

**CARITAS**

**FAMILY SOLUTIONS**

# GUIDE TO BECOMING A FOSTER PARENT

*Our Mission: As a visible expression of God's loving community and consistent with the example of Jesus Christ, Caritas Family Solutions provides direct services to persons of all backgrounds with social and emotional needs across the continuum of life.*

**Locations:**

Headquarters  
8601 West Main Street  
Belleville, IL 62223  
Phone: 618-394-5900

645 Berkshire Boulevard  
East Alton, IL 62024  
Phone: 618-258-8750

219 Withers Drive  
Mt. Vernon, IL 62864  
Phone: 618-244-0344

10286 Fleming Road  
Carterville, IL 62918  
Phone: 618-985-2000

1901 South 4th Street, Suite 222  
Effingham, IL 62401  
Phone: 217-342-3970



**THE PROOF OF LOVE IS IN THE WORKS.  
WHERE LOVE EXISTS,  
IT WORKS GREAT THINGS,  
BUT WHEN IT CEASES TO ACT,  
IT CEASES TO EXIST.**

**-POPE ST. GREGORY THE GREAT**



Dear Potential Foster Parent:

Greetings from Caritas Family Solutions! Thank you for your interest in our Foster Parent Program. This booklet was designed for you to help you better understand some of the questions you may have about foster parenting and also the characteristics of foster care itself. Caritas Family Solutions provides services to literally tens of thousands of people every year. Our mission is clearly directed by the teachings of the Gospel as we strive to respond to the needs of the sick, the hungry, the elderly and the abused.

As Foster Care Licensing Supervisor, I want to thank you for taking the first step as you prepare and explore all that Caritas Family Solutions Foster Care Program can offer you and your family and most importantly a child in need. As you work with us to provide a caring, compassionate and structured family environment for these children you will undoubtedly feel a fulfillment that is unmatched in any other type of charity. Let me assure you that the difference that you strive to make in the life of another, although challenging at times, will be very real.

Sincerely,

Mary Savage  
Foster Care Licensing Supervisor



## What is Foster Care?

Foster care is the temporary placement of a child by the Department of Children and Family Services (DCFS) outside their homes due to abuse, neglect or dependency. Placing a child in substitute care - a foster family home, group home or institution - is not intended as a permanent living arrangement but to protect the child when the ultimate goal is for the child to safely return home.

Substitute care placements are selected to provide secure, nurturing and homelike settings for children. When it is not possible to return a child home safely, the Department seeks a new goal of adoption, however, long term foster care with relatives or other foster parents is also considered. Independent living services are considered for some older youth that have demonstrated the capability and expressed the desire to live on their own.

Substitute Care Services include Foster Family Care, Relative Foster Care, Group Home or Institutional Care, Supported Independent Living, Protective Day Care, Homemakers, Counseling, Psychological Assessments of Children, Health Care, Crisis Intervention, Aid for Pregnant or Parenting Teens, and Preparation of Youth for Independent Living. Services for populations include Unaccompanied Minor (refugee) Assistance and Wraparound Services for children returning from institutional placements to their communities.

DCFS has taken steps to reduce the number of children who require substitute care. Through a new early intervention service, called Front End Redesign, families are given help immediately after their needs become apparent, even before a child abuse or neglect investigation is completed. These services may help prevent the need for a child to be placed into substitute care. Also, in accordance with state and federal laws, an increased emphasis has been placed on early permanency, which may include a child's return home, adoption, subsidized guardianship, or an independent living program. At its height — Approximately 51,000 Illinois children were living in substitute care. Because of an increased emphasis on early interventions and permanency services such as adoption, that number has declined to 37,960 in recent years.

Support elements for all programs include an Administrative Case Review (ACR) system. ACR is an independent case review process for every child in substitute care. The purpose of the review is to assure that foster care plans are family-focused and accomplish permanency from the clinical and monitoring perspective. Other support programs include the development of placement resources, Subsidized Guardianship, reform of the relative foster care system, and development of the Adoption and Foster Care Analysis and Reporting System/Statewide Automatic Child Welfare Information System (AFCARS/SACWIS), a state of the art management informant system.

Many kinds of children need foster homes; teenage moms and their babies, children with special needs, sibling groups, and babies born with HIV are just some of the groups of children most in need of foster parents.



## Frequently Asked Questions

### **What children need foster homes the most?**

Children all ages and nationalities need foster homes. Children who currently need homes the most are;

- Brothers and sisters who need to stay together
- African-American infants and children
- Teenage mothers and their babies
- Children with special medical needs and those who have behavior and emotional problems
- Teenagers
- Latino children
- Babies born with the HIV (AIDS) virus or with cocaine or other drug in their system
- Native American Children

### **Can we choose the child we want?**

You can state the age, race, and sex of a child that you think would best fit in with your family. You do not have to accept a child.

You may feel that a child would not fit in or you may feel that you cannot give a child the care he or she needs. If so, just tell the licensing worker who asks you what you prefer in terms of what type of child you feel you and your family will best be suited to care for.

Sometimes prospective foster parents will come into foster care with the hope that they will be able to have only infants placed with them. Occasionally this can happen, howev-

er, if the preferred age range of a foster parent is not flexible, this could dramatically extend the length of time that it takes to place children in the home.

### **How do children come into foster care?**

Some children come from families in which there are marital problems. Some come from families beset by physical or emotional illness. Some children have been abused, neglected or abandoned by their parents and protective custody is taken by various law enforcement agencies, the courts or hospitals.

### **Can a single person become a licensed foster parent?**

Yes. Any stable, law-abiding citizen over 21 years of age who has a sincere desire to care for children in need can apply to be a foster parent.

### **Can persons receiving Public Aid or those on small incomes serve as foster parents?**

Public Aid recipients, as well as other persons with small or fixed incomes, are generally discouraged from applying to be foster





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parents because the delayed payment system may cause temporary financial problems. Licensing standards state that those who wish to become foster parents should be able to provide sufficiently for themselves and their own family before the monthly board payments. The board payments should not be viewed as supplemental income to the family. The spending of these monies are tracked every month by your child's caseworker.

### **Can foster parents work?**

Most foster parents can work outside the home and can be provided with daycare. Due to the educational and behavioral issues presented by children in specialized foster care, at least one parent is expected to stay at home. Although, we understand sometimes this is just not a possibility.

### **How many foster children can we accept?**

That depends on many factors such as your ability, your commitment, how many children currently live in your home and how much room you have in your home. The maximum number, including other children who live in your home is set by DCFS licensing standards. The licensing standards for foster care family homes provide very specific instructions about requirements for sleeping rooms, family health, and qualifications of foster parents.

### **Do all foster children have problems?**

Most of them do, to some degree. Many are frightened and confused at the sudden separation from their parents. Some are angry. These problems may lessen, though, as

the begin to feel safe and nurtured in your care.

### **What kind of support will we receive?**

As a licensed foster parent, you are an important part of the child welfare team. The child welfare agency who supervises your home and your child's caseworker are responsible for supporting you to help you be a good foster parent. Each agency, including DCFS, has developed supports, which may include foster parent support groups, newsletters, after hours telephone numbers, and community resources. You may always call the caseworker, and most agencies have experienced foster parents whom you may call for advice or help.

### **Financial Assistance**

Foster parents in regular foster care programs receive a monthly check to cover the child's board, clothing and personal allowance. The amount of the check is based on the child's age and any special needs.

### **Medical Care**

Each foster child gets a medical card from the state which pays for all necessary medical care.

You will be given a number to call to get help in finding a doctor for children placed with you. The medical card is also accepted by many hospitals and for approved prescriptions. You will not have to pay any medical bills yourself.

### **Education Services**

Foster children go to regular public schools, unless they need education which public



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schools cannot give. Private or parochial school tuition cannot be paid by the State. Foster children may attend private or parochial schools, but only if the tuition is paid by some other source and only if DCFS approves.

### **How do we become foster parents?**

You must be licensed to be a foster parent. Contact the Licensing Representative for the Foster Care Program at your local Caritas Family Solutions office. The Licensing Representative can answer questions you will have and will arrange an appointment to visit your home to determine with you if foster care is a good option for your family. After preliminary screening, the Licensing Representative will work with you on applying to become licensed foster parents and developing your family home file.

### **How do we become foster parents?**

At the point when you are ready to develop your application and foster family home file it is the licensing worker's job to decide, with you, if foster care is a good plan for your



family and, if so, how you can best help foster children.

The representative will also give you a foster home license applications and medical forms to have completed for everyone who lives in your home. The law requires that a criminal background check be run on all applicants and other adults in the home, so you and other adults who live in your home will be fingerprinted. In addition, you will be asked to provide the names of three people who know you well, and they will be contacted. Check of the DCFS Child Abuse and Neglect Tracking System will also be run.

While these checks are being run, you must attend training classes to help prepare you to be a foster parent.

### **What types of foster parents are there?**

Most foster parents care for children whose goal is to be reunited with their parents or other family members as soon as possible through a regular foster care program for abused or neglected children.

Sometimes children in foster care need extra or special care from the foster family. If so, the family must have the skills, knowledge and experience to meet the individual needs of the children. Foster parents who either already have necessary skills, or are willing to be trained to meet the special needs of these foster children, may become part of a specialized or treatment foster care program which provides extra or special care to children. These foster families receive extra



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payments each month.

