



Thomas Chapmond
Commissioner

Department of Family & Protective Services

House Committee on Human Services

Representative Carlos Uresti
Chair

Adoption Overview

March 18, 2004



Committee on Human Services Charge

Charge 1: Study ways to increase the adoption of special needs children through efficiency in the Adoption Assistance Program. Discuss policy changes within Child Protective Services.



DFPS Presentation Overview

- Adoption Overview
- Recruitment and Family Perspective
- Data on Consummated Adoptions
- Services to Families
- Data on Children Awaiting Adoptive Placement
- Adoption Initiatives



Who

Children in the CPS System in FY 2003

- Intake-*186,160 reports of alleged child abuse and neglect*
- Investigation-*131,130 child abuse or neglect investigations*
- Out-of-Home Care-*15,707 children in foster care*
- **Adoption-3,766 children awaiting adoptive placement at end of FY 2003**



What

DFPS Role in Adoption

- DFPS is not a traditional adoption agency
- DFPS seeks families for abused and neglected children in state conservatorship



When

- Courts have 12 months to issue a final order with a 6 month extension available in special circumstances
- Upon termination of parental rights the court appoints a permanent managing conservator:
 - Relative, or
 - DFPS



How-Recruitment

Ongoing recruitment efforts by DFPS to locate families for children

- Regional and Statewide Recruitment Plan
 - Framework to build capacity
 - Provides consistent guidelines
 - emphasizes collaboration with local stakeholders
- Texas Adoption Resource Exchange
 - Web site providing information on adoption and children in DFPS care awaiting adoptive placement (www.adoptchildren.org)
 - Families from throughout United States with current and approved home studies can submit interest forms on children listed in TARE



Darlasha



Name: Darlasha

Gender: Female

Ethnicity: African American

Child ID: 10944

Date of Birth: January 2000

TARE

Personal Profile:

Darlasha is a victim of shaken baby. Darlasha has a sweet disposition and does not interact with anyone. Darlasha is medically fragile, non-mobile and does not react to visual or sound stimulation. Darlasha only cries when she is hurting or upset about her physical or occupational therapy. She is non-mobile and uses a wheelchair. She does not turn over unless she is participating in physical and occupational therapy. Darlasha is non-verbal and was in Speech therapy that was discontinued because of her inability to make sounds. Darlasha does have muscle spasms and seizures. She has respiratory problems and sometimes has to be placed on oxygen. She needs regular breathing treatments to minimize congestion in her lungs. Her spine is also curving as a result of not being mobile and active. She wears a back brace and has to have head supported when she is in her wheelchair. Darlasha has a g-button and sometimes has to be placed on continuous IV feeding. She also has problems with reflux and is on medications. Darlasha receives nursing hours because she needs continuous care. Even though she prefers to be left alone, she does enjoy being held. She has a hearing aide, but there is no response from her to distinguish that she is hearing sounds or understands what is being said. She is cordially blind, but sometimes it appears that she is tracking certain colors.

Special Needs:

Developmental Special Needs: **Severe**

Emotional Special Needs: **Moderate**

Physical Special Needs: **Severe**

Medical Special Needs: **Severe**

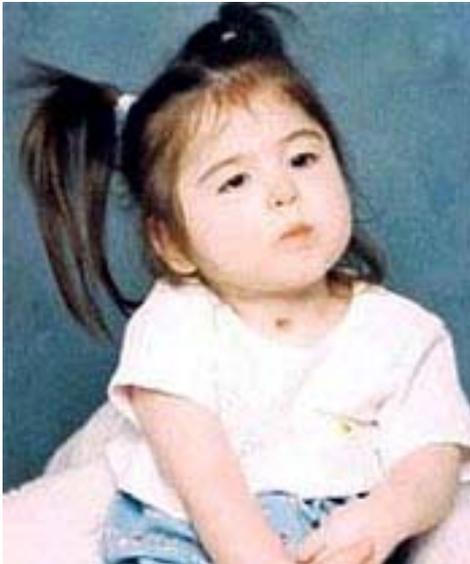
Desired Family Profile:

Darlasha needs a family who has experience in meeting the needs of a child with her medical needs. The family should also understand that she does not interact and who is willing to follow through with her ongoing medical appointment and the continuous care that she needs.



