local child welfare service agency.

"(2) A child death review team established in accordance with this subsection should have a membership that will present a range of viewpoints that are independent from any specific agency, and shall include representatives from, at a minimum, specific fields of expertise, such as law enforcement, health, mental health, and substance abuse, and from the community.

"(3) A State child death review team shall—

"(A) provide support to a regional or local child death review team;

"(B) make public an annual summary of case findings;

"(C) provide recommendations for system-wide improvements in services to investigate and prevent future fatal abuse and neglect; and

"(D) if the State child death review team covers all counties in the State on its own, carry out the duties of a regional or local child death review team described in paragraph (4).

"(4) A regional or local child death review team shall—

"(A) conduct individual case reviews;

"(B) recommend followup procedures for child death cases; and

"(C) suggest and assist with system improvements in services to investigate and prevent future fatal abuse and neglect."

(b) FEDERAL CHILD DEATH REVIEW TEAM.—Section 471 of the Social Security Act (42 U.S.C. 671), as amended by subsection (a), is amended by adding at the end the following:

"(d)(1) The Secretary shall establish a Federal child death review team that shall consist of at least the following:

"(A) Representatives of the following Federal agencies who have expertise in the prevention or treatment of child abuse and neglect:

"(i) Department of Health and Human Services.

"(ii) Department of Justice.

"(iii) Bureau of Indian Affairs.

"(iv) Department of Defense.

"(v) Bureau of the Census.

"(B) Representatives of national child-serving organizations who have expertise in the prevention or treatment of child abuse and neglect and that, at a minimum, represent the health, child welfare, social services, and law enforcement fields.

"(2) The Federal child death review team established under this subsection shall—

"(A) review reports of child deaths on military installations and other Federal lands, and coordinate with Indian tribal organizations in the review of child deaths on Indian reservations;

"(B) upon request, provide guidance and technical assistance to States and localities seeking to initiate or improve child death review teams and to prevent child fatalities; and

"(C) develop recommendations on related policy and procedural issues for Congress, relevant Federal agencies, and States and localities for the purpose of preventing child fatalities."

SEC. 104. STATES REQUIRED TO INITIATE OR JOIN PROCEEDINGS TO TERMINATE PARENTAL RIGHTS FOR CERTAIN CHILDREN IN FOSTER CARE.

(a) REQUIREMENT FOR PROCEEDINGS.—Section 475(5) of the Social Security Act (42 U.S.C. 675(5)) is amended—

(1) by striking "and" at the end of subparagraph (C);

(2) by striking the period at the end of subparagraph (D) and inserting "; and"; and

(3) by adding at the end the following:

"(E) in the case of a child who has been in foster care under the responsibility of the State for 12 of the most recent 18 months, or for a lifetime total of 24 months, or, if a court of competent jurisdiction has determined an infant to have been abandoned (as defined under State law), or made a determination that the parent has committed murder of another child of such parent, committed voluntary manslaughter of another child of such parent, aided or abetted, attempted, conspired, or solicited to commit such murder or voluntary manslaughter, or committed a felony assault that results in serious bodily injury to the surviving child or to another child of such parent, the State shall file a petition to terminate the parental rights of the child's parents (or, if such a petition has been filed by another party, seek to be joined as a party to the petition), and, concurrently, to identify, recruit, process, and approve a qualified family for an adoption, unless—

"(i) at the option of the State, the child is being cared for by a relative; or

"(ii) a State court or State agency has documented a compelling reason for determining that filing such a petition would not be in the best interests of the child."

(b) DETERMINATION OF BEGINNING OF FOSTER CARE.—Section 475(5) of the Social Security Act (42 U.S.C. 675(5)), as amended by subsection (a), is amended—

(1) by striking "and" at the end of subparagraph (D);

(2) by striking the period at the end of subparagraph (E) and inserting "; and"; and

(3) by adding at the end the following:

"(F) a child shall be considered to have entered foster care on the latter of—

"(i) the first time the child is removed from the home; or

"(ii) the date of the first judicial hearing on removal of the child from the home."

(c) ELIMINATION OF UNNECESSARY COURT DELAYS.—

(1) ONE-YEAR STATUTE OF LIMITATIONS FOR APPEALS OF ORDERS TERMINATING PARENTAL RIGHTS.—Section 471(a) of the Social Security Act (42 U.S.C. 671(a)), as amended by section 5591(b) of the Balanced Budget Act of 1997, is amended—

(A) by striking "and" at the end of paragraph (18);

(B) by striking the period at the end of paragraph (19) and inserting "; and"; and

(C) by adding at the end the following:

"(20) provides that an order terminating parental rights shall only be appealable during the 1-year period that begins on the date the order is issued."

(2) ONE-YEAR STATUTE OF LIMITATIONS FOR APPEALS OF ORDERS OF REMOVAL.—Section 471(a) of the Social Security Act (42 U.S.C. 671(a)), as amended by subsection (a), is amended—

(A) in paragraph (19), by striking "and" at the end;

(B) in paragraph (20), by striking the period and inserting "; and"; and

(C) by adding at the end the following:

"(21) provides that a court-ordered removal of a child shall only be appealable during the 1-year period that begins on the date the order is issued."

(d) RULE OF CONSTRUCTION.—Nothing in part E of title IV of the Social Security Act (42 U.S.C. 670 et seq.), as amended by this Act, shall be construed as precluding State courts or State agencies from initiating or finalizing the termination of parental rights for reasons other than, or for timelines earlier than, those specified in part E of title IV of such Act, when such actions are determined to be in the best interests of the child.

(e) EFFECTIVE DATES.—

(1) IN GENERAL.—Except as provided in paragraphs (2) and (3), the amendments made by this section shall apply to children entering foster care under the responsibility of the State after the date of enactment of this Act.

(2) TRANSITION RULE FOR CURRENT FOSTER CARE CHILDREN.—Subject to paragraph (3), with respect to any child in foster care under the responsibility of the State on or before the date of enactment of this Act, the amendments made by this section shall not apply to such child until the date that is 1 year after the date of enactment of this Act.

(3) DELAY PERMITTED IF STATE LEGISLATION REQUIRED.—The provisions of section 501(b) shall apply to the effective date of the amendments made by this section.

SEC. 105. NOTICE OF REVIEWS AND HEARINGS; OPPORTUNITY TO BE HEARD.

Section 475(5) of the Social Security Act (42 U.S.C. 675(5)), as amended by section 104(b), is amended—

(1) by striking "and" at the end of subparagraph (E);

(2) by striking the period at the end of subparagraph (F) and inserting "; and"; and

(3) by adding at the end the following:

"(G) the foster parents (if any) of a child and any relative providing care for the child are provided with notice of, and an opportunity to be heard in, any review or hearing to be held with respect to the child, except that this subparagraph shall not be construed to make any foster parent or relative a party to such a review or hearing solely on the basis of such notice and opportunity to be heard."

SEC. 106. USE OF THE FEDERAL PARENT LOCATOR SERVICE FOR CHILD WELFARE SERVICES.

