

Lesbian, Gay, Biracial and Transracial
Foster and Adoptive Educational Support Group
Katherinne Anne Lehmann
Wayne State College

Group Proposal
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Introduction

During the last decade, there has been rise in the visibility of families headed by lesbian, gay, bisexual, and transgender (LGBT) parents (Child Welfare Information Gateway [CWIG], 2011). Almost all states allow gay and lesbian adults to foster children (Howard & Freundlich, 2008). This is thanks to a persuasive effort to mobilize and encourage LGBT parents to pursue foster care and adoption, as a way to add to their family and at the same time, solve the foster care crisis in the United States (Family Equality Council [FEC], 2013). It is estimated that there are five times the numbers of prospective LGBT parents, than there are youth in foster care waiting for a home (Gus, 2013). The LGBT community continues to remain an untapped parenting resource (CWIG, 2011). However, this outpouring of love does not come without its problems. There are LGBT parents who continue to be overlooked or not provided the support that they need to be successful foster and adoptive parents. Injustice anywhere, is a threat to justice everywhere—Martin Luther King, Jr.

Review of Literature

For many, the number of children residing and aging out of the foster care system in the United States continues to be of concern. In 2012, human service statistics show that there were over 400,000 children living in foster care and 100,000 of those children were eligible for adoption, yet 23,500 of them aged out before finding a family during the same year in the United

States (FEC, 2013). State law and agency policies and practices, as well as the practices of individual workers, also can significantly hinder the adoptions of waiting children (Howard & Freundlich, 2008). FEC state by state statistics indicate there are 904 kids in Nebraska, 961 kids in Iowa, and 397 kids in South Dakota, who are currently available for adoption (2013).

As a solution to this predicament, the Allies for Adoption campaign is seeking to call attention to America's need for adoptive parents, and the massive pool of LGBT people who are currently being overlooked (Gus, 2013). LGBT individuals have historically been discouraged from fostering or adopting, however changes in legislation and policy over the past 10 years in some states reflect a more open attitude (Ariyakulkan, 2012; Mallon, 2007). With only two states having formal restrictions on gay and lesbian individuals from becoming foster and adoptive parents (Stoddard, 2013), the dream of becoming a parent is becoming a reality for many LGBT families.

However, there are unique challenges in working with LGBT prospective parents and depending on the jurisdiction and setting in which professionals work, these challenges may include laws, policies, and biases against this population on the part of other professionals (CWIG, 2011). The laws across the country that regulate marriage, adoption and foster parenting by gay men and lesbians are an inconsistent (AAP, 2013). Civil union and domestic partnerships do not confer the same legal rights, protections or benefits to

children that a civil marriage provides, which can be very problematic for LGBT families (AAP, 2013). The State of Iowa and South Dakota both have pro-LGBT foster and adoption laws and policies (FEC, 2013).

Nebraska is one of the two states that make it legally impossible for LGBT individuals to foster or adopt children (FEC, 2013). In 1995, the director of the Nebraska Department of Social Services issued a letter mandating that children not be placed in the homes of adults who identify themselves as homosexual and that such homes not be granted foster care licenses (Howard & Freundlich, 2008). This 18 year old policy continues to prohibit unmarried, unrelated adults who live together from being considered as foster parents, which includes homosexual couples, unmarried heterosexual couples and platonic roommates (Stoddard, 2013). Utah is second other state that has anti-LGBT laws and policies that prohibit LGBT individuals from fostering and adopting children (FEC, 2013). Nevertheless, LGBT individuals are continuing to fight for legislative amendments in these states. As a way to show LGBT families support and encourage public policy change, many professional and child advocacy groups in the United States have issued formal statements of support for adoption by LGBT individuals who demonstrate the ability to successfully parent these children (Howard & Freundlich, 2008). These organizations include the some of the most respected child-focused organizations in the United States. See appendix A for a complete list. As a result of these public endorsements, a growing

number of adoption agencies and professionals have been proactive in welcoming LGBT persons, and by doing so, they have yielded a larger pool of highly motivated and qualified prospective foster and adoptive parents and expanded the options for permanency for children (CWIG, 2011).

The Human Rights Campaign [HRC] indicates that there are half a million children living foster care with over 14, 000 of those children being cared for by gay or lesbian foster parents in the United States (2014). For many LGBT families, fostering and adoption is often their first and only choice (Mallon, 2007). While many families experience fulfilling outcomes as a result of the adoption process, other families face many challenges, especially with those children who meet special-needs status (LaFountain, 2011).