TARE

Alice



Name: Alice

Gender: Female

Ethnicity: Anglo

Child ID: 12866

Date of Birth: January 2000

Personal Profile:

Alice is profoundly mentally retarded with autistic symptoms. She is paralyzed on the left side of her body and has some visual and hearing impairments. At the present time, Alice has to be tube fed. She enjoys the stimulation she receives from being held and rocked. Alice is currently functioning at the level of a 3-11 month old child in development skills. Alice is a very active child and her overall health status is good.

Special Needs:

Developmental Special Needs: **Severe**

Emotional Special Needs: **None**

Physical Special Needs: **Severe**

Medical Special Needs: **Moderate**

Desired Family Profile:

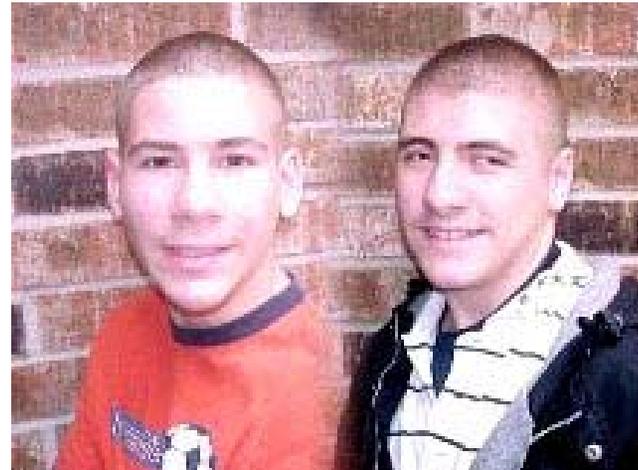
Alice will require the patience of a loving and caring person who can provide her with appropriate supervision around the clock.



TARE

Group Profile:

William and Kevin are two very energetic young men who enjoy watching TV, playing the video game, and playing sports, such as football and basketball. Kevin and his brother are currently doing well in school. Even though they have shared interests they have their differences. For example Kevin enjoys reading his Bible and Science Fiction books while William's pastime is playing his Gameboy. They both are doing well in school. They get along well with their peers as well as their current foster parents. Both boys continue to struggle with anger management issues but they both have made improvement and have had few episodes lately.



Related Siblings
William BJ
Kevin



TARE

Luis



Name: Luis

Gender: Male

Ethnicity: Hispanic/Latino

Child ID: 15975

Date of Birth: March 1996

Personal Profile:

Luis is a very likeable boy. He recognizes the voices of caregivers and foster family. He also enjoys listening to the radio. Although, Luis' condition prevents him from participating in normal activities, his current foster family includes him in all of their family functions. Luis has been diagnosed with Cerebral Palsy and Mental Retardation. He reacts quietly and closes his eyes whenever he gets upset. He participates in special education classes due to his disabilities. He receives physical, occupational and speech therapy and utilizes adaptive aids. Luis is very attached to his current foster mother. He likes to listen to her voice and she enjoys talking to him.

Special Needs:

Developmental Special Needs: **Severe**

Emotional Special Needs: **Moderate**

Physical Special Needs: **Severe**

Medical Special Needs: **Severe**

Desired Family Profile:

The ideal adoptive family for Luis would be one that would know or be willing to learn about his severe medical and physical needs. It would be a family that would be committed to stimulate him emotionally and physically so that he could continue to thrive as much as he can. Luis' ideal adoptive family would also be one that would be able to incorporate him in extra-curricular family activities despite his medical and physical needs.