Section 453 of the Social Security Act (42 U.S.C. 653), as amended by section 5534 of the Balanced Budget Act of 1997, is amended—

(1) in subsection (a)(2)—

(A) in the matter preceding subparagraph (A), by inserting "or making or enforcing child custody or visitation orders" after "obligations,"; and

(B) in subparagraph (A)—

(i) by striking "or" at the end of clause (ii);

(ii) by striking the comma at the end of clause (iii) and inserting "; or"; and

(iii) by inserting after clause (iii) the following:

"(iv) who has or may have parental rights with respect to a child,"; and

(2) in subsection (c)—

(A) by striking the period at the end of paragraph (3) and inserting "; and"; and

(B) by adding at the end the following:

"(4) a State agency that is administering a program operated under a State plan under subpart 1 of part B, or a State plan approved under subpart 2 of part B or under part E."

SEC. 107. CRIMINAL RECORDS CHECKS FOR PROSPECTIVE FOSTER AND ADOPTIVE PARENTS AND GROUP CARE STAFF.

Section 471(a) of the Social Security Act (42 U.S.C. 671(a)), as amended by section 104(c)(2), is amended—

(1) by striking "and" at the end of paragraph (20);

(2) by striking the period at the end of paragraph (21) and inserting "; and"; and

(3) by adding at the end the following:

"(22) provides procedures for criminal records checks and checks of a State's child abuse registry for any prospective foster parent or adoptive parent, and any employee of a residential child-care institution before the foster parent or adoptive parent, or the residential child-care institution may be finally approved for placement of a child on whose behalf foster care maintenance payments or adoption assistance payments are

to be made under the State plan under this part, including procedures requiring that—

"(A) in any case in which a criminal record check reveals a criminal conviction for child abuse or neglect, or spousal abuse, a criminal conviction for crimes against children, or a criminal conviction for a crime involving violence, including violent drug-related offenses, rape, sexual or other physical assault, battery, or homicide, approval shall not be granted, unless the individual provides substantial evidence to local law enforcement officials and the State child protection agency proving that there are extraordinary circumstances which demonstrate that approval should be granted; and

"(B) in any case in which a criminal record check reveals a criminal conviction for a felony or misdemeanor not involving violence, or a check of any State child abuse registry indicates that a substantiated report of abuse or neglect exists, final approval may be granted only after consideration of the nature of the offense or incident, the length of time that has elapsed since the commission of the offense or the occurrence of the incident, the individual's life experiences during the period since the commission of the offense or the occurrence of the incident, and any risk to the child."

SEC. 108. DEVELOPMENT OF STATE GUIDELINES TO ENSURE SAFE, QUALITY CARE TO CHILDREN IN OUT-OF-HOME PLACEMENTS.

Section 471(a)(10) of the Social Security Act (42 U.S.C. 671(a)(10)) is amended—

(1) by inserting "and guidelines" after "standards" each place it appears; and

(2) by inserting "ensuring quality services that protect the safety and health of children in foster care placements with non-profit and for-profit agencies," after "related to".

SEC. 109. DOCUMENTATION OF EFFORTS FOR ADOPTION OR LOCATION OF A PERMANENT HOME.

Section 475 of the Social Security Act (42 U.S.C. 675) is amended—

(1) in paragraph (1)—

(A) in the last sentence—

(i) by striking "the case plan must also include"; and

(ii) by redesignating such sentence as subparagraph (D) and indenting appropriately; and

(B) by adding at the end, the following:

"(E) in the case of a child with respect to whom the State's goal is adoption or placement in another permanent home, documentation of the steps taken by the agency to find an adoptive family or other permanent living arrangement for the child, to place the child with an adoptive family, legal guardian, or in another planned permanent living arrangement, and to finalize the adoption or legal guardianship. At a minimum, such documentation shall include child specific recruitment efforts such as the use of State, regional, and national adoption exchanges including electronic exchange systems,"; and

(2) in paragraph (5)(B), by inserting "(including the requirement specified in paragraph (1)(E))" after "case plan".

TITLE II—INCENTIVES FOR PROVIDING PERMANENT FAMILIES FOR CHILDREN

SEC. 201. ADOPTION INCENTIVE PAYMENTS.

Part E of title IV of the Social Security Act (42 U.S.C. 670-679) is amended by inserting after section 473 the following:

"SEC. 473A. ADOPTION INCENTIVE PAYMENTS.

"(a) GRANT AUTHORITY.—Subject to the availability of such amounts as may be provided in advance in appropriations Acts for this purpose, the Secretary may make a grant to each State that is an incentive-eligible State for a fiscal year in an amount

equal to the adoption incentive payment payable to the State for the fiscal year under this section, which shall be payable in the immediately succeeding fiscal year.

"(b) INCENTIVE-ELIGIBLE STATE.—A State is an incentive-eligible State for a fiscal year if—

"(1) the State has a plan approved under this part for the fiscal year;

"(2) the number of foster child adoptions in the State during the fiscal year exceeds the base number of foster child adoptions for the State for the fiscal year;

"(3) the State is in compliance with subsection (c) for the fiscal year; and

"(4) the fiscal year is any of fiscal years 1998 through 2002.

"(c) DATA REQUIREMENTS.—

"(1) IN GENERAL.—A State is in compliance with this subsection for a fiscal year if the State has provided to the Secretary the data described in paragraph (2) for fiscal year 1997 (or, if later, the fiscal year that precedes the first fiscal year for which the State seeks a grant under this section) and for each succeeding fiscal year.

"(2) DETERMINATION OF NUMBERS OF ADOPTIONS.—

"(A) DETERMINATIONS BASED ON AFCARS DATA.—Except as provided in subparagraph (B), the Secretary shall determine the numbers of foster child adoptions and of special needs adoptions in a State during each of fiscal years 1997 through 2002, for purposes of this section, on the basis of data meeting the requirements of the system established pursuant to section 479, as reported by the State in May of the fiscal year and in November of the succeeding fiscal year, and approved by the Secretary by April 1 of the succeeding fiscal year.

"(B) ALTERNATIVE DATA SOURCES PERMITTED FOR FISCAL YEAR 1997.—For purposes of the determination described in subparagraph (A) for fiscal year 1997, the Secretary may use data from a source or sources other than that specified in subparagraph (A) that the Secretary finds to be of equivalent completeness and reliability, as reported by a State by November 30, 1997, and approved by the Secretary by March 1, 1998.

"(3) NO WAIVER OF AFCARS REQUIREMENTS.—This section shall not be construed to alter or affect any requirement of section 479 or any regulation prescribed under such section with respect to reporting of data by States, or to waive any penalty for failure to comply with the requirements.

"(d) ADOPTION INCENTIVE PAYMENT.—

"(1) IN GENERAL.—Except as provided in paragraph (2), the adoption incentive payment payable to a State for a fiscal year under this section shall be equal to the sum of—

"(A) \$2,000, multiplied by amount (if any) by which the number of foster child adoptions in the State during the fiscal year exceeds the base number of foster child adoptions for the State for the fiscal year; and

"(B) \$2,000, multiplied by the amount (if any) by which the number of special needs adoptions in the State during the fiscal year exceeds the base number of special needs adoptions for the State for the fiscal year.

"(2) PRO RATA ADJUSTMENT IF INSUFFICIENT FUNDS AVAILABLE.—For any fiscal year, if the total amount of adoption incentive payments otherwise payable under this section for a fiscal year exceeds the amount appropriated for that fiscal year, the amount of the adoption incentive payment payable to each State under this section for the fiscal year shall be—

"(A) the amount of the adoption incentive payment that would otherwise be payable to the State under this section for the fiscal year; multiplied by

"(B) the percentage represented by the amount appropriated for that year, divided by the total amount of adoption incentive payments otherwise payable under this section for the fiscal year.