Typically, the special needs children that are placed in LGBT families come from homes that have been broken by death, divorce, drugs, alcohol, physical or sexual abuse, illness, or financial hardship (HRC, 2014). Foster parenting requires love, empathy, patience and tenacity, as well as the courage to advocate on behalf of the child (HRC, 2014). LGBT individuals have also had to come to terms with many difficult feelings that may be similar to what children in foster care are experiencing (CWIG, 2011). The LGBT community has endured oppression; however, this has led its members to develop a variety of coping skills (Shallcross, 2011), that can be used to support an abused or neglected child through the healing process.

Many children and youth who are fostered or adopted have experienced trauma, abuse and or disruption of prior placements and given their experiences they are likely to present challenging and difficult behavior (Mallon, 2012). Like other foster and adoptive parents, LGBT parents are interested in seeking ways to incorporate their children into their lives and help them make a smooth transition into family life (Mallon, 2012). Like their heterosexual counterparts who adopt or become foster parents, they will at various times need supportive services (Mallon, 2012).

However these supportive services are not always available for the LGBT foster and adoptive parents. Research has shown that LGBT families found it increasingly difficult to obtain necessary support services, such as respite, child care, dental, medical, and mental health services for the children in their care (Ariyakylan, 2012). Because many heterosexual service providers, counselors or foster and or adoptive families do not typically feel the experience of living in a heterosexist society, it is often difficult for them to recognize their heterosexual privilege (Shallcross, 2011) and the difficulties LGBT families have in accessing specific supportive services for family to meet their needs.

The National Resource Center for Permanency and Family Connections site that LGBT parents are particularly vulnerable to feeling that they have to prove their worthiness as parents in a different way than do their heterosexual and cis-gender counterparts (Mallon, 2012). They might be

coping with the stress of the environment and people not being ready to accept them as parenting equals (Shallcross, 2011). The time after the adoption goes through can also be particularly challenging, in part because same sex parents often lack role models to look to for guidance (Shallcross, 2011). Accessing an adoption competent therapist can be hindered because referral sources such as adoption agencies, pediatricians, schools and insurance companies often do not know which community professionals have the relevant experience and working knowledge (Brodzinsky, 2013), of the LGBT population.

It is best practice for all social service agencies that place children to be aware of the range of supports in their communities that have been specifically developed to meet the needs of gay- and lesbian headed families (Howard & Freundlich, 2008). With recent changes in child welfare, many state human services departments have outsourced or contracted out their foster and adoptive support services to private agencies. These private agencies may have a contract that says they can't discriminate, but they may not be required to provide specific LGBT training for the families they serve (Serdjenian, n.d).

The 2010 Census indicated that many same sex couples raising children in the Midwest, with 761 couples in Iowa, 462 couples in Nebraska and 151 couples in South Dakota (FEC, 2013). The Iowa Foster and Adoptive Parents Association[IFAPA] website indicated that it provides support to 2,000 foster

and adoptive parents each month, but makes no mention of any type of specific LGBT support group offered in the state of Iowa (IFAPA, 2014).

South Dakota contracts its supports arm Children's Home Society and their website also makes no mention of specific LGBT support to the foster and adoptive parents it serves. Since LGBT foster parenting is not legal in Nebraska, it is expected that would not be any type of purchased service for the LGBT population.

This service gap could be addressed by forcing both state and local child welfare agencies to systematically assess their efforts to combat homophobia and heterosexism by reaching out to other gay and lesbian adoptive parents or other LGBT friendly professionals in their communities (Howard & Freundlich, 2008). Research has shown that exposure makes the greatest difference in changing people's attitudes concerning the LGBT community (Shallcross, 2011). Gender competency training equips service providers with information about the unique needs of LGBT parents and their children and suggestions for institutional changes that make their institutions are welcoming and inclusive of LGBT families (FEC, 2012).

Adoption practitioners should consider offering support groups and trainings specifically aimed at LGBT who are seeking to foster or adopt; if this is impractical they might consider partnering with others to offer such resources (Goldberg, 2012).

