

**Field-Initiated Research on
Successful Adolescent Adoptions
Final Report
2004**

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Foreword

The Successful Adolescent Adoption Study Final Report is divided into sections and copied on various colors of paper. This format was chosen to make it easier to read and to allow those who do not want to read the entire report to find sections of particular interest. It is recommended that the reader look through the introduction and background to become familiar with the purpose of the study and to learn about the study participants.

Recommendations are scattered throughout the report. A list of recommendations is included in the Table of Contents to assist the reader in identifying the location of each. Recommendations for further areas of study are included in the last section of the report.

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List of Recommendations

1. Include recruitment strategies that offer opportunities for adults in the community to get to know teens in foster care	10
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5. Allow parents and adolescents to have an adequate visitation schedule prior to moving adolescents into the home	26
6. Employ caseworkers who specialize in adolescent adoptions. These caseworkers should have positive attitudes about teen and be eager to find homes for them. Include teens in the adoption process. Streamline the process as much as possible so that the teens can be adopted when they are ready	35
7. Individually prepare adolescents for the adoption process by doing six key steps 1) explain their legal status, 2) offer adoption as a viable option for permanence, 3) offer support and information as they consider adoption, 4) explain how the adoption process will proceed, 5) assess adolescents to determine their level of adjustment regarding birth family issues, and 6) provide support as needed to help them deal with these birth family issues appropriately	43
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The Center for Child and Family Studies in the College of Social Work at the University of South Carolina with the collaboration of the South Carolina Department of Social Services conducted a research study entitled Successful Adolescent Adoptions. This study focused on families who “successfully” adopted children as adolescents. The purpose of the study was to expand knowledge on adolescent, family, and systems factors associated with successful adoptive placements for adolescents and to draw practice inferences from findings to further the aim of the Adoption and Safe Families Act of 1997 (ASFA) (PL 105-89) to ensure safety, permanency, and well-being. The United States Department of Health and Human Services, Administration for Children and Families funded this study under the Adoption Opportunities Demonstration Projects category. The priority area was targeted field-initiated research and service demonstration.

The overarching goal of the study was to further the well-being of adolescents in the foster care system by securing and preserving adolescent adoptions that produce positive outcomes. Six research questions were listed in the original proposal and all are addressed in this report.

1. What is successful adolescent adoption on three levels: placement, maintenance, and beneficial outcomes?
2. How do adoptive parents make the decision to adopt?
3. How do adolescents influence the decision to adopt?
4. What factors correlate with successful adolescent adoption?
5. Do the findings from the study suggest testable models to predict successful adoption?
6. What are the practice and policy implication of the findings?

Literature Review

In the 1950s and 60s, most adoptions involved healthy, European American infants adopted by middle to upper-middle income, married, infertile, and European Americans (Brodzinsky & Pinderhughes, 2002). By the 1970s and 1980s, changes in social and sexual mores and the advent of legalized abortions and reliable contraceptives resulted in a dramatic decrease in the number of healthy European American infants placed for adoption. During this same period, the demand for babies increased as more and more couples began to experience fertility problems associated with the delay of parenthood (Rosenthal & Groze, 1992).

At the same time the demand for children to adopt was increasing, so was the concern within the child welfare system about the growing number of children in foster care. Many of these children had special needs that were considered to be barriers to adoption, and as a result, they languished in foster care for years and years (Brodzinsky & Pinderhughes, 2002). Characteristics of children with special needs include older age at adoption (varies by state, usually over the age of six), disability, serious medical problem, emotional or behavioral issues, need for placement as a sibling group, and minority ethnicity (Rosenthal & Groze, 1994).

Interest in special needs children flourished with the passing of the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272) (Brodzinsky & Pinderhughes, 2002). With a focus on permanency planning, this law required child welfare agencies to actively work towards reunification of foster children with their biological parents or, in cases where that was not possible, to find other permanent families for these children. The renewed emphasis on finding families for children in foster care, many of whom were considered special needs children, opened the door to a variety of new adoption issues including an increased need for adoptive

families and more sophisticated recruitment efforts, a greater understanding of the reasons why families adopt, a call for more comprehensive pre- and post-adoptive services and supports, and a need for greater understanding of adoption. A variety of research studies have been conducted in recent years to examine these issues, but few of these studies have focused specifically on adolescents.

The immediate result of the 1980 law was to decrease the overall number of children in foster care while at the same time increasing the number of special needs children who were adopted (Brodzinsky & Pinderhughes, 2002). With the discovery that children in foster care were indeed adoptable, a new emphasis was placed on the importance of finding a home for the child rather than a child for a home (Barth & Berry, 1988). Public agencies moved from *screening out* applicants who didn't meet their strict socioeconomic and demographic criteria to *screening in* as many types of applicants as possible (Brodzinsky & Pinderhughes, 2002).

Today, there are no income requirements for families, and many lower-income and blue-collar families are adopting with the help of financial and medical subsidies. Minority families are being actively recruited, as are older persons who are more likely to want to adopt older children. Single-parent adoptions are also becoming more and more common, and a growing number of agencies are willing to place children with gays and lesbians, both singly and in couples (Barth & Berry, 1988; Brodzinsky & Pinderhughes, 2002). The largest group of adopters, thanks to a change in policy restricting their adopting, is now foster parents.

With a greater variety of families in the adoption pool, a larger number of children to place, and more special needs adoptions, there is growing concern about increasing the rate of disruptions (adoption abandoned between placement and finalization) and dissolutions (adoption dissolved after legal finalization) (Barth, Berry, Yoshikami, Goodfield, & Carson, 1988). While many studies have been conducted examining disruptions and dissolutions, none have focused on successful adolescent adoptions. Our study on successful adolescent adoptions was designed to begin to fill this gap in the research.

Methodology

A qualitative approach to data collection and analysis was used as a basic design of this study because it allows the researcher to examine the questions with greater depth, openness, and detail (Patton, 2002). Greater depth and openness was needed because few studies have been conducted looking specifically at adolescent adoptions. This approach allowed the findings to emerge from the data.

Strategic Framework

The strategic framework is used to help guide the design and methods decisions throughout the study and includes design strategies, data collection strategies, and data analysis strategies (Patton, 2002). *Purposeful sampling* is the design strategy used in the successful adolescent adoption study. A small sample of participants, similar in some pre-specified way, is selected to allow in-depth study of the phenomenon. Although this approach allows more detailed study of the issue, the small size and selective nature of the sample means the findings may not be generalizable to a larger group (Patton, 2002). In this study of successful adolescent adoptions, researchers recruited parents who had adopted an adolescent in the 12-to 18-age range and had not disrupted or dissolved the adoption. The idea was to look at what these families do that make the adoptions successful.

Empathic neutrality and mindfulness is the data collection strategy selected for this study. The researcher attempts to interview participants with sensitivity, respect, awareness, and responsiveness in order to understand but not judge the participant's experiences (Patton, 2002). In this study, adoptive parents and adoptees were interviewed over the phone or in person with a list of previously developed questions as a guide. Interviewers listened, recorded, and probed for understanding but did not comment on appropriateness of the answers.

Inductive analysis and creative synthesis is the data analysis strategy used in this study. The researcher is immersed in the data looking for patterns, themes, and interrelationships. Analytical principles are used to explore, confirm, and synthesize the data (Patton, 2002). *N6* qualitative analysis software (N6, 2002) was used to analyze the interview data. Answers to specific interview questions were analyzed looking for themes in the responses. These themes were then compared with other response themes to look for patterns across families. Responses were sometimes compared across family background information to determine if trends and patterns could be identified in adoptive families. Quantitative aspects of the data such as family backgrounds were analyzed using the *SPSS* statistical software, version 11.5.

Target Population and Participant Recruitment

In the original grant proposal, the target population was a cohort of 45 adoptive parents and adoptees. These South Carolina families were to have adopted youth who were 12 to 18 years old when adopted by their foster parents during the period of July 1, 1991, through June 30, 1997. These individuals were to be identified by DSS child welfare personnel through DSS records for the specified time period. Only 12 families were recruited from the original participant pool. In an effort to recruit more study participants, a request was made to the funding source to expand the participant pool to include families outside of South Carolina who adopted a person in the 12 to 18 age range, families who adopted adolescents any time during the last ten years, and families who adopted adolescents not in foster care in their home prior to the adoption. Approval was granted, and the target group was expanded.

Eighty-four families indicated an interest in participating in the study. Ultimately, 50 families from 18 states were interviewed. Of the 50 families completing interviews, one family had not finalized adoption and was not included in the study. Fifty-eight parents were interviewed from the 49 participating families. Thirty-seven adoptees were interviewed from 30 of the participating families. Two of the families adopted teens more than ten years ago. These families were included in the study because they met the age criteria, and interviewing an older adoptee provided some perspective that contributed to the research findings. One family adopted an adolescent at age 19, just outside of the targeted age range for the study (12 to 18). This family was included in the study because the adoptee was still a teenager at the time of adoption.

Data Collection and Analysis

Two methods of data collection were used in this study: interviews and assessment of the adoptee's satisfaction with life using a standardized instrument. Interviews of adoptive parents and their adoptees provided basic information about the families, the adoption process, and outcomes of the adoption. Ninety-one interviews were conducted over a two-year period. During this same time frame, 37 adoptees were asked to complete the *Extended Satisfaction With Life Scale* instrument (Alfonso, Allison, Rader, and Gorman, 1996). Twenty-three instruments were completed and returned.

