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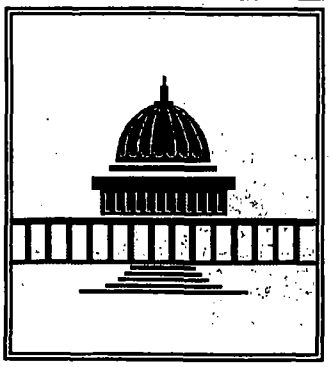
CWLAdoptioNews

Spring, 1997 | Child Welfare League of America | Vol. 2, Issue 1



Capitol Update

CWLA RESPONDS TO PRESIDENT'S ADOPTION INITIATIVE

In a December 20, 1996, letter to President Clinton, David Liederman, CWLA executive director, applauded the administration's new Adoption Initiative, which sets the goal of doubling the number of children adopted from the foster care system by the year 2002. In his letter, Liederman offered the aid and advice of CWLA and its member agencies in the development and implementation of the president's plan. CWLA's recommendations included:

1) ***Increase the federal match for adoption subsidy.*** Currently, federal and state governments share in providing subsidies to families who adopt through public welfare agencies or the private agencies that represent them. CWLA recommended that the federal match for adoption subsidies be raised from 50% to 75% to serve as an incentive to states to move waiting children more quickly from foster care into adoption.

2) ***Ensure the full use of federal adoption subsidy.*** Adoption subsidy is the single greatest support for families who adopt children from the public child welfare system, since many families cannot afford to assume full financial responsibilitly for children who may have complex emotional or physical needs. According to CWLA data, states vary widely in their use of subsidy to secure adoptive families. Appropriate use of adoption subsidy should be addressed in state plans.

3) ***Correct two deficiencies in the existing adoption assistance program.*** a) Following termination of parental rights, a child's eligibility for adoption subsidy should not be linked to the parents' financial status at the time the child entered care; and, b) adoption subsidy should follow the child and be available until adulthood.

4) ***Ensure continued availability of Medicaid for all adopted children.*** Proposed cuts in Medicaid pose threats to families who have adopted or who would like to adopt children with special needs. Medicaid--including the EPSDT program--is often as necessay for families as the adoption subsidy.

5) ***Make post adoption services a priority.*** Families adopting children who have been abused or neglected need a range of supportive services following adoption. Such services are also an important factor in ***recruiting*** families. States should be offered incentives to develop comprehensive post adoption services.

6) ***Commit the necessary resources to ensure the availability of skilled staff.*** Skilled staff with small caseloads are needed to provide competent and compassionate servies to children who have been traumatized by early life experiences and to provide services to the families who adopt them. States should receive financial incentives to reduce caseloads and provide needed training, not only for social workers but administrators, lawyers, judges, mental health professionals, and school personnel.

7) ***Expedite the process of termination of parental rights when appropriate.*** When children cannot be safely returned to their families, they can be legally freed for adoption more quickly if states involve families in mediation and encourage voluntary relinquishment when appropriate. Strategies must also be developed wthin the courts and legal systems to give priority to scheduling, hearings, and redering decisions in child welfare cases as well as in expediting appeals.

8) ***Require reasonable efforts to secure adoption for all children.*** Documentation of reasonable efforts to *ensure adoption* needs to be addressed in statutes, state plans, and policies. Such steps could include a state's use of child-specific recruitment; state, regional and national photolistings and exchanges; adoption parties; use of the Internet; and other mechanisms for making waiting children visible to prospective adoptive families.

THE INSTITUTE FOR EDUCATIONAL LEADERSHIP, INC.

FOSTER CARE IN PERSPECTIVE

The following information about foster care comes from a background paper, *Improving Economic Opportunities for Young People Served by the Foster Care System*, by the Edmund S. Muskie School of Public Service at the University of Southern Maine.*

How many children are in foster care?
Estimates vary; at least 423,000 nationwide.

No single data system provides reliable information on children in foster care in all 50 states and the District of Columbia. Using data provided by the Administration for Children and Families (ACF) in its Adoption and Foster Care Analysis System (AFCARS), and by the American Public Welfare Association (APWA), reported through the Voluntary Cooperative Information System (VCIS), the authors of the "Muskie Report" estimate that in September 1996, 423,147 children were living in foster care in the United States. The Child Welfare League of America (CWLA) estimates that 483,629 children were in out-of-home care in 1995, an increase of 21 percent since 1990.

Who are the children in foster care?
Forty percent of the children in foster care in September 1996 were older than 11 years of age; 49 percent were female and 51 percent were male.

An estimated 44 percent are African-American; 38 percent are white; and 14 percent are Hispanic. Of the remaining four percent, 2 percent are Native American, one percent are Asian, and one percent are children of unknown ethnicity.

Children of color are over-represented in the foster care system. For example, the percentage of African-Americans in the foster care system is 3.67 times that of African-Americans in the general population.

How long do children stay in foster care?
In general, children and youth either stay in foster care either for a short time (less than one year) or for three years or more. As of September 1996, 14 percent of foster children had been in care between 24 and 35 months, and 34 percent had been in care for over three years. States reporting data to CWLA showed that children were in foster care for a median of 22.1 months. On average, African-American children spend the most time in care (25.1 months).

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Where do children in foster care live?
In 1996, 42 percent of children in foster care lived in non-relative home placements. More than one-third of the children in care (37 percent) lived with relatives. Fifteen percent were in group homes or institutional placements. Just one percent were classified as being in independent living *placements*, although youth in many settings may participate in independent living *services* designed to help them become self-sufficient. The remaining five percent of children in the foster care system were in pre-adoptive placements, in trial home visits, or were classified as runaways.

What "risk factors" are especially common among children in foster care?
Children in foster care are more likely than other children to have low educational attainment. The most recent and comprehensive study of educational outcomes for youth in foster care is based on data from the "High School and Beyond" survey administered by the Department of Education from 1980 through 1986. The study compares the subset of youth in foster care with a group of youth who were not in foster care and finds that:

> Youth in foster care were more likely to drop out of high school than those who were not in foster care (37 percent vs. 16 percent), although both groups agreed that dropping out was not a good idea.
>
> Youth in foster care who dropped out of high school were less likely to have received a high school diploma or a GED certificate (77 percent vs. 93 percent).
>
> Youth in foster care were less likely to be enrolled in college preparatory classes (15 percent vs. 32 percent).
>
> Youth in foster care were more likely to report having been disciplined in school, suspended, and in "serious trouble with the law."

Many, but certainly not all, youth in foster care also face other significant challenges to becoming economically self-sufficient. These include:

> Significant developmental barriers, including mental health, developmental delay, and physical health problems;
>
> Drug and alcohol problems;
>
> Involvement with the juvenile justice system; and
>
> Homelessness.

Although these are barriers to employment for youth in general, they occur more frequently among youth in foster care.

What can help foster children overcome barriers to becoming successful adults?
The National Juvenile Justice Action Plan, *Combatting Violence and Delinquency,* identifies several areas where enhancement of protective factors can increase an individual child's ability to succeed. These areas focus not only on individual skills and abilities, but also on improving social systems that affect foster children:

A strong *social support network*—maintaining and encouraging contact with siblings, birth parents, mentors and foster care providers who provide love, especially as expressed through involvement in the youth's activities and through monitoring and supervision—is important. Other family-oriented protective factors include family stability and adequate financial resources.

Positive *personal attributes*—such as intelligence, a steady disposition, and social skills (including the ability to solve problems without resorting to violence).

Schools that positively shape the behavior of youth through strict policies on violence and drugs and caring teachers who demonstrate concern for their students' social and academic growth.

Communities that provide opportunities, structure, and social controls with neighbors working together to meet common objectives.

Youth participation in and acceptance by prosocial peer groups, especially during adolescence.

Adult supervision of and involvement in youth group activities.

* To obtain a copy of the report, *Improving Economic Opportunities for Young People Served by the Foster Care System: Background Paper*, December, 1997, contact the Edmund S. Muskie School of Public Service, National Child Welfare Resource Center for Organizational Improvement, Institute for Child and Family Policy, 400 Congress Street, Portland, Maine 04101, telephone: (207) 780-4430.

April, 1998

THE INSTITUTE FOR EDUCATIONAL LEADERSHIP, INC.

April, 1998

AN OVERVIEW OF FEDERAL CHILD WELFARE PROGRAMS

Child welfare programs aim to improve the conditions of children and their families through a variety of services, including protection for abused or neglected children, services to preserve and support families, care for homeless children and families, and foster care for children who cannot live safely at home. Many private, nonprofit and government entities provide child welfare services for families in need. State governments have primary responsibility for child welfare services, and each state has its own legal and administrative structures and programs that address children's needs.

The federal government has been involved in efforts to improve children's welfare since the early 1900s. Almost 40 federal programs provide support for such services today. According to the *Green Book*,[1] four different Executive Branch agencies and five committees in the House of Representatives have responsibility for child welfare. The Social Security Act is the primary source of federal funds for child welfare, foster care and adoption activities. Other laws governing child welfare programs include: the Adoption Opportunities Act,[2] the Child Abuse Prevention and Treatment Act[3] and the Indian Child Welfare Act.[4]

The most recent federal legislative effort to improve child welfare programs, the Adoption and Safe Families Act of 1997,[5] was signed into law on November 19, 1997. It changes and clarifies a wide range of child welfare programs including the Foster Care and Adoption Assistance Programs of the Social Security Act. The intentions of the law are to enhance child safety, move children to permanent homes, strengthen families, and increase accountability.

The following are brief descriptions of five major child welfare programs.

Child Welfare Services Program, Title IV-B, Subpart 1 of the Social Security Act

The intent of the Child Welfare Services Program[6] is to provide supportive services that could prevent the need for out-of-home placement. For example, program services address problems that may result in abuse, neglect, exploitation or delinquency of children. The statute permanently authorizes 75 percent federal matching grants to states for services that protect the welfare of children. There are no federal income eligibility requirements for this program.

Promoting Safe and Stable Families, Title IV-B, Subpart 2 of the Social Security Act

Beginning in 1994, the Family Preservation and Support Services Program[7] authorized grants to states for family preservation and family support services as a

capped entitlement. With the enactment of the Adoption and Safe Families Act of 1997, this program was renamed Promoting Safe and Stable Families.

Family preservation services are intended for children and families, including extended and adoptive families, that are at risk or in crisis. For example, services help reunite foster children with their families, if appropriate, or place them for adoption; provide respite care as temporary relief for parents and other caregivers; and provide training to improve parenting skills.

Family support services are community-based activities intended to reach families who are not yet in crisis and to prevent child abuse or neglect from occurring. Examples include parenting skills training, structured activities to strengthen relationships between parents and children, drop-in centers for families, information and referral services, and early developmental screening for children.

The Adoption and Safe Families Act of 1997 requires states to use part of their grants for time-limited reunification services such as counseling, substance abuse treatment, mental health services, assistance for domestic violence, temporary child care and crisis nurseries, and transportation to and from these services. It also authorizes the use of funds for pre- and post-adoptive services designed to expedite adoption of children from foster care and to support adoptive families.

Foster Care, Title IV-E of the Social Security Act[8]

Funding Formula

The federal Foster Care Program[9] provides federal matching funds to states for maintenance payments[10] for the care of certain low-income children, up to age 18, who have been placed in foster care homes, private nonprofit child care institutions, or public child care institutions that house no more than 25 persons. (Effective July 1, 1997, children may also be placed in for-profit child care institutions.)

The matching rate for a state is that state's Medicaid matching rate.[11] The FY 1997 federal matching rate ranges from 50 percent to 77.22 percent. For certain administrative costs of the program and expenses related to child placement, the federal government offers 50 percent matching funds. States receive 75 percent federal matching for certain training expenses. States also receive 75 percent matching for certain costs related to automation of their data collection systems during FY 1994 - FY 1997. Federal expenditures for the program in FY 1996 were $3.1 billion.

Eligibility Requirements[12]

A child must meet AFDC eligibility[13] rules, and removal from the home must be the result of a judicial determination that continuation in the home would be contrary to the child's welfare, or a voluntary placement agreement between the child welfare agency and the child's parents. Effective July 1, 1997, the eligibility requirements are revised to conform with welfare reform legislation (P.L. 104-193) that repealed AFDC. Under new rules, to be eligible for foster care subsidies, children must meet AFDC eligibility rules as they were in effect in their state on July 16, 1996.[14]

Benefit Levels

States determine payments to foster parents and institutions, and children are automatically eligible for Medicaid. P.L. 96-272 requires that states make reasonable efforts to prevent the need to place children in foster care, and to reunify children with their families when possible. Each child in foster care must have a written case

plan, and states must hold administrative and judicial reviews of each child's case according to a prescribed schedule.

In FY 1996, administrative costs (including training and data collection expenses) were estimated to represent 51 percent of total federal spending for foster care. Maintenance payments varied widely among states, ranging in FY 1995 from $205 monthly for a 2-year-old child in Alabama to $637 for a 16 year-old in Connecticut. Nationwide average maintenance payments were $344 for a child age 2, $362 for a child age 9, and $416 for a child age 16.

Independent Living Program, Title IV-E

The Title IV-E *Independent Living Program* provides states with the resources to create and implement independent living services. These services include basic skills training, education initiatives, and employment initiatives that are intended to help youths make a successful transition from foster care to self-sufficiency when they become ineligible for foster care maintenance payments at age 18.

Adoption Assistance Program, Title IV-E of the Social Security Act

The Title IV-E Adoption Assistance Program[15] provides three kinds of assistance: maintenance payments for qualified children who are adopted; administrative payments for expenses associated with placing children in adoption; and training of professional staff and parents involved in adoption. Federal matching funds are provided to states that provide adoption assistance payments to parents who adopt AFDC- or SSI-eligible children with special needs. A special needs child is defined in the statute as "a child [with] a specific condition or situation, such as age, membership in a minority or sibling group, or a mental, emotional, or physical handicap, which prevents placement without special assistance." Adoption assistance payments end when the child reaches age 18, or at the option of the state, age 21, if the child has a disability.

The Adoption and Safe Families Act of 1997 authorizes $20 million for each of fiscal years 1999 to 2003 in adoption incentive payments to states that increase their adoptions. An eligible state will receive bonus payments if it exceeds the average number of adoptions completed in that state during FY 1995-FY 1997, or in FY 1999 and subsequent years, if adoptions of foster children are higher than in any previous fiscal year after FY 1996. The incentive payments must be used to provide child and family services under the Title IV-B and Title IV-E programs.

The 1997 law amends Title IV, Part E of the Social Security Act to emphasize that, while states must continue to make *reasonable efforts* to preserve families prior to the placement of a child in foster care, and to reunify the child with his/her family, the paramount concern of state plans for foster care and adoption assistance must be the health and safety of the child. Therefore, *reasonable efforts* are not required on behalf of certain parents, including those who have murdered or committed a felony assault against another child, or who would otherwise pose a serious risk to a child's health or safety. It also requires criminal records checks to approve a prospective adoptive parent of a Title IV-E eligible child.

ENDNOTES

1. The *Green Book* is an annual publication of the House of Representative's Committee on Ways and Means. It contains background information on programs under the jurisdiction of the Committee and data relevant to those programs.

2. 42 U.S.C.A. §§ 5111-5115

3. 42 U.S.C.A. §§ 5106-5116

4. 25 U.S.C.A. §§ 1931-1934

5. P.L. 105-89

6. 42 U.S.C. §§ 620-628

7. 42 U.S.C. §§ 630-635

8. The section on foster care comes from the CRS Report for Congress, *Cash and Noncash Benefits for Persons with Limited Income: Eligibility Rules, Recipient and Expenditure Data, FY1994-FY1996*, by Vee Burke, December 28, 1997.

9. 42 U.S.C.A. §§ 670-679 This program was established on October 1, 1980, under a new part (Part IV-E) of the Aid to Families with Dependent Children (AFDC) title of the Social Security Act, by the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272). Previously, foster care was a separate component of the regular AFDC program.

10. Maintenance payments are expenditures for food, housing, clothing, daily supervision, school supplies, general incidentals, liability insurance for the child, and reasonable travel to the child's home for visits (1996 Green Book, p. 706)

11. The federal share of a state's Medicaid payments is called the federal medical assistance percentage (FMAP). The law establishes a minimum FMAP of 50 percent and a maximum of 83 percent (though the highest rate in FY 1997 was 77.22 percent for Mississippi). The formula is inversely related to a state's per capita income and is adjusted annually. For FY 1996 the nationwide average FMAP was about 57 percent.

