

**Ecuador Post Adoption Report Template:**

**An individual report for each child in a sibling group is required!**

**INTERNATIONAL POST ADOPTION REPORT**

Post-Adoptive Follow Up Date (DD/MM/YYYY):

Report Date (DD/MM/YYYY):

Post Adoption Tracking Number: \_\_\_\_ 30 days (for MAA) \_\_\_\_ 4 months \_\_\_\_ 8 months  
\_\_\_\_ 12 months \_\_\_\_ 18 months \_\_\_\_ 24 months

**1. General Information on the child:**

Current Name:

Previous Name:

Date of Birth (DD/MM/YYYY):

Current Age:

Children's Home Child Lived Prior to Adoption:

Date Child Left Previous Home and Placed with Adoptive Family (DD/MM/YYYY):

Zone Number of the UTA:

Sentence Date (DD/MM/YYYY):

Court:

Adoptive Birth Certificate: YES

Registration Date (DD/MM/YYYY):

Date of Departure from Ecuador (DD/MM/YYYY):

Disability: \_\_\_\_ Yes \_\_\_\_ No

Grade:

Type:

State of Health: Healthy \_\_\_\_ Yes \_\_\_\_ NO

Diagnosed Special Needs:

**2. Information about Adoptive Family:**

Mother

Father

Name:

Surname:

Nationality:

Occupation:

Workplace:

Email Address:

Home Address:

Country:

State:

City:

Home Phone:

Biological Children in the Family: (Repeat this section according to the number of children.)

Name and Surname:

Birthdate (DD/MM/YYYY):

Place of Birth:

Adopted Children in the Family: (Repeat this section according to the number of children.)

Name and Surname:

Birthdate (DD/MM/YYYY):

Place of Birth:

Place of Adoption:

### 3. Evolution/Development of the Child:

Weight:

Height:

*Discuss sphincter control if applicable.*

*Sleep: Sleep routine. Daily routine, weekdays, and weekends. Autonomy. Who is in charge of the routine? How many hours? How is the child woken up? Have there been any sleep issues? How were they resolved?*

*Language: Development. How are they doing with English? How are they learning it? How is speaking and writing developing? External supports needed. How is language being strengthened? Progress and prognosis? How often receiving services?*

*Food: How is child responded to dietary changes? Difficulties? Preferred food. Rejected foods. When does the child eat? Who is responsible for preparing the food? Who participates in meals with the child? What are the family routines?*

*Psychomotor Development: Progress in relation to their chronological age? Parents thoughts on development. Any specialists/services? Diagnosis and prognosis. What is strengthening the child in this area?*

*State of Health: Process for following up. Vaccinations. Follow up needed. Development of any medical needs/treatment. Name of doctor/specialists. Medications (name dose when it is taken). Why was it prescribed. Description of diagnosis. Any diagnosis cleared/overcame?*

### 4. Psychological Development:

*Behavior: Personality characteristics (positive/negative). Describe personality traits of the child (smiling, extroverted/introverted, affectionate, sensitive, etc.). Behavior in home versus previous behavior.*

*Tantrums. How are parents handling behaviors? Child response to parents. How does child relate to extended family. What activities does the child like/dislike? Relationship to peers. To whom is the child closest? Does child share emotions (happiness/joy/sadness/etc.)? Able to verbalize emotions? Treatment providers/services. Diagnosis and Prognosis. How often being provided?*

*Evolution: The difference between previous visit and this one. Achievements. Challenges. Advances in relation to their chronological age.*

*Development in the social field: How is your relationship with peers and people outside the family? Degrees of sociability. Social tools developed. Extracurricular activities participated in. Hobbies. Involved in the community? Adherence to social spaces.*

*Recreational activities of the child: What activities do they do on the weekends, holidays, and vacations? With whom? Extra classes? How is their performance?*

### 5. Family Development:

*Adaption: How did it go with the child coming into the family? Detail the adaptive process. Habits of the family and how they were modified or new habits generated for the adjustment of the child.*

*Achievements and how they define the adoptive family relationship. To whom is the child close?  
Adjustment of nuclear family and extended family?*

*Family Dynamics: Family routings during the week and weekend. Schedules. Activities. Responsibilities.  
Family issues that have arisen between visits. Family rituals. Is the family adapting?*

*Process of Attachment and Affective Bonding: Explain how the bonding is going since the adoptive child came into the home. How is the attachment with the father? How is the attachment with the mother? How is the attachment with the siblings? What are the difficulties the family is facing? How are they working to resolve them? What tools and resources is the family utilizing?*

*General Conditions of Habitability: Describe the family neighborhood. What is the community environment like? Community activities. How is the home organized? Maintaining the care of the home/cleanliness? How is the child's room maintained? What are the differences noticed from the country of origin to the current environment?*

#### 6.Social Development:

*Education of the Child: How was the education/care institution chosen for the child? How much time elapsed from the time arriving in the adoptive home to entering the education system? How did the child adapt? How are they doing in their academical development? Challenges? Following school norms? Relationship with peers/teachers? How completing academic tasks at home? Routine? Autonomy? How does the child get to school. Number of hours at school/home.*

*Development in the Social Field: Relationship with peers and people outside of the home. Degree of sociability. Development of social tools. Extracurricular activities. Hobbies. Adherence to social spaces.*

*Recreational Activities of the Child: What activities do they do on the weekends, holidays, vacations, etc and with whom?*

#### 7.Process of Revelation and/or Life History and Origins:

*Detailing if this occurs or not. Does the family disclose to others that they have an adoptive child? Does the family answer the child's questions/concerns/doubts about the biological family, adoption process, feelings that have generated, friends, country, the possibility to return? Child's desire to search for their origins. Is the family willing to accompany the child? Encouraging the child to keep language of origin?*

#### 8.Conclusions:

*Summarize the key points of the visits, and opinion/observations of the professional who visited the family.*

#### 9.Recommendations:

*Professional should give recommendations to occur before the next visit for the family according to the dynamics found.*

#### Signed:

*Professional who did the visit should sign and state the agency they represent.  
NO need to notarize or apostille.*