

**November 1999****FOSTER CARE****HHS Could Better  
Facilitate the  
Interjurisdictional  
Adoption Process**

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**Health, Education, and  
Human Services Division**

B-281621

November 19, 1999

The Honorable William V. Roth, Jr.  
Chairman  
The Honorable Daniel Patrick Moynihan  
Ranking Minority Member  
Committee on Finance  
United States Senate

The Honorable Bill Archer  
Chairman  
The Honorable Charles B. Rangel  
Ranking Minority Member  
Committee on Ways and Means  
House of Representatives

The Adoption and Safe Families Act of 1997 (ASFA) is the most recent federal legislation to emphasize the importance of permanence in the lives of the 520,000 children in foster care and, in particular, the importance of adoption when foster children cannot safely and quickly return to the care of their birth parents. This act includes a provision prohibiting states from delaying or denying the adoption of a foster child when an approved family is available in a jurisdiction different from the one in which the child resides. The Department of Health and Human Services (HHS) is responsible for monitoring states' adherence to this prohibition and to other provisions in ASFA. The act also requires us to study and consider how to improve procedures and policies to facilitate the timely and permanent adoptions of children across state and county jurisdictions—referred to as interjurisdictional adoptions.

As agreed with committee staff, in response to the requirement in ASFA that we report to the Congress on interjurisdictional adoption issues, we are providing information on (1) the number of foster children who are available and waiting for an adoptive home to be identified, (2) the actions taken by state and county child welfare agencies<sup>1</sup> and nonprofit organizations to improve the adoption process when prospective adoptive families and foster children live in different jurisdictions, and (3) the actions taken by the federal government to improve the adoption process when prospective adoptive families and foster children live in different jurisdictions. In particular, in ASFA the Congress identified four steps

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<sup>1</sup>In this report, we use the phrase "public child welfare agencies" to refer to both state and county child welfare agencies.

related to timely and permanent interjurisdictional adoptions that our study should address. First, states and counties may need to improve procedures to recruit prospective adoptive parents from states or counties different from the one in which adoptable children reside. Second, states and counties may need to improve procedures for the acceptance of homestudies when the studies are done in a different state or county.<sup>2</sup> Third, states may need to assure their acceptance of termination of parental rights orders and adoption decrees issued by a court in a different state.<sup>3</sup> Fourth, states may need to improve procedures for administering and implementing the Interstate Compact on the Placement of Children (ICPC).<sup>4</sup> To develop this information, we contacted federal, state, and county child welfare officials and experts affiliated with nonprofit organizations interested in interjurisdictional adoption issues. We also conducted case studies in three states—California, Florida, and Missouri. Appendix I describes our scope and methodology. We conducted our review from November 1998 to August 1999 in accordance with generally accepted government auditing standards.

## Results in Brief

At any given time, about 1.5 percent of foster children—about 8,000—are legally available for adoption and waiting for an adoptive home but have no current prospects for adoption. This number is small because, of those foster children who are adopted, about 78 percent are adopted by their foster parents or relatives. Virtually all of the remaining foster children who are waiting for adoptive homes are among the most difficult to place due to their older age, their need to be placed with siblings, or other special considerations. Because these children are hard to place, they are likely to be candidates for adoptive placement across jurisdictions.

Public child welfare agencies have directed their efforts toward the initial step in the interjurisdictional adoption process—recruitment of prospective adoptive families—and have done less to improve the other steps in the adoption process because they are largely beyond their legal authority to change. For example, these agencies are using traditional recruiting methods in new ways, as was the case in two of the three states we visited. These states enter into contracts with other states to conduct

<sup>2</sup>A homestudy is a written report used to approve individuals as adoptive parents. See the Background section of this report for a further description of homestudies and their use in the adoption process.

<sup>3</sup>A court order to terminate parental rights severs the legal relationship between parent and child, thus making the child eligible for adoption. An adoption decree finalizes the adoption process and provides full parental rights to the adopting parent.

<sup>4</sup>The ICPC is a uniformly enacted statute that provides the legal framework for placing children in adoptive homes across state lines. The Background section of this report further describes this compact and its process.

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recruitment activities in geographic areas outside the public child welfare agency's jurisdiction. The agencies also use Internet web sites, which can be accessed from anywhere in the nation, to reach beyond their borders to recruit prospective adoptive families and publicize waiting children. Nonprofit organizations that are working to improve interjurisdictional adoption processes have targeted their efforts at those steps in the adoption process that correspond to their professional interests. Such interests include nationwide recruitment of adoptive homes for hard-to-place waiting foster children as well as issues related to improvements in the use of homestudies and the ICPC process.

HHS leadership could facilitate improvements in the interjurisdictional adoption process, much of which is outside the legal authority of individual public child welfare agencies. HHS has developed plans to address problems in the interjurisdictional adoption process and implemented some actions. For example, as part of its technical assistance efforts, HHS provided guidelines for state legislation on termination of parental rights and assistance to states on ICPC issues. However, because the plans were made in response to two presidential directives regarding adoption, HHS Office of Inspector General recommendations, and the passage of ASFA, they were implemented independently rather than as part of an organized strategy. We are recommending that HHS better coordinate its efforts to facilitate improvements to the interjurisdictional adoption process.

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## Background

ASFA established as a federal priority the safe and timely placement of foster children in permanent homes, even if those homes are located in a jurisdiction different from that of the waiting children. Among the many provisions in ASFA, three are specific to interjurisdictional adoption issues. First, the act requires state plans<sup>5</sup> to specify that a state will not deny or delay the placement of a child for adoption when an approved family<sup>6</sup> is available outside of the jurisdiction with responsibility for handling the case of the child. Second, state plans<sup>7</sup> must contain assurances that the state will develop plans for the effective use of cross-jurisdictional

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<sup>5</sup>State plans are required under title IV-E of the Social Security Act in order for states to receive federal foster care funds for maintenance of foster children, specific administration costs associated with foster care programs, and adoption assistance.

<sup>6</sup>"Approved family" generally refers to an individual with an approved homestudy. However, HHS has not issued regulations to define this term as used in ASFA.

<sup>7</sup>Other state plans are required under title IV-B of the Social Security Act in order for states to receive federal funds for child welfare services.

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resources to facilitate timely adoptive or permanent placements for waiting children. Third, the act established a penalty against federal foster care funds for states that are found to deny or delay the placement of a child for adoption when an approved family is available outside of the jurisdiction, or that fail to promptly grant a fair hearing to an individual who alleges such a violation. HHS has a limited role in determining the policies and procedures used by child welfare programs, including foster care programs. HHS is responsible for issuing federal foster care regulations containing minimal procedural requirements, monitoring states' compliance with them, and administering federal foster care funding.

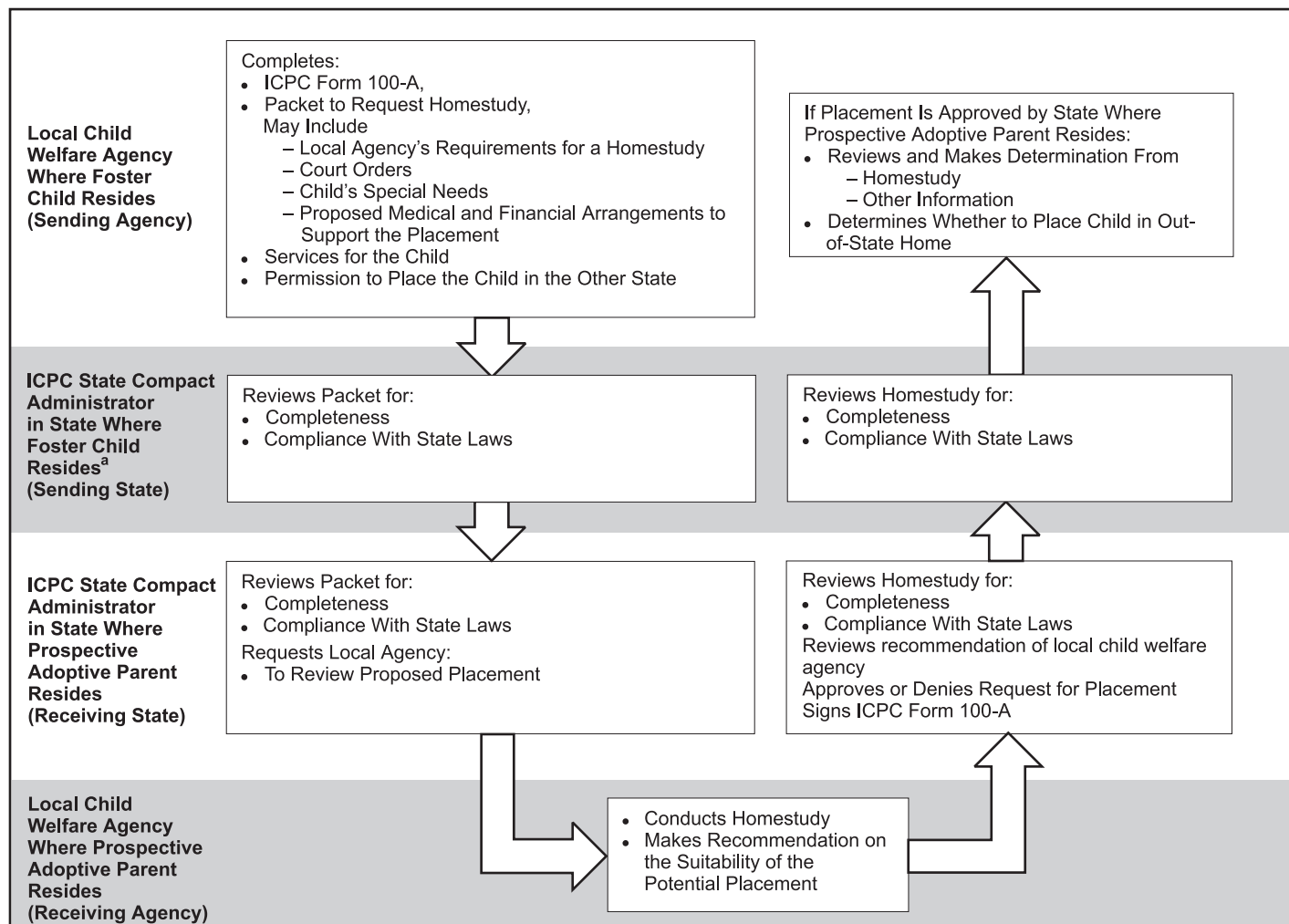
The public child welfare system, which oversees the adoption of foster children, is composed mainly of state and local child welfare agencies and state juvenile dependency courts. State laws provide more detail and specificity regarding the circumstances in which adoptions may occur than do federal laws and set the parameters, consistent with federal constitutional and statutory requirements, under which child welfare systems operate. For example, state laws specify the legal grounds for terminating parental rights to free a child to be adopted. The child welfare agencies promulgate the regulations, policies, and procedures for foster care programs and administer those programs. Thus, state child welfare agencies have a central role in regulating the activities of foster care programs, including the adoption of foster children. In 12 states, that responsibility is delegated to local child welfare agencies. State courts are responsible for reviewing child welfare agency actions for individual foster children and their families and taking legal actions as necessary to protect children. Such actions include ordering the placement of foster children in temporary homes, presiding over periodic hearings to plan for a child's permanent placement, terminating the parental rights of birth parents when their children cannot be safely returned to their care, and granting adoption decrees to adoptive parents.