China



Name: China

Gender: Female

Ethnicity: Anglo

Child ID: 15755

Date of Birth: July 1993

TARE

Personal Profile:

China is a happy, social and cheerful child. She enjoyed social gatherings, board games, and riding her bike. She loves her long braids and getting her hair styled. She is well liked by her peers and the staff where she lives. China attends adaptive education classes and likes school. She does have homework mainly because she would rather talk with her friends than do her work at school. This year she has started reading, phonetically, and is proud of her accomplishments. China has shown that she can attempt new areas of skill with diligence. Her strengths lie in the fact that she wants to learn and she has shown good progress and grows from the praise from her progress. She has been diagnosed with Mental Retardation and Attention Deficit Hyperactivity Disorder. China wears eyeglasses and will need to continue with Occupational Therapy and Speech Therapy.

Special Needs:

Developmental Special Needs:

Moderate

Emotional Special Needs:

Moderate

Physical Special Needs:

None

Medical Special Needs:

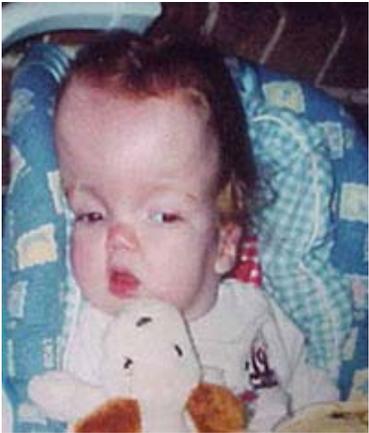
Moderate

Desired Family Profile:

China will do best in a family where she can receive a lot of one on one attention. She will need a loving and structured environment with ongoing training. China will do well with other children in the home that could be role models for her. Her forever family will need to be aware of China medical issues and monitor her health. China stated that she wants to be adopted and problems are expected in her move to her new family.



Jazz



Name: Jazz

Gender: Male

Ethnicity: Anglo

Child ID: 17055

Date of Birth: March 2002

TARE

Personal Profile:

Jazz is a loving little boy. He has a beautiful smile that is highly contagious. When he smiles it is as if the world has stopped moving. He has specialized medical needs that prevent him from walking or talking, but he has own special way of communicating with others. When you stroke his flaming red hair, he will smile. If you tickle his feet, he will move them up and down. Jazz has been diagnosed with Dandy-Walker Malformation (DWM). DWM involves the maldevelopment of the cerebellum and frequently causes hydrocephalus, which Jazz also has. He has a shunt in place to allow the continuous drainage of the blocked cerebellum fluid. Jazz is also fed through a G-tube. Jazz also suffers from seizures, which is associated with his DWM. He is prescribed medication to assist with the seizures, which are currently not frequent. Jazz is also legally blind. The doctors believe that he is able to differentiate light and dark and is able to see large shapes. Jazz responds to his foster mother's voice and smiles when she speaks to him. Jazz will make gurgling noises when he wishes to be moved. Jazz is able to get around by a specialized stroller/wheel chair. Jazz is going to be a delight to any family that is able to accept his limitations and help him to develop to his full potential.

Special Needs:

Developmental Special Needs: **Severe**

Emotional Special Needs: **Mild**

Physical Special Needs: **Severe**

Medical Special Needs: **Severe**

Desired Family Profile:

Jazz needs a loving and kind adoptive family. The family must be willing to work with therapists and doctors to ensure that he receives the most appropriate services available. Jazz needs a great deal of time from a family that must be knowledgeable about his needs.



