



# Post-Adoption Guide

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## CELEBRATING THE HOMECOMING

Welcome home! We wish you our sincerest congratulations. The moment you've been waiting for (the moment you thought would never come) is finally here!

You have been through a tremendous experience and now need time to rest and rejuvenate. You also need time to celebrate and commemorate this blessed event.

We would like to provide you with some additional information that will be helpful when you first arrive home, as well as resources you might need down the road.

It is important to remember that everyone will adjust to your new family member in different ways. It is not uncommon to experience a variety of feelings. We have adoptive parents and social workers on staff that will be available to offer insight, support, referrals and education about all phases of adoption. As always, we at Children's Hope International are here to help you and we are just a phone call away.

## SUPPORT GROUPS

If you have not done so already, joining a support group is a wonderful way to share information, educational resources and participate in cultural enrichment programs. You may also want to explore cultural associations for information and support. A number of adoption support groups can now be accessed via the internet.

**FAMILIES WITH CHILDREN FROM CHINA**

<http://www.fwcc.org/>

**ETHIOPIA KIDS COMMUNITY**

[www.ethiopiankids.com](http://www.ethiopiankids.com)

**FAMILIES FOR RUSSIA AND UKRAINIAN ADOPTIONS**

[www.frua.org](http://www.frua.org)

**VIETNAM: ADOPT VIETNAM**

*Families with Children from Vietnam*  
[www.adoptvietnam.org](http://www.adoptvietnam.org)

**ADOPTIVE FAMILIES OF AMERICA**

(800) 372-3300

[www.adoptivefamilies.org](http://www.adoptivefamilies.org)

**NATIONAL ADOPTION INFORMATION  
CLEARINGHOUSE**

<http://www.calib.com/naic/>

**COLUMBIAN CONNECTIONS**

<http://groups.yahoo.com/group/ColombianConnections/>

**PARENT NETWORK FOR THE POST-INSTITUTIONALIZED CHILD**

<http://www.pnpic.org/>

**FAMILIES WITH CHILDREN WITH SPECIAL NEEDS**

[www.comeunity.com](http://www.comeunity.com)

## Catalogs

Listed below are a few of the many companies available that provide excellent adoption books as well as other adoption-related resources.

### **Tapestry Books**

[www.tapestrybooks.com](http://www.tapestrybooks.com)

### **Asia for Kids Catalog**

<http://www.asiaforkids.com>

### **Perspectives Press**

[www.perspectivespress.com](http://www.perspectivespress.com)

### **Adoption Book Catalog**

[www.adoptionbookcatalog.com](http://www.adoptionbookcatalog.com)

### **Adoption Books**

[www.adoptionbooks.com](http://www.adoptionbooks.com)

## Early Childhood Intervention Programs

### **FIRST STEPS PROGRAM:**

Most states have what is called the “First Step Program” which provides FREE early intervention services for children 1-3 years of age who are experiencing (or are at risk for experiencing) delays. Please call your state’s Department of Health and Education or your state’s agency responsible for family and children’s services for more information. This is an excellent resource.

### **PARENTS AS TEACHERS (PAT):**

Parents as Teachers is an early childhood parent education and family support program. They provide FREE services to families with children ages 0-5 years of age. The program is designed to enhance child development and school achievement through parent education. PAT educators make helpful home visits and also conduct developmental testing and screenings. More information can be found on their website at [www.patnc.org](http://www.patnc.org) or contact your local school district.

## **WE'RE HOME...NOW WHAT?**

What?!? More work? That's right. But just a little bit more...and it's well worth it. Taking care of the following items now will help insure that your child healthy, happy, and will not run into citizenship or documentation problems in the future. Detailed information on how to carry out each of the following steps are included in this guide along with copies of all necessary forms.

### **NEXT STEPS:**

- **Go to the doctor and get a thorough medical examination completed on your child including all testing for international adoption related issues.**
- **Contact your Social Worker to announce your arrival and to schedule Post-Adoption visits.**
- **Within 45-90 days of entry into the US you will receive your child's Certificate of Citizenship if your child entered the US on an IR-3 visa. If your child entered on an IR-4 you will receive an Alien Registration Card (green card).**
- **Apply for proof of citizenship for your child if your child entered on an IR-4 visa.**
- **Take care of your re-adoption or adoption recognition and/or legal name change (if necessary).**
- **Apply for a state birth certificate for your child.**
- **Apply for your child's Social Security number.**
- **Provide your local Social Security office with proof of citizenship so that your child's legal status will be updated to "US Citizen" in their system.**
- **Send copies of all adoption documents and certificates to CHI for inclusion in your adoption file. These documents should then be stored safely. Consider scanning them and saving onto a CD, making multiple copies, and storing in a safe deposit box. CHI cannot help you recover lost documents unless you mail us copies!**

## Medical & Health Issues

### Medical Testing Recommended for International Adoptees

Article by Deborah Borchers, M.D.