12. Regulations for this program are found in 45 C.F.R. Parts 1355, 1356, and 1357 (1996). This program is No. 93.658 in the Catalog of Federal Domestic Assistance.

13. To be eligible for Aid to Families with Dependent Children (AFDC), a child had to be deprived of parental support or care because a parent was absent from home continuously, incapacitated, unemployed, or deceased. States defined "need" through countable income limits and countable resource limits (within an outer federal ceiling of $1,000 in equity value per family). Federal law imposed a gross income eligibility limit of 185 percent of the state's standard of need.

14. P.L. 104-193 originally established this date as June 1, 1995. However, the date was subsequently changed by provisions in the Balanced Budget Act of 1997 (P.L. 105-33), which made technical corrections to the welfare reform law.

15. 42 U.S.C.A. §§ 673-676, 679

Sources:

1996 Green Book: Background Material and Data on Programs Within the Jurisdiction of the Committee on Ways and Means, U.S. House of Representatives, U.S. Government Printing Office, Washington, DC: 1996. For sale by the U.S. Government Printing Office, Superintendent of Documents, Congressional Sales Office, Washington, DC 20402.

The section on Title IV-E, Foster Care came from the CRS Report for Congress, number 98-226, *Cash and Noncash Benefits for Persons With Limited Income: Eligibility Rules, Recipient and Expenditure Data, FY1994-FY1996*, by Vee Burke, December 28, 1997.

Children '98, America's Promise: 1998 Children's Legislative Agenda, Budget Updates and Issue Briefs, Child Welfare League of America Press: Washington, DC.

FOSTER CARE TODAY

A Briefing Paper

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FOSTER CARE TODAY

This briefing paper addresses the current status of foster care, how we got where we are and the characteristics of a reconceptualized foster care system that will be responsive to today's social conditions as an integral part of broad child welfare reform.

Current Status of Foster Care

The Adoption Assistance and Child Welfare Act of 1980 (Public Law 96-272) has been a key factor in shaping the current status of foster care. The Act responded to concerns expressed in the late 1970s that foster care placement was being used when other services would be more appropriate, that children were remaining in foster care for excessive periods of time, and that children were simply forgotten once they entered the foster care system. The Act encouraged less reliance on foster care and greater use of preventive and reunification services, and required permanency planning efforts. This mandate clearly was intended to reduce the number of children in care, and the length of time children spent in care. Those goals were partially accomplished. However, after a significant decrease, the number of children and the length of time they spent in foster care began to rise again; at the same time, there was a profound change in both the characteristics of children entering care and the foster care system itself.

The outcome of agencies' efforts to implement the reforms contained in P.L. 96-272 was that the number of children in foster care decreased from 502,000 children in 1977 to 270,000 in 1984 (Tatara 1993). Despite this initial achievement, however, the demand for foster care services began to grow once again, with steadily increasing numbers of children entering and remaining in care each year. In 1995, approximately 482,480 children were in foster care—a 79% increase in the number of children in care since 1984 (CWLA 1997). A total of 715,743 children received out-of-home car services for some period of time in 1995. This number is larger than the number of children in care, because many children enter and leave care during the year (CWLA 1997). As one commentator has noted, in 20 years, "the initial gains resulting from the new philosophy of permanency planning [as set forth in P.L. 96-272] have seemed to disappear as far as reducing the number of children in foster care." (Gershenson 1990)

How can we explain the dramatic increases in the numbers of children in foster care? We can look at four factors that have contributed to this phenomenon: an increase in the number of reports of child abuse and neglect; increasing rates of re-entry into foster care; increased time that children spend in care; and the impact of other service systems on the number of children and young people served by the foster care system.

The rise in the number of children placed in foster care is associated with the yearly increase in the **number of child abuse and neglect reports**. About 3.1 million children were reported to state authorities as abused or neglected in 1995, an increase of 49% since 1986 and 347% since 1976. Of the children in 1995 whose reports were substantiated, 54% were neglected, 25% were physically abused, and 11% were sexually abused. The remaining children suffered from emotional and other forms of maltreatment (NCPCA 1996).

Increased **re-entry rates** are also a factor in the increased numbers of children in foster care. Statistics documenting the flow of children in and out of care demonstrate this trend most clearly. Studies in Illinois and New York reveal that 20-33% of children in foster care are re-entrants (Wulczyn and Goerge 1992). In 1987, 72% of the increase in foster care placements in New York was attributable to children re-entering the system (Wulczyn and Goerge 1992). Data from New York, Illinois, Georgia, Oregon and Texas show that from 3% to 27% of children discharged to their families return to foster care (U.S. General Accounting Office 1991).

Another factor related to the growth in the numbers of children in foster care is the length of continuous **time in care**. Data on the length of time children spend in foster care are collected for children who are in care at the end of each year and children who left care during each year. Both sets of data demonstrate that throughout the 1980s, there was a decrease in the length of time children spent in care, but beginning in 1990 the average length of time children were in care again increased (Tatara 1993). The data also indicate that if children are not discharged within a short time after the initial placement in foster care, they are likely to remain in care for longer periods of time (Merkel-Holguín 1993). The effect of the increased time in care is a growing population of children who remain in the foster care system even as new children are entering care.

The growth in the number of children in foster care is also related to placements through **other systems**—the mental health and juvenile justice systems in particular. Many have pointed to the increasing use of foster care for children and young people who previously were served in mental health and correctional facilities. Between 1984 and 1990, for example, there was a 52% increase in the number of children who entered foster care after committing status and delinquent offenses (Tatara 1993). At the same time, the aggregate number of children in out-of-home care in all systems has been growing (U.S. House of Representatives 1989).

The problem, however, is far greater than the sheer numbers. The characteristics of children and of the foster care system itself have changed. Children entering and staying in care now are more apt to be characterized by emotional/behavioral problems, alcohol and other drug related difficulties, the effects of HIV/AIDS, and physical handicaps. In addition, increasing numbers of very young children are entering care, the number of adolescents in the system continues to escalate, and the foster care population is increasingly multicultural. The foster care system itself has shifted in terms of how out-of-home care is offered—the way in which family foster care is provided, the role of residential treatment care, and the growth in relative foster care.

Child welfare agencies are being confronted with increasingly complex, changing, and perplexing needs. As early as 1984, a New York study found that 40% of New York State's children in foster care manifested **emotional/behavioral problems** such as thought disorders, paranoia, suicide attempts, eating disorders, self-abuse, and attention-deficits (Ingalls et al. 1984). A similar California study in 1985 indicated that the children and youths comprising the state's foster care population presented a range of problems, which included sexual acting out and hostile behavior (Fitzharris 1985).

Substance abuse, in particular, is having a significant impact on children, young people and families, and has become an important precipitating factor in the placement of children into foster

care (North American Commission on Chemical Dependency and Child Welfare 1992). An estimated 375,000 babies are born each year exposed to drugs; approximately 5,000 infants are born each year with documented fetal alcohol syndrome; and another 35,000 infants are born with other alcohol-related birth defects (U.S. House of Representatives 1989). Fully 70% of CWLA member agencies responding to a recent survey reported that crack cocaine is a serious problem among the children and families they serve (Curtis and McCullough 1993). According to a recent GAO (1994) study, alcohol and drug abuse is a factor in the placement of more than three-quarters of the children who are currently entering foster care. In Ohio, more than two out of every five children placed in out-of-home care during 1988 came from families with parental drug problems (Governor's Office of Criminal Justice Services 1989). The trend of children being placed in foster care because of severe parental drug problems can also be seen in relatively rural states.

An estimated 7,000 children are born annually to HIV-positive mothers (CDC 1993). As the **HIV/AIDS** pandemic broadens and transmission patterns shifts from homosexual to heterosexual populations, and from men to women, another group in need of foster care is emerging—children who lose their parents to AIDS. It is projected that by the year 2000 between 72,000 and 125,000 children and youths will have lost their mothers to AIDS in the United States (Michaels and Levine 1992); other data indicate there will be 93,000-112,000 uninfected children and 32,000-38,000 children infected with HIV born to HIV-positive mothers between 1992 and 2000 (Caldwell et al. 1992). Parents with HIV will need the assistance of child welfare agencies to create permanency plans for their children, 80% of whom will not be HIV positive. In addition, increasing numbers of children who are HIV infected are already in foster care. One study conservatively estimated that in 1991 there were 1,149 HIV positive children in foster care (Cohen and Nehring 1994). With the rate of reported AIDS cases growing most rapidly among women of color and of childbearing age, it can be projected that the number of children born to HIV-infected mothers and, therefore, the number of children who will need foster care services will also escalate throughout the 1990s.

Many of the children coming into care today are **medically fragile and/or physically handicapped.** As testimony to the Budget Committee of the U.S. House of Representatives recently reflected, "the children coming into [the child welfare] system today are significantly different from the children we saw five years ago...a growing number of seriously handicapped infants at one end of the spectrum, and a preponderance of emotionally disabled teenagers at the other end" (APWA 1990). Between 1984 and 1990, there was a 12% increase in the number of children who entered foster care because of their own handicap or disability (Tatara 1993).

According to the U.S. House of Representative Select Committee on Children, Youth, and Families (1990), **infants and young children** with medical complications and physical and mental limitations constitute the fastest growing group of children in need of foster care. According to the GAO (1994), the population of young children in foster care—that is, those 36 months of age and younger—was not only much larger but also significantly different in 1991 than in 1986. The study focused on New York, California, and Pennsylvania (the states with the largest average foster care populations in 1991) and found that more young children entered foster care due to some form of parental neglect (68% in 1991 compared to 47% in 1986); their parents were more likely to abuse drugs (78% of the children in 1991 had one parent who abused drugs compared to

52% in 1986); the children had more health-related problems (58% in 1991 compared to 43% in 1986); and the children were at higher risk of ongoing developmental problems due to prenatal drug exposure (drastically increasing to 62% of the children in 1991 from 29% in 1986). A New York study of foster care trends found that in 1989, 3% of all infants in the state were placed in foster care, triple the rate of five years earlier, and children ages birth to four accounted for 31% of all first admissions to foster care in New York City (Wulczyn and Goerge 1990).

Although the proportion of **adolescents** in foster care has decreased (29.7% in 1990 from 45.3% in 1982), the number of adolescents in care has slightly increased—120,600 in 1990 compared with 118,700 young people in 1982 (Tatara 1993). Young people between 13 and 18 years of age comprise roughly one-third of the children in foster care, despite the fact that they currently comprise only about 12% of the U.S. population (Merkel-Holguín 1993). While there are no definitive explanations for this trend, some experts have pointed out that the disproportionate representation of adolescents in foster care may be related to a diversion of youth from the correctional or criminal justice systems (Hornby and Collins 1981; Timberlake and Verdieck 1987).

An especially disturbing trend in the foster care population is the increasing numbers of **children and youth of color** in care, the product largely of the worsening well-being of our nation's minority families (Stehno 1990; Tatara 1993) and rapidly changing racial/ethnic patterns. Between 1980 and 1990, there were major shifts in the general U.S. population. While the Caucasian population decreased by 3%, the African American population grew by 13%, the Native American/Alaskan Native population by 42%, the Latino population by 53%, and the Asian and Pacific Islander population by 97% (U.S. Bureau of the Census 1992). These changes are mirrored in the racial/ethnic make-up of children in the child welfare system. In 1980, 47.3% of children in foster care were children of color. By 1990, 60.7% of children in foster care were children of color (Tatara 1993).

African American, Native American and Latino children and youths continue to be disproportionately represented in the foster care system—now by a margin of more that two to one. In 1990, for the first time, there were more African American than Caucasian children in foster care. Between 1982 and 1990, the number of Latino children in care increased 172% (Tatara 1993). In 1990, African Americans represented only 12.1% of the U.S. population as a whole, but 40.4% of the foster care population; Latinos represented 9% of the U.S. population, but 11.8% of the foster care population; and Native Americans and Asian or Pacific Islanders represented 3.7% of the total U.S. population, but 4.3% of the foster care population (U.S. Bureau of the Census 1992; Tatara 1993). The authors of a 1989 study of foster care trends found that the dramatic increase in the number of children in foster care in Illinois between 1987 and 1988 was due entirely to African American children entering care in numbers disproportionate to their membership in the general population (Wulczyn and Goerge 1990).

A number of studies also indicate that children of color receive differential treatment in the foster care system. African American children are less likely to have service plans and less likely to have regular contact with their families (Olson 1982). Similarly, Latino children are less likely to have plans for regular parental contact than Caucasian children in foster care (Shyne and Schroeder

1978). Not surprisingly, African American children remain in foster care longer and receive less desirable placements than majority race children (Stehno 1990; Close 1983).

In addition to the changing characteristics of children in care, the way in which foster care is provided has also undergone change. It is estimated that about three-fourths of the children living in out-of-home care now reside in **family foster homes**. Approximately one-fourth reside in group residential settings (CWLA 1997). Increasingly, children are needing specialized **treatment services**, either through specialized or treatment foster care or through group or residential care and demands are being made on child welfare systems to develop therapeutic or treatment foster care resources to respond to the complex needs of growing numbers of children entering care. At the same time, more young people are requiring specialized residential treatment. In 1990, there were approximately 66,600 children in group homes or residential care settings, a number which has slightly increased over time (Tatara 1993). As the number of inpatient psychiatric placements available to children has decreased, treatment foster care and residential and group care have been asked to meet the needs of a more diverse and emotionally disturbed population. Many of these young people have experienced repeated disruptions in foster care and arrive at these specialized treatment settings with severe problems. Other young people, particularly those served by child welfare residential care, are juvenile offenders or others with serious conduct disorders or prior court contact who previously were served by other systems.

The dramatic growth in **kinship care or relative foster care** also has changed the nature of foster care. It is estimated that approximately one-fourth of the 482,480 children in foster care now live with kin. The increasing number of children needing out-of-home care and the declining number of foster families have prompted a recognition of relative foster care as an essential option in the array of child welfare services. Increasingly, the child welfare field is seeking kin as the first option for children who must be separated from their parents (CWLA 1997).

Historical Roots: How We Got Where We Are

Although the current status of foster care is also largely a product of broader social forces—including poverty, homelessness, substance abuse, HIV/AIDS, and adolescent pregnancy and parenting—the welfare of children and families has always been affected by broader economic and political realities. Examples from history clearly illustrate this connection. In 1933, the U.S. Children's Bureau, in collaboration with CWLA, convened a Conference on Present Emergencies in the Care of Dependent and Neglected Children. The conference report noted that "the welfare of destitute and neglected children has been seriously affected by several factors arising from the depression, including: reduction in state and local expenditures in many areas for the support of needy children in public and private agencies, and a lack of employment for needy children reaching the age of 16 or 17 years. Many children are suffering and the welfare of many more is seriously endangered" (Bremner 1974: 613). Nearly 40 years later, another commission noted that "meager public assistance, coupled with the paucity of day care, homemaker services, and accessible medical services, make it hardly surprising that the one-parent family of low socioeconomic status is the most vulnerable to neglect and subsequent child placement" (Bremner 1974: 675).

Poverty has always seriously undermined the well-being of children and families. Almost 22% of America's children—14.6 million—were living in poverty in 1992 (U.S. Bureau of the Census 1993), despite the fact that the United States remains one of the richest countries in the world. The percentage of Latino children living below the poverty level is approximately 40%; for African American children, the percentage climbs to almost 47%. This compares to a poverty rate of 17% for Caucasian children. Poverty is often tied to single-parent status. Almost 25% of all children in the U.S. lived in one-parent families in 1990, compared with 9% in 1960. The percentages are even higher for children of color (U.S. House of Representatives 1994). Fully half of the children born in 1990 will spend part of their childhood with only one parent; that parent is likely to face a continuing struggle with the economic and emotional burden of unshared parenting. Poverty, often associated with underemployment and unemployment, leaves families unable to afford even such basic necessities as food, clothing, and shelter and other essentials such as medical care and transportation.

Homelessness is also impacting vulnerable families. At least 100,000 youngsters sleep each night without a home (Institute of Medicine 1988). Families with children represented 43% of the homeless population in 1992 (U.S. Conference of Mayors 1993). Homelessness continues to be a factor in the separation of children and parents, as well as a cause for delays in family reunification once children enter foster care. In 1988, for example, homelessness was a factor in over 40% of placements into foster care in New Jersey, and the sole precipitating cause in 18% (Ooms 1990).

As previously discussed, **alcohol and other drug abuse** significantly affect the child welfare system and foster care. The effects of parental substance abuse include prenatal drug exposure as well as environmental exposure to parental alcohol and drug abuse. Young children entering foster care often suffer the physical, emotional and developmental effects of parental drug and alcohol abuse.