"(e) 2-YEAR AVAILABILITY OF INCENTIVE PAYMENTS.—Payments to a State under this section in a fiscal year shall remain available for use by the State through the end of the succeeding fiscal year.

"(f) LIMITATIONS ON USE OF INCENTIVE PAYMENTS.—A State shall not expend an amount paid to the State under this section except to provide to children or families any service (including post adoption services) that may be provided under part B or E. Amounts expended by a State in accordance with the preceding sentence shall be disregarded in determining State expenditures for purposes of Federal matching payments under section 474.

"(g) DEFINITIONS.—As used in this section:

"(1) FOSTER CHILD ADOPTION.—The term 'foster child adoption' means the final adoption of a child who, at the time of adoptive placement, was in foster care under the supervision of the State.

"(2) SPECIAL NEEDS ADOPTION.—The term 'special needs adoption' means the final adoption of a child for whom an adoption assistance agreement is in effect under section 473.

"(3) BASE NUMBER OF FOSTER CHILD ADOPTIONS.—The term 'base number of foster child adoptions for a State' means, with respect to a fiscal year, the largest number of foster child adoptions in the State in fiscal year 1997 (or, if later, the first fiscal year for which the State has furnished to the Secretary the data described in subsection (c)(2)) or in any succeeding fiscal year preceding the fiscal year.

"(4) BASE NUMBER OF SPECIAL NEEDS ADOPTIONS.—The term 'base number of special needs adoptions for a State' means, with respect to a fiscal year, the largest number of special needs adoptions in the State in fiscal year 1997 (or, if later, the first fiscal year for which the State has furnished to the Secretary the data described in subsection (c)(2)) or in any succeeding fiscal year preceding the fiscal year.

"(h) LIMITATIONS ON AUTHORIZATION OF APPROPRIATIONS.—

"(1) IN GENERAL.—For grants under this section, there are authorized to be appropriated to the Secretary \$15,000,000 for each of fiscal years 1999 through 2003.

"(2) AVAILABILITY.—Amounts appropriated under paragraph (1) are authorized to remain available until expended, but not after fiscal year 2003."

SEC. 302. PROMOTION OF ADOPTION OF CHILDREN WITH SPECIAL NEEDS.

(a) IN GENERAL.—Section 473(a) of the Social Security Act (42 U.S.C. 673(a)) is amended by striking paragraph (2) and inserting the following:

"(2)(A) For purposes of paragraph (1)(B)(ii), a child meets the requirements of this paragraph if such child—

"(i) prior to termination of parental rights and the initiation of adoption proceedings was in the care of a public or licensed private child care agency or Indian tribal organization either pursuant to a voluntary placement agreement (provided the child was in care for not more than 180 days) or as a result of a judicial determination to the effect that continuation in the home would be contrary to the safety and welfare of such child, or was residing in a foster family home or child care institution with the child's minor parent (either pursuant to such a voluntary placement agreement or as a result of such a judicial determination); and

"(ii) has been determined by the State pursuant to subsection (c) to be a child with spe-

cial needs, which needs shall be considered by the State, together with the circumstances of the adopting parents, in determining the amount of any payments to be made to the adopting parents.

"(B) Notwithstanding any other provision of law, and except as provided in paragraph (7), a child who is not a citizen or resident of the United States and who meets the requirements of subparagraph (A) and is otherwise determined to be eligible for the receipt of adoption assistance payments, shall be eligible for adoption assistance payments under this part.

"(C) A child who meets the requirements of subparagraph (A) and who is otherwise determined to be eligible for the receipt of adoption assistance payments shall continue to be eligible for such payments in the event that the child's adoptive parent dies or the child's adoption is dissolved, and the child is placed with another family for adoption."

(b) EXCEPTION.—Section 473(a) of the Social Security Act (42 U.S.C. 673(a)) is amended by adding at the end the following:

"(7)(A) Notwithstanding any other provision of this subsection, no payment may be made to parents with respect to any child that—

"(i) would be considered a child with special needs under subsection (c);

"(ii) is not a citizen or resident of the United States; and

"(iii) was adopted outside of the United States or was brought into the United States for the purpose of being adopted.

"(B) Subparagraph (A) shall not be construed as prohibiting payments under this part for a child described in subparagraph (A) that is placed in foster care subsequent to the failure, as determined by the State, of the initial adoption of such child by the parents described in such subparagraph."

(c) REQUIREMENT FOR USE OF STATE SAVINGS.—Section 473(a) of the Social Security Act (42 U.S.C. 673(a)), as amended by subsection (b), is amended by adding at the end the following:

"(8) A State shall spend an amount equal to the amount of savings (if any) in State expenditures under this part resulting from the application of paragraph (2) on and after the effective date of the amendment to such paragraph made by section 202(a) of the Promotion of Adoption, Safety, and Support for Abused and Neglected Children (PASS) Act to provide to children or families any service (including post-adoption services) that may be provided under this part or part B."

SEC. 303. TECHNICAL ASSISTANCE.

(a) IN GENERAL.—The Secretary of Health and Human Services may, directly or through grants or contracts, provide technical assistance to assist States and local communities to reach their targets for increased numbers of adoptions and, to the extent that adoption is not possible, alternative permanent placements, for children in foster care.

(b) LIMITATIONS.—The technical assistance provided under subsection (a) shall support the goal of encouraging more adoptions out of the foster care system, when adoptions promote the best interests of children, and shall include the following:

(1) The development of best practice guidelines for expediting termination of parental rights.

(2) Models to encourage the use of concurrent planning.

(3) The development of specialized units and expertise in moving children toward adoption as a permanency goal.

(4) The development of risk assessment tools to facilitate early identification of the children who will be at risk of harm if returned home.

(5) Models to encourage the fast tracking of children who have not attained 1 year of age into adoptive and pre-adoptive placements.

(6) Development of programs that place children in pre-adoptive families without waiting for termination of parental rights.

(7) Development of programs to recruit adoptive parents.

SEC. 204. ADoptions ACROSS STATE AND COUNTY JURISDICTIONS.

(a) ELIMINATION OF GEOGRAPHIC BARRIERS TO INTERSTATE ADOPTION.—Section 471(a) of the Social Security Act (42 U.S.C. 671(a)), as amended by section 106, is amended—

(1) by striking "and" at the end of paragraph (21);

(2) by striking the period at the end of paragraph (22) and inserting "; and"; and

(3) by adding at the end the following:

"(23) provides that neither the State nor any other entity in the State that receives funds from the Federal Government and is involved in adoption or foster care placements may—

"(A) deny to any person the opportunity to become an applicant for custody of a child, licensure as a foster or adoptive parent, or for foster care maintenance payments or adoption assistance payments under this part on the basis of the geographic residence of the person or of the child involved; or

"(B) delay or deny the placement of a child for adoption, into foster care, or in the child's original home on the basis of the geographic residence of an adoptive or foster parent or of the child involved."