It is suggested that all families make an appointment with their child's health care provider within one to two weeks after arrival home. This will allow you to have your child examined for any contagious illnesses, evaluated for any conditions that need additional medical referrals (chronic problems), and allow the child's physician to review the child's immunization status.

**Some physicians may see a child, in his/her clean, middle-class attire, and tell parents that testing is not necessary. *This is not true.*** Children adopted from other countries may have any and all of these illnesses with absolutely no symptoms, namely no cough for TB, no diarrhea for parasites, no jaundice for hepatitis B, no developmental concerns specific to lead poisoning alone, and no growth failure for thyroid dysfunction. Physicians need to look at these children as if they were with birth parents in native attire in the country of birth. Most physicians would not balk at doing tests for such a child.

A good reference for physicians is a book that should be on the desk of all pediatricians, the Red Book, a publication of the American Academy of Pediatrics. This book, updated every three years, has a chapter which details the testing for all children who have been adopted from other countries, particularly with reference to infectious diseases. Most of the tests listed here are in this book and are recommended by numerous US experts in international adoption medicine.

#### Recommended blood, urine and screening tests

Children should have several blood tests after arrival home:

A **Hepatitis B profile** is needed to evaluate children for acute or chronic hepatitis B. This should include the **Hepatitis B surface antigen, Hepatitis B core antibody and Hepatitis B surface antibody (HBsAg, anti-HBc or HBcAb, and anti-HBs or HBsAb)**. These basic tests will show if a child has hepatitis B, has been exposed or has had the vaccine, or is a carrier of the disease. If any of the tests are positive, the doctor may recommend further testing to delineate the extent of the illness. Unfortunately, the test results are commonly misinterpreted. If a parent has a question about the interpretation of the testing, contact a specialist in gastroenterology or infectious diseases, or the Hepatitis B Coalition (651-647-9009) or Hepatitis B Foundation (215-489-4900) for more information. Since the incubation period of this illness is 3 to 6 months, it is recommended that children be retested six months after their arrival home to be sure that they do not have this illness, particularly if they received any blood tests or vaccinations while in the country of birth. It is necessary to do all of the tests listed above (and not just the Hepatitis B surface antigen commonly done by most doctors as a screen), as up to 60 percent of children with Hepatitis B may be missed with only doing the usual blood screen. All children with Hepatitis B infection should also be examined for Hepatitis D and have liver function tests. In

addition, all children with either acute or chronic Hepatitis B infections should be referred to a pediatric liver or infectious diseases specialist for long-term care.

**Hepatitis C** has also been seen in some adoptees, and it is recommended that all international adoptees be screened for the antibody to this virus. As with Hepatitis B testing, children should be retested for Hepatitis C antibody 6 months after arrival home. Antibody acquired from a child's birth mother may persist until a child is 15 to 18 months old. If the initial antibody for Hepatitis C is positive, repeat testing should be done at that age along with a PCR test for the virus itself.

**HIV testing by ELISA for HIV-1 and HIV-2** is recommended for all children. This illness, although rare in many countries from which children are adopted at present, is recommended for parental piece of mind and for early identification of HIV. Some countries at higher risk of HIV exposure include Cambodia, Thailand, Haiti and Romania. If a child is less than 18 months of age, it is recommended that s/he also have a **HIV PCR test**. This is because the HIV test is not as reliable for children less than 18 months of age. Because it is estimated that the incidence of HIV will be increasing in the near future, it is also recommended that this testing be repeated 6 months after arrival home. **Live virus vaccines (MMR, Varivax for chicken pox, and the Oral Polio Vaccine) should not be given to a child until the HIV test results have been reviewed by a physician.**

A **complete blood count** to check for **anemia** is recommended. A **hemoglobin electrophoresis** is also recommended for children of Asian, African and Mediterranean descent who are anemic to identify thalassemia (a blood condition similar to sickle cell anemia) and sickle cell anemia, both genetic blood disorders. All children should also have a **lead level**, as several international adoptees have had elevated lead levels leading to anemia. Behaviors associated with lead poisoning include pica (eating dirt and other non-food items) and irritability. Left untreated, lead poisoning may result in developmental delays. If a child is found to be anemic or have lead poisoning, repeat testing should be done to monitor for improvement in these conditions.

A blood test for **syphilis** (usually a RPR or VDRL) is recommended to evaluate the child for syphilis, which could have been acquired from his/her birth mother. If this test is positive, further blood tests are necessary. A spinal tap to check for Neuro-syphilis which could cause developmental problems may also be recommended. If a child has a medical history that states "syphilis treated in child", make sure that the child has a full evaluation anyway and do not assume that the treatment was adequate.