Interviews

Interview questions were developed for adoptive parents and adoptees. When the target population was expanded, the interview questions had to be modified for non-foster parents and their adoptees. The interview questions were developed by research staff and reviewed by ten people including technical assistance staff, Department of Social Services (DSS) regional adoption workers, DSS state office research staff, and other researchers at The Center for Child and Family Studies. Changes were incorporated as appropriate in the final version of the interview. The interviews were piloted, and a few small changes were made. In order to allow the interviewer to focus on the interview, all interviews were recorded and then transcribed.

Ninety-five people were interviewed for this study in 91 separate interviews. Four couples were interviewed together, and five couples were interviewed separately. Twenty-two of these interviews were conducted in person and 69 on the telephone. Five people conducted the interviews. The Co-Principal Investigator reviewed each interview to insure that questions were clearly answered and documented. Two office administrative assistants transcribed all interviews.

Quantitative data from all interviews were entered into the computer using *SPSS* statistical software, version 11.5. Simple frequencies and cross tabulations were run using the *SPSS* software package. The *N6* software package (N6, 2002) was used to assist with the analysis of the qualitative data. All interview transcripts were downloaded into the *N6* software package. This allowed the data to be analyzed and placed in categories and subcategories. Comparisons were made between parent and adoptee responses. Similarities and differences in responses were compared on a variety of demographic factors. Responses for some questions were also compared to responses for other questions to see if any patterns emerged. Various models were hypothesized and tested based on patterns emerging from the data. Results were discussed among small groups of researchers to refine the analysis.

Instruments

One instrument, the *Extended Satisfaction with Life Scale*, was included in the interview for adoptees. This is a reliable instrument for obtaining information concerning people's satisfaction in nine areas of life: general life, social, sex, self, physical, family, school, work, and relationship (Alfonso, et al., 1996). This instrument allows items to be dropped without compromising the results (Alfonso et al., 1996). Five items about the person's sex life were deleted from the scale.

Adoptees were instructed to anonymously complete relevant sections of the paper and pencil instrument and mail it to researchers in a business reply envelope supplied by the researchers. Results were recorded in the computer using the *SPSS* statistical software program, version 11.5. There are 45 questions in the instrument divided into eight subscales. Participants rate each item on a seven-point Likert scale from *strongly disagree* to *strongly agree*. As directed by the instrument's developers, "scores for each of the subscales were calculated as the sum of the ratings for each of the items comprising the subscale." (Alfonso et al., 1996, p. 283). Higher scores indicate greater satisfaction with life.

BACKGROUND

Adoptive Families

Fifty families from 18 states were interviewed for this study. Since South Carolina was the focus of early recruitment efforts, more of the families (25%) came from South Carolina than any other state. One family had not yet finalized its adoption at the time of the interview. Since it did not meet all of the eligibility requirements, this family had to be excluded from the formal data analysis. All of the data in this report is based on parent or adoptee report and not on case records. There may be some errors due to faulty recollections of dates, numbers, or events.

As can be seen in Table 1, most of the adoptive parents were married at the time of adoption, and only one of these couples split up after the adoption. In nine of the families, both

Table 1. Frequency and Percentage of Parents at Adoption by Marital Status

Marital Status	Frequency
Couples*	30(61%)
Single Mothers	7(14%)
Single Fathers	5(10%)
Divorced Mothers	5(10%)
Widowed Mothers	2(4%)
Total	49(99%^)
* One couple separated after adoption finalized ^ Rounding error	

Table 2. Frequency and Percentage of Parents at the Time of Adoption in each Age Range

Age Range	Mother #(%)	Father #(%)	Total #(%)
30-35	12(27%)	6(17%)	18(23%)
36-40	5(11%)	5(14%)	10(13%)
41-45	10(23%)	8(23%)	18(23%)
46-50	7(16%)	8(23%)	15(19%)
51-55	8(18%)	6(17%)	14(18%)
56-60	0(0%)	1(3%)	1(1%)
61-70	1(2%)	1(3%)	2(3%)
71-80	1(2%)	0(0%)	1(1%)
Total	44(99%*)	35(100%)	79(101%*)

* Rounding Error

by parents in their fifties (19%). The two families who adopted after age 60 included a couple and a widow. Both families were foster parents who adopted foster children living with them for a period of time prior to adoption. Neither of these families planned to adopt its foster child.

Some research suggest that mothers with lower levels of education have fewer disruptions

the mother and father were interviewed for a total of 58 parents interviewed.

Some have suggested that parents in their forties are better able to adopt a teen without disrupting (Berry & Barth, 1990). Although the largest percentage of parents in this study (42%) were in their forties at the time they adopted a teen, people of all ages successfully adopted adolescents. As can be seen in Table 2, parents ranged in age from 30 to 80 years old at the time of adoption. In this study, the second largest group to adopt consisted of parents in their thirties (36%), followed

Table 3. Frequency and Percentage of Parents at the Time of Adoption at each Education Level

Education Level of Parents	Mother #(%)	Father #(%)	Total #(%)
Less than high school diploma/GED	3(7%)	1(3%)	4(5%)
High School Diploma/GED	6(14%)	7(20%)	13(16%)
Some College or 2 Year Degree	12(27%)	8(23%)	20(25%)
BA or BS	4(9%)	7(20%)	11(14%)
Masters Degree	19(43%)	4(11%)	23(29%)
Ph.D./M.D.	0(0%)	7(20%)	7(9%)
Missing Information	0(0%)	1(3%)	1(1%)
Total	44(100%)	35(100%)	79(99%)

* Rounding Error

(Barth, Berry, Yoshikami, Goodfield, & Carson, 1988). Festinger (1986) attributes this to mothers with less education typically having more parenting experience. Table 3 shows that in this study, there is some diversity in education among the participating families. Just over half of the parents (52%) have a college or graduate degree. The education level of the mothers and fathers are roughly equivalent. All were able to successfully adopt one or more adolescents.

Thirty-seven of the 49 families (76%) adopted an adolescent as the first child they adopted. In total, the 49 families adopted 126 children, and 76 of these children (60%) were between the ages of 11 and 20. All of the families adopted at least one adolescent who was 12 years old or older at the time of adoption. The majority of the adolescents adopted by participating families (68%) were between the ages of 11 and 14. Twenty of the participating families (41%) adopted more than once. These families adopted between two and seven children, and not all of those adopted were teenagers. Four additional families were in the process of adopting a second child at the time of the interview. Seventeen families (35%) adopted sibling groups of between two and six children. Fifteen of these sibling groups had one or more adolescents in them. Four families adopted adolescents from another country. Two families adopted from China, one from Guatemala, and one from Russia. Three of the four families adopted multiple children or a sibling group for a total of nine children adopted from other countries.

Table 4 shows the race of participating families. Ten of the Caucasian families (20%) adopted an adolescent with a racial background different from their own. The races of the adolescents included: bi-racial, tri-racial, African American, Native Canadian, Hispanic, Russian, and Asian.

Table 4. Frequency and Percentage of Participating Families by Race

Race	Frequency
Caucasian	38(78%)
African American	9(18%)
Hispanic	1(2%)
Mixed Race Couple	1(2%)
Total	49(100%)

Adoptees Who Were Interviewed

Thirty-seven adoptees were interviewed from 30 of the participating families. Interviews were not conducted with all adoptees for several reasons. A few of them did not want to talk about their adoption. Some were too busy with family or jobs. One parent did not want her child to be interviewed. And others agreed to be interviewed but never found the time for the interview. Fourteen males and 23 females were interviewed. The adoptees ranged in age from 14 to 35 years old at the time of the interview. One-third (12) were 18 or older. Of these, eight had earned a high school diploma, one had earned a GED, and three were still in high school. Of the nine adoptees interviewed who were out of high school, five were currently attending college, and two had graduated from college (one two-year and one four-year degree).

Twenty-two of those interviewed (59%) were Caucasian, four (11%) were African American, four (11%) were Asian, four (11%) were Hispanic, and one (3%) was Russian. Two of those interviewed (5%) were biracial. This was the first adoption for all but three of the adoptees. Those who had been adopted previously had their first adoptions dissolved.

Many of the adoptees (65%) reported that they had been depressed at some point in their lives, and most of them (83%) had received treatment for this depression. Twenty-two percent reported having some type of physical problem. Several have asthma, one has diabetes, one has a heart condition, one is anemic, and the other has a skin condition. Eleven percent reported having mental health issues. At least five of the adoptees have some type of attachment disorder for which they are receiving, or have received, treatment. Two-thirds (25) said they had never

been arrested. Nineteen percent (7) admitted to having had some trouble with the law but not being arrested. Ten percent (4) said they had been arrested, half before and half after the adoption. A few (16%) reported drinking alcohol, and even fewer (8%) reported using drugs occasionally.