The ICPC provides the legal framework for the placement of children across state lines by public and private agencies, courts, and—in some cases—private individuals. It is a statute enacted uniformly by all 50 states, the District of Columbia, and the U.S. Virgin Islands. A nonprofit organization, the Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC), provides guidance to states in interpreting and revising ICPC. Use of ICPC ensures that appropriate state laws are followed before a placement is made and that children placed out-of-state receive the protections and services that would be provided if

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they remained in their home states. States provide these services on a reciprocal basis. Of the adoptive placements made under ICPC, few are placements of foster children; almost all interstate adoptive placements involve adoptions either between individuals or through private adoption agencies. However, all foster care placements across state lines must be processed through the compact. HHS has no direct role in ICPC administration. Figure 1 shows the ICPC process for obtaining approval for an out-of-state placement for a foster child. Figure 2 shows the ICPC process once the decision has been made to place a child out-of-state.

Figure 1: ICPC Process to Request Homestudy and Placement of Foster Child Out-of-State

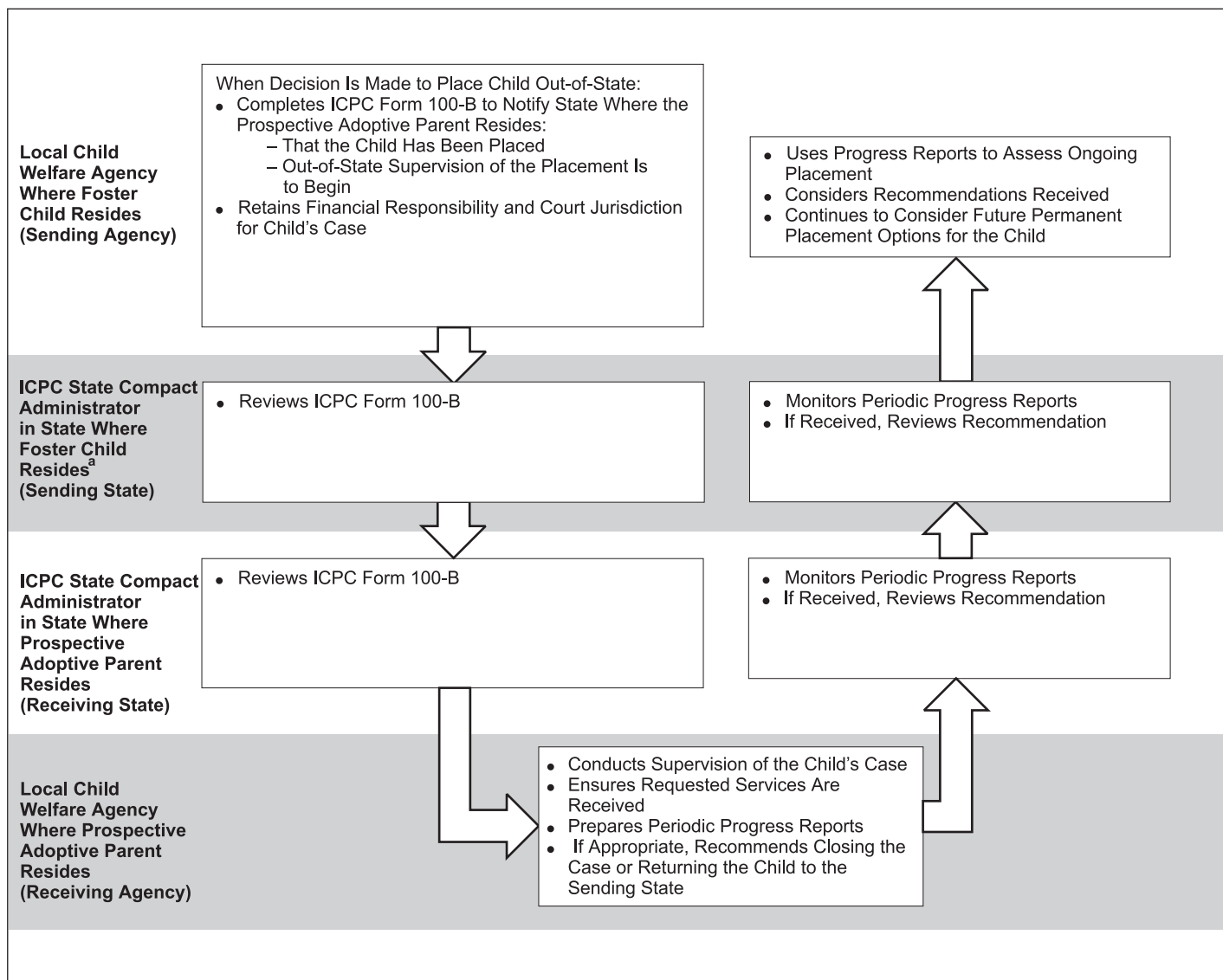


<sup>a</sup>In a few states, responsibility for contacting the state where the prospective adoptive parent resides has been delegated to the local child welfare agency. In those locations, the ICPC state compact administrator receives copies of the paperwork but may not be responsible for forwarding it.

Source: GAO analysis.



Figure 2: ICPC Process After Homestudy Is Obtained and Placement of Foster Child Is Approved



<sup>a</sup>In a few states, responsibility for contacting the state where the prospective adoptive parent resides has been delegated to the local child welfare agency. In those locations, the ICPC state compact administrator receives copies of the paperwork but may not be responsible for forwarding it.

Source: GAO analysis.

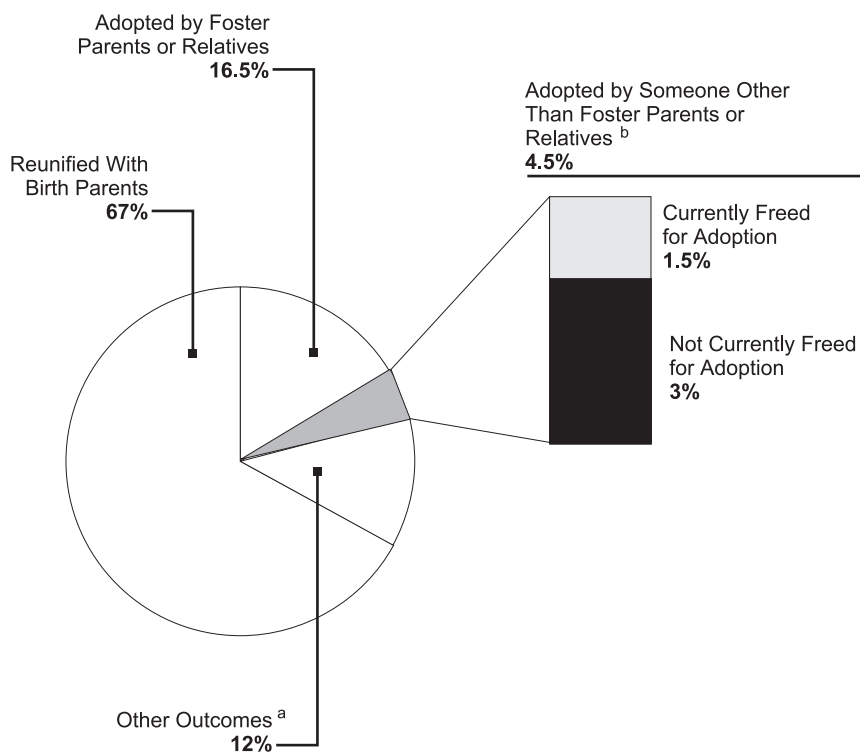
Prospective adoptive parents come into the foster child's life in a variety of ways and through a long, complex process, particularly when a hard-to-place child is involved. Public child welfare agencies engage in outreach and other recruitment efforts to attract individuals to be foster and adoptive parents and undertake a variety of concurrent activities so that a waiting foster child can be placed with an appropriate prospective adoptive parent. Most adoptive parents begin their relationship with the child as the child's foster parents. Others are relatives of the foster child. A small percentage of adoptive parents come into the foster child's life after the child's foster parents and relatives have declined to adopt the child and another home must be sought for the child. Regardless of the way in which a prospective adoptive parent enters the process, it can take a prospective adoptive parent 1 to 3 years from the initial contact with a child welfare agency to finalization of an adoption. Appendix II shows how prospective adoptive parents enter the child welfare system, general activities child welfare agencies undertake to make an appropriate adoptive placement, and—when an interjurisdictional placement is involved—when the ICPC is invoked.