A screen for **hypothyroidism** (a TSH) is recommended now for all children adopted internationally. Low thyroid disorders have been diagnosed in a significant number of international adoptees, and the reason is not yet known. Symptoms may include a low resting heart rate, fatigue, and being overweight (gaining weight easily). Most birth children born in the US are screened for this disorder before discharge from the hospital of birth. In children adopted between six to twelve months of age, physicians should consider doing the **metabolic screen** which is done on all newborns in the state in which the child now lives. This test, done free of charge, screens for some very rare conditions which need immediate treatment.

A **PPD** test should be placed on a child's arm to screen him/her for tuberculosis. Many children born in other countries have received a vaccine shortly after birth called the BCG. This vaccine is supposed to protect against tuberculosis, and the children may have some reaction to the PPD after receiving this vaccine. However, it is still strongly recommended that all international immigrants be screened for exposure to tuberculosis, regardless of whether they have received the vaccine. This test can safely be done on children as young as five or six months, and can be done just after a child arrives home as long as the BCG scar is not freshly healing. It should be read (looked at to see if it is positive or negative) in 48 to 72 hours by a health care professional, not just a parent. Because these children are children at high risk for disseminated tuberculosis (spreading beyond the lungs, potentially to the kidneys and brain), a positive result is one where the injected area is raised above the skin 10 millimeters or more. **The interpretation of this test does not change even if the child had the BCG vaccine.** Some physicians will do an additional skin test at the time of the PPD to evaluate if the child's immune system will allow him/her to react to the test. Regardless of whether this control test was done, children need to have a repeat PPD test six months after arrival. If positive, a chest x ray is recommended. If the x ray is negative, the child should be started on Isoniazid, an anti-tuberculosis antibiotic, which should be taken without fail for the next nine months. Even if a child was reportedly treated for a positive TB test in the orphanage, the treatment should be repeated.

**A stool examination for ova and parasites, giardia antigen and bacterial infections** is recommended for all international adoptees, not just (but especially) for those with diarrhea. Families need to contact the laboratory that processes the stool specimen to see if special handling instructions are necessary with collecting this specimen. Children living in impoverished orphanages are at a higher risk, as are children who are significantly malnourished. It is not necessary for children to have diarrhea for them to have illnesses diagnosed by these tests. Most doctors will obtain three specimens, collected 48 hours apart, to make completely sure that the children have no infection, particularly if they are symptomatic. Children living in an orphanage setting may pass several parasites at one time. If a parasite is found, it is recommended that the stool examination be repeated after treatment. Some asymptomatic parasite infections found in international adoptees will resolve without any treatment. There are also numerous cases of children adopted internationally who have tested negative for parasite infections just after being adopted, but have passed large worms months to years later.

A **dipstick urinalysis** should be done on a urine specimen to evaluate for any blood, protein or infection in a child's urinary system that may need further evaluation.

For children that received DTP immunizations in the country of birth, a physician may choose to do blood testing for **Diphtheria and Tetanus antibody levels** to see if the vaccines were effective. This test is unreliable if the immunizations were given within six months prior to the blood test. Due to problems with inadequate storage, inadequate reaction to the vaccines, or potentially falsified records, many adoptees show no immunity to these two portions of the DTP shot, despite having reportedly received three or more of these shots. A physician should not assume that the immunizations were effective, and doing this test is one way to verify immunity. **Most physicians now believe that the immunizations should be repeated, as this presents low risk to the child.**

If there is a clinical suspicion or history of **ricketts**, a **calcium level**, **phosphorus level** and **alkaline phosphatase blood test** should be done, as well as a **bone survey for ricketts**. This disease may present with the characteristic significantly bowed legs, as well as flaring out of the lower ribs. Lesser known symptoms include low muscle tone and a “sweaty” head. Most children are easily treated with vitamin D supplementation and calcium sources in the diet.

### **Summary of blood testing recommended by medical adoption experts**

- Hepatitis B screen, including Hepatitis B surface antigen, Hepatitis B surface antibody, Hepatitis B core antibody.
- Hepatitis C screens.
- HIV ELISA and PCR screen.
- Complete blood count; hemoglobin electrophoresis is recommended for children who are anemic and at risk for abnormal hemoglobins, such as children of African, Asian or Mediterranean descent.
- Lead level.
- Blood screen for syphilis.
- TSH to rule out low thyroid levels; consider the state metabolic screen.
- A PPD to evaluate for tuberculosis. A test of 10 mm is considered positive and should necessitate further evaluation and treatment.
- Stool examination for ova and parasites, giardia antigen, and bacterial culture. Three specimens, obtained 48 hours apart, are strongly recommended, particularly for children formerly in an orphanage.
- A urinalysis dipstick.
- Diphtheria and Tetanus antibodies may be done if vaccines were given to verify immunity.
- Calcium, phosphatase, alkaline phosphatase and ricketts survey if there is a suspicion of ricketts.
- ***Six months after arrival home children should have repeat testing for Hepatitis B, Hepatitis C, HIV and tuberculosis (with a repeat PPD test).***

### **Other recommended evaluations**

In addition to blood and urine testing, it is strongly recommended that children have other medical screens for problems for which he/she is at high risk. Some of these problems may have no apparent symptoms at the time of his/her adoption, but statistics show that these children are at increased risk for concerns in these areas.