How-Family Perspective

Steps toward becoming adoptive parent

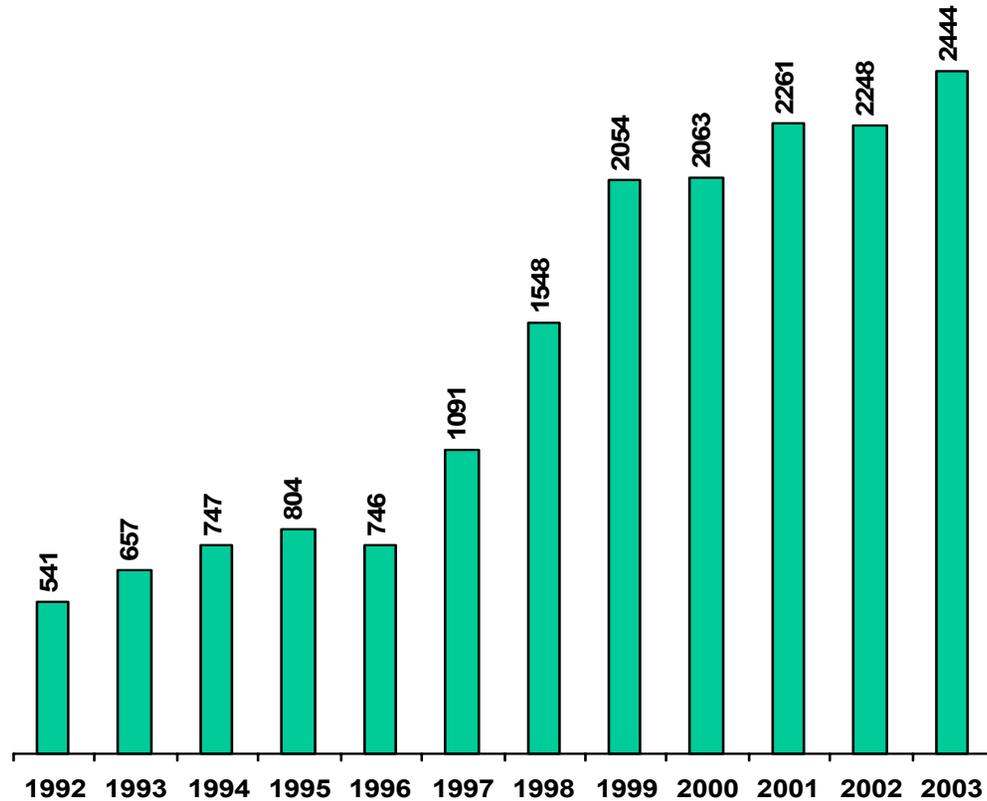
- Family inquires about adoption
- Family attends pre-service training
- Home study completed
- Family approved to adopt

Cost to adopt

- DFPS does not charge fees
- Legal fees associated with finalizing the adoption (court petition/filing fees) are paid by the family



Accomplishments-Historical Perspective



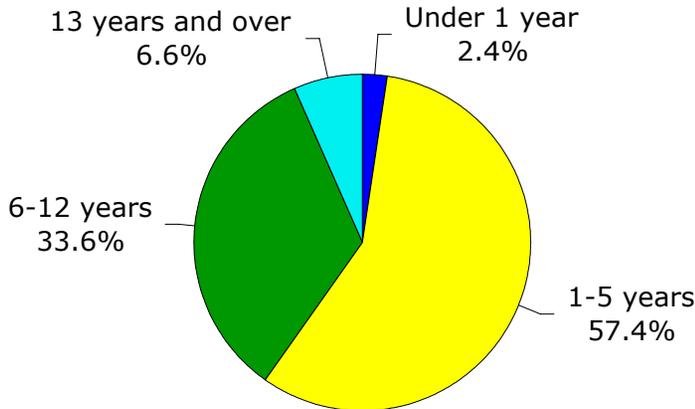
Consummated Adoptions By Fiscal Year



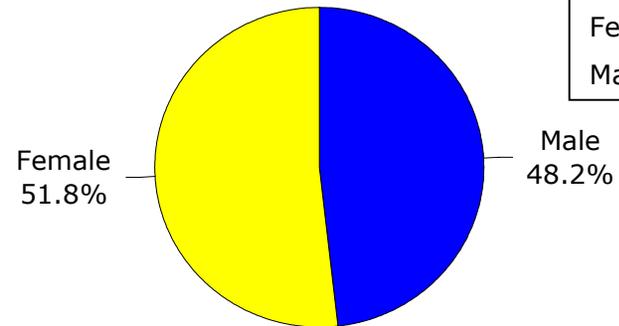
Accomplishments-Children in Consummated Adoptions, FY 2003

