

Strengthening and Preserving Adoptive Families: A Study of TANF-Funded Post Adoption Services in New York State

Prepared by

Rosemary J. Avery, Ph.D.
Weiss Presidential Fellow
Professor

Department of Policy Analysis and Management
Cornell University

April 2004

ACKNOWLEDGEMENTS

The author wishes to thank the staff at the Post Adoption Services Grantee agencies for their help and assistance in the design of the instruments used in this evaluation, in administering the surveys, and for their feedback on the evaluation effort throughout the duration of this project.¹ I extend a special note of thanks to Judith Ashton, Executive Director of the New York State Citizens' Coalition for Children, for coordinating the efforts of the PAS Grantee agencies and for supporting and facilitating the evaluation effort. Her advice and guidance in the writing of this report were invaluable. A final note of thanks goes to Laura Colosi, Graduate Research Assistant in the Department of Policy Analysis and Management at Cornell University for her assistance in the execution of the mail survey and for preliminary data analysis.



Rosemary J. Avery, Ph.D
Weiss Presidential Fellow
Professor
Department of Policy Analysis and Management
Cornell University

¹The *evaluation* results contained in this report were not supported by grant funds. The 13 participating agencies, the coordinating efforts of Judith Ashton, Executive Director of the New York Citizens' Coalition for Children, and the time and expertise of the author were voluntarily donated to this cross-project evaluation effort.

TABLE OF CONTENTS

	<i>Page</i>
PROJECT OVERVIEW AND EXECUTIVE SUMMARY	1
INTRODUCTION	7
Project Objectives and Funding.....	7
PROJECT EVALUATION	9
Objectives of the Project Evaluation.....	9
Methods of Evaluation.....	9
PROFILE OF FAMILIES SERVED BY THE PROJECT	11
Number of Families.....	11
TANF Eligibility	11
Demographic Characteristics of Families Seeking Services	12
Characteristics of Adoptive Families.....	13
Characteristics of Adopted Children.....	14
Characteristics of Children’s Special Needs.....	15
REASON FOR POST ADOPTION SERVICES CALL	17
Type of Services Requested	17
OUTCOME OF POST ADOPTION SERVICES CALLS	21
PARENT SATISFACTION SURVEYS	23
Frequency of Services Used	24
Satisfaction with Services Received.....	26
Responses to Open-ended Questions on Survey	28
POST SCRIPT	36
APPENDICES	37
Appendix A Additional Tables: Services Provided by the Agencies	
Appendix B Survey Instruments	
Appendix C Open-ended Responses to Survey Question 1	
Appendix D Open-ended Responses to Survey Question 2	
Appendix E Open-ended Responses to Survey Question 3	

LIST OF TABLES

Table 1.	Number of Intake Forms Submitted by Project Agencies	11
Table 2.	Number of TANF-eligible Families Served by Project Agencies	12
Table 3.	Demographic Characteristics of Families Seeking Services.....	13
Table 4.	Characteristics of Adoptive Homes.....	14
Table 5.	Characteristics of Adopted Children	15
Table 6.	Caller-identified Child’s Special Needs	16
Table 7.	Type of Special Need by Age of Adopted Child.....	16
Table 8.	Types of Post Adoption Services Requested by Caller for Any Adopted Child in the Family.....	18
Table 9.	Types of Post Adoption Services Requested by Intake Worker	19
Table 10.	Percent of Services Requested by Child’s Special Needs.....	21
Table 11.	Outcome of the Initial Call.....	22
Table 12.	Referrals after Initial Call.....	22
Table 13.	Reason for Referral to Another Agency.....	23
Table 14.	Number of Satisfaction Surveys Received by Agency.....	24
Table 15.	Number of Agencies Offering Services and Number of Respondents Using Service	25
Table 16.	Number of Respondents Using Service and Percent Satisfaction with Service: All Agencies	27
Table 17.	Frequency of Services Used by Whether Families Were Better Off or Not.....	29
Table 18.	Frequency of Services Used by Whether Family Had a Child At Risk of Out of Home Placement	32
Table 19.	Frequency of Services Used by Whether Child Remained in the Home	34

PROJECT OVERVIEW AND EXECUTIVE SUMMARY

In June 2000, 13 community-based agencies were awarded funds of approximately \$3.3 million for the first year to establish Regional Adoption Centers specifically intended to support New York State's TANF-eligible families in the post adoption period.¹ The primary purpose of the funding was to reduce the number of adoption disruptions and dissolutions in New York State and the subsequent re-entry of youth to the foster care system. To accomplish these goals, services and training were provided by a total of 13 participating agencies in New York City and Upstate New York with the purpose of strengthening family coping skills and improving family communication and stability.

The purposes of the project evaluation effort were to: monitor the number of families receiving services through the post adoption services grant funds; determine the characteristics of families receiving these services; identify the types of services requested and received by these families; obtain feedback from families regarding their satisfaction with the services provided; and determine if the services provided impacted family functioning and stability in the post adoption period.

Two evaluation instruments were used. Workers at each participating agency completed an intake form for each new family who contacted the agency for post adoption services (N=1,053). Eighteen months after the initiation of the project, a second instrument was used to obtain feedback from families who were served by the participating agencies regarding the impact of the services they received. A total of 815 satisfaction surveys were distributed to adoptive families. The final response rate to the survey was 18.7% (N=153 survey responses). The satisfaction survey instrument included a set of three open-ended questions. Respondents were provided blank space in which to respond with written comments, indicating their agreement or lack of agreement with statements regarding the impact of services on family welfare and stability.

¹The gross countable income of TANF-eligible households may not exceed 200% of the federal poverty level. New York State eligibility requirements for Temporary Assistance to Needy Families (TANF) can be reviewed at <http://www.otda.state.ny.us/tanf/>

Summary of study results from intake forms (N=1,053)

Characteristics of children and families served by the project

- A total of 2,105 adopted children living in 1,053 adoptive homes were served by agencies funded by the grants during the cross-project evaluation period.
 - The average age of adopted children in the families seeking post-adoption services through the grantee agencies was 10.2 years.
 - The majority of adopted children served were African American (52.8%) or Hispanic (14.7%), 48.3% of adoptive mothers and 22.6% of adoptive fathers were African American.
 - The majority of families served were TANF eligible (60.5%) and single-parents (68.8%).
 - 37% percent of families seeking post adoption services had one adopted child, 29.3% had two adopted children, and 26.8% had three or more adopted children.
 - 33% of families served by the project had birth children in the home, and 69.3% had birth children not living in the home.
 - Most of the adoptions for these families were non-kinship adoptions (57.7%), and 26.2% were kin adoptions.
 - The majority of adoptive children in these homes had behavioral problems (40%) and/or emotional problems (36.2%), 27.6% had special educational needs, 13% percent had treatment/service needs, and 11.7% had special medical needs.
 - The most prevalent special needs among children served by the project were behavioral and emotional. These particular special needs were found to be more prevalent among older children.
-
-

Services requested and received

- The most frequently requested or indicated services identified by both callers and intake workers **overall** were counseling, parent support groups, and mental health/guidance services.
- The most frequently requested services by **callers** were counseling (15.6%), support services (15.0%), educational services (11.6%), information about services (11.1%), and mental health/guidance services (9.4%).
- The most frequently indicated services by **intake workers** were support services (14.3%), information about services (13.3%), counseling (13.1%), education services (8.9%), and mental health/guidance services (8.9%).

Summary of study results from parent satisfaction surveys (N=153)

Most used services

- The most highly used services among the 153 adoptive families responding to the survey were: parent support groups (66.7%), and parent education/training (56.9%).
- Individual child counseling (49.7%), family counseling (43.8%), and individual parent counseling (42.7%) were also highly used.

Satisfaction with services received

- Results indicate a high overall level of satisfaction among the 153 families responding to the survey in regard to services they received from their agency. For most services the majority of families (above 90%) indicated that the services were “very useful” or “somewhat useful” in the post adoption period.
 - The most frequently used services among the 153 adoptive families responding to the survey (counseling, parent support groups, and mental health/guidance) also had the highest satisfaction ratings among these families.
-

Impact of services provided

- In response to the first open-ended question, ***“Overall, is your family better off or happier as a result of services you received?”*** 81.7% of respondents indicated “Yes,” 6.5% indicated “No,” 1.3% indicated they “Don’t Know,” and 10% left the question blank.
- Highlights of some of the open-ended responses to this question include:

“Our son would not be living in our home today if not for the clinical expertise and thoughtful assistance of [caseworker].”

“The child was withdrawn, moody, introverted before enrolling in the counseling and post adoptive child services. Interacting with other adoptive children and expressing their views has brought her out of her shell.”

“It’s not always easy dealing with the emotional, psychological needs of special needs children. My son (adopted as toddler) desperately needed counseling and we needed ways to deal with his behaviors (ex: ADHD, PPD-NOS, & CP). The counseling really helped – although he didn’t always listen, we learned ways to work with him ...”

“...[Caseworker]was able to provide me with crucial help...My family was falling apart. The support group for my child and I helped. The counseling [caseworker] gave was the key...I know that if [caseworker] had not been there for my family crisis, my family would not be together today...”

“When we joined the support groups, our still foster son had recently been released from [residential treatment center]. Without the group, I am not sure we would have adopted him. Nowhere else can we discuss our difficult family lives so frankly and find comfort and support with one another.’

- In response to the second open-ended question on the parent satisfaction survey, ***“When you first contacted the agency, did you have a child (or more than one child) in your home that you felt could not continue living with you?”*** 29.4% of families indicated “Yes,” 62.7% indicated “No,” and 7.9% did not respond.
-
-

- In response to the sub-question *“Did your child stay in the home as a result of the services you received from the agency?”* 73.3% indicated “Yes,” and 26.7% indicated “No.”
- Families who had a child at risk of out of home placement were more likely than those who did not have a child at risk of out of home placement to use the following services: crisis intervention, individual parent counseling, and child support groups.
- The final open-ended question on the survey allowed families to share any additional comments with the evaluator. Excerpts from these comments are provided below:

“These services should be standard for post-adoption and should also be available to foster and pre-adoptive families if we want to minimize the number of disrupted placements. I personally had two placements removed from my home (foster) that might not have happened had I received the support I now receive through [agency’s] post adoption resource center.”

“When I first started working with the agency, things were pretty rough with one of our children at home. The agency has guided us in getting the help we’ve needed and made us realize that with a lot of work and support, our family could get back to a good place. I don’t know where we would be without these services.”

“The support groups allow you to speak to others who may be going through similar situations. You can ask questions and get positive information, meaning you know, if that person made it through you can too. Support takes you a long way.”

“[Agency] was able to teach me what no one was able to teach me about my child.”

“The support group and education you get at the group is what keeps your family together. Once you know what the child is going through, you can make it.”

CONCLUSIONS

Results of the evaluation study indicate that more than 2,000 children in more than 1,000 adoptive homes were served by PAS Grantee agencies in New York State during the evaluation period covered by this report. Services were provided primarily to low income, single-parent families of color who had adopted unrelated children. In the post-adoption period, families sought help primarily with the behavioral and emotional needs of their adopted children, and the most frequently requested and used services were those that are relatively low cost for agencies to provide---parent support groups and parent training.

The majority of families responding to the satisfaction survey were highly satisfied with the services they received and found them very useful---particularly so with parent support groups and parent education/training. The services rendered through the grant had a substantial impact on the stability and functioning of families responding to the satisfaction survey. Over 80% of these families served indicated that they were better off after receiving post-adoption services. Furthermore, nearly 30% of them had a child at risk of out of home placement at the time they first called for post-adoption services. Of these families, 73% indicated that the child was able to remain in the home as a result of the help and support they received from the agencies.