A **hearing screen** by audiometry or BSER (terms familiar to physicians) is recommended for all children adopted from other countries. In many countries, the health care for these children is marginal. Many previously institutionalized children have had ear infections diagnosed after arrival in the United States, and it is assumed that these children may have previously had (undiagnosed) infections while still in their orphanage. Early intervention with children with hearing impairment is necessary to ensure proper language development and hearing augmentation, so it is helpful to have this screen done soon after arrival home, preferably once all ear infections have been treated.

Likewise, a **vision screen** and evaluation by an ophthalmologist (an M.D.) is recommended. Crossed eyes are a common problem in institutionalized children. In many countries there is no knowledge of birth history, so it is not known if the birth mother had any infections that could compromise the child's vision long term. These infections could include Toxoplasmosis (a parasite infection often passed through cat feces) and Rubella (German measles). Similarly, a family history of eye problems is not known, so the ophthalmologist should screen for any hereditary eye problems.

A **developmental screen** is recommended to evaluate a child's developmental level at the time of her arrival home. In some states this information may be useful in helping a family to qualify for a special needs adoption subsidy. This can be done by a physician or nurse through a test known as the Denver Developmental Screening Test (DDST), easily administered in the doctor's office, or through agencies in your county. These agencies, often associated with the local county Board of Mental Retardation and Developmental Disabilities, include a program known as **Early Intervention**. This program is available (free of charge) to all children less than three years old who have developmental concerns. Specialists in the program help to facilitate the development of children identified at an early age as having developmental delays. Despite the name, a referral to this program does not mean that a child is retarded. In many counties, the parent can initiate the referral. Most children born in other countries may qualify for at least some services by being at risk, namely by being previously institutionalized in an orphanage. The therapists in the program assist parents by working with their child in their home or in a school setting. Referrals may be made at any time a parent has a concern about their child's development, not just necessarily at the time of his/her arrival home.

## Immunizations

Some children born in other countries will have received immunizations prior to their adoption. Others may receive immunizations at the time of their medical evaluation for their US visa. Generally, the timing falls into one of three categories:

**Immunizations given to children while in orphanages should be repeated.** According to multiple adoption medicine specialists, blood testing performed on children in similar institutional care in Eastern Europe, China and other countries demonstrated that the children did not have full antibody protection against the diseases for which they had been immunized, despite records that reflected a full set of immunizations. There are strong questions about the proper storage and administrations of the vaccines, as well as whether the records are even accurate reflecting that the shots were even given.

**All live virus vaccines, such as the MMR (Measles, Mumps, Rubella or German Measles) and Chicken Pox vaccine should be repeated (once the HIV test is shown to be negative).** Blood testing should also include testing for the Hepatitis B Antibody (as mentioned earlier), as this will show if a child has antibody to Hepatitis B. Most of the vaccines used these days have such low side effects that it is safe to repeat them, even if a child actually received the vaccines overseas.

**Immunizations given to children at the time of the medical evaluation for the visa** are considered to be the safest and most reliable of the vaccines. The record needs to be presented to your doctor so that s/he can then time the administration of future vaccines using that information.

Article on “Medical Testing Recommended for International Adoptees” by Deborah Borchers, M.D.  
Written August 25, 1998, revised May 8, 2000.

Dr. Borchers is a general pediatrician and adoption medicine specialist at the Eastgate Pediatric Center in Cincinnati, Ohio (513-753-2820). These tests are in agreement with recommendations by the American Academy of Pediatrics Committee on Infectious Diseases as well as a consensus of physicians in the US with expertise in international adoption. This article may be reprinted and shared with parents, social workers and physicians.

## Additional Resources

**Children’s Hope International is here to help with any issues or concerns that may arise. Your social worker will have additional resources, articles and books, and referrals if necessary. Please contact her with any future questions that may arise.**

**The International Adoption Clinic** of the University of Minnesota Hospital and Clinics has available over 20 different sets of informational materials, including studies of the health of Eastern European, Chinese and all internationally adopted children; growth charts for Chinese children; materials concerning Hepatitis B, cytomegalovirus, and tuberculosis; materials for physicians caring for internationally adopted children and more. For a complete listing and order form, send a self-address, stamped envelope to International Adoption Clinic, Box 211 UMHC, 420 Delaware Street, SE, Minneapolis, MN 55455. Information can also be found on their website at <http://www.peds.umn.edu/IAC/>

*The Handbook of International Adoption Medicine*, by Laurie C. Miller, is a wonderful resource for parents, physicians, social workers and other providers. This is a recent book and the information provided is current.