The homestudy is a key component in the process of becoming a foster or adoptive parent. Homestudies are written reports that are generally prepared by a child welfare caseworker. The studies assess the financial situation, current and previous relationships, life experiences, and parenting abilities of a person wishing to become an adoptive parent. The process also usually includes checks for criminal activity by the prospective adoptive parent. The homestudy process is generally combined with mandatory training for prospective foster or adoptive parents, a combination that typically takes 3 months to complete. An applicant is approved as a foster or adoptive parent only after the homestudy process is completed, a written report of its findings is approved by a child welfare agency, and the home is found to meet safety standards. Agencies may then consider whether a prospective adoptive parent would be an appropriate caregiver for a particular foster child. Homestudies must be updated, in some locations as frequently as annually, in order for a prospective adoptive parent to retain approved status. In addition, homestudies may need to be updated at the time a prospective adoptive parent is considered as a placement for a specific foster child in order to determine if the person can meet that child's special needs. Although no standardized national homestudy format exists, appendix III contains an example of one state's recommended homestudy format—an example that reflects the scope and detail typically found in homestudies.

## Few Foster Children Are Available and Waiting for Adoptive Homes but Most Who Wait Are Difficult to Place

At any given time, an estimated 1.5 percent of foster children—about 8,000—are available for adoption and, as yet, no adoptive family has been identified for them. About one-third of foster children will never return to their birth parents, leaving those children in need of permanent homes. Yet few of the children in need of new permanent homes are, at any given time, legally freed from their birth parents and thus available for adoption. Furthermore, HHS estimates that of the foster children who are adopted, 78 percent will be adopted by their foster parents or relatives. Figure 3 shows the likely permanency outcomes for foster children in care at any given time.

**Figure 3: Anticipated Outcomes for Foster Children**



<sup>a</sup>Other outcomes includes aging out of the foster care system at age 18 and, in some circumstances, legal guardianship. While in foster care, children who have other outcomes live in a variety of arrangements including the homes of relatives, foster homes, group homes, and residential care facilities.

<sup>b</sup>For this grouping in the figure, we expanded the information to indicate the likely legal status of children in that grouping, at any given time, prior to attaining the anticipated outcome.

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Source: GAO analysis of HHS data.

While estimates of the number of adoptions across state lines vary, the number of interjurisdictional adoptions is likely small. HHS administrative data place the number of finalized adoptions of foster children across state lines at less than 250 in 1998. Furthermore, the Office of Inspector General noted that one-half of states' ICPC offices do not know how many children they place through ICPC due to poor quality data and ineffective tracking techniques.

The foster children who are not adopted by their foster parents or relatives are among the most difficult to place. Almost all of them have special needs. Typically, they are school age, have physical or mental impairments, have siblings who should be placed with them, and are children of color. HHS reported that of the children freed for adoption, more than 35 percent are teenagers and an additional 17 percent are between the ages of 9 and 12 years. In general, within the foster care population, only these hard-to-place and legally freed children are likely to be candidates for adoptive placements across jurisdictions.

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## **Public Child Welfare Agencies Focus on Recruitment While Nonprofit Organizations Address a Range of Issues**

Public child welfare agencies have directed their efforts toward the initial step in the interjurisdictional adoption process—recruitment of prospective adoptive families—and have done less to improve the other steps in the adoption process because changing those steps is largely beyond their legal authority. Nonprofit organizations working to improve interjurisdictional adoption processes have targeted their efforts at those steps in the adoption process that correspond to the organizations' areas of interest. Such interests include nationwide recruitment of adoptive homes for hard-to-place waiting foster children as well as issues related to improvements in the use of homestudies and the ICPC process.

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## **Public Child Welfare Agencies Focus on Improving the Use of Traditional and Internet Recruitment Methods**

In the initial step of the interjurisdictional adoption process—recruitment of prospective adoptive families—public child welfare agencies are attempting to reach beyond their borders by using traditional recruitment methods. In addition to using TV spots, newspaper stories, and billboards, two of the three states we visited also contract with other organizations for recruitment services; the contracts include provisions for recruitment across jurisdictional lines. For example, Missouri contracts with other organizations to recruit prospective foster and adoptive families from several bordering states as well as from within the state. In Florida,

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Broward County contracts with other organizations for recruitment within its borders and in adjoining counties. Public child welfare agencies also participate in voluntary networks—referred to as adoption exchanges—to identify adoptive families for hard-to-place foster children. These voluntary networks provide child welfare agencies with the opportunity to share information about children who need adoptive homes and approved families who want to adopt a foster child.

Public child welfare agencies are also using the Internet to expand their ability to recruit prospective adoptive families. Almost all state child welfare agencies have set up their own public Internet web sites, which can be accessed from anywhere in the nation, to promote adoption of foster children; 30 states include photolistings of freed and waiting children.<sup>8</sup> Appendix IV lists public Internet web sites set up by state child welfare agencies and a listing of the types of information that the public can access. States have taken a variety of approaches in determining which children to publicize on their child welfare web sites. Some state web sites have photolistings that picture and describe all foster children in a state who have been freed and are waiting for an adoptive home; other states show only the hardest-to-place children; still others show a representative sample of their available foster children.

In general, states have not evaluated the effectiveness of their sites as a means of recruiting potential adoptive families nationwide. While many state web sites welcome inquiries from all prospective adoptive families nationwide, three state web sites specify that the state will consider only applicants from within the state. Finally, public child welfare agencies also use the Internet to participate in privately operated adoption exchanges on password-protected sites that can be accessed only by caseworkers.

Public child welfare agencies do not have authority to specify the contents of a homestudy prepared in another jurisdiction, but the three states we visited have taken limited actions to increase the acceptability of the ones they receive from other states. For example, if the public child welfare agency requests a homestudy on a prospective adoptive parent in another jurisdiction, the requesting agency notifies the agency preparing the homestudy of its specific requirements so that they can be included in the study. If the public child welfare agency receives an approved homestudy from outside the agency's jurisdiction, it contacts the agency that prepared

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<sup>8</sup>Public child welfare agency's public Internet sites protect the privacy of foster children listed on them. In general, sites limit information about the children to first name and age of a child and a brief description of a child's special needs. As an added safeguard, courts must grant permission for public distribution of information about the foster children under their jurisdiction.

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and approved the homestudy for additional information that will allow the homestudy to meet local requirements and allow the agency to assess the appropriateness of prospective adoptive parents. Additionally, in two of the states we visited that contract with other agencies to conduct recruitment activities, the contracts specify the content of the homestudies done by the contractors. Thus, homestudies done by the contractor will meet the criteria set for local homestudies.

As is the case with homestudies, public child welfare agencies also have only limited authority to improve the acceptance of court orders across jurisdictions. The Constitution sets the framework for states to accept the court orders of other states but neither the Congress nor case law has specifically addressed acceptance of termination of parental rights orders or adoption decrees.<sup>9</sup> In addition, the Supreme Court has ruled that states are not obligated to honor judicial actions of other states in situations where minimum standards of due process have not been provided to those affected. HHS officials and experts told us that there is little to suggest that interjurisdictional adoptions of foster children were delayed or denied because termination of parental rights orders or adoption decrees were not accepted across jurisdictions. One of the states we visited (Florida) specifies in its adoption statutes that the state will accept such orders from any other state.

Although public child welfare agencies can control only the steps in the ICPC process that occur within their own state, two of the states we visited, Florida and Missouri, have taken actions to avoid delays within their ICPC offices.<sup>10</sup> Officials in the three states we visited told us that they process ICPC requests promptly and Florida has implemented performance goals to further improve the timeliness of its processes. In Florida, the ICPC office specified that ICPC requests related to adoption are to be processed through its office within 3 days. Missouri has also instituted agreements with two of its neighboring states with the goal of alleviating delays in beginning homestudies requested through the ICPC office. However, the

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<sup>9</sup>The acceptance of court orders of other states—otherwise called the granting of full faith and credit—is governed by Article IV, Section 1 of the U.S. Constitution. It states, “Full faith and credit shall be given in each State to the public acts, records, and judicial proceedings of every other State. And the Congress may by general laws prescribe the manner in which such acts, records and proceedings shall be proved, and the effect thereof.” In at least five instances since 1948, the Congress passed laws to clarify the application of this clause. Clarifying legislation usually specifies the instances in which full faith and credit is to be granted, such as is the case with child support orders. In one instance, the Defense of Marriage Act, the legislation specifies that full faith and credit need not be extended to marriages between certain parties.

<sup>10</sup>For placement of children in out-of-state foster or adoptive homes, California delegates responsibility for the in-state ICPC process to its counties. Only children whose out-of-state placements are in group homes are handled by the state ICPC office.

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agreements—referred to as border agreements—have been used infrequently, even though one of the agreements has been in place for more than a year. State officials were surprised that the 1-year-old agreement was used infrequently. Officials from the two states involved have decided to review the agreement with their respective staff to emphasize the agreement's value in speeding the start of the homestudy process.