As with alcohol and other drug abuse, the **HIV/AIDS epidemic**, described earlier, is also affecting the child welfare system. The permanency planning needs of children who lose their parents to AIDS, the demands for children and young people in care who are HIV positive, and the HIV/AIDS prevention education needs of young people in foster care are greatly impacting the child welfare service delivery system.

Finally, **adolescent pregnancy and parenting** have had an impact on foster care. Every 31 seconds, an adolescent becomes pregnant, and every minute an adolescent gives birth (CDF 1994). In 1991, the latest year for which there is data, there were 531,591 births to teen mothers in the United States, with 12,014 of the births to girls under age 15. The United States has an escalating adolescent birth rate of 62 births per thousand (U.S. Department of Health and Human Services 1993), a rate higher than all other industrialized countries. Adolescent mothers have a higher than average chance of suffering pregnancy complications, including premature delivery; they are less likely to obtain prenatal care; they are less likely to ever complete high school than their nonparenting peers; and they will earn about half the lifetime income of women who first give birth in their 20s. Teenage fathers also face certain disadvantages—they tend to have lower incomes, less education, and more children than men who postpone having children until their 20s (Alan Guttmacher Institute 1994). The social and economic problems that teen parents are likely to face place them and their children at risk. To an increasing extent, children entering foster care

are the children of young parents who themselves have experienced abuse and neglect (CWLA 1994a).

Issues for Foster Care Today

Given the recent events and historic forces that have resulted in the foster care system we have today, there are a number of critical issues the system must address. These issues include the needs of children in care, particularly their health, mental health, developmental, and educational needs; the needs of the biological families with whom the system is working; the need for adequate numbers of qualified foster parents; and the need for highly skilled staff.

Children in foster care exhibit much higher rates of **physical, emotional, and developmental problems** than children of the same age who are not in care. Many children and youth come from chronically poor families. That poverty, particularly when combined with the effects of abuse and neglect, places youngsters at high risk for health, mental health, and developmental problems (Halfon and Klee 1991). Physically, children in foster care are likely to suffer from a range of acute and chronic health problems (Wald et al. 1985). A 1984 study, for example, found that children in care experience upper respiratory infections, dermatologic disorders, dental caries and malnutrition in significant numbers (New York State Department of Health and Human Services 1990). Studies of children in foster care in New York City, Chicago, Baltimore and Canada indicate that children in care, when compared to children who are not in care, have higher rates of vision, hearing, growth, and dental problems (Moffatt et al. 1985; Swire and Kavaler 1977; White et al. 1987).

Children and young people in care are also likely to suffer from a range of psychological and developmental problems that can lead to significant behavioral and emotional difficulties. One study indicates that the incidence of emotional, behavioral and developmental problems among children in foster care (including depression, conduct disorders, difficulties in school, and impaired social relationships) is three to six times greater than the incidence among other children (Dubowitz 1990). Parental substance abuse and HIV infection further complicate the health and developmental status of many children in care.

While children often come into care with enormous health, mental health and developmental needs, in many instances the foster care system itself exacerbates those problems. As children move from one setting to another, their already compromised physical and mental health may further deteriorate. One study, for example, found a direct relationship between the number of placements children experienced and the level of hostility they displayed (Fanshel et al. 1989). Results of another study indicate that children who experience multiple placements tend to have higher levels of behavioral and emotional problems, longer stays in foster care, and difficulties in returning home or making the transition to adoption (Office of the Florida Auditor General 1989).

As with health, mental health, and developmental needs, the **educational needs** of children in care can be substantial, and, again, the foster care system can exacerbate the problems. Various studies have indicated that children and young people in foster care tend to have limited education and job skills (Barth, 1990); perform more poorly educationally than children who are not in foster care (Ohio Department of Human Services 1987), lag behind in their education by at least

one year (Jones and Moses 1984), and have lower educational attainment than the general population (Festinger 1983; Cook and Ansell 1986). Multiple placements, placements outside children's communities and away from their own school's district, and lack of continuity in educational services exacerbate existing education problems.

Vocational services for children in foster care are also sorely lacking. Fewer than 25% of CWLA member agencies that responded to a survey on independent living services indicated that they provide employment-related services for young people in care; 17% provide employment and career planning assessments; 16%, job search training; and 24%, vocational training (DeWoody et al. 1993). It is not surprising, therefore, that young people in foster care find it more difficult to obtain employment than youths in general. One longitudinal study found that only 49% of the young people discharged from foster care were employed, compared to a national employment level for young people 16 to 24 years of 65% (Westat 1991).

Biological families of children in foster care have multiple and complex needs as well. As outlined above, families of children in foster care are more likely to be poor. The problems their children exhibit, such as emotional difficulties, acute and chronic health problems, chemical dependency, and homelessness, are also problems that the families must contend with as they seek to improve their lives and those of their children. Families of children in foster care need many of the same things that their children do—a safe environment, someone to care about them, help with communication and problem-solving, and daily living skills. They often need assistance with concrete services, such as transportation, housing, child care, health care, and employment.

Like their children in foster care, families also need to feel in control of their lives. Like foster parents, they need a number of supports and services, such as emergency and respite care, help with parenting and behavior management. They need to feel that their opinions and experience are valued. Often, the system fails to involve parents or communicate a belief that parents play a vital role in their child's foster care experience. In addition, the system often does not provide the supports and services families need to help them make necessary changes, strengthen the parent-child relationship, and ease the transition when children are returning home. These forms of assistance are critical if reunification and other permanent options for children are to be achieved.

As the needs of children, young people and their families have escalated, **foster parents** and foster care resources have become increasingly in short supply in much of the country, especially in the large cities (Kamerman and Kahn 1989). The number of foster homes decreased from 147,000 in 1984 to approximately 141,000 in 1995 (CWLA 1997). A number of factors account for the dwindling supply of foster parents. Current foster parents age and retire from the system while others drop out because they are dissatisfied with the child welfare system. Social and economic changes in our society, particularly the increase in single parent families and the movement of women out of the home and into the paid labor force, also have shrunk the pool of potential foster parents. At the same time, the demands on foster families have changed. Foster parents increasingly are asked to care for children with very complex and special medical, developmental, and behavioral needs (National Commission on Family Foster Care 1991).

The recruitment and retention of foster parents have become critical issues for the foster care system. Economic factors have contributed significantly to recruitment and retention difficulties.

In 1995, the average monthly foster care reimbursement rate was only $344 for children age two, $362 for children age nine, and $410 for youths age 16 (APWA 1996). This represents an 8% increase in the average reimbursement to foster parents since 1991. Studies indicate that foster parents, especially single, older, or foster mothers of color, have incomes lower than many other American families (Westat 1981; Fein et al. 1990). Historically, foster parents have been reimbursed at very low rates for the care they provide, and they have been expected to subsidize the child welfare system through their time and out-of-pocket expenses for services such as child care.

In addition to economic factors, internal systems issues have impacted the retention of foster parents. Surveys of foster parents repeatedly find that the primary reason foster parents leave service with public child welfare programs is the lack of agency responsiveness, communication, and support. According to the National Commission on Family Foster Care (1991), as many as 60% of foster parents withdraw from the program within the first 12 months. Lack of responsiveness and support for foster parents plays out in a number of ways:

- Foster parents often do not receive sufficient emergency, weekend, or vacation respite from their round-the-clock responsibilities.

- Foster parents often do not receive consultation and support from skilled social workers nor immediate responses to crisis situations.

- The role of the foster parent as a partner and team member is often ignored, resulting in role confusion and frustration.

- Foster parents often have difficulty in obtaining liability protection while caring for children who, because of emotional difficulties, may damage their homes and personal property or that of others.

- Foster parents generally receive inadequate training. While foster parents are usually required to attend a specified number of hours of training per year, there is often little systematic or participatory planning regarding the content and process of the training.

Recruitment and retention of foster parents of color, in particular, are of great concern because of the increasing numbers of children of color entering foster care and the importance of reducing the trauma to the child by making same race placements at the point of entry into the system. Foster parents have consistently been shown to be the most effective recruiters of new foster parents, especially culturally and racially diverse foster parents. Foster parents' attitudes about the agency with which they are affiliated—perspectives shaped to a great extent by agency responsiveness and communication with and support of foster parents—significantly impact the retention of existing foster parents and the recruitment of new foster parents.

Last, there are issues around child welfare agencies' needs for adequate numbers of qualified **staff.** Most agencies currently face increasing foster care caseloads coupled with staff reductions and decreases in staff supports such as training. Even without staff reductions, rising demands for

out-of-home care services have caused caseloads to expand, making staff workloads unmanageable and morale low. On average, public agencies report a staff turnover rate of 6% and private agencies report a staff turnover rate of 23% (CWLA 1996). Under such conditions, it often is impossible for a social worker to have frequent and consistent contact with parents and children, thus making it even more difficult to establish the relationships necessary to develop and implement effective permanency plans.

Staff qualifications including education and experience impact the system's ability to provide quality services that result in permanency for children. Studies report that only 25-27% of child welfare caseworkers providing direct services have any social work training, and of these, only 9-10% have graduate degrees in social work. Only 50% of caseworkers have experience in working with children and families or in any human service field. Low salaries contribute to the difficulties in attracting experienced and professionally trained staff. In 1995 letter carriers earned more than child welfare supervisors and social workers with M.S.W. degrees (CWLA 1996). The low salaries are related to a variety of factors, including agency declassification of caseworker positions and deletion of requirements for professional social work education. There is growing recognition that collaboration must be enhanced among the schools of social work, public agencies, and the federal government to reprofessionalize public child welfare staff.

In addition to professional preparation, ongoing staff training is essential. Although there has been a proliferation of training programs over the past decade, many training programs do not transmit the knowledge and skills that all levels of child welfare staff and foster parents need to have in order to deliver effective and efficient foster care services. Competency-based training programs for workers, supervisors, administrators, and foster parents are needed to ensure the delivery of family-centered, culturally sensitive and community-based services.

Foster Care Reconceptualized

In keeping with the changes detailed above and the new opportunities afforded by the family preservation and support legislation, the child welfare system faces a major challenge: reconceptualizing foster care. A reconceptualized foster care system will reaffirm the goals of P.L. 96-272 within a broader, family-centered context. Almost 17 years after the landmark child welfare legislation, there is an added dimension to child welfare work. While keeping children with their families and reunifying children and families continue to be our primary goals, there is a broader recognition that families come in a variety of forms, that our work must be guided by a thorough assessment of the family, and that our interventions must engage the whole family in order to be successful. For those children who cannot stay at home or return to their families, we must work toward other permanent family-centered outcomes such as adoption, which will provide permanent families for children.

As the process of reconceptualizing foster care is undertaken, we need to capitalize on new knowledge coming out of reform efforts already underway in many states to redesign foster care as a meaningful component of the newly emerging child welfare system that supports family preservation and support, as well as permanency planning. In approaching and outlining strategies to accomplish this task, it is important to understand the context of the current crisis in the broad child welfare system, and within that broad system, to understand, the current crisis in

foster care, the nature and characteristics of the newly emerging child welfare system, the implications of this emerging system for foster care and for permanent homes for children, and how recent legislation supports implementation of the reconceptualized system. In addition, it is important to identify the primary themes that underlie a reconceptualized foster care system as they provide a framework for specific strategies.

The current **crisis in child welfare** is not newly arrived. Its origins lie in at least three national trends that have been apparent for some time. The first is a wholly desirable heightening of societal expectations and standards for acceptable family functioning. Since the 1960s, states have steadily broadened the definition of child abuse and neglect and clarified and expanded the mandates for reporting suspected child maltreatment. At the same time, there has been increased public sensitivity to the symptoms and signs of child endangerment. The second contributor to the crisis is the growing number of families who by virtue of poverty, discrimination, family structure, and other factors, are at increased risk of child abuse and neglect. A number of factors, as previously discussed, have converged to undermine the resilience and coping capacity of families: poverty, unemployment, homelessness, substance abuse, and HIV/AIDS, as well as declining informal and extended family supports. The third contributor lies in the overall failure of public child welfare policy and practice to respond to the fundamental economic and societal changes that have overwhelmed increasing numbers of families. Public policy has tended to confine the state's authority to intervene on behalf of children to those circumstances in which a family has demonstrably failed to meet accepted social standards for parental performance. Those standards, however, gradually have increased to demand more in terms of parental performance, while at the same time, the functional capacity of many families has declined. The result has been an inevitable demand on a still largely reactive and remedial child welfare system, a demand which has steadily exceeded the system's capacity to keep pace. Without a basic reorientation in public policy and agency practice, the current cultural, economic, and demographic trends appear certain to prolong this child welfare crisis indefinitely into the future.

The crisis in child welfare has been played out in a number of ways in agency policy and practice, with harmful results for the children and families the system was designed to serve. These effects are evident throughout the system—ranging from the way in which agencies respond to reports of child abuse and neglect to the way in which foster care services are designed and delivered and permanency planning is implemented. The public child welfare system currently is overwhelmed by the dramatic increase in the occurrence, recognition, and reporting of child abuse and neglect, and intrafamily conflict. Too often, triaging is the way agencies cope with this increase, and too often, triaging results in nonresponse. When the system does respond, the assessment of risk is too often hasty and incomplete, and in some cases, tragically mistaken. The mistakes range from inadequate recognition of real danger to unwarranted intrusion. Equally alarming is the deteriorating quality of the responses to substantiated cases of child abuse and neglect. In those cases when placement in foster care is not recommended, the extent of intervention frequently has declined to unsystematic referrals, sporadic monitoring, and unwarranted hope that all will be well. Family support and ongoing services to ensure family stability and child safety may rarely be available.

The nation's **foster care system,** as part of the larger child welfare system, is likewise in **crisis**. To a growing extent, placement in care is the system's response. The increasing admissions to foster care services, however, are outstripping the availability of appropriate out-of-home care

resources. Overcrowding of group care facilities, assignment of children to unnecessarily restrictive placements in light of their needs, and the temporary (and sometimes prolonged) warehousing of youngsters in shelters as they await placement, are symptomatic of the current crisis. Foster care also has been caught up in the debate that pits those in favor of "protecting children" against those invested in "preserving families." For some, foster care is seen as antithetical to preserving families and, therefore, a "bad" service choice for all children; for others, foster care is viewed as a necessary and preferred vehicle for protecting children from maltreating "bad" families. In the face of this debate, the value and role of foster care has become the subject of controversy, with questions raised about the part that foster care plays and should play within the broader child welfare system.

Simultaneously with this crisis, however, the **child welfare system is experiencing the beginning of a reconceptualization.** It appears to be on the verge of a major paradigm shift. Our faith in our current ways of caring for children and, particularly, children and families who are experiencing difficulties, is wavering. Traditional service approaches, which have defined child welfare practice for several decades, clearly do not stand up to the demands generated by the current crisis. Consensus is growing that a new paradigm, a new way of thinking about and doing business, is needed if we are to achieve the goals of health, well-being and safety for children and families.

The thinking that has emerged over the last decade has been called "family-centered," "family-focused," and "family-based." In essence, it is an approach which focuses on the needs and welfare of children within the context of their families and their communities. It views the family as central to the child's well-being and seeks family-based outcomes for all children and young people. This approach was prompted by the work of Maas, Freud and Solnit, Fanshel, and others, who collectively brought attention to children's needs for permanence and for family and the potentially negative impacts of unplanned placement on children; and the work of Pike and Emlen who demonstrated that the child welfare system can work with families toward reunification while achieving other permanent family options for children who cannot return home. Much work has been done in developing relevant theoretical and practice frameworks, such as ecological and systems theory, cognitive and behavioral theory, and a variety of family therapy modalities. These frameworks have informed the work of such practitioners as Bryce and Lloyd, Kinney and Haapala, Showell and Allen and others, as they have pioneered approaches to working with families—approaches that are at the heart of family-centered practice.

The shift to families and communities as the locus of child welfare services parallels shifts that are occurring in other fields, such as mental health and developmental disabilities, as well as the trends in our broader society. It is a shift toward a more participatory and horizontal approach in the workplace and in service delivery, one that begins by listening to the client (the family), focuses on self-sufficiency as well as caregiving, is centered in the home and community, values and embraces diversity, and is nonhierarchical in its approach to information sharing and problem solving. At its core, family-centered practice recognizes the strength of family relationships and builds on those strengths to achieve optimal outcomes for children and families.

One particularly significant development that has supported this shift in emphasis to families and communities is **the Family Preservation and Family Support Program (P.L.103-66)**, the first

major federal legislation addressing children since P.L. 96-272. Importantly, it translates current family-centered theory and practice into public policy and requires states to engage in a comprehensive planning process for the development of a "meaningful and responsive family support and family preservation strategy" (HHS Program Instruction Highlights, January 1994).