In certain circumstances it may be that children placed in your home can never return to their parents. When this occurs, you may have the option of helping to prepare these children to be adopted by you, or you may be asked to help them get ready to be adopted by someone else.

DCFS also offers another option for permanency. It is called Subsidized Guardianship. Under this program, you do not adopt the child, but you become the child's legal guardian, and you receive supports from DCFS.

### **How long does it take to get a foster child?**

The licensing and training process takes about 4-6 months. Sometimes this process can take longer depending on background authorizations. When that process and your training is completed, and after you have received a license, children can be placed in your home. The amount of time it takes for actual placement of children into your home can vary widely depending on your capacity, availability, agency dynamics, and the degree of need.

### **How will our children react to foster children?**

That is very hard to predict. It is important that you talk with your children and other family members before you apply for a foster home license. If you've prepared them well for the coming of foster children and they understand foster care is temporary, there

should be few problems. It's not unusual for your children to be a bit jealous at first -- just as they might be jealous of a new baby in the family.

### **Do foster children need individual bedrooms?**

No. A foster child can share a room with your children or other foster children of the same sex. Usually the child must have a bed of his or her own. A foster child may not share a bedroom with an adult, except for brief periods such as a child's illness. These requirements are in the foster home licensing standard and they will be explained to you by your licensing worker.

### **Can we take our foster child on vacation with us?**



## Frequently Asked Questions



Usually you can. But if it involves out-of-state travel, you must call your child's caseworker and get his or her approval.

### **Can our foster children go to church with us?**

Usually the answer is yes. Many children attend church or worship services with their foster families. Sometimes, though, the parents ask that their child be taken to the place or denomination of worship that the child has been attending.

### **Do a child's parents visit him or her?**

In most cases, yes. In fact, visits between parents and children are an important step

toward helping children to go back home. Since our goal is to reunite families whenever possible, birthparents are encouraged to be interested and involved with their children in foster family care. It is important, then, that both parent and child can expect to see each other at definite times. The caseworker will talk with you and the child's parents to work out the time and location of the visits.

### **Will we have to be involved with a foster child's birthparents?**

That depends. You will be involved with the birthparent always to the extent that the child is involved with his or her birthparents. That is, foster parents, by state policy, must support a child's natural ties to his or her birthparents since the preferred goal in foster care is to return the child home.

In general, however, you will not be required to have physical contact with the birthparents unless you feel comfortable with such contact. We do not give a birthparent your home telephone number or address without your permission. Also, from time to time, we are in need of foster parents who are willing to interact and work with birthparents to help them develop appropriate parenting skills.

In addition, we occasionally need specialized foster parents to work even more intensively with birthparents to facilitate the reunification of the child with his or her family. If you are interested in working with the birthparents, please feel free to discuss this with your Licensing Representative.



## Frequently Asked Questions

### **How long will a foster child remain with us?**

A child will remain with you until his or her own family is able to take him or her back, or until another permanent plan is made. Every six months, the child's case is reviewed to determine if adequate progress is being made toward the permanency goal for the child. A child may stay with you a few months to a few years. It is hard to predict the length of a child's stay from the outset.

### **When a foster child leaves, can we take another?**

Yes, if things have gone well and you are open to another placement. However, if no children matching the age and gender you want to care for are in need of foster homes, you may go through a period of time without a foster child.

### **Can we ever adopt a foster child?**

DCFS and Caritas Family Solutions generally try to return foster children to their families when it can be done safely. Any consideration of adoption is after all comprehensive efforts at returning the child home are exhausted. However, if the child becomes available for adoption, you may be considered as an adoptive home for the child.

### **Won't it be hard on us when the foster child leaves our home?**

Yes. That is, in fact, the hardest part of being a foster parent. You will certainly feel sad for a time. It's only natural—just as it's natural for your foster daughter or son to want to return to their parents or to have a permanent family of their own. You will almost certainly feel sad for a time, but when

you accept this as a natural part of foster care and in the best interest of the child and his or her family, it becomes a bit easier. There will always be new foster children who will need your care and affection. Your foster parent training will help prepare you to deal with these situations.





## BECOMING A FOSTER PARENT: The Process

*Thank you for your  
interest in learning  
more about*

*Caritas Family  
Solutions Foster  
Care Program.  
Caritas Family  
Solutions*

*considers itself to be  
a “safe haven for  
children” and we  
are very excited that  
you are interested in  
pursuing a  
relationship and  
becoming a  
“safe haven” along  
with us.*

### GETTING STARTED:

As you explore foster parenting more, you will find that the State of Illinois has a set of requirements that your family must meet. These requirements are called Licensing Standards for Foster Family Homes. Prior to receiving children into your home, you must first become licensed as a foster parent in the State of Illinois. Caritas Family Solutions can assist you with the licensing process and once completed will act as the supervising agency over your home.

As the supervising agency, we will meet with you a minimum of once every six months to assure your home meets licensing standards. In addition, we will provide case management services for any children placed in your home. As part of the case management services, the worker for the child will meet with you on a regular basis to discuss the child's needs and movement towards permanency. The number of visits by the worker will depend upon the program the child is placed in.



## BECOMING A FOSTER PARENT: The Process

### LICENSING:

In order to become licensed, you will need to go through a mutual assessment process and training. The mutual assessment process consists of a licensing worker meeting with all members of your household as well as completing a physical check of your home to assure compliance with the State of Illinois' licensing standards for foster family homes. The licensing worker will discuss your interest in foster parenting, thoughts on child care, human relations within your family structure, employment and your willingness to involve yourself and your family with children placed in your home. It is during this interview process that you can discuss the sex and age of children you are interested in caring for as well as find out what age/sex of children are most in need of placement. The mutual assessment process is usually completed in a couple of interviews over a period of 4-6 months.

The licensing worker will request that you and all members of your household 18 and older be fingerprinted.

Any member of your household age 13 and over will be required to complete a form for authorization for

background checks. This will initiate a search of the State's Abuse



and Neglect Tracking System (CANTS) for any abuse or neglect committed by the individual. The licensing worker will discuss the process for obtaining these background clearances with you during one of your meetings. In addition to the interviews and clearances, you will also need to provide the agency with specific documents related to your family. Some of the items you will need to provide to your licensing worker include proof of income, copies of marriage/divorce/separation documents, medicals for all household members and at least 3 personal references.

All foster parents must attend a pre-service foster parenting training. This training must be completed before the worker can make a recommendation that you be licensed. The licensing worker will contact you to register for



## BECOMING A FOSTER PARENT: The Process

pre-service training which consists of 9, three hour sessions that explain to you the child welfare system as well as the responsibilities of all members of the foster care team including the foster parent. In addition, you will need to complete of training six hours (2-3 hour sessions) on Educational Advocacy. This training is designed to give you an understanding of the State of Illinois' special education laws as well as how to work with the educational system. The licensing process takes about 4-6 months to complete. Once you receive your license, it is valid for 4 years.

### **ON-GOING REQUIREMENTS:**

Once you receive your license, you will be required to complete a minimum of sixteen hours of on-going training (4 hours each year) per licensing period (4 years). These trainings provide you with further education are designed about foster parenting and meeting the special needs of working in a system with children who have been removed from their home. Topics may include working with sexually abused children, loss and separation, attachment disorders or working with

a team. On-going training hours can also be obtained through videos or books related to foster parenting. Activities outside of the formalized trainings must be approved in order to be counted toward your training hours. Your licensing worker can assist you in understanding the process for getting such items approved.

While in foster care, children are expected to maintain an on-going relationship including contact with their birth family. Family visits are usually scheduled once a week for one hour. The frequency of these visits increases as the child prepares to return home. While foster parents are sometimes encouraged to facilitate and participate in the visits, agency staff supervises the majority of these visits. Outside of family visits, the children in care are expected to maintain contact with their siblings through visits, phone calls, letters, etc. All siblings placed in separate facilities must visit with each other a minimum of 4 hours per month. Foster parents are expected to make sure the children are available for visits. In some instances, foster parents who facilitate sibling visits in their home can be reimbursed for supervising sibling visits. The case



## BECOMING A FOSTER PARENT: The Process

manager can discuss this with you in more detail once a child is placed in your home.

In addition to the requirements listed above, each of the foster care programs has specific requirements related to working with the children placed in your home.

### **TRADITIONAL FOSTER CARE:**

Traditional foster parents provide services



to children, ages 0-18 who have been removed from

their birth family due to abuse or neglect. The State of Illinois has legal responsibility for all of the children in this program. Most of these children experience mild behavior problems related to separation and loss. This is the lowest level of care that is provided. As a foster parent in this program, you will be expected to provide for the

basic needs of children which includes transportation to and participation in medical, dental, counseling and school appointments. Foster parents are also invited to attend Administrative Case Reviews (every six months) in which a DCFS representative reviews the progress of the case. Additionally, foster parents are invited able to attend court hearing concerning the child's and family case. The caseworker in this program will meet with you a minimum of once a month.

