

Opportunity to win a \$25 gift card for attendees of Redmond Reams' presentation at the 2017 Shoulder to Shoulder Conference

My goal is to have the best and largest data set on children transitioning into adoptive homes. If you fill out either the foster/adoptive parent questionnaire or the caseworker questionnaire and bring it to the workshop with you and hand it in, you will be entered into a drawing for a \$25 gift card at the beginning of the workshop. Unfortunately, once you have attended my workshop, you can't fill out the questionnaire because you will be biased by knowing what I have found to date. Thus do it before and bring it with you!!

You will be helping to guide policy and practice for foster and adoptive children.

Caseworker Survey on Transitions of Children from a Foster Home to an Adoptive Home

Any questions or concerns about this survey, please contact Redmond Reams at 503-299-4492 or redmondreamsphd@gmail.com.

You are asked to fill out this survey if you have had direct field experience as the caseworker for children transitioning into adoptive or foster/adoptive homes or as the caseworker for the adoptive families. If you have only worked in other areas of child welfare or social work, please do not complete the survey.

When the survey asks about a particular's child's transition, please answer about the most recent child for whom you were substantially involved in the transition. If the most recent move involved a sibling group, please answer about the youngest child in that sibling group. Transition is defined for this survey as the time between the first in-person contact between the child and future adoptive parent and when the child is living permanently with the future adoptive parent (the placement date).

Your gender: Female Male

Number of years as a child welfare worker: _____

Approximate number of adoptions that you have been professionally involved in:

Less than 5 5-10 10-20 More than 20

Child's gender: Female Male

Child's age at time of move: _____ months _____ years

How long did transition take: _____ days

How long ago did transition occur: _____ months _____ years

What was your role in the transition: child's caseworker adoptive family's worker
 foster family certifier supervisor other: _____

Were there siblings of the child transitioned at the same time? Yes No

Were there birth siblings of this child in the foster home not being transitioned into this adoptive home? Yes No

Approximately, how far apart were the foster home and the adoptive home in miles? _____

On average, how long did it take to travel one-way between the foster home and the adoptive home? _____ minutes _____ hours

How many other children, foster or otherwise, were there in the foster home at the time of the move? _____

How long had the foster parent been a foster parent at the time of the move? _____ years

How long had the child been in that foster home before the move? _____ months _____ years

How many other children were there in the adoptive home at the time of the move? _____

When this child was added to the adoptive home did they become the youngest child in that home? ___ Yes ___ No

Had the adoptive parents previously adopted any other children? ___ Yes ___ No

During transition, were (choose one):

___ All adoptive parents employed full-time outside the home

___ At least one adoptive parent employed only part-time outside the home

___ At least one adoptive parent not employed at all outside the home

During the transition process itself, did any adoptive parent take parental leave from work?

___ Yes ___ No

What was the child's age in months or years when they were removed from their birth family's home? _____ months _____ years

How many prior foster placements had this child been in before the transition? _____

Had this child been (please check all that apply): ___ physical abused, ___ sexually abused ___ neglected, ___ prenatally exposed to alcohol/drugs, ___ lived in a home with domestic violence, ___ lived with substance-abusing parents, ___ none of the above

Who was involved in designing the transition plan (please check all that apply):

___ child's caseworker, ___ adoptive caseworker, ___ foster parent, ___ adoptive parent,

___ child's psychotherapist, ___ child's lawyer, ___ child's CASA or Guardian ad Litem

Was the foster parent considered as an adoptive placement for this child? ___ Yes ___ No

Was there any contact between a birth parent and the child during the move? ___ Yes ___ No

What was the relationship between the child and adoptive parents before the transition?

___ Non-related strangers

___ Non-related but had had contact

___ Related as family but had not had contact

___ Related as family but had had minimal contact

___ Related as family with substantial contact

When the child transitioned, did a lifebook accompany the child? ___ Yes ___ No

At the time of the move, was the child receiving any of the following services (check all that apply): ___ early intervention/special education ___ mental health ___ medical monitoring

Did the foster and adoptive parents have any contact during the transition separate from visits between the child and the adoptive parents? ___ Yes ___ No

Were there in-person visits between the child and the future adoptive parents as part of the transition process? ___ Yes ___ No

How many in-person visits did the child have with the future adoptive parents during the transition and how long did they last in hours? _____ visits _____ hours

On which in-person visit did the child first go with the future adoptive parents outside the foster home without the foster parent along (e.g. 1st visit or 4th visit)? _____

On which visit did the child spend their first overnight with the adoptive parents? _____

After the transition, what kinds of contact were there between the child and the former foster parent, if any (check all that apply)?