INTRODUCTION

Project Objectives and Funding

In June 2000, 13 community-based agencies were awarded funds of approximately \$3.3 million for the first year to establish Regional Adoption Centers specifically intended to support New York State's TANF-eligible families in the post adoption period. The primary purpose of the program was to reduce the number of adoption disruptions and dissolutions in New York State and the subsequent re-entry of youth to the foster care system. To accomplish these goals, services and training were provided by 13 participating agencies with the purpose of strengthening family coping skills and improving family communication and stability. These post adoption services included:

- Information and Referral
- Case Management and Service Planning
- Support Groups for Adoptive Parents, and Adoptees
- Parenting Programs
- Counseling Services
 - Therapeutic Counseling
 - Family Counseling/Therapy
 - Individual Counseling/Therapy
 - Group Counseling/Therapy
- Diagnosis and Assessment
- Respite Care
- Crisis Response Teams
- Residential Placement and Treatment Services
- Access to Birth and Adoption Records
- Advocacy Services

In New York City, the following agencies received Post Adoption Services (PAS) grant monies to serve TANF-eligible families:

- **Catholic Home Bureau for Dependent Children** [\$350,000] to establish the Manhattan-Bronx Post Adoption Resource Center (PARC).
 - **Edwin Gould Services for Children** [\$200,000] to establish the Post Adoption Services/Regional Adoption Resource Center and the East Harlem Adoption Center.
 - **NY Council on Adoptable Children (COAC)** [\$350,000] to establish the New York City Adoption Resource Center (NYCARC).
-
-

-
-
- **Concord Family Services** [\$200,000] to serve families who reside in the Central Brooklyn Community of Bedford Stuyvesant and establish the Bedford Stuyvesant Adoption Resource Center.
 - **HeartShare Human Services** [\$250,000] to serve families who reside in Manhattan, Brooklyn, and Queens.
 - **St. Vincent's Services (SVS)** [\$300,000] to develop the SVS Post Adoption Family Services Program (PAFS) for Kings, Queens, and Richmond counties.
 - **Association of Black Social Workers** [\$175,000] to serve families who reside in the five boroughs of New York City.
 - **New Alternatives for Children, Inc. (NAC)** [\$200,000] to provide post adoption services to families who had adopted disabled and/or chronically ill children in the five boroughs of New York City
 - **Boys and Girls Harbor** [\$250,000] to serve families in Harlem, East Harlem, and Washington Heights.
 - **Family Focus Adoption Services** [\$100,000] to provide training to agencies throughout New York State.

The following agencies in Upstate New York received a PAS grant to establish regional adoption resource centers:

- **Abbott House** [\$221,330], located in Irvington, New York, to establish the Hudson Valley Post Adoption Resource Center to serve families in Westchester, Dutchess, Ulster, Rockland, Orange, and Putnam Counties.
 - **Parsons Child and Family Center** [\$333,137] to create an Adoption Resource Center in Albany, New York, to serve families in Albany, Schenectady, Rensselaer, Montgomery, Saratoga, Washington, Warren, Greene, and Fulton Counties.
 - **Salvation Army** of Syracuse, New York [\$350,000] to establish the Hearts and Home Adoption Resource Center to serve families in Onondaga, Oswego, Cayuga, Cortland, Tompkins, and Madison Counties.
-
-

PROJECT EVALUATION

Objectives of the Project Evaluation

The purposes of the project evaluation effort were to:

- monitor the number of families receiving services through the PAS grant funds
- determine the characteristics of families receiving these services
- identify the types of services requested and received by these families
- obtain feedback from families regarding their satisfaction with the services provided
- determine if the services provided impacted family functioning and stability in the post adoption period.

Methods of Evaluation

An instrument was designed by the project evaluator and project facilitator in collaboration with the grantees to collect information on families contacting the agencies for post adoption services (**Appendix B**).² Workers at each participating agency completed an intake form every time a new family contacted the agency for post adoption services. Caseworkers in 12 agencies used the same PAS *Initial Telephone Call Intake Form* to obtain relevant information from each caller.³ Information gathered included: relationship of caller to the adopted child/children, adoptive parent characteristics, family characteristics, and information about each adoptive child in the home. In addition, the instrument monitored caller's reason for calling and the types of services he/she requested. The PAS *Initial Telephone Call Intake Form* allowed both parents and workers to identify as many as 15 possible post adoption services needed for the family. Finally, the outcome of each call was noted, including if the caller made an appointment with the PAS Agency, was referred to another agency, or requested information only.

² The project evaluator was Rosemary J. Avery, Professor at Cornell University. The project facilitator was Judith Ashton, Executive Director of the New York State Citizens' Coalition for Children.

³ Evaluation data for this project were provided by 11 of the 13 grantees. Family Focus was funded specifically to provide state-wide training and did not provide services to TANF-eligible families. Edwin Gould Services for Children was unable to provide their data at the time of writing this report.

Eighteen months after the initiation of project effort, additional instruments were designed by the project evaluator and project facilitator in collaboration with the grantees to obtain feedback from families who were served by the participating agencies regarding the impact of the service on family well being and stability (**Appendix B**). These instruments were tailored to each agency's service offerings, i.e., they identified only the specific services offered by that agency. However, all survey instruments contained the same three category response codes (not helpful, somewhat helpful, very helpful), and the same three open-ended questions on the second page:

- Overall, is your family better off or happier as a result of services you received?
- When you first contacted the agency, did you have a child (or more than one child) in your home that you felt could not continue living with you?
 - If you answered yes, please explain the family situation at the time you contacted the agency.
 - If you answered yes, did your child stay in your home as a result of the services you received from the agency?
- Please make any additional comments you would like to share with us regarding any responses on this survey.

Participating agencies provided the evaluator with a list of names and addresses of families who had received services through their agency since the initiation of the project. Each identified family was mailed a satisfaction survey with a stamped-addressed return envelope.

PROFILE OF FAMILIES SERVED BY THE PROJECT

Number of Families

Agencies submitted a total of 1,053 PAS *Initial Telephone Call Intake Forms*. This number underestimates the actual number of families served by the agencies since the project evaluation did not begin until some months after the initiation of the project and ended in May 2003. **Table 1** documents the number of intake forms submitted by each agency.

Table 1: Number of Intake Forms Submitted by Project Agencies.

Agency	Number of Forms Submitted	Percent of Total
Salvation Army	110	10.5
St. Vincent's	135	12.8
Boys and Girls Harbor	124	11.8
Parsons	200	18.9
COAC	159	15.1
HeartShare	21	1.9
New Alternatives	47	4.5
Catholic Home Bureau	111	10.5
Abbott House	49	4.7
Concord Family Services	56	5.3
ABSW	41	3.9
Total	1053	100.0

TANF Eligibility

The majority of families served by this project (60.5%) were TANF-eligible (**Table 2**). The ability of agencies to provide services to non-TANF eligible families was made possible through other funding sources available to the grantee agencies. The percent of TANF-eligible families served was found to vary by agency, from a high of 86.3% at Boys and Girls Harbor to 19% at HeartShare.

Table 2: Number of TANF-eligible Families Served by Project Agencies.

Agency	TANF-Eligible Families		Non-TANF Eligible Families		Not determined prior to preparation of this report	
	Number	Percent	Number	Percent	Number	Percent
Salvation Army	38	34.5	37	33.6	35	31.9
St. Vincent's	98	72.6	5	3.7	32	23.7
Boys & Girls Harbor	107	86.3	6	4.8	11	8.8
Parsons	85	42.5	42	21.0	73	36.5
COAC	119	74.8	26	16.4	14	8.8
HeartShare	4	19.0	1	4.8	16	76.2
New Alternatives	25	53.2	11	23.4	11	23.4
Catholic Home Bureau	90	81.1	4	3.6	17	15.3
Abbott House	14	28.6	13	26.5	22	44.9
Concord Family Svcs.	34	60.7	4	7.1	18	32.2
ABSW	23	56.1	0	0	18	43.9
Total	637	60.5	149	14.2	267	25.3

Demographic Characteristics of Families Seeking Services

The majority of families (68.8%) served by this project were single-parent adoptive families (**Table 3**). Thirty-three percent of project families had birth children in the home, and 69.3% had birth children not living in the home. The mean number of birth children both in the home and out of the home was approximately 1.6.

The average age of adoptive mothers seeking services was 50.1 years and adoptive fathers, 49.8 years. Forty-eight percent of adoptive mothers were African American and 22.6% of adoptive fathers. Mean educational attainment of adoptive mothers seeking post adoption services was 12.8 years and adoptive fathers, 13.3 years. The majority of adoptive mothers (64.3%) were

not employed while the majority of adoptive fathers (62.2%) were employed. The majority (80.8%) of families seeking services were native English speakers.

Table 3: Demographic Characteristics of Families Seeking Services.

Family Characteristic		Number or Mean	Percent or Standard Deviation	
Family structure:	single-parent	725	68.8	
	two-parent	328	31.2	
Birth children:				
	number with birth children in home	348	33.0	
	number with birth children not in home	730	69.3	
	average number of birth children in home	1.65	.98	
	average number of birth children not in home	1.64	1.9	
Adoptive mothers: (N= 985)	mean age	50.1	11.4	
	race/ethnicity	-White	213	21.6
		-African American	476	48.3
		-Hispanic	167	16.9
		-Other	30	3.0
		-Not identified	99	10.2
	mean years of education	12.8	3.26	
	percent employed	352	35.7	
primary language English	796	80.8		
Adoptive fathers: (N=349)	mean age	49.8	11.4	
	race/ethnicity	-White	134	38.4
		-African American	79	22.6
		-Hispanic	43	12.3
		-Other	14	4.0
		-Not identified	79	22.7
	mean years of education	13.3	3.4	
	percent employed	217	62.2	
primary language English	282	80.8		

Characteristics of Adoptive Families

Thirty-seven percent of families seeking post adoption services had one adopted child, 29.3% had two adopted children, and 26.8% had three or more adopted children (**Table 4**). In the

vast majority of cases the adopted child for whom services were being sought was living in the home (83.9%), but in a small number of cases (4.5%), the child was not presently living in the home. In 244 cases (11.6%), the status of the child’s living arrangements was uncertain at the time of the intake call. Most of the adoptions for these families were non-kinship adoptions (57.7%), 26.2% were kin adoptions, and in 16.1% of cases the relationship to the child was unable to be determined at the time of the intake call. In 61.7% of cases, the adoptions were foster care adoptions, although in a large number of cases (28.3%), the type of adoption was not identified by the caller. Approximately 25.7% of adoptions were interracial.

Table 4: Characteristics of Adoptive Homes.

Characteristic		Number	Percent
Number of adopted children: (N = 1053 homes)	one	387	36.8
	two	309	29.3
	three	138	13.1
	four	79	7.5
	five	34	3.2
	six	32	3.0
	unknown	74	7.0
Child is living in home: (N = 2105 children)	yes	1766	83.9
	no	95	4.5
	unknown	244	11.6
Kinship adoption: (N = 2105 children)	yes	551	26.2
	no	1214	57.7
	unknown	340	16.1
Type of adoption: (N = 2105 children)	agency foster care adoption	1298	61.7
	private (non-agency)	26	1.2
	international	43	2.0
	agency non-foster care/domestic	144	6.8
	not identified	594	28.3
Interracial adoption: (N = 2105 children)	yes	540	25.7
	no	1565	74.3

Characteristics of Adopted Children

The post adoption services intake form collected information regarding the special needs of all adopted children in the home. **A total of 2,105 adopted children living in 1,053 adoptive**

homes were served by agencies funded on this grant. In all analyses involving adopted children in this report, the unit of analysis is all adopted children in the home (N=2,105).

The majority of adopted children in these homes were male (52.0%). The average age of adopted children was 10.2 years (**Table 5**). The majority of children in these homes were African American (52.8%) or Hispanic (14.7%).

Table 5: Characteristics of Adopted Children.

Characteristic		Number or Mean	Percent or Standard deviation
Gender:	male	1094	52.0
	female	933	44.3
	not identified	78	3.7
Race/Ethnicity:	White	260	12.4
	African American	1112	52.8
	Hispanic	310	14.7
	other	126	6.0
	not identified	297	14.1
Child's age:	0-5 years	337	16.0
	6-12 years	1033	49.1
	13-18 years	599	28.5
	18+ years	47	2.2
	Not reported	89	4.2
Mean age of adopted children in these homes:		10.2 years	4.4 years

Characteristics of Children's Special Needs

The categories of special needs on the intake form were determined by the grantee agencies. Child needs were identified by the caller who, in the majority of cases, was the adoptive mother (74.8%), but also included adoptive fathers (4.9%), other relatives (13.2%), and legal guardians (7.1%). The majority of adoptive children in these homes had behavioral problems (40%) and/or emotional problems (36.2%); 27.6% had special educational needs, 13.0% had treatment/service needs, and 11.7% had special medical needs. Only 5.1% of children had court-related needs (**Table 6**). It should be noted that many children had multiple special needs. For this reason the percentages reported in **Table 6** do not total 100%.