Total 2444

Age



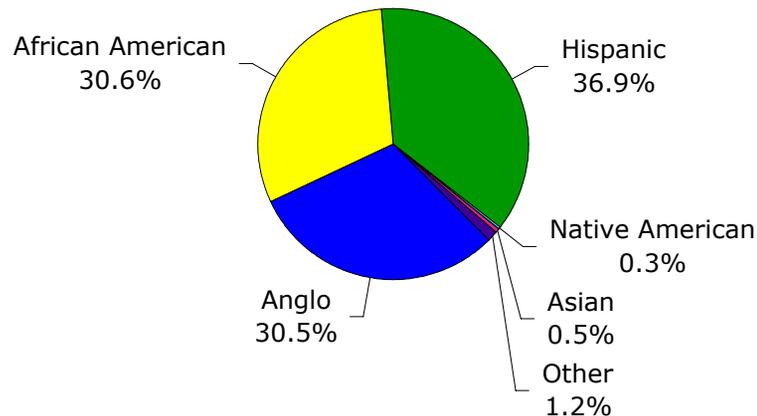
Gender



<u>Age</u>	
Under 1	59
1-5	1403
6-12	821
13 and over	161

<u>Gender</u>	
Female	1266
Male	1178

Ethnicity



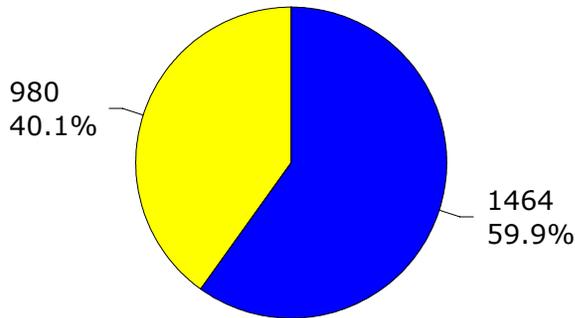
<u>Ethnicity</u>	
Anglo	746
African American	748
Hispanic	902
Native American	7
Asian	12
Other	29



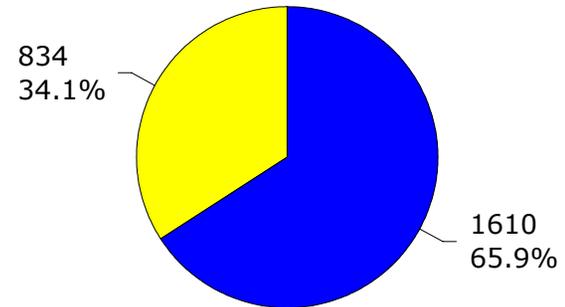
Accomplishments-Children in Consummated Adoptions, FY 2003