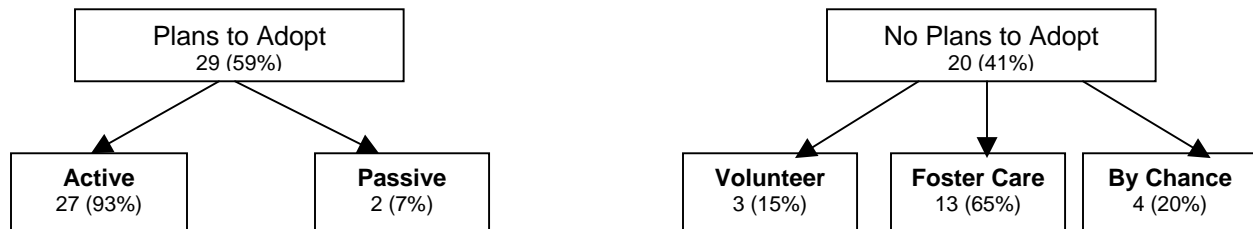
All but one of the adoptees interviewed for this study were in foster care or orphanages prior to their adoptions. Two of the adolescents only had one foster care placement, and that was in the home of the parents who eventually adopted them. There is some confusion among the adoptees and their foster parents as to how many foster placements the children actually had. In six families, the adoptive parents and the adoptees provided different information. Some of the children were placed in foster care at a young age, or they were in so many homes that they do not remember the exact number of placements. In some cases, the adoptive parents were given all of the information in the child's record, but the record itself was incomplete. Sometimes, the birth parents moved across county or state lines, and the agencies lost track of where the children were placed and how often. According to information provided to researchers, the adoptees interviewed for this study had between one and 35 placements. The median was four placement, and the average was six. The median and average time in foster care for adoptees interviewed for this study was six years. The range of time in foster care was between six months and 13 years.

Adolescents in this study were placed in foster care for a variety of reasons. This information is based on the adoptees' self-report. Only one said he did not know why he was placed in foster care. Most adoptees (42%) reported that they were placed due to neglect. One-quarter were placed based on abuse, and 8% were placed based on abuse and neglect. At least seven (19%) reported that they had been sexually abused prior to being placed for adoption. Six of the adolescents (17%) were placed because their mothers voluntarily relinquished them. Although four of these were intercountry adoptions where the adoptee was relinquished at or near birth, two American citizens were also voluntarily relinquished. Just over one-third of the adoptees (36%) reported that their parents' alcohol and drug abuse played a role in their placement in foster care.

ADOPTION VIEW PRIOR TO ADOPTION

Data from this study revealed two types of adoptive families: those who planned to adopt and those who did not. Just over half of the families (59%) said they had considered adoption even before meeting the children they later adopted. The remaining 41% of families had either no intentions of adopting at all or, if they had already adopted a child in the past, no intentions of adopting additional children. Not surprisingly, the two groups took very different paths to adoption depending on their initial view of adoption. Figure 1 illustrates the paths families in this study took to adoption based on whether or not they were planning to adopt.

Figure 1. Frequencies and Percentages of Parents' View of and Path to Adoption



Families with Plans to Adopt

A review of the data reveals that parents in this study who planned to adopt followed one of two paths: either active or passive. Active adopters are defined as those who planned to adopt and who actively sought a child to adopt. Passive adopters are defined as those who planned to adopt at some point but who had not yet begun to actively search for a child. In this study, 29 families had plans to adopt, and 27 of them were actively searching for a child.

An analysis of the data from the 27 parents following the active path to adoption revealed at least four identifiable reasons for their decision to adopt: *infertility*, *empty nest*, *single but wanted children*, and *always wanted to adopt*. Each of these categories is described in more detail below.

1. *Infertility*. The majority of active adopters (48%) made the decision to adopt because one or both of the partners were infertile. All were married. One couple typical of the others said, “We couldn’t have a biological child. We wanted a family.” Although half of these couples (54%) initially planned to adopt a younger child, all ended up adopting adolescents ranging in age from 11 to 18. “We started off seeking an infant, but those doors didn’t open. That was okay because, in my heart, I knew we were supposed to have an older group.”
2. *Empty Nest*. Three couples (11%) had already raised a family and decided to adopt because they missed having children around the house. They enjoyed their first experience as parents and wanted to do it again. One couple said, “When they left home, the house was too quiet. We were empty nesters, and we kept wishing there was a child around the house.”
3. *Single, But Want Children*. Six of the parents who were actively trying to adopt a child (22%) were single (two men and four women). Five had never married, and one was a widow. The never-married singles reported that they wanted children but were not sure they would ever marry. One single explained, “Ever since I was young, I knew I was going to have children. I was never convinced I would have a husband. I got to an age where I

was not married and decided it was time to parent.” On the other hand, the widow said that she wanted someone to leave her house to when she was gone.

4. *Always Wanted to Adopt.* Five of the families actively seeking to adopt (19%) reported that they had always wanted to adopt. All five were married with biological children of their own. As one parent said, “Adoption was something that I always wanted to do. I wanted to have a couple of children of my own and then adopt a couple of children.” All of the couples had their own children and/or their other adopted children living in the home at the time the adolescent was adopted.

Only two parents intended to adopt but followed a more passive path (7%). Both worked in the adoption field. One parent explained, “I always felt that at some point in my life I would adopt, but when she came into my life, there was no plan to adopt her — there was only a willingness to adopt her if she so chose.”

Families With No Plans To Adopt

Twenty of the families participating in the study (41%) reported that they had no plans to adopt a child at the time they adopted the adolescent. The families followed three paths that led them to begin thinking about adoption. As can be seen in Figure 1, these paths are: *volunteering, by chance, and foster care.*

1. *Volunteering.* Three parents (15%) adopted adolescents after being involved in a volunteer activity that brought them in contact with adolescents. Two of the parents were mentors, and one transported children to appointments. All three became foster parents in order to be able to foster a specific adolescent to prevent further placements. Two parents became attached to these adolescents, and one parent wanted to provide stability for the adolescent. All three were open to adoption if that became a possibility. Two of the parents adopted the adolescent that originally captured their hearts. The third parent was unable to provide foster care to the original adolescent due to the length of time it took to become trained as a foster parent. “I made the decision two weeks before he was to be discharged, and the whole process for getting certified for foster care takes about six months.” He became a foster parent anyway and later adopted another adolescent.
2. *By Chance.* Four families (20%) made the decision to adopt after a chance encounter or series of events. Each of these chance encounters was different. One parent was surfing the Internet, found an intercountry adoption Web site, and was drawn to a picture of an adolescent. After talking with her husband, she contacted the adoption agency and began the adoption process. Another person just happened to watch a *Montel Williams* show that focused on adoption. The show peaked his interest on the subject. He read more about adoption, decided to adopt, contacted the state agency, and eventually adopted an adolescent. The third parent was an adoption worker who had no plans to adopt until she met an adolescent on her caseload. After unsuccessfully placing him in an adoptive home, she talked with her husband, and they decided to adopt him. The final family also had no plans to adopt. In this case, the mother had an adult daughter who was considering adopting her foster child. This relationship did not work out, but after many weekend visits, the adolescent and her “grandparents” developed a good relationship. The “grandparents” eventually adopted the adolescent. “I didn’t set out to adopt a child, but my daughter did, and we fell in love with her.”
3. *Foster Care.* Over half of the parents who had no plans to adopt but eventually did (65%) were foster parents. These parents ranged in age from 36 to 78. Their reasons for changing their view about adoption varied, and these reasons can be further divided into

three categories: *asked by another, fell in love or became attached, and wanted to provide stability/help.*

- *Asked by Another* - In three families, someone asked the parent to adopt this particular foster child. In two families, the caseworker made the request, and in the third, the adolescent asked the parent to adopt her. “She insisted I was going to adopt her, so she talked me into it.”
- *Became Attached* - Five parents reported that they fell in love with or became very attached to their foster children and didn’t want them to move on to other homes. Three of these parents were married, and two were single. Two had previously adopted foster children but had no plans to add to their families. Both were married and had adopted multiple times. One adopted a sibling group that included an adolescent. “Adoption came to mind when he and his siblings came by. We fell in love with him when he was eight years old. When we had a regular foster home and the possibility was there, we felt that we wanted to adopt.” The other three had also been foster parents for many years but had not adopted any children and had no plans to do so. As one of the parents said, “After I had the first two [foster children], you get kind of tired of children coming in and out because you get attached. So I decided to adopt.”
- *Stability/Help* - Five of the foster parents reported that they wanted to provide a stable home and help the adolescent so they decided to adopt him/her. One parent said she was “not initially planning to adopt, but wanted to give the children stability.” Three of these parents were married, one parent was divorced, and one was a widow.

What Did We Learn?

The initial view of adoption held by potential adoptive parents had a major impact on the path that led to adoption. This has implications for the type of recruitment effort that would be most effective with these families. It is clear that one type of recruitment effort does not fit all families. Recruitment campaigns need to actively recruit both those who plan to adopt and those who do not plan to do so. Many more good adoptive parents are available, but they will not come forward without some assistance. Some parents found the process of finding a child to adopt a very trying experience with many obstacles placed in their paths. A few said that if they were less dedicated to finding a child, they would have given up. Since there are so many adolescents in need of adoption, parents need to feel encouraged rather than discouraged about adoption.