Foster parents are expected to keep records on their foster child as outlined in Rule 402, Licensing Standards for Foster Family Homes. Foster parents caring for the children in this program receive reimbursement for room and board rate, which includes monies for allowance and clothing. The amount received depends upon the age of the child. Foster parents in this program are expected to keep records of these expenditures and show them on a monthly basis to the caseworker. Children in this program are eligible for medical services through the use of a medical card. If the child receives any medication, the foster parents are expected to keep a medication log when dispensing it to the foster children. There is no additional pre



## BECOMING A FOSTER PARENT: The Process

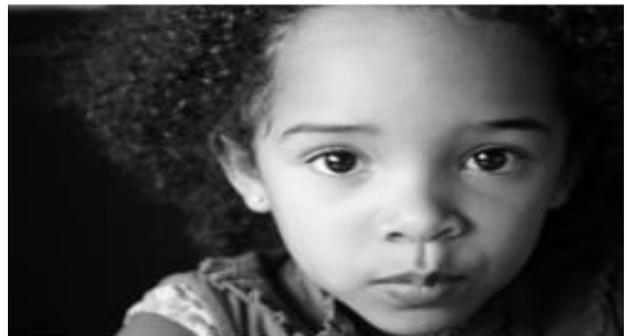
-service training required for foster parents who work in this program.

### **SPECIALIZED FOSTER CARE:**

The agency provides two types of specialized foster care services: behavioral/mental health care and medically complex/developmentally disabled care.

Like traditional foster care, specialized foster parents provide services to children, 0-18, who have been removed from their birth family due to abuse or neglect. The State of Illinois also has responsibility for these children. These can be children whose behaviors are leading them on the path to residential placement or children who are being stepped down from a residential setting. In addition to the basic requirements listed under traditional foster care, foster parents in the specialized programs are required to complete 8 hours of specialized training in the Family Teaching Model. This training is designed to help foster parents develop the skills needed to work with children who have moderate to severe behavior problems. On-going training for the specialized foster care programs requires foster parents to complete 24 hours of on-going training per year. Caseworkers in this program

meet with the foster parent and child in and out of the home at least four times per month. The specialized foster care programs also include a respite component that is designed to give foster parents a short break from parenting.



## Characteristics of Children in Care and the Foster Parents Who Care for Them

### PROFILE OF FOSTER CHILDREN

#### Many foster children are under-developed

- \*Socially
- \*Academically
- \*Emotionally
- \*Physically
- \*Conditions such as Attention Deficit Hyperactivity Disorder (ADHD), Fetal Alcohol Syndrome (FAS), and Post Traumatic Stress Disorder (PTSD) are not unusual.

#### Many exhibit “acting out” behaviors.

- \*Defiance
- \*Opposition
- \*Physical aggression
- \*Sexual acting out

#### Most of these children are in great need of :

- \*Structure (behavior modification programs can be effective)
- \*Patience
- \*Unconditional love



### PROFILE OF FOSTER PARENTS

- \*Unconditional love
- \*Sense of “call” or “mission”
- \*Flexibility, Tolerance, Hope, Patience
- \*Have the skills, attitude and stamina to effectively deal with many behaviors and feelings displayed by children and youth.
- \*Perseverance
- \*Are accepting of the temporary nature of foster care and can help a child transition back to his or her family or move on to a permanent or adoptive placement.
- \*Basic parenting skills
- \*Firmness without being aggressive or abusive
- \*Have a non-punitive attitude and can demonstrate some level of acceptance toward the parents of the children in care
- \*Strong, healthy marriage (if married)
- \*Psychologically well balanced
- \*Supportive family and friends
- \*Can work cooperatively with the representatives of the foster care agency and willingness to be a part of the foster care team.
- \*Non-judgmental attitude
- \*Openness to learn



## Should You Become A Foster Parent?

### **The Problems...The rewards....**

**By: Patricia Keller (adapted)**

...Because I have been a foster mom to fourteen children, many people have asked me what being a foster parent really involves – what it is all about. They want to know how you go about becoming a foster parents, and what happens to you and your family when you open your heart and home to someone else's child.

The need for more foster homes in our country is great, and becoming foster parents is not a very difficult thing to do. Simply phone the local office of Caritas Family Solutions –and tell them you are interested in becoming a foster parent. They'll take it from there. They need you, and the children need you.

But before you place that call, give a few moments of thought to what is really involved. Understand that you will be changing your life, but you will also be changing the life of a child and his family – helping to mold that life.

Some people have misconceptions about what being a foster parent entails. Sure, they say, they'd just love to be foster parents. They can picture themselves opening their home to some poor, skinny waif, feeding him and living happily after. But there's more to it than that.

A foster child can be very time consuming. He comes to you with built-in problems. He may have been in several homes already, and may be quite frightened, or else has just been removed from his own family, and this makes him afraid. He can require more of your time and care than a natural born child would, at least until he becomes adjusted to

being with you and don't expect that adjustment to come quickly. It can take months.

Although you are free to choose the age and sex of the child you take into your home, he will still come to you with guaranteed problems and difficulties. Some are physical problems. Perhaps he has been starved or has a hearing or visual handicap. Maybe he has a bad heart or walks with a limp.

Some have learning problems—perhaps even have been labeled “retarded”. Sometimes you are able to reach the child, guide him, and help him reach his true potential intellectually, but the process can be very difficult and can require all your energy – and then some. But if you do reach him, watching his progress and witnessing his development can be tremendously exciting and have immeasurable rewards.

Many foster children have emotional problems. You would, too, if you were moved from one home to another.

Lying is one of those problems you may have to deal with. Foster children, until they become secure in your home, may have a tendency to lie to you because they don't trust you. They'll brag about the house they just came from: tell you how big it was, how rich the people were, how important his father or other foster father was, or how much better his real mother cooks.

They may steal, break things, or deliberately disobey rules as they test you. They have to know that you really do care for them. More than anything else, they need to be cared for, to have someone love them. As a defense against the fear you won't love them, they strike out at you in any way they can. They are asking you to love them by doing very unlovable things to you and your household. Does that make sense? Maybe not, and it may seem inconsistent, but there usually has not been anything very



## Should You Become A Foster Parent?

consistent in their lives.

How are your nerves? Many children are also likely to throw temper tantrums. It is their way of letting off steam, of living with the pressures and insecurities of knowing that they don't have a real home and believe me, they are well aware of that fact. So they scream and kick and cry or else they crawl into a shell and you can't get them to talk or play and you can't seem to reach them at all. Then you wish they would yell or throw things or react irrationally instead of just sitting there.

Foster children may also wet their beds. Moving from one place to another is upsetting to their entire systems, but nighttime is especially overwhelming for them. They have nightmares. They wake up, screaming and vomiting.

Your foster child can almost destroy any semblance of family harmony. You will tend to be cautious about his health or play equipment because he isn't really yours and you are responsible to the state for his well-being and protection.

Sometimes a child will come to you in such a pathetic condition that just the thought of what he has been through will make you ill, then angry, and then determined that something be done to correct his condition.

One set of foster parents I know was given a one-year old boy who weighed only twelve pounds. When he came to them, he was dying from malnutrition and neglect. He didn't even have the strength to cry for the food his poor wasted body so desperately needed.

It took a lot of good food and plenty of love to pull the little fellow through, but he began to respond to a good diet and plenty of loving. By the time he recovered and was beginning to act and behave like a nor-

mal healthy child, the foster mother and child had formed such a strong attachment for each other that when he was moved and returned to his own home the separation was very painful for both of them.

That's another matter to consider. When you get a foster child, you know that you will eventually have to give him up. If you are going to care for the child properly, then you must let yourself love him. You cannot hold back your love for him, because more than food, clothing and place to sleep, these children need love.

So you love the child and in a sense he comes to be your own and yet, always in the back of your mind is the thought that this child will some day leave you. Occasionally a child will enter a foster home and remain there until he is grown. But most likely there will come a day when you will have to watch the child walk out to his caseworker's car, climb in and be taken to another home. A part of you goes with him, a very large part. The grief you will feel at that time can be just as deep and real and profound as if your own natural born child was taken from you. It hurts.

Sometimes after you work and pray and devote yourself completely to bringing a sick, neglected child back to health, he will leave you to be returned to the same home from which he was removed. You hope the changes the family has made while the child was placed are lasting and sufficient to provide a good home life, but then you may lie awake at night, and wonder how he is and if he is being mistreated again.

Each time a child is brought to you, the entire family must adjust. When he leaves, there is a void in your home which requires another adjustment.

If you have children of your own, they may resent a stranger coming into their home, sharing their par-



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ents, and perhaps even sharing their very own room. Usually, though, you will find your own youngster will eagerly accept the idea of having a foster brother or sister but once the “intruder” actually arrives, they have second thoughts. It is up to you to handle the situation wisely so that none of the children is hurt by it all.

Now let’s discuss money. You will be paid by the agency that places the child with you. Each month you will receive a small check which is supposed to cover the cost of feeding and clothing the child properly, that is, to see that he eats as well as the rest of the family, and if you dress him in decent clothing, you’ll find that there will be no financial profit for you. In fact, be prepared to dig down deep into your own pocket sometimes.

The agency does cover all the child’s medical expenses, which helps you, but when it is all added up, you’ll find that being a foster parent costs you money.