Table 6: Caller-identified Child’s Special Needs.

Special Need	Number	Percent
Behavioral needs	843	40.0
Emotional needs	761	36.2
Medical needs	246	11.7
Educational needs	581	27.6
Family/Home interactions	363	17.2
Treatment/Service needs	274	13.0
Court-related needs	107	5.1

Further analyses were performed to determine if type of special need the caller identified was related to the age of the adopted child (**Table 7**). In this analysis, data on all adopted children in the home were used and special needs could be multiply-classified (i.e., a child could have more than one special need), resulting in the fact that column percentages exceed 100%.

Table 7: Type of Special Need by Age of Adopted Child.

Special need	0-5 years		6-12 years		13-18 years		18+ years	
	Num	%	Num	%	Num	%	Num	%
Behavioral	102	30.3	418	40.5	277	46.2	10	21.3
Emotional	85	25.2	386	37.4	250	41.7	9	19.1
Medical	46	13.6	133	12.9	52	5.0	3	6.4
Educational	56	16.6	311	30.1	186	31.1	4	8.5
Family/Home	23	6.8	185	17.9	120	11.6	7	14.9
Treatment/Service	37	11.0	141	13.6	89	8.6	2	4.3
Court-related	31	9.2	33	3.2	42	4.1	4	8.5

The data in **Table 7** indicate that the most prevalent special needs among children in these families are behavioral and emotional. These particular special needs appear to become more salient as the child ages. Medical and treatment needs were experienced more by younger children, educational needs by older children, and family/home related needs appear to peak for the 6-12 age group.

REASON FOR POST ADOPTION SERVICES CALL

Type of Services Requested

The intake form identified the type of services the caller was interested in obtaining for one or more adopted child in the home at the time they first made contact with the agency. A total of 1,053 families contacted a PAS agency for services, and there were 2,105 adopted children in these homes. Callers could have requested more than one service for each adopted child in the home. For this reason the number of services requested in **Table 8** exceeds the number of families calling an agency (N=1,053) or the number of children in these homes (N=2,105). Furthermore, the form allowed for the caller and the intake worker to separately identify services they anticipated the family would need at the time of the intake call. This distinction was specifically accounted for in the design of the intake survey instrument to distinguish between the services a caller requested and, after speaking with the caller, the services the intake worker indicated the families would probably need. **Table 8** reports the frequency with which services were requested by *callers*. **Table 9** reports the frequency with which services were indicated by *intake workers*.

In **Tables 8 and 9**, the following categories that are not self explanatory or obvious need more explanation:

- Educational services refers to special education and tutoring.
 - After school services refers to mentor programs, day care, and summer programs.
 - Financial services refers to subsidy issues, insurance, and monies to purchase services.
 - Health services refers to medical, dental, and vision services.
 - Home assistance refers to respite care, transportation, home aides, and homemaker services.
-

- Support services refers to parent or child groups and informal contacts.
- Mental Health/Guidance refers to outpatient services and psychological evaluation.

Table 8: Types of Post Adoption Services Requested by *Caller* for Any Adopted Child in the Family.

Service	Number of Times Service was Requested	
	Number of Requests for Any Child in the Family	Percent of All Requests
Information about services	284	11.1
Child background information	86	3.3
Education services	298	11.6
After school services	196	7.6
Financial services	155	6.0
Health/Medical services	117	4.5
Counseling	402	15.6
Support services	385	15.0
Mental health/Guidance	242	9.4
Parent education	177	6.9
Home assistance	127	4.9
Housing assistance	40	1.6
Vocational services	9	0.4
Legal assistance	52	2.1
Total Number of Services Requested for Any Child	2,570	100

Table 9: Types of Post Adoption Services Needed as Indicated by *Intake Worker*.

Service	Number of Times Service was Indicated	
	Number of Indication for Any Child in the Family	Percent of All Indications
Information about services	131	13.3
Child background information	83	8.4
Education services	88	8.9
After school services	38	3.9
Financial services	70	7.1
Health/Medical services	53	5.4
Counseling	129	13.1
Support services	141	14.3
Mental health/Guidance	87	8.9
Parent education	84	8.5
Home assistance	56	5.7
Housing assistance	3	0.3
Vocational services	2	0.2
Legal assistance	18	1.8
Total Number of Services Indicated by Intake Worker	983	100

Results reported in **Table 8** indicate that the most frequently requested services by *callers* were counseling (15.6%), support services (15.0%), educational services (11.6%), information about services (11.1%), and mental health/guidance services (9.4%). Results in **Table 9** indicate that the most frequently indicated services by *intake workers* were support services (14.3%), information about services (13.3%), counseling (13.1%), education services (8.9%), and mental

health/guidance services (8.9%). **The services most requested overall were counseling, parent support groups, and mental health/guidance services.**

In addition, analyses were performed to identify types of services the caller was interested in obtaining in relation to the special needs of adopted children in the home. For this analysis, all adopted children in the home were included (N=2,105). **Table 10** provides information on the percent of callers having children in the home with specific special needs and the type of services they requested. It should be noted that because multiple services could be requested by a single caller, column percentages in **Table 10** do not total 100%. In this analysis, the same pattern emerges, with the most often requested services for children with all types of special needs being counseling, parent support groups, and mental health/guidance services.

Table 10. Percent of Services Requested by Child's Special Needs.

Percent Requesting Service	Child's Special Needs						
	Behavioral	Emotional	Medical	Education	Family/ Home	Court- Related	Treatment/ Service
Information about services	21.9	20.0	24.0	20.0	31.7	34.6	18.6
Child's background information	9.3	6.7	11.8	9.1	12.9	18.7	6.2
Educational services	19.8	19.8	22.8	40.0	21.0	18.7	28.1
After school services	11.3	12.7	8.9	18.8	12.7	4.7	18.2
Financial services	11.3	11.3	17.9	10.0	11.6	16.8	14.6
Health services	7.0	8.7	26.8	10.2	10.0	9.3	11.7
Counseling services	35.0	38.4	22.4	32.5	44.1	18.7	33.6
Support services	32.1	34.4	30.9	32.7	39.7	34.6	38.0
Mental health/ Guidance	23.8	25.2	19.1	25.1	28.1	17.8	29.6
Parent education	18.6	18.3	17.9	16.5	21.2	14.0	16.1
Home assistance	10.9	12.0	12.6	10.7	16.0	3.7	5.5
Housing services	14.2	2.1	4.1	1.0	6.1	3.7	5.5
Vocational services	.9	.9	.4	1.0	1.7	2.8	1.5
Legal assistance	1.5	2.2	4.9	3.1	3.6	27.1	3.6
Other services	5.2	4.9	5.3	6.7	3.9	11.2	8.8

OUTCOME OF POST ADOPTION SERVICES CALLS

The initial intake form required workers to designate an outcome of each call made to the agency for post adoption services. In the majority of cases, callers made an appointment with the agency during the call (64.2%) or were referred to another agency (14.2%). In 10.6% of cases, the caller either did not want services or only sought information. The outcome was not reported in 11.0% of cases (**Table 11**).

Table 11: Outcome of the Initial Call.

Outcome of Call	Number	Percent
Caller wanted information only/did not want services	112	10.6
Caller made appointment with agency	676	64.2
Caller was referred to another agency for services	149	14.2
Not reported	116	11.0
Total	1053	100

The majority of callers whose needs could not be met by the contact agency were referred to another professional/or agency (68.5%) or to another adoption service agency (31.5%) (**Table 12**).

Table 12: Referrals after Initial Call.

Referral Outcome	Number	Percent
Another post adoption service grantee agency	40	26.8
Another adoption service agency	7	4.7
Other referral not to an adoption service agency	102	68.5
Total	149	100

For the 149 callers who were referred to another agency, the intake worker recorded the reason for the referral. These reasons are documented in **Table 13**. In most cases (75.5%), the reason for the referral was that the contact agency did not offer the specialized services being requested by the caller.

Table 13: Reason for Referral to Another Agency.

Reason for Referral	Number	Percent
Specialized services not offered at agency	120	75.5
Wanted to change child's special needs classification	2	1.3
Scheduling issues necessitated another agency	7	4.4
Seeking services closer to home	9	5.6
Not TANF-eligible	7	4.4
Referred to school social worker	2	1.3
Referred to medical service not offered at agency	1	0.6
Other reason	11	6.9
Total	159*	100

*Note: Some callers had more than one referral reason so total does not equal 149.

PARENT SATISFACTION SURVEYS

A total of 815 satisfaction surveys were distributed to adoptive families who had received services from one of the grantee agencies during the project period (**Table 14**). Names and addresses of clients were provided to the evaluator, and surveys were mailed out in April/May 2003. After a period of five weeks, no further survey responses were received. The final response rate to the survey was a low 18.7% (N=153 survey responses). Response rate was found to vary by agency, with a high of 42.9% for Abbott House and a low of 4.2% for HeartShare. The low response rate and resulting small sample size substantially limits the type of analyses that can be performed with these data.

Table 14: Number of Satisfaction Surveys Received by Agency.

Agency	Number Distributed	Number Received	Response rate	Agency Responses As a Percent of Sample
ABSW	38	10	26.3	6.5
Abbott	21	9	42.9	5.8
Boys and Girls Harbor	85	9	10.6	5.8
Catholic Home Bureau	94	13	13.8	8.4
COAC	150	30	20.0	19.6
Concord	45	11	24.4	7.1
HeartShare	24	1	4.2	0.6
New Alternatives	45	11	24.4	7.1
Parsons	135	31	22.9	20.2
Salvation Army	75	12	16.0	7.8
St. Vincent's	105	16	15.2	10.4
Total	817	153	18.7	100.0

Because the satisfaction surveys were tailored to each individual agency (i.e., satisfaction ratings were sought only for those services offered by that agency), **Table 15** documents the number of agencies offering each service and the number of survey respondents using each service. The data indicate that almost all agencies (90.9%) provided information about services, crisis intervention services, individual/group/family counseling, parent support groups, and parent education services. Furthermore, a large percent of agencies (72.7%) offered educational and respite services. Only three agencies offered in-home services (aides, homemakers), only two agencies offered employment assistance, and only one agency offered alcohol/drug evaluation or treatment services.

Frequency of Services Used

In terms of service utilization rates among respondents to the satisfaction survey, the data in **Table 15** indicate that the most highly used services among this group of adoptive families were parent support groups (66.7%), and parent education/training (56.9%).

Table 15: Number of Agencies Offering Services and Number of Respondents Using Service.

Type of Service	Number Agencies Offering Service	Percent of Agencies Offering Service	Number Respondents Using Service	Percent Respondents Using Service
Educational services (special ed., tutoring, advocacy)	8	72.7	59	38.6
After school services (mentor, summer program, recreation)	6	54.6	24	15.7
Information about services (availability, locating, connecting)	10	90.9	85	55.5
Information about child's background	6	54.6	27	17.6
Alcohol/drug evaluation or treatment	1	9.1	0	0
Crisis intervention	10	90.9	55	35.9
Individual counseling (parent)	10	90.9	65	42.5
Individual counseling (child)	10	90.9	76	49.7
Family counseling	10	90.9	67	43.8
Marital counseling	4	36.4	7	4.6
Support group (parent)	10	90.9	102	66.7
Support group (child)	5	45.5	54	35.3
Psychiatric evaluation	6	54.6	46	30.1
Psychiatric counseling (parent)	4	36.4	8	5.2
Psychiatric counseling (child)	5	45.5	27	17.6
Speech or hearing evaluation	4	36.4	14	9.2
Parent education or training	10	90.9	87	56.9
Babysitting or day care services	4	36.4	23	15.0
Respite services	8	72.7	21	13.7
Employment assistance	2	18.2	2	1.3

Financial aid/services (subsidy, insurance, money for services)	8	72.7	46	30.1
Legal assistance	4	36.4	12	7.8
Health or medical services	4	36.4	28	18.3
Transportation	4	36.4	14	9.2
In-home services (aides, homemaker)	3	27.3	8	5.2
Housing assistance	4	36.4	5	3.3

Individual child counseling (49.7%), family counseling (43.8%), and individual parent counseling (42.7%) were also highly used. Approximately one third of families responding to the survey used educational services (38.6%), crisis intervention services (35.9%), child support group services (35.3%), and financial aid services (30.1%).