In conjunction with the theory and practice trends already being implemented, The Family Preservation and Family Support Program provides an important opportunity to implement a **reconceptualized foster care system** based upon our new recognition of children's connections to and embeddedness in their families and their communities. This new understanding can be expressed in five broad themes: the importance of family to children; children's lifelong connections to their families; the uniqueness of families; the shifting availability of family members; and the need to broadly define family or family-like support.

Families are always important to children. Because families represent the most basic and important social unit in American society, it is essential that children have every opportunity to grow and develop within their families of origin whenever possible or with another family through adoption when their own families cannot provide the ongoing care and support that will assure their safety. Stability in living arrangements and continuity and security in the parent-child relationship are essential. All children need a stable and continuous relationship with a nurturing person or persons in order to develop physically, socially, emotionally, intellectually, and morally.

No matter how chaotic or troubled, families are always central to positive outcomes for children. Regardless of our initial diagnosis and regardless of the intervention, most children and youths return to their families. For example, in 1990, 67% of children and youths in out-of-home care were reunified with their families or placed with a relative or other caretaker following placement compared to a rate of 50% in 1982; this represents a 57% increase in the number of children who returned home since 1984 (Tatara 1993). Clinicians estimate that 90% of those who enter foster care and do not immediately return home, ultimately will return home; and as many as 60% of youth who are being prepared to live independently, upon discharge, return to live with their families (DeWoody et al. 1993).

Given the reality of out-of-home care, a reconceptualized foster care system must have as a primary goal the preparation of children, youths, and their families to live together more successfully. The system should be oriented toward assuring that out-of-home placements are not undertaken until all reasonable efforts to preserve families have been thoroughly explored. Placement of children into foster care must occur only when the safety or well-being of the child is jeopardized and services to the family cannot remove this jeopardy. Foster care must be seen as a temporary service, oriented toward reunifying the family as quickly as is safe for the child or implementing other permanency options promptly if reunification is not possible.

Children need a life-long connection to family. Even for children who cannot physically return home—even for those from the most troubled families—their sense of self, ability to cope with and resolve loss, and ability to form new and more lasting attachments are strengthened if they have had an opportunity to work through family issues (Fahlberg 1991; Jewett 1982), particularly when they can work through these issues directly with their family members. Practice has not always honored this theme. Sometimes, we have sought to shield children from additional

rejection or further emotional trauma by distancing them from their biological families. Or we have tried to protect foster parents, other care providers, or ourselves from the disruption that may accompany family involvement. Too often, we cite family members' seeming lack of interest or participation in the life of the child as a reason for not supporting family involvement rather than as an indicator that we must find different ways of understanding and engaging families. Never by ignoring families do we make families go away; they are always there in the minds and hearts of the children.

The theme of children's lifelong connection to family means that in a reconceptualized foster care system, agencies and social workers must have the commitment, capacity, and courage to fully involve families and, with family involvement, to actively pursue reunification or other permanent family solutions for children.

Families and family members are unique. Child welfare service providers must take into account the individual developmental needs of the child, the child's family of origin, and the foster family, including the physical, psychological, and social needs of each. Children and families deal with different developmental issues at different stages of family life, and these must be recognized, understood, and addressed. In addition to developmental needs, family uniqueness is also expressed in culture. Foster care, consequently, must be truly community-based and culturally responsive to the characteristics of the children and families within the community. By implication, children should be placed with families within their own cultural groups, neighborhoods, and communities whenever possible.

To adequately meet the unique and individualized needs of families, foster care should be based on a team approach that includes the foster family, the child's social worker(s), the child's family of origin, and the child, all of whom should actively participate in the development and implementation of the permanency plan. The team also should reflect the integration of foster care with other child welfare services and other service systems. Child welfare should work in collaboration with the juvenile justice, mental health, developmental disabilities, education, public health, substance abuse and medical assistance systems to assure that the needs of children and families are met regardless of where they first encounter the public system of services.

As **families change over time, so does the availability of various family members** as resources to the child. We are often surprised when we reach out to families, including those who are listed in the case record as "not available," to learn that a parent or other family member really does want to be a resource for a child. We also are surprised when parents who initially seemed resistant and hostile are the first to "get their lives together" because we stayed with them long enough that they could feel supported. The reality that families and the individuals within those families can and do change calls for a reconceptualized foster care system that has the capacity to more fully understand families from the beginning of the system's involvement with them, including an understanding of their strengths; appreciation of the dynamic nature of families; and subscription to the belief that family members can change.

A **broadened definition of family or family-like support** and renewed valuing of all those who can contribute to a child and his/her family's well being directs us to look to a variety of individuals and institutions to help families and children and define "helping" in more inclusive and

less conventional ways. The family preservation and support movements, as well as successful self-help efforts in communities across the country, have taught us that formal modes of helping such as "counseling," "therapy," and "treatment," are of limited value unless they are preceded by or accompanied by other kinds of help and provided by a variety of helpers. For example, a church-sponsored parent support group may be the greatest source of help for a parent whose child has returned home from foster care.

The message for a reconceptualized foster care system is that we need to find ways to recognize and build on the strengths of a wide array of potential helpers, including informal care providers, foster parents, and parents and to make optimal use of all potential resources, especially those in the child's family and community.

The **Family Preservation and Family Support Program** provides an excellent vehicle for beginning to reconceptualize foster care in light of these themes. First, it defines families broadly, including adoptive, foster, and extended families in addition to biological families. It recognizes the importance of supporting and strengthening families when children are in foster care or with relatives and when they have become part of a new family through adoption or guardianship. It recognizes the diverse family options that must be available to children and their families. Second, the legislation supports the reconceptualization of foster care in its definitions of family preservation and family support services. In defining family preservation services, the legislation specifically refers to "service programs designed to help children...return to families from which they have been removed; or ...be placed for adoption, with a legal guardian, or...in some other planned living arrangement." Family support services are defined as "services to promote the well-being of children and families...(and) to increase the strength and stability of families (including adoptive, foster, and extended families)." The legislation is designed to support and strengthen families for children "in the system" as well as those who have not yet entered the system, and to build our capacity to work with families whose children are in out-of-home care in order to return children home or achieve other lasting family connections for them.

The themes that underlie the reconceptualization of foster care—families are important, children have lifelong connections to family, families and family members are unique, families change over time, and family must be broadly defined—are fundamental to the realization of a family-focused foster care service system. They provide the substantive framework for moving forward. Equally important is how we go about changing the system in a way that honors the spirit of the principles as well as the specific content of each.

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This fact sheet just came in from The Adoption Exchange.

Children Who Wait for Adoption

An estimated 100,000 US children in foster care are waiting to be adopted. Thousands more enter the system each year. According to government statistics they most often will be returned to their families of origin within 60 days of entering foster care. However, if they do not return home in those first two months, the chances that they will EVER have permanent parents of their own is less than 25%. This means that thousands of children are being raised by the government.

Government is a notoriously poor substitute for family. *Family* is where values are taught, where children learn commitment and responsibility. National studies reflect that the longer children remain in foster care, the greater are the chances that they will have documented emotional problems, use illegal drugs, run afoul with the law, give birth out of wedlock, and/or be in jail or on welfare (Westat, 1995).

Research reflects that stability increases the chances a child will grow up to be employed and an emotionally healthy citizen.

A cost-effective way to ensure that at-risk children will grow up to be contributing adult citizens and to curb crime, is to provide an adoptive family for each child in the foster care system who will not be returning to his/her birth parents.

The children wait for us to act on their behalf. They waited while child protection staff exhausted attempts to rehabilitate their abusive parents; they waited through exhaustive court proceedings that finally terminated parental rights and rendered them free for adoption. And now they wait in foster homes and residential treatment centers for someone to claim them for adoption. While they wait, they are growing up without stability, guidance and love.

- ♥ 71% are of minority heritage
- ♥ 45% are over 8 years old
- ♥ 44% are sibling groups of two or more
- ♥ 15% are developmentally disabled
- ♥ All have experienced unspeakable abuses and neglect

Since the children have experienced one rejection after another, they scarcely dare to make an emotional attachment to an adult. They hope desperately to belong, and they fear that they are not good enough. What they need is safety and permanence, to be loved for who they are, and to be given the ordinary opportunities to learn and grow that can only come in a family.

CHILDREN IN THE FOSTER CARE CHILD WELFARE AND ADOPTION SYSTEMS AT A POINT IN TIME

A point in time analysis of the child welfare system shows how many children are currently in each status: how many children are in foster care, how many are under adoption plans, and how many are now receiving adoption subsidies. Table 2 summarizes the numbers of children in these situations at a point in time.

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Children in Foster Care	
1. Number of children in foster care.	486,000
2. Number of children in Title IV-E foster care.	260,737
Foster Care Children Awaiting Adoption	
3. Number of children in foster care with a goal of adoption or guardianship.	100,000
4. Percentage of children with adoption plans who have "special needs."	70%
5. Percentage of children with adoption plans who are over age five.	66%
Adopted Children Receiving Federal Subsidies	
6. Number of children receiving Title IV-E adoption assistance payments.	106,880

Sources: Items 1., 4., and 5. Estimates from LTG/American Public Welfare Association, Voluntary Cooperative Information System.
Items 2. and 6. U.S. House of Representatives, Ways and Means Committee, *Green Book - 1996*, data for 1995.
Item 3. Estimate by Children's Bureau, U.S. Department of Health and Human Services.

Alternate quote for top of accomplishments fact sheet:

By working together across party lines at every level of government, in business, religious groups, communities, and in our homes, we can make sure that every child in America grows up in a safe and nurturing home. -- President Clinton, February 14, 1997

"ADOPTION 2002": SAFE AND PERMANENT HOMES FOR ALL CHILDREN

> "Putting this plan into action today will mean that we are ensuring that no child will languish in foster care when loving families are out there ready, willing and able to open their hearts and their homes."
> -President Clinton, February 14, 1997, on receiving the "Adoption 2002" report

"Adoption 2002" is a report that outlines President Clinton's ambitious legislative and administrative agenda to move children more rapidly from foster care to safe, permanent homes. Developed by the Department of Health and Human Services at the President's request, the report is a blueprint for bipartisan Federal leadership in adoption and other permanency planning for children in the public child welfare system. "Adoption 2002," takes its name from one of the President's central goals -- to at least double by the year 2002, the number of children adopted or permanently placed each year. The Department of HHS presented the report to the President on February 14, 1997, in response to his Executive Memorandum dated December 14, 1996.

"Adoption 2002" outlined for the Administration an ambitious action plan for federal leadership to promote adoption and other permanent placements for children in foster care, including new assistance to states to set and meet urgent new adoption targets. Also central to the plan are steps to clarify, through legislation and guidelines to states, the laws, such as the "reasonable efforts" standard, that govern whether and when to remove a child from his or her family and when to reunify them. The re

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agenda also includes the created President also committed to creating sensible financial incentives to states to increase adoption rates, and to providing technical assistance to states, courts and communities to move children more rapidly from foster care to permanent homes. In developing the report, HHS conducted an extensive consultation process with leaders in Congress, states, child welfare organizations, child welfare experts, civic leaders and hundreds of foster and adoptive parents.

Specifically, the recommended actions to accomplish the President's goal include:

1. Doubling the Number of Children Adopted or Permanently Placed by 2002:

Creates Incentives for States: To focus on successful outcomes for children, HHS will work with states to set specific numerical targets leading to doubling by the year 2002, the number of children adopted or permanently placed each year. To assist states in reaching their targets, the President's budget proposal includes $10 million for technical assistance and grants to state agencies, courts and communities to help them develop: an outcome-based approach to permanency placement; collaborative efforts to encourage placements across geographical boundaries; and models to recruit adoptive families.

To encourage and reward states for their efforts, the Clinton Administration will propose legislation to offer a **new financial per-child bonuses** to states that increase the number of adoptions from the public child welfare system. The bonuses will pay for themselves, as bonus payments are offset by savings in foster care. HHS will publish annual reports on the progress states are making toward their adoption targets and will work with foundations and intergovernmental organizations to promote public annual recognition awards to states for successful, innovative accomplishments.

Breaks Down Racial and Ethnic Barriers to Adoption: HHS will issue guidance that outlines appropriate implementation of and strict penalties for non-compliance with the Multiethnic Placement Act (MEPA), as amended by the Interethnic Adoption provisions (IEP) of the Small Business Job Protection Act of 1996. HHS also will provide technical assistance to states to ensure that states comply with these laws. HHS will continue

its aggressive implementation of MEPA which prohibits adoption agencies from denying or delaying placement of a waiting child based on race, color, or national origin.

II. Moving Children More Rapidly From Foster Care to Permanent Homes:

Clarifies Reasonable Efforts: Under existing law, states are required to make "reasonable efforts" to both prevent the unnecessary removal of children from their families and to reunify children who have been placed in foster care with their natural families. HHS will issue guidance and work with Congress to seek legislation that changes federal law to clarify the "reasonable efforts" provision: to explicitly include the health and safety of the child as the first priority in determining whether a child should be removed from his or her home; and to introduce for the first time a new standard that "reasonable efforts" be made by states to secure permanent homes for children in foster care who cannot return safely to their homes and for whom adoption is the goal.

Decreases Procedural Delays: To speed up the process of reviewing a child's status in foster care, HHS will **propose to change the federal law to require that a court hearing be held no later than 12 months after a child enters the foster care system**. Current law requires that a court hearing be held within 18 months after a child's placement in foster care. HHS also will propose to change the title of that hearing from "dispositional hearing" to "permanency planning hearing" to encourage the focus of deliberations for the child to be on a finding a permanent, safe home.

Helps States Identify and Address Barriers to Permanency: To encourage and support states to identify and overcome the barriers to permanent placements for children in foster care, the President's budget proposal includes **$10 million for HHS to establish competitive grants to up to 15 states** to develop model strategies to reform permanency planning and adoption services.

HHS Also Approves Ohio's Child Welfare Demonstration Project: Today President Clinton announced approval of Ohio's innovative managed care demonstration project, the fifth child protection waiver granted by the Clinton Administration. Under existing law, HHS has the authority to conduct demonstrations using waivers to as many as 10 states. HHS will propose a change in federal law to expand the department's authority to grant additional child protection waivers to test alternative permanency arrangements and other innovations.

Barriers to Adoption

Very little research has been conducted regarding adoption delays and barriers. Most of the information below is derived from a 1991 OIG report entitled *Barriers to Freeing Children for Adoption*. This report found that of the twenty states surveyed, best case estimates of the time between placement and adoption was 30 months (2½ years) and the worst case estimates were 108 months (9 years).

- **Delays in Child Welfare Agency Practices:** The 1991 OIG report found that "over 75% of respondents...indicate that the inability of the child welfare agencies to meet the 'reasonable efforts' standard to the satisfaction of State courts in a timely manner is the primary barrier to implementing permanent plans of adoption."[1] Typically delays occur in providing services that might address the families' presenting problems. Until services have been provided/offered (except in extreme cases), agencies cannot move toward adoption. In practice, adoption is rarely considered as a goal until the 18-month dispositional hearing.

- **Delays in Court/Judicial Practices:** Once an agency decides to request termination of parental rights, factors in preparing the case for court and having the case heard may also cause delays. For instance, in many jurisdictions there are long waits to get a case on the court's calendar; state attorneys may be reluctant to pursue cases except where they will clearly prevail; there may be limited staff resources devoted to preparing cases for court; and judges may refuse to grant TPRs because there has been inadequate documentation of reasonable efforts. In addition, some States' adoption laws include timelines that may preclude early termination of parental rights.[2]

- **Delays Related to Staff Beliefs and Attitudes:** Researchers in California have found that many child welfare staff and judges believe children are not disadvantaged by remaining in foster care long periods of time.[3] They apparently believed that foster families would be just as stable as adoptive homes. This despite evidence that children in foster care frequently moved between placements. For instance, a third of infants remaining in care two years in California had three or more placements during that time; for older children multiple placements were even more common.

  Many judges have a relatively narrow view of which children are adoptable and may be reluctant to terminate parental rights in cases outside that range.[4] In addition, child welfare workers may be reluctant to move toward adoption quickly in any but the most egregious cases. If no adoptive home has been identified, workers and judges may be reluctant to terminate the parental rights of the child's existing family because they have nothing to replace it with.

- **Delays Because of Factors Related to the Child and Family:** Many children with adoption plans have characteristics that make finding a suitable adoptive home difficult. For instance, most: **are older children** (60% over 5 years old); **are members of sibling**

groups (60% of infants entering foster care in CA have 3+ siblings); **have significant emotional, developmental, or physical problems**.