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### **Nonprofit Organizations Also Address Issues in Interjurisdictional Adoption Process**

Nonprofit organizations have initiated national efforts that cover many of the steps in the interjurisdictional adoption process. The National Adoption Center, the American Public Human Services Association (APHSA), and its affiliate, AAICPC, are among the nonprofit organizations leading such efforts. The National Adoption Center operates two recruitment-related Internet sites. APHSA initiated efforts to address issues related to homestudies, and its affiliate provides recommendations to member states to improve the ICPC process.

The National Adoption Center established and maintains<sup>11</sup> two recruitment-related Internet sites—a public national photolisting service to publicize foster children who are currently available and waiting for adoption, and a secure web site with additional resources for use by child welfare agencies.<sup>12</sup> The public Internet web site, called FACES OF ADOPTION: America's Waiting Children,<sup>13</sup> listed about 1,800 waiting children from about 38 states as of August 1999. The center anticipates that additional states will soon become members, resulting in some increase in the number of children listed on its site in the coming months. Prospective adoptive parents can request information about a specific child from the center. The center's private Internet web site, called NAE-Online, contains additional information about the children and also contains information about families with approved homestudies. The site is accessible only to child welfare agencies that pay a membership fee to the center. The center estimated that during a 2-month period in summer 1999, about 30 foster children were placed for adoption as a result of their listings being seen on FACES OF ADOPTION.

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<sup>11</sup>The Children Awaiting Parents, Inc., cosponsors the public web site.

<sup>12</sup>Similar to web sites set up by state child welfare agencies, the center's web site protects the privacy of foster children in the photolisting service by providing only general descriptive information about the children listed.

<sup>13</sup>The site can be found on the Internet at <http://www.adopt.org>.

In February 1999, APHSA convened a task force called the Geographic Barriers Task Force of APHSA to Identify Barriers to Placements across State Lines to explore issues related to the use of homestudies across jurisdictions. The membership of the task force is still evolving, although it is expected to include representatives of state child welfare agencies, child welfare advocacy organizations, the AAICPC, and the Association of Administrators of the Interstate Compact on Adoption and Medical Assistance.<sup>14</sup> As of August 1999, the task force had not set a time frame for completion of its work or identified the scope of the work.

AAICPC provides guidance to states in interpreting ICPC and recommendations on procedures. This group consists of representatives of ICPC administrators from each state. AAICPC members implement procedures that they believe will increase the timeliness of the ICPC process. For example, ICPC Regulation 7 allows agencies to request an expedited homestudy when a child is likely to be placed with a relative residing in another state.

## HHS Has Identified Problems That Affect Interjurisdictional Adoptions but Lacks an Organized Strategy

In response to presidential, legislative, and departmental actions, HHS identified problems that ranged across the interjurisdictional adoption process, but its plans were not part of an organized strategy. HHS identified problems ranging from a shortage of adoptive families for special needs foster children to placements by the courts that violate ICPC. HHS' action plans did not address all identified problems and other actions are behind schedule. As the federal government's primary agency for foster care and adoption issues, HHS has a key role in providing leadership to assist states in resolving interjurisdictional issues.

Since 1996, the following presidential, legislative, and departmental actions have directed HHS' attention to issues related to interjurisdictional adoption:

- On December 14, 1996, the President issued a Presidential Executive Memorandum directing HHS to increase by 100 percent the number of foster children adopted within 5 years.
- On November 19, 1997, ASFA was enacted, giving HHS responsibility for issuing regulations and enforcing penalties for, among other provisions,

<sup>14</sup>The Interstate Compact on Adoption and Medical Assistance provides the legal framework to ensure that foster children who are eligible for federal adoption assistance continue to receive medical and other services after adoption. The compact is a statute uniformly enacted by 30 states. The Association of Administrators of the Interstate Compact on Adoption and Medical Assistance administers this compact under a cooperative agreement with HHS.



delaying or denying adoptive placements across jurisdictions when an approved family is available.

- On November 24, 1998, the President issued a Presidential Executive Memorandum directing HHS to establish a national registry for freed foster children who need adoptive homes.
- In November 1998, the HHS Office of Inspector General issued a report, "The Interstate Compact on the Placement of Children: State Structure and Process," describing states' implementation of ICPC and the number of children affected by ICPC.
- In March 1999, the Office of Inspector General issued a companion report, "Interstate Compact on the Placement of Children: Implementation," describing how well states have implemented ICPC and recommending HHS actions for improvement.

HHS characterized its role in foster care adoptions in its response to the President's memorandum on increasing adoptions: "The federal role in this initiative [Adoption 2002] is largely one of supporting states and communities by providing financial incentives, technical assistance, policy and programmatic leadership, and recognition of successful efforts."<sup>15</sup> For interjurisdictional adoption issues, HHS' efforts to identify problems and develop action plans largely reflect these areas.

For recruitment, HHS determined that the pool of prospective adoptive families who can care for children with special needs remained insufficient.<sup>16</sup> To improve recruitment, and in response to the presidential directive to establish a national registry, HHS developed a plan to implement an Internet site publicizing freed and waiting foster children.<sup>17</sup> HHS estimated the first-year cost of the site at \$1.5 million with annual operating costs of \$1.25 million. The service is slated to begin operation on September 1, 2001. Although preliminary implementation actions were to be completed by August 1999, HHS had not completed any of the steps outlined in its plan by that date. For example, it has not conducted focus groups to identify concerns or established a standing work group to recommend photolisting service policy. However, HHS acknowledges that this effort appears to duplicate much of the existing national photolisting service maintained by the National Adoption Center and now plans to reassess its approach to this effort.

<sup>15</sup>Adoption 2002: A Response to the Presidential Executive Memorandum on Adoption, U.S. Department of Health and Human Services (Washington, D.C.: Dec. 14, 1996), p. 9.

<sup>16</sup>Adoption 2002, p. 6.

<sup>17</sup>Plan to Implement a National Internet Adoption Photolisting Service, U.S. Department of Health and Human Services (Washington, D.C.: n.d.), [www.acf.dhhs.gov/programs/cb/special/photolsts/toc.htm](http://www.acf.dhhs.gov/programs/cb/special/photolsts/toc.htm).

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For homestudies, HHS found that differing state laws and requirements for the content of homestudies hamper acceptance of homestudies across jurisdictions.<sup>18</sup> HHS has not published plans to address this issue. However, officials told us that they are supportive of APHSA's efforts to provide leadership on interjurisdictional homestudy issues.

Although HHS did not identify a specific need to improve the acceptance of termination of parental rights orders and adoption decrees, it planned, as part of its technical assistance efforts to states, to develop and disseminate guidelines for state legislation relating to terminating parental rights.<sup>19</sup> While not prepared in response to a concern about parental rights orders, HHS' recently released guidelines help states review their laws and develop statutes and policies that reflect the best practices in child welfare, including guidance on the termination of parental rights.<sup>20</sup>

For ICPC, HHS identified several problems. According to HHS, some child welfare agency staff as well as judges and attorneys do not understand ICPC and lack training on its purpose and function.<sup>21</sup> Delays may occur in the placement process, including adoptive placements, thus lengthening the multistep process, when key people do not comply with ICPC.<sup>22</sup> Furthermore, when placements in violation of ICPC<sup>23</sup> occur, states are sometimes unaware that children are placed in their jurisdiction.<sup>24</sup> For example, judges sometimes disregard the ICPC process and order out-of-state placements without ICPC. To improve the administration of ICPC, HHS planned to work with its National Resource Centers<sup>25</sup> to determine how to promote awareness of ICPC, provide training to state

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<sup>18</sup>Plan to Implement a National Internet Photolisting Service, p. 8.

<sup>19</sup>Adoption 2002, p. 11.

<sup>20</sup>Adoption 2002: The President's Initiative on Adoption and Foster Care, Guidelines for Public Policy and State Legislation Governing Permanence for Children, U.S. Department of Health and Human Services (Washington, D.C.: June 1999).

<sup>21</sup>Photolisting Service, p. 9; and Interstate Compact on the Placement of Children: Implementation, U.S. Department of Health and Human Services Office of Inspector General, OEI-02-95-00044 (Washington, D.C.: Mar. 1999), p. 7.

<sup>22</sup>Interstate Compact Implementation, pp. 2 and 8.

<sup>23</sup>Interstate Compact Implementation, p. 8.

<sup>24</sup>The Interstate Compact on the Placement of Children: State Structure and Process, U.S. Department of Health and Human Services Office of Inspector General, OEI-02-95-00041 (Washington, D.C.: Nov. 1998), p. 9.

<sup>25</sup>National Resource Centers are operated by contractors who are responsible for providing technical assistance on child welfare issues to states.

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agency staff who operate ICPC, and support development of model procedures to help ICPC operate more effectively.<sup>26</sup> To promote awareness of ICPC and provide training, HHS invited other organizations, such as AAICPC, to make presentations about ICPC at HHS-sponsored workshops and meetings. To support development of model procedures, HHS included improvement of ICPC as an example of an interjurisdictional adoption issue that could receive funding under the Adoption Opportunities grant program.<sup>27</sup> Although HHS received proposals for fiscal year 1998, HHS determined that none of the proposals had sufficient merit to be recommended for funding. HHS revised its request for proposals on interjurisdictional adoption issues and listed both collaborative planning to increase interjurisdictional adoptions and support for improving implementation of ICPC as areas of special interest for fiscal year 1999 grants. HHS awarded five grants in those areas of special interest.