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> No contact | <input type="checkbox"/> Texts |
| <input type="checkbox"/> In-person | <input type="checkbox"/> Letters |
| <input type="checkbox"/> Phone calls | <input type="checkbox"/> On social media |
| <input type="checkbox"/> Emails | <input type="checkbox"/> Other: _____ |

How soon in days after the transition was completed was the first contact? _____ days

How many contacts between the child and the former foster parents have occurred? _____

If there were in-person visits after transition, did the first visit occur at:

foster home adoptive home park/playground restaurant other: _____

After the transition, what kinds of contact were there between the adoptive parent and the former foster parent, if any (check all that apply)?

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> No contact | <input type="checkbox"/> Texts |
| <input type="checkbox"/> In-person | <input type="checkbox"/> Letters |
| <input type="checkbox"/> Phone calls | <input type="checkbox"/> On social media |
| <input type="checkbox"/> Emails | <input type="checkbox"/> Other: _____ |

Overall, how stressed was the child by the transition process?

not stressed a little stressed somewhat stressed very stressed

How would rate the quality of the transition process in terms of how well it helped the child create a new relationship with the adoptive parents?

very good good fair poor very poor

How would rate the quality of the transition process in terms of how well it helped the child deal with the change in the relationship with the foster parents and the loss of the foster home? very good good fair poor very poor

Would you say the length of the transition was:

too long just right too short

Could this specific transition process have been improved for the child's sake or for either the foster or adoptive parent's sake? Yes No

If yes, how: _____

If you were going to make one change to the general protocol for transitioning children into adoptive or foster/adoptive homes, what would that change be: _____

Survey continues on other side

Please rate the following factors based on how often they introduce difficulties into the transition process generally in your experience (not about the specific child anymore)?

	Rarely or Never	Seldom	Sometimes	Often	Very Often
Child's Behavior					
Distance between foster and adoptive homes					
Caseworker's workload					
Foster parent's time and availability					
Adoptive parent's time and availability					
Emotional issues of foster parent(s)					
Emotional issues of adoptive parent(s)					
Birth parent issues					
Child Welfare System issues					
Other: _____ _____					

Survey on Transitions of Children from a Foster Home to an Adoptive Home

Any questions or concerns about this survey, please contact Redmond Reams at 503-299-4492 or redmondreamsphd@gmail.com.

You are asked to fill out this survey if you have been either:

1. An adoptive parent who adopted from the child welfare system and when that child came into your home you were already identified as an adoptive resource, or
2. A foster parent who has had at least one child leave your home and move to a home identified as an eventual adoptive placement.

If both of these criteria apply to you, please answer as a foster parent.

If you have adopted multiple children or had multiple foster children leave your home for adoptive families, please select the most recent child or sibling group to answer about. If the most recent move involved a sibling group, please answer about the youngest child in that sibling group. Thanks.

Transition is defined for this survey as the time between the first in-person contact between the child and future adoptive parent and when the child is living permanently with the future adoptive parent (the placement date).

Child's gender: Female Male

Your gender: Female Male

Your age at time of child's move: _____ years

Child's age at time of move: _____ months _____ years

How long did transition take: _____ days

How long ago did transition occur: _____ months _____ years

Were there siblings of the child transitioned at the same time? Yes No

Were there birth siblings of this child in the foster home not being transitioned into this adoptive home? Yes No

Approximately, how far apart were the foster home and the adoptive home in miles? _____

On average, how long did it take to travel one-way between the foster home and the adoptive home? _____ minutes _____ hours

How many other children, foster or otherwise, were there in the foster home at the time of the move? _____

How long had the foster parent been a foster parent at the time of the move? _____ years

How long had the child been in that foster home before the move? _____ months _____ years

How many other children were there in the adoptive home at the time of the move? _____

When this child was added to the adoptive home did they become the youngest child in that home? Yes No

Had the adoptive parents previously adopted any other children? Yes No

During transition, were (choose one):

All adoptive parents employed full-time outside the home

At least one adoptive parent employed only part-time outside the home

At least one adoptive parent not employed at all outside the home

During the transition process itself, did any adoptive parent take parental leave from work?