Relevant Group Work

LGBT foster and adoptive families interact with a variety of professionals – pediatricians and other health care providers, teachers and other school personnel and, possibly, mental health professionals – who may not expect or fully understand the structure of their family lives (Howard & Freundlich, 2008). Group work can often be helpful, as it provides a safe place for building a support network and allows for individual self-exploration which can be a challenge for LGBT individuals depending on the community in which they live in (Shallcross, 2011). Psychoeducational groups allow for themes, provide structure, encourage sharing and feedback among members, increase self-awareness, are aimed at providing change in members daily lives and are well suited for populations of all ages (Corey, 2012).

Support groups are particularly beneficial for gay or lesbian adoptive families (Howard & Freundlich, 2008). A support group is by definition, a group of individuals who gather voluntarily on a regular basis to meet certain needs that they have in common (Lewis et al, 2003). It is best practice to encourage all LGBT families to connect with other LGBT families, as well as, other straight families through support groups (CWIG, 2011). A parent who feels interpersonally connected and supported will find it natural to nurture a child (Smith, Cudaback, Goddard, & Myers-Walls, 1994).

Counseling Interventions Used

LGBT parents want to meet other LGBT people who have taken on the challenge of parenting (Mallon, 2012). Individual psychology parenting practices and interventions have been historically successful in helping parents with the challenge of raising children (Allen, El-Beshti, & Guin, 2014). It is known that working with families from an Individual Psychology perspective, practitioners can offer encouragement to parents and children who are building their families through adopting. Democratic parenting programs encourage parents to have a balance between order and freedom by establishing and setting limits for children (LaFountain, 2011).

Building a relationship, exploring the member's lifestyle, helping the member gain insight into his or her lifestyle, and reorienting and reeducating the members are the four phases of the Individual therapy process (Kottman, 1995). Group leaders can fundamentally support LGBT individuals by helping them feel understood and prepare to recharge and take care of themselves (Shallcross, 2011). Leaders use tracking, restatement of content, reflection, reflection of feeling, questioning strategies, active interaction, and encouragement and by setting limits to build an egalitarian relationship (Kottman, 1995). It is important that the leader is clear about the objective of the group with all its members (Kern, Hawes, & Christensen, 1989).

Understanding the roles of systems in the lives of parents and children is critical to the success (Allen, El-Beshti, & Guin, 2014), during the assessment phase. The role of the group leader is to be supportive and to

cultivate resilience that will help them rebound when they experience marginalization (Shallcross, 2011). Being unbiased and having the ability to talk to other families-gay and straight- is essential (CWIG, 2011).

Education will be presented through discussion of factual information and skill building through the use of exercises (Corey, 2012) in small and large groups to reorient and reeducate members. Parenting is a learned skill, and parenting attitudes, knowledge, skills, and behaviors can be positively influenced with education and practice (Smith et al., 1994). Practicing newly acquired knowledge and skills in group helps parents consolidate what they have learned before they practice them in other situations (Kottman, 1995).

Evidence of Effectiveness

As with all parents, LGBT foster and adoptive parents should have access to permanency support, with particular factors that need to be taken into account in order to provide effective support (Ariyakylan, 2013).

Evidence shows that support groups designed specifically for foster and adoptive parents do enhance their ability to meet the needs of children (Lewis et al., 2003). Groups that are supportive, encouraging, accepting, expressive, honest, and non-judgmental create an atmosphere where members are comfortable enough to openly express their fears, challenges, and successes (Lewis et al., 2003). Support groups can be powerful if they bring together parents who have learned to respond effectively to adversity with those struggling to manage a challenge (Smith et al., 1994). One of the

most valuable and informative resources available is people who are willing to share their experiences (Serdjenian, n.d.).

LGBT Group Proposal

Purpose of the Group

The purpose of the LGBT foster and adoption parent educational support group is to provide a safe environment where families can gather, socialize, educate, advocate and support one another through the journey of parenting. This group will allow members to experience the emotion of belonging and feeling connected as they work towards desired change (Corey, 2012). The educational component of the support group will cover relevant topics that are pertinent to LGBT families, while at the same time follow the National Extension Parent Education Model [NEPEM].

Despite the higher disruption rates and adjustment problems that adoptive families have when adopting, the majority of adoptions are successful when the parents are informed of realistic expectations and given support and encouragement (LaFountain, R. (2011). For this reason, the NEPEM model is a perfect fit for a LGBT educational support group.