Significant numbers of adoptions of children from public child welfare agencies do not last. In approximately 10-15 percent of cases these adoptions disrupt and the child is returned to care. Guardianship arrangements disrupt even more frequently.

1. Office of Inspector General (1991). *Barriers to Freeing Children for Adoption*. Washington, DC: DHHS.

2. OIG Report, 1991.

3. Richard Barth, University of California at Berkeley, personal communication.

4. OIG Report, 1991.

THE FLOW OF CHILDREN TO ADOPTION THROUGH STATE AND LOCAL CHILD WELFARE AGENCIES

The annual flow of children through State and local child welfare systems involves a series of steps. these systems identify children who have been abused or neglect and investigate these incidents. If the incidents are confirmed, children may receive services in their own homes, or they may be removed to the foster care system. Children removed from their homes may be returned home, may be returned to relatives, may be adopted, or may "age out" of the system or run away. More than one million children each year are confirmed as abused or neglected. Table 1 summarizes experiences of those who enter foster care, how long they stay in care, and how many move to adoption or return home.

Table 1. ESTIMATED ANNUAL FLOW OF CHILDREN THROUGH CHILD WELFARE SYSTEMS	
Foster Care -- Entry and Length of Stay	
1. Number of children who enter foster care each year.	254,000
2. Percentage who leave care within one year.	35%
3. Percentage who leave care within three years.	67%
4. Percentage still in care after three years.	33%
	100%
Foster Care -- Where Children Go When they Leave Care	
5. Percentage of children reunified with their parents or relatives.	69%
6. Percentage of children who exit to adoptive families.	11%
7. Percentage of children who exit to other settings (age out, run away, etc.).	20%
Adoption	
8. Number of foster care children adopted or placed in permanent guardianship arrangements.	27,000
9. Percent of children who waited two years or more for adoptive placement.	67%

Sources: Items 1., 2., 3., 4. 6., 7., and 9. Estimates from LTG/American Public Welfare Association, Voluntary Cooperative Information System.
Item 8. Estimate by the U.S. Department of Health and Human Services, Children's Bureau.

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Table 1. ESTIMATED ANNUAL FLOW OF CHILDREN THROUGH CHILD WELFARE SYSTEMS	
Foster Care -- Entry and Length of Stay	
1. Number of children who enter foster care each year.	254,000
2. Percentage who leave care within one year.	35%
3. Percentage who leave care within three years.	67%
4. Percentage still in care after three years.	33%
	100%
Foster Care -- Where Children Go When they Leave Care	
5. Percentage of children reunified with their parents or relatives.	69%
6. Percentage of children who exit to adoptive families.	11%
7. Percentage of children who exit to other settings (age out, run away, etc.).	20%
Adoption	
8. Number of foster care children adopted or placed in permanent guardianship arrangements.	27,000
9. Percent of children who waited two years or more for adoptive placement.	67%

Sources: Items 1., 2., 3., 4. 6., 7., and 9. Estimates from LTG/American Public Welfare Association, Voluntary Cooperative Information System.
Item 8. Estimate by the U.S. Department of Health and Human Services, Children's Bureau.

CHILDREN IN THE FOSTER CARE CHILD WELFARE AND ADOPTION SYSTEMS AT A POINT IN TIME

A point in time analysis of the child welfare system shows how many children are currently in each status: how many children are in foster care, how many are under adoption plans, and how many are now receiving adoption subsidies. Table 2 summarizes the numbers of children in these situations at a point in time.

Table 2 CHILDREN IN THE FOSTER CARE AND ADOPTION SYSTEMS AT A SINGLE POINT IN TIME	
Children in Foster Care	
1. Number of children in foster care.	486,000
2. Number of children in Title IV-E foster care.	260,737
Foster Care Children Awaiting Adoption	
3. Number of children in foster care with a goal of adoption or guardianship.	100,000
4. Percentage of children with adoption plans who have "special needs."	70%
5. Percentage of children with adoption plans who are over age five.	66%
Adopted Children Receiving Federal Subsidies	
6. Number of children receiving Title IV-E adoption assistance payments.	106,880

Sources: Items 1., 4., and 5. Estimates from LTG/American Public Welfare Association, Voluntary Cooperative Information System.
Items 2. and 6. U.S. House of Representatives, Ways and Means Committee, *Green Book - 1996*, data for 1995.
Item 3. Estimate by Children's Bureau, U.S. Department of Health and Human Services.

THE WHITE HOUSE

WASHINGTON

To: Frank Farrow
Ralph Smith

From: Carol Rasco
Jeremy Ben-Ami
Lyn Hogan

Date: November 26, 1996

Re: December 3rd Meeting On Child Welfare

We look forward to meeting with you both on Tuesday, December 3 from 1:00 p.m.-3:00 p.m. in Carol Rasco's office.

Attached, please see a rough outline of our ideas on child welfare reform. We look forward to your comments and any additional thoughts on reform you wish to share with us.

This is an internal and confidential document, so please do not share it or discuss it with anyone outside of our meeting.

Thank you.

cc: Pauline Abernathy, Office of the First Lady
Nicole Rabner, Office of the First Lady

~~CONFIDENTIAL~~ **DRAFT**

CHILD WELFARE REFORM CHALLENGES

Establish New Federal Goals for Child Welfare: Safety and Permanency

Challenge: The system's present focus on family preservation/reunification sometimes leads to children being placed in unsafe situations and to children remaining in foster care when reunification is neither appropriate nor possible. Safety and permanency should be the goals of the child welfare system. Family reunification should be one option available under these goals.

Encourage Adoption and Other Permanency Options Such as Subsidized Guardianship

Challenge: Barriers to adoption leave adoptable children in foster care too long, preventing children from having a safe, permanent home. Federal action can help increase adoptions and other permanency options, including subsidized guardianship, for waiting children in the foster care system.

Improve the Court Process Through Federal Leadership

Challenge: The judicial system is not adequately equipped or organized to deal with the flow of foster care and adoption cases in a way that fully emphasizes safety and permanency in a timely fashion. The Federal government should consider taking a leadership role in court improvement.

Restructure Federal Funding of the Child Welfare System To Create Incentives To Measure and Meet Federal Goals and Spend Dollars Wisely

Challenge: Current funding structures create the wrong incentives, for example rewarding foster care over adoption, and encouraging process instead of results. Consequently, money is wasted, system goals are unclear, and, most important, children and families are not well served. The Federal government must restructure funding to create incentives for states to measure and meet system goals and to efficiently and cost-effectively deliver services.

Restructure Transition To Independence Programs for Children Who Age Out of the Foster Care System

Challenge: At 18, foster children "age-out" of the foster care system, often without adequate preparation or arrangements for independent living. Federal funds for independent living are available, but funds are insufficient and programs inadequate. Often foster kids transitioning into independent living end up on welfare and/or homeless. The Federal government should consider guaranteeing this small population (about 20,000 nationally) basic necessities including a home, education, food, and clothing.

Improve Training & Professionalism in Child Welfare and Related Disciplines

Challenge: Currently, available training for caseworkers, and interdisciplinary training for others who interact regularly with the child welfare system, is inadequate. Further, professionalism and standards in the social work profession are lacking. Federal leadership could encourage the private sector to create better professional standards for caseworkers, and to expand successful training programs.

Address the Role of Substance Abuse and Mental Health in Child Welfare

Challenge: Studies indicate that up to 60 percent of foster children suffer from moderate to severe mental health problems. Further, surveys indicate that alcohol and drug abuse is a serious problem for between 1/3 and 2/3 of families in the child welfare system. The Federal government should acknowledge these interconnections and address them accordingly.

Improve and Expand Federally Funded Prevention Efforts

Challenge: The child welfare system continues to disproportionately spend dollars addressing abuse once it occurs, rather than on preventing the initial abuse. A reformed child welfare system must support *targeted*, coordinated, community-based prevention efforts that work, and start them early enough to prevent abuse and neglect from occurring *before* it is brought to the attention of the state.

Launch a Public Education Campaign on Child Welfare Issues

Challenge: While mandated reporting of abuse and neglect has improved, the public is still wholly unaware of the deficiencies in the system and the number of substantiated abuse and neglect reports that go without services every year. Public knowledgeable about child welfare issues will help solve the problems.

Action Steps for Reform

I. Establish New Federal Goals for Child Welfare: Safety and Permanency

Amend and strengthen the 1980 P.L. 96-272, the Adoption Assistance and Child Welfare Act of 1980, and later amendments to P.L. 96-272, as well as the 1974 P.L. 93-247, the Child Abuse and Prevention and Treatment Act (CAPTA), and the Family Preservation and Support Program in OBRA 1993.

A) Establish Safety

- Draft a simple statement of legislative intent indicating that the first priority in all child welfare decision-making is child safety. Reinforce this three ways:
    - Specifically state that reasonable efforts do not include efforts that place a child in danger;
    - During hearings, require those involved (judges, hearing officers, child abuse workers) to make specific statements of fact which indicate how the child will be safe in family preservation or reunification decision-making;
    - Lawyers and guardians ad litem argue ONLY for decisions that are consistent with child safety (not necessarily the wishes of the child which, a majority of the time, are reunification regardless of the home situation).
- Amend OBRA '93, the Family Preservation and Support Program, so that the plan requirements include the following:
    - Clarify that the first priority is always child safety;
    - Careful risk assessment to exclude dangerous families;
    - A high level of in-home visitation to supervise children's safety;
    - A comprehensive range of services to increase families' capacities to protect their children;
    - Partnerships with communities.
- Amend title IV-E state plan requirements to include:
    - Minimal standards for in-home visitation;
    - Forensic pediatric examination for sexually and physically abused children;
    - Regular pediatric care for foster children;
    - A timely response AND resolution for each allegation of abuse and neglect;
    - Background screening of alleged abusers and foster and relative caretakers including criminal and abuse screening;
    - Risk assessment;
    - Training for foster parents, including relative caregivers and child abuse workers.

B) Establish Permanency

- Amend P.L. 96-272 to reject unreasonable efforts by recognizing that there are classes of parents for whom reasonable efforts and family preservation and reunification are inherently unreasonable, including:

  - Parents who kill or maim children;
  - Parents who aggressively sexually assault children;
  - Parents who have histories of violent criminal behavior;
  - Parents who abandon children in life-threatening circumstances; and
  - Parents with long-term and chronic addictions.

- Require reasonable efforts for legal permanency:

  - Amend P.L. 96-272 to acknowledge that children have a compelling need to have permanent homes for life and require reasonable efforts be made to achieve legal permanency.

- Amend P.L. 96-272 to prohibit children under the age of six years to remain in long-term care with foster parents who are unwilling or unable to adopt.

- Amend P.L. 96-272 to change the term" dispositional hearing" to "permanency planning hearings", shorten the period between a child's entry into foster and his or her first dispositional hearing from 18 months to one year, followed six weeks later with either reunification and permanency proceedings.

- Amend P.L. 96-272 to prevent numerous foster care placements.

II. Encourage Adoption and Other Permanency Options

- Develop an action plan to double the number of adoptions or other permanent placements out of the foster care system by the year 2002, including offering technical assistance and guidance to the states form the Federal government.

- Once family reunification is deemed not possible, require states to move without delay to terminate parental rights, or, when not possible, create a permanency option. State court systems must tight time standards for addressing permanency after the dispositional hearing.

- Develop a strategy to aggressively implement the Multi-Ethnic Placement Act.

- Offer states technical assistance to aggressively pursue adoptions for special needs children.

- Amend title IV-E of the Social Security Act to allow title IV-E foster care payment funds to support subsidized permanent kinship care, and emphasize various forms of subsidized guardianship/kinship care as permanency options when adoption is not possible.

- Implement demonstration projects, and study their results, to allow IV-E funds to subsidize permanent guardianship, whether or not it is a kinship placement.

- Set national goals to increase the number of children who are adopted annually and offer monetary per-child bonuses to states for each child adopted over the state goal.

- Prepare a monograph for states on subsidized guardianship as a permanency option when adoption isn't possible.

III. Improve the Court Process Through Federal Leadership

The Federal government should undertake a systematic look at court practices around the country, develop a consensus on court improvements, and court evaluation, and offer states technical assistance to implement the improvement.

- Amend federal law to entitle every child to be safe and protected from abuse and neglect (as discussed earlier in point IA).

- Require all parties in Juvenile Court proceedings to be responsible for child safety.

- Use the Presidential bully pulpit to strongly encourage states to implement the following court reforms already working in some venues:
    1) Enact strict time schedules for the completion of all stages of court proceedings including shelter care, trial, reviews, and the termination of parental rights;
    2) Keep tight hearing schedules and adhere to those schedules;
    3) Set reasonable judicial caseloads that allow realistic scheduling;
    4) Implement same judge/same case procedure, creating individual judicial calendars so the same judge keeps a case from start to finish;
    5) Require child abuse and neglect practitioners -- judges and lawyers -- to be experts in family and juvenile law and, for those states that don't have them, put in place a family court, and;
    6) Encourage the court system to collaborate and plan with other involved organizations.

- Increase Federal grant money for expansion of interdisciplinary training involving Judges and other court personnel -- expand or model after the National Council of Juvenile and Family Court Judges training program.

IV. Restructure Federal Funding of the Child Welfare System To Create Incentives To Measure and Meet Federal Goals and Spend Dollars Wisely

Financial incentives should encourage rapid movement to permanent placement rather than lengthy stays in foster care, and should reward success when states meet the system goals. We should also explore the application of managed care principles.

- Structure financial incentives to encourage rapid movement to permanent placement rather than lengthy stays in foster care.

- Study the application of managed care to child welfare and encourage states with waiver authority to apply managed care principles to their reform efforts.

- Collect data on the results of the Federal Family Preservation funds spent since the program inception in 1993, and determine how to improve cost-effectiveness and success.

V. Improve the Transition To Independent Living Programs for Emancipated Foster Youth (Population is about 20,000 nationwide)

- Declare national goals for children who must become independent after aging out of foster care. Amend title IV-E state plan requirements to include the following goals:

    - A place to live;
    - Opportunity to continue education;
    - Life skills training;
    - Employment or continued income until employment is secured;
    - Access to health care;
    - Adequate clothing;
    - Availability of key records and documents including birth certificates, driver's license, foster care and health history, etc., and;
    - Ties to community mentors.

- Encourage states to develop employment, housing, and scholarship opportunities for emancipating foster youth by requiring state IV-E plans to specify how they will target local, state, federal and private sector employment, housing and scholarships for higher education opportunities for the emancipated foster youth.

- Amend Federal law to lower the age for participation in the Independent Living Program from 16 to 14 years of age to allow us to engage youth earlier in preparation for this transition into independent living.

- Amend the Higher Education Act to require colleges and universities receiving Federal aid to evaluate their outreach to and retention of former foster youth, and to ensure that these youth are identified and informed of existing Extended Opportunity Programs and Services. (Higher Education Act reauthorization is coming up.)

VI. Improve Training & Professionalism in the Child Welfare Field and Related Disciplines

- Increase Federal grant money for expansion of interdisciplinary training for Judges and other court personnel -- expand or model after the National Council of Juvenile and Family Court Judges training program in Reno, NV and the CIVITAS program in Chicago, IL.

- Create incentives within child welfare laws for training and professionalism.

- Offer guidance and encouragement to the private sector to create an accreditation and certification process for the profession.

VII. Address the Role of Substance Abuse and Mental Health in Child Welfare

- Encourage states to offer coordinated, wrap-around services addressing all aspects of family health including substance abuse and mental health.

- Use existing training funds for interdisciplinary training on the role of substance abuse and mental illness in child abuse and neglect.

VIII. Improve and Expand Federally Funded Prevention Efforts

- Encourage family preservation and support services aimed at keeping families together when services and/or programs have proven track records.

- Evaluate family preservation expenditures to date, evaluate results attained from funds, and make recommendations to improve the programs, and expand efforts for longer-term prevention including early intervention.

- Improve and expand data collection.

- Make available to states technical assistance and guidance for the following activities:
  1. Effective targeting of family preservation;
  2. Implement family preservation services across systems, and;
  3. Disseminate information to states, when available, about effective service models and states' results from using those models.

IX. Increase Public Awareness About Child Abuse and Neglect, the Foster Care System, Adoption and Other Permanency Options

- Develop and lead a public awareness campaign, including use of public service announcements, print materials and the internet, on child abuse and neglect, foster care, subsidized guardianship, and adoption.

- Appropriate Federal funds for such a national campaign.