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## Conclusions

The 8,000 foster children who, at any given time, are freed and waiting for an adoptive home are not readily adoptable because of their special needs. Searching across jurisdictional lines for an adoptive family for these hard-to-place children may increase the likelihood that a foster child can be matched with an appropriate family. However, the interjurisdictional adoption process is longer and more complex than the adoption process within a jurisdiction. Thus, opportunities for successful outcomes from interjurisdictional searches for adoptive families depend, in large measure, on the soundness of the process itself. While states have the primary responsibility to regulate adoptions, nonprofit organizations are also actively involved in developing needed improvements. However, states' authority does not extend beyond their own borders and nonprofit organizations cannot directly change the process. As a result, the states and organizations cannot effect change in all steps of the interjurisdictional adoption process. While HHS has made some efforts to assist states in improving this process in areas such as provision of technical assistance, a more organized strategy and a widely available plan could facilitate dialogue and collaboration among all who have an interest in improvements to the interjurisdictional adoption process. For example, such a plan could present strategies to promote the standardization of homestudies and assist states in their use of web sites.

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<sup>26</sup>Interstate Compact Implementation, pp. 11-12.

<sup>27</sup>The Adoption Opportunities grant program is designed to provide support for demonstration projects that facilitate the elimination of barriers to adoption and provide permanent loving homes for children who would benefit from adoption, particularly children with special needs.

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## Recommendation

We recommend that the Secretary of HHS develop and make widely available an action plan to address areas that would facilitate the interjurisdictional adoption of foster children. The plan should critically assess planned and ongoing activities by HHS and others and, at a minimum, should include strategies to

- Encourage collaborative partnerships among governments and others to promote standardization of homestudies and additional training on ICPC and its process, and
- Provide technical assistance to states on the effective use of adoption web sites to recruit adoptive families for hard-to-place foster children.

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## Agency Comments and Our Evaluation

We provided HHS and state child welfare officials in the three states we visited with the opportunity to comment on a draft of this report; we received comments from HHS and the state of California. In its comments on a draft of the report, HHS acknowledged that the interjurisdictional adoption process is not functioning optimally. It expanded on two topics addressed in the report—HHS' discretionary grantmaking activities and Internet activities—and discussed why HHS does not believe that our recommended action is necessary. In discussing the use of discretionary grants, such as Adoption Opportunities grants, to improve the interjurisdictional adoption process, HHS reiterated its position on its discretionary grantmaking activities and provided additional information about the grants that were awarded for fiscal year 1999. In addition, HHS noted that it considers the grantmaking process to be its mechanism for coordinating with others to improve the interjurisdictional adoption process. In discussing Internet activities, HHS noted that interest in Internet activity regarding adoption is high, the interest comes from a variety of sources, and adoption agencies have struggled to keep up with the rapidly growing Internet technology. Furthermore, HHS seeks to support Internet-based efforts that do not exceed states' capacities to respond and that do not duplicate efforts by the private sector.

In responding to our recommendation that HHS develop and make widely available an action plan to facilitate the interjurisdictional adoption of foster children, HHS stated that it has not had a need to create such a plan given the changing nature of technology and the continuous efforts it is making to facilitate the interjurisdictional adoption process. We believe that the value of a more organized strategy and a widely available action plan lies in the increased dialogue, and resulting collaboration, such a plan can generate between HHS and the many public agencies and private

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organizations that have an interest in improving the interjurisdictional adoption process. Particularly in light of HHS' stated desire to avoid duplicating the efforts of others and its recent decision to reassess the value of its plan for a national photolisting service, a mechanism that would keep interested parties abreast of HHS' plans is warranted. HHS also made technical comments, which we incorporated where appropriate. The full text of HHS' comments is contained in appendix V.

The state of California agreed with our report and noted its interest in being involved in future efforts to improve the interjurisdictional adoption process.

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We will send copies of this report to the Secretary of Health and Human Services and program officials in California, Florida, and Missouri. We will also make copies available to others on request.

If you have any questions regarding this letter, please contact me at (202) 512-7215. Key contributors to this report are listed in appendix VI.

Sincerely yours,



Cynthia M. Fagnoni  
Director, Education, Workforce,  
and Income Security Issues

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**Abbreviations**

AAICPC	Association of Administrators of the Interstate Compact on the Placement of Children
APHSA	American Public Human Services Association
ASFA	Adoption and Safe Families Act of 1997
HHS	Department of Health and Human Services
ICPC	Interstate Compact on the Placement of Children

# Scope and Methodology

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To obtain a national perspective on interjurisdictional issues, we interviewed officials at the Department of Health and Human Services (HHS) about the department's role and actions relevant to interjurisdictional adoption issues. We also interviewed experts and advocates affiliated with nonprofit organizations interested in interjurisdictional adoption issues about their organizations' related activities. These organizations included the American Public Human Services Association, the Association of Administrators of the Interstate Compact on the Placement of Children, the Association of Administrators of the Interstate Compact on Adoption and Medical Assistance, the National Adoption Center, and the American Bar Association. In addition, we reviewed the public Internet web sites maintained by the National Adoption Center and state child welfare agencies to determine the types of information available to prospective adoptive parents regardless of their geographic location.

To obtain a state and county child welfare perspective on interjurisdictional issues, we conducted case studies in three states—California, Florida, and Missouri. We chose those states because they are among the 10 states with the largest foster care populations and they have varying levels of experience with the placement of foster children across state lines. In each state, we met with state foster care and adoption officials and their local counterparts in one county with a large foster care population. Those counties were Contra Costa County, California; Broward County, Florida; and Jackson County, Missouri.

We conducted our review from November 1998 to August 1999 in accordance with generally accepted government auditing standards.