## Post-Adoption Reports

Formal post-adoption reports are required by all countries. Please contact your Social Worker to set up these visits at the appropriate intervals. *Families residing in Illinois will be required to complete the first post-adoption report at 1 month.* Failure to submit post-adoption reports as required will result in notification of family’s local Division of Child and Family Services.

Your adoption social worker will visit with you and your child in your home and will document such things as physical development, family adjustment, emotional development, any concerns that you might have. You will be required to provide recent photos of your child engaged in various activities (at least one together with you) to accompany these reports.

The officials of every country are very interested in the well-being of their country's children. They are eager to hear of the wonderful lives and families with which these children have been blessed. These reports help the officials understand the magnitude of impact their efforts have made and help dispel negative rumors and ideas about international adoption. Please do not feel nervous or concerned about these post-adoption visits. The reports submitted will only help to strengthen the adoption programs in each country and to help encourage officials to continue placing children with international adoptive families.

Please submit a copy of your adoption certificate or re-adoption decree with your 1<sup>st</sup> post-adoption report.

**For China:** Six post-adoption reports are required by the China at 1 month, 6 months, 12 months, 2 years, 3 years and 5 years after the child returns home. All reports should be notarized and written by a social worker employed by a Hague or COA accredited agency. Each report must be accompanied by 8 original hard copy photos of your child (not email) with at least one photo with the adoptive parents. These photos must have captions on the back. If your child entered the US on an IR-4 visa (requiring re-adoption) and you have not finalized the adoption within 12 months after arriving in the United States, you are required to continue submitting post-adoption reports every 6 months until the child has been granted US Citizenship.

**For Ethiopia:** Three post-adoption reports are required by a social worker – 3, 6, and 12 months after placement. Each report must be sent with 3 sets of 6 original color photos. At least one picture needs to be with the child and parent/(s). At least 3 pictures should be of the child alone and the others with siblings, parent(s) and family. After the first year home, the parents are required to send self-written progress reports about their child once a year until the child reaches 18 years of age. Both the social worker reports as well as the parent reports must be notarized. Three original reports and 3 sets of 6 pictures should accompany the reports. These reports and photos will go to 3 different entities in Ethiopia.

**For Colombia:**

Four post-adoption reports are required for infants at 3, 9, 15 and 21 months after the child returns home. For sibling groups or older children, they will be due at 3, 6, 12 and 21 months after placement. Three copies of each report are needed. One original must be notarized and apostilled. The other two may be photocopies. All three reports must contain photo pages prepared by the adoptive family, in color (either original photos or color photocopies) with 6-8 photos of the child. Additionally, families are required to submit a copy of the final decree of adoption from the courts in their state of residence and proof of US Citizenship to the Colombian Government.

**For Russia:**

Four post-adoption reports are required by a social worker at 6 months, 12 months, 24 months, and 36 months after placement. Seven pictures are required with at least one photo of the child and parents together. **Reports must be notarized and apostilled in the family's state of residence.** The first post-adoption report should be completed no earlier than 5 months after the court date. *Families residing in Illinois will be required by Illinois law to complete 5 post-adoption visits at the 1 month, 6 month, 12 month, 24*

*month and 36 month mark.*

**For Vietnam:**

For the first year post-adoption reports are required by the social worker 3, 6, and 12 months after the child returns home. The second and third years, post-adoption reports are required every 6 months by the family. After 3 years, a yearly post-adoption report is required to be written by the family until the child is 18 years old. All reports should be accompanied by 3 sets of 5 original pictures (color copies are accepted).

## **Immigration**

When you return to the United States, your child will enter on an Immigrant Visa (either an IR3 or IR4 visa) issued by the American Embassy/Consulate in your adoption country. You will hand over your visa package to the Customs Officials at your port of entry into the US. After this paperwork has been processed, if your child entered the US on an IR-3 visa after January 1, 2004 you should receive a Certificate of Citizenship in about 45-90 days. You will be mailed an Alien Registration Card, commonly known as a “green card” if your child entered the US on an IR-4 visa. The Customs Officials will let you know how long it should take for you to receive your child’s Alien Registration Card. The Immigration Office at the port of entry will stamp information in your child’s passport and will record your child’s Alien Registration Number before you can clear Customs. They may also conduct a brief immigration interview.