RECOMMENDATION 1: Include recruitment strategies that offer opportunities for adults in the community to get to know teens in foster care. Some teens and adults will make an adoption decision only after forming an attachment to a specific person. While many adults would not consider a huge commitment like adoption, or even foster care, they might be willing to commit a few hours a week to a foster child. Once they form an attachment, these adults could then be recruited for adoption. In order to capture those who need to form an attachment, new programs should be created, or community programs utilized (e.g., Big Brothers/Big Sisters, Junior Achievement, 4H, Special Olympics, school service projects, etc.), to provide opportunities for foster youth to meet and form relationships with adults. Adults should be encouraged to volunteer in community programs, and foster youth should be encouraged to become involved or volunteer in these programs.

Related Research

The literature on why people make the decision to adopt reveals reasons for adoption similar to the ones in this adolescent adoption study. In their study of older-child adoptions (defined here as children over the age of three), Barth and Berry (1988) found the most frequently cited reasons for parents wanting to adopt were that they had strong religious or humanitarian convictions, they were unable to have a child on their own, they were attracted to or attached to a specific child (usually a foster child), or other children in the home wanted them to. When asked why they adopted an older child, parents said that an older child fit in better with their family, that older children were more readily available for adoption than infants, or that they had an emotional attachment or attraction to a specific child. Other reasons for adopting an older child include: a desire to parent and a love for children, a need to help others who are less fortunate, empty nest syndrome, want children but don't want to contribute to overpopulation of planet, success with previous adoptions, talent for working with older and/or difficult children, older child part of a sibling group that includes a younger child, and interested in children with special needs (Barth & Berry, 1988; Babb & Laws, 1997).

Barth and Berry (1988) found that reasons for adoption tend to differ by the type of adopters. New adopters and foster-to-adopt parents listed humanitarian and religious convictions as reasons for adoption. These two groups were also more likely to adopt an older child because infants were not available or because an older child would fit in better with the family. Foster parents who did not set out to adopt were more likely than the other two groups to want to adopt because of their attraction or emotional attachment to a specific child in their care, including an older child (Barth & Berry, 1988).

In a study of foster family adoptions conducted by Meezan and Shireman (1985), foster families were asked why they made the decision to adopt their foster children. Their reasons were similar to those identified in the adolescent adoption study including, legal security for the family so that the child could not be moved, attachment of the child and family to each other, security and permanence for the child, and a long-time desire to adopt. When these same families were asked why they decided to adopt when they did, some said the idea developed without outside stimulus. Others said it was triggered by change in the status of the biological parents. And still others said it was triggered by a change in adoption agency procedures which signaled a change in status for the child (e.g., transfer of the child to the adoption unit). More than half of the families stated that they had thought about adoption at foster placement or shortly thereafter (Meezan & Shireman, 1985).

No research studies on adoption recruitment were found, but some common practices used by agencies were identified. A review of these common practices show that adoption agencies use a variety of strategies to recruit adoptive parents, but few of these strategies focus on those with no plans to adopt. One strategy, which is used to recruit parents who are not planning to adopt children, focuses on recruiting people involved in the lives of foster children (Casey Family Programs, 2003; Goodman, 1999). Foster parents are often targeted for this type of recruitment. Adoption agencies typically talk with foster families about adopting their foster children. They also look to school personnel, social workers, and volunteers to find people who might want to adopt adolescents (Casey Family Programs, 2003; Goodman, 1999). In the Successful Adolescent Adoption Study, 13 foster parents with no plans to adopt eventually adopted the adolescents they were fostering. Most of these foster parents (77%) initiated the adoption process themselves. Three foster parents (23%) were asked by others to consider adoption. Caseworkers asked two of these parents, and the foster child asked the other.

MAKING THE DECISION TO ADOPT: A MODEL PROCESS

A series of questions was asked to determine how study participants made the decision to adopt. A review of the answers to these questions along with other information provided by the parents throughout the interview revealed that the decision to adopt is a process, not an event, and that this process is actually a subset of a larger process that could be described as making the decision to parent. Based on the information gathered from this select group of parents, all of whom had successfully adopted adolescents, a model process was developed to show the variety of ways in which people come to the decision to parent, including whether to adopt. For those who do decide to follow the adoption route to parenthood, the model also lays out the individual steps most people take in the adoption process. This model process is briefly explained below and displayed in Figure 2. Note that there is some overlap in the steps. Specific issues and overlaps associated with each step in the adoption process are further described later in this section.

Open to Parenting

The decision to adopt is intricately interwoven with the decision to parent. The model process begins with the assumption that a person or couple is open to the idea of having children. As time goes by, this openness becomes either an active or a passive desire to have children. People with an active desire to have children want to have them immediately or in the near future; whereas, people with a more passive desire for children want to start a family some day but have no immediate plans to do so. For families in this study who actively desired to have children, two methods of starting a family were identified: have, or try to have, a biological child or adopt a child.

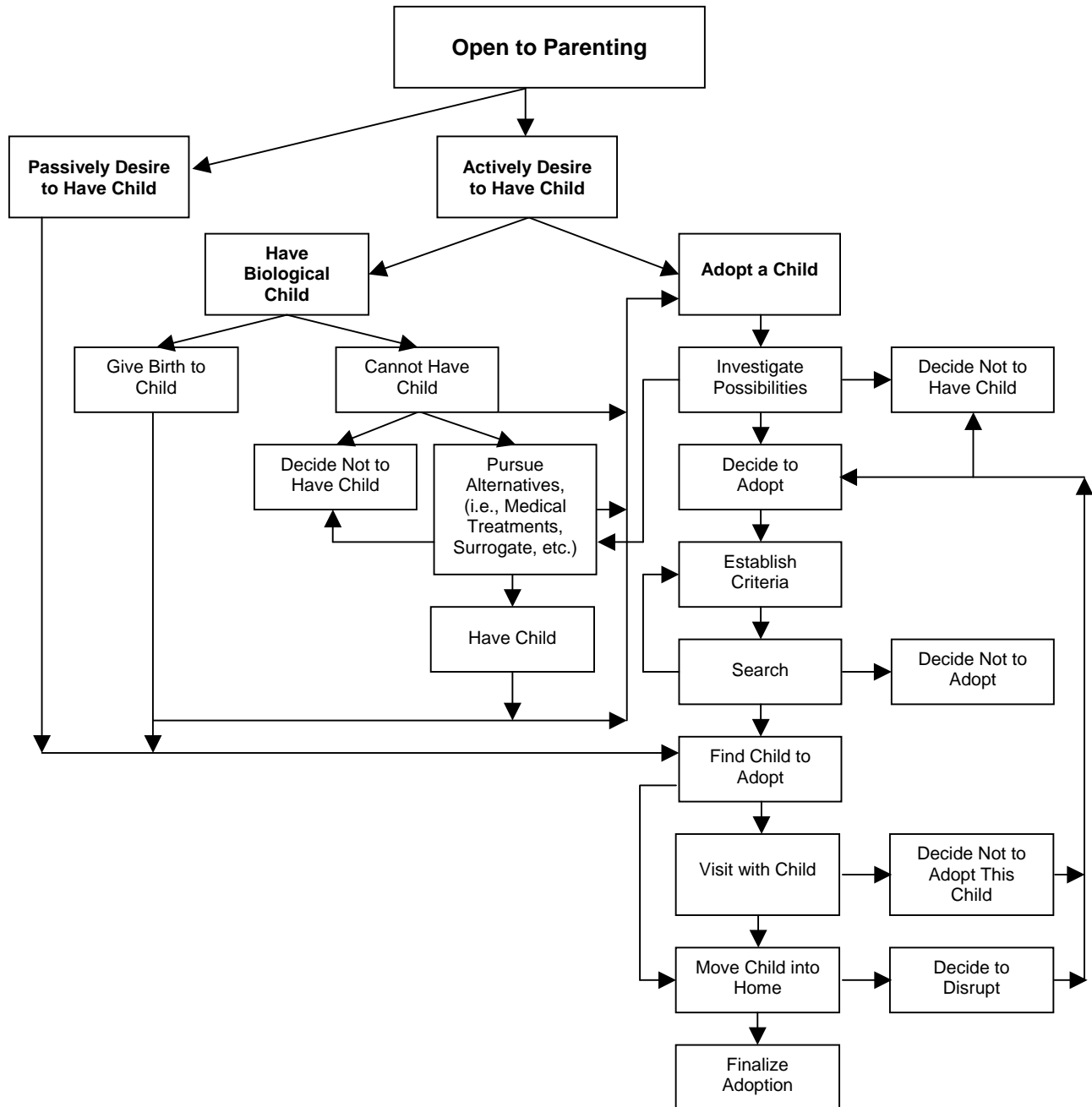
Have a Biological Child

Most people who want children plan to have their own biological children. (This group is represented in Figure 2 towards the left-hand side under *actively desire to have children*.) For those people who try to have a child on their own, there are two possible outcomes: either they succeed in having a child, or they discover that they are unable to have one on their own.

The majority of those people who desire to have biological children are able to do so, and their families are composed of birth children. Some of these families, however, are also open to the idea of adding to their families through adoption. In this study, a variety of reasons were given for adopting children in addition to having biological children. Some parents had a history of adoption in their family. Others somehow came across a child in need of a permanent home and decided that they could provide one. Several were “empty nesters” who felt they still had more parenting in them even though their biological children had left home. And some parents just simply wanted to adopt as well as give birth to children. As one mother explained, “I always wanted to have a lot of kids, and I wasn’t sure how many I was going to give birth to and how many I was going to adopt or foster.” Those families who have biological children and also decide to adopt a child are represented in Figure 2 by the arrows going from the *give birth to child* box downwards and over to the right to either the *adopt child* box or the *find child to adopt*.