Measurable Objectives

The main objective of this group is to provide educational support to sustain LGBT families, as they care for foster and or adoptive children. Family stabilization is essential to successful long term placements. Education and

support can lead to stabilization. NEPEM has six main categories which include: care for self, understanding, guiding, nurturing, motivating and advocating are the six main categories.

Long-Term Goals

1. **Care for Self:** Parents learn to be flexible in parenting foster and adoptive children in a way that will promote a positive trusting relationship by exploring own personal parenting strengths.
2. **Understand:** Parents acknowledge children's regressive behaviors and how it may pertain to the way the child is coping with being in foster care, and or being adopted.
3. **Guide:** Parents devise and enforce a set of rules and standards that promote peace and consistency in the family.
4. **Nurture:** Parents learn new methods for working together to achieve harmony and balance in the LGBT family.
5. **Motivate:** Successfully resolve family tension by dealing with issues directly rather than avoiding them through outside pursuits to help children process and manage information.
6. **Advocate:** Parents develop a positive support system.

Population

The target audience for the LGBT educational support group is any lesbian, gay, bisexual, or transgender who has or is currently serving as a foster or and or adoptive parent. Potential members will be recruited by human services staff, upon approval of receiving a state foster and or adoptive license. All contracted agencies that provide support will post group leader contact information on their websites. Notification of the LGBT support group will also be extended at all continuing educational foster and adoptive trainings through newsletters. Flyers will be delivered and posted at identified LGBT friendly businesses and establishments. The ideal size of the

support group is 15 to 20 members. Shifts in attendance are to be expected depending on the time of the year. The group will run for 10 weeks in a non-religious LGBT friendly establishment.

Important consideration should be given the varying needs of the diverse LGBT community, by not discriminating and only offering support to those who have gone public with their orientation. There may be circumstances where individuals have not gone public with their sexual orientation, but still would like to attend. The process of coming out can be a very difficult process for many. For this reason, no one will be turned away. However, it will be shared that the purpose of this support group is designed to address the unique needs of LGBT foster and adoptive parents. Members will never be pressured to come forward with their orientation, unless they voluntarily choose to do so.

Group Leader Qualifications

The LGBT group leader should in some way reflect the diversity of the group and have working knowledge of culturally diverse group populations. This is ideal, in terms of best practice, however this is not absolute. It is essential that the leader is fundamentally LGBT friendly and have knowledge of the strengths and vulnerabilities in relationship to this population. It will also be helpful for the leader to have an understanding how the role of one's sexual orientation can impact in micro, mezzo, and macro environments in which they live.

The LGBT leader should have experience in providing parent education with groups. Corsini states that he is “absolutely convinced that 99% of the success of a leader depends on his or her character-personality, values, judgment, intelligence-and that training has only about 1% to do with success” (Corsini, 1988 p.). They must adhere to the ethical practices of the counseling profession. It is also important that they have knowledge of the child welfare foster and adoptive system. They should be familiar with the foster and adoption training and licensing process.

Never underestimate the power and resilience of one committed and passionate soul (Lewis et al., 2003). It is hoped that the parents themselves can develop leadership skills to gain greater control over their lives and their stress by leading the group process and establishing its own agenda (Smith, Cudaback, Goddard, & Myers-Walls, 1994) after the 10 sessions. The professional group leader can be available as a resource person (Smith, Cudaback, Goddard, & Myers-Walls, 1994), if needed.

Screening Questions

The screening questions for the LGBT support group were designed to be very simple and non-discriminatory. Any participant that is interested in attending the group will need to call the phone number that is listed on the invitational flyer. Participants will be screened by asking the following questions: 1.) Are you currently LGBT foster parent? 2.) Are you a LGBT parent raising an adoptive child? 3.) Are you LGBT and interested in

becoming a foster or adoptive parent? All group participants must RSVP in advance. The location and time of the training will be disclosed after the leader has determined that the individual participant meets criteria, however no one will be turned away. See Appendix B for sample invitation.

Group Rules

The group leader will disclose that there are three non-negotiable group rules shall include confidentiality, respect and safety. Confidentiality is essential for any family who is providing care for a foster child. All identifying information about a foster child is confidential. Group leaders must intervene, should this become an issue. Adoptive parents have the legal right to share information about their children, but will only be asked to do so voluntarily. Due to the ongoing discrimination that many LGBT families face, it will be imperative that the all group members interact in a respectful way to each other. A respectful environment will create an atmosphere that will be safe for sharing. All other group rules will be developed by group members at meeting one and will be reviewed at subsequent meetings. All rules will be written on poster board and posted in group area.