Total 2444

Special Needs



Sibling Groups

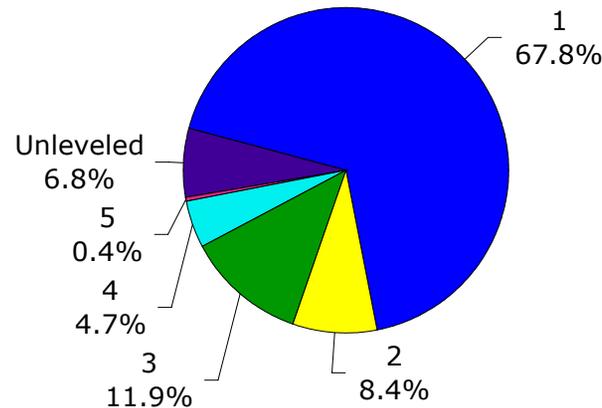


■ Disabling Condition ■ No Special Characteristics

■ Part of a Sibling Group ■ Not Part of a Sibling Group

Level of Care

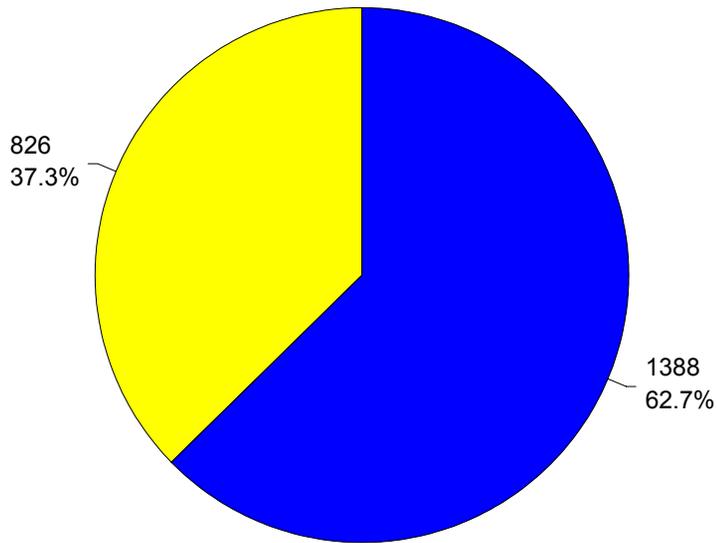
Level of Care	
LOC 1	1656
LOC 2	205
LOC 3	292
LOC 4	115
LOC 5	9
LOC 6	0
Unleveled	167





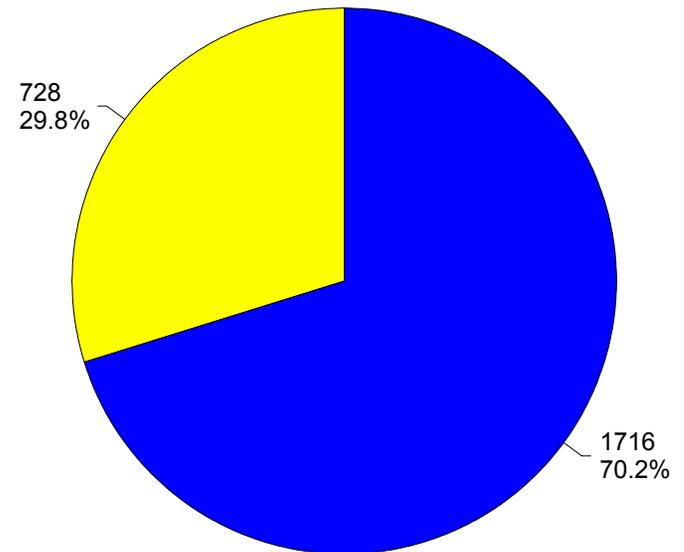
Accomplishments-Children in Consummated Adoptions in FY 2003

Race/Ethnicity of Children and Adoptive Parents



- Race/ethnicity of parent(s) is same as child
- Race/ethnicity of one or both parents differs from child's

Adoptions by Type of Agency



- Children adopted by DFPS families
- Children adopted by non-DFPS families*

(* Non DFPS includes private agency adoptions, relative adoptions and out of state adoptions.)



Services-Adoption Assistance

All DFPS children adopted are eligible to receive:

- Post Adoption Services

Criteria to qualify for other benefits:

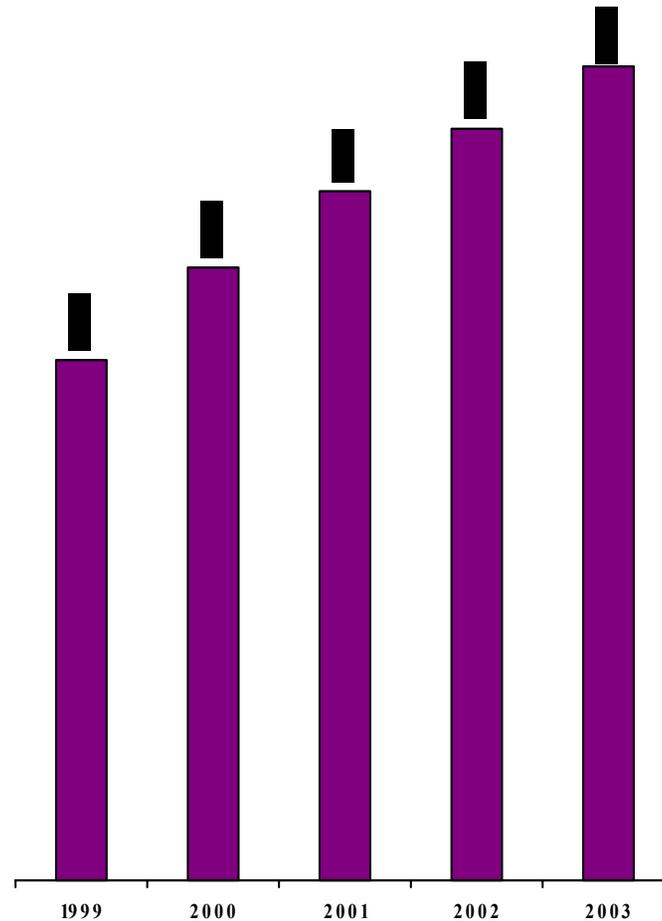
- Over 2 and a minority;
- Over 6 and Anglo;
- Sibling group; or
- Diagnosed medical or emotional disability.

Other Benefits may include:

- Adoption Subsidy
 - Monthly stipend
 - Non-recurring adoption expenses
- Medicaid
- Tuition Waiver



Next Steps-Historical Perspective



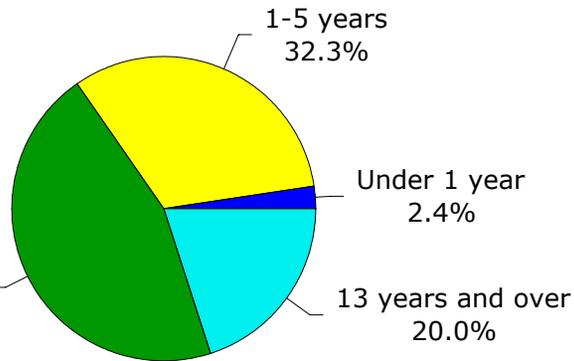
Children Awaiting Adoptive Placement at the end (Aug. 31st) of each Fiscal Year



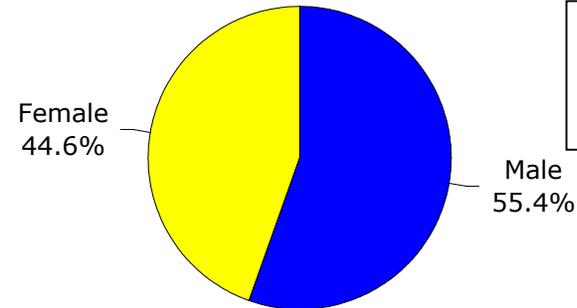
Next Steps-Children Awaiting Adoptive Placement as of August 31, 2003