A percentage of the people who want to have a biological child will be unable to do so because of infertility. After attempting a variety of fertility treatments, these people choose not to have children, find a surrogate parent, or adopt a child. All of the infertile couples in this study ultimately chose to consider adoption as depicted by the arrow leading from the *cannot have child* box to the *adopt child* box at the top right side of Figure 2.

Figure 2. A Model Process for Making the Decision to Parent



Adopt a Child

On the right side of Figure 2 are those families who actively desire children but opt to consider adoption rather than having children biologically. Reasons given by parents in this study for choosing adoption over having biological children were that they were single and did not anticipate being married in the near future, they had waited too long and were past child-bearing age, or they wanted to adopt rather than bring more children into the world. The steps that most people follow when considering adoption are listed in the boxes under the *adopt child* box in the chart. These steps are described in more detail below.

Investigate Possibilities & Decide to Adopt

When considering adoption, it appears that the first step is to investigate the possibilities. This typically includes surfing the Internet, checking into public and private adoption agencies, reading books, talking with people who have adopted, and taking adoption exploration or preparation classes. Through this process, people make a decision about whether adoption is right for them. Some people conclude that it is not and opt instead to pursue more fertility treatments, look for a surrogate parent, or decide not to have children at all.

Establish Criteria, Search for a Child, & Find Child to Adopt

Although many people begin to investigate the possibilities of adoption with a preconceived idea of the type of child they are looking for (e.g., age, race, etc.), these criteria are typically refined during the initial investigation process described above. After narrowing their selection criteria, prospective adopters usually move into active search mode. It is during this stage that they begin working with an agency to become approved for adoption. Once approved, they can start looking for a child by going through case files and picture books, attending adoption events, etc. If a specific child is not found that meets their criteria for adoption, prospective parents typically go back to the *establish criteria* box, reexamine the criteria, and revise them to be more realistic for the children that are available. Some people may decide not to adopt if they are unable to find their ideal child.

Visit with the Child

Once a child is identified as being a likely match for a family, the two have an opportunity to get to know one another through a series of pre-adoption visits. These visits usually start out as short, introductory meetings or outings and gradually build to overnight and weekend stays. After a period of time, typically ranging from a few weeks to a few months, either the child is placed with the adoptive family, or a decision is made by one or both of the parties not to continue with the adoption. In cases where the decision is made not to move forward, the prospective adopters go back up to the *decision to adopt* box and start the whole process over, beginning with making the decision about whether adoption is still right for them.

Move Child into the Home & Finalize Adoption

If the adoption process continues, the child moves into the adoptive home, and the process of getting to know one another continues. During this period, the family or the child may decide this is an inappropriate placement and choose not to go forward with the adoption. When this happens, the adoption process disrupts, and the prospective adopter goes back up to the *decision to adopt* box and proceeds through the entire process again. If the adoptive family and the child decide to move forward with the adoption, it can usually be finalized within six months of placement in the home.

Passive Desire to Have Children

Figure 2 depicts those people who are either not planning to adopt at all or not planning to adopt now in the *passive desire to have children* box located on the far left side of the chart. These people tend to skip all of the decision-making steps in the adoption process and move directly to the bottom right of the figure to the *find a child to adopt* box. Since these parents are not actively searching for a child to adopt—they just happen to find one—it makes sense that they do not go through all of the search-related steps.

Time Frame for Model Decision-Making Process

The amount of time it takes people to go through the whole decision-making process varies greatly. While specific data on the length of the entire process were not collected for this study, anecdotal information from the parents reveals that there are often delays and setbacks that slow their progress through the process. For example, some parents had difficulty identifying an agency that would work with them in finding a child. Others had to revise and re-revise the criteria for the type of child they were looking for as they realized that babies and younger children were not readily available.

Data were collected on the amount of time it took from the *move child into the home* box through the *finalize adoption* box. As with all data in this study, it is based on self-report from parents and not on actual case study records. For families in this study, the range was zero months (for intercountry adoptions) through 112 months. When excluding intercountry adoptions, the average amount of time from placement to adoption was 30 months. This includes the many foster children who were in their adoptive homes for years before the decision to adopt was actually made. The amount of time from the initial discussion of adoption through finalization ranged from 3 to 62 months with an average of 17 months.

Nine of the adolescents were in their adoptive home for more than three years awaiting adoption. Eight were in the foster-to-adopt program, and one was in regular foster care. All of the foster-to-adopt delays were due to challenges to the termination of parental rights by the biological parents. In some cases, other family members were also trying to obtain custody. The other delay was due to legal problems regarding one adoptive father's immigration status. Based on information presented here, it is safe to say that the entire adoption process depicted in Figure 2 can take anywhere from a few months to many years.

What Did We Learn?

The decision-making model depicted in Figure 2 illustrates a process that covers all of the variations parents in this study followed in making the decision to adopt their adolescents. Based on interviews with the parents, it is clear that the decision to adopt is a process, not an event. Some of the parents were eager and in a hurry to find a child to adopt, while others wanted to gather information and take their time in making any adoption-related decisions. It is not at all uncommon for people to take months or even years to come to a decision to adopt. Throughout the adoption process, parents in this study encountered many obstacles and challenges that caused them to take a different course than the one they had originally planned to follow. Although the parents in this study stayed with their decision to adopt despite the obstacles, not all people do. While it is appropriate for some people to opt out of the process, many good prospective adopters may also be lost due to problems in the system rather than their inability to be good adoptive parents.

RECOMMENDATION 2: Recognize that parents will proceed at varying speeds through the adoption process; programs should accommodate their varied needs. Some parents are eager and in a hurry to find a child to adopt while others will gather information and take their time in making adoption-related decisions. Some people take months or even years to come to a decision to adopt. Unless people make a decision not to adopt, they should still be considered potential adoptive parents, and information may need to continue to be shared with them over a period of time rather than only at the beginning of the process. Parents who are in a hurry should be provided information as quickly as possible and be counseled about realistic time frames for going through the steps of the adoption process.

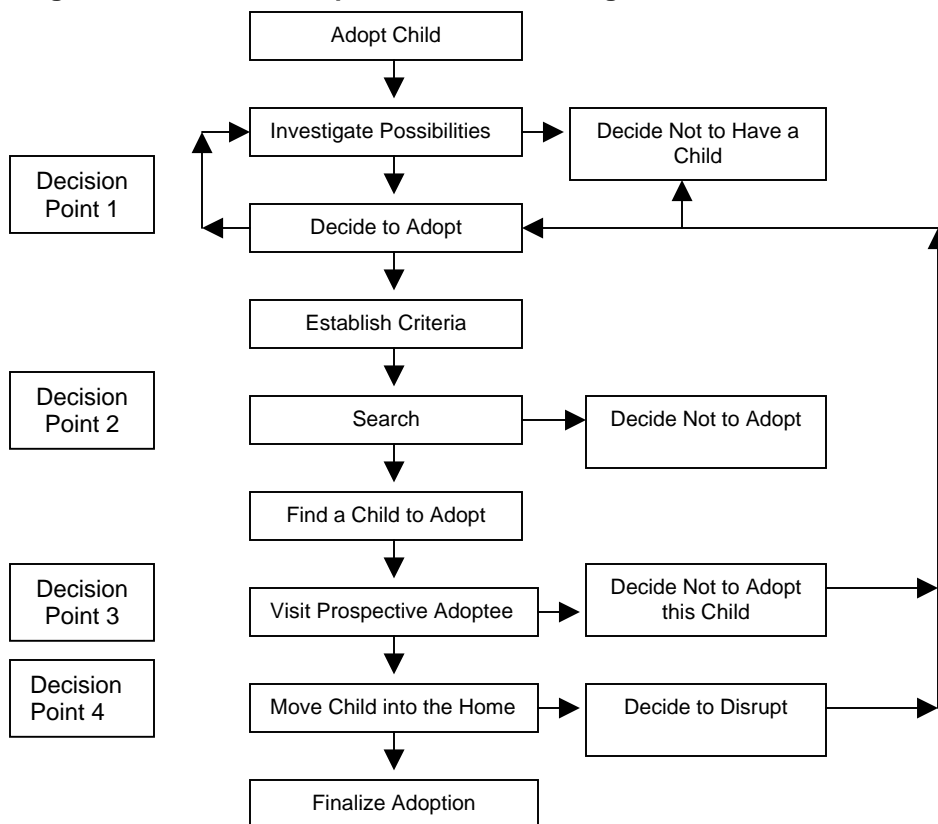
Major Decision Points in the Adoption Process

Thirty families in this study were actively planning to adopt at least one child. These families went through the entire adoption decision-making process as described in the Model Process for Making the Decision to Parent depicted on the right side of Figure 2. An analysis of interview data revealed that most parents followed all eight steps once they initially decided to adopt. Embedded in these eight steps were four major decision points. These decision points, depicted in Figure 3, occurred at the following steps in the process: *Investigate Possibilities*, *Search for a Child*, *Visit with Child*, and *Move Child into the Home*. At these decision points, the parents had to decide whether to move to the next step in the process or return to a previous step to reconsider earlier decisions.