## **What is the difference between and IR3 and IR4 visa?**

**IR3 Visa:** A full and final adoption was completed in the foreign country. Both parents met the child before the adoption was legally finalized. If your child enters the United States under an IR3 Visa, your child will be automatically considered a US Citizen according to the Child Citizenship Act of 2000. Despite this federal law, some states and country adoption programs may still require you to go through the re-adoption process. For state-specific information, please contact your local adoption social worker (the person who will be conducting your post-adoption visits). As of January 1, 2004 any adopted children who enter the US on an IR-3 visa will automatically receive a Certificate of Citizenship within 45 days of entry into the United States. Children will no longer be issued a Permanent Resident Card.

**IR4 Visa:** If both parents did not meet the child before legal finalization of the adoption or if the child entered the United States through an escorted adoption, the child will enter the United States on an IR4 Visa. All children entering the United States on an IR4 visa must go through the re-adoption process in order to be considered US Citizens and apply for proof of citizenship.

Some states have issued laws that do not require families to go through the re-adoption process even if their children entered the United States on an IR4 Visa. Despite these laws, it is Children’s Hope’s position that all children entering the United States under IR4 Visas should be readopted according to the laws of the family’s home state. Your child will become a US

citizenship on the date of the adoption/re-adoption in your State. CHI asks all families to send us a copy of your final adoption decree from the country AND a copy of your State's adoption/re-adoption decree so that we may close out your file.

It is important not to delay in beginning the adoption/re-adoption process at home. If something should happen to you before you are able to complete the adoption /re-adoption process in your home state, the child's future could involve a return to the foreign country. A child over the age of 16 can be deported if involved in criminal activity if he/she is not legally considered a US citizen.

## Legalizing the Adoption

*Laws vary from state to state*, so we recommend that you contact a local lawyer experienced with international adoption and legalize your adoption in the US. Your adoption social worker should be able to provide you with some names of experienced adoption lawyers in your area. Local parent support groups can also be a tremendous help in providing information about their re-adoptions/ adoption recognitions.

If you are single parent who traveled to adopt or if you are married and both of you traveled to complete your adoption and both parents saw your child before the adoption ceremony and participated in the adoption ceremony, then under **federal law**, nothing more is technically required - but **most states encourage “re-adoption” or “recognition” upon your return.**

However, if you are married and only one parent traveled to complete your adoption, OR when you both traveled, you did not see your child(ren) until after the adoption was legally finalized, you are required to “adopt/re-adopt” under state law. Different states have different procedures to “re-adopt”, “register” or “recognize” your foreign adoption upon your return.

**The following is an article written by Dana Wiele, an adoption attorney in St. Louis. Dana offers his advice on completing legal matters following your adoption.**

When you complete the adoption of a child in a foreign country, you become the parent of your child under the laws of that country. Most US states have laws regarding the effect of adoptions completed in foreign countries. Many US child-placing agencies and foreign governments also have policies requesting that the adoptive parents either complete an entire adoption of the child once they have returned or that they obtain a formal decree from a court of their state recognizing the adoption.

Most adoptive parents will want to establish a birth certificate in the records of their state of residence so that the child's birth and their parentage may be verified. Birth certificates will be necessary for your child when they attend school, sign up for camp or perhaps if they wish to adopt a child in the future. Another good reason to complete recognition of a foreign adoption is to change your child's name or to correct any misspellings in the presentation of your child's name following the foreign adoption. Only a court can change your child's name. Agencies such as the Immigration and Naturalization Service have no power to change a name.

Still other parents may seek to obtain a formal order recognizing the effect of the foreign adoption because they are contemplating a divorce which will involve the issuance of an order of child custody or the parents may wish to assure a guardianship provision in their wills. Some states, such as Missouri, have laws which declare that an adoption properly completed in a foreign country will have the same force and effect as an adoption completed in the parents' home state. Arguably, nothing needs to be done by adoptive parents residing in these states to make the adoption "completely official" in the eyes of their own state. In fact, adoptive parents residing in these states sometimes choose to rely on the protection of such laws and choose not to seek a formal order from a court. Some states in this category will even permit the adoptive parents to apply for a new birth certificate without going to court. In other states, the process is really more of a paper filing exercise and an informal review than anything else. The end result is the same, however, as a court of your home state issues a document.

The process in obtaining a formal court decree from your state varies. There is sometimes variation from county to county inside a state as well and some states do not have a mechanism for formally recognizing a foreign adoption decree.

Generally, your lawyer must present the following items (with translations) to the court:

- √ certificate of adoption
- √ birth certificate
- √ green card or certificate of citizenship;
- √ adoption decree
- √ abandonment decree or abandoned baby acceptance certificate
- √ a copy of your home study
- √ a listing of your expenses

Generally, it is necessary to appear in court with your child as well.

