Resource Families Provide Adoptive and Foster Parenting

A Family
Department of Health & Human Services
It’s an Opportunity...
for you to make a difference in a child’s life.

It’s Caring for a Child...
who has been abused/neglected until his/her parent(s) can resume the responsibility, or a permanent home can be found. It is providing that permanent home for a child if you chose to adopt.

It’s a Commitment...
to help a child in foster care and their families through a difficult period. It’s a job for people who can provide love and guidance and then assist in the transition if a child goes home or moves onto adoption. It is a lifetime commitment to a child for an adoptive family.

It’s Learning and Developing...
the parenting skills needed to meet the unique needs of each child placed in your home.

...It may be the toughest AND the most rewarding job you have ever had!
Introduction

Welcome!

The Maine Department of Health and Human Services (DHHS) is committed to working with a child’s birth family to safely maintain the child’s placement in their family. When this goal cannot be achieved a child may enter the care and custody of DHHS. The Department is committed to placing the child in a family that can meet the child’s need for safety, permanency and well-being. *Every child has the right to be parented in a safe and permanent home.*

Resource families (*includes kinship and permanency guardianship families*) provide a safe setting for children through foster care and adoption. Foster families are able to care for children while maintaining their contact with their birth family and working toward reunification. If reunification is unsuccessful, another permanent goal is explored, the most desirable of which is adoption.

Resource families have chosen to share their homes and to love and care for children who cannot live with their birth families. Foster families care for children whose parents are trying to resolve the problems which led to the removal of the children. Adoptive families provide a permanent family for children once the court has determined that those children cannot return to their birth family.

There are special trainings for our resource (foster/adoptive) parents on many issues, including special needs and the behaviors exhibited by some children who come into care.

DHHS provides services to thousands of families in an effort to preserve the family unit. There are more than 1,500 children in foster care in Maine. Approximately 300 children are adopted annually through DHHS.
Who Can Be a Resource Parent?
(Foster/Adoptive Parent)

People with various life experiences!
You can...

- Be single, married, divorced, in a partnership or same sex relationship
- Have other children
- Be a working parent
- Live in a house, apartment, condo or mobile home
- Have children of the same gender share a room
- Have a modest income
- Have a disability
- Be a senior citizen
- Have no parenting experience

There are other things to consider.

A resource parent (foster/adoptive) needs to have a stable lifestyle, and be at least 21 years old.

You must be willing to work with the social workers and other community professionals, advocating for the child’s needs in school, counseling and the medical community. You must have energy and time to give foster/adoptive children the attention they will need. You must have support systems: family, friends or others to call on for support. And, you must be able to ask for help.

FOR RESOURCE (FOSTER/ADOPTIVE) FAMILIES

Problems in the children’s birth parent home such as drug/alcohol foster care necessary. In most cases the court has ordered that children range from a short-term placement, while DHHS works with birth parents an alternative permanent situation if a child cannot return home.

When birth parents are unable to correct the issues that exist in their home occurs, the children are then available for adoption. A child may be adopted
Who Can Be a Parent? • Who Are the Children

Who Are the Children Who Need Foster/Adoptive Care?

Foster/adoptive children who need homes through DHHS have “special needs” due to the abuse/neglect they have experienced. These special needs may include:

- A physical, mental or emotional disability
- A medical condition
- Being part of a sibling group that needs to be placed together
- Having factors in their birth family’s background such as severe mental illness, substance abuse, genetic or medical conditions or illnesses that places the child at risk for future problems
- Developmental delays that include the need for speech, physical or occupational therapies or special services in school
- Behavior issues: temper tantrums, hitting/kicking, destruction of property, assaultive or aggressive behaviors
- Problems in social functioning such as stealing, lying or causing problems at school or in the neighborhood
- A background of sexual abuse
- The need for constant supervision
- Attachment issues due to multiple placements, such as an inability to demonstrate affection
- A need to attend therapy

dependency, family violence, child abuse or neglect sometimes make be placed in foster care to keep them safe. This foster placement may to resolve the issues that caused them to be removed from their family; to

to keep their child safe, a court may terminate their parental rights. If this by their foster family, relative, or by another family approved for adoption.
You have to be flexible, be patient and have a good sense of humor.

Successful Resource (Foster/Adoptive) Families...

Communicate effectively. Resource parents must be able to have positive interactions with their family members, neighbors and others in the community such as educational, medical, mental health and social service professionals and especially with children and often with children’s birth families.

Share parenting. Resource parents must share planning and caring for children with the agencies involved, and must support children’s feelings for their birth family. Adoptive parents must work collaboratively with the agency until the adoption is legalized.

Help children develop a positive identity and self-esteem. Children who have been neglected or physically or sexually abused often blame themselves for their families’ problems. Foster/adoptive parents must demonstrate an ability to help children understand and deal with their family and placement history in a non-judgmental way, and build skills in helping the child to develop a positive identity and self-esteem.

Help children learn appropriate behaviors by modeling behaviors using corrective methods that do not include physical punishment. Children who have been abused often expect that their foster/adoptive parents will also use physical force with them. It is critical that foster/adoptive parents use discipline methods that do not include physical contact with the child whom they foster/adopt.

Assess the impact of fostering/adopting on one’s family. The addition of a new family member affects every other member of the family. Foster/adoptive families must be able to assess the impact of adding a new family member on current family relationships and resources. They must be able to effectively deal with the changes in their family, and be committed to asking for help with difficult issues.
Placement and Transitions

DHHS staff will assist you to determine the age, sex, and needs of the children with whom you would be most skilled to parent. DHHS staff will decide if a child is right for your home, but you can refuse a placement; no child will be placed without your permission. If you want children under the age of six, keep in mind that we may prefer to have someone in the family at home full time.