As with many activities associated with the adoption process, the parents' experiences could be described as existing on a continuum. At one end of the continuum were parents who found the process fairly easy to navigate. They moved through the steps quickly, finding a child, and finalizing the adoption without any problems. At the opposite end of the continuum were parents who found the adoption process to be quite challenging. These parents encountered many obstacles and setbacks throughout the process often resulting in lengthy delays. Most of the parents in this study fell somewhere in the middle having had both positive and negative experiences as they moved through the process.

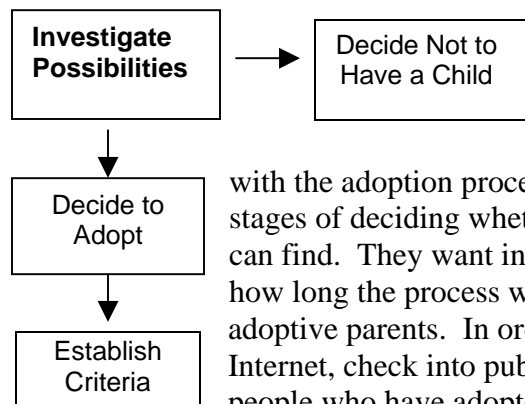
This discussion is included in this section to more fully describe the steps and decision points in the adoption process and to explain potential positive and negative experiences for those seeking to adopt. Identification of obstacles to adoption is the first step towards their removal. The adoptee's role in the decision-making process is discussed in the next section of the report.

Figure 3. The Model Adoption Decision-Making Process



Investigate Possibilities

What agencies are available to help us find a child to adopt? What are the rules and regulations at each agency? Will we be able to find a child? What steps are involved in the adoption process? Do we want to go through all the steps to adopt a child?



The above questions are typical of those asked by prospective adopters at the first major decision point in the adoption process, *investigate possibilities*. During the investigation step, prospective adopters begin to familiarize themselves

with the adoption process and the available resources. They are in the initial stages of deciding whether to adopt and are desperate for any information they can find. They want information about the types of children that are available, how long the process will take, and what qualifications are needed to become adoptive parents. In order to find this information, people typically surf the Internet, check into public and private adoption agencies, read books, talk with people who have adopted, and take adoption exploration or preparation classes. It is through this process that people make a decision about whether adoption is right for them or whether they should pursue more fertility treatments, look for a surrogate parent, or decide not to have children.

In this model, prospective adopters are considered to stay in the *investigate possibilities* step until they find an adoption agency that will work with them in searching for a child. Some of the parents in this study thought they had found an agency to work with them only to discover that the agency was not able to help them find a child. These parents had to go back to the *investigate possibilities* step to explore adoption agencies until they found one that was able to work with them.

Positive and Negative Experiences

Some parents in this study had positive experiences while investigating adoption possibilities. One couple was typical, “We read a lot on the Internet, just about different types of adoption agencies and services, and we called several local agencies. One was particularly responsive to us, and that was the agency we ended up using to adopt both our children.” Another parent said, “We went to one agency that had an information session that sounded like it was really good, so we talked with them a little later and told them that we wanted to adopt older kids because we were older and our daughter was older.”

Others found this early stage more difficult. A few felt they had problems because they were single. “First place I ever went was a private agency,” said one man. “They were extremely helpful, but they let me know right away that none of their kids would ever go to a single parent house.” A single woman reported, “Everything I tried did not work.” She went on to say, “I had a BA in special education and a MSW in social work, and I had been working in the adoption field for 5 years. I was told basically that, because I was single, I would not be able to adopt.”

Some couples experienced difficulties too. One couple explored possibilities at a number of agencies. Even when they decided to look for older children, they continued to have problems. “We went to our county [public agency] to another meeting for older children. They started our home study, and then it fell through, and they told us there was an 8-year waiting period.” While attending a boat show at the mall one day, this couple met a director of a non-

profit adoption agency. They began working with this agency to find children to adopt. Another couple checked with several agencies before making a decision. The public agency told them there was a 15-year wait for infants. One international agency said they could not work with them due to their size. “They turned me down because I was overweight. ...you can’t be over 120 pounds because their women are small,” explained the mother. After investigating a variety of agencies, this couple chose to work with the public agency in searching for an older child.

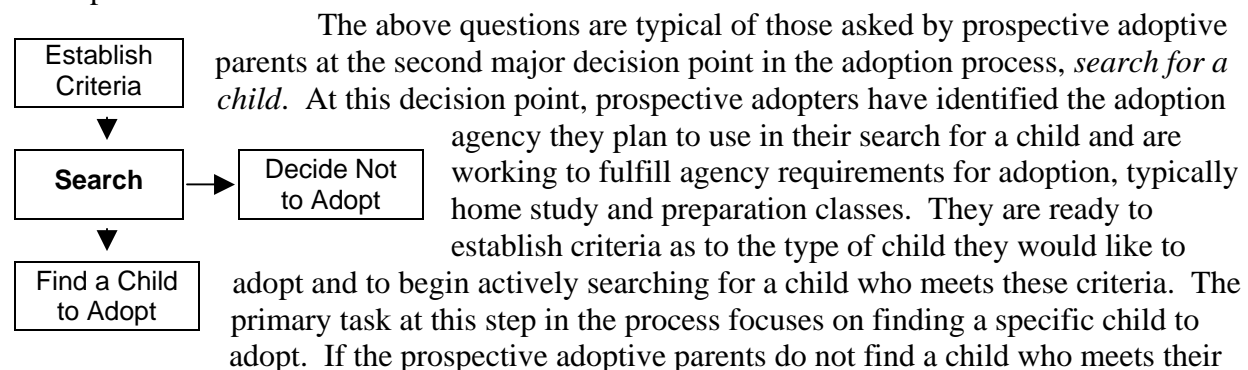
What Did We Learn?

Based on findings in this study, it appears that private agencies have varied missions and strict eligibility criteria for adoptive parents. Public agencies tend to have less stringent criteria but longer waiting lists for infant adoptions. Public and private adoption agencies operate separately and do not coordinate services needed by families as they begin investigating the possibility of adoption. Frequently, prospective adopters find doors closed to them with no recommendations for where they should go to find the information they need. As a result, they have to contact several agencies before they obtain the information they are looking for. It appears that many prospective adopters are being discouraged early in the process, at a time when there are large numbers of children waiting to be adopted.

RECOMMENDATION 3: Develop a coordinated orientation program for parents considering adoption. The findings suggest that public and private adoption agencies operate separately and do not coordinate services needed by families as they begin investigating the possibility of adoption. As a result, prospective adoptive parents often have to contact several agencies before they obtain the information they need. A coordinated effort among agencies to provide basic orientation sessions on adoption throughout the year would help people gather enough information so they can make a decision about whether they want to pursue adoption. These sessions, and/or possibly a Web site, should include information about all of the agencies in the community or state that provide adoption services. A coordinated effort would streamline the investigation process, put prospective adopters in contact with an agency appropriate for their needs, and decrease the number of people turned off by the process early on.

Search for a Child

What type of child are we looking for? Do we have a preference about age, race, or gender? Do we want one child or a sibling group? What if we do not find a child that meets our criteria? Are we willing to adjust our criteria in order to adopt a child? Is this the child we want to adopt?



desired criteria, they return to the *establish criteria* step, make adjustments, and decide whether to continue with the *search* or call it off and make the *decision not to adopt*.

Establishing Criteria

Most of the adoptive parents in this study reported that they began to establish criteria for the child they wanted to adopt early in the adoption process. In fact, many said they entered the process with an idea about the type of child they were looking for. While investigating adoption possibilities and talking with adoption agency staff, they formed a more accurate picture of the types of children available. By the time they had completed the *investigating possibilities* step, most had a clear idea about the type of child they desired including age, race, and gender as well as the number of children to be adopted. While the majority of the parents in this study had firm criteria for the type of child they wanted to adopt, six (20%) had no age preference in mind at the time of adoption, and 21 (70%) did not specify whether they had a preference for a boy or a girl.

By using a variety of search strategies, parents in this study usually were able to find a child who met, or nearly met, their original criteria. When parents were unable to find a child that met their desired criteria, they sometimes adjusted or *stretched* their criteria to include children outside of their original target group. Research shows that families who adopt children unlike what they initially planned to adopt are at greater risk of adoption disruption (Barth & Berry, 1988). However, for parents who modify their selection criteria on their own, often by meeting and forming an emotional attachment to a child, stretching can be a very effecting means of matching a child with a family (Babb & Laws, 1997).

Many parents in this study stretched their original criteria in adopting their children. One-third of those who initially specified a specific gender adopted a child of the opposite sex. Five families (17%) originally planned to adopt a sibling group, but only four of them actually did so. Four families who did not plan to adopt a sibling group did adopt siblings. At least one-third of the families adopted a child somewhat or significantly older than originally planned. In some cases, stretching happened spontaneously. These parents found themselves especially drawn to a certain child even though the child did not meet the original criteria they established. As one mother explained, “She found me. The moment I got off the phone with her, I felt like she was meant to be in my life.” In other cases, stretching occurred because the parents could not find children to fit their criteria. “Initially, I wanted to adopt an infant. Later, I decided to adopt an older child because of my age, my job, and because I was a single parent,” said another parent. In a few cases, the caseworker shared information about an older child. One couple said, “We were looking up to age 12. She seemed like a good match for us in our worker’s eyes. She was 14 when we adopted her. She just seemed like the right kid.”

