



## CHINA Adoption Overview

June 2020

**HISTORY OF HOLT IN CHINA:** Holt has over 60 years of unparalleled international adoption experience. Since 1993, we have also provided foster care, educational support and other child welfare services in China — a commitment that has helped us maintain a strong, collaborative relationship with the Chinese government. We have a skilled team of over 25 local Chinese staff who can follow up on child information and support families through travel. We are registered in China to provide child welfare services and facilitate international adoptions.

**INTERNATIONAL ADOPTION PROGRAM:** Through the years, international adoption from China has changed dramatically. China eased the one-child-per-family policy and families now have greater resources to care for their children — causing fewer child abandonments. Domestic adoption has also become increasingly common — enabling children, primarily healthy infants, to join loving families in China. Still, thousands of children in China who have special medical or developmental needs, or are older, need families. For these children, international adoption offers the best hope for a permanent, loving home.

### PROFILE OF CHILDREN

- We are placing younger children with manageable/correctable conditions, as well as older children and children with more moderate medical/developmental conditions. Many children are 2-4 years old at time of placement, but children through age 14 are waiting for families.
- We have gone from mostly girls to 50/50 boys and girls. Since China offers the option of choosing gender, and there is an overall preference among adoptive parents for girls, families wanting girls gravitate toward China. Because of this, the wait to be matched with a girl is significantly longer than the wait to be matched with a boy.
- We encourage families to be as open as possible in terms of age, gender, and special needs, in order to be matched in a reasonable period of time.
- Because most of the children in China are raised in orphanages, developmental delays are very common. Children with minor delays will likely catch up with their peers after arriving home, possibly with the help of speech or physical therapy. More serious developmental delays may be lifelong.
- All children in China have some medical or developmental condition or have no diagnosis but are older (over the age of 7). The following are some of the most common medical conditions we see in children adopted from China:
  - Multiple manageable/correctable minor special needs such as cleft lip and palate, club foot, small heart defects, treated syphilis, orthopedic issues such as digit differences along with a second condition
  - Manageable/correctable special needs such as repaired gastrointestinal abnormalities, moderate or complex heart conditions that may require surgeries, albinism, orthopedic issues like missing limbs, thalassemia that requires blood transfusions,
  - More involved special needs that may require ongoing medical management or are not correctible such as a complex heart conditions, vision or hearing impairments, cerebral palsy, spina bifida, dwarfism, albinism, HIV positive more involved urogenital issues like ambiguous genitalia, Down syndrome.

- They can be older children. China's waiting older children can be found on the photo listing.
- Families may be matched with a child any time after their home study is approved.

## **ELIGIBILITY**

- Couples must be married at least 2 years at the time of dossier submission. Cohabitation can be included in the total length of relationship. If either spouse has two divorces, the minimum length for the current marriage is 5 years.
- Both parents must be at least 30 years of age at the time of dossier submission. There can be up to 50-year age difference between the child and the younger spouse.
- The youngest child must be at least 3 years of age at the time of dossier submission, up to 5 children under the age of 18 in the home.
- Single women may apply.
- China requires minimum annual income of \$30,000 plus \$10,000 for each child currently in the home, and net worth of \$80,000 for couples and \$100,000 for singles.
- Body mass index (BMI) cannot exceed 40 for each applicant.
- If one spouse is healthy, China is open to a chronic well-controlled medical condition in the other spouse.
- For skin, thyroid, breast or testicular cancer, the applicant must be cancer free for at least 3 years. For other types of cancer, the applicant must be cancer free for at least 5 years.
- China is open to one or both applicants with a well-controlled mental health condition, such as anxiety or depression, with a positive mental health letter.
- Home studies for China must be done by a Hague or COA-accredited agency.

## **HOW CHILDREN BECOME AVAILABLE FOR ADOPTION**

Most children come into care because their birth families are unable to afford the cost of medical care needed to treat a medical condition that is evident at birth. There is no legal relinquishment process currently in place so child abandonment still occurs in China. Most children are abandoned in public places so they can be found and placed into government care quickly. Thorough birth family searches are completed by the provincial civil affairs department before any child is released for adoption.