Being a foster parent means giving up a lot of your freedom, having your home invaded by a child who will probably do all he can to disrupt your family life, destroy furniture, and shatter your nerves. Being a foster parent means taking into your home and your heart a desperately ill child, nursing him back to health, and having to let him go. You stand there with empty arms and a broken heart.

Taking a foster child means creating problems within your own family that could be avoided simply by not becoming a foster parent. It means disrupting your home situation until the newly arrived youngster becomes adjusted (if he does) and then upsetting things again when he leaves. It means spending money, not making money.

But being a foster parent also means doing something so rewarding, so vital, so important with your life, that there is no way to measure the blessings that



heap up around you—even as you vow never to take in another one, never to allow yourself to become so involved with another child again only to have to face the heartbreak of giving him up – even as you say “never again” you are waiting for a call from Caritas Family Solutions saying they have a little girl who needs a home.

Being a foster parent means that you are working the greatest profession there is – life. It means your home will be filled with love and tears and laughter. It means drying a frightened child’s tears, teaching her/him to smile and to respond to love. It means walking the floor at night with a precious newborn baby. It means watching that baby grow and develop a personality.

Being a foster parent, certainly has a lot of drawbacks, but if you aren’t afraid of facing problems...if you welcome the challenge of meeting a problem head-on and solving it...if you want to know that your life really counts for something, then help a child. Help mold his/her world. Help create a responsible future citizen.

In other words, be a foster parent.

## Goals and Guardianship For Foster Children

All children who are in foster care have goals that are set for them through DCFS. The foster parent's are to work with the agency and their foster child or children towards that goal. A better understanding of what permanency, these goals, and DCFS's determine factors for what is best for a foster child will help you better determine whether or not becoming a foster parent is for you.

### **Why do we say foster care is temporary?**

Because foster care should never be seen as a permanent solution for a child unless all other resources have been found unsuitable or unavailable.

### **What do we mean by "permanency?"**

This is the idea that every child is entitled to a stable family situation where she will be cared for until adulthood with people who respect her identity, make her feel worthwhile, and provide her with roots once she has reached adulthood.

**In making permanent plans for the child, some outcomes are more desirable than others. What is the order of desirability of outcomes?**

1. Return to birth parents
2. Adoption
3. Permanent care with relatives

4. Permanent foster care
5. Early emancipation/independent living
6. Institutionalization

### **The family's legal right to raise their child means:**

Unless it can be demonstrated otherwise in a court of law, families have the right to raise their children and make decisions about them. Only when it can be shown the family's neglect or abuse of the child is extreme and unlikely to change can the court override this right.

### **The child's feelings about his family are:**

Most children have intense feelings about their families and love their parents, regardless of what society may think about the parents. They often blame themselves for having been removed.

### **The family's ability to change, learn and cope is:**

With appropriate help, most families can learn to provide adequate care for their children.





## Goals and Guardianship for Foster Children

### **Why is permanent foster care one of the least desirable outcomes?**

Because foster care implies that the relationship between child and caregiver could change at any point due to a change in the family situation, a move to another state by the foster family, is a violation of Foster Home Licensing Standards, etc.

### **When is permanent foster care justified?**

When return to the birth family is deemed impossible, but the child does not want to be adopted or parental rights cannot be terminated. When the birth family, foster family and child agree to the permanent plan.

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Some Foster Parents find that being a licensed foster parent may be too intrusive on their everyday lives. The fact is that the foster child's guardian is DCFS so when a foster child wants to or needs to:

1. **Visit out of state?** Permission for visits out of state must be approved through your caseworker.
2. **Go to overnight camp or spend the night with a friend? Again, these events should be approved through your caseworker.**
3. **Buy a car?** The Department of Children and Family Services, the

Guardian for the foster child must give its ultimate approval. If you have a child in foster care who wants to buy a car, consult your worker so that he/she can obtain approval from the Department.

4. **Join the armed forces?** Again, the child's guardian (DCFS) must give approval for a foster child to join the armed forces. Consult your caseworker.
5. **Receive medical treatment?** For non-emergency medical treatment, contact your worker. For emergency treatment, the guardian (DCFS) will have to give approval. In an emergency situation, take the child immediately to the hospital, and inform the officials that the child is a ward of DCFS. They will know how to obtain the necessary approval for treatment. You may also obtain consent for treatment by calling (217) 782-6533 or 1-800-252-2873 after hours.
6. **Receive elective surgery?** Elective surgery will need to be approved by the guardian (DCFS). This can be arranged through your worker.
7. **Get a haircut?** Approval for haircuts must be arranged through your caseworker.
8. **Go to church?** Consult your worker about your desire to take the child to church.



## Goals and Guardianship of Foster Children

### Total Population:

513,000 children were in the U.S. foster care system on September 30, 2005. Most children are placed temporarily in foster care due to parental abuse or neglect.

### Age:

Average Age: 10.0 years  
 6% < 1 year  
 26% 1-5 years  
 20% 6-10 years  
 28% 11-15 years  
 18% 16-18 years  
 2% >19 years

### Gender:

Male 52%  
 Female 48%

Race/Ethnicity	Out-of-home care population	General population
Black (non-Hispanic)	32%	15%
White (non-Hispanic)	41%	61%
Hispanic	18%	17%
American Indian/Alaska Native	2%	1%
Asian/ Pacific Islander	1%	3%
Unknown	2%	n/a
2 or more races	3%	4%

### Race and Ethnicity:

As a percentage, there are more children of color in the foster care system than in the general U.S. population. However, child abuse and neglect occur at about the same rate in all racial/ethnic groups.

### Length of Stay:

For the children in foster care on September 30, 2005, the average amount of time they had been in the system was 28.6 months. Half of those leaving care that year had been away from home for a year or longer. 54% of the young people leaving the system were reunified with their birth parents or primary caregivers.



## Goals and Guardianship of Foster Children

### Foster Homes:

In 2004, there was a total of 153,000 licensed/certified/approved kinship and non-relative foster homes nationwide. In 2005, 24% of youth living foster care were residing with their relatives.

### Adoptions:

In 2005, 60% of adopted children were adopted by their foster parent(s). The "foster parent" category excludes anyone identified as a relative of the child. 25% of children adopted in FY 2005 were adopted by a relative. A "relative" includes a step-parent or other relative of the child.

### Siblings and Extended Families:

Over 2 million American children live with grandparents or other relatives because their parents cannot care for them. When relatives provide foster care (known as kinship care), siblings can often stay together. Kinship care also improves stability by keeping displaced children closer to their extended families, their neighborhoods, and their schools.

### Youth in Transition:

Each year, an estimated 20,000 young people "age out" of the U.S. foster care system. Many are only 18 years old and still need support and services. Several foster care alumni studies show that without a lifelong connection to a caring adult, these older youth are often left vulnerable to a host of adverse situations:

Outcomes during transition from care to adulthood	National data	Regional or Local data
Earned a high school diploma	54%	50-63%
Obtained a Bachelor's degree or higher	2%	2%
Became a parent	84%	42%
Were unemployed	51%	30%
Had no health insurance	30%	29%
Had been homeless	25%	36%
Were receiving public assistance	30%	26%

*These facts were taken from the [National Foster Care Month website](#).*



## I AM A CHILD IN FOSTER CARE

I am a child  
I am less than 18 years of age.  
I have been removed from my home because:  
I have been physically, emotionally, or sexually  
abused once or many times,  
or  
I have been chronically neglected,  
or  
I have been abandoned or orphaned,  
or  
My family said they didn't want me to live with  
them anymore  
or  
I am physically or mentally handicapped  
And my family can't or won't take care of me.  
Now I am called a Dependent Minor  
I am in foster care  
I have lost my family, my school, my neighborhood,  
my friends.  
I may be in foster care for a short time  
or  
I may have been here for as long as I can remember.  
I didn't plan for this to happen. Sometimes I may  
feel like it's my  
Fault that I was taken out of my home.  
Foster care may be better or worse than where I lived  
before,  
But it is different.  
In foster care, I have:  
A social worker, A case manager, A GAL  
a judge, a foster family, a therapist, an attorney and  
a case plan.

The case plan will decide if I go back home, live  
with a relative,  
get adopted by another family or stay in foster care  
until I turn 18.

I may change foster homes once or many times.  
People say they will try to keep me from having to  
move, but sometimes that doesn't work out.

Each time I change foster homes or move back &  
forth between my foster home, my parents' home, a  
relative's home, a shelter or a group home, I may:

Change schools, teachers, and friends;

Have to learn new rules;

Somehow lose clothes, possessions and "my things"  
between places;

Learn to call every foster parent "mom" and "dad"  
or I may never be able to use those words;

Come close to being adopted, but the new family  
changes their minds. That really hurts,  
especially if they decide to keep my brothers or sis-  
ters but not me.

While I'm a kid in foster care, the State pays for:

A doctor's care when I'm sick,

A Dentist's Care

A counselor for me to talk to,

Money to my foster parents for my room & board

Some money for clothes.

I may not own much.

When I come and go, all of "my things" are usually  
put in a couple of grocery bags or cardboard boxes.

It's hard to get a bike, skates, or toys of my own.