Search Strategies

An analysis of data revealed two categories of strategies used by the 30 parents in this study who actively searched for a child to adopt: working with an agency and searching independently. Although described separately, the two types of searches are not mutually exclusive. While most of the parents contacted an agency and used their services to find a child, many of these parents also looked on their own.

Working with an agency. Eighty-seven percent (26) of the parents who were actively seeking to adopt contacted an agency to assist them with their search. Some parents worked with private adoption agencies, and some worked with public agencies. Both types of agencies offered their clients a variety of ways to find children to adopt. Parents in this study reported using five agency-sponsored search strategies. Most of the parents used more than one strategy.

- *Profile of a Child from a Caseworker* – Caseworkers frequently reviewed their caseloads and identified adoptable children who might be potential matches for a particular family. Then they shared this information with prospective adopters. Although sometimes the caseworker just discussed the child with the family, more often, the caseworker gave the parents a folder with information about the child. After reviewing the file, the parents let the caseworker know if they were interested in adopting that specific child. Thirteen of the parents reported that they received a profile from their caseworker, and 10 parents said they found the child they adopted using this strategy. One couple received profiles from the caseworker while still in the adoption preparation course. “They provided us with a profile during the third training class,” they explained. Other parents met caseworkers who later followed up with them. One parent said, “Then the worker called and said that she had another 12-year-old boy and that maybe we would be interested in him.” Another said, “The social worker we worked with was the most helpful of everything we did.”
- *Book or Computer Photo Listing* – Many agencies showcase available children using their pictures along with brief profiles of their backgrounds in printed materials or on Web sites. Eleven parents said they looked through books or Web sites as one of their child-find strategies. Three parents reported finding their adopted child using this strategy. One couple explained, “We let everyone know that we were looking for a child and they handed us a face book of local kids. We saw several children that met our basic criteria.” These parents later adopted the adolescent they found in the book.
- *Adoption Events* – Adoption agencies hosted a variety of events to introduce available children to prospective parents. Waiting children parties were fairly common. At these parties, waiting children and prospective families had a chance to meet and mingle. Other agency-sponsored events mentioned by parents in this study were cultural fairs, picnics, and adoption conferences. Four parents reported attending adoption events, and three parents met the children they eventually adopted at one of these events. One couple reported, “As soon as we met our children, we knew they were the children for us. When you read the case record, it all sounds negative, but it is different when you meet the child, and you can make a connection.” Another mother particularly liked the adoption conference. “At this conference, social workers attend and market the children. I was looking for a little boy and I wound up seeing this little girl, and she ended up pulling my heartstrings,” she explained. Since both her caseworker and the child’s caseworker were at the conference, the mother was able to talk with both of them. She eventually adopted this young girl.
- *Foster-Adoptive Program* – The foster-adoptive program places foster children with prospective adoptive families before the children are legally available for adoption. These families want to adopt and the children have a high likelihood of being available for adoption in the future (Edelstein, Burge, & Waterman, 2002). Five parents in this study (17%) found and adopted children using this strategy. As one of the parents said, “When I first put in, I told them I didn’t want a child that as soon as I get to loving them

and get devoted to them, they come and take them. I wanted to wait on one who was up for adoption.” Most of the parents (60%) in this study who used this strategy to find a child became foster parents only in an effort to adopt. Once they had adopted the children they were fostering, they did not accept any more foster children. “We were in the Foster-Adopt program and our only reason for being a foster parent was so we could adopt these children,” stated one parent.

- *Contact through Prior Adoption* – Two parents in the study were adopting children internationally when they each met an older child in the same orphanage who interested them. Both parents made inquiries about these adolescents, and eventually adopted them. One of the parents felt tricked by the orphanage staff. She was told that the adolescent wanted to be adopted when she really did not want to be adopted. According to the adoptive mother, “It was all a scam, and they try to find homes for the children.” The orphanage staff talked the youth into going to America even though she did not want to be adopted. As a result, it was a very rough first year for the family as she adjusted both to the family and the change in culture. She was eventually treated for attachment disorder and, at the time of the interview, was adjusting to the family.

Searching independently. Forty-seven percent (14) of the parents investigated adoption possibilities and searched for a child on their own. While most of these parents also worked with an agency, they looked on their own so that they could broaden their search. Some of the parents had been searching for a while and were willing to try almost any strategy to find a child. As one mother commented, “We had pretty much given up.” This woman and her husband began an independent search and found a child. Parents in this study reported using four independent search strategies. A few of the parents used more than one method.

- *Internet Search* – The Internet has numerous Web sites where pictures of waiting children and short profiles are listed. Five of the adoptive parents reported that they searched the Internet to find a child available for adoption. They viewed many photo listing Web sites. Some of the parents used the Internet to read articles and learn more about adoption. One of these parents found the child he ultimately adopted through this search strategy. He said, “I did a search of 1100 and it came up with 73, and I kept coming back to the picture.” After finding the child, he contacted the respective agency and followed its process for adoption.
- *Introduction by a Friend* – In this study, some parents used informal methods to find available children. The primary informal method used by parents in this study was introduction through a friend. Three parents mentioned having friends introduce them to available children. One of these parents eventually adopted the adolescent she met. “A friend of mine had him as a foster child. She brought him over, and he got to know my kids,” she stated.
- *Met through Work* – Several parents in this study worked in adoption or a closely related field. Four of these parents reported meeting the adolescent they eventually adopted during the course of their work. One parent said, “I got to know him by transporting him from the shelter.” Another said, “She was on one of my worker’s caseloads.” All of these parents fell in love with or became attached to these children and wanted to provide permanent homes for them.
- *Mass Media* – Using mass media, including television, newspapers, magazines, and newsletters, to feature specific children or to discuss adoption in general is a strategy

used by many agencies to recruit parents for adoption. It is also a means by which people seeking to adopt can search for a child on their own without depending on a caseworker to make the match. Five of the parents in this study reported using the media in searching for a child to adopt. Several parents mentioned reading regular newspaper columns on adoption such as Wednesday's Child or Sunday's Child. One couple found a sibling group to adopt in one of these columns. The mother reported, "I saw the kids and asked my husband if he wanted a ready-made family. He looked at the picture and told me to call about them and that started the process." The Wednesday's Child story is also used on some television news shows. Another couple saw a sibling group on one such show and called the advertised number. "We went to an information meeting and there were at least 50 people there," said the mother. In order to take advantage of the tremendous interest in adoption and not disappoint all of these prospective adopters, the agency had the social worker for the sibling group at the meeting along with several other social workers representing other children. Although the couple participating in this study did not adopt the children featured on television, they did meet a social worker who found the adolescent they eventually adopted. Study participants also mentioned using television shows, magazine articles, and newspaper stories on adoption in their search for children to adopt.

Finding the Right Child

Possibly the most exciting part of the decision-making process is finding the specific child or youth to adopt. All parents in this study, regardless of whether they planned or did not plan to adopt, were asked why they chose this particular child to adopt. Their responses were grouped into four categories. The first category was characterized by some sense of emotional ties to the adolescent. The other three categories, although not devoid of emotion, were more practical in nature. Figure 4 shows the percentage of parents whose reasons for adopting a specific child fell into each of the four categories.

1. *Felt a Connection.* Almost one-half of the families (48%) said they decided to adopt their child because of an emotional bond that had formed between them (see Figure 4). Some described it as an immediate connection with the adolescent "It was like there was a connection between the two of us from day one," stated one parent. "It was kind of love at first sight," said another parent. Other parents felt an immediate sense of commitment toward the adolescent. As one mother explained, "It was something about that child that she needed somebody and I was the person just for her. I couldn't turn her away. I love her and she loves me." Still other parents were captured by their child's smile. "He has a winning smile that captured our hearts from the start," reported one parent. Others said the adolescent just seemed to belong or fit in the family. "For me when I look at her, she was already like one of my kids," stated one mother. Another said, "We liked him. He seemed like he belonged in our family." And another explained, "After meeting her, we felt that her personality and her interests and likes were things that would fit in well with our family. And that the issues that she brought along with her were things that we could handle." Others talked about having an attachment to the adolescent and always wanting to have this person in their lives. One father described his feelings toward his son, "We had a lot of time to develop the relationship and when I made the decision to adopt him, I was attached to him and he was attached to me despite the fact that they told me he would never be able to show appreciation or attach." Others

shared similar sentiments including, “I really loved her and she was part of my life”; “We just bonded”; and “They became like my own children.”

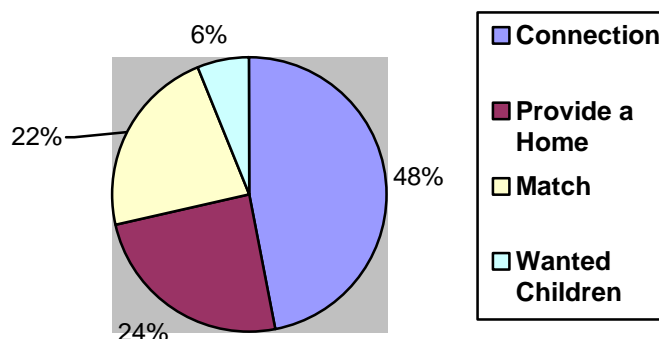
2. *Wanted to Provide a Home.* Twelve of the parents (24%) thought they could provide a home and better opportunities for the adolescent (see Figure 4). These parents expressed more practical reasons for adopting a child. One mother stated that her primary goal in adopting was “basically to give children a home.”