Satisfaction with Services Received

On the satisfaction survey form, families were asked to rate their satisfaction with the services they received on a three point scale (not useful, somewhat useful, very useful) and to assess the degree to which these services assisted them in maintaining permanency and stability in the adoptive home. In the analysis reported in **Table 16**, a response was included in the analysis only if the family indicated they had used the service offered by the agency. **Results indicate a high overall level of satisfaction among families who responded to the survey in regard to services they received from their agency.** For most services the majority of families (above 90%) indicated that they were “very useful” or “somewhat useful” in the post adoption period. **The most frequently used services also had among the highest satisfaction ratings:** Parent support groups (85.9% rated them as “very useful”), parent education training (86.8% rated them as “very useful”), individual child counseling (73.9% rated them as “very useful”), and family counseling (80.9% rated them as “very useful”).

Table 16. Number of Respondents Using Service and Percent Satisfaction with Service: All Agencies.

Type of Service	Number respondents using service	Satisfaction (%)		
		Not useful	Somewhat Useful	Very useful
Educational services (special ed., tutoring, advocacy)	59	3.5	17.2	79.3
After school services (mentor, summer, recreation)	24	0	16.7	83.3
Information about services (availability, locating)	85	2.5	18.8	78.7
Information about child's background	27	0	21.7	78.3
Crisis intervention	55	1.8	16.4	81.8
Individual counseling (parent)	65	0	23.8	76.2
Individual counseling (child)	76	4.4	21.7	73.9
Family counseling	67	3.2	15.9	80.9
Marital counseling	7	14.3	14.3	71.4
Support group (parent)	102	2.2	11.9	85.9
Support group (child)	54	3.9	23.5	72.6
Psychiatric evaluation	46	0	23.1	76.9
Psychiatric counseling (parent)	8	16.7	33.3	50.0
Psychiatric counseling (child)	27	4.6	22.7	72.7
Speech or hearing evaluation	14	7.7	23.1	69.2
Parent education or training	87	2.4	10.8	86.8
Babysitting or day care services	23	4.2	20.8	75
Respite services	21	4.8	23.8	71.4
Employment assistance	2	0	0	100
Financial aid/services (subsidy, insurance)	46	2.3	13.6	84.1
Legal assistance	12	0	0	100
Health or medical services	28	4.0	4.0	92.0
Transportation	14	0	6.7	93.3
In-home services (aides, homemaker)	8	0	14.3	85.7
Housing assistance	5	0	16.7	83.3

Information on each individual agency's service offerings are presented in **Appendix A**.

Responses to Open-ended Questions on Survey

The satisfaction survey instrument contained a set of three open-ended questions on the second page. Respondents were provided blank space in which to respond with written comments indicating their agreement or lack of agreement with statements regarding the impact of services on family welfare and stability.

In response to the question, *“Overall, is your family better off or happier as a result of services you received?”* 81.7% of respondents indicated “Yes,” 6.5% indicated “No,” 1.3% indicated they “Don’t Know,” and 10.5% left the question blank. In the blank spaces provided on the survey, respondents gave an explanation for their answer to this question. These responses are reported verbatim in **Appendix C** and are classified by those responding “Yes” or “No” to the question.

Further analyses were performed using these data to examine the service satisfaction ratings of families who indicated that they were (81.7%) or were not (6.5%) better off as a result of using the services provided (**Table 17**). Results indicate that, even among the group of individuals who do not believe they are better off as a result of receiving the post adoption services, the majority of these respondents still found the services to be somewhat useful (except for child support group services). It should be remembered, however, that sample sizes for this analysis were very small in some cases.

Table 17: Frequency of Services Used by Whether Families Were Better Off or Not.*

Type of Service	Satisfaction (%) of those who believe they ARE better off (N=125)				Satisfaction (%) of those who do NOT believe they are better off (N=10)			
	N	Not useful	Somewhat Useful	Very Useful	N	Not useful	Somewhat Useful	Very Useful
Educational services (special ed., tutoring, advocacy)	51	2.0	14.0	84.0	0	0	0	0
After school services (mentor, summer program)	19	0	25.8	84.2	0	0	0	0
Information about services (availability, locating)	74	0	20.0	80.0	0	0	0	0
Information about child's background	20	0	23.5	76.5	0	0	0	0
Crisis intervention	50	0	16.3	83.7	0	0	0	0
Individual counseling (parent)	56	0	24.1	75.9	1	0	100.0	0
Individual counseling (child)	62	5.4	16.1	78.5	5	0	100.0	0
Family counseling	59	1.8	16.1	82.1	2	0	50.0	50.0
Marital counseling	6	16.7	16.7	66.6	0	0	0	0
Support group (parent)	89	1.2	9.9	88.9	1	100.0	0	0
Support group (child)	46	0	21.4	78.6	3	66.7	33.3	0
Psychiatric evaluation	39	0	15.6	84.4	2	0	100.0	0
Psychiatric counseling (parent)	8	16.7	33.3	50.0	0	0	0	0
Psychiatric counseling (child)	21	5.9	17.7	76.4	3	0	100.0	0
Speech or hearing evaluation	12	9.1	27.3	63.6	0	0	0	0
Parent education or training	77	1.4	11.0	87.7	3	33.3	33.3	33.3

Table 17: (Continued)

Type of Service	Satisfaction (%) of those who believe they ARE better off (N=125)				Satisfaction (%) of those who do NOT believe they are better off (N=10)			
	N	Not useful	Somewhat Useful	Very Useful	N	Not useful	Somewhat Useful	Very Useful
Babysitting or day care services	21	0	19.1	80.9	3	33.3	33.3	33.3
Respite services	21	0	25.0	75.0	0	0	0	0
Employment assistance	2	0	0	100.0	0	0	0	0
Financial aid/services (subsidy, insurance)	36	0	11.4	88.6	2	50.0	0	50.0
Legal assistance	11	0	0	100.0	0	0	0	0
Health or medical services	21	5.0	0	95.0	1	0	0	0
Transportation	10	0	0	100.0	0	0	0	0
In-home services (aides, homemaker)	8	0	14.3	85.7	0	0	0	0
Housing assistance	5	0	20.0	80.0	0	0	0	0

*Number of respondents using each service does not equal the number of respondents to this question due to some blank responses.

In response to the question, “*When you first contacted the agency, did you have a child (or more than one child) in your home that you felt could not continue living with you?*” Forty-five respondents (29.4%) indicated “Yes,” 96 (62.7%) indicated “No,” and 12 (7.9%) left the question blank. In the blank spaces provided on the survey, respondents gave an explanation for their answer to this question. These responses are reported verbatim in **Appendix D** and are classified by those responding “Yes” or “No” to the question.

Further analyses were performed using these data to examine the service satisfaction ratings of families who indicated at the time of the initial call to the agency that they did or did not have a child in the home that they felt could not continue living in the home (**Table 18**). It should be remembered, again, that sample sizes for this analysis were very small in some cases.

Table 18: Frequency of Services Used by Whether Family Had a Child At Risk of Out of Home Placement.*

Type of Service	Satisfaction (%) of those WITH a child at risk (N=45)				Satisfaction (%) of those WITHOUT a child at risk (N=96)			
	N	Not useful	Somewhat Useful	Very Useful	N	Not useful	Somewhat Useful	Very Useful
Educational services (special ed., tutoring, advocacy)	12	8.3	0	91.7	41	2.5	20.0	77.5
After school services (mentor, summer program)	3	0	33.3	66.7	19	0	15.8	84.2
Information about services (availability, locating)	24	9.1	22.7	68.2	54	0	15.7	84.3
Information about child's background	6	0	20.0	80.0	18	0	26.7	73.3
Crisis intervention	19	5.3	21.1	73.6	27	0	18.5	81.5
Individual counseling (parent)	23	0	22.7	77.3	37	0	25.0	75.0
Individual counseling (child)	24	4.6	31.8	63.6	46	4.9	19.5	75.6
Family counseling	20	5.0	10.0	85.0	40	2.8	22.2	75.0
Marital counseling	3	0	33.3	66.7	3	0	0	100.0
Support group (parent)	29	7.4	7.4	85.2	61	0	13.0	87.0
Support group (child)	21	10.5	21.1	68.4	29	0	21.4	78.6
Psychiatric evaluation	9	0	28.6	71.4	31	0	19.2	80.8
Psychiatric counseling (parent)	2	0	0	100.0	6	20.0	40.0	40.0
Psychiatric counseling (child)	6	0	40.0	60.0	19	6.7	20.0	73.3
Speech or hearing evaluation	1	0	0	0	11	9.1	27.3	63.6
Parent education or training	29	3.9	3.9	92.3	48	0	17.0	83.0
Babysitting or day care services	9	10.0	20.0	70.0	11	0	18.2	81.8
Respite services	6	16.7	16.7	66.6	12	0	25.0	75.0
Employment assistance	0	0	0		1	0	0	100.0
Financial aid/services (subsidy, insurance)	8	0	0	100.0	35	2.9	14.7	82.4
Legal assistance	1	0	0	100.0	10	0	0	100.0
Health or medical services	4	0	0	100.0	20	5.3	5.3	89.4
Transportation	1	0	0	100.0	10	0	10.0	90.0
In-home services (aides, homemaker)	4	0	0	100.0	4	0	25.0	75.0
Housing assistance	0	0	0	0	3	0	33.3	66.7

*Number of respondents using each service does not equal the number of respondents to this question due to some blank responses.

Parents who, at the time of their initial call to the agency, had a child at risk of out of home placement were more likely than those who did not have a child at risk of out of home placement to use the following services: crisis intervention (42.2% versus 28.1%), individual parent counseling (51.1% versus 38.5%), and child support groups (46.4% versus 30.2%).

The following question was asked of respondents who indicated that they did have a child in the home who was at risk of out of home placement: *“Did your child stay in the home as a result of the services you received from the agency?”* Thirty-three respondents (73.3%) indicated “Yes,” and 12 (26.7%) indicated “No.” In the blank spaces provided on the survey, respondents gave an explanation for their answer to this question. These responses are reported verbatim in **Appendix D** and are classified by those responding “Yes” or “No” to the question.

Further analyses were performed using these data to examine the service satisfaction ratings of families who indicated that they did or did not feel the services helped keep the child in the home (**Table 19**). It should be remembered, again, that sample sizes for this analysis were very small in some cases.

Table 19: Frequency of Services Used by Whether Child Remained in the Home*

Type of Service	Satisfaction (%) of families where child at risk STAYED IN HOME (N=33)				Satisfaction (%) of families where child at risk LEFT HOME (N=12)			
	N	Not useful	Somewhat Useful	Very Useful	N	Not useful	Somewhat Useful	Very Useful
Educational services (special ed., tutoring, advocacy)	11	0	0	100.0	2	0	50.0	50.0
After school services (mentor, summer program)	2	0	50.0	50.0	1	0	0	100.0
Information about services (availability, locating)	18	5.9	35.3	58.8	6	16.7	0	83.3
Information about child's background	6	0	20.0	80.0	1	0	0	100.0
Alcohol/drug evaluation or treatment	0	0	0	0	0	0	0	0
Crisis intervention	17	0	29.4	70.6	4	25.0	0	75.0
Individual counseling (parent)	17	0	25.0	75.0	6	0	16.7	83.3
Individual counseling (child)	18	0	31.3	68.7	6	16.7	33.3	50.0
Family counseling	16	0	6.7	93.3	6	16.7	33.3	50.0
Marital counseling	1	0	100.0	0	2	0	0	100.0
Support group (parent)	24	4.4	8.7	86.9	7	16.7	0	83.3
Support group (child)	19	5.9	23.5	70.6	3	33.3	0	66.7
Psychiatric evaluation	8	0	0	100.0	2	0	100.0	0
Psychiatric counseling (parent)	2	0	0	100.0	0	0	0	0
Psychiatric counseling (child)	6	0	20.0	80.0	1	0	100.0	0

Table 19: (Continued)

Type of Service	Satisfaction (%) of families where child at risk STAYED IN HOME (N=33)				Satisfaction (%) of families where child at risk LEFT HOME (N=12)			
	N	Not useful	Somewhat Useful	Very Useful	N	Not useful	Somewhat Useful	Very Useful
Speech or hearing evaluation	2	0	0	100.0	0	0	0	0
Parent education or training	24	0	4.8	95.2	1	14.3	0	85.7
Babysitting or day care services	9	0	11.1	88.9	2	0	50.0	50.0
Respite services	6	0	40.0	60.0	2	50.0	0	50.0
Employment assistance	0	0	0	0	0	0	0	0
Financial aid/services (subsidy, insurance)	5	0	0	100.0	3	0	0	100.0
Legal assistance	1	0	0	100.0	0	0	0	0
Health or medical services	3	0	0	100.0	1	0	0	0
Transportation	1	0	0	100.0	0	0	0	0
In-home services (aides, homemaker)	3	0	0	100.0	1	0	0	0
Housing assistance	0	0	0	0	0	0	0	0

*Number of respondents using each service does not equal the number of respondents to this question due to some blank responses.