No one seems to have the money for music lessons,  
dance, or little league.

I don't like being different all the time.

It's hard to be a happy kid when you don't belong to  
anybody or anyplace.



## A Foster Child Is Coming To Stay With Us Today

Article written by: Foster Parents of Westmoreland County, Virginia

*(The following is a scenario from our perspective on a typical "first day" foster care experience. We hope it gives you some insight into the feelings one may encounter).*

**The day begins normally.** My husband is off to work at 6:30 a.m. I write some letters and do daily household chores. Then...

**10:00 a.m.** - The phone rings; it's a call from social services. They may have a child needing to be placed in foster care sometime today. The child is a little boy who is 5 years old. Is our home available? I ask for 30 minutes to consider. I call my husband at work; we talk briefly, and decide, yes, we will take this child. I hang up, still wondering; can we do this right now? And then I remember "can't" is a word I've tried to eliminate from my vocabulary as a foster parent.

**10:20 a.m.** - I call social services and leave word that we are available for this child and will wait to hear from them. Then I become scared and worried about how we will possibly be able to meet the needs of this child who is a stranger to us. Part of me is excited about the prospect of a possible opportunity to help a child, but another part of me is devastated for the child. At the age of 5, separation from his birth family will be traumatic.

**10:45 a.m.** - I try to stop worrying and focus on what is within my control to do at the moment. I go into our "foster children's room" and realize the bedspread is pink. I find one more appropriate for a little boy and the Garfield sheets. I change the bed, tidy the room, and then check the foster children's closet for clothing that might be needed. I go through the toy box and children's books to find age appropriate items. As I do this, I reflect nostalgically on items that were favorites of other children who have been in care with us.

**11:30 a.m.** - I check the cupboard for food supplies a 5-year old boy might enjoy. I realize a quick trip to the grocery store is in order. I get to the store and check the aisles for what I think he might like. Cereal is a must! But what kind? I opt for a variety pack. After selecting a number of food items, I also get some new crayons and a coloring book, and a toothbrush.

**12:45 p.m.** - I unload the car and check the answering machine. No messages yet about this little boy. I put everything away and then decide to bake cookies, probably as much to pass the time as anything else.

**2:00 p.m.** - The cookies are done, I try to think of what else I can do to prepare for this child and I realize I just need to be calm and go about my day. I'm now prepared to meet his immediate physical



## A Foster Child Is Coming To Stay With Us Today (cont'd)

needs at least. But that's the easy part, the emotional needs are the tough part. I'm anxiously awaiting the phone call, but also hoping my husband will be home from work before the child arrives. He always does better than I at interaction with the children, whatever their age. They always seem drawn to him.

**2:30 p.m.** - I need to start dinner, but I stop and look through photo albums of other children who have been with us through foster care and re-read notes and cards we've received from them and their birth parents. I realize we made it through those placements with lots of support from social services, so somehow we will manage to help this child as well by providing him with a safe, secure, and loving home environment for as long as he needs it. I call my mom and tell her we may be having another child come to stay with us and ask her to pray for guidance for us.

**4:00 p.m.** - Dinner preparation is finally underway when the call from social services finally comes. The child will be coming. They are unsure of the time. I respond, "We will be here waiting."

**5:30 p.m.** - My husband is home and I'm grateful he will be here when the child arrives. We pick at our dinner and wonder what this experience will be like and if we will be able to adequately meet this child's needs. We talk about the "first

day" with other children who have been with us and try to recollect how some of these children found a comfort level coming into our home for the first time. Some were drawn to the fish tank, others to our cat, and some to video games. We hope this child will find something to relate to until he is comfortable with us so he won't feel so very scared.

**7:45 p.m.** - There is the knock at the door we've been waiting for. In spite of our previous experiences, I'm still worried about not being able to meet the needs of this child. We go to the door and I am able to immediately stop thinking of how I feel and try to put my feet in the shoes of this child on our doorstep. He's at the home of total strangers. How overwhelmed he must be! How frightening an experience this is for him!

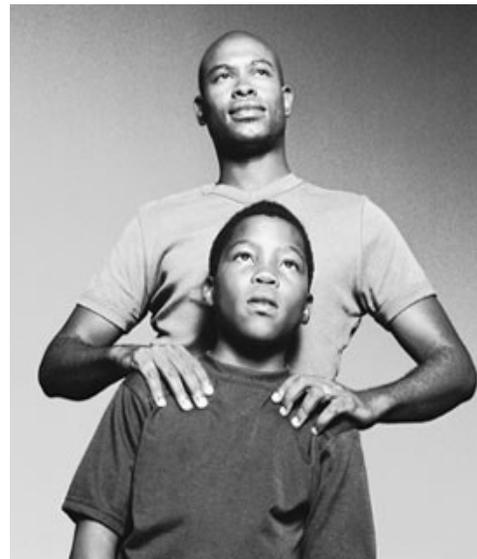
I smile, remain calm and try not to look sad as I notice the grocery sack he carries clutched in his hand with what I assume are a few personal belongings. He walks hesitantly in and, thank heavens, our cat comes and does figure 8's around his legs! They seem to strike up an immediate friendship! They sit on the floor and play while my husband and I talk quietly with the social worker. She stays until he eventually begins to talk with us a little. He and my husband talk about Nintendo games and my husband convinces him to have something to eat. We try not to crowd him; we let him have his space.

## A Foster Child Is Coming To Stay With Us Today

The social worker leaves and we are on our own with this very special little boy - he is so precious and innocent. We promise ourselves to do all we can.

**10:00 p.m.** - He is finally settled in bed after what must have been a lonely and scary day to him. He misses his parents desperately. Hopefully, he can have a visit with them soon. We take the fact that he is talking to us as a positive sign. We try to get to sleep ourselves and pray for support and guidance with this child. We tell ourselves we will just take one day at a time but we know that sometimes it's an hour at a time or even a minute at a time, depending on the needs of the child. We sense this child's needs are great - we don't feel adequate to meet them - but with the support of the social services staff that we know we can always count on - we will find a way.

*This article was originally printed in the Winter 1999 edition of the Anchor.*



## “Just Like You”

A poem written by a foster father

Just like you  
I hurt, I cry, I don't know why,  
Just ripped out of all I knew,  
You want me to act like you?

My mommy was wrong,  
My daddy doesn't care,  
You want me to act like you?

You don't understand,  
They did what they could,  
You want me to act like you?

You're not my mom,  
You're not my dad,  
You want me to act like you?

I am okay,  
Now leave me alone,  
I don't want to be like you.

I was doing fine,  
I can take care of myself,  
I don't want to be like you.

I don't want to hug,  
Don't hold my hand,  
I don't want to be like you.

Just take me back,  
You don't understand,  
I don't want to be like you.

Don't leave me alone,  
Don't put me behind,  
I just want to be like you.

Just hold me close,  
Please hold me tight,  
I just want to be like you.

It's just not fair,  
My parents just didn't care,  
I just want to be like you.

Please don't give up,  
You're all that I've got,  
I just want to be like you.

By: Jamie Holben





## Life As A Foster Child

Written by a Former Foster Child

### **A throw away kid...**

This is my story as a foster child. I hope it helps someone understand us, especially the foster parent. I hope it makes the case workers really listen to us. I hope it changes the system, but I'm afraid it won't.

### **Taken**

Don't let me mislead you, I am not a child now, but I remember everything. I remember thoughts and feelings, I remember the looks and attitudes of those around me. I was a watcher, a silent, withdrawn watcher. In a way, I still am.

I was taken from a stay in the hospital to the social worker's office. There I met my younger siblings, ( I was the oldest). I didn't know what was happening, but I don't think I cared at the time. I was already broken at this point. I had already shut down emotionally, a child in a box, detached, going through the motions. I was 7 years old, and very small for my age.

I had no memory of the particular incident that put me in the hospital. It had just happened, and my mind protected me from the memory, it still does to this day.

Yes, we should have been taken.

Don't get me wrong, child services were right in getting us out of that home. It was horrible there. After my mother divorced my dad she married a psycho. No, really, he was clinically psycho. He was diagnosed with schizophrenia, and even his parents warned my mother to stay away from him. She didn't listen. She moved in with her very young 5 children. I remember so many horrible moments with that monster. So when I finally ended up in the hospital, it was good that we were immediately taken out of the home, but then came foster care.

### **How can you expect us to be grateful?**

This is to all of the foster parents, we don't like you. You have to earn that right. You have to earn our trust, what little we have left, and it won't be easy. Oh, and something else. Don't expect us to be grateful for what you are doing for us. What do we have to be grateful for, anyway? We were ripped from everything and everyone we know. We were thrown to you, and you want us to be grateful? We didn't choose you, and we know you will probably never love us. You are strangers, you are dangerous, you are another set of adults we have to listen to, another set of adults who can hurt us. You have power over us, and we are helpless. Our life lays in pieces around us. We are shattered, damaged, broken. How can you expect us to be grateful?

### **For those who tried, we remember you well.**

Of all the foster homes I've been in, one stands out as a shining example above all the others. They were



## Life As A Foster Child

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an older couple in Eclectic, Alabama. I only remember their last names, the Hayes, and their son was the local pastor of the church we lived near. This was the first foster home, and I wish we could have stayed, but tragedy struck the family, and then we were gone. I think Mr. Hayes died, which is why we had to go.