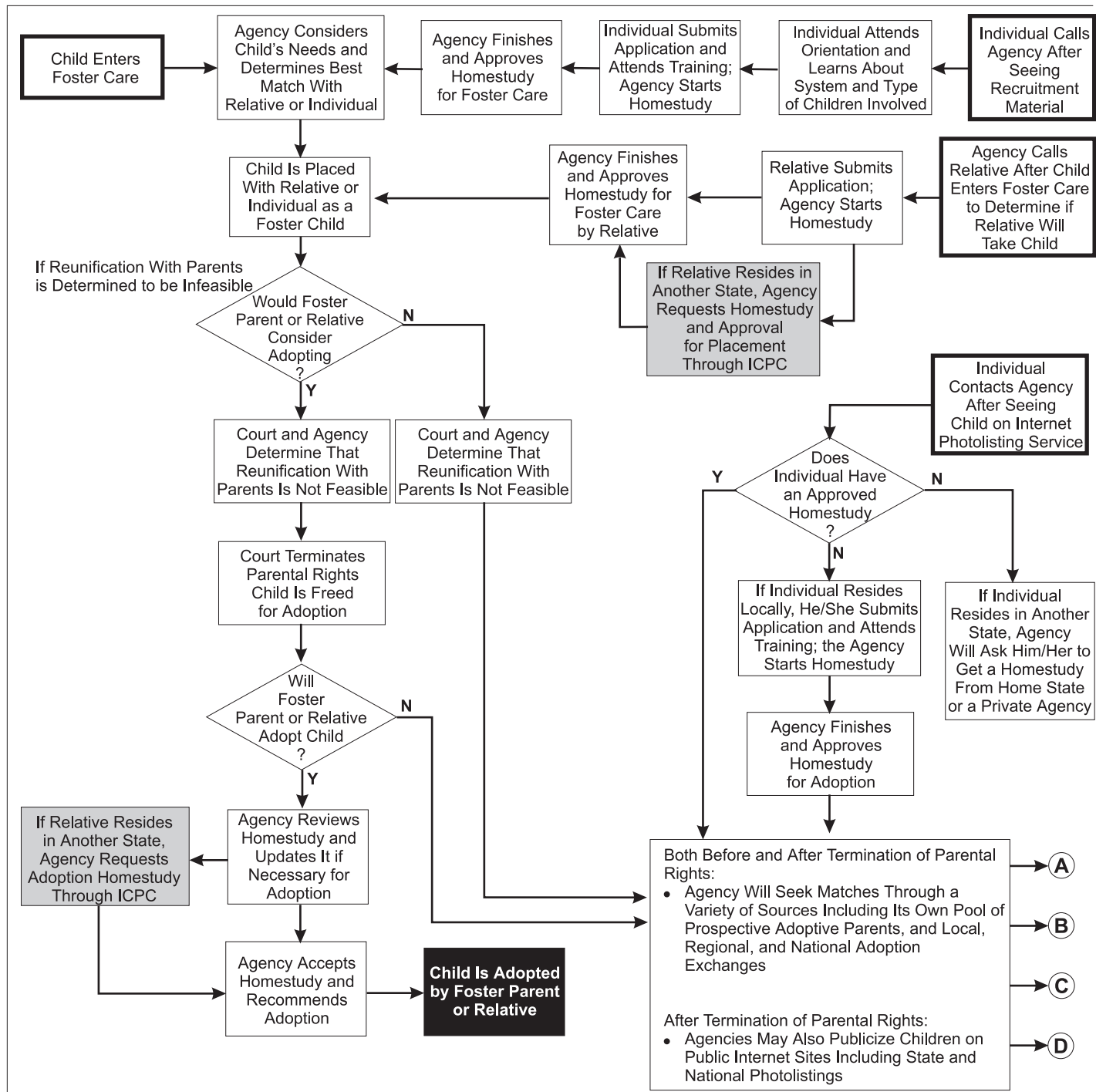


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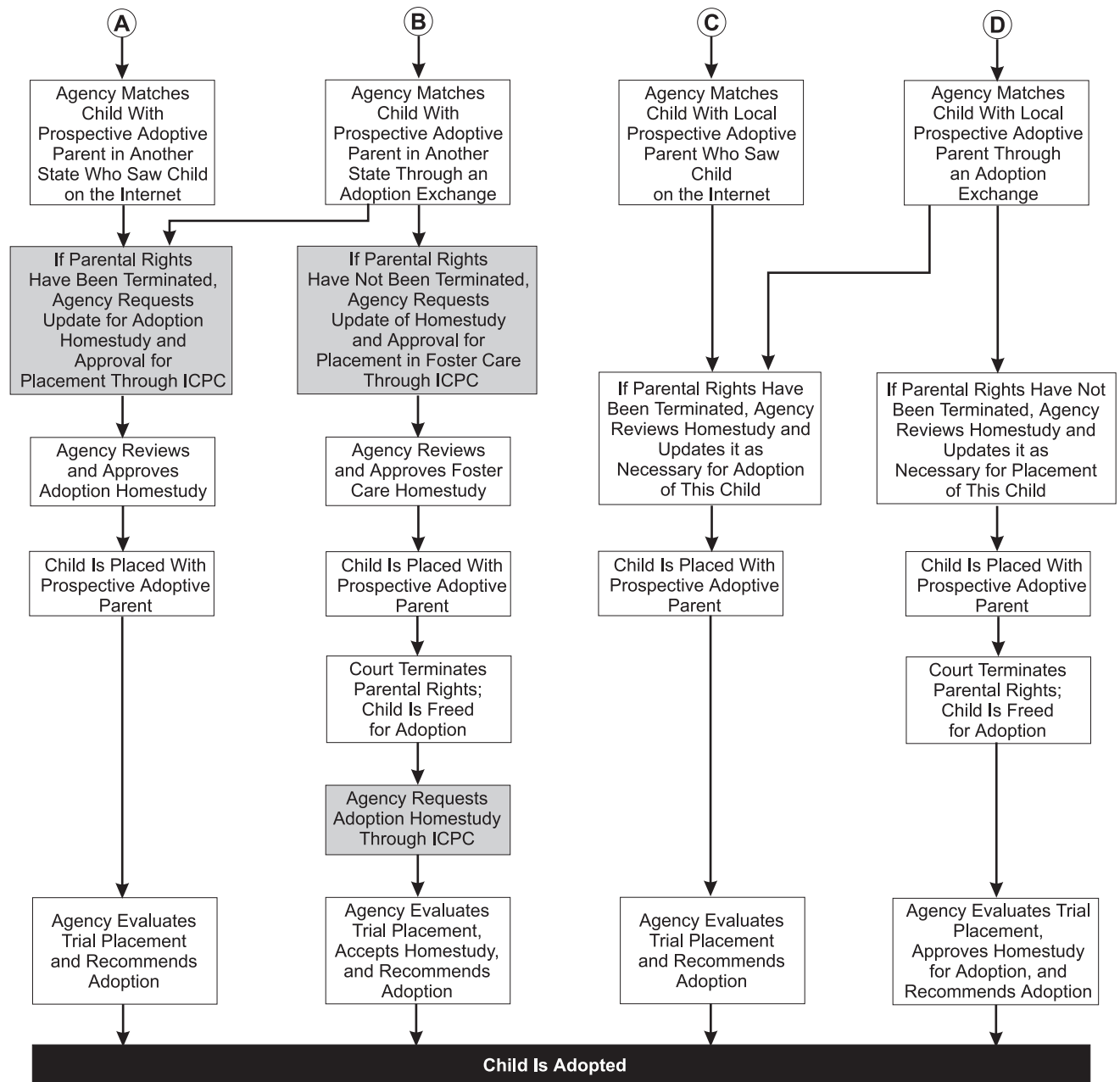
**Appendix I**  
**Scope and Methodology**

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# The Adoption Process for Foster Children



**Appendix II**  
**The Adoption Process for Foster Children**



# Sample Homestudy Format

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The specific content and format of homestudies vary by agency. This suggested format, developed by Florida, reflects the scope and detail typically found in homestudies.

July 1, 1990

HRSM 175-16

SUGGESTED FORMAT

Adoption Study Summary Guide

A. Purpose

1. The following outline is intended as a flexible guide to study content. This content should serve as a basis for decision making regarding approval or disapproval of adoptive applicants, and the eventual adoptive placement of a child in the home.

B. Identifying Information

1. Name of applicant(s)
2. Address of applicant(s)

C. List of Contacts

Should include chronological listing of all significant interviews and contacts.

Include training dates and their involvement, insights, ability to use information presented, strengths and weaknesses.

D. Information Shared with Applicant(s)

1. Prospective adoptive parents should be informed about:
  - a. The study process and its purposes.
  - b. Nature of agency's role and responsibilities to child.
  - c. Agency policies, procedures, expectations.
  - d. Unique situation, and psychologically of foster child, and his feelings and needs.
  - e. Range of problems and needs typical of foster children.
2. Information should be exchanged in such a way that the agency and the applicants can determine as early as possible whether it is desirable to continue with the exploratory process or any further stage of evaluation.

E. Information Explored with Applicants

1. Sources and Circumstances of the Application.
  - a. Who contacted the agency.

Include Intake sheet from original call to agency about their interest.

Attachment 40 to Chapter 7

**Appendix III**  
**Sample Homestudy Format**

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- b. What prompted the application (motivation).
- c. Age range, sex type of child requested, sibling, race, handicap, kinds of behaviors accepted.
- d. Was request altered or modified during the study. Compare with final initial idea request.

2. Family Composition

- a. Age and brief description of each member.  
Include children at home or who will be involved in any way.
- b. Whereabouts, activities or occupation of each.
- c. Others living in the home. Why there and their role if parenting, if any?

3. Description of Home and Neighborhood.

- a. Neighborhood. What interaction do they have with neighbors. How do they feel about the family adopting?
- b. Home: atmosphere, sleeping arrangement, safety issues.

F. Applicant's Childhood History

This section should give a longitudinal picture of significant experiences through childhood, adolescence, young adulthood. Information in this area usually is relevant, from the applicant's view, only after other more immediate information about current family life has been shared. An autobiography done by the person (if legible) should not be repeated. It is suggested that the worker discuss significant issues in their past relative to parenting our children.

1. Adoptive Mother

- a. Her family composition; her ordinal position in her family.
- b. Economic status of family.  
Effect that had on lifestyle then? On values today?
- c. Family relationships.
  - (1) Quality of family life.
  - (2) Describe their parents' roles.
  - (3) Parents' relationship with each other.
  - (4) Types of discipline used by each parent.
  - (5) Family cohesiveness and activities.

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**Appendix III**  
**Sample Homestudy Format**

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July 1, 1990

HRSM 175-16

- (6) How their parents' sibling preferences affected their family or origin, and current family? What is their relationship now?
  - d. Home responsibilities.
  - e. Periods of stress in family life: How were problems addressed in study and mentioned in application; resolved. How does applicant evaluate those solutions now?
  - f. Important events: Include separation experiences, births of siblings, death of important persons, etc., and applicant's reaction to these experiences.
  - g. Applicant's childhood problems; how viewed now. How handled by parents.
  - h. How they learned about development into an adolescent, sexual development, what was acceptable or not acceptable. How did their parents handle discussions related to dating, sex and marriage. How will they handle those discussions?
  - i. Work history and goals for future.
  - j. Applicants school experiences and peer relationships.
2. Adoptive Father.
- a. His family composition; his ordinal position in family. If in application, not readdressed unless significant.
  - b. Military service record.
    - (1) Active service: dates; where; applicant's assessment of positives and negatives.
    - (2) If deferred, reasons and reactions, or evaluation of what this meant to applicant.
  - c. Economic status of family.

What effect that had on their lifestyle? On values today?
  - d. Family relationship.
    - (1) Quality of family life.
    - (2) Describe parent's roles.
    - (3) Parents' relationship with each other.
    - (4) Types of discipline used.
    - (5) Family cohesiveness and activities.

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July 1, 1990

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- (6) How their parent's sibling preferences (if any) affected their family of origin, and current family. What is their relationship now?
- e. Home responsibilities and early work experience.
- f. Periods of stress in family life: How were problems resolved; how does applicant evaluate those solutions now?
- g. Important events: Include separation experiences, births of siblings, death of important persons; etc., and applicant's reaction to these experiences.
- h. Applicant's childhood problems; how viewed now? How handled by parents?
- i. School history and peer relationships.
- j. How they learned about development into adolescence; sexual development? What was acceptable or not. How did their parents handle discussions related to dating, sex, and marriage? How will they handle those discussions?

**G. Adult History (Marriage and Family Life)**

This section is of paramount importance in all studies. It should include a clear picture of how each parent views the development of the marriage, and of the family's life together.

**1. Marital Relationships**

- a. Previous marriages: Duration, reasons for termination, present relationship to previous spouse, if any. Children of those marriages, who has custody, what visitation occurs, who pays support, etc.?
- b. Current marriage: How long, courtship, how met, how long dated before marriage, what did they value about each other. How is this relationship different?
- c. Attitudes of extended family toward marriage.
- d. Summarize history of living arrangements throughout marriage: Where lived, how long, reasons for moving. How that affected relationships?
- e. Areas of companionship.
- f. Decision-making: Who makes what decisions regarding money, discipline, etc.
- g. Areas of disagreement, how handled?
- h. Stresses: Problems, crisis (problems may be practical or interpersonal); how are they handled; are they resolved? How does each partner exhibit stress, what do they and/or their spouse do to help?

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**Appendix III**  
**Sample Homestudy Format**

July 1, 1990

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NOTE: Since there are stresses in all families, both personal and practical, this can be universalized to help applicants share this aspect of their lives. In evaluating applicants, this information will illuminate the adequacy of problem solving skills for the types of stresses foster care imposes on children in care.