Theoretical Approach

The LGBT foster and adoptive educational support group will be designed and guided using the Adlerian theory. The Adlerian approach allows the group leader to be flexible in adapting interventions to each client's unique life situation, which makes this approach suitable for working with a

wide range of problems (Corey, 2012). The Adlerian theory allows group participants learn about social problems and solutions first hand, and they give support to others and get help from others (Corey, 2012). Rudolf Dreikurs advanced the parent education field with identification of tenets of good parenting, which are now the basis for many current Adlerian-based parenting education programs (Allen, El-Beshi, & Guin, 2014).

The National Extension Parent Education Model outcomes blend well with many of the Adlerian basic assumptions and key concepts. Exercises that place great emphasis on family processes, especially family atmosphere, birth order and the family constellation (Corey, 2012) will be used. A basic premise in Adlerian practice is that if leaders can encourage its members to change their thinking, members will then change their feelings and behaviors (Corey, 2012). For that reason, it will be necessary to incorporate some Cognitive Behavioral therapy techniques.

Meeting One: LGBT Foster and Adoptive Support Group

Short-term objectives:

1. Parents clarify personal parenting philosophy.
2. Parents define, from their own perspective, the specific conflicts or issues occurring with their foster and or adoptive children.

Therapeutic interventions:

1. Establish a neutral zone for family members to express themselves without fear of retaliation by others.
2. Utilize technique to facilitate family members in talking openly about their feelings and emotions over present conflicts.
3. Ask the parents to share their hopes and dreams for their children.

Opening:

- Greetings
- Group Leader Introduction
- Icebreaker: Name Six...

This is a good exercise for building trust and helping team members to get to know each other better. The team members sit in a circle with the facilitator sitting in the middle. The facilitator chooses one of the team members to start and asks the team members to name, in turn, six places that they have visited. The process is repeated with another subject, but starting with the next team member in the circle. Continue the session with additional subjects. It's best to start with safe subjects — like 'places you have visited' — and increase the relevance as you progress. Other possible subjects are: Roles that you have had. Things you are good at. Things that you find difficult.

Large group activity:

- What would you tell others about who you are? List three adjectives that describe you?
- Make a list of fears of about sharing?

Establish Group Rules:

- Discuss and list all rules on news print. Hang in group meeting area after completion.

Small Group:

- Describe what it was like for you to grow up in your family? Describe your birth, foster and or adoptive children? (be sure to maintain confidentiality, if it applies)

· What expectations do you have for your children? Pair off in group of two. Review these questions and share with one other person in the class for at least 10 minutes. Be prepared to introduce and describe your partner each other to the class.

Closing:

- What did you hear yourself or someone else say that seemed especially significant to you?
- Questionnaire

Meeting Two: LGBT Foster and Adoptive Support Group

Short-term objectives:

1. Parents identify and replace distorted cognitive beliefs that relate to parenting.
2. Parents list alternatives to their current parenting methods.

Therapeutic interventions:

1. Ask parents to track their thoughts and emotional reactions during problematic situations with their child.
2. Review these cognitive messages for distortions.
3. Have parents brainstorm alternative styles of parenting that they have learned as a result of the speaker.

Opening:

- Greetings
- Review group rules-

Are these working for us?

Do we need to add to the list?

- Ice breaker:

Large Group Activity:

- List problematic behaviors on news print

Small Group Activity:

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Closing:

- Are there changes that we would like to make to group?
- Questionnaire

Meeting Three: LGBT Foster and Adoptive Support Group

Short-term objective:

1. Parents confer with other group members frequently to increase mutual support in parenting.
2. Parents use structured dialogue techniques to ensure positive parental communication for problem solving.
3. Family members demonstrate empathy and respect for other individual's point of view.
4. Participate in activities that build family unity and bonding.

Therapeutic interventions:

1. Role play respectful communication rules for use in family meetings, such as taking turns talking, paraphrasing, or reflecting speaker's position before responding, treating each other with respect, and no lecturing.

2. Suggest way to build family intimacy, such as social or recreational activities (develop and use activity).

Opening:

- Greetings
- Icebreaker:

Large Group Activity:



- Acting as if...

If you were acting as if you were the couple you would like to be, what would you be doing differently? What would your relationship look like?