Let's not focus on that though, but on how great this couple was. First of all, they NEVER hit us. They just talked to us, and tried to teach us. What matters most is they never hit us, or yelled at us.

We had routine. Everything was structured, and we knew what to expect every day. Don't you see how important that is to us? No surprises, no chaos, no changes. At least while we were with them. I remember regularly eating pancakes for supper and watching Kung Fu on TV. It didn't matter that I didn't understand the TV show that well, it was the tradition of it that was comforting.

The one thing I loved there was sitting on the porch swing and singing. I rarely talked, rarely smiled, but I would sing. It was freedom! It was expression! My siblings would join in, and you clapped for us! You smiled at us. You made us feel special, and you didn't take our song from us.

They NEVER hit us, did I say that already? Yes, it's that important. We know pain, you can't hurt us anymore than we had been hurt already. Does it make you feel better when you make us cry? That is what we've been taught. The Hayes never hurt us or yelled at us. I think they really understood. They were wise and patient. They were good. I truly honor their memory. They were the only ones...

### **The Worst**

We don't like you, and we don't have to. We really don't like you, and we know you don't like us, you just like the dollar sign that comes with us.

I won't give their name, because I don't want to hurt their relatives, but they lived in Red Hill, Alabama. They ALWAYS hit us. Many times. My brother got the worst of it. He was willful. He was only 6 years old. He was a boy without love. Don't you understand that? Why did you make him work so hard? HE WAS ONLY 6 YEARS OLD! He had to feed all the animals before school. A lot of animals for a 6 year old, even horses. He would get the switch if he missed the bus. He would get the switch if he couldn't feed all the animals. He would get the switch for so many things. You taught him anger. You taught him hate. You broke him, and he stayed that way.

I WAS ONLY 8 YEARS OLD! I remember all the work. Washing handprints off the walls. Polishing your silver. Cleaning your oven. Stepping on tiptoes to hang out your laundry. Staying up after you've



## Life As A Foster Child

Written by a Former Foster Child

gone to bed so I could iron your clothes. Washing your dishes. Vacuuming your whole house, upstairs and down. I didn't want to get hit. I still did, and I can't remember why. You made a game of it, jump the switch. We would be lined up, the youngest is 3 years old. Jump the switch while it tore at our ankles and bit into our legs. You enjoyed it. Why else would you do it? You were paid to hurt us. We stayed with you the longest, and we paid for it.

As if that weren't enough, you made us sing. Wasn't that so cute, 5 little kids singing for your guests. You took the one thing that belonged to us, our voices, and made us entertain your friends. We don't like you or your friends. You sold our voices to your friends.

All the work, all the pain, all the misery, and we never said anything. We learned it didn't matter. We learned there were consequences when you talk.

### **It's Grandma!**

I remember it being an unusual day to start with. We were going to the store! This didn't happen often, going out. It was a thrilling event, and we were somewhat excited, or at least as excited as troubled children can get.

We arrived and were on our best behavior. Our eyes scanned the aisles, looking for things children look for. Candy, toys, soda, GRANDMA! It was grandma! Our grandma! She was here! We ran to her screaming her name, which was, of course, grandma, and she bent down and scooped us into her arms. We felt love like nothing we've felt before. Our wonderful grandma tried to sneak us out of the store, which was impossible since we made such a ruckus! Instead of being rescued, a man in uniform was called and our grandma was forced to let us go. What started out as a wonderful day became a day of sadness and loss.

### **Gone**

The social worker came today. This means we are leaving, but she didn't take us all. She only wanted two of us, the two little ones. They get in the car and then they are gone. This is something new. Something different. Where are they going? Are they going home? Are they going to Grandma? Why didn't they want the rest of us? Please don't leave us here with these people, please.

### **The Teacher**

Another school. Another teacher. A bunch of kids looking at me. The kids. They are different than me. They are happy when school is over. Not me. I don't want to leave, but I don't say anything. I do what I'm told.



## Life As A Foster Child

Written by a Former Foster Child

My desk is next to the teacher's desk. I like being close to her. She is nice. I was sitting at my desk silently doing my work when a stick of gum was slid to me. I looked up, and it was the teacher! She smiled. I quietly opened the wrapper and popped the gum in my mouth. She didn't give anyone else a piece, only me. She snuck a stick of gum to me every day after that. Every day I thanked her with a smile.

Teacher, I wish you knew what you really gave me. To you, it may have been a simple piece of gum, a small token of kindness. To me, it was so much more. It was something all my own, something precious no other kid in that room had. That little stick of gum made me feel something I had never felt before... worthy. Some may say you were just giving a stick of gum to a troubled little girl, but I like to think you were listening to God's whisper.

### Together Again

The social worker came today. How many of us does she want? Will I be left here alone? I had to pack too, but I'm so scared. What if the next home is worse than this one? What if they leave me here? I'm a good girl. I have to be good so God can find me. I'll be good if you let me go to Grandma, I promise.

We all got into the car, my two other siblings and I. We went to another home, and the two little ones were there. I remember seeing them, but I was so locked within myself, that I didn't react to their presence. Just standing there, maybe I said "Hi", I don't know. I had to sever the connection to them, because they could leave again. I severed the connection to all my siblings. I existed with them, I didn't live with them. I just stopped living altogether.

It sounds cold, heartless, selfish, I know. I wish I had been stronger, but I was just a kid. I was the oldest, and they looked to me for strength, but I was so dead inside. Oddly enough, they still looked to me when something different happened, something good, something bad, anything. They all looked to me for...what? I don't know. Perhaps they saw my detachment as strength, but it wasn't. It was merely survival.

### The Visit With Our Real Daddy

We were ushered into the social worker's car. This usually meant that we were going to stay with a different family, a different set of rules, a different lifestyle, everything different. We were taken to grandma's house! What? Can we stay? Is our nightmare over? Do you know what made this better? Daddy was there. Our daddy. Not someone else's daddy, not a fake daddy, not a foster daddy, OUR daddy! He should have gotten custody of us after the divorce. He could afford it, he had a good job, he worked for the Army Corp of Engineers, but we were given to our mother. Big Mistake. It didn't matter now, because it was daddy, and some woman.

We stayed a few hours, and the dreaded social worker came back. So gullible we are, so naive, so



## Life As A Foster Child

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young! We wouldn't get in the car, would you? But we were offered a soda. A soda? We were fooled into getting in the car for a soda? Yes. Oh, how young we were.

### Going Home For Real This Time

I remember standing outside with my siblings. That woman wanted to take our picture. That woman who is standing with my dad. We didn't know what was going on. We have become completely jaded by now. Never trust anyone again. Never. Adults lie. Adults hurt you. Adults are dangerous. Adults can make you do anything they want. Adults have complete power over you, and you are nothing. Never trust anyone. Ever.

We went home, to my dad's house in Titus, Alabama, and that woman lived there too. My dad's new wife. Our step-mom. This will sound cold to those who haven't been there, but for a long time, our house was like another foster home. Do you understand? Another house, another set of adults, another set of rules. We were not normal children. We were not happy-go-lucky kids. At least not the older 3 of us. The 2 youngest don't remember much about foster care, but does that mean they weren't affected?

### Rise Above or Fall

It wasn't easy for any of us. Not our father, who had to live with the knowledge of first, losing his children to the ex-wife, and then to foster care. A man denied custody because he was a man, and because he was single (wasn't that ridiculous). Not for our new mom, who had to be a mother to 5 troubled kids she had never met before. But especially not for us, the kids. This affected us for the rest of our lives. We know that bad things can happen no matter how safe you feel, or how good you are.

But you have a choice...rise above and become one heck of a strong person, or fall. No matter what you feel, no matter what people say, no matter what reasons there are, you can rise above. Don't you see? If you fall, if you let this beat you for life, they win, you lose. You are out of there, away from foster care, away from what put you in foster care, but you are still trapped. You are your own prisoner. Refuse to stay locked up. You have the power now. Don't let your past hurt you or turn you into a shadow of a person.

### What I've Learned

I've learned not to sweat the small stuff. I really don't even sweat the medium stuff! It takes a lot to get me angry. I am very patient. I can be really compassionate and empathetic, but only to a point. I expect you to help yourself. I expect you to be strong too. Don't whine on and on about how bad your life is. Is it really that bad? Don't tell everyone your sob story because, let me tell you, someone out there can top it, and they don't go around expecting sympathy from everyone.

I am also very logical. It took me some time to learn emotions, or rather, how to show emotion. I'm still

## Life As A Foster Child

Written by a Former Foster Child

learning. I still hide my true feelings a lot, though my Asperger's Syndrome may have something to do with that.

It doesn't take much to make me laugh. I can laugh at the simplest things. Allowing myself to laugh was something I had to learn. It was the easiest to learn, probably because I am so hopeful, even when it seems there's no reason to be! I can hardly understand why I'm so hopeful, but I know just how bad it can get, and I know I am a survivor.

All those other emotions are the ones I still have to work on!