(b) STUDY OF INTERJURISDICTIONAL ADOPTION ISSUES.—

(1) IN GENERAL.—The Secretary of Health and Human Services (in this subsection referred to as the "Secretary") shall appoint an advisory panel that shall—

(A) study and consider how to improve procedures and policies to facilitate the timely and permanent adoptions of children across State and county jurisdictions;

(B) examine, at a minimum, interjurisdictional adoption issues—

(i) concerning the recruitment of prospective adoptive families from other States and counties;

(ii) concerning the procedures to grant reciprocity to prospective adoptive family home studies from other States and counties;

(iii) arising from a review of the comity and full faith and credit provided to adoption decrees and termination of parental rights orders from other States; and

(iv) concerning the procedures related to the administration and implementation of the Interstate Compact on the Placement of Children; and

(C) not later than 12 months after the final appointment to the advisory panel, submit to the Secretary the report described in paragraph (3).

(2) COMPOSITION OF ADVISORY PANEL.—In establishing the advisory panel required under paragraph (1), the Secretary shall appoint members from the general public who are individuals knowledgeable on adoption and foster care issues, and with due consideration to representation of ethnic or racial minorities and diverse geographic areas, and who, at a minimum, include the following:

(A) Adoptive and foster parents.

(B) Public and private child welfare agencies that place children in and out of home care.

(C) Family court judges.

(D) Adoption attorneys.

(E) An Administrator of the Interstate Compact on the Placement of Children and an Administrator of the Interstate Compact on Adoption and Medical Assistance.

(F) A representative cross-section of individuals from other organizations and individ-

uals with expertise or advocacy experience in adoption and foster care issues.

(3) CONTENTS OF REPORT.—The report required under paragraph (1)(C) shall include the results of the study conducted under subparagraphs (A) and (B) of paragraph (1) and recommendations on how to improve procedures to facilitate the interjurisdictional adoption of children, including interstate and intercounty adoptions, so that children will be assured timely and permanent placements.

(4) CONGRESS.—The Secretary shall submit a copy of the report required under paragraph (1)(C) to the appropriate committees of Congress, and, if relevant, make recommendations for proposed legislation.

SEC. 205. FACILITATION OF VOLUNTARY MUTUAL REUNIONS BETWEEN ADOPTED ADULTS AND BIRTH PARENTS AND SIBLINGS.

The Secretary of Health and Human Services, at no net expense to the Federal Government, may use the facilities of the Department of Health and Human Services to facilitate the voluntary, mutually requested reunion of an adult adopted child who is 21 years of age or older with—

(1) any birth parent of the adult child; or

(2) any adult adopted sibling who is 21 years of age or older, of the adult child,

if all such persons involved in any such reunion have, on their own initiative, expressed a desire for a reunion and agree to keep confidential the name and location of the other birth parent of the adult adopted child and any other adult adopted sibling of the adult adopted child.

SEC. 206. ANNUAL REPORT ON STATE PERFORMANCE IN PROTECTING CHILDREN.

(a) IN GENERAL.—Part E of title IV of the Social Security Act (42 U.S.C. 670 et seq.) is amended by adding at the end the following:

"SEC. 479A. ANNUAL REPORT.

"(a) IN GENERAL.—The Secretary shall issue an annual report containing ratings of the performance of each State in protecting children who are placed in foster care, for adoption, or with a relative or guardian. The report shall include ratings on outcome measures for categories related to safety and permanence for children:

"(b) OUTCOME MEASURES.—

"(1) IN GENERAL.—The Secretary shall develop a set of outcome measures to be used in preparing the report.

"(2) CATEGORIES.—In developing the outcome measures, the Secretary shall develop measures that can track performance over time for the following categories:

"(A) The number of children placed annually for adoption, the number of placements of children with special needs, and the number of children placed permanently in a foster family home, with a relative, or with a guardian who is not a relative.

"(B) The number of children, including those with parental rights terminated, that annually leave foster care at the age of majority without having been adopted or placed with a guardian.

"(C) The median and mean length of stay of children in foster care, for children with parental rights terminated, and children for whom parental rights are retained by the biological or adoptive parent.

"(D) The median and mean length of time between a child having a plan of adoption and termination of parental rights, between the availability of a child for adoption and the placement of the child in an adoptive family, and between the placement of the child in such a family and the finalization of the adoption.

"(E) The number of deaths of children in foster care and other out-of-home care, including kinship care, resulting from substantiated child abuse and neglect.

"(F) The specific steps taken by the State to facilitate permanence for children.

"(3) MEASURES.—In developing the outcome measures, the Secretary shall use data from the Adoption and Foster Care Analysis and Reporting System established under section 479 to the maximum extent possible.

"(c) RATING SYSTEM.—The Secretary shall develop a system (including using State census data and poverty rates) to rate the performance of each State based on the outcome measures.

"(d) INFORMATION.—In order to receive funds under this part, a State shall annually provide to the Secretary such adoption, foster care, and guardianship information as the Secretary may determine to be necessary to issue the report for the State.

"(e) PREPARATION AND ISSUANCE.—On October 1, 1998, and annually thereafter, the Secretary shall prepare, submit to Congress, and issue to the States the report described in subsection (a). Each report shall rate the performance of a State on each outcome measure developed under subsection (b), include an explanation of the rating system developed under subsection (c) and the way in which scores are determined under the rating system, analyze high and low performances for the State, and make recommendations to the State for improvement."

(b) CONFORMING AMENDMENTS.—Section 471(a) of the Social Security Act (42 U.S.C. 671(a)), as amended by section 204(a), is amended—

(1) in paragraph (22), by striking "and" at the end;

(2) in paragraph (23), by striking the period and inserting "; and"; and

(3) by adding at the end the following:

"(24) provides that the State shall annually provide to the Secretary the information required under section 479A."

TITLE III—ADDITIONAL IMPROVEMENTS AND REFORMS

SEC. 301. EXPANSION OF CHILD WELFARE DEMONSTRATION PROJECTS.

Section 1130(a) of the Social Security Act (42 U.S.C. 1320a-9(a)) is amended by striking "10" and inserting "15".

SEC. 302. PERMANENCY PLANNING HEARINGS.

Section 475(5)(C) of the Social Security Act (42 U.S.C. 675(5)(C)) is amended—

(1) by striking "dispositional" and inserting "permanency planning";

(2) by striking "no later than" and all that follows through "12 months" and inserting "not later than 12 months after the original placement (and not less frequently than every 6 months"; and

(3) by striking "future status of" and all that follows through "long term basis)" and inserting "permanency plans for the child (including whether and, if applicable, when, the child will be returned to the parent, referred for termination of parental rights, placed for adoption, or referred for legal guardianship, or other planned permanent living arrangement)".

SEC. 303. KINSHIP CARE.

(a) REPORT.—

(1) IN GENERAL.—The Secretary of Health and Human Services shall—

(A) not later than March 1, 1998, convene the advisory panel provided for in subsection (b)(1) and prepare and submit to the advisory panel an initial report on the extent to which children in foster care are placed in the care of a relative (in this section referred to as "kinship care"); and

(B) not later than November 1, 1998, submit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a final report on the matter described in subparagraph (A), which shall—

(i) be based on the comments submitted by the advisory panel pursuant to subsection

(b)(2) and other information and considerations; and

(ii) include the policy recommendations of the Secretary with respect to the matter.

(2) REQUIRED CONTENTS.—Each report required by paragraph (1) shall—

(A) include, to the extent available for each State, information on—

(i) the policy of the State regarding kinship care;

(ii) the characteristics of the kinship care providers (including age, income, ethnicity, and race);

(iii) the characteristics of the household of such providers (such as number of other persons in the household and family composition);

(iv) how much access to the child is afforded to the parent from whom the child has been removed;

(v) the cost of, and source of funds for, kinship care (including any subsidies such as Medicaid and cash assistance);

(vi) the goal for a permanent living arrangement for the child and the actions being taken by the State to achieve the goal;

(vii) the services being provided to the parent from whom the child has been removed; and

(viii) the services being provided to the kinship care provider; and

(B) specifically note the circumstances or conditions under which children enter kinship care.