Finally, the survey asked respondents to provide any additional comments they wished to share with the evaluator. Many provided detailed explanations for their responses. These comments are reported verbatim in **Appendix E**.

POST SCRIPT

This cross-project evaluation effort was undertaken during the first year of funding of the project. All of the 13 PAS grantees received a second year of funding to serve TANF-eligible families for 2002-2003. In May 2003, the third year of funding commenced and will end on June 30, 2004. At the time of the writing of this report, no plans were in place to continue funding to provide services to families in the post adoption period after June 2004.

APPENDICES

APPENDIX A
SERVICES PROVIDED BY THE AGENCIES



Table A.1. Post Adoption Services Offered By: **Abbott House**

100 North Broadway

Irvington, NY 10533

914-591-7300

Serving: Westchester, Dutchess, Ulster, Rockland, Orange, Putnam Counties

Type of Service
Educational services (special ed., tutoring, advocacy)
Information about services (availability, locating, connecting)
Crisis intervention
Family counseling
Support group (parent)
Support group (child)
Parent education or training
Babysitting or day care services
Respite services
Transportation

Table A.2. Post Adoption Services Offered By: **Association of Black Social Workers**

1969 Madison Avenue

New York, NY 10035

212-831-5181

Serving: 5 Boroughs of New York City

Type of Service
Educational services (special ed., tutoring, advocacy)
Information about services (availability, locating, connecting)
Individual counseling (parent)
Individual counseling (child)
Respite services
Legal assistance

Table A.3. Post Adoption Services Offered By: **Boys & Girls Harbor**

1330 Fifth Avenue
 New York, NY 10029
 212-828-7808

Serving: East Harlem, Central Harlem, South Bronx

Type of Service
Information about services (availability, locating, connecting)
Information about child's background
Crisis intervention
Individual counseling (parent)
Individual counseling (child)
Family counseling
Support group (parent)
Support group (child)
Parent education or training
Financial aid/services (subsidy, insurance)

Table A.4. Post Adoption Services Offered By: **Catholic Home Bureau for Dependent Children**

100 First Avenue

New York, NY 10022

212-371-1000

Serving: Manhattan and the Bronx

Type of Service
Educational services (special ed., tutoring, advocacy)
After school services (mentor, summer program, recreation)
Information about services (availability, locating, connecting)
Information about child's background
Crisis intervention
Individual counseling (parent)
Individual counseling (child)
Family counseling
Support group (parent)
Support group (child)
Psychiatric evaluation
Psychiatric counseling (parent)
Psychiatric counseling (child)
Speech or hearing evaluation
Parent education or training
Respite services
Financial aid/services (subsidy, insurance)
Legal assistance
Health or medical services
Transportation
Housing assistance

Table A.5. Post Adoption Services Offered By: **NY Council on Adoptable Children**

589 Eighth Avenue, 15th Floor

New York, NY 10018

212-714-2788

Serving: 5 Boroughs of New York City

Type of Service
Crisis intervention
Individual counseling (parent)
Individual counseling (child)
Family counseling
Support group (parent)
Support group (child)
Psychiatric evaluation
Psychiatric counseling (parent)
Psychiatric counseling (child)
Parent education or training
Babysitting or day care services
Respite services
Financial aid/services (subsidy, insurance)
In-home services (aides, homemaker)

Table A.6. Post Adoption Services Offered By: **Concord Family Services**

1221 Bedford Avenue

Brooklyn, NY 11216

718-398-3499

Serving: Brooklyn

Type of Service
Educational services (special ed., tutoring, advocacy)
After school services (mentor, summer program, recreation)
Information about services (availability, locating, connecting)
Information about child's background
Crisis intervention
Individual counseling (parent)
Individual counseling (child)
Family counseling
Support group (parent)
Psychiatric evaluation
Psychiatric counseling (parent)
Psychiatric counseling (child)
Speech or hearing evaluation
Parent education or training
Respite services
Financial aid/services (subsidy, insurance)
Legal assistance
Health or medical services
In-home services (aides, homemaker)
Housing assistance

Table A.7. Post Adoption Services Offered By: **Edwin Gould Services for Children**

Edwin Gould Services for Children and Families
 Seventh Floor
 41-51 East 11th Street
 New York, NY 10029

Serving: 5 Boroughs of New York City

Type of Service
Family functioning assessment and service planning
Advocacy (special ed, HRA, etc.)
Group activities (Adoptive Fathers United, Young People’s Action Alliance, Relative Resource Task Force)
Resource Center (literature & other materials to use on premises or take home)
Educational workshops
Support groups
Facilitated family team conferencing
Clinical crisis team services (on-site and office visits)
Short-term respite

Table A.8. Post Adoption Services Offered By: **HeartShare Human Service**

191 Joralemon Street, 6th Floor

Brooklyn, NY 11201

718-422-4236

Serving: Manhattan, Brooklyn, Queens

Type of Service
Educational services (special ed., tutoring, advocacy)
After school services (mentor, summer program, recreation)
Information about services (availability, locating, connecting)
Information about child's background
Alcohol/drug evaluation or treatment
Crisis intervention
Individual counseling (parent and child)
Family and Marital counseling
Support group (parent and child)
Psychiatric evaluation
Psychiatric counseling (parent and child)
Speech or hearing evaluation
Parent education or training
Babysitting or day care services
Respite services
Employment assistance
Financial aid/services (subsidy, insurance)
Legal assistance
Health or medical services
Transportation
In-home services (aides, homemaker)
Housing assistance

Table A.9. Post Adoption Services Offered By: **New Alternatives for Children, Inc.**

26th Street, 8th Floor
New York, NY 10010
212-994-7940

Serving: 5 Boroughs of New York City

Type of Service
Educational services (special ed., tutoring, advocacy)
After school services (mentor, summer program, recreation)
Information about services (availability, locating, connecting)
Information about child's background
Crisis intervention
Individual counseling (parent)
Individual counseling (child)
Family counseling
Support group (parent)
Support group (child)
Psychiatric evaluation
Parent education or training
Employment assistance
Financial aid/services (subsidy, insurance)
Health or medical services
Transportation
Housing assistance

Table A10. Post Adoption Services Offered By: **Parsons Child and Family Center**

60 Academy Road

Albany, NY 12208

518-426-2607

Serving: Albany, Schenectady, Rensselaer, Montgomery, Saratoga, Washington, Warren, Greene, Fulton Counties

Type of Service
Educational services (special ed., tutoring, advocacy)
Information about services (availability, locating, connecting)
Crisis intervention
Individual counseling (parent)
Individual counseling (child)
Family counseling
Marital counseling
Support group (parent)
Support group (child)
Psychiatric evaluation
Parent education or training
Babysitting or day care services
Respite services
Financial aid/services (subsidy, insurance)

Table A. 11. Post Adoption Services Offered By: **The Salvation Army of Syracuse**

677 South Salina Street

Syracuse, NY 13202

315-479-1336

Serving: Onondaga, Oswego, Cayuga, Cortland, Tompkins, Madison Counties

Type of Service
After school services (mentor, summer program, recreation)
Information about services (availability, locating, connecting)
Crisis intervention
Individual counseling (parent)
Individual counseling (child)
Family counseling
Marital counseling
Support group (parent)
Support group (child)
Parent education or training
Respite services
Financial aid/services (subsidy, insurance)

Table A.12. Post Adoption Services Offered By: **St. Vincent's Services**

66 Boerum Place

Brooklyn, NY 11201

718-522-3700

Serving: Brooklyn, Queens, Staten Island

Type of Service
Educational services (special ed., tutoring, advocacy)
After school services (mentor, summer program, recreation)
Information about services (availability, locating, connecting)
Information about child's background
Crisis intervention
Individual counseling (parent)
Individual counseling (child)
Family counseling
Marital counseling
Support group (parent)
Support group (child)
Psychiatric evaluation
Psychiatric counseling (child)
Speech or hearing evaluation
Parent education or training
Babysitting or day care services

APPENDIX B

SURVEY INSTRUMENTS

Post Adoption Services (PAS) Initial Telephone Call Intake Form

Agency: _____ Date of Call: ___/___/___ Worker name: _____

Caller Name: _____ Mother Father Other: _____

Caller address: _____
street address Town/City County
Zip code Telephone (H) () Telephone (W) ()

Parental Information:	Adoptive Parent 1	Adoptive Parent 2
Name	_____	_____
Age	_____ years	_____ years
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Race	_____	_____
Primary language	_____	_____
Employed	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Education	_____ years	_____ years

Family Information

Number of birth children **in** the home: _____ children Number of birth children **not** in the home _____ children
 TANF eligible Yes No TBD Household income: \$ _____ year

Adopted Children In The Home

	Child 1	Child 2	Child 3	Child 4	Child 5	Child 6
Name						
Age	_____ yrs					
Gender	<input type="checkbox"/> M <input type="checkbox"/> F					
Race						
Date placed in home	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___
Date adopted	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___
Kin to parent(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No					
Type of adoption	FC A P I					
Adoption Agency						
Living in home	<input type="checkbox"/> Yes <input type="checkbox"/> No					

Caller Identified Child Characteristics (Place X in appropriate box)

Behavioral						
Emotional						
Medical						
Education						
Family/Home						
Court-related						
Treatment/Service						

Parent (P) / Worker (W) Identified Reason for Call	No child identified		Child 1		Child 2		Child 2		Child 3		Child 4		Child 5		Child 6	
	P	W	P	W	P	W	P	W	P	W	P	W	P	W	P	W
Information about services (locating, connecting to)																
Information about child's background																
Educational services (special education, tutoring)																
After school service (mentor/day care/summer program)																
Financial services (subsidy, insurance, \$\$ for services)																
Health/Medical services (medical/dental/vision/PT)																
Counseling (individual or family)																
Support services (parent/child groups, informal contact)																
Mental health/Guidance (outpatient, psych. evaluations)																
Parental education (parenting, child develop., behavior)																
Home assistance (respite, transport, aides, homemaker)																
Housing assistance																
Vocational services																
Legal assistance																
Other: _____																
Other: _____																

Outcome of Call

- Parent does not want services
 - No appointment, no referral, provided information only
 - Made appointment with agency: Date of appointment ____/____/____
 - Referred to another agency: Other PAS Other non-PAS Other: _____
- Why referred? _____

Adoptive Parent Survey

Please identify which of the following services you received and indicate how helpful they were to you and your family.

Type of Service	Did you receive this service?	DEGREE OF HELPFULNESS		
		Not helpful	Somewhat Helpful	Very Helpful
Educational services (special ed., tutoring, advocacy)	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After school services (mentor, summer program, recreation)	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information about services (availability, locating, connecting to)	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information about child's background	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol/drug evaluation or treatment	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crisis intervention	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual counseling (parent)	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual counseling (child)	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family counseling	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marital counseling	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support group (parent)	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support group (child)	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Psychiatric evaluation	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Psychiatric counseling (parent)	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Psychiatric counseling (child)	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speech or hearing evaluation	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent education or training	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Babysitting or day care services	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respite services	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment assistance	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial aid or services (subsidy, insurance, money for services)	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal assistance	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health or medical services	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In-home services (aides, homemaker)	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housing assistance	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other service: _____	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please continue to answer questions on the reverse side.

ADDITIONAL QUESTIONS:

1. Overall, is your family better off or happier as a result of services you received?

Yes, explain why

No, explain why not

2. When you first contacted the agency, did you have a child (or more than one child) in your home that you felt could not continue living with you?

Yes **No**

If you answered **YES**, please explain the *family situation* at the time you contacted the agency.