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THE
EVAN B. DONALDSON
ADOPTION
INSTITUTE

FOR RELEASE:
WEDNESDAY, NOVEMBER 5, 9:00 a.m.

First National Survey on Americans' Attitudes On Adoption Indicates Widespread Ambivalence, Highlights Need for Education

Contact: **Jamie Moss** (201) 493-1027 **Madelyn Freundlich** (212) 360-0270

An unprecedented national survey released today reveals that while most Americans view adoption very favorably or somewhat favorably (90%), many Americans (64%) have never considered adopting a child and about half (49%) believe that adoption is not quite as good as raising one's own biological child.

"The survey illustrates the public's ambivalence and the need for more education on the issue," according to Madelyn Freundlich, executive director of The Evan B. Donaldson Adoption Institute. "The implications of these findings pose significant problems for children who need adoptive homes, as well as major challenges for professionals in the adoption and social service arena."

"One disturbing outcome of the survey is the extent to which we see attitudes toward adoption are significantly related to education, race, and personal experience with adoption," Freundlich says. "The survey results indicate to us that important sectors of American society are ambivalent about adoption and may not see how critical it is for tens of thousands of children in this country who need adoptive families. On the positive side however, for the first time, it also provides data on which to base policy decisions, allocate resources and focus on public education."

According to the survey, the U. S. population generally divides into one of three categories:

- ***Full Supporters*** **(32%)** express unqualified support for adoption.
- ***Qualified Supporters*** **(37%)** have mostly positive opinions about the institution, but some hesitancy to fully embrace it.
- ***Marginal Supporters*** **(31%)** generally are more supportive than not, but less convinced than others of adoption's merits.

Other findings of the survey include:

- Six in ten Americans (58%) have had personal experience with adoption. Those with first-hand experience are more supportive of the institution than those without such experience.

- College educated Americans (48%) are more likely than those with a high school education (23%) to be *Full Supporters* of adoption.

- Women embrace adoption more fully than men. 36% of women are *Full Supporters* compared with 27% of men.

- Whites (35%) are three times as likely as blacks (11%) to be *Full Supporters* of adoption.

- Nearly half (45%) of Americans say family and friends are their main source of information about adoption, while 30% get their information from news sources and 16% from magazines.

- Half (52%) of those surveyed believe children adopted from other countries are more likely than children adopted in this country to have emotional problems, and nearly the same proportion (48%) say children from abroad are less likely to be physically healthy. On the other hand, Americans do not believe that children adopted internationally are any more likely to have trouble in school than children adopted in this country.

Curtis R. Welling, president of the board of The Evan B. Donaldson Adoption Institute and an adoptive parent says, "With these survey results in mind, we need to embark on a public education initiative to educate and provide balanced information about adoption. Adoption has been an important service for children whose birth parents cannot rear them and will remain so only if adoption is viewed positively by prospective adoptive parents."

"Despite the prevailing myth that there is a shortage of children awaiting adoption, the fact is that many children languish in the foster care system for years," Freundlich says. "If we are to place these children without parents in loving homes we need to educate segments of society who are not embracing adoption."

The Benchmark Adoption Survey commissioned by The Evan B. Donaldson Adoption Institute in New York was conducted by Princeton Survey Research Associates. The probability survey conducted in July of 1,554 Americans drew responses from the general population including an over-sample of African-Americans. The margin of error attributable to sampling and other random effects is plus or minus 3 percentage points.

The Evan B. Donaldson Adoption Institute was established in New York in August 1996 as an independent, not-for-profit institute. Its mission is to improve the quality of information about adoption, enhance the understanding and perception of adoption, and advance adoption policy and practice based on reliable information. The survey will be used as the basis of the Institute's programs and initiatives for the coming year.

National Adoption Statistics

In 1992, the last year for which total adoption statistics were available, 127,441 children of all races and nationalities were adopted in the United States
(National Adoption Information Clearinghouse, 1996).

It is estimated that currently about 1 million children in the United States are adopted. (Stolley, 1993).

Adoption and Children in Foster Care

At the end of Fiscal Year 1995, there were 483,000 children in foster care. This number represents a 72% increase over the number of children in care in 1986. (Voluntary Cooperative Information System, 1997).

In 1995, children of color outnumber white children in foster care:
45.1% African American;
36.5% White;
11.3% Hispanic;
1.6% American Indian/Alaskan Native;
1.0% Asian/Pacific Islander; and
4.6% unknown or other racial/ethnic background.
(Voluntary Cooperative Information System, 1997).

The United States Department of Health and Human Services estimates this year that as many as 100,000 children currently in foster care need adoptive families.

According to one study, children in foster care wait for adoption, on average, between 3.5 and 5.5 years. (McKenzie, 1993).

The number of finalized adoptions for children in foster care has remained relatively stable over time, despite the fact that the number of children in foster care continues to grow. In FY 1993 -- the year for which the most complete information is available -- there were 18,000 finalized adoptions of children in foster care. These 18,000 adoptions represent only about four percent of the total number of children in care that year. (Voluntary Cooperative Information System, 1993)

It is primarily younger children who are adopted from foster care. As children age, they are less likely to be adopted. In FY 1990, for example, almost 55% of all finalized adoptions were of children between birth and five years of age. About a third [37.4%] of the adoptions were of children between the ages of 6 and 12 and only a small 7.7% of the adoptions were of children between 13 and 18 years of age. (Voluntary Cooperative Information System, 1993)

In 1990

- 47% of the adoptions of children in foster care were by foster parents to whom the children were not related
- 7% were by relatives
- 42% of the adoptions were by families to whom the children were not related
(CRS Report for Congress, 1997)

International Adoption

The number of international adoptions over the past several years is as follows:
1992 6,536
1993 7,348
1994 8,195
1995 9,679
1996 11,316
(U.S. Immigration and Naturalization Services and U.S. Department of State)

The primary sending countries for children adopted internationally in 1996 were China [3,318 children], the Russian Federation [2,531 children], Korea [1,580] and Romania [554]. (U.S. Immigration and Naturalization Service and U.S. Department of State).

Infant Adoption

The rate at which women relinquish their infants for adoption has declined dramatically. Between 1982 and 1988, 3% of white women relinquished their children for adoption, dropping from 19% in 1965-1972. The rate of relinquishment among black women has consistently been under 2% for unmarried births. (Mosher and Bachrach, 1996).

Who Adopts?

About 200,000 people are, at any one time, seeking to adopt a child.
(Bachrach, London, and Maza, 1991).

Research shows that only 11% to 24% of couples with infertility problems take a step toward adopting a child. (Mosher and Bachrach, 1996).

There are approximately 3.3 adoption seekers for every actual adoption.
(Bachrach, London, and Maza, 1991).

Single parents are adopting in greater numbers. Prior to the 1990s, only a small percentage of adoptions were by single parents - ranging from 2.5% to 5%. (Meezan, 1980; Shireman, 1995). Studies now show that single parents represent a significant percentage of adoptions, ranging from 12% in some communities to one-quarter or more in other communities. (Shireman, 1995).

Adoption and Search and Reunion

In only three states - Kansas, Alaska, and Tennessee - may adopted adults obtain copies of their original birth certificates.

As of November 1996, mutual consent registries were in place in at least twenty-one states. Mutual consent registries permit parties to an adoption to register their willingness to meet at some point in the future, but they allow the release of identifying information only when a birth parent and an adult adoptee both file formal consents to the disclosure of their identities. (Hollinger 1996)

As of November 1996, "search and consent" statutes were in place in at least sixteen states. These statutes provide that when a birth parent, upon being contacted by an individual or agency acting as a "confidential intermediary", consents to the disclosure of his or her identity to the adoptee, the disclosure may then be authorized by a court. (Hollinger 1996)

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THE
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The Evan B. Donaldson Adoption Institute

The Evan B. Donaldson Adoption Institute was formally incorporated in August 1996. It was created with a grant from Spence-Chapin Services to Families and Children after an extensive feasibility study to assess the need for an Institute that would focus on adoption information and awareness. The consensus was there exists a critical need for an independent progressive voice for adoption.

The Adoption Institute, provides knowledge-based policy analysis and development, promotes quality adoption practice, offers training and educational opportunities for adoption professionals working with all members of the adoption triad, provides the media with a more informed understanding of adoption issues based on current research and data, and supports adoption focused research.

In addition to the national public opinion survey released in November for National Adoption month, the Institute is engaged in compiling a comprehensive compendium of the research on adoption. This written product will organize and annotate the major empirical research on adoption since 1986 and will be available in early 1998. In the fall of 1997, the Institute held a two-day conference for adoption professionals on prenatal alcohol and drug exposure.

The Adoption Institute plans to become a clearinghouse of information and research on adoption providing data to families, professionals and policy-makers.

The Executive Director, Madelyn Freundlich, is a social worker and attorney whose work has focused on child welfare policy and practice for the past decade. She and two additional staff members work with a 15 member Board of Directors made up of adoptees, adoptive parents, birth parents and adoption and child welfare professionals. The Adoption Institute is aided by a Practice Advisory Committee and a Research Advisory Committee.

Legislation Currently Pending in the 105th Congress

The pending proposals are intended to promote adoption for children in foster care and make additional improvements in the child welfare system. The legislation would primarily amend child welfare, foster care, and adoption assistance programs under the two titles of the Social Security Act that provide federal funding for these services: Title IV-B (Child Welfare Services) and Title IV-E (Foster Care and Adoption Assistance)

The two major pieces of legislation currently pending in the Congress are:

H.R. 867 Adoption Promotion Act of 1997
Passed by the House on April 30, 1997 by a vote of 416-5

Sen. 1195 PASS Act
Promotion of Adoption, Safety, and Support for Abused and Neglected Children Act
Introduced into the Senate on September 18, 1997
Hearings held before the Senate Finance Committee mid-October 1997
A vote on the bill is anticipated before Congress adjourns for the year

Both these bills elevate the safety of foster children over efforts to reunite them with their families. This becomes a critically important factor for the system's ability to place these children, as well as for the psychological well-being of these children once they leave foster care and are placed with adoptive families. Both bills call for a judicial hearing to determine whether parental rights should be severed (they differ only in time period 12 vs. 18 months). Both require states to make a more concerted effort to find adoptive families for children in foster care. Both provide financial incentives from the federal government to the states to speed adoption.

S. 1195 differs from the House bill in that it re-authorizes and increases funding for the Family Preservation and Family Support Program which is designed to keep families together and reunite families after their children enter foster care. This bill also makes more children in foster care with "special needs" eligible for government aid such as adoption assistance and Medicaid once they are adopted. This would provide additional support for families who adopt "special needs" children.

Because of the differences in the two bills, if the Senate passes S. 1195, a compromise bill will be required. The principal points of contention are that S. 1195 re-authorizes the Family Preservation and Family Support Act and that funding would be needed to expand federal subsidy payments to the states.

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THE
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The Benchmark National Adoption Survey
Spokespeople

Madelyn Freundlich, Executive Director of the Evan B. Donaldson Adoption Institute, is a social worker and lawyer whose work has focused on child welfare policy and practice for the past decade. She formerly served as General Counsel for the Child Welfare League of America and Associate Director of Program and Planning for the Massachusetts Society for the Prevention of Cruelty to Children. She is the author of a number of books and articles on child welfare law, policy and financing. Her most recent writing has focused on the impact of welfare reform on foster care and special needs adoption; interstate adoption law and practice; genetic testing in adoption evaluations; wrongful adoption; and confidentiality in adoption law and practice. Ms. Freundlich holds masters degrees in social work and public health and holds a JD and LL.M.

Katharine S. Legg has served as the Executive Director of Spence-Chapin Services to Families and Children since 1990. As Executive Director, she expanded the agency's adoption programs to include international and special needs adoption and a broad array of post-adoption services. She was instrumental in establishing The Adoption Resource Center, a program providing workshops, seminars, books, and resource materials for those concerned with adoption issues. Ms. Legg serves as a member of the Adoption Action Network, a statewide adoption advocacy group in New York, and is a member of the Adoption Task Force of the Child Welfare League of America. Prior to assuming her current position, she served as Deputy Commissioner of Income and Medical Assistance Programs and as Deputy Administrator of Management, Budget and Policy for the New York City Human Resources Administration. Ms. Legg holds a MBA in Economics from New York University.

Curtis R. Welling, President of the Board of Directors of The Evan B. Donaldson Adoption Institute, President and Chief Executive of Societe Generale Securities Corporation. Prior to joining Societe Generale, Mr. Welling was a Senior Managing Director at Bear Stearns & Company, Inc. He is a graduate of Dartmouth College, Vanderbilt Law School, and the Amos Tuck School of Business. Mr. Welling serves as President of the Board of Directors of Spence-Chapin Services to Families and Children, Trustee of the Adirondack Council, and a member of the Wilton, Connecticut Board of Finance. He and his wife are the adoptive parents of two children.

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THE
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Ms. Jamie Moss
The Evan B. Donaldson Adoption Institute
Media Relations Advisor
201-493-1027

For questions relating to the survey methodology
Princeton Survey Research Associates
Dr. Mary McIntosh
202-293-4710

BENCHMARK ADOPTION SURVEY

REPORT ON THE FINDINGS

Conducted for:
The Evan B. Donaldson Adoption Institute

Conducted by:
Princeton Survey Research Associates

November 1997

TABLE OF CONTENTS

EXECUTIVE SUMMARY

Virtually all Americans agree that adoption serves a useful purpose in our society, and most have a favorable opinion of the institution. But many Americans, even those with very favorable opinions about adoption overall, do harbor doubts about the institution. Half feel adopting a child, while preferable to remaining childless, is not quite as good as having one's own. And a quarter think it is sometimes harder to love an adopted child because the child is not your own flesh and blood.

On the surface these data seem puzzling; Americans have an overwhelmingly favorable opinion of adoption, yet only half say adopting is as good as being a birth parent. A more comprehensive view of adoption attitudes takes these possibly contradictory viewpoints into account. On this basis Americans divide into three groups according to their attitudes toward adoption: 1) *Full Supporters* who express unqualified support for adoption; 2) *Qualified Supporters,* who have a mostly positive opinion about the institution but some hesitancy to fully embrace it and; 3) *Marginal Supporters*, who while generally more supportive than not, are less convinced than others of adoption's merits.

Americans' opinions about the members of the adoption triad follow a similar pattern to their assessment of the institution. Most say *adoptive parents* are generous and lucky, but some believe they would have been luckier still to have had their own child. *Adopted children,* a majority says, are well adjusted and secure, but some think adopted children are insecure, poorly adjusted and more prone to behavioral and academic problems than other children. Lastly, many Americans support *birth parents'* decisions to place children for adoption, but a notable minority disapproves of decisions to do so, and some even see it as irresponsible or hardhearted.

Attitudes toward adoption divide starkly by social group. Less educated Americans are more skeptical about adoption than others. There are also gender differences; men are more uncertain of adoption's merits than women. Blacks are more skeptical than whites.

These are among the findings of the Benchmark Adoption Survey conducted July 7 through August 8, 1997 for the Adoption Institute by Princeton Survey Research Associates. This probability survey of 1,554 adults is the first in-depth look at American public attitudes toward the institution of adoption and the members of the adoption triad. The survey also examined opinion about open adoption, adoptees' search for their birth parents and adoption in the context of welfare reform and teenage pregnancy.

Among other key findings:

- Six in 10 Americans have had personal experience with adoption, meaning they themselves, a family member, or a close friend was adopted, adopted a child, or put a child up for adoption. A third have considered adopting a child at least somewhat seriously. Those with personal experience are more likely than those without to have favorable opinions of adoption.

- Americans are divided over whether it is better for pregnant teenagers to place their babies for adoption or raise them themselves. Americans also are divided over which is better for the child in this situation, although slightly more believe the baby is better off adopted than raised by the birth mother.

- Americans are divided over whether the government should promote adoption as an alternative to welfare. Asked about a California plan in which welfare mothers would be encouraged to place their children for adoption, a slim majority oppose this plan, and substantial minority support it. Americans are somewhat more supportive of the plan for pregnant teenagers.

- The public is ambivalent about open adoption, that is, adoption in which birth parents maintain some contact with the child they have placed for adoption. Most Americans think it is a good idea, but only in a limited number of cases. One in five feel it is always

think it is a good idea, but only in a limited number of cases. One in five feel it is always a bad idea for birth mothers to maintain contact with the children they have placed for adoption.

- Americans also have mixed views about the consequences of adoptees searching for and finding their birth parents. In the public's eyes, adoptees are the most likely of the triad to benefit from contacting their birth parents. There is more skepticism about whether adoptive and birth parents benefit.