### How You Can Help

There are many programs set up to help foster children and especially those who have aged out of foster care. Most of them have no real family to fall back on, many are thrust out into the world with nothing but a few belongings. Times are tough, I know, but they've always been tough for these kids. Help them when no one else has.



# ILLINOIS ADOPTION FACTS

## 4,407 foster children in Illinois are waiting to be adopted

Adoption provides children with a lifetime of emotional and legal connections to a family. Foster children who cannot return home risk reaching adulthood without a permanent family of their own. In 2008, Congress passed the Fostering Connections to Success and Increasing Adoptions Act, which will help more children find permanent families. Despite this progress, thousands of children—especially older children and children of color—still wait for families. And many families who have adopted lack critical post-adoption support that is essential to their children’s long-term stability and well-being.

### Foster care was intended to be temporary, but many Illinois children remain in care for years.

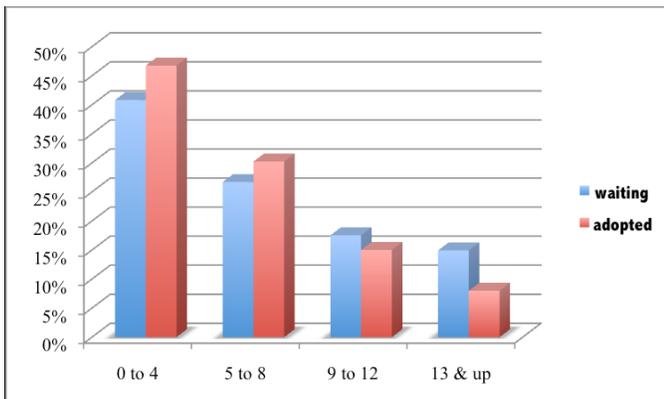
For children waiting to be adopted in Illinois, the average length of stay in care is almost four years (46.8 months). On average, children who were adopted in 2007 spent 47.8 months in care before the adoption was finalized.

*To shorten the time children spend in care, child welfare agencies must employ the best recruitment tools possible to find families.*

### Older children in Illinois are not as likely to be adopted as younger children.

The average age of Illinois’s adopted children is about 6.3 years, while waiting children are, on average, roughly 7.1 years old. Research shows that for youth over the age of 9, the likelihood of being adopted drops significantly.

### Age of Illinois Children Waiting to Be Adopted and Adopted, 2007



*Special strategies must be employed to ensure that older children are adopted, and that their newly formed families have the support they need.*

A higher proportion of African American children are waiting to be adopted than are adopted in Illinois.

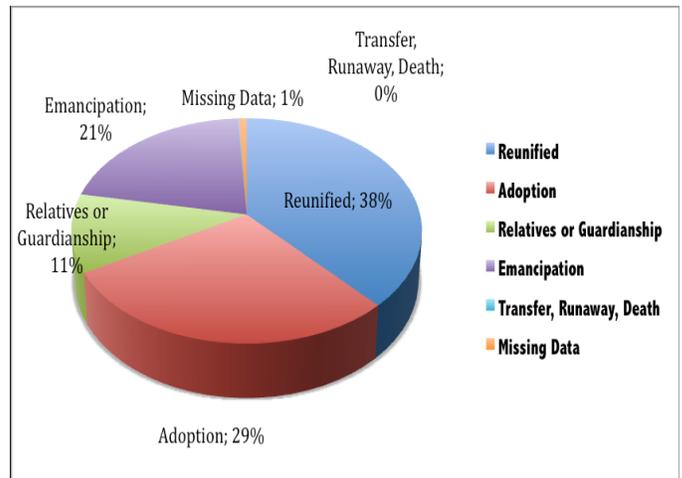
*Disproportionate outcomes for children of color can be addressed by investing in services to keep children safely at home. For children who enter care, agencies must create programs to address the unique racial and cultural needs of children of color, including seeking families who reflect the background of children in care, as required by law.*

Ethnicity	Children Waiting	Children
African American	57 %	52 %
Caucasian	36 %	40 %
Hispanic	5 %	5 %

In 2007, many Illinois children left foster care to return home (38%) or live with relatives or in guardianship (11%). 1,693 children (29% of all exits) were adopted.

Children who found permanent families need support to help them recover from the trauma of abuse and neglect and the experience of being in care.

### Exit Types for Illinois Foster Children, 2007



*Post-permanency services should be available to families who adopt, accept guardianship, or are reunified with their children to help make permanent families as strong as possible.*

North American Council on Adoptable Children • [www.nacac.org](http://www.nacac.org) • 651-644-3036 — December 2009

# ILLINOIS ADOPTION FACTS

In 2007, 1,245 youth in Illinois aged out of foster care without a permanent, legal family.

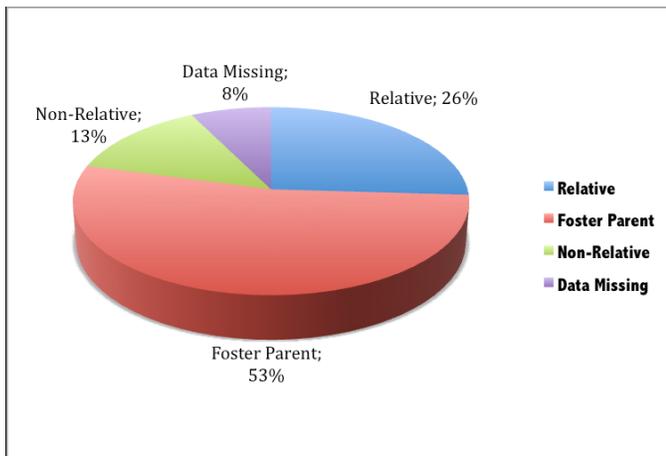
Research shows that many of these youth will face significant obstacles in the future, including homelessness, unemployment, depression and substance abuse.

*The best way to improve these outcomes is to ensure that youth do not age out of care without a family. For those youth who do not find a family, states and counties must provide support to help them make the transition to independent living with the help and support of caring adults.*

**Most children adopted from foster care in the U.S. are adopted by foster parents and relatives.**

Nationally, 53 percent of children adopted in 2007 were adopted by their foster parents. Another 26 percent were adopted by relatives.

**U.S. Adopting Parents' Relationship to Child Prior to Adoption, 2007\***



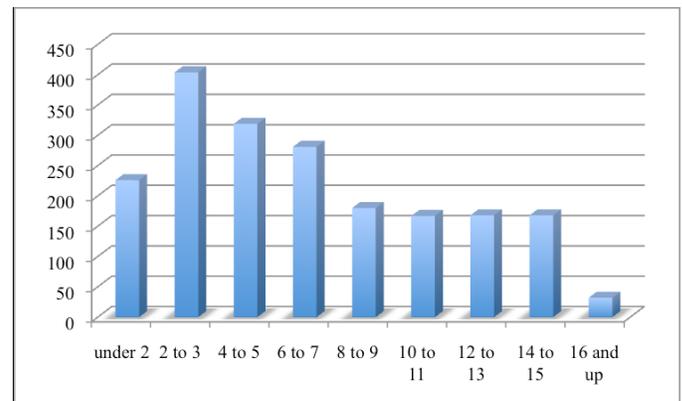
(\*Illinois data was incomplete so we have chosen to present national data.)

*If foster parents and relatives are provided with adequate support from the beginning of a child's experience in care, they will be in a better position to provide children with the permanency they need if they can't return home. By setting adoption assistance rates equal to foster care rates, agencies can help ensure that foster parents have an incentive to adopt.*

**As a result of the Fostering Connections to Success and Increasing Adoptions Act of 2008, many more children with special needs adopted from foster care will be eligible for federal adoption assistance by 2018.**

About 71 percent of Illinois children adopted in 2006 were receiving Title IV-E federal adoption assistance. Many of the children who were not IV-E eligible did not qualify due to their birth parents' income. Some children who do not qualify for federal assistance receive no adoption subsidies at all. The new law eliminates birth parent income as an eligibility factor. As a result, many more Illinois children will qualify for and receive federal assistance. Beginning with adoptions finalized on or after October 1, 2009, all children 16 and older and children who have been in care for five years or longer—and their siblings—will receive federal support, as long as they have special needs and meet other eligibility requirements. Each year, younger children will be phased in for federal support (14 and older in 2011, 12 and older in 2012, and so on) until 2018 when federal support will be given to all children with special needs who meet other eligibility criteria. In 2006, 1,213 (40%) of Illinois's waiting children had been in care for five years or more. Of those, 403 were not receiving IV-E payments. Also in 2006, about 192 of the waiting children who were not receiving IV-E payments (17%) were 14 or older.

**Illinois Waiting Children Who Are Not Receiving Federal Support—by Age, 2006**



*Illinois has an important opportunity to promote adoption for many children who can now receive federal adoption assistance for the first time. The state can make significant progress on its permanency outcomes by targeting intensive recruitment efforts for these children.*

Source: Adoption and Foster Care Analysis and Reporting System (AFCARS), 2007 data made available by the National Data Archive on Child Abuse and Neglect, Cornell University



## Older Child Adoption

There are currently about 126,000 children in foster care who are waiting to be adopted. Very few—about 3 % — are under the age of one. Almost half are older than nine. These children face the prospect of growing up without the nurturance and security a permanent family can provide: a child over the age of nine is more likely to remain in foster care through his or her 18th birthday than to find an adoptive home. Every year about 20,000 18-year-olds leave the foster care system and have no place they can call “home.”