- If a close friend were to see you 6 months from now and your relationship had significantly improved, how would you be acting differently as a couple?
- What will be some initial indicators that you are headed in the right direction? (See also West et al., 2001.)

The use of I-messages is a respectful way for a person to express how something affects the individual sending the message. The focus is on sharing one's feelings as opposed to you-messages that often blame or nag. The tone is so much more respectful and unlikely to escalate defensive or negative emotions. Parents who use I-messages model effective expressions of emotions for their children.

Small Group Activity:

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Closing:

- What, if anything did you learn today?

Ball of String Activity

This is a good exercise for winding up an event. It can also be modified for use as an introduction or for ensuring that everybody gets to make a contribution. Everyone sits in a circle. One person holds the end of a ball of string and shares their feelings about the event and then tosses the ball to someone else without letting go of the string. The person who catches the ball repeats the process. Continue until everyone has made a contribution. At the end there is silence and the strings, which are now crisscrossing the circle, are cut to symbolize the end of the group.

- Questionnaire

Evaluation plan for both process and outcomes

It is important to gather information in regards to the groups: use of time, participation, interest, decision making, next steps, and organization, facilitation, usefulness, and end results. Appendix C is a sample questionnaire that will be distributed at the end of every group. Completion of the questionnaire by members is highly recommended, but not mandatory. The support group leader will collect results and make any needed changes.

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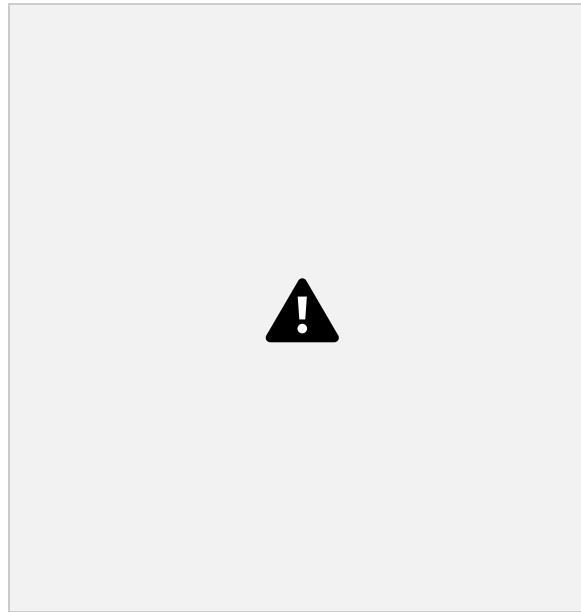
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Appendix A

- The Child Welfare League of America
- The American Academy of Child and Adolescent Psychiatry
- The American Academy of Pediatrics
- The American Bar Association
- The American Medical Association
- The American Psychiatric Association
- The American Psychoanalytic Association
- The American Psychological Association
- The National Adoption Center
- The National Association of Social Workers
- The North American Council on Adoptable Children
- Voices for Adoption

(Howard & Freundlich, 2008, Appendix B p. 42-44)

Appendix B



LGBT foster and Adoptive

Support Group

Are you currently LGBT foster parent? Are you a LGBT parent raising an adoptive child? Are you LGBT and interested in becoming a foster or adoptive parent?

We would like you to join us for a 10 week long support group voyage. We are seeking community minded LGBT individuals who want to share our foster and adoptive experiences by learning, supporting and networking with one another.

If so, join us...

We meet once a week at the public library in Sioux City, Iowa
Contact Kathy Lehmann at 712-111-111 or at kalehm03@wsc.edu for the time and location of meeting. RSVP is expected.

Confidentiality,

Respect and Safety

Appendix C

Please complete this questionnaire by circling the number.

1. The support group process was organized.

Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
5	4	3	2	1

2. The leader created an environment where I felt comfortable asking questions?

Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
5	4	3	2	1

3. We used our time wisely together.

Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
5	4	3	2	1

4. The support group met my needs.

Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
5	4	3	2	1

5. Our group leader presented instructions and guidance clearly.

Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
5	4	3	2	1

6. I was provided with support and education that is relevant to my job as a foster and or adoptive parent.

Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
5	4	3	2	1

7. Everyone was involved equally.

Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
5	4	3	2	1

8. I recommend this group to others.

Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
5	4	3	2	1

9. I would like to see the following topics explored:

10. I would suggest changes to the group by:

-Thank you!

LGBT Foster and Adoptive Support Group Leader