To sum up this topic, I offer the following thoughts as guidance:

- I practice law by license in Missouri and Illinois only, so I would not purport to be qualified to give a legal opinion as to what the law is or what protections are necessary outside of Missouri and Illinois. I do want to inform readers residing outside of those two states that these processes exist and I would encourage adoptive parents residing outside of Missouri and Illinois to consult an adoption attorney residing in their state of residence for detailed guidance and advice.
- If your adoption agency or the foreign government instructs you to complete a full adoption of the child, you may wish to explore whether the formal recognition by a court in your county of residence of the foreign adoption will be sufficient. The main reason for preferring the recognition of the foreign adoption over going through an entire subsequent adoption in the United States is the monetary. The cost of the recognition can be expected to be far less than the cost of completing a full adoption. The time required to complete a recognition is usually less as well;
- If you live in a state which has a formal procedure for obtaining a court decree declaring your foreign adoption to be valid for all purposes, including inheritance rights, it is best to avail yourself to that process, even if you can obtain a domestic birth certificate otherwise. Given that you can obtain a court order in your state of residence which resolves any doubt as to the status of your child, your parentage and

all rights involved, why would you not want to obtain such an order, particularly if you expect that your work may move you and the child from one state to another;

- If the name on your child's green card does not match up to the name on your foreign adoption documents, it is advisable to have a court change your child's name. The INS has no authority to change anyone's name. A recognition procedure is an excellent way to change a child's name without incurring additional costs.

## State Birth Certificate

It is important for you to obtain a state birth certificate for your child. This document will be needed at various times in your child's life such as baptism, school enrollment, camp enrollment, marriage, to apply for insurance, and if your child decides to adopt when they are older. Each state has its own requirements about how to obtain a State Birth Certificate. In some states, a legal name change may be required. You will probably need to obtain English translations of adoption documents in order to apply for this certificate. Your State's Division of Vital Records office or Department of Health will be able to provide you with information on how to obtain a Birth Certificate for a child adopted internationally. If you complete a re-adoption in your state, your attorney may apply for the Birth Certificate for you.

**After obtaining your child's State Birth Certificate, you can use it to secure a social security card in the American name you have selected for your child.**

## Social Security Card

Your child will also need to have a social security card. You can apply at your local Social Security Office. Take with you an SS-5 application (the form can be downloaded on the government web site at [www.ssa.gov/ssnumber/](http://www.ssa.gov/ssnumber/)), the original and a copy of your child's birth certificate, the original and a copy of your child's adoption decree, passport or Alien Registration Card (green card), proof of citizenship, and parent's identification (drivers license or passport). There is no cost to obtain a social security card. The card will be mailed to you in approximately 2 weeks.

If documents contain your child's birth name, the social security card will be issued in that name. That is OK. Once you obtain the State Birth Certificate and proof of citizenship you will be able to request the name change and update the Citizenship status of your child in one visit. Simply provide the updated information (copy of State Birth Certificate and copy of Proof of Citizenship) to the Social Security Office. The child's Social Security Number will remain the same, but the new status will be documented and a new card will be issued. **THIS IS VERY IMPORTANT!**

*It is very important to update the Social Security Office on your child's citizenship status. Your child will miss out on benefits provided only to US citizens if their status is not changed.*

## **Citizenship**

The Child Citizenship Act of 2000 (Public Law 106-395) went into effect of February 27, 2001. Your child became or will become an automatic citizen if and when all the following criteria are met:

- 1) Your child is under 18 years of age,
- 2) At least one parent is a US citizen,
- 3) Your child is residing in the US in the legal and physical custody of the US citizen parent pursuant to the lawful admission for permanent residence.
- 4) Your child was adopted pursuant to a **full, final and complete adoption**.

The following is how the law is interpreted by your child's country of origin.

### **CHINA /ETHIOPIA/ VIETNAM / RUSSIA/:**

If your child entered the US on an **IR-3 visa**, meaning the adoption is a full, final and complete adoption, both parents traveled and saw the child before the adoption took place in-country (for Ethiopia, if both parents traveled on the 1<sup>st</sup> trip of two trips) ; your child is now a US citizen or will be a citizen upon entering the US. Your child's date of citizenship will be the date he/she entered the US. Please send us a copy of the Chinese/Ethiopian/Russian/Vietnamese Adoption Decree upon your return.

If your child entered the US on an **IR-4 visa** (For Ethiopia – If only one parent traveled on 1<sup>st</sup> trip or you only made one trip, that will be an IR4 visa) (or if only one parent saw the child before the adoption took place), you will need to readopt in your state of residence before your child will become a US citizen. Once your child is re-adopted in your state, he/she will meet the final criteria, and he/she will become a US citizen on the date of re-adoption. In the re-adoption process a legal name change can be made. Please send us a copy of the Chinese/ Ethiopian/ Russian/ Vietnamese Adoption Decree upon your return AND a copy of your state's re-adoption decree.

