



Foster and Adopted Children: Special Emotional Needs

The American Academy of Pediatrics recognizes that pediatricians have an important role in working with foster and adoptive families to not only help with an easier transition process for the well-being of the child, but in addition, to caring for their medical needs.

ADOPTION

In the 2003 issue of *Pediatrics*, Ohio pediatrician Deborah Borchers, MD, with the national Committee on Early Childhood, Adoption and Dependent Care, recommended the following basic principles for pediatricians working with adoptive families:

Medical Issues – Adopted children should have a comprehensive medical examination at the time of placement, including screening tests related to blood-borne pathogens and environmental toxins. Immunizations should be validated for children adopted internationally. Immunizations should be repeated or antibody titers checked. Particular attention should be paid to behavioral and emotional needs as well as addressing developmental delays.

Developmental Understanding – Pediatricians should help families understand that there may be emotional issues such as a feeling of loss of the birth family and culture, separation issues, confusion and even anger about being adopted. By encouraging open communication about adoption issues, a pediatrician may better help the child and family to deal with these feelings.

Communication – Pediatricians should work with families to encourage using words such as “adopted” and “birth or biological family” as soon as the child is placed in your home. Families should share a child’s adoption story with him/her from infancy on.

Cultural Ties and Searching for Biological Family – Pediatricians are encouraged to become aware of local resources, such as locating biological families, support groups and behavioral health professionals to help families with this process. Pediatricians should encourage families to connect with other similar families in their communities as well as abroad. Pediatricians should support teens and young adults who wish to search for their biological family.

Books:

The Handbook of International Adoption Medicine: A Guide for Physicians, Parents, and Providers by Laurie Miller (Oxford University Press, 2005)

How I Was Adopted by Joanna Cole (Harper, 1999)

Attaching in Adoption: Practical Tools for Today's Parents by Deborah Gray (Perspectives Press, 2002)

The Adoption Medicine Guide by Deborah Borchers, MD, a downloadable booklet <http://www.adoptivefamilies.com/medical>

Parenting the Hurt Child: Helping Adoptive Families Heal and Grow by Gregory Keck and Regina Kupecki (Pinon Press, 2002)

Being Adopted: The Lifelong Search for Self by David M. Brodzinsky, Marshall Schechter, and Robin Marantz Henig (Anchor, 1993)

Raising Adopted Children; by Lois R. Melina (HarperCollins, 1998)

Real Parents, Real Children; by Holly van Gulden and Lisa M. Bartels-Rabb (Crossroad, 1995)

Talking With Young Children About Adoption; by Mary Watkins, Susan Fisher (Yale University Press, 1995)

Organizations

Adoptive Families (magazine and Web site)

Toll free subscription line (800) 372-3300
www.adoptivefamilies.com

National Adoption Information Clearinghouse
www.childwelfare.gov

Child Welfare League of America (CWLA)
(202) 638-2952
www.cwla.org

North American Council on Adoptable Children (NACAC)
(651) 644-3036
www.nacac.org

Go to the American Academy of Pediatrics Web site (www.aap.org) and review the Policy Statement on the Committee on Early Childhood, Adoption and Dependent Care

FOSTER CARE

In the 2002 issue of *Pediatrics*, the Committee on Early Childhood, Adoption and Dependent Care developed recommendations for pediatricians working with foster children and their families. Some of those recommendations include:

Standards of Care – Pediatricians are encouraged to use the *Fostering Health: Health Care for Children in Foster Care* manual developed by District II of the AAP in 2001. This is a reference for the medical, developmental and mental health practitioners.

Health Care Components – There are three components for health-care services:
1) initial health screening for infectious diseases,
2) comprehensive medical, dental, and mental health evaluations, and
3) ongoing primary care.

The AAP committee recommends the screenings and comprehensive medical evaluations be provided within the first month of placement into foster care.

Transfer of Medical Information – Because of the prevalence of children moving in and out of foster care, and between different foster homes, it is important that each child have an abbreviated health record. This form can be retained by the child’s caseworker and should detail a complete medical history and immunization record. A copy should be given to the new caregiver.

Resources for Foster Care:

FosterClub is a national network for youth in foster care
<http://www.fosterparenting.com>

National Foster Parent Association, <http://www.nfpainc.org>

Ohio Department of Job and Family Services
<http://jfs.ohio.gov/factsheets/fostercare.pdf>

The Center for Infants and Children with Special Needs at Cincinnati Children’s Hospital Medical Center offers resources and information to those interested in becoming a foster parent to a child with special health care needs, <http://www.cincinnatichildrens.org/svc/alpha/c/special-needs/resources/foster-care.htm#considerations>

FosterParent.com, an online training for foster, adoptive, kinship, and birth parents. These interactive courses provide valuable information, insights and advice from experts on dealing with serious child behavior problems.
<http://www.fosterparentcollege.com>

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Ohio Department of Alcohol and Drug
Addiction Services

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ADOPTION

Adoption: Establishing Open, Honest Communication

If you have adopted or are exploring adoption, you will probably experience a range of emotions including issues related to the loss of the biological connection with your child. Children who have been adopted experience the same range of emotions and more. To assist a child through this process, there are some steps that you can take.

Talking About Adoption – Begin using words such as “adopted” and “birth or biological family” as soon as the child is placed in your home. Families should share a child’s adoption story with him/her from infancy on.

Discussing their Adoption – Just as any child likes to hear about the day he/she was born, an adopted child will delight in hearing the stories of his/her adoption. Consider keeping a journal or scrapbook of this process.

Birth or Biological Families – Discuss with your pediatrician possible resources in locating birth or biological families. Keep in mind that beyond the “search” there are many emotional issues that you as a family may go through and therefore it is important to consider working with a behavioral health provider in this process.

FOSTER CARE

If you are a foster family or considering becoming a foster family there are some important steps that you can do to make sure the medical and emotional needs of the child are met.

Medical Needs – Make sure that within the first month of care the child has a comprehensive medical exam to guarantee that they are being provided with any special medical or behavioral health treatment. This should include medical screening, developmental and behavioral health, and dental care.

Emotional Needs – Remember that a foster child may have feelings of blame, anger, hurt, sadness, or be afraid and distrusting since many of these children have suffered some form of serious abuse or neglect and roughly 30% of children in foster care have severe emotional, behavioral, or developmental problems. It is important to remember that in addition, the foster parents may also have emotional difficulty in dealing with emotions toward the biological family, stress in helping the child deal with their emotional needs and the possible return of the child to the biological family. To address these issues, foster families should consider working with local support groups or a behavioral health provider.

Welcoming a Child – In order to provide a positive transition, you may consider some of the following: provide the child with their own space and belongings such as a blanket or other comfort item; put their picture up with other members of the family; and incorporate the child’s culture into your own family’s beliefs.

Medical Records – Because of the prevalence of children moving in and out of foster care, and between different foster homes, it is important that each child have an abbreviated health record. This form can be retained by the child’s caseworker and should detail a complete medical history and immunization record. A copy should be given to the new caregiver

Teamwork – Keep in mind that you are a member of a team, along with the caseworker, child’s family, child’s legal guardian, and pediatrician – this means you are not alone in caring for this child.

Maintaining a Family Connection – Some possible ideas to help create and maintain a sense of history and possibly a stronger relationship with the child’s family include: make a scrapbook or photo album that the child can take with them of important things in their life, construct a family tree or life book with the child of their family history, or assist the child in sending parents and family members cards for birthdays or special occasions.

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