- i. Roles: (Who does what regarding home, work, child care?)
- j. How do they feel about self and each other's expectations?
- k. Sexual compatibility.
- l. Health history: (This should tie in to sequential childhood history.)
- m. Current relationships with members of extended families. Specifically include grandparents or persons who will be involved with adoptive children. How do they feel about adoption?
- n. Social activities, community relationships, religious beliefs, etc.
- o. Feeling tones and quality of relationship observed during study. Describe their mode of interaction. Who leads, who follows, who manipulates who, parents, etc.?

2. Employment

An accurate history of work experience and money management provides strong indicators of adaptiveness or maladaptiveness in individual and family functioning.

- a. Work history of both applicants; where, when, how long.
- b. Current employment and working hours. Is parent going to be able to take time off? Are hours regular or irregular?
- c. Relationship with employers: Job satisfactions, problems (how does applicant feel about job)?
- d. Money management.

3. Family Life

Worker summarizes impression of family relationships, quality of family life, cohesiveness, sibling preferences, parent's preference, family activities, work, evaluation of marriage and family life.

H. Experience with Children (Own Children or Others)

1. Parents' Attitudes

This area of history is of special importance in all studies, for any type of care. It provides a factual basis on which to evaluate parenting skills, attitudes, expectations, age and developmental levels where they have been most comfortable to most in conflict, gratifications they seek, and their ways of handling frustrations. It should include:

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**Appendix III**  
**Sample Homestudy Format**

July 1, 1990

HRSM 175-16

- a. Each parent's feelings about each child, now and in the past.
- b. At different ages and stages of development, what behavior did they find most gratifying, most upsetting or frustrating?
- c. What specific approaches characterize child caring and rearing? (For example, how did they handle toilet training, stubbornness, temper outbursts, failure to do what is expected, educational problems, illness, independence, plan and activities, sexual curiosity, dating and other socialization activities.)
- d. Method of discipline at different ages.  
  
Are they open to different methods and are flexible to adjust based on child's life experiences (etc)?
- e. Affectionate behavior. How do they express affection in their family?
- f. Expectations and handling regarding educational achievement in relation to child's abilities and interests.
- g. Reactions to sibling jealousy and rivalry. How problems handled?  
  
(How they handle role plays in group study.)

NOTE: Denial of jealousy and rivalry among siblings or lack of emotional tolerance for these stresses strongly suggest inability to accept and deal with the problem. This means that the placement of a foster child, who would inevitably either arouse or react with jealousy, would be highly likely to fail or cause problems.

- h. Children's participation in parents' plan for adoption (what told, how respond)?
  - i. Counselor's evaluation of parenting attitudes and skills.
2. Description and History of Each Child.
- (a through k can be handled on self study/application filled out by child over nine or child's parent.)
- a. Current physical and emotional development.
  - b. Health history and current health.
  - c. Habit training; degree of dependence and independence.
  - d. School experiences, attitudes, attendance, grade level, relationships with teachers, peers. Initial reactions to starting school.
  - e. Friends, activities, interests.
  - f. Attitudes toward other members of family.

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**Appendix III**  
**Sample Homestudy Format**

July 1, 1990

HRSM 175-16

- g. Problems, current past; when how resolved (at any state of child's life. Include specifically reactions to separations, past and present; how handled).
- h. Relationships with siblings.
- i. Relationships with other important persons (i.e., grandparents, others).
- j. Participation in family life: activities, chores, etc.
- k. Areas of anticipated gratifications and stresses if adoptive child is placed.
- l. Child's understanding of changes that may occur. What parent expects will be difficult for each child; how will they handle? How will it be "good" for each child? What age range, sex, number of children does each child think would be best for their family.
- m. Counselor's observations of children. Include physical appearance and affect; ways of relating to parents, to each other, to siblings and to worker. Child's feelings about foster care.
- n. Counselor's evaluation of each child.
- I. Summary of discussion of "acceptable children" with the family. Address: Age, race, sex, inheritable conditions, past life experiences, physical, emotional and educational needs of the children they would accept into their families.
- J. Counselor's Evaluation of Home and Recommendation re: Approval  
Discuss what they have done to prepare their family for adoption. Have they prepared a photo album for the counselor to use in preparing the child? As a result of the interviews, and/or group study sessions, an evaluation should be made of personality makeup of adoptive parents, marriage, family relationships, and the adequacy of functioning realistically, solving problems of daily living, and the way in which they are likely to function as adoptive parents. This section should end with a recommendation for approval, which includes statement regarding kind of child for whom the family is most appropriate.
- K. Date of Approval  
Include signature of counselor, supervisor, and program supervisor.

NOTE: If the family participated in a group study process, a section should be added which describes the family's participation in the group. If, as a part of the study process, the family is asked to prepare a life story or autobiography, and the information requested above is adequately covered in the autobiography, it needs to be repeated here. The reader should be referred to the attached autobiography. However, if questions are raised in the family written autobiography, they should be discussed, explored, and when possible resolved and recorded in the appropriate sections of the study.

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# Child Welfare-Related State Web Sites as of August 1999

State	Site Contains Information on Requirements or Process for Foster Child in This State	Site Contains a Photolisting or Waiting Foster Children	Site Specifies an Interjurisdictional Adoption Restriction That Only Residents of Home State May Adopt	URL of State Child Welfare Agency or of State Government With a Link to the State Child Welfare Agency
Alabama				<a href="http://www.dhr.state.al.us/acfs/acfs.html">http://www.dhr.state.al.us/acfs/acfs.html</a>
Alaska				<a href="http://www.hss.state.ak.us/dfys/Overview.htm">http://www.hss.state.ak.us/dfys/Overview.htm</a>
Arizona	✓	✓		<a href="http://www.de.state.az.us/links/foster/">http://www.de.state.az.us/links/foster/</a>
Arkansas		✓		<a href="http://www.state.ar.us/dhs/">http://www.state.ar.us/dhs/</a>
California	✓	✓		<a href="http://www.childsworld.org/adoption/index.htm">http://www.childsworld.org/adoption/index.htm</a>
Colorado		✓		<a href="http://www.cdhs.state.co.us/">http://www.cdhs.state.co.us/</a>
Connecticut	✓	✓		<a href="http://www.state.ct.us/dcf/FOSTER.HTM">http://www.state.ct.us/dcf/FOSTER.HTM</a>
Delaware	✓			<a href="http://www.state.de.us/">http://www.state.de.us/</a>
Florida	✓	✓		<a href="http://www.state.fl.us/cf_web/adopt">http://www.state.fl.us/cf_web/adopt</a>
Georgia	✓	✓		<a href="http://www.adoptions.dhr.state.ga.us/">http://www.adoptions.dhr.state.ga.us/</a>
Hawaii				<a href="http://www.state.hi.us/">http://www.state.hi.us/</a>
Idaho	✓	✓		<a href="http://www.state.id.us/dhw/hwgd_www/contentlist.htm1">http://www.state.id.us/dhw/hwgd_www/contentlist.htm1</a>
Illinois	✓	✓		<a href="http://www.state.il.us/dcf/ad3.htm">http://www.state.il.us/dcf/ad3.htm</a>
Indiana	✓	✓		<a href="http://www.state.in.us/fssa/adoption/">http://www.state.in.us/fssa/adoption/</a>
Iowa				<a href="http://www.dhs.state.ia.us/HomePages/DHS/adoption.htm">http://www.dhs.state.ia.us/HomePages/DHS/adoption.htm</a>
Kansas				<a href="http://www.ink.org/public/srs/srschildrenservice.html">http://www.ink.org/public/srs/srschildrenservice.html</a>
Kentucky	✓	✓		<a href="http://cfc-chs.chr.state.ky.us/CFC/DSS/SNAP/snap.htm">http://cfc-chs.chr.state.ky.us/CFC/DSS/SNAP/snap.htm</a>
Louisiana	✓	✓		<a href="http://www.dss.state.la.us/">http://www.dss.state.la.us/</a>
Maine				<a href="http://janus.state.me.us/dhs/welcome.htm">http://janus.state.me.us/dhs/welcome.htm</a>
Maryland	✓	✓		<a href="http://www.dhr.state.md.us/">http://www.dhr.state.md.us/</a>
Massachusetts	✓	✓		<a href="http://www.state.ma.us/dss/adoption/adoption.htm">http://www.state.ma.us/dss/adoption/adoption.htm</a>
Michigan	✓	✓		<a href="http://www.mfia.state.mi.us/Adoption/Adopt.htm">http://www.mfia.state.mi.us/Adoption/Adopt.htm</a>
Minnesota				<a href="http://www.dhs.state.mn.us/aboutdhs/facts/mnadopt3.htm">http://www.dhs.state.mn.us/aboutdhs/facts/mnadopt3.htm</a>
Mississippi	✓	✓	✓	<a href="http://www.mdhs.state.ms.us/fcs_adopt.html">http://www.mdhs.state.ms.us/fcs_adopt.html</a>
Missouri	✓	✓	✓	<a href="http://www.dss.state.mo.us/dfs/adopt.htm">http://www.dss.state.mo.us/dfs/adopt.htm</a>
Montana				<a href="http://www.dphhs.state.mt.us/whowhat/cafs.htm">http://www.dphhs.state.mt.us/whowhat/cafs.htm</a>
Nebraska	✓			<a href="http://www.hhs.state.ne.us/chs/adp/adpindex.htm">http://www.hhs.state.ne.us/chs/adp/adpindex.htm</a>
Nevada	✓	✓		<a href="http://www.state.nv.us/hr/dcf/page4.html">http://www.state.nv.us/hr/dcf/page4.html</a>
New Hampshire				<a href="http://www.dhhs.state.nh.us/">http://www.dhhs.state.nh.us/</a>
New Jersey	✓	✓		<a href="http://www.state.nj.us/humanservices/adopt.html">http://www.state.nj.us/humanservices/adopt.html</a>
New Mexico	Site Undergoing Reconstruction			<a href="http://cyf_abq.state.nm.us/">http://cyf_abq.state.nm.us/</a>