(b) ADVISORY PANEL REVIEW.—

(1) IN GENERAL.—The advisory board on child abuse and neglect established under section 102 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5102), or, if on the date of enactment of this Act such advisory board does not exist, the advisory panel authorized under paragraph (2), shall review the report prepared pursuant to subsection (a) and submit to the Secretary comments on the report not later than July 1, 1998.

(2) AUTHORIZATION FOR APPOINTMENTS.—Subject to paragraph (1), the Secretary of Health and Human Services, in consultation with the Chairman of the Committee on Ways and Means of the House of Representatives and the Chairman of the Committee on Finance of the Senate, may appoint an advisory board for the purpose of reviewing and commenting on the report prepared pursuant to subsection (a). Such advisory board shall include parents, foster parents, former foster children, State and local public officials responsible for administering child welfare programs, private persons involved in the delivery of child welfare services, representatives of tribal governments and tribal courts, judges, and academic experts.

SEC. 304. STANDBY GUARDIANSHIP.

It is the sense of Congress that the States should have in effect laws and procedures that permit any parent who is chronically ill or near death, without surrendering parental rights, to designate a standby guardian for the parent's minor children, whose authority would take effect upon—

- (1) the death of the parent;
- (2) the mental incapacity of the parent; or
- (3) the physical debilitation and consent of the parent.

SEC. 305. CLARIFICATION OF ELIGIBLE POPULATION FOR INDEPENDENT LIVING SERVICES.

Section 477(a)(2)(A) of the Social Security Act (42 U.S.C. 677(a)(2)(A)) is amended by inserting "(including children with respect to whom such payments are no longer being made because the child has accumulated assets, not to exceed \$5,000, which are otherwise regarded as resources for purposes of determining eligibility for benefits under this part)" before the comma.

SEC. 306. COORDINATION AND COLLABORATION OF SUBSTANCE ABUSE TREATMENT AND CHILD PROTECTION SERVICES.

(a) STUDY AND REPORT ON SOURCES OF SUPPORT FOR SUBSTANCE ABUSE PREVENTION AND TREATMENT FOR PARENTS AND CHILDREN AND COLLABORATION AMONG STATE AGENCIES.—

(1) STUDY.—Not later than 12 months after the date of the enactment of this Act, the Comptroller General of the United States shall—

(A) prepare an inventory of all Federal and State programs that may provide funds for substance abuse prevention and treatment services for families receiving services directly or through grants or contracts from public child welfare agencies; and

(B) examine—

(i) the availability and results of joint prevention and treatment activities conducted by State substance abuse prevention and treatment agencies and State child welfare agencies; and

(ii) how such agencies (jointly or separately) are responding to and addressing the needs of infants who are exposed to substance abuse.

(2) REPORT TO CONGRESS.—Not later than 18 months after the date of enactment of this Act, the Comptroller General of the United States shall submit to the appropriate committees of Congress a report on the study conducted under paragraph (1). Such report shall include—

(A) a description of the extent to which clients of child welfare agencies have substance abuse treatment needs, the nature of those needs, and the extent to which those needs are being met;

(B) a description of the barriers that prevent the substance abuse treatment needs of clients of child welfare agencies from being treated appropriately;

(C) a description of the collaborative activities of State child welfare and substance abuse prevention and treatment agencies to jointly assess clients' needs, fund substance abuse prevention and treatment, train and consult with staff, and evaluate the effectiveness of programs serving clients in both agencies' caseloads;

(D) a summary of the available data on the treatment and cost-effectiveness of substance abuse treatment services for clients of child welfare agencies; and

(E) recommendations, including recommendations for Federal legislation, for addressing the needs and barriers, as described in subparagraphs (A) and (B), and for promoting further collaboration of the State child welfare and substance abuse prevention and treatment agencies in meeting the substance abuse treatment needs of families.

(b) PRIORITY IN PROVIDING SUBSTANCE ABUSE TREATMENT.—Section 1927 of the Public Health Service Act (42 U.S.C. 300x-27) is amended—

(1) in the heading, by inserting "AND CARETAKER PARENTS" after "WOMEN"; and

(2) in subsection (a)—

(A) in paragraph (1)—

(i) by inserting "all caretaker parents who are referred for treatment by the State or local child welfare agency and who" after "referred for and"; and

(ii) by striking "is given" and inserting "are given"; and

(B) in paragraph (2)—

(i) by striking "such women" and inserting "such pregnant women and caretaker parents"; and

(ii) by striking "the women" and inserting "the pregnant women and caretaker parents".

(c) FOSTER CARE PAYMENTS FOR CHILDREN WITH PARENTS IN RESIDENTIAL FACILITIES.—

Section 472(b) of the Social Security Act (42 U.S.C. 672(b)) is amended—

(1) in paragraph (1), by striking "or" at the end;

(2) in paragraph (2), by striking the period and inserting "or"; and

(3) by adding at the end the following:

"(3) placed with the child's parent in a residential program that provides treatment and other necessary services for parents and children, including parenting services, when—

"(A) the parent is attempting to overcome—

"(i) a substance abuse problem and is complying with an approved treatment plan;

"(ii) being a victim of domestic violence;

"(iii) homelessness;

"(iv) special needs resulting from being a teenage parent; or

"(v) post-partum depression;

"(B) the safety of the child can be assured;

"(C) the range of services provided by the program is designed to appropriately address the needs of the parent and child;

"(D) the goal of the case plan for the child is to try to reunify the child with the family within a specified period of time;

"(E) the parent described in subparagraph (A)(i) has not previously been treated in a residential program serving parents and their children together; and

"(F) the amount of foster care maintenance payments made to the residential program on behalf of such child do not exceed the amount of such payments that would otherwise be made on behalf of the child."

SEC. 307. REAUTHORIZATION AND EXPANSION OF FAMILY PRESERVATION AND SUPPORT SERVICES.

(a) REAUTHORIZATION OF FAMILY PRESERVATION AND SUPPORT SERVICES.—

(1) IN GENERAL.—Section 430(b) of the Social Security Act (42 U.S.C. 629(b)) is amended—

(A) in paragraph (4), by striking "or" at the end;

(B) in paragraph (5), by striking the period and inserting a semicolon; and

(C) by adding at the end the following:

"(6) for fiscal year 1999, \$275,000,000;

"(7) for fiscal year 2000, \$295,000,000;

"(8) for fiscal year 2001, \$315,000,000;

"(9) for fiscal year 2002, \$335,000,000; and

"(10) for fiscal year 2003, \$355,000,000."

(2) CONFORMING AMENDMENT.—Section 430(d)(1) of the Social Security Act (42 U.S.C. 630(d)(1)) is amended by striking "and 1998" and inserting "1998, 1999, 2000, 2001, 2002, and 2003".