### **COLOMBIA:**

Your child entered the US on an **IR-3 visa**. You are required to submit a copy of the final decree of adoption from the courts in your state and proof of US Citizenship to the Colombian Government.

## **How to Obtain Proof of Citizenship (rev. 6/05)**

If your child entered the US on a IR-3 visa, they will automatically received a Certificate of Citizenship within 45 days of entering the US.

If your child entered the US on an IR-4 visa, you need to apply for proof of Citizenship after re-adoption has taken place in your state of residence. You will file form N-600 with US immigration.

## **Hope for Children Act (H.R. 622)**

The Hope for Children Act was signed into law on June 7, 2001 and took effect on January 1, 2002.

WASHINGTON — The Internal Revenue Service issued guidance on the expanded adoption credit included in the Affordable Care Act. The IRS also released a draft version of the form that eligible taxpayers will use to claim the newly-expanded adoption credit on 2010 tax returns filed next year.

The Affordable Care Act raises the maximum adoption credit to \$13,170 per child, up from \$12,150 in 2009. It also makes the credit refundable, meaning that eligible taxpayers can get it even if they owe no tax for that year. In general, the credit is based on the reasonable and necessary expenses related to a legal adoption, including adoption fees, court costs, attorney's fees and travel expenses. Income limits and other special rules apply.

In addition to filling out Form 8839, Qualified Adoption Expenses, eligible taxpayers must include with their 2010 tax returns one or more adoption-related documents, detailed in the guidance issued today.

The documentation requirements, designed to ensure that taxpayers properly claim the credit, mean that taxpayers claiming the credit will have to file paper tax returns. Normally, it takes six to eight weeks to get a refund claimed on a complete and accurate paper return where all required documents are attached. The IRS encourages taxpayers to use direct deposit to speed their refund.

In order to claim the tax credit for an inter-country adoption, the adoption must be legally finalized. For children entering the United States on an IR-4 Visa, re-adoption must take place before claiming the adoption tax credit. For children entering the United States on an IR-3 Visa, the adoption was legally finalized overseas.

For clarification on questions related to your particular tax credit scenario, you can contact the Internal Revenue Service at 1-800-829-1040. You can also find IRS Publication 968 "Tax Benefits for Adoption" on the internet at <http://www.irs.ustreas.gov/pub/irs-pdf/p968.pdf>

## State Tax Credits

To find out if your State has an adoption tax credit, check your States website using the address: <http://www.state.yourstate.us> and then search under “adoption tax credit”.

Residents of the State of Missouri are fortunate to have a state tax credit of \$10,000.

**\*For additional information on the federal tax credit, contact your local Internal Revenue Service office. We also suggest that you contact your state tax office to ask them about local tax credits for adoptions.**

## Medical Insurance Coverage for Adopted Children

### **FEDERAL**

Under 1993 amendment to Employee Retirement and Income Security Act, employer-sponsored health care plan must provide coverage for adopted children to the same extent as other dependents. (Self-employed individuals may have clauses regarding pre-existing conditions.) Coverage must begin as of the date the adoptive parents assume a legal obligation to provide for the child. (Usually long before adoption complete and in many cases prior to physical custody given to the adoptive parents.)

**It is a good idea to confirm medical coverage and starting dates with your insurer prior to accepting assignment of a child.**

## Post-Adoption Forms

The following forms can be printed off the USCIS web site at [www.uscis.gov/forms](http://www.uscis.gov/forms) :

- N-600 (Application for Certificate of Citizenship)
- DS-11 (Application for a US Passport or Registration)

### **N-600 (Application for Certificate of Citizenship):**

If your child entered on an IR-4 visa, this is the form needed to apply for the US Certificate of Citizenship for your adopted child. There is a \$420.00 fee (as of 1/10/10) for the submission of this form and the form and instructions can be downloaded from the CIS website. Please see instructions on form for a detailed list of documents that must be submitted along with the application. Please send in application and supporting documents to your local CIS/INS office.

**DS-11 (Application for a US Passport or Registration):**

If your family is planning a trip outside of the US, you will need to apply for a US passport for your child. Please remember that passports do expire and need to be kept current. Details of photos and documents that must be submitted with the application are included in the application instructions. A social security number is necessary to apply for a US passport. This passport application along with supporting documents should be submitted at your local post office. Both parents must be present at the time of application and show proof of identity. It is not necessary for the child to be present.

**Closing out your CHI File**

In order to close out your adoption case file with Children's Hope International, you will need to submit copies of your child's adoption documents from your adoption country as well as copies of your child's US adoption documents. These copies should be mailed to the St. Louis office at the following address:

**Children's Hope International  
11780 Borman Drive  
St. Louis, MO 63146**

*We also enjoy receiving adoption stories for inclusion in our newsletters and photos of your child(ren) to decorate our office!*