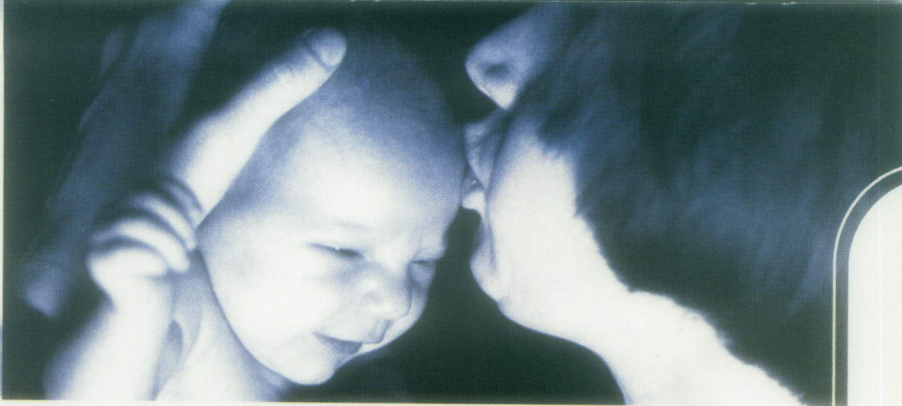


"ADOPTION"

— A GUIDE FOR MEDICAL PROFESSIONALS —



CENTRAL ADOPTION RESOURCE AGENCY



Medical practitioners play a very vital role in influencing health & social decision that have lifelong consequences in the lives of their patients. In the field of adoption, their contribution is of special significance. They are important partners who work closely with Counsellors and other allied professionals.

ADOPTION SERVICE

Over the years, adoption has become more of a child-oriented service. Adoption agencies are responsible for ensuring the rights of the child to family as per the U N Convention on the Rights of the Child 1989. Adoption is now a regulated activity. Only agencies recognised by the Government can deal with adoption placement of unrelated children. Direct adoption placement by Hospitals, Maternity Homes and Nursing Homes is not permitted as per Government regulations. These agencies function within the framework of norms and guidelines laid down by the Government. Professionally trained workers provide appropriate counselling and follow established socio-legal procedures, which safeguard the interest of the adoption triad, the birth parents, the child and the adoptive parents.

CHILDREN WHO CAN BE ADOPTED

He or She may be a child relinquished by his/her parents/guardian. He or She may be a child found abandoned. Such a child must be referred to the Child Welfare Committee (CWC) through the police. The CWC has the sole authority to declare the child free for adoption under the Juvenile Justice (Care & Protection of Children) Act, 2000. All such unrelated children can be adopted through licensed/recognised adoption agencies.

PERSONS WHO CAN ADOPT

Married couples undergoing treatment for infertility. Married couples having secondary infertility. Married couples voluntarily opting for adoption. Single person desiring to adopt.

ADOPTION PROCEDURES

PERTAINING TO CHILDREN:

The birth parent/s relinquishing a child have to execute document of surrender in favour of the adoption agency, duly witnessed by any authority of the hospital/nursing home and a relative and a waiting period of 2 months is given to the birth parents to reconsider the decision. After the prescribed period is over, the child is considered legally free for adoption. In case of an abandoned child, the CWC after due investigations declares the child as destitute and free for adoption. The child then becomes free to be placed in adoption. The children taken into custody are either placed in institutions or with foster families.



PROSPECTIVE ADOPTIVE PARENTS (PAPs)

A social worker from an adoption agency provides guidelines and support to pre-adoptive parents and helps them to make an informed decision to adopt. This process is called pre-adoption counselling. A Home Study is prepared by the professional social worker. Additionally, the parents are required to submit documents regarding their health status, infertility status (optional) and financial status etc. Once their application is approved, a suitable child is shown to them. After they accept the child, the placement is legalized. The placement is followed up for a period of 1 to 3 years as per the court's requirement. The agency's social worker is always available as a support to the family.

MEDICAL PRACTITIONERS AND ADOPTION

Close partnership between medical and adoption practitioners can help in fulfilling the desire of persons wanting to parent a child. Childless couples usually tend to seek advice of their physician in whom they repose a great deal of faith and trust. The medical practitioner plays an important role in suggesting and discussing the adoption alternative with them. It is more likely to be acceptable to them.

YOU CAN HELP PAPs

Infertility treatment can be long drawn and can be emotionally and psychologically stressful. Suggesting adoption as an alternative at the appropriate time may help them consider adoption as a viable option. At this point, you could refer them to recognised/licensed adoption agencies for more information and guidance. You can display posters and pamphlets in your clinics/nursing homes. You can also avail of the services of adoption practitioners to guide & counsel the pre-adoptive parents on an individual or group basis. This could also be arranged at your clinic. You can arrange meetings with other pre and post adoptive families to gain from their experiences. Similarly, you too could put them in touch with adoptive families known to you.

BIRTH PARENT

You can guide the birth parent to make an informed decision about parenting or relinquishing the child. You can also seek the assistance of a counselor from an adoption agency in this regard. In case they decide to relinquish the child, you can refer them to a recognised/licensed adoption agency. You need to record available information on the birth parent's medical history and current health status. This information will be helpful as the medical background of the parent/s may have a bearing on the child's health and development.

THE CHILD

You need to record and maintain detail of the child's birth history and subsequent medical condition. This information will help the adoption agency as well as the adoptive parents for the child's future development. In giving an assessment of the health status of the child proposed for adoption, you need to be sensitive to the circumstances of the child's birth and to the physical and emotional neglect during the prenatal and postnatal period. You need to prepare adoptive parents for the initial adjustment period and emphasize the importance of TLC (tender loving care) in overcoming the effects of early deprivation. Even if the mother has decided to relinquish the child on birth, you can ensure that she receives adequate nutrition as this has a bearing on the child's future. You can guide parents on post adoption issues related to child's health, behaviour and/or adjustment as well as about sharing the fact of adoption with their child. You can also consider associating yourself with a particular children's home and provide your expertise in reducing mortality and morbidity of the children.