(b) EXPANSION FOR TIME-LIMITED FAMILY REUNIFICATION SERVICES.—

(1) ADDITION TO STATE PLAN; MINIMUM SPENDING REQUIREMENT.—Section 432 of the Social Security Act (42 U.S.C. 629b) is amended—

(A) in subsection (a)—

(i) in paragraph (4), by striking "and community-based family support services with significant portions" and inserting "community-based family support services, and time-limited family reunification services, with not less than 25 percent"; and

(ii) in paragraph (5)(A), by striking "and community-based family support services" and inserting "community-based family support services, and time-limited family reunification services"; and

(B) in subsection (b)(1), by striking "and family support" and inserting "family support, and family reunification services".

(2) DEFINITION OF TIME-LIMITED FAMILY REUNIFICATION SERVICES.—Section 431(a) of the Social Security Act (42 U.S.C. 631(a)) is amended—

(A) by redesignating paragraphs (5) and (6) as paragraphs (6) and (7), respectively; and

(B) by inserting after paragraph (4) the following:

"(5) TIME-LIMITED FAMILY REUNIFICATION SERVICES.—

"(A) IN GENERAL.—The term 'time-limited family reunification services' means the services and activities described in subparagraph (B) that are provided to a child that is removed from the child's home and placed in a foster family home or a child care institution and to the parents or primary caregiver of such a child, in order to facilitate the reunification of the child safely and appropriately within a timely fashion, but only during the 1-year period that begins on the date that the child is removed from the child's home.

"(B) SERVICES AND ACTIVITIES DESCRIBED.—The services and activities described in this subparagraph are the following:

"(i) Individual, group, and family counseling.

"(ii) Inpatient, residential, or outpatient substance abuse treatment services.

"(iii) Mental health services.

"(iv) Assistance to address domestic violence.

"(v) Transportation to or from any of the services and activities described in this subparagraph."

(3) ADDITIONAL CONFORMING AMENDMENTS.—

(A) PURPOSES.—Section 430(a) of the Social Security Act (42 U.S.C. 629(a)) is amended by striking "and community-based family support services" and inserting "community-based family support services, and time-limited family reunification services".

(B) EVALUATIONS.—Subparagraphs (B) and (C) of section 435(a)(2) of the Social Security Act (42 U.S.C. 629d(a)(2)) are each amended by striking "and family support" each place it appears and inserting "family support, and family reunification".

SEC. 308. INNOVATION GRANTS TO REDUCE BACKLOGS OF CHILDREN AWAITING ADOPTION AND FOR OTHER PURPOSES.

Part E of title IV of the Social Security Act (42 U.S.C. 670 et seq.) is amended by inserting after section 477, the following:

"SEC. 478. INNOVATION GRANTS.

"(a) AUTHORITY TO MAKE GRANTS.—The Secretary may make grants, in amounts determined by the Secretary, to States with approved applications described in subsection (c), for the purpose of carrying out the innovation projects described in subsection (b).

"(b) INNOVATION PROJECTS DESCRIBED.—The innovation projects described in this subsection are projects that are designed to achieve 1 or more of the following goals:

"(1) Reducing a backlog of children in long-term foster care or awaiting adoption placement.

"(2) Ensuring, not later than 1 year after a child enters foster care, a permanent placement for the child.

"(3) Identifying and addressing barriers that result in delays to permanent placements for children in foster care, including inadequate representation of child welfare agencies in termination of parental rights and adoption proceedings, and other barriers to termination of parental rights.

"(4) Implementing or expanding community-based permanency initiatives, particularly in communities where families reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed.

"(5) Developing and implementing community-based child protection activities that involve partnerships among State and local governments, multiple child-serving agencies, the schools, and community leaders in an attempt to keep children free from abuse and neglect.

"(6) Establishing new partnerships with businesses and religious organizations to promote safety and permanence for children.

"(7) Assisting in the development and implementation of the State guidelines described in section 471(a)(10).

"(8) Developing new staffing approaches to allow the resources of several States to be used to conduct recruitment, placement, adoption, and post-adoption services on a regional basis.

"(9) Any other goal that the Secretary specifies by regulation.

"(c) APPLICATION.—An application for a grant under this section may be submitted for fiscal year 1998 or 1999 and shall contain—

"(1) a plan, in such form and manner as the Secretary may prescribe, for an innovation project described in subsection (b) that will be implemented by the State for a period of not more than 5 consecutive fiscal years, beginning with fiscal year 1998 or 1999, as applicable;

"(2) an assurance that no waivers from provisions in law, as in effect at the time of the submission of the application, are required to implement the innovation project; and

"(3) such other information as the Secretary may require by regulation.

"(d) DURATION.—An innovation project approved under this section shall be conducted for not more than 5 consecutive fiscal years, except that the Secretary may terminate a project before the end of the period originally approved if the Secretary determines that the State conducting the project is not in compliance with the terms of the plan and application approved by the Secretary under this section.

"(e) MATCHING REQUIREMENT.—A State shall not receive a grant under this section unless, for each year for which a grant is awarded, the State agrees to match the grant with \$1 for every \$3 received.

"(f) NONSUPPLANTING.—Any funds received by a State under a grant made under this section shall supplement but not replace any other funds that may be available for the same purpose in the localities involved.

"(g) EVALUATIONS AND REPORTS.—

"(1) STATE EVALUATIONS.—Each State administering an innovation project under this section shall—

"(A) provide for ongoing and retrospective evaluation of the project, meeting such conditions and standards as the Secretary may require; and

"(B) submit to the Secretary such reports, at such times, in such format, and containing such information as the Secretary may require.

"(2) REPORTS TO CONGRESS.—The Secretary shall, on the basis of reports received from States administering projects under this section, submit interim reports, and, not later than 6 months after the conclusion of all projects administered under this section, a final report to Congress. A report submitted under this subparagraph shall contain an assessment of the effectiveness of the State projects administered under this section and any recommendations for legislative action that the Secretary considers appropriate.

"(h) REGULATIONS.—Not later than 60 days after the date of enactment of this section, the Secretary shall promulgate final regulations for implementing this section.

"(i) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to make grants under this section not more than \$50,000,000 for each of fiscal years 1998 through 2003."

TITLE IV—MISCELLANEOUS

SEC. 401. PRESERVATION OF REASONABLE PARENTING.

Nothing in this Act is intended to disrupt the family unnecessarily or to intrude inap-

propriately into family life, to prohibit the use of reasonable methods of parental discipline, or to prescribe a particular method of parenting.

SEC. 402. REPORTING REQUIREMENTS.

Any information required to be reported under this Act shall be supplied to the Secretary of Health and Human Services through data meeting the requirements of the Adoption and Foster Care Analysis and Reporting System established pursuant to section 479 of the Social Security Act (42 U.S.C. 679), to the extent such data is available under that system. The Secretary shall make such modifications to regulations issued under section 479 of such Act with respect to the Adoption and Foster Care Analysis and Reporting System as may be necessary to allow States to obtain data that meets the requirements of such system in order to satisfy the reporting requirements of this Act.

SEC. 403. REPORT ON FIDUCIARY OBLIGATIONS OF STATE AGENCIES RECEIVING SSI PAYMENTS.

Not later than 12 months after the date of enactment of this Act, the Commissioner of Social Security shall submit a report to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate concerning State or local child welfare service agencies that act as representative payees on behalf of children under the care of such agencies for purposes of receiving supplemental security income payments under title XVI of the Social Security Act (42 U.S.C. 1381 et seq.) (including supplementary payments pursuant to an agreement for Federal administration under section 1616(a) of the Social Security Act and payments pursuant to an agreement entered into under section 212(b) of Public Law 93-66) for the benefit of such children. Such report shall include an examination of the extent to which such agencies—

(1) have complied with the fiduciary responsibilities attendant to acting as a representative payee under title XVI of such Act; and

(2) have received supplemental security income payments on behalf of children that the agencies cannot identify or locate, and if so, the disposition of such payments.