**Appendix IV**  
**Child Welfare-Related State Web Sites as of**  
**August 1999**

State	Site Contains Information on Requirements or Process for Foster Child in This State	Site Contains a Photolisting or Waiting Foster Children	Site Specifies an Interjurisdictional Adoption Restriction That Only Residents of Home State May Adopt	URL of State Child Welfare Agency or of State Government With a Link to the State Child Welfare Agency
New York	✓	✓		<a href="http://dfa.state.ny.us/adopt/">http://dfa.state.ny.us/adopt/</a>
North Carolina	✓	✓		<a href="http://dhhs.state.nc.us/dss/adopt/">http://dhhs.state.nc.us/dss/adopt/</a>
North Dakota				<a href="http://207.108.104.74/dhs/dhsweb.nsf/ServicePages/ChildrenandFamilyServices">http://207.108.104.74/dhs/dhsweb.nsf/ServicePages/ChildrenandFamilyServices</a>
Ohio	✓	✓		<a href="http://www.state.oh.us/odhs/oap/indx.htm">http://www.state.oh.us/odhs/oap/indx.htm</a>
Oklahoma	✓	✓		<a href="http://www.okdhs.org/programs/program.htm#Adoption">http://www.okdhs.org/programs/program.htm#Adoption</a>
Oregon	✓	✓		<a href="http://www.scf.hr.state.or.us/adopting.htm">http://www.scf.hr.state.or.us/adopting.htm</a>
Pennsylvania				<a href="http://www.state.pa.us/PA_Exec/Public_Welfare/overview.html">http://www.state.pa.us/PA_Exec/Public_Welfare/overview.html</a>
Rhode Island				<a href="http://www.state.ri.us">http://www.state.ri.us</a>
South Carolina	✓	✓		<a href="http://www.state.sc.us/dss/adoption/index.html">http://www.state.sc.us/dss/adoption/index.html</a>
South Dakota	✓	✓		<a href="http://www.state.sd.us/social/CPS/indx.htm">http://www.state.sd.us/social/CPS/indx.htm</a>
Tennessee	✓	✓	✓	<a href="http://www.state.tn.us/youth/adoption">http://www.state.tn.us/youth/adoption</a>
Texas	✓	✓		<a href="http://www.state.tdprs.state.tx.us/">http://www.state.tdprs.state.tx.us/</a>
Utah				<a href="http://www.hsdcs.state.ut.us/">http://www.hsdcs.state.ut.us/</a>
Vermont	✓	✓		<a href="http://www.state.vt.us/srs/adopt/adopt.htm">http://www.state.vt.us/srs/adopt/adopt.htm</a>
Virginia				<a href="http://www.state.va.us/adoptions/index.htm">http://www.state.va.us/adoptions/index.htm</a>
Washington				<a href="http://www.state.wa.gov/dishs/ca/ca3ov.html">http://www.state.wa.gov/dishs/ca/ca3ov.html</a>
West Virginia				<a href="http://www.state.wvdhhr.org/">http://www.state.wvdhhr.org/</a>
Wisconsin	✓	✓		<a href="http://www.dhfs.state.wi.us/children/adoption/index.htm">http://www.dhfs.state.wi.us/children/adoption/index.htm</a>
Wyoming		✓		<a href="http://dfsweb.state.wy.us/">http://dfsweb.state.wy.us/</a>

# Comments From the Department of Health and Human Services



DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of Inspector General

Washington, D.C. 20201

OCT 19 1999

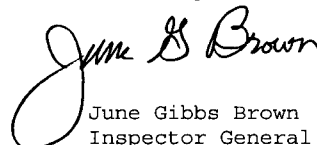
Ms. Cynthia M. Fagnoni  
Director, Education, Workforce,  
and Income Security Issues  
United States General  
Accounting Office  
Washington, D.C. 20548

Dear Ms. Fagnoni:

Enclosed are the Department's comments on your draft report, entitled, "Foster Care: HHS Could Better Facilitate the Interjurisdictional Adoption Process." The comments represent the tentative position of the Department and are subject to reevaluation when the final version of this report is received.

The Department appreciates the opportunity to comment on this draft report before its publication.

Sincerely,

  
June Gibbs Brown  
Inspector General

Enclosure

The Office of Inspector General (OIG) is transmitting the Department's response to this draft report in our capacity as the Department's designated focal point and coordinator for General Accounting Office reports. The OIG has not conducted an independent assessment of these comments and therefore expresses no opinion on them.

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**Appendix V**  
**Comments From the Department of Health**  
**and Human Services**

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**COMMENTS OF THE DEPARTMENT OF HEALTH AND HUMAN SERVICES ON THE  
GENERAL ACCOUNTING OFFICE'S DRAFT REPORT, "FOSTER CARE: HHS COULD  
BETTER FACILITATE THE INTERJURISDICTIONAL ADOPTION PROCESS" (GAO/HEHS-  
00-184)**

The Department appreciates the opportunity to comment on the General Accounting Office's (GAO) draft report, which considers how to improve procedures and policies to better facilitate the timely adoption of children across state and county jurisdictions----referred to as interjurisdictional adoptions. The following comments are provided in response to general issues raised in the report and are intended to provide additional clarification or information to you for GAO consideration.

**General Comments**

We concur with the GAO that the interjurisdictional adoption process is not functioning optimally, as it was envisioned. In response, we began, 18 months ago, to address what we identified as the most pertinent issues and those most appropriate for and amenable to Federal involvement. We have created good internal working plans and are pursuing them – some alone and some in concert with appropriate advocacy organizations, like the American Public Human Services Association (APHS) and the National Adoption Center. We have felt no need to create a public strategy paper given the changing nature of technology and the continuous efforts on many fronts to work on this issue. In fact, some support activities are in their second iteration.

In the summer of 1998, the Children's Bureau announced the availability of funds for the "Administration of the Interstate Compact on Adoption and Medical Assistance (ICAMA)" and "Overcoming State and Local Barriers to Adoption" (Federal Register/Vol. 63, No. 110/ Tuesday, June 9, 1998/ Notices). Applications were solicited and received and, as a result of a peer review of the proposals, the ICAMA Administration award was made to the Association of Administrators of the Interstate Compact on Adoption and Medical Assistance (AAICAMA). No awards, however, were made in priority area "Overcoming State and Local Barriers to Adoption" because of the low quality of the proposals. With a careful internal review of the wording of the priority area, we adjusted the announcement and re-competed that topic in the June 1999 competition (Federal Register/Vol. 64, No. 97/Thursday, May 20, 1999/Notices). Twelve applications were received and reviewed; five were funded.

Those five grants will develop thoughtful, detailed planning for future implementation of a variety of activities, including: needs assessment for inter-county and inter-state adoptions in California focusing on "difficult cases;" an evaluated review of home study protocols and worker decision making regarding interjurisdictional placements; the role of "refusing services" in worker decision making; an exploration of "delays" relating to urban/rural county differences in a public/private partnership situation; and the impact of a collaborative community planning advisory body on inter-community native adoptions in Alaska. With findings from demonstration planning awards the Bureau will be better positioned to disseminate tested solutions and technical assistance through the Resource Centers. It is in this way that we are coordinating our various activities.

In addition, the Department specifically focused on improvements to implementation of the

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Interstate Compact on the Placement of Children (ICPC) in its FY 1999 Discretionary Funds grant announcement. Financial assistance was, competitively, awarded APHSA, the Secretariat of the ICPC to improve implementation, identify barriers, and develop and implement solutions to improve ICPC operations. The grantee will work on barriers related to home studies; clarifications of the new Regulation 7 related to priority placements; training in ICPC processes for judges, attorneys, placement agencies and parents; border-state agreements; procedures to insure the inclusion of the ICPC offices in the interjurisdictional adoption process; interjurisdictional supervision issues; and technology enhancements for both the national and state-to-state efforts.

We have also been active in regard to the Internet activity. As technology has grown exponentially, public and private adoption agencies have struggled to keep up. When we began creating the response mechanisms to the presidential directive, many state adoption agencies were not "on line" and most potential adoptive parents were not considering the Internet as a means of finding a child. Through the National Adoption Center, web-based adoption previews (like FACES of Adoption) have become accepted and expected. The Department's plan in response to the presidential initiative was how to support a system that guarded children's privacy while it attained maximum exposure to potential parents. Given the explosion of technology and the advances made in internet-adoption activities in the private sector, our challenges now include how best to support an activity that does not duplicate efforts of the private sector and that does not exceed state capacity to contribute and respond to the activity. We are preparing to convene the focus groups with these added concerns in mind. Interest in the Internet activity is quite high – from Internet providers, software designers, public relations firms, private agencies, and potential parents. The Department is seeking a strategy that balances these varied interests.

By combining discretionary grants activities, assisting the Secretariat to enhance the technology, implementation, and management of the ICPC, and supporting technical assistance and training through the Resource Centers, the Bureau has created a three-pronged strategy to address these issues. Because of the continued implementation of our internal working plans, we have not had a need create a public strategy paper given the changing nature of technology and the continuous efforts on many fronts to work on this issue.



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# GAO Contacts and Staff Acknowledgments

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## GAO Contacts

David D. Bellis, (202) 512-7278  
Kerry Gail Dunn, (415) 904-2234

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## Acknowledgments

In addition to the individuals named above, Ann T. Walker, Karen E. Lyons, and Elizabeth Jarvis-Shean made key contributions to this report.

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