To make the transition to your foster home easier for children, the first preference is to place children in a home within the same community. Other factors to consider include the foster parents’ willingness to work with birth parents, and the child’s personality and unique needs. A Family Share meeting will occur with DHHS staff, the Resource parents, and the Biological parent(s) within five days of placement.

If the permanent plan for the child is adoption, foster parents are expected to help make the transition easier by working with the child’s prospective adoptive parents and by participating in visits with them. This involvement will make the transition a positive experience for the child.

Some foster parents decide that they want to adopt the foster children who have become available for adoption while in their care. When this occurs work is done with the child and family to help the child understand this will become his/her permanent home.

“When the kids come into care, they are like a tight rosebud, and I get the opportunity to watch them open into a beautiful flower...that's what makes foster parenting good for me.”

“A child we loved became a permanent member of our family when we adopted him.”
If you are interested in becoming a DHHS resource family (foster/adoptive), the following steps must be taken:

1. **Inquiry:** Call your local DHHS office (see back cover) to request an information packet.

2. **Information:** Attend a DHHS information meeting to hear about the needs of children served by DHHS. The meeting will help educate you about the process of becoming a foster/adoptive parent.

3. **Application:** After you have had a chance to think about the information presented and discuss it with your family members, please call and request an application package to fill out. When we receive your completed application:
   
   **a.** Your application is given to a designated DHHS staff person who will assist your family.

   **b.** A criminal history check, a child protective check, and a motor vehicle report will be obtained for all adult members of the household. (Includes finger printing)

   **c.** Reference forms are sent to the 3 references you listed on your application.

   **d.** A fire inspection by the State Fire Marshal’s Office/or DHHS worker, and a water test (if you are not on a municipal water source) will be requested for you.
4. **Home Study Process:** Meetings with a licensing worker or adoption/permanency caseworker provide an opportunity to get to know your family and your family history. Workers may wait until references and criminal checks have been returned before making a home visit.

5. **Decision:** Once the home study and reference checks have been completed, the worker will make recommendations for a resource home license approval/denial (foster and/or adoption). The supervisor will review and approve/disapprove.

6. **Training:** Resource parents are required to complete introductory training before licensure/approval (18-24 hrs over 4 to 8 sessions). Kinship training is also offered.

7. **Licensing:** If all is in order and recommendations are positive, you will be licensed as a resource family (foster family and/or approved adoptive family). Now you are ready for a placement, and DHHS staff will assist you to find the right child for you to parent.

**NOTE:** Licensing or approval does not guarantee a placement of a child.

**THE REWARDS**

- Fulfilling your desire to parent a child.
- Breaking the cycle of child abuse.
- Giving many children their first chance to trust.
- Helping children with some of life’s hardest experiences.
- Learning successful parenting techniques.
Support Services

Once a child is placed with a resource family (foster/adoptive home), services are available to assist the family and child throughout placement.

Adoptive and Foster Families of Maine (AFFM)
- AFFM’s mission is to help Maine’s foster/adoptive children find permanent healthy homes
- Provide support services for adoptive, foster, kinship and permanency guardianship families
- Contracted by DHHS to provide support to foster and adoptive families
- 800 line for assistance
- Library, training programs
- Conferences, seminars and a newsletter
- Allegation support, technical support and a legislative action committee
- Annual foster/adoptive/kinship parent conference
- Available listing of foster/adoptive/kinship parent support group

Casey Family Services
- Located in Bangor and Portland. They have multiple services available for both foster and adoptive families, including post adoption services.

Child Welfare Training Institute (CWTI)
- CWTI conducts the introductory training for resource parents (foster/adoptive parents)
- CWTI uses a “competency-based” curriculum which explores motivations of participants for becoming foster/adoptive parents
- It includes development of skills required to work with special needs children
- Also, knowledge of various systems with which parents will interact and the impact of abuse/neglect on children’s development and behavior.

Staff Education and Training Unit (SETU)
- SETU is the training component of DHHS. SETU works to meet the educational and training needs of the DHHS; local provider agencies, and resource parents (foster and adoptive parents)
- Trainings in different areas are offered throughout the state; with an annual catalogue of trainings available.

Annual Foster/Adoptive/Kinship Parent Conference
Each year foster/adoptive parents get to know one another through this event. There are training programs and free time scheduled throughout the day. This conference is set up through Adoptive and Foster Families of Maine and additional information can be obtained from them at www.affm.net or 1-800-833-9786.
The commitment is not just to the child, but to the whole concept of providing the best possible care for a child through a team approach that involves the birth parents, foster parents, social workers, the courts, police, educators and anyone else involved.

"I feel like I'm contributing by helping a child become a productive member of society."
Non Discrimination Notice: In accordance with Title VI of the Civil Rights Act of 1964 (42 S.C. §2000 d et seq.), Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), and the Age Discrimination Act of 1975, as amended (42 U.S.C. §6101 et seq.), the Maine Department of Health and Human Services does not discriminate on the basis of race, color, national origin, handicap or age in admission or access to or treatment or employment in its programs or activities. Ms. Kim Pierce, Affirmative Action Officer, has been designated to coordinate our efforts to comply with the U.S. Department of Health and Human Services regulations (45 C.F.R. Parts 80, 84 and 91) implementing these Federal Laws. For further information about the regulations and our grievance procedures for resolution of complaints alleging discrimination, please contact Ms. Kim Pierce, State House Station #11, 221 State Street, Augusta, Maine 04333, or call (207) 287-3488 (voice) or 1-800-332-1003 (TTY).