SEC. 404. ALLOCATION OF ADMINISTRATIVE COSTS OF DETERMINING ELIGIBILITY FOR MEDICAID AND TANF.

(a) MEDICAID.—Section 1903 of the Social Security Act (42 U.S.C. 1396b) is amended—

(1) in subsection (a)(7), by striking "section 1919(g)(3)(B)" and inserting "subsection (x) and section 1919(g)(3)(C)"; and

(2) by adding at the end the following:

"(x)(1) Notwithstanding any other provision of law, for purposes of determining the amount to be paid to a State under subsection (a)(7) for quarters in any fiscal year, beginning with fiscal year 1997, amounts expended for the proper and efficient administration of the State plan under this title (including under any waiver of such plan) shall not include common costs related to determining the eligibility under such State plan (or waiver) of individuals in a household applying for or receiving benefits under the State program under part A of title IV unless the State elects the option described in paragraph (2).

"(2) A State that meets the requirements of paragraph (3) may elect to allocate equally between the State program under part A of title IV and the State plan under this title (including any waiver of such plan) the administrative costs associated with such programs that are incurred in serving households and individuals eligible or applying for benefits under the State program under part A of title IV and under the State plan (or under a waiver of such plan) under this title.

"(3) A State meets the requirements of this paragraph if the Secretary determines that—

"(A) the State conforms the eligibility rules and procedures of, and integrates the administration of the eligibility procedures of, the State program funded under part A of title IV and the State plan under this title (including any waiver of such plan); and

"(B) the State uses the same application form for assistance described in section 1931(e)."

(b) TANS.

(1) IN GENERAL.—Section 408(a) of the Social Security Act (42 U.S.C. 608(a)) is amended by adding at the end the following:

"(12) DESIGNATION OF GRANTS UNDER THIS PART IN ALLOCATING ADMINISTRATIVE COSTS.—Subject to section 1903(x), a State to which a grant is made under section 403 shall designate the program funded under this part as the primary program for the purpose of allocating common administrative costs incurred in serving households eligible or applying for benefits under such program and any other Federal means-tested public benefit program administered by the State."

(2) EFFECTIVE DATE.—The amendment made by paragraph (1) to section 408 of the Social Security Act (42 U.S.C. 608) shall take effect as if included in the enactment of section 103(a) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104-193; 110 Stat. 2112).

TITLE V—EFFECTIVE DATE

SEC. 501. EFFECTIVE DATE.

(a) IN GENERAL.—Except as otherwise provided in this Act, the amendments made by this Act shall take effect on October 1, 1997.

(b) DELAY PERMITTED IF STATE LEGISLATION REQUIRED.—In the case of a State plan under part B or E of title IV of the Social Security Act which the Secretary of Health and Human Services determines requires State legislation (other than legislation appropriating funds) in order for the plan to meet the additional requirements imposed by the amendments made by this Act, the State plan shall not be regarded as failing to comply with the requirements of such part solely on the basis of the failure of the plan to meet such additional requirements before the first day of the first calendar quarter beginning after the close of the first regular session of the State legislature that begins after the date of the enactment of this Act. For purposes of the previous sentence, in the case of a State that has a 2-year legislative session, each year of such session shall be deemed to be a separate regular session of the State legislature.

Mr. CRAIG. Mr. President, I am pleased to join my distinguished colleagues in introducing PASS, the Promotion of Adoption, Safety and Support for Abused and Neglected Children Act.

Foster care was never intended to be anything more than a temporary refuge for children from troubled families. Yet all too often, "temporary" becomes "permanent," and decisions made for children in the system are driven by considerations other than the child's own well-being. Tragically, it's the children who ultimately pay for the flaws in the system—sometimes with their very lives.

The problem does not lie with the vast majority of foster parents, relatives, and caseworkers who work valiantly to provide the care needed by these children. Rather, the problem is the system itself, and incentives built into it, that frustrate the goal of mov-

ing children to permanent, safe, loving homes.

PASS will fundamentally shift the foster care paradigm, without destroying what is good and necessary in the system. For the first time, a child's health and safety will have to be the paramount concerns in any decisions made by the State. For the first time, efforts to find an adoptive or other permanent home will not only be required but documented and rewarded. For the first time, steps will have to be taken to free a child for adoption or other permanent placement if the child has been languishing in foster care for a year or more.

These are only some of the many critical reforms in Pass, designed to promote adoption, ensure the safety of abused and neglected children, accelerate permanent placement, and fix flaws in the system. The package, taken as a whole, will make an enormous difference in the lives of thousands of children.

This comprehensive bill is the product of extensive discussion and negotiation among Senators representing a veritable universe of viewpoints on adoption and foster care reform. Although we may have come to the table from different perspectives, we agreed on a fundamental principle: that reforms are needed to ensure that a child's health, safety and permanency are paramount concerns of the foster care system. In the end, on behalf of the children, we came together and resolved our differences. PASS is the result, and I commend it to all our colleagues.

Change is needed now; every day of delay is an eternity to a child unfairly bearing the burdens of the current system. I hope every Senator will take a careful look at PASS, and work with us to achieve true reforms in this area.

Mr. ROCKEFELLER. Mr. President, abused and neglected children are among the most vulnerable and poorly protected members of American society. Too many of these children are left to wander aimlessly through the foster care system—a system which, from the outset, was never designed or intended to be a permanent home. We can no longer continue to sentence these foster children to endless waits—a legal limbo in which they no longer feel welcome in their biological families but are unable to be adopted into new and loving homes. Despite the thousands of dedicated foster parents and child welfare workers who strive daily to effectively address the many needs of abused and neglected children in an overloaded system, we know that nothing can replace a permanent and loving home made by adults who can be counted on without condition or limitation.

Acknowledging our collective obligation to allow no child to fall between the cracks, I am proud to join together with Senator JOHN CHAFEE and my other colleagues in a truly extraordinary bipartisan effort to introduce

the Promotion of Adoption Safety and Support for Abused and Neglected Children Act [PASS]. Under Senator CHAFEE's committed leadership on children's issues, this bipartisan group has worked extremely hard to forge an effective compromise—a compromise which offers concrete, practical strategies to provide permanency in lives of foster children and to ensure that health and safety are built into every level of America's abuse and neglect system. Central to this entire effort was also Senator LARRY CRAIG, who brought focus and determination to the sometimes difficult bipartisan negotiations. I would like to take this opportunity to extend my most sincere thanks to my other colleagues, Senators JEFFORDS, DEWINE, COATS, BOND, LANDRIEU, and LEVIN for making possible this outstanding example of bipartisan teamwork.

The Promotion of Adoption Safety and Support for Abused and Neglected Children Act will fundamentally shift the focus of the foster care system by insisting that a child's health, safety, and opportunity to find a permanent home should be the paramount concern when a State makes any decision concerning the well-being of abused and neglected children. As a comprehensive package based on bipartisan consensus, PASS will accelerate and improve the response to these concerns, promote safe adoptions, and restore safety and permanency to the lives of abused and neglected children.