If you answered **YES**, did your child *stay in your home* as a result of the services you received from the agency? **Yes**

No, please explain:

3. Please make any additional comments you would like to share with us regarding any responses on this survey.

Thank you for your help!

**PLEASE MAIL THE COMPLETED SURVEY AS SOON AS POSSIBLE USING THE
ENCLOSED STAMPED SELF-ADDRESSED ENVELOPE TO:**

*Rosemary Avery, PhD
Department of Policy Analysis and Management, Cornell University, 119B MVR Hall
Ithaca, NY 14853-[imbedded family identification code]*

APPENDIX C
Open-ended Responses to Survey Question 1

Question 1: “Overall, is your family better off or happier as a result of services you received?”

Open-ended responses to those answering “Yes” to this question:

- We are still better with the service but I still have a lot of problems with the child. Reason: he still doesn't listen in school, and try to hit me back.
 - The child was withdrawn, moody, introverted before enrolling in the counseling and post adoptive child services. Interacting with other adoptive children and expressing their views has brought her out of her shell. She is less moody and expresses her views at home. Overall, has become more friendly. Appears happier. When she is happy, it makes me feel better.
 - My son is much more open, speaks more. He's very calm now. He really loves [caseworker]. [Caseworker] really made a difference.
 - Because they are helping my daughter and son. Thank you.
 - We are happier as a result of [agency] services. Because of [support group – parent/child services] we have a better understanding of each other. I think more families should know about your services such as psychiatric and family counseling.
 - As our adoptive children get older more challenges continue to arise.
 - We received family intervention service and received great information and materials for reference. It's just hard to keep remembering the information.
 - We had a very difficult child that was unable to live in our home but during the years we were trying to make it work. [Agency] helped tremendously by teaching us the types of problems that adopted children face and ways to work through it. We could not have stuck with this child as long as we did without the therapy or information shared with us.
 - The financial aid we received was used for summer camps – church camp and Boy Scout camp. We also received a NYS Park pass. We visited a NYS Park. We would not have done this without the pass.
 - Superior quality at no costs to family. Great service – please do not fail to fund!!
 - Our son would not be living in our home today if not for the clinical expertise and thoughtful assistance of [caseworker].
-
-

- The subsidy for camp last year enabled my children to enjoy a camp experience they would not usually get. The children need as many positive social experiences as possible. It helped us get them more activities during the summer.
 - Notable exception to our initial experience in the foster care/adoption was the clinical services received once a week as a family. However, community services were too frequent and hard to access for a 12-13 year old. My daughter has been hospitalized since 1/9/02 and is not in an RTF. The supports we needed were not available. She hopefully will return home this June.
 - Its not always easy dealing with the emotional, psychological needs of special needs children. My son (adopted as toddler) desperately needed counseling and we needed ways to deal with his behaviors (ex: ADHD, PPD-NOS, & CP). The counseling really helped – although he didn't always listen, we learned ways to work with him and we could tell him "What did your counselor say about this?" The respite services and summer programs gave us a much needed break (we have 5 adopted children) and more time to spend with 1 or 2.
 - Yes we all are somewhat happy because of the special services. Thank you very much
 - I knew I wasn't alone and our quality of life increased due to the experience of other parents. I never felt embarrassed or reluctant to ask questions and always left the support group really supported.
 - Because the child is acting better.
 - The agency provided a resource for support and referral as well as educational information and service.
 - We were unable to participate this past year, just due to 2 other "new" foster children placed in the home. Our scheduling was horrendous! However, this program is a GREAT resource center and it was nice to know that when I was at [agency] I could just go "down the hall" and get questions answered or information I was seeking.
 - We have learned so much from the Parent and Child support group and the Informative Seminars that we've attended. We are hoping to acquire respite and/or babysitting/daycare services in the near future.
 - It gave us opportunity to meet other adoptive parents, adopted children, and social workers. The support is helpful to all it seems.
-
-

- We were in a real crisis with our 15 year old who was adopted at age 2. He has severe psychological problems due to Reactive Attachment Disorder. We had to have him placed outside our home through Family Court. We visit often and expect him to come home eventually. Our 2 younger children, also adopted, were going haywire and Mom was profoundly depressed. Our family is much better off than we were and the younger kids are fine now.
 - The level of support I need for my family to be a family can make me isolated from the “world.” Knowing other understanding, compassionate parents who have “been there, done that” makes it easier to deal with my isolation.
 - Our daughter’s therapist has worked extensively with us as a family. Prior to diagnosing [child] with RAD, we worked unsuccessfully with three other counselors. The out-of-state expertise brought in for parent training has been beneficial, too.
 - We were lost before these services we’ve received! They have helped us to know we are not alone.
 - It is extremely helpful to talk to others experiencing the same issues. The support from other parents has been invaluable in helping me to manage and not give up on my child. Also, the education from the staff and the helpful hints and ideas have given me new tools to use in parenting my child. We are both better off for it.
 - If it wasn’t for [agency] 2 of my 3 adopted children would still be waiting for the school district to help them. My children waited 5 years for help until I received the training needed and how to get help for my children through [agency’s] help. They even go with you on a CSE meeting to make sure your children’s rights are being met. I don’t know where our family would be without them. They helped us through some very frustrating, dismal times. If your children need help, they are there to help you through it. We are so thankful we got a pamphlet in the mail explaining their mission with families with adoptive children. Without them, I don’t know where we would be today.
 - I am a single parent with 3 children ages 3½, 2, and 7 months. Any help and support I can get – especially respite – is great appreciated.
 - The support groups were extremely helpful for me and my daughter. It was helpful to meet with other parents experiencing the same types of problems.
 - Support of staff and other parents.
 - I would never have come as far had I not had the support therapy and psychoeducation that was made available to my family and myself.
-

- We need more services. The services we received helped all of us a great deal. Respite was discontinued and this was a big blow. The children miss it because they got to spend time with someone else besides me. I miss it because it gave me a needed break from serious behavior problems. It is extremely difficult to raise children with special needs. And when they are not your biological children, the problems are compounded. Services need to be increased if we are adopting them.
 - These services are the primary resource for our family. They are a central source for information, emotional support, education, contacts, and crisis management for people who have opened their homes to kids with tremendous needs. These needs are often overwhelming. [Agency's] services have saved the health and sanity of our family.
 - Our family is much better off because we gained new/helpful information about services we were unaware of such as mental problems explained, special ed. services, respite, financial aid, and knowing that there are people and agencies out there that could be very helpful getting you information and services that our family needed if only you knew where to look and how to go about it.
 - While the children were younger the family counseling was good, HOWEVER no follow up for late-teen adoptees.
 - Our family of five adopted an 11½ year-old child. The adoption brought challenges we never imagined. Post adoption services provided what we needed when we needed it.
 - I have been offered services to help hold my family together and the support to help hold myself together while maintaining a special needs family.
 - My family feels we have someone to talk to where before we had no one.
 - It made it easier to care for my son and helped me out a lot physically and I also received respite services which came just in time.
 - There is someone there to assist you when you are experiencing multiple problems at the same time; by phone, the home visits, information on services in the entire NY state.
 - Post-Adoption Services has made it very easy to hook up with the right services and doctors that our children need. Without the PAS we would not have known where to start—Also, the trainings they have offered have been invaluable.
 - Gave a great referral for a counselor/psychiatrist. Really good training about school/EPETC good
-
-

- Yes as a result of services received, 4 brothers was able to stay together instead of being separated from each other.
 - Because I'm able to ask almost anything and they'll get the answer if they don't already know it.
 - Knowing some areas of daily living with the children; also, knowing what to expect when there is a problem; can know how to cope in situations and get results.
 - My adoptive son has learned to manage his behavior. Problem somewhat better than before and learned some self-esteem.
 - Without the above services I would have been in trouble.
 - It was helpful and understanding the adoptive process and the interim service that are in place have been beneficial in the adoptive procedure.
 - Yes my family is better off with these services which my kids really are in need of; but with no help or very little from my agency (I've done my own foot work).
 - My family and I are better able to handle family matters better just knowing that there is help and support if and when we decide we need it, like a safety net. It gives me a sense of security.
 - My foster children have benefited because of this program. Please help keep them going to help others. I have adopted and my child and I have benefited a great deal. Thank you.
 - We are very happy with this service.
 - My child has some improvement.
 - One of my adopted children has a delayed problem, and she has to go to a mental clinic, so I am pleased that this service is available to her.
 - Yes, now we sit down and have family talk once a week if there is a problem, we talk then too.
 - We know where to go and what services to receive for us, both the children and the family.
-
-

- It had come to the point to return the child back to the agency. I contact the agency. They recommend me to [agencies]. I made an appointment and started to attend. It has help the family better now in received the services.
 - I was able to understand the changes my son was going through and deal with him a little differently.
 - I have two foster children. One child is still waiting for early intervention. The other one sees a psychiatric every Saturday at noon. I think it is very helpful for the 9 year old to see the psychiatric. He gets to talk out his weekly problems and boy does he have a lot of them to be so young.
 - Because the children realize the importance of growing up to be good citizens.
 - The education and support from [agency] has been on enormous asset to my family, me and my son. The experience and openness of the staff and other parents gave us so much.
 - My children enjoy the daycare and I enjoy the groups, topics as well as the other assistance they have given me.
 - The children and I became closer.
 - They give services that are very friendly
 - Because they help us a lot, because they have a lot, benefit for the kids. Plus, we learn a lot in support parent's group.
 - The parent-child workshops were good for my daughter in allowing her to express her feelings.
 - Since I become the legal guardian of my grand children, several times I have been confronted with some issue (money) because of their errors. [Agency] was referred to me.
 - The first time I called [agency] and talked to[caseworker]. She was able to provide me with crucial help. The help keep my family together. My family was falling apart. The support group for my child and I helped. The counseling [caseworker] gave was the key. [My child] is now 19 years and we are doing much better. I know that if [agency] had not been there for my family crisis, my family would not be together today. Thank you [agency] and [caseworker].
 - Because it helped a lot to improve the way of life in the house and to understand how they like to live in the house.
-
-

- Family counseling is the best for everybody. It is nice to know that when in sinking sand there is always someone from your support group will pick you up. The babysitting services worked for me—without daycare services, I wouldn't be able to work. Even though I work, I still need financial assistance. Overall my two children and myself, we are very happy because of groups and services that we had in the past.
 - Without the support I wouldn't have been able to have my daughter back with me. Thank God.
 - Better understanding and helpful to me regarding my son
 - I've found I'm not alone—or crazy! Others, who have gone through similar trials, share their experiences in an open, nonjudgmental forum on a continuing basis, I leave knowing how very strong these parents are, how patient and wise the counselors are, and how blessed I am to have found this wonderful organization.
 - Because with a lot of the things that was discuss it helped me. When a problem came up I was able to take care of it.
 - Older of two adopted boys is emotionally disturbed; I received very good and explicit insight into emotional problems typical of adopted children (and general parenthood and parenting an emotionally disturbed person).
 - It helped us find a summer camp for our son, which we had a hard time finding one that was affordable and had a lot of activities to offer for the price.
 - Just started no commit
 - My 15 year old special needs daughter and I were in crisis last year. The professional help we received was very helpful/supportive. Home visits were made to help me mobilize a plan of action.
 - Because of the help of [caseworker] my child is now receiving the help he needs. He helped direct me to the doors I needed to walk in for the help of my child. My child now has a NSP letter to attend a private school for 9/2003 for his dyslexia. He now receives counseling at [agency]. He now has private tutoring paid for by the Board of Education as well as the program at [agency]. I only wish I knew of the service of [agency] a few years earlier. They are still helping. Thank you.
 - The info I was seeking was for college scholarships, looking to see if they have scholarships for adoptive/foster kids.
-

- We were able to follow the court's decision because of your help. Thank you.
- The program gave me so much support. As a grandparent raising my grandson (4 yr. old) its been very hard. The program helped me with all kinds of problems that I didn't understand such as court, school, respite, family therapy. Info about the service I could get.
- We are able to understand, analyze, and react to our children's behavior in a much more constructive and positive way, lessening anxiety and stress in our family significantly. We feel more empowered to handle negative behavior and turn it around in ways that maintain and enhance our children's self esteem. The adoptive support services mean everything to us.
- When we joined the support groups, our still foster son had recently been released from [residential treatment center]. Without the group, I am not sure we would have adopted him. Nowhere else can we discuss our difficult family lives so frankly and find comfort and support with one another.
- This kept us from possibly considering placement for our 12 year old girl.
- Understanding that all adoptive parents are pretty much in same situation eased our concerns.
- We are better able to understand our children and their particular needs.
- We needed to have a "buffer" between us, as foster parents, and the bio mom in order to protect our now-adopted child. This was the only service available to us and they were highly informed, helpful, and effective.