Yes No

What was the child's age in months or years when they were removed from their birth family's home? _____ months _____ years

How many prior foster placements had this child been in before the transition? _____

Had this child been (please check all that apply): physical abused, sexually abused
 neglected, prenatally exposed to alcohol/drugs, lived in a home with domestic violence, lived with substance-abusing parents, none of the above

Who was involved in designing the transition plan (please check all that apply):

child's caseworker, adoptive caseworker, foster parent, adoptive parent,

child's psychotherapist, child's lawyer, child's CASA or Guardian ad Litem

Was the foster parent considered as an adoptive placement for this child? Yes No

Was there any contact between a birth parent and the child during the move? Yes No

What was the relationship between the child and adoptive parents before the transition?

Non-related strangers

Non-related but had had contact

Related as family but had not had contact

Related as family but had had minimal contact

Related as family with substantial contact

When the child transitioned, did a lifebook accompany the child? Yes No

At the time of the move, was the child receiving any of the following services (check all that apply): early intervention/special education mental health medical monitoring

If you were a foster parent, did you have any contact with a future adoptive parent or conversely, if you were the foster adoptive parent did you have any contact with a foster parent as part of the transition? Yes No

How many of each kind of contact were there between the foster and adoptive parents as part of the transition? in-person phone calls e-mails

Was there written information about the child given from the foster parent to the adoptive parent? Yes No

In all the information provided from the foster parent to the future adoptive parent, what categories of information were communicated (please check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Daily routine | <input type="checkbox"/> Child's personality/temperament |
| <input type="checkbox"/> Child's likes/dislikes | <input type="checkbox"/> History of the child |
| <input type="checkbox"/> Parenting strategies that have worked or not worked | <input type="checkbox"/> Child's behavior |
| | <input type="checkbox"/> Birth family information |

In these contacts between foster parents and future adoptive parents, how much emotional sharing and support about how the process was for each parent was exchanged?

less than 10 mins 10-30 mins 30-60 mins 60-120 mins more than 120 mins

Were there in-person visits between the child and the future adoptive parents as part of the transition process? Yes No

How many in-person visits did the child have with the future adoptive parents during the transition and how long did they last in hours? visits hours

On which in-person visit did the child first go with the future adoptive parents outside the foster home without the foster parent along (e.g. 1st visit or 4th visit)?

On which visit did the child spend their first overnight with the adoptive parents?

After the transition, what kinds of contact were there between the child and the former foster parent, if any (check all that apply)?

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> No contact | <input type="checkbox"/> Texts |
| <input type="checkbox"/> In-person | <input type="checkbox"/> Letters |
| <input type="checkbox"/> Phone calls | <input type="checkbox"/> On social media |
| <input type="checkbox"/> Emails | <input type="checkbox"/> Other: <input type="text"/> |

How soon in days after the transition was completed was the first contact? days

How many contacts between the child and the former foster parents have occurred?

If there were in-person visits after transition, did the first visit occur at:

foster home adoptive home park/playground restaurant other:

After the transition, what kinds of contact were there between the adoptive parent and the former foster parent, if any (check all that apply)?

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> No contact | <input type="checkbox"/> Texts |
| <input type="checkbox"/> In-person | <input type="checkbox"/> Letters |
| <input type="checkbox"/> Phone calls | <input type="checkbox"/> On social media |
| <input type="checkbox"/> Emails | <input type="checkbox"/> Other: <input type="text"/> |

Overall, how stressed was the child by the transition process?

not stressed a little stressed somewhat stressed very stressed

How would rate the quality of the transition process in terms of how well it helped the child create a new relationship with the adoptive parents?

very good good fair poor very poor

How would rate the quality of the transition process in terms of how well it helped the child deal with the change in the relationship with the foster parents and the loss of the foster home? ___very good ___good ___fair ___poor ___very poor

How stressed were you by the transition?

___not stressed ___a little stressed ___somewhat stressed ___very stressed

Would you say the length of the transition was:

___too long ___just right ___too short

Could this specific transition process have been improved for your child's sake or your sake?

___Yes ___No

Were you the child's : ___foster parent ___adoptive parent

What behavioral difficulties did you notice of the child during visits? ___none ___clinging
___aggression ___hyperactivity ___overly friendly ___anxious ___spacey

Were there ways in words or behavior during the transition that child communicated feelings of loss regarding the foster parents/home? ___Yes ___No

+++++

THE REST OF THE QUESTIONS ARE FOR ADOPTIVE PARENTS ONLY

What behavioral difficulties have you noticed since placement? ___none ___clinging
___aggression ___hyperactivity ___overly friendly ___anxious ___spacey

Since placement, how do you feel the child's attachment process with you has gone?

___very good ___good ___fair ___poor ___very poor

Since placement, what services has the child received (check all that apply)?

___early intervention/special education ___mental health ___medical monitoring

Thank you very much for your cooperation.

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