The main objective of this bill is to move abused and neglected children into adoptive or other permanent homes and to do so more quickly and more safely than ever before. Right now, many foster care children are forced to wait years before being adopted—even in cases where loving families are ready and willing to adopt them. Some children lose their chance for adoption altogether. While PASS preserves the requirement to reunify families where appropriate, it does not require States to use reasonable efforts to reunify families that have been irreparably broken by abandonment, torture, physical abuse, sexual abuse, murder, manslaughter, and sexual assault. The PASS Act maintains the delicate balance in protecting the rights of parents and families while placing primary focus where it should be: on the health and safety of child.

PASS encourages adoptions by rewarding States financial incentives for facilitating adoption for all foster children—especially those with special needs which, sadly, make them more difficult to place. For those situations where children cannot go home again, PASS requires States to use reasonable efforts to place them into safe adoptive homes or into the permanent care of loving relatives. In addition, PASS cuts by one-third the time that an abused and neglected child must wait in order to be placed in such adoptive homes. In response to a candid and focused look at today's foster care crisis,

the bill also seeks to rescue children from the legal limbo of the current system by requiring States to take the necessary legal steps to free for adoption those children who have been forced to linger in the system for a year or more. PASS also prevents further abuse of children in the foster care system by requiring criminal records checks for all foster and adoptive parents. PASS is about helping the individual child but, equally as importantly, fixing the system.

It is always the right time to focus on the needs of children—especially those unfortunate enough to find themselves in the sometimes dysfunctional labyrinth of the abuse and neglect system. Unfortunately, however, reform has never been more necessary. President Clinton's "Adoption 2002 Report" found that there are currently half a million children in temporary foster care placements. One hundred thousand of those children should be adopted, but less than half of that number are legally eligible to become part of an adoptive family. In my home State of West Virginia alone, referrals to Child Protective Services are expected to rise to an all-time high of 17,000 this year. Foster care placements have jumped from 2,900 children in January 1996 to 3,113 children in January 1997. These staggering figures reveal a foster care crisis of unprecedented proportions.

PASS is the first step in a vital, ongoing effort to put children at the very top of our national agenda. It is time that we provide all children with their most profound wish: to live in a safe and loving home with caretakers who treat them with respect and dignity. If we are unable to address this most fundamental need, these children will not be able to grow, learn, and provide a secure place for their own families. It is unthinkable to deny abused and neglected children such vital opportunities.

Mr. BOND. Mr. President, there may not be many things in life on which there is a consensus but I think we all can agree on the vital importance of ensuring the safety of abused and neglected children and moving them out of the foster care system more rapidly and into permanent homes. I am proud to join with my colleagues in this bipartisan effort to develop the new, consensus legislation called the Promotion of Adoption, Safety, and Support for Abused and Neglected Children [PASS] Act.

The reality is that all too often children simply languish in the foster care system. Nationwide, there are more than 500,000 children in foster care. In Missouri, there are 10,361 children in the foster care system. Since 1975, the number of reported incidents of abuse and neglect has increased from less than 10,000 to 52,964 in 1995, an all-time high and frightening statistic.

Federal law has hindered State child welfare agencies from moving more quickly to place children who are in

foster care because of abuse and neglect into permanent homes.

The PASS Act will provide incentives to increase adoptions and reduce by one third the amount of time a child lingers in foster care waiting for a permanency plan, with a review required every six months so that foster care is truly viewed as a temporary care system for our most vulnerable children.

The bill clarifies "reasonable efforts" and establishes a federal standard so that the health and safety of the child is the primary concern, above family reunification interest. There are some parents for whom reunification with their children is not reasonable—certainly sustained abuse or neglect or danger of physical harm would fit that category. In those cases, we need to move swiftly to get the children out of harm's way and then quickly to get them into permanent homes.

Just count the number of cases of child abuse and neglect that has been reported over the past few months. One too many! A little, five-year old Kansas City girl named Angel Hart was beaten and drowned to death by her mother's boyfriend because she could not recite the alphabet.

Under the PASS Act, States are encouraged to enact laws that would make it easier to terminate parental rights in abusive cases and prevent abused and neglected children from returning to homes in which their health and safety are at risk. In addition, this legislation promotes adoption of all special needs children and ensures health coverage for special needs children who are adopted.

I am very optimistic that Congress will move this bill forward this year. There are far too many innocent lives at stake and no child should be denied a loving home. Unfortunately, for thousands of kids now caught in permanent limbo in the foster care system, that is exactly what is happening. The PASS Act will improve child safety and permanency, enabling some children to return home safely and others to move to adoptive families more quickly.

By Mr. MCCAIN (for himself, Mr. GORTON, Mr. HOLLINGS, and Mr. FORD):

S. 1196. A bill to amend title 49, United States Code, to require the National Transportation Safety Board and individual foreign air carriers to address the needs of families of passengers involved in aircraft accidents involving foreign air carriers; to the Committee on Commerce, Science, and Transportation.

THE FOREIGN AIR CARRIER FAMILY SUPPORT ACT

Mr. MCCAIN. Mr. President, I am pleased to join with my colleagues, Senator GORTON, Senator HOLLINGS and Senator FORD, to introduce the Foreign Air Carrier Family Support Act. This bill would require foreign air carriers to implement disaster family assistance plans should an accident involv-

ing their carriers occur on American soil. I would like to recognize my colleagues in the House, especially Representative UNDERWOOD from Guam, who introduced the companion bill in the House of Representatives earlier this week.

The legislation, if enacted, would build on the family assistance provisions that we enacted last year as part of the Federal Aviation Reauthorization Act of 1996. Let me be clear about one point. Domestic air carriers are already operating under the same legislative requirements set out in the legislation before us today.

The need for extending the requirements to foreign air carriers came into a clear focus with the tragic crash of Korean Air Flight 801 in Guam. I do not intend to single out Korean Air for blame. An accident of this magnitude, involving the loss of more than 200 lives, in rough and isolated terrain, is bound to create mass confusion and hysteria. Even so, coverage of the accident made us all acutely aware of the criticisms made by the family members, and the pain they suffered in relation to the search and rescue efforts, as well as the media involvement following the accident.

The U.S. civil, military and Federal personnel at the scene should be commended for their contributions toward the search and rescue efforts. I also praise their attempts to console and assist family members on Guam, as well as those who traveled to the accident site from South Korea and the continental United States. Without a doubt, though, their efforts would have been more productive had there been a prearranged plan in effect. Greater coordination would have made things easier not only for the victims' family members, but also for the National Transportation Safety Board [NTSB] officials and military personnel who were on-site and who had to respond immediately in an emotional and potentially hazardous situation.

The Foreign Air Carrier Family Support Act would require a foreign air carrier to provide the Secretary of Transportation and the Chairman of the NTSB with a plan for addressing the needs of the families of passengers involved in an aircraft accident that involves an aircraft under the control of that foreign air carrier, and that involves a significant loss of life. The Secretary of Transportation could not grant permission for the foreign air carrier to operate in the United States unless the Secretary had received a sufficient family assistance plan.

The family assistance plan required of the foreign air carrier would include a reliable, staffed toll-free number for the passengers' families, and a process for expedient family notification prior to public notice of the passengers' identities. An NTSB employee would serve as director of family support services, with the assistance of an independent nonprofit organization with experience in disasters and post-trauma communication with families. The foreign air