Open-ended responses to those answering "No" to this question:

- No different
 - My agency did not offer any of these services to me or my family
 - Unfortunately, the clinician we saw for 4-5 times wasn't terribly helpful. Though she billed herself as an adoption specialist, I didn't get the impression that she could appreciate either who my son was nor the implications for him about being adopted.
 - I didn't receive any helpful services needed.
-

- Because we never received any help.
 - Do not have kids now.
 - My family wants me to give back the kids to better myself.
 - My child have never been evaluated, and have a lot of problems, since my child reached high school she have got out of control, she been missing a lot of days from school, stay out all night from home, and sometime two or three nights at a time. She is very disobedient. She is smoking drugs. My child need help. Please help me to help her.
 - I was told to contact this agency after adopting a 12 year old. A representative came out to the house. I was trying to get information for Special Education Services. I was told they didn't know of any. Only thing they were really interested in was trying to get me to attend support meetings—not interested.
-

APPENDIX D
Open-ended Responses to Survey Question 2

Question 2: When you first contacted the agency, did you have a child (or more than one child) in your home that you felt could not continue living with you?

The following explanations were given by those who answered “Yes” to Question 2, and answered “Yes” to the sub-question “Did your child stay in the home as a result of the services you received from the agency?” Some answers include an explanation of the family situation at the time the respondent contacted the agency.

- It gives me a better outlook, and what I can do more for my family.
 - Yes--my child is in my home, and doing fine.
 - My child has a disability that cost me a lot of money (encorparetic and enuretic). My support group told me about requirements of Medicaid to purchase diapers. I was amazed that the DSS workers didn't know this. Due to the monthly cost (329.00), I almost decided I couldn't afford him.
 - Yes--the advocacy that I got was very instrumental in my choosing to keep my child.
 - We were wondering if we could handle the child.
 - A number of new symptoms were becoming evident with the child which created added stress to the household. The child is the “only” child in a home where all of the other children are now adults, most are living outside of the home. We were not prepared for a child with multiple disabilities.
 - Yes--Support group presentations were very helpful to better understand how to cope with the evolving problems. Direct one on one conversation with agency personnel was a great source of support.
 - And we are still dealing with the issue now. We have considered a placement for my daughter for 2 years. We have had one psychiatric hospital stay for her in that two years. Having a child with multiple diagnoses, dealing with some outrageous behaviors, and not having the support of the community, DSS or therapist who understand is hard on a parent.
 - I had one adopted daughter who, because of a prior family abuse and intermittent foster care was making home life so stressful for me and my other child. I was questioning if I could continue to parent her.
-
-

- Because it was getting difficult to transport my son in my van, lifting him/lifting his wheelchair was starting to really affect my back and my legs as well as my foot that I had to have operated on twice.
 - Yes--I was able to get financial help in purchasing a wheelchair accessible van and I felt this difference in my back in one week.
 - The children were reunited with their families.
 - Yes--the children stayed in the home as a result of the services.
 - Stealing money from myself and daughters, hiding things that was important to us.
 - I contacted the agency for help with respite when my child would not follow her safety plan after being sexually aggressive with her sibling.
 - The family had a difficult situation with the child. The family was planning to place the child in a foster care or return the child back to the agency.
 - The nine year old was having problems in school every day. He fights every single day in school, he comes home and fights with my other two children. In the past two years, I lose five family members, and he was not making any easier on me.
 - The children were out of control
 - Family situation was very poor.
 - Yes--child stayed in the home as a result of services.
 - My child was fighting me and all of the family, the teachers at school, and taking things from the family and stores. You could not talk to her, she was not doing good in school or at home. I was at the end and was looking for a place for her.
 - Yes--If [agency] had not pick up the phone that day I know she would not be home or in school today.
 - I wasn't able to communicate with my daughter
 - My son has ADHD was very disrupted, not listening, cursing, and not doing well in school. He was totally out of control.
-
-

- My 7 year old adopted daughter was becoming more and more verbally and physically abusive towards me. We live in a 6-story walk up. On more than one occasion, she has attacked me on the stairway and pushed me so forcefully, I lost my hold on the banister and fell down a flight of stairs.
- Older child was truant, verbally abusive, oppositional, self-defeating. Rest of family spent entire time trying to find him, keep track of him. Became obvious that our problems were beyond basic parenting fundamentals, and we were also resenting how he dominated our lives. Lead to theft and running away
- Yes, though now child is at residential school setting.
- Inappropriate sexual behavior and poor academic performance forced me to review whether she could continue to live with me. Several interventions were combined to strengthen her.
- We have one adopted child in residential treatment whose weekend visits are managed much more constructively now. We have another adopted child with explosive disorder and ADHD who lives at home. Due to my (I am the mother) developing post-polio syndrome, my doctor had advised me that my daughter could not continue living at home due to the stress involved. With the help of post-adoption services, my husband and I are much better able to keep her behavior under control.
- Our adoptive placement son attempted to sexually assault our birth son and was placed in [residential treatment center]. While there, we learned that he had been repeatedly sexually abused while in foster care. We were unsure of our ability to keep all 4 children safe (including him). However, it is still a very difficult situation. While we/he sees a therapist and psychiatrist weekly, our current “[non post adoption service agency]” professionals do not understand many issues surrounding foster care and adoption. In addition to ongoing support such as the [post-adoption service agency] program, we have a desperate need for research based information on attachment disorder and how to treat it!
- Our 12 year old adopted special needs daughter was very verbally abusive and combative. It created a tense situation in our home. It was affecting our three year old boy (also special needs, foster child) who has been in our care since August 2001 as a pre-adoptive foster child. He was becoming very scared and seemed insecure. He had been very comfortable and was flourishing prior to that time.

The following explanations were given by those who answered “Yes” to Question 2, but answered “No” to the sub- question “Did your child stay in the home as a result of the

services you received from the agency?” Some answers include an explanation of the family situation at the time the respondent first contacted the agency.

- Our son has Reactive Attachment Disorder. He has required intensive therapy and parenting.
 - No--For a while he returned home – but he required more than we were able to provide. Our other children were not getting what they needed from us and overall our family was very stressed. The support we received through the post-adoptive service was critical though. It helped us make better decisions for our son and our family. We were able to find resources through people and materials that helped us (as parents).
 - We had recently (1 yr. prior) adopted siblings. One child was having behaviors that were detrimental to the safety of the other children in our home. There were problems at school with this child and she was unable to reciprocate any affection. The way we were disciplining her actions (timeouts to room, taking away privileges) was escalating her behavior to the point she was destroying her possessions and had cut herself. This is when we were referred to [agency]. (Very stable secure home, well-educated parents, family – 2 married adults, 1 bio child, 2 adoptive children)
 - She stayed for another 2 years but ultimately we were unable to make any lasting change in her behavior and she needed to be separated from the other children. [agency] never had an opening for us so we had to surrender her. Our respite provider ended up taking her as a placement. We are glad we helped them find each other.
 - Our oldest was out of control – she was 18 and we asked her to leave – she then sued us for support – we really needed a safe place to vent and get advice.
 - No--She was 18 and abusive to me (mother).
 - We had a 12 ½ year old, severely sexually abused child, with another child, 8 years old and the mix (opposite sexes with the male being the eldest) was terrible. Very hard to move the eldest child!
 - No--For the “safety” of each child we made the decision to move the male.
 - We hoped we could somehow make it work with help from outside. We couldn’t. Our teenager was terrorizing the household with his near constant rage and verbal abuse. He was physically aggressive toward his father. He was acting out sexually. He had no friends or hobbies. We were all living in a state of fear, confusion, and depression.
-

- No--We didn't actually receive "services" from the agency. We were already working with psychologists and psychiatrists. Our son was "fired" by 3 therapists because he was so awful and they couldn't deal with him.
 - a) We had an awful situation involving incest among older siblings and possible sexual abuse among younger siblings and we were in the middle of the waiting game of family court for the 2 children involved to be placed. But in the meantime, we were left to provide safety to all our children within our home.
 - No--We had already filed PINs and asked for removal before we were aware of any of these services. Had we known of these services at that time, I think my children may have been able to stay at home.
 - The child has been placed in a mental health program with home visits every 2 weeks. I have adopted three hard-to-place children (sibling group). The oldest of the three children was in a street gang and I needed to have him out of the area. Besides the people representing the county, they were the only organization that was listening to my reasons for having the child placed out of the district.
 - No--Because of my child's mental status, I believe he was used by the gangs to do illegal things. He had to be placed in the correct environment.
 - Stressed out family situation
 - No--child did not stay in home
 - I requested a fair hearing because of error made in the [subsidy] that the children was receiving – (3) children and a [illegible} of recoupment.
 - The service I received from [agency] is the kind of service I could have never afforded and I thank you [agency].
 - No--Removal was not the issue I was forced with. But they were instrumental in solving the issue I was confronted with. Thank you.
 - She is my only child. I am at the point, I do not know which way to go, or what way to turn.
 - No--she stays in my home whenever she feels like it.
 - Child learning, needing counseling, needing all the services, stress on the child and myself, just trying to find help
-

- Child was suicidal. Ended up being hospitalized and sent to [residential treatment center]. Child's behavior was out of control and a threat to other children in household. Used no services. Was told they didn't know of any.
-
-

APPENDIX E
Open-ended Responses to Survey Question 3

Question 3: Please make additional comments you would like to share with us regarding any responses on this survey.

- If you can help me get help with the 9 year old son, I would really like it.
 - I would like help in finding better living arrangements.
 - I view the services as co-parenting, especially with early teens. They are given more stability, trust and security by having someone else and peers to interact with who shares the same or similar experiences. This elevates their self-esteem as well as giving them a sense of responsibility
 - The program is good, I enjoy it. It helps me a lot sharing views with other people.
 - I don't understand why you would want to discontinue a program that's really helping all kids. A place that's not crowded. A nice clean place. Somewhere I wish I were working to help out, too.
 - On an overall basis, although the services offered by [agency] are all excellent (per my associates, i.e. other foster parents), I don't use them for my adopted children because it is too far away. I use the services provided by [another agency] and other local facilities (after school programs, sports, educational, tutoring, summer camp, etc.)
 - We had a very difficult child that was unable to live in our home but during the years we were trying to make it work. [Agency] helped tremendously by teaching us the types of problems that adopted children face and ways to work through it. We could not have stuck with this child as long as we did without the therapy or information shared with us.
 - This family may have been able to keep that child longer if respite and long term intervention had been available sooner. The burnout and damage done by not knowing her diagnosis and best treatments made it impossible for us to start on the right path with this child. Just because a family appears to be coping does not mean they are still living a healthy lifestyle. Our abilities to endure through this crisis eventually were also our downfall. Everyone just figured we'd be OK. The damage done to the healthy children could have been reduced by providing a place for the well children to hang out during that child's therapy – at home sessions were finally offered but that came too late, the other children already resented her. Full disclosure of all social and medical information to this family would have prevented the heartache we suffer.
 - When we finally decided to surrender this child, [agency] should have been there as a support but we were told "we weren't the kind of family [agency] was about." We are
-

dedicated parents in an impossible situation. I think that it was unfair to expect more from us and not validate how much we did accomplish for that child.