It doesn't have to be this way. For the majority of these children and youth, adoption can provide not only a permanent family and home but a lifelong connection to a caring adult who can provide the safety, stability and well-being to which every young person is entitled. In fact, in a study of 43,000 children adopted from foster care in fiscal year 2000 (Maza, 2002), almost 30 % were age nine and up.

Historically, adoption was considered primarily for healthy infants and very young children. It was not until the early 1970's that the idea that “no child is unadoptable” started to take hold among adoption professionals, who started making greater efforts to find permanent homes for children with special needs.

The Federal government has supported the adoption of children with special needs, including older children, since the passage of the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272), which provided matching funds for adoption assistance. All but two states list age in their definitions of special needs: in 1998 the child's age was given as the basis in 31 % of all special needs adoptions (U.S. House of Representatives, 2000).

In addition to assistance to adoptive parents, since the passage of the Adoption and Safe Families Act (ASFA) in 1997 the government has offered incentives in the form of bonuses to states that are successful in increasing the number of children adopted from public foster care system and those with special needs. The Adoption Promotion Act of 2003, which reauthorized these adoption incentive funds, authorized an additional bonus of \$4,000 for each child age nine and over who is adopted over the baseline (fiscal year 2002 adoptions). The new incentive is effective for FY 2004, and the baseline for each successive year until FY 2008 will be based on the highest number of adoptions finalized between FY 2002 and the previous year.

Clearly there is concern that many older children in the foster care system are not finding permanent homes. It is too early to know whether the increased state incentives will have an impact on the pool of waiting older children. However, there are several issues child welfare professionals would address in order to help more of these youth achieve permanency.

### Youth opposed to adoption

Many older children, particularly adolescents, express opposition to being adopted. There are many reasons for this, but there are also ways to help youths move from “no” to “yes”. Involving the youth in the process of locating an adoptive family and engaging them or her in discussing options such as open adoption, shared parenting, kin and foster parent adoption. Discussing important people in his or her life might reveal other who might be interested in adopting. Lifebook work and family group decision-making can also contribute to the youth consideration of adoption by helping the young person understand and accept his or her past and obtain permission to move on.

### Foster Parent and Kin Adoptions

Foster parent adopted 59 % of the children adopted from the foster care system in FY 2001 (U.S. Department of Health and Human Services, 2003) and another 23 % were adopted by relatives. Agency practice has undergone a shift from the days in which foster parents were generally not permitted to adopt and kin may not have even been considered. Now foster parents are actively encouraged to become permanent resources for the children in their care, often from the beginning of their service through dual licensure and concurrent planning. Still, many foster parent may be uncertain about adoption because of concerns regarding issues such as finances and post-adoption supports. Workers should not hesitate initiate conversation about adoption. They may find foster parents receptive to making a permanent commitment to children with whom they already have an attachment, particularly once they are reassured about the availability of subsidies and post-permanency services. The National Adoption Information Clearinghouse has a list of considerations for agencies want to encourage foster parent adoption in *foster Parent Adoption: What Professionals Should Know*, available at [http://naic.acf.hhs.gov/pubs/f\\_fospro.cfm](http://naic.acf.hhs.gov/pubs/f_fospro.cfm). In the past child welfare agencies often did not consider relative placement for children coming into care as a result of abuse and neglect. The old saying about the apple not falling far from the tree reflects the concern agencies had about relative placements, particularly with grand parents.



### OLDER CHILD ADOPTION CONT'D...

Further, if the father was not living in the home, he often was not engaged in the planning process and his relatives were not considered for kin foster care or adoption. Today some agencies have become more proactive in working with fathers and their extended families.

Kin express a need for financial support for the child and other post permanency services.

#### Adoption preparation

In older child adoptions, both the child and the adoptive family should be given ample preparation for the significant changes that will occur in their lives. The brief *Adoption Preparation*, which you can find on our site at [www.nrcadoption.org](http://www.nrcadoption.org), discusses preparation of the child. For adoptive families, the agency's regular pre-adoption training should be supplemented with additional information about older child adoption as well as specific information about the child and any special needs he or she may have. The booklet *Adopting the Older Child* by Candice Wheeler provides a brief introduction to some of the most common issues faced by adoptive parents of older children, including grieving, frequently seen behaviors, setting limits, and communication. You can find it on the website of the Michigan Adoption Resource Exchange at <http://www.mare.org/Info/Info.html>.

### Myths About Adoption

As parents-to-be of adopted children, we are confronted with a long and often frequently-repeated list of questions. Most of them begin with, "Have you thought about..." or, "I've heard..." or, "Are you really sure..." Many of these are perpetuated by people unfamiliar with adoption.

Older child adoption, like any major change in life, involves change and risk. Don't ignore the risk factors, but don't be trapped by these myths. Do your research, talk to knowledgeable people, say your prayers, and then take the proverbial leap of faith.

#### Myth #1

You'll never love an adopted child like your own.

In fact, love is not based on biology. Love comes from acting like a parent, from taking care of your child, from loving your child, and from making a commitment to your child.

#### Myth #2

With adopted children, you can never be sure how they'll turn out.

In fact, the same can be said of biological children. We all grow up as a composite of nature and nurture; that's the same whether we were adopted or a biological child.

#### Myth #3

Unless you adopt a newborn, you'll end up with all kinds of problems.

In fact, there are certain things that you cannot know about a newborn that you can identify in an older child. Things like interests, language ability, social skills, and more. And certain disorders, like Fetal Alcohol Syndrome, cannot be diagnosed until a child is several years old. Like most things in life, there are advantages and disadvantages to adopting children at different ages.

#### Myth #4

All those kids in foster care have all kinds of problems.

. Yes, some do. Just like institutionalized children, children from the American foster care system can be born with or acquire certain issues that parents need to be educated about. It's not true, however, that ALL children from foster care have major "problems."

#### Myth #5

Your child will never consider you their real parent.

It's true that adopted children's lives are somewhat complicated. However, most children who were adopted realize that they have two sets of parents. Their "real" parents are the ones who raised and cared for them. Their other, or biological parents, gave them birth.

As you travel your adoptive parenting journey, you will, like all parents, be confronted by uneducated, uncaring people who will challenge and confront your way of creating a family. You will also meet interested, knowledgeable, and loving people who will affirm your choice to become parent through adoption



## Foster Care by the Numbers

### *Statistics from Casey Family Programs*

National Foster Care Data	
Number of children in Foster care on Sept. 30, 2009	424,000
• Children in foster care on Sept. 30, 2008	460,000
• Children in foster care on Sept. 30, 2007	489,000
• Children in Foster Care on Sept. 30, 2006	505,000
• Children in Foster Care on Sept. 30, 2005	511,000
Total number of children in foster care during the 2009 federal fiscal year (Oct. 2008-Sept. 2009)	700,000
Children in foster care who are children of color	58 %
Children exiting foster care who had been in care for one year or more	53 %
Children exiting foster care who had been in care for three or more years	17 %
Average number of placement changes per stay	3.2
Number of youth who emancipated from foster care during the 2009 fiscal year	29,500
Results of Foster Care Studies	
Children in foster care who have chronic medical problems	50 %
Alumni (adults formerly in foster care) who experienced seven or more school changes (K-12)	65 %
Alumni who completed high school	74 %
Youth emancipating from foster care who plan to attend college	70 %
• Alumni who completed a bachelor's degree	3 % - 11 %
Alumni who were employed at age 21	52 %
Alumni who became homeless for one day or more after emancipating from foster care	22 %
Alumni of foster care who suffer from post-traumatic stress disorder	25 %

Compare to 44 % of U.S. child population

Compare to 84 % in the general population ages 25 to 34

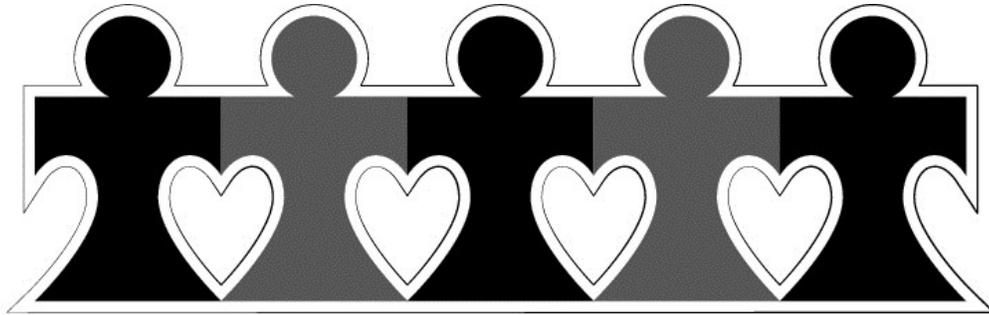
Compare to 28 % for 25 to 34-year olds in the general population?

Compare to 66.6 % employment rate for ages 20-24 in 2005

Compare to range of 2.6 % to 6.8 % for ages 18 to 24 who are homeless in U.S. in any given year

This lifetime prevalence rate is similar to that of many U.S. war veterans





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