- Perhaps in reaction to an increase in media stories about international adoptions gone awry, many are skeptical about the prospects for children adopted overseas. Many Americans feel these children are more prone to physical illness and emotional problems than children adopted in the United States. In contrast, Americans are more hopeful than not about the academic promise of children adopted internationally.

Methodological Statement

This survey is based on telephone interviews with a representative sample of 1,554 adults 18 and older, living in telephone households in the continental United States, including an oversample of 50 African-Americans. The sample data were weighted, using parameters from the most recently available Census data (the Current Population Survey, March 1996), to bring the sample characteristics into alignment with the demographics of the 18 and older population of adults in the continental United States. The interviewing took place from July 7, through August 8, 1997.

For results based on the total sample, one can say with 95% confidence that the error attributable to sampling and other random effects is plus or minus 3 percentage points. In addition to sampling error, question wording and practical difficulties in conducting telephone surveys can introduce error or bias into the finding of opinion polls.

FINDINGS IN DETAIL

Section I: Adoption as an Institution

Adoption Positive and Useful...

Most Americans say they have a favorable opinion of adoption and think it serves a useful purpose in society. A slim majority (56%) voices a *very* favorable opinion and a third (34%) express a *somewhat* favorable opinion of adoption. A small minority (8%) sees adoption in a less positive light, offering an unfavorable opinion. The American public is even more convinced of the utility of adoption. Virtually all Americans *strongly* (78%) or *somewhat* (17%) agree that adoption serves a useful purpose in society.

...But Less Desirable than "Own" Child

At the same time, however, many Americans express reservations about adoption when asked to compare adopting a child to having one's "own" child. Half (50%) believe adoption is better than being childless, but is not quite as good as having one's own child. Half (49%) disagree.

Overall Opinion of Adoption

In general, do you have a very favorable opinion of adoption, a somewhat favorable opinion, a somewhat unfavorable opinion, or a very unfavorable opinion of adoption?

Very favorable	56%
Somewhat favorable	34
Somewhat unfavorable	4
Very unfavorable	4
Don't know	2

Now I'm going to read you a set of statements. For each please tell me if you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each statement: *Adoption serves a useful purpose in our society.*

Strongly agree	78%
Somewhat agree	17
Somewhat disagree	2
Strongly disagree	2
Don't know	1

Adoption Compared to Biological Child

Now I'm going to read you a set of statements. For each please tell me if you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each statement: *Adoption is better than being childless, but it is not quite as good as having one's own child.*

Strongly agree	21%
Somewhat agree	29
Somewhat disagree	17
Strongly disagree	32
Don't know	1

***Full Supporters*, *Qualified Supporters* and *Marginal Supporters* of Adoption**

How do we reconcile these data? How can nine in 10 Americans say they have a favorable opinion of adoption, but only half say they think adopting is as good as being a birth parent? Americans support adoption, but many do not necessarily think it is the preferred way to form, or add to, a family. Americans think adoption serves a societal need, but perhaps some Americans wish this need did not exist.

In other words, none of these three questions alone tells the whole story. To say most Americans have a favorable opinion of adoption or that most think it serves a useful purpose neglects the reservations that half the country harbors. Yet to say that half think adoption is not quite as good as having one's own child understates public support for the institution. The more complete explanation combines these questions to yield three groups of attitude toward adoption -- *Full Supporters*, *Qualified Supporters* and *Marginal Supporters*. All are supporters, but not to the same degree:

- One in three (32%) Americans is a *Full Supporter*. This group expresses unqualified support for adoption. *Full Supporters* voice a very favorable opinion of adoption, strongly agree adoption serves a useful purpose in society and think adoption is as good as having one's own child.

- Four in ten (37%) are *Qualified Supporters*. Overall, this group's opinion of adoption is positive but it is distinguished by some hesitancy to fully embrace the institution. Some in this group express a *very* favorable opinion of adoption but think adoption is not as desirable as having one's own child; others in this group voice a *somewhat* favorable or even unfavorable opinion of adoption but do think adoption is as good as having one's own child.

- Three in ten (31%) are *Marginal Supporters*. They are less convinced than others about the merits of adoption. *Marginal Supporters* believe adoption is less desirable than having one's own child, hold less than a very favorable opinion of adoption and agree only somewhat or disagree that adoption serves a useful purpose in society.

Support for Adoption Differs by Social Demographic Characteristics

Adoption attitudes differ substantially by social demographic characteristics, with education, gender and race being the most important distinguishing elements.

- Those with a college degree (48%) are notably more likely than those with only a high school education (23%) to be *Full Supporters* of adoption. By contrast, the less well educated (39%) are more likely than the well educated (18%) to be *Marginal Supporters*.

- A larger percentage of women (36%) than men (27%) are *Full Supporters*. Men (35%) are more likely than women (27%) to be *Marginal Supporters*.

- Race is another important factor. Whites (35%) are three times as likely as blacks (11%) to be *Full Supporters* of adoption. Conversely, half again as many blacks (44%) as whites (29%) are *Marginal Supporters*.

- Married Americans (36%) are more likely than those who are unmarried (27%) to be *Full Supporters*.

- Four in ten (43%) Americans living in the western part of the country are *Full Supporters,* while just a quarter of those in the South (25%) and Northeast (28%) are *Full Supporters*.

Adoption attitudes do not vary by age, family size or urbanity. Young Americans are as likely as older ones to be *Full Supporters* of adoption, childless Americans are as likely as those with five or more children to be *Full Supporters* and urban residents are as likely as rural dwellers to be *Full Supporters.* Political orientation also does not differentiate support for adoption. As many self-defined liberals as self-defined conservatives are *Full Supporters*.

Americans Are Conflicted about Issues Surrounding Adoption

Although generally supportive of adoption, the American public appears conflicted about specific aspects of adoption, such as: 1) the costs and benefits of adoption to the adoption triad; 2) whether unmarried teen mothers should place their babies for adoption or raise the babies themselves; 3) the wisdom of open adoption and searching for one's birth parents and; 4) adoption as a welfare alternative. We begin examining these conflicted sentiments by describing attitudes toward the adoption triad.

Section II: The Adoption Triad

The American public views each of the parties to any adoption -- the adoptive parents, the adopted child and the birth parents -- distinctly and differently. Many of these attitudes differ by the three groups of supporters, *Full Supporters*, *Qualified Supporters* and *Marginal Supporters*. These data show that while Americans generally support the parties to an adoption, some Americans have serious reservations about what these parties do or concerns about how they are affected by adoption.

For the most part, Americans perceive adoptive parents as generous and lucky. Yet at least some think these parents would have been luckier if they had their own children. Adoptees themselves are also viewed in a positive light, although here too there is a less positive side -- some feel adopted children are more prone to problems than other children. Most Americans view birth parents favorably and approve of their decision to place their children for adoption. Yet some feel this decision is irresponsible and even callous.

Adoptive Parents -- Lucky and Advantaged...

Adoptive parents are the most positively viewed of the triad, or at least they are seen as the member of the triad who benefit most in an adoption. Almost all Americans see adoptive families as lucky (95%) and advantaged (86%). Very few people view their actions as selfish (4%). Furthermore, people believe adoptive parents get the same amount of satisfaction (46%) or even more satisfaction (33%) out of raising an adopted child than a child born to them. Substantially fewer (17%) say adoptive parents get less satisfaction.

Views of Adoptive Parents

In your opinion, when parents adopt a child are they . . .

Lucky	95%
Unlucky	2
Don't know	3
Selfish	4%
Unselfish	91
Don't know	5
Advantaged	86%
Disadvantaged	7
Don't know	7

...But Will Love Be As Strong in Adoptive Families?

As many as one in four Americans question whether the love between parent and child can be as strong and true in adoptive families as in more traditional families. A quarter (23%) agree it is sometimes harder to love an adopted child, because that child is not your own flesh and blood, although the majority (76%) disagree. Likewise, although a majority (67%) say it is *very* likely adopted children love their adoptive parents as much as they would have loved their birth parents, a third are less optimistic -- 25% say it is only somewhat likely the love will be as strong, and 5% say it is unlikely.

***Marginal Supporters* Less Positive than *Full Supporters* about Adoptive Parents**

People who are less enthusiastic about adoption in general have less positive attitudes toward those who adopt.

- Three in ten (30%) *Marginal Supporters* think parents get less satisfaction from raising adopted children compared with two in ten (18%) *Qualified Supporters* and only four percent of *Full Supporters*.

- Likewise, *Marginal Supporters* are more likely than others to see adoptive parents as disadvantaged (15% vs. 6% *of Qualified* and 2% of *Full Supporters*).

- The biggest differences between *Marginal Supporters* and those who are more positively disposed toward adoption, have to do with the quality of the love between parents and children in adoptive families. Most *Full Supporters* (86%) and nearly as many *Qualified Supporters* (72%) believe it is *very* likely adopted children will love those who adopt them as much as they would have loved those who gave birth to them. Less than half (45%) of *Marginal Supporters* concur. Moreover, four in ten (40%) *Marginal Supporters* agree it is sometimes harder to love an adopted child because it is not your flesh and

blood, compared with only two in ten (23%) *Qualified Supporters* and less than one in ten (6%) *Full Supporters*.

Social Demographics Differentiate Opinion about Adoptive Parents

As is the case with adoption in general, people's opinions about adoptive parents vary by education, gender and race. The less well educated, men and blacks are more likely than the better educated, women and whites to voice negative feelings toward adoptive families themselves and to feel adoptive parents are getting shortchanged in the adoption process. Likewise, the less well educated, men and blacks are more likely than others to say it is sometimes harder to love an adopted child than a child born to you. Similarly, these groups are *less* convinced adopted children will have as strong a love for their adoptive parents as they would have had for their birth parents. These differences persist even when other demographic variables are taken into account.

Views about Adoptive Parents by Demographic Groups

	Total	Education		Gender		Race	
		No College	Some College	Male	Female	Black	White
Adoptive parents get less satisfaction out of raising an adopted child	17%	21	13	20	14	31	14
Sometimes it is harder to love an adopted child	23%	27	17	28	17	32	20
It is *very likely* adopted children will love their adoptive parents as much as they would have loved the parents who gave birth to them	67%	61	75	60	73	51	70

Adopted Individuals -- Well-Adjusted, Secure and First-Rate...

Most Americans have a positive view of adopted children. Solid majorities say adopted kids are well-adjusted (76%) secure (68%) and first rate (70%). Yet minorities up to a quarter see them as not well-adjusted (14%), insecure (23%) and second best (20%).

Views of Adopted Children

Next, I am going to read pairs of words or phrases. For each pair please tell me which one best describes your opinion of adopted children . . .

Well adjusted	76%
Not well adjusted	14
Don't know	10
Insecure	23%
Secure	68
Don't know	9
First rate	70%
Second best	20
Don't know	10

...But One in Three Americans Predicts School and Behavioral Problems

People are divided as to whether adopted children are more likely than other children to have problems at school (35%), less likely (36%) or equally likely (21%). And there is disagreement as to whether adopted kids are more likely (39%), less likely (34%) or equally likely (19%) to have behavioral problems. By contrast, people do not foresee adopted children developing drug and alcohol problems at higher rates than other children. In fact, more people say adopted kids are *less* likely than other kids to have such problems (39%) than say they are *more* likely to (28%).

Marginal Supporters* More Concerned about Adjustment Problems than *Full Supporters

Those whose support for adoption is most conditional, *Marginal Supporters*, are more likely than others to see adopted children as insecure (36%) and poorly adjusted (22%). Majorities of *Marginal Supporters* believe adopted children are more likely than other kids to have problems at school (54%) and behavioral problems (57%). Those who express more support for adoption, on the other hand, tend to see adopted children as equally prone or even less likely than others to have academic and behavioral problems.

Demographics Differentiate Opinions about Adopted Children

People's opinions about adoptees differ by education, sex and race. The less educated are more likely than better-educated Americans to view adopted kids as insecure and second best and to think adoptees are more prone to substance abuse, academic and behavioral problems. Likewise, men are more likely than women to question how well adjusted and secure adopted children are. A larger share of men than women foresee behavioral problems, problems in the classroom, and problems with drugs and alcohol. Similarly, blacks are more likely than whites to hold these less positive views of adoptive children.

International Adoptions More Troublesome

Americans are decidedly less optimistic about the prospects of children adopted from other countries. These views may result, in part, from recent media stories about troubled international adoptions. Half of those surveyed believe children adopted abroad are more likely than those adopted in this country to have emotional problems and the same proportion say they are *less* likely to be physically healthy. But Americans do not believe children adopted internationally are likely to have trouble in school. In fact, more say these children are *less* likely to do poorly in school than say they are *more* likely to have academic problems.

Views about International Adoptions

These days many Americans are adopting children from other countries such as Columbia and China. Do you think children adopted from foreign countries are MORE likely or LESS likely than children adopted in this country to . .

	More Likely	Just as Likely (VOL.)	Less Likely	Don't know
Have emotional problems	52%	11	29	8
Be physically healthy	29%	13	51	7
Do poorly in school	31%	14	48	7

Most Americans Support Birth Parents' Decision...

Most Americans have positive opinions about birth parents, and are supportive of the decision to place their child up for adoption. Seven in ten (69%) say they generally approve of a birth mother's decision and most view this choice as responsible (76%), caring (78%) and unselfish (77%).

...But Some See it as Irresponsible, Uncaring and Selfish

One in four Americans (23%) generally disapproves of a birth mother's decision to place a child for adoption. Moreover, a small but significant minority sees this decision as irresponsible (16%), uncaring (13%) and selfish (14%). One in five (20%) agrees a mother who gives a child up does *not* love the child as much as one who raises the child herself.

People's opinions of fathers who place their children for adoption are more negative. They are more likely than their female counterparts to have their actions seen as irresponsible (26%), uncaring (24%) and selfish (23%) and people are more likely to disapprove (29%) of their decision.

Views about Birth Parents

In general, when a MOTHER puts her child up for adoption is she being . . .	
Irresponsible	16%
Responsible	76
Don't know	8
Caring	78%
Uncaring	13
Don't know	9
Unselfish	77%
Selfish	14
Don't know	9
And how about fathers, when a FATHER puts his child up for adoption is he being . . .	
Irresponsible	26%
Responsible	66
Don't know	8
Caring	68%
Uncaring	24
Don't know	8
Unselfish	68%
Selfish	23
Don't know	9

***Full Supporters* Most Positive about Birth Parents**

People who are most supportive of adoption in general -- *Full Supporters* -- are more approving of a parent's decision to place a child for adoption and are more likely than others to see their decision as loving, responsible, caring and unselfish. Conversely, those who question the institution more are less

unanimous in this view, though they are still more likely than not to view birth parents and their decision in a positive light.

The Less Well Educated, Men and African-Americans Most Negative about Birth Parents

Again in-depth analysis shows cleavages within American society. Less well-educated Americans, men and African Americans are more likely to hold negative views of those who place their children for adoption than their counterparts. Here, in fact, the differences are even more pronounced, especially where race is concerned. As the table shows, half or more of African Americans generally disapprove of the decision to place a child for adoption, compared with only about a quarter of whites. Furthermore, blacks are much more likely to view the decision to give up one's child in a negative light.

Racial Differences in Views of Birth Parents

	Total	Black	White
Birth Mothers			
Generally disapprove of birth mothers' decision	23%	52	20
By putting child up for adoption mothers are being . . .			
Irresponsible	16%	38	12
Uncaring	13%	35	10
Selfish	14%	31	11
Birth Fathers			
Generally disapprove of birth fathers' decision	29%	56	25
By putting child up for adoption fathers are being . . .			
Irresponsible	26%	54	21
Uncaring	24%	50	20
Selfish	23%	45	20

Birth Fathers Entitled to Say in Adoption Decision

A majority (79%) of Americans think the father of a baby born to an unmarried couple should have at least some say in whether the child is put up for adoption, including almost half who (45%) believe he should have *a lot* of say. Younger Americans see a larger role for fathers in this decision than their older counterparts.

Americans Express Mixed Views about Placing Own Child for Adoption in Dire Circumstances

A majority of Americans generally approve of birth parents' decisions, but they are less certain they would put a child of their own up for adoption were they unable to provide for the child. As the table shows, half the Americans surveyed say they would be likely to place a child for adoption, and half would be unlikely to do so, including more than a third who say they would be *very* unlikely to place their child for adoption.

Placing Own Child for Adoption

Imagine for a moment you had a child you couldn't provide for and there was a loving couple who wanted to adopt the child. How likely would you be to put your child up for adoption?