## **HOW CHILDREN ARE MATCHED WITH FAMILIES**

After your home study and dossier are submitted to China, your wait for a referral begins. When a child's file is ready for international adoption, the CCCWA releases the file to the shared list. The shared list is an on-line database that adoption agencies have access to so that we can see the files for children who are ready to be matched with adoptive families. If we lock a child's file for your family during the shared list release, we will share the information with you right away. You have the option to decline a referral, without penalty, and ask to be matched again.

## **WAITING CHILD PROGRAM**

We first try to identify a family on our wait list for each child. This is through a Spotlight email to families in process. Most of our waiting children never make it to the China Waiting Child Photolisting and are matched by families who respond to the Spotlight email. When matching a child with a waiting family is not possible, we add the child to the China Waiting Child Photolisting. Children with moderate to major medical or developmental needs will typically be featured for home finding through our online [China Waiting Child Photolisting](#). Families may request files for waiting children, but they may not be matched until they have an approved home study. For families pursuing a Waiting Child, the total processing time can be reduced to 12 months or less.

## **PROCESS SUMMARY**

1. Confirm eligibility, apply and be accepted into the program.

2. Complete an adoption home study with a branch/cooperating agency in your state.
3. File I-800A for USCIS immigration approval (China is a Hague country).
4. Submit dossier to China.
5. Receive the child referral (“match”).
6. Once you’ve accepted the referral, submit the Letter of Intent (LOI).
7. Once you receive the Letter of Acceptance (LOA) from CCCWA and the necessary in-country appointments have been made, travel arrangements can begin.
8. Once Travel Approval (TA) is received from CCCWA, travel to China (1 trip, both parents or one parent and one companion, approximately 14 days), take placement of your child at the Civil Affairs office in the capital of your child’s province, sign adoption paperwork and register the adoption, visa processing at the U.S. Consulate in Guangzhou, once visa is issued, return to U.S.
9. Your child will become an automatic U.S. citizen upon arrival in the U.S. You will receive a Certificate of Citizenship 6-8 weeks after you arrive home.
10. Post Placement visits from your direct social worker will occur at 1, 6, 12 and 24 months after placement.
11. Re-adopt the child in a US Court of Law (optional but highly recommended).
12. Submit annual child updates 3, 4 and 5 years following arrival of your child in the U.S.

### **TIME FRAMES**

We would encourage you to be as open as possible in terms of age, gender, and special needs, so you can be matched in a reasonable period of time. Most families are currently completing the process in 2-2 1/2 years for children age 2-4 at time of placement. Families can complete the adoption of a Waiting Child from China in 12 months or less, from application to placement.

NOTE: As with any international adoption, timelines change and delays can occur. The above expected times are based on current processing and most recent history.

### **FEES AND COSTS**

Total cost is estimated between \$31,335 - \$38,395 from application through post placement, including travel and third party costs. Check the [China Schedule of Fees](#) for a breakdown of costs, and check here for information on [Financial Assistance](#).

### **HOW TO APPLY**

Families can [Apply Online](#)

### **HOW CAN WE HELP?**

If you would like to speak to an Adoption Advisor to discuss eligibility, have questions about the process, or to learn about our other adoption programs, you can reach us Monday – Friday, 8:00 am- 4:30 pm PST at [adopt@holtinternational.org](mailto:adopt@holtinternational.org) and (833) 346-9044.

## COMMON MEDICAL/DEVELOPMENTAL CONDITIONS IN CHILDREN FROM CHINA

**Albinism** is a genetic condition that causes less pigment in the skin, hair and/or eyes. Most people with albinism have pale skin and hair, poor vision, and are sensitive to the sun.

**Ambiguous Genitalia** (also known as intersex) means the external genitals are not clearly male or female. They may be incompletely developed or there may be characteristics of both sexes. Depending on the underlying cause, management may include hormonal therapy or surgery.

**Anal Atresia** (also known as anorectal malformation or imperforate anus) means there is no opening at the end of the digestive tract where the anus normally is. Early surgery is required to create an opening. Additional surgery may be required to improve bowel control. Some children may never achieve full continence.

**Arthrogryposis** causes stiff joints and abnormally developed muscles that restrict movement. Physical and occupational therapy can increase muscle strength and improve flexibility. Surgery may also be recommended.