- This program has been very helpful for our family.
 - The counseling we have received has been a great gift. We do not receive Medicaid for our adopted children and do not have other health insurance except for CHP which is not accepted at [non PAS agency] or some other mental health agencies.
 - This agency has made a huge difference in [region] – they offer services that are badly needed. There is no one else doing these services.
 - Services are highly important for families going through the adoption process. Especially important that the service providers have knowledge and expertise in the area of adoption and those characteristics unique to adopted children.
 - I would like to receive respite care for our adopted daughter. She has ADHD and is undergoing further testing now to discover reasons and solutions to poor schoolwork attitudes and social skills. Please send us information concerning respite care to help her be involved in more positive social encounters and help her have quality time spent outside the family.
 - Crisis services in [county] were not sufficient to avoid hospitalization and further trauma to my daughter. I was not even told about [agency] and we had been in crisis for almost a year. Telephone coverage – “talking” you through a crisis is not enough when you are parenting an emotionally disturbed child with a history of abuse and neglect.
 - My “No” checks in the 1st section were because I am a foster parent and those services were only available to adoptive parents. I was so thankful the adoptive program included me at their meetings as there is little to no ongoing support for foster parents. I am so disappointed and feel “cut off” now that our group is disbanding.
 - The child was diagnosed with ADHD and is on med.
 - Since most children of adoption come with a host of difficulties, this agency and its programs are vital to maintaining stability in the home. Without the resources the children are often placed back into the system.
 - Although we didn’t get to participate much with this program we are very sad that it will not exist in our budgeting. We have future adoptions coming up and we had plans to be more involved with the services that [agency] had to offer. We’ve sent many of the letters
-
-

in to our legislators along with family pictures or individual pictures and will continue to support the fight for funds.

- I think post-adoption services are vital. Each adoptive parent should receive info with their adoption (in my opinion).
 - We contacted the agency looking for respite, but there was none available. I had long phone conversations with the agency worker who sent me helpful written material. Our son's psychologist got him into a respite-type place for teens but they kicked him out (after 3 days) because he wouldn't obey their rules. At this point, Mom took younger kids and left the home while we went through the Family Court to get help for our son. He was placed in a nearby boarding school for troubled kids where he is receiving counseling. It took 5 weeks to achieve this, while Mom and kids lived elsewhere. Sadly, our son has been "in placement" 6 months with no real progress. We expect him to come home ALTHOUGH he can't come home unless he can behave in a manner that doesn't literally threaten the sanity of other family members.
 - I am mad the NY State does not value families. I am mad that families who commit to making a child from foster care a member of their family are not supported after the adoption. I am mad at NY State for allowing families to struggle with little or no services. It seems to me that NY State looks to keep their foster care homes, group homes, RTF's, RTC's filled because they are unable to commit to helping families stay together as families. What is the NY State's position on adoption?
 - Post-adoptive services are needed to bring *hope* into family situation. Thank you, an appreciative parent!
 - These services should be standard for post-adoption and should also be available to foster and pre-adoptive families if we want to minimize the number of disrupted placements. I personally had two placements removed from my home (foster) that might not have happened had I received the support I now receive through [agency's] post adoption resource center.
 - If you have ever had any dealing with a school district to try to get help for your children, from experience I can tell you it is the most agonizing, frustrating, helpless feeling in the world. Thank god for [agency]. Post-Adoption services are needed, for the children and the parent.
 - [Agency] has been extremely helpful to me – they go out of their way to notify me of support groups and any seminars that pertain to my situation. They often call just to check in and see if they can offer me any support. They have been invaluable as a reference source for doctors, day programs, psychologists, etc.
-

- These services are absolutely essential for adoptive families.
 - We believe support and education, as well as therapy are critical in transitioning and becoming a cohesive, loving unit.
 - These services have been a tremendous resource for our family. We have committed to a child with serious disabilities and behaviors. Without the education, parent support, networking, perspectives, suggestions, books, articles, and phone calls, I know I could not be the parent my child needs.
 - Had I not been sent information about the Post Adoption Program, my daughter would not be receiving the proper special ed services and support that she needs and nor would she have been properly diagnosed as to what her problems are. She would not be on medications that treat them, and she would probably be only getting counseling instead of counseling and psychiatric treatment.
 - I feel that if these services were not available to us, we would probably not be a family living together, but because of the constant hands on relationship with the staff, my advocate was extremely helpful, she worked wonders for us. She went all out providing information and support, at school meetings, special ed dept, DSS, and providing information about classes, support groups. She was also a pleasure to have on my side.
 - When I first contacted this agency, my adopted child had been with the family for only about one month. While I can't say that my husband and I ever felt she could no longer live with us, there were certain behaviors that made me really question the placement, and wonder if we were up to the task of raising this child. If we had not received counseling, who knows.
 - Post adoption counseling made all of us feel validated, that the feelings we had weren't crazy. Assimilating an 11½ year old into a family is not easy. We continue to utilize family and individual counseling, and probably will continue to for some time to come.
 - The parent support group has been a godsend to me in that I can talk to someone who either is or has experienced similar problems and I now know how to find out what services are available and where to find them.
 - I know that this program has a lot of services for people like me that has adopted children. I found all this out in December 2002. I could use a lot of this support. My child that I adopted needs adult help in his every day living. He can't do nothing on his own. I use individual counseling in this area, because I've known this child before his trauma. So I've seen the before and the after and it's hard because I have no one to share this with.
-

- Please do not take away this program. I feel that I can benefit a lot of this program from what I already know. They've even provided me with respite that came just in time. Between my transportation problem and no nursing services, I was so close to giving up but they gave me the help to continue on.
 - My daughter attends a teen's program two weeks per month—after her second meeting she said “I am happy with the teen's program.” I asked why and she continued by saying “All of the children are adopted, and there is NO person there who is calling each other names or making each other feel bad because of the uniqueness of the program” she said. This is the only organization that she feels accepted.
 - When I first started working with the agency, things were pretty rough with one of our children at home. The agency has guided us in getting the help we've needed and made us realize that with a lot of work and support, our family could get back to a good place. I don't know where we would be without these services.
 - Having support services and the connection to those services was very important for our family.
 - A lot of families would suffer greatly without the services of [agency]. They place foster kids with loving families and help counsel the foster parents, also the kids to help them see they need to work together for the situation to work for everyone. [Agency] also tries to keep siblings together which is a vital part in a child's life. God forbid a parent is not there for him, but if his brothers and sisters isn't either it makes it a whole lot worse for the child.
 - The agency is a big support for caring for your child, where information or training is always available to the parents.
 - I would like for these services to continue because there are many, many children who need such services to help them change the way they behave and live.
 - The child that I have is my great niece, and her mom was out in the life, that's the reason that I have [child]. She is truly loved, but otherwise she wouldn't be here.
 - I feel that the agency works can assist parents with all that is out there for the children (special needs, etc.) and supply all the tools you need when trying to get services you need to be put into place so that you can better services these children.
 - Without a doubt, if it wasn't for [agency], I wouldn't be where I am today. With my foster child everything is going well. Thank you and God bless.
-

- I would just like to make a comment on the people I've met and how courteous and accommodating they've been. I couldn't ask for more helpful and caring people since I got into this in 1990.
 - I'm pleased with all the services I hope indeed that they keep going to further help others.
 - Since I am in the program, when I have any kind of problem, I call and they help me.
 - I am a parent that had all sons, so when this little girl came into our home, who was so badly abused and mistreated, we decided that we were going to keep her no matter what, even until today she is still having mental problems. She also has a baby brother, and we have both of them.
 - I personally feel it would be a loss for the community especially the children who look forward towards the meeting they feel wanted and love with everybody at the facility it will be a waste to the community for it to lose it funding.
 - My additional comments that I am sharing with the response. I hope answering these questions from survey will keep the services open.
 - The support groups allow you to speak to others who may be going through similar situations. You can ask questions and get positive information, meaning you know, if that person made it through you can too. Support takes you a long way.
 - Hoping these services will continue as long as can be, the children depend on these programs. I have come a long way with [agency]. The children are very happy and look forward to going to these meetings. They are doing very well at this time. Thanks to the work that they provide to us, and others. Please don't cut the funding.
 - Please help to continue post adoptive services!
 - If my foster care agency gave me the services which [agency] has provided for me, I would be happier and my life easier. Overall this agency has helped me more than I could imagine. I don't know where I would be without [agency's] services.
 - Well we are proud because you all help every body and the kids, they have a lot benefit a lot help to us. God will bless you all.
-

- [Agency] was particularly helpful and supportive in the process of helping to facilitate the placement and adoption process; they support older child adoption all the way through and we're very grateful for their services!
 - Unless you are with us at the time, when we are facing these issues, in trying to do the best for our children, you could not possibly understand how the agency comes to our aid: (a) comfort by phone (b) sending an advocate to my home (c) networking on my behalf (d) accompanying to court hearings (e) and most of all reassuring you that everything will be OK. They will give attention to your issue until, and they do.
 - [Agency] was able to teach me what no one was able to teach me about my child. We had been having psychiatric counseling for 10 years and no one was able to tell me what [psychologist] and [caseworker] was able to teach me. The support group and education you get at the group is what keeps your family together. Once you know what the child is going through, you can make it.
 - Is for that this program don't go away because a lot of people need children and a lot of children need parent, with this help they going to have a better way of life with whoever adopted that child.
 - Without the help that was given to my daughter and I, we now laugh, talk, she tell me things (God is good) Please keep the funds coming in God bless.
 - I was desperate, having gone through 3 therapists in 6 months. Friends, as well, were becoming more distant. I was disenfranchising myself because of the depression that was taking over my life. My health was also declining as my blood pressure rose. This beautiful child, extroverted and overly affectionate with strangers, would turn on me in the privacy of our home, turning it into a battleground. My only respite was the escape that my job afforded me. That is, until I found [agency]. Other parents were, in some form or another, telling my story, relating my frustration and exposing my anger and disappointment with their stories. This incredible mix of multi-racial, multi-cultural and multi-generational parents find many common denominators at this wonderful "mind spa" called [agency].
 - Please find some help for my child. My daughter have been in the 9th grade for two years, and she don't look like she is doing no better, she is staying out all night, I don't know her friends, and I don't know where she be, she is smoking drugs, and she is very disrespectful. I can't talk to her, and I can't reach her.
 - These services and the experience and expertise brought forth at [agency] are so very essential for ANY parent to have access to, especially given the emotional issues that many children in general have problems with and which foster/adopted children particularly suffer greatly from. NO ONE else is in such a position to offer this help and
-

advice, as well as this chance for parents in similar situations to share, as [agency] has been to so succinctly address my family's problems. Not the police, not our family therapist.

- We need more respite services
 - Parent Workshops
 - Survival strategies for parenting special needs children
 - Parenting adolescents
 - Adolescent resources
 - How to strengthen the supportive systems
 - The people are really helpful because what they couldn't help with they were there to support me at the meeting.
 - [Caseworker] assisted me. He continued to follow up until I had secured the help I needed. I feel now that I could always find help at your agency. Please continue to send brochures about services. Thank you for your help.
 - Please keep this program. Grandparents are trying to raise our children. We need this program because we have been out of the loop too long. They help us with a new and a better understanding of today's children.
 - Things are so much better at home now with the ongoing support of post adoption services. Please keep them going. Thank you.
 - In my case this agency was absolutely no help to my family or adopted children.
 - My husband and I live in [county]. I am a member of the [agency] Parent Support Group. It is my understanding that if only two children are kept out of residential care for one year, the cost of the [agency's] Post Adoptive Services would be paid for. This seems cost effective. We have a 12 year old special needs girl. We contacted [agency] for the Post Adoption services in August 2002 because we were having a difficult time with her. She had become verbally abusive and combative. It created a tense situation in our home. It was affecting our three-year-old boy who is a special needs foster/pre-adoptive child who has been in our care since August 2001. He was becoming scared, appeared insecure and began to act out. He had been very comfortable and was thriving under our care prior to this situation. We were feeling so distraught that I thought we would need to place the girl in residential care. We love her and it broke our hearts to think we needed to consider that option. Counseling at an outside clinic did not meet our needs. The [agency's] group support and individual family counseling services made all the difference. The workers are so knowledgeable about the unique needs of the adopted special needs children. Our three- year-old has two siblings who were in a non adoptive foster home. We had been
-

asked if we could take them in early 2002 and had declined after of a few months of trial visits. Our experience with [agency's] Post Adoption Services was so positive that we reconsidered and took the children into our care in February 2003 as preadoptive foster children. It has been challenging but the outstanding support of [agency's] Post Adoption workers has helped us immensely. It is still difficult but we have someone to turn to when we need help. The two children are still foster children. We may need to reconsider keeping them if adequate support services, such as, [agency's] Post Adoption services are not available to us. Please include [agency's] Post Adoption Resource Services in the TANF Preventive Services budget. Thank you.

- [Agency] helped me and my adopted son – he needed a “big brother” type of assistance which [agency] provided.
 - The group lets us know that we are not alone. Also we are able to exchange ideas with each other to help us become better adoptive parents.
-