Total Children 3,766

Age



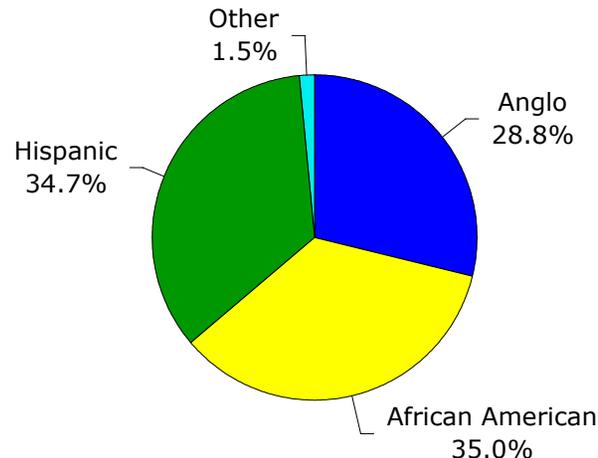
Gender



<u>Age</u>	
Under 1	90
1-5	1216
6-12	1707
13 and over	753

<u>Gender</u>	
Female	1678
Male	2088

Ethnicity



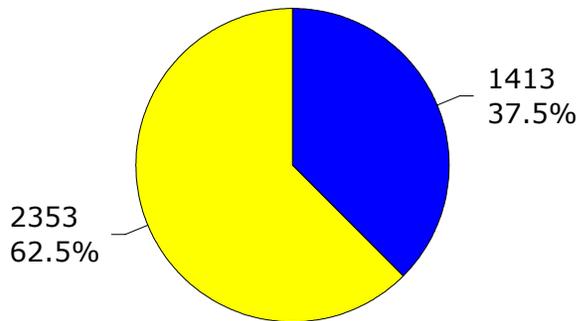
<u>Ethnicity</u>	
Anglo	1086
African American	1317
Hispanic	1306
Other	57



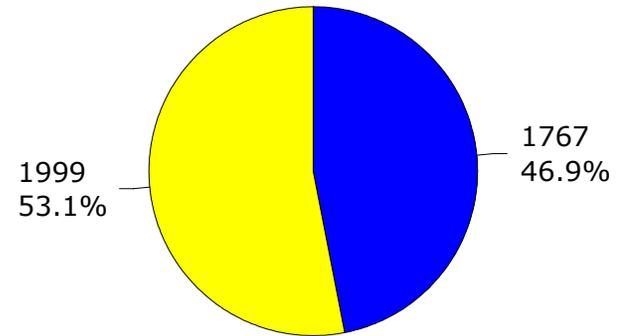
Next Steps-Children Awaiting Adoptive Placement as of August 31, 2003

Total Children 3,766

Special Needs



Sibling Groups

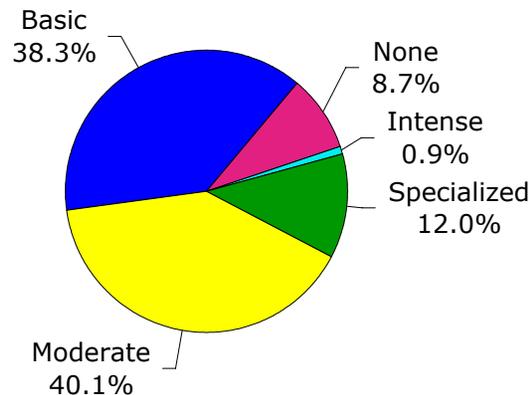


■ Disabling Condition ■ No Special Characteristics

■ Part of a Sibling Group ■ Not Part of a Sibling Group

Level of Care

Level of Care	
Basic	1442
Moderate	1512
Specialized	451
Intense	33
Unleveled	328





Removing Barriers to Adoption

DFPS Initiatives:

- Faith Based Recruitment
 - recruit and verify two families per congregation
 - develop support services for these families within the congregation
 - expands community-based partnerships

- Targeted Recruitment
 - child specific recruitment efforts
 - efforts are focused on reaching out to families with similar demographics of children waiting
 - highlight older children, children with disabilities and siblings



Removing Barriers to Adoption

Additional DFPS Initiatives:

- Participate in national recruitment efforts of AdoptUSKids
 - national campaign starts May 2004
 - receive and respond to inquiries from prospective foster and adoptive families
 - potential to increase families interested in fostering or adopting our children



Removing Barriers to Adoption

Possible Legislative Initiatives:

- Expand adoption benefits
- Create three tiered subsidy
- Increase post adopt services
- Increase contracted adoptions