**Cerebral Palsy** is usually caused by a brain injury during childbirth that affects muscle tone, movement, and motor skills. It can be relatively minor, causing weakness in legs or arms that often improves with physical therapy. Walking aids like braces, crutches or walkers may be needed. More severe forms can affect other body functions that involve motor skills and muscles, like breathing, bladder and bowel control, eating, and talking.

**Cleft Lip and Palate** usually occur together, but it is possible to have one without the other. Cleft lip is a split in the upper lip that happens during development of the unborn baby. Cleft palate is an opening in the roof of the mouth. The lip surgery is usually done at a very young age, along with a temporary repair of the palate. Permanent palate repair using a bone graft is usually done around age 7-8. Additional surgeries may be required to improve appearance and function. Ear tubes, speech therapy, and orthodontia may also be needed. *It should be noted this condition is often not seen alone in a child but rather in tandem with another manageable special need.*

**Developmental Delays** are common in children from orphanages, because they do not receive the same nutrition, activity, and individual attention a family would provide. This results in “institutional delays” that can put them behind in growth, motor skills, cognitive development, speech, and school. Adopted children often have a big growth spurt in size and development once they join their families. Some delays are lifelong and will require special education and therapies (physical, occupational, speech) to help the child reach their full potential.

**Ear Atresia** (also known as aural atresia) is the lack of an opening to the ear canal in one or both ears. It often occurs with **microtia**, which is an undersized or malformed outer ear. There may or may not be normal hearing once surgery creates an opening.

**Heart Issues** (Congenital Heart Defects) include murmurs, named for the “whooshing” sound of blood flowing through a hole in the heart. These are called atrial septal defects (ASD) or ventricular septal defects (VSD), depending on where they are located. Some are small enough that they close on their own by age 2-3, while others are so large they must be surgically repaired soon after birth. Other heart defects that require one or more surgeries include TOF (tetralogy of Fallot), PDA (patent ductus arteriosus), and PFO (patent foramen ovale). *It should be noted that some of these heart conditions are not seen alone in a child but rather in tandem with another manageable special need.*

**HIV** (human immunodeficiency virus) is a virus that targets the immune system, increasing the risk and impact of other infections and diseases. Without treatment, HIV might progress to AIDS. However, modern advances in treatment mean that those who have access to life-saving medications very rarely develop AIDS and are expected to live long, healthy lives.

**Hydrocephalus** is a buildup of fluid in the brain that can cause pressure and enlargement of the head. The most common treatment is surgery to implant something called a shunt, which is a flexible tube that redirects the fluid into another part of the body, most often the abdomen, where it can be absorbed.

**Limb Differences** include club feet, missing or extra fingers or toes, and missing or malformed hands, feet, arms or legs. Club feet are turned at the ankle and can be corrected with casting, braces, or surgery. Occupational therapy can help children with limb differences learn how to perform daily tasks in different ways. Prosthetic devices (artificial limbs) are sometimes helpful. *It should be noted this condition is often not see alone in a child but rather in tandem with another manageable special need.*

**Spina Bifida** is a birth defect that happens when the spine and spinal cord do not develop normally. It can range from mild to severe, depending on the type of defect, size, location and complications. In a mild form of spina bifida called **meningocele**, early surgery is needed to enclose an exposed sac filled with fluid, usually at the base of spine. The sac does not include the spinal cord, so nerve damage is less likely, but there is a risk of incontinence or paralysis.

**Syphilis** is a sexually transmitted disease. Congenital syphilis happens when a mother with syphilis passes the infection on to her baby during pregnancy. There is effective treatment for congenital syphilis. Depending on the results of the baby’s medical evaluation, they may need antibiotics in a hospital for 10 days. In some cases, only one injection of antibiotic is needed. *It should be noted this condition is often not see alone in a child but rather in tandem with another manageable special need.*

**Thalassemia** is an inherited blood disorder that results in less hemoglobin and fewer red blood cells. Children with minor thalassemia may not need treatment, but they carry the gene and can pass it on to their children. Children with major thalassemia require regular blood transfusions, which can result in a buildup of iron and other complications.

**PLEASE NOTE: This information is not intended to replace expert feedback from medical professionals. We highly recommend that you consult with an International Adoption Clinic before accepting the referral of a child from China. We will be happy to provide a list of clinics across the country that provide this service.**