	Total	Education		Race	
		No College	Some College	Black	White
Very likely	22%	20%	25%	15%	24%
Somewhat likely	25	24	26	22	25
Somewhat unlikely	14	13	14	17	13
Very unlikely	36	41	31	46	35
Don't know	3	3	3	1	3

Americans feelings about whether they would put their own child up for adoption follow similar patterns to their approval of birth parents' decisions in general. Whites are divided between those who say they would be likely to put their child up for adoption and those who would be unlikely to do so. Conversely, only about a third of blacks say they would be likely to put their child up for adoption, whereas almost two-thirds would be unlikely to do so, including almost half who say it is *very* unlikely. Similarly, better educated people are marginally more likely to say they would consider adoption, whereas those with less education would be more likely to keep their child. These data suggest some sectors of American society are more accepting of birth parents raising their own children even in the face of difficult circumstances.

Section III: Experience and Sources of Information about Adoption

A majority of Americans (58%) have had personal experience with adoption -- meaning they themselves, a family member or a close friend was adopted, adopted a child, or put a child up for adoption. And over a third (36%) say they have given very or somewhat serious consideration to adopting a child. But a sizable minority (42%) lack personal experience with adoption and two in three (64%) have not given serious consideration to adopting a child.

Experience with Adoption

Has anyone in your family or among your close friends ever been adopted or adopted a child or put a child up for adoption?

Yes	58%
No	42
Don't know	--

Percent Having Considered Adoption

How seriously, if at all, have you ever considered adopting a child-- would you say very seriously, somewhat seriously, not too seriously or not at all seriously?

Very seriously	15%
Somewhat seriously	21
Not too seriously	17
Not at all seriously	47
Don't know	--

Personal experience with adoption or having considered adoption plays a major role in shaping adoption attitudes. Almost three in four (72%) *Full Supporters* of adoption have had intimate experiences with adoption compared with less than half (44%) of the *Marginal Supporters.* Having given serious consideration to adopting a child apparently fosters positive sentiments as well. Respondents who have never considered adopting a child are substantially less likely to voice positive views about adoption than those who have.

Experience with Adoption Differs by Group

Adoption experience varies widely by social characteristics. Just one in three blacks but nearly two in three whites say they have had personal experience with adoption. Similar, but less striking patterns prevail for gender, age, education and income. Women, younger people, the college educated and higher income households are more likely than others to say a family

member or close friend has been adopted or has placed a child for adoption. Since these data suggest personal experience and positive views about adoption are linked, those social groups with less personal exposure may have fewer opportunities to develop positive sentiments toward adoption.

Family and Friends Main Source of Information

A plurality of Americans says their family and friends (45%) are their main source of information about adoption, followed by the news (30%), books and magazines (16%), and movies and entertainment programs (6%).

Each of the three categories of supporters turn to somewhat different sources for information about adoption. Among *Full Supporters* a majority (55%) rely on family and friends, while news (21%) and books and magazines (18%) place a distant second. By contrast, *Marginal Supporters* are as likely to say their main source of adoption information is the news (38%) as family and friends (39%). Among all three groups only a handful turn to movies and entertainment programs as their main source of information about adoption.

Main Source of Information about Adoption

What is your main source of information about adoption?

	Adoption Supporters		
	Full	Qualified	Marginal
Family and Friends	55%	42%	39%
News	21	32	38
Books and Magazines	18	16	13
Movies and Entertainment prgs.	3	7	7
Don't know	2	3	3

Section IV: Alternatives to Adoption

Adoption or Raising Baby -- What's Best for the Teenage Mom?

Americans divide over whether it is best for an unmarried pregnant teenager to raise the baby herself or place the baby for adoption. Just as many think it is best for the teenage mother to place the baby for adoption (37%) as believe she is better off raising the baby herself (39%). One in five (20%) says it depends on the individual situation. Among those who have a more definite opinion, two in three *Full Supporters* of adoption (67%) favor the teenager placing the baby for adoption, while a third (33%) think she should raise the baby herself. Just the opposite pattern prevails among *Marginal Supporters* -- 64 percent believe the teenager should raise the baby herself while 36 percent favor placing the baby for adoption.

Unmarried Pregnant Teen Mothers: Raise Baby or Place for Adoption?

Today many teenage girls get pregnant and don't have the option of marrying the father. Let's suppose a pregnant teenager decides to have the baby, do you think it best for her if she raises the baby herself or puts the baby up for adoption?

Raise baby herself	39%
Put baby up for adoption	37
Depends (VOL.)	20
Don't know	4

Here again, these data suggest the social milieu of some sectors of American society are more open than others to unmarried teen mothers raising their biological children regardless of economic circumstances. African Americans (69%) are twice as likely as whites (34%) to favor teen mothers raising their babies themselves. Similar age, education and income differences exist. Half or more of the young (18-29 year olds -- 50%), the non-high school educated (57%), and those from low income households (under $20,000 -- 49%) favor unmarried teen mothers raising their babies themselves. Only a third or less of the older (30 years of age and older) (33%), the college educated (24%), and those from wealthier households ($50,000 and over) (30%) concur. Men (42%) are slightly more likely than women (36%) to think it is better for teen mothers to raise their babies themselves. And never married respondents (48%) are somewhat more favorable toward teen mothers raising their babies themselves than those who

are or have been married (36%). Finally Southerners and those with a pro-life stance on abortion are slightly more inclined to favor a mother raising the child herself than placing the baby for adoption.

Public Divided about What's Best for Baby

What about the baby of the unmarried teenage mother -- is it best for the baby to be adopted or be raised by the mother? Again, opinion is divided, although slightly more think the baby is better off being placed for adoption (42%) than being raised by the birth mother (36%). Similar social demographic patterns to those noted above prevail.

What's Best for the Baby?

And what about for the baby? Do you think it is best for the baby to be raised by the teenage mother or be put up for adoption?

Best to be raised by the teenager	36%
Best to be put up for adoption	42
Depends	18
Don't know	4

Section V: Adoption as an Alternative to Welfare

The current wave of welfare reform has prompted politicians to rethink America's social safety net, and has lead some to wonder if encouraging adoption would ease welfare rolls. In particular, California Governor Pete Wilson has proposed a plan to encourage welfare mothers to place their children for adoption. A slim majority of Americans (54%) oppose promoting adoption as an alternative to welfare, but a sizable minority (43%) support it. Support for such a plan is stronger when the mother in question is a pregnant teenager. Two in three (67%) would support a plan to encourage pregnant teens who are unable to provide for their newborn to place the baby for adoption.

Full Supporters are as likely as *Marginal Supporters* of adoption to oppose promoting adoption as a alternative to welfare. But, when the referent is teenage mothers, *Full Supporters* (76%) are slightly more likely than *Marginal Supporters* (65%) to approve of encouraging teenage mothers to place their babies for adoption. People who describe themselves as politically conservative, who have higher incomes and the better educated are more likely than others to favor adoption as

Adoption as an Alternative . . .

For Welfare Mothers . . .
A state governor has recently announced a plan to encourage *welfare recipients* to consider putting their children up for adoption. Some people say the plan is good because if these children are adopted the state would be relieved of any responsibility for the children and the children would grow up in more financially and emotionally secure households. Others say the plan is bad because the state should try to keep families together. How do you feel about this plan? Do you strongly support, somewhat support, somewhat oppose or strongly oppose it?

Strongly support	12%
Somewhat support	31
Somewhat oppose	22
Strongly oppose	32
Don't know	3

. . . And Pregnant Teens
The same proposal suggests that *pregnant teenagers* who aren't able to provide for their babies be encouraged to put their babies up for adoption. How do you feel about such a plan -- do you strongly support, somewhat support, somewhat oppose or strongly oppose it?

Strongly support	32%
Somewhat support	35
Somewhat oppose	15
Strongly oppose	16
Don't know	2

an alternative to welfare. Those who favor adoption in this situation are also more likely than others to agree with the statement *"Poor people today have it easy because they can get government benefits without doing much of anything in return."* This suggests these sentiments may be as much a reaction to the perpetuation of a culture of dependency as a reflection of their adoption attitudes.

Section VI: Open Adoption and Searching for Birth Parents

Relatively Few Favor Open Adoption in Most Cases

Open adoption -- when the birth and adoptive families maintain contact with each other -- has become more commonplace in the United States. Despite this move toward open adoptions, the public offers only modest support for the practice. Less than two in ten (16%) say it is a good idea in *most* cases while the plurality (40%) think it is a good idea in *some* cases, suggesting they feel decisions about openness should be made on a case-by-case basis. The remaining 42% say contact is *seldom* (23%) or *never* (19%) a good idea. This split prevails regardless of whether one is a *Full* or *Marginal Supporter* of adoption. It would seem that open adoption has won only limited acceptance even by those members of the public who unconditionally support adoption.

Open Adoption

Sometimes mothers who put their child up for adoption maintain contact by occasionally sending cards and letters. Do you think this is a good idea in most cases, in some cases, very few cases, or no cases at all?

Most cases	16%
Some cases	40
Very few cases	23
No cases at all	19
Don't know	2

Public Lukewarm on Searching for Birth Parents

Perhaps one reason many Americans are reluctant to fully support open adoption is the mixed views they hold about the consequences of adoptees searching for and finding their birth parents. From the public's perspective, adoptees benefit more from contacting their birth parents than either the birth parents or adoptive parents. Two in three (68%) say it is usually good for adoptees to find their birth parents. Somewhat fewer (56%) believe it is usually good for the birth parents to be contacted by their birth child, and even fewer (44%) think it is a positive event for the adoptive parents. In all three cases, *Full Supporters* of adoption are more likely than *Marginal Supporters* to judge these actions as beneficial, indicating the greater confidence and trust *Full Supporters* place in the resilience of the adoption triad.

Benefits and Costs of Finding Birth Parents

Sometimes people who were adopted as children look for and find one or both of the parents who put them up for adoption. When this happens, is this usually a good thing or a bad thing for the ADOPTED PERSON?

Usually good	68%
Usually bad	21
Don't know	11

When people who were adopted as children look for and find one or both of the parents who put them up for adoption, is it usually a good thing or a bad thing for the PARENTS WHO PUT THEM UP FOR ADOPTION?

Usually good	56%
Usually bad	31
Don't know	13

How about the parents who adopted the person. . . When people who were adopted as children look for and find one or both of the parents who put them up for adoption. Is this usually a good thing or a bad thing for the PARENTS WHO ADOPTED THEM?

Usually good	44%
Usually bad	45
Don't know	11

VII: Gay and Interracial Adoption

Gay and interracial adoption were not explored in this survey because data on these topics are available elsewhere. The data presented below show most Americans are opposed to gay couples adopting children. Conversely, most have a positive opinion about interracial adoption.

Americans Hesitant About Gay Couples Adopting . . .

A May 1996 Princeton Survey Research Associate survey for Newsweek magazine asked whether it should be as easy for gay couples to adopt as it is for heterosexual couples. A minority (30%) said it should be as easy. Most either thought it should be more difficult (20%) or should not be allowed at all (44%). Younger Americans, and those under 30 in particular, are more accepting of gay adoption than older people. Women are more open to gay adoption than men.

Opinion of Gay Adoptions

If gay couples are allowed to marry, should it be as easy for them to adopt children as it is for heterosexual married couples, should it be more difficult, or should they not be allowed to adopt at all?

As easy	30%
More difficult	20
Not be allowed at all	44
Don't know	6

. . . But Interracial Adoption has Public Support

Interracial adoption, or at least adoption between whites and African-Americans, has broader public acceptance. The majority of the public supports white couples adopting black children (80%) and black couples adopting white children (77%), according to a June 1995 survey by Yankelovich for Time magazine and CNN.

Interracial Adoption between Whites and African-Americans

Do you approve or disapprove of a married couple who is white adopting a baby who is African-American?

Approve	80%
Disapprove	14
Don't know	6

Do you approve or disapprove of a married couple who is African-American adoption a baby who is white?

Approve	77%
Disapprove	16
Don't know	7

Methodological Statement

This survey is based on telephone interviews with a representative sample of 1,554 adults 18 and older, living in telephone households in the continental United States, including an oversample of 50 African-Americans. The sample data were weighted, using parameters from the most recently available Census data (the Current Population Survey, March 1996), to bring the sample characteristics into alignment with the demographics of the 18 and older population of adults in the continental United States. The interviewing took place from July 7, through August 8, 1997.

For results based on the total sample, one can say with 95% confidence that the error attributable to sampling and other random effects is plus or minus 3 percentage points. In addition to sampling error, question wording and practical difficulties in conducting telephone surveys can introduce error or bias into the finding of opinion polls.

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001a. note	FLOTUS to Nancy Riordan (partial) (1 page)	05/19/1999	P6/b(6)

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Clinton Presidential Records
First Lady's Office
Domestic Policy Council (Nicole Rabner)
OA/Box Number: 15410

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Adoption Organizations-Fact Sheets

2012-1035-S
kc1005

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b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

file adoption [001a]

THE WHITE HOUSE

May 19, 1999

see Nicole's thoughts attached

Pam - Pls. tell Nicole I think we should do convening + help w/ speech

Ms. Nancy Daly Riordan
P6/(b)(6)
Los Angeles, California 90077

Dear Nancy:

Thank you for your letter and congratulations on the success of your United Friends of Children Dinner. I was very happy to support it.

I am encouraged by the prospect of a television special devoted to raising awareness about adoption and your proposal for a convening of adoption experts. Copies of your letter have been forwarded to appropriate staff for consideration. In the meantime, please accept my best wishes for the show's success.

see HRC's note above

With warm regards, I remain

Sincerely yours,

Hillary

Hillary Rodham Clinton

Cc: Marsha Berry, Director of Communications
Patti Solis Doyle, Director of Scheduling
Nicole Rabner, Domestic Policy Council

PHOTOCOPY
HRC HANDWRITING

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001b. letter	Nancy Riordan to FLOTUS re thank you for video (partial) (1 page)	03/25/199	P6/b(6)

COLLECTION:
Clinton Presidential Records
First Lady's Office
Domestic Policy Council (Nicole Rabner)
OA/Box Number: 15410

FOLDER TITLE:
Adoption Organizations-Fact Sheets

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RESTRICTION CODES

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b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

[0016]

R + ccs Patti ✓
Marsha
Nicole

Nancy Daly Riordan

March 25, 1999

First Lady Hillary Rodham Clinton
1600 Pennsylvania Avenue
Room 200, East Wing
Washington, DC 20502

Dear Mrs. Clinton:

Thank you so very much for taking the time from your hectic schedule to video tape a message for our United Friends of the Children dinner held on March 11, 1999.

You have no idea how moved we all were by your comments particularly our honorees Teddy Forstmann and Carol and Frank Biondi. We raised a million dollars which will support our programs for foster children and those aging out of the system. John Guitierrez was with us that night. He is the young man who spoke at your press conference on increased funding for the Independent Living Program.

Your support is invaluable in our efforts to insure that these young people do not fall through the cracks.

I would like to update you on another very exciting project which has been set in motion since the Adoption Summit you called together. Over the past year Children's Action Network has been working on an adoption special for television. Wendys has agreed to be the corporate sponsor. We are thrilled that we have a preliminary commitment from CBS to air the special in December.

The special will spotlight the fact that over 100,000 children are waiting to be adopted. It is our hope that it will be an annual event that will serve as a call to action on behalf of children waiting for permanent homes. It is a vital step toward highlighting the issue of adoption and providing the resources and momentum needed for effective change at the local level.

The format of the special is a live event interspersed with three, six or seven minute dramatic vignettes and documentary segments. There will be readings of poems, letters and stories of children who have been and are waiting to be adopted. The special will feature families who have adopted and adults who were adopted.

The special is also intended as the kick-off to a larger campaign. There area a number of opportunities to take advantage of the broad reach of our partners in this effort. They include participation from CBS affiliates in airing Wednesday's Child segments, creation of brochures for distribution through the 800 number that will run at the end of the special as well as pediatrician's offices, and public service announcements to be aired nationally and in local markets.

P6/(b)(6) Los Angeles, California 90077

We are very excited by the opportunities presented by the special. Your leadership in convening a meeting of adoption experts has helped get us to this point and I hope you will consider doing so again. The input and the support from the group of adoption experts would truly help us insure the adoption special has the right message and the maximum impact.

The Children's Action Network Executive Director, Jennifer Perry, would be delighted to work directly with your staff if this idea appeals to you. Her telephone number is 310-470-9599 and mine is 310-476-3259.

Please know how honored we would be to work with you toward achieving the goals you and the President set for improving adoption in our country.

Very truly yours,

Nancy