She went on to say, “I wanted those three to be together,” referring to the sibling group that she adopted. Another mother explained her motives for adoption. “Some women feel that adoption is filling a void if they have fertility issues that they can [still] parent and mother but that wasn’t my feeling. I never had that type of

feelings. It was so that we could provide a home and become a family and have a family and be able to provide for them.” Another couple looked at adoption as a way of providing a better life for their son. “We felt that we could protect him from abuse by having him in our home,” explained the mother.

3. *Was a Good Match.* Eleven of the families (22%) said they adopted the adolescent because it was a good match (see Figure 4). These parents described their adoption decision in more practical terms. “She might not necessarily have been the one we would have picked in many ways, but we were picked for her. You don’t get to choose your birth children. This was not real ‘lovey dovey,’ but real practical,” said one parent. “It’s complicated, and I don’t know that there was any one reason. We were experienced parents. We liked children. We were quite intrigued by her, and we thought we would be able to manage it,” said another.
4. *Wanted Children.* As can be seen on Figure 4, three families (6%) stated they just wanted children. “We always wanted to be parents,” said one couple. Another said, “We were both basically from fairly big families, and I guess, we wanted to have kids.” The third couple thought it would be easier to adopt the whole family at once. The mother explained, “Both of us wanted kids, and this was like a ready-made family and seemed an easier way to go about it. In the long run, I would say it is not an easier way to go about it. It is pretty stressful.”

Figure 4. Percentage of Parents' Reasons for Adopting a Specific Adolescent



What Did We Learn?

It is apparent from talking with parents in this study that searching for and finding a child to adopt can be a complex process. Most people seem to enter the adoption process with a preconceived idea about the type of child they are looking for. As they learn more about children available for adoption, they refine their criteria, and they continue to revise and refine these criteria throughout the search process. Many of the parents in this study did not set out to

adopt a teenager but said they stretched their original criteria to include older children either because no younger children were available or because they somehow felt connected to a specific adolescent.

In searching for a child to adopt, prospective adopters will use whatever means available to them, including friends, the Internet, and the mass media. The longer it takes to find a child, the more likely people are to look on their own in addition to working with an agency. In this study, 38% of parents said they used both independent and agency-sponsored search strategies. What worked for one family did not necessarily work for all families, and just because a strategy delivered success the first time around did not mean that it proved useful when the family went to adopt a second time.

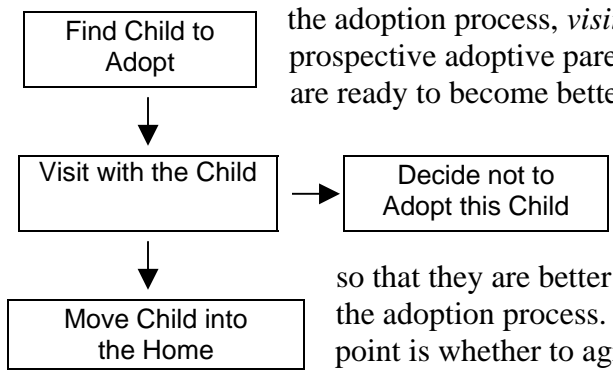
Finding the right child and making the decision to adopt that child is a major step in the adoption process. For about one-half of the parents in this study, the decision to adopt a particular child was based on an emotional connection or sense of commitment to that child. For the remaining parents, the decision to adopt was more practical. The child needed a home and the family could provide one.

RECOMMENDATION 4: Support prospective adoptive parents and provide information to them as they work through the “stretching” process, but allow them to initiate the stretching whenever possible. At the time of the actual search for a child, many people are discouraged at not finding a child that fits their criteria. Some continue their search, adjusting their criteria as they realize they may not be able to find their ideal child in a realistic time frame. Others may need support without pressure to more gradually expand their established criteria about the type of child acceptable to them.

Visit with the Child

Will this child fit in with our family? Do we want to bring this child into our home? Can we handle this child’s issues? Will this child get along with our other children?

These questions are typical of those asked by parents at the third major decision point in the adoption process, *visit with the child*. At this decision point, the prospective adoptive parents have identified a specific child to adopt and are ready to become better acquainted with the child through the visitation process. If the child’s caseworker approves of the match, pre-adoption visits begin. These visits are designed to help the family and the child get to know one another so that they are better able to make the decision about continuing with the adoption process. The ultimate decision for the family at this point is whether to agree to having this child placed in its home for subsequent adoption. If it decides at this point that this is not an appropriate placement, the adoption process does not move forward, and the child is returned to foster care. The family then decides whether to pursue the adoption of another child or whether to stop looking for a child to adopt altogether. If the family chooses to find another child, it returns to the *establish criteria* step, reexamines its criteria for the type of child it would like to adopt, and begins a new *search*.



The Visitation Period

Of the 30 families in this study who planned to adopt, seven were in the foster-to-adopt program and three met the teens they planned to adopt through work, and two adopted internationally with little or no pre-adoption contact. These 12 families did not have a traditional visitation period. These ten families did not have a traditional visitation period. The remaining 18 families did report having at least some level of contact with the child prior to moving him or her into the home. Typically, in-person contact began as short visits, gradually building to overnight and weekend stays. Because this was a study of successful adoptions only, all of the participating parents did ultimately make the decision to move the adolescents they were visiting into their homes.

Although specific data on the timing of the visitation period were not collected, anecdotal information from this study revealed that the length of visitation varied from zero to ten months of visits. No adoption agency in this study appeared to regulate the length of the visitation period. There were, however, a variety of other factors that did influence the length of visitation including geographic location, foster placement issues, system issues, and individual child and family needs. Some visitations were influenced by more than one of these factors.

Geographic location of child in relation to the adoptive family. The geographic location of the child's foster home or orphanage in relation to the adoptive family's home influenced the length of the visitation period for eight families. One of these families adopted internationally, five were interstate, and two adopted in state. The family who adopted internationally had only one visit with the adolescents it planned to adopt prior to going to the children's birth country to pick them up at finalization. Of the five families who adopted across state lines, three had a limited number of visits before moving the adolescents into their homes, but two only talked on the phone beforehand. A few of the families thought this abbreviated visitation was a problem. One mother said, "We would do it differently—not so much for us, but more for the children. I can't imagine what it was like for those children to be uprooted from [their home state] and coming to a strange state with cold weather and strange people that they had never met." Two of the families who adopted within their own states were also challenged by geographic location. These parents mentioned that they had to travel long distances to visit with or pick up the adolescents. One couple adopted a sibling group. The siblings were in different foster homes located across the state. Reflecting on that period, the mother said, "Visitation was horrendous because they lived hundreds of miles apart, and we had to bring them all together. We started splitting them up with my husband taking two and me taking two." In the other family with in-state distance issues, the adolescent ended up moving into the adoptive home more quickly than planned. "You are supposed to have several meetings over the weekends and a couple of weeks where the child spends the night," said the father, "but with him four hours away and being in school, it was impossible."

Foster placement issues. In three of the families, issues or problems with the adolescent's foster placement caused the visitation period to be significantly shortened. Rather than moving them to another foster home, resulting in yet another placement, these adolescents were placed directly into their adoptive homes. This made the adjustment period more difficult for some families. "It never happens the way the book tells you," said one mother. "When I brought her back on Monday, her foster mother said that she was turning her back in because she just couldn't handle the stress." She went on to say, "I told the caseworker that if it were

approved, then I would just take her then so that she wouldn't have to go through another foster placement. I had known her for less than one week." This adoptive mother reported having a very stressful first year. "It is still stressful," she went on to say, "but the first year was very difficult." Another mother did not talk about adjustment issues, she just said, "It was very fast because he wanted to get out of the foster home that he was in."

System issues. Adoption agency quotas and the school calendar played a role in determining the length of the visitation period for at least four families. The visitation period was cut short for one family in order to meet agency adoption quotas. This mother said, "They wanted them placed by Christmas because it looked good for their placement numbers to have three more placed. They rushed us through." In addition to the hurried visitation, these children were placed in the adoptive home about the same time of year that they were removed from their birth parents. "It all worked out," said the mother, "I wouldn't recommend it to anyone else because the children and parents pay the price in the long run." Other visitation periods were cut short to accommodate the school calendar. One father said that they had to move quickly or wait until the semester was over. "...we kind of pushed the timing as far as moving him because school was starting. He was in special education and we didn't want him to miss because he had block scheduling," he explained. Another parent said, "Her social worker was highly motivated to get her with a permanent family before school started."

Child and family needs. Eight families in this study reported that they determined or partially determined the length of their visitation period based on their own child's needs or life circumstances at the time. The parents, adolescents, and caseworkers worked together to decide when the adolescent should be placed in the home. One couple said they had a delay in the initial meeting due to issues with the birth father, but once this was resolved, they wanted to make up for lost time. The mother stated, "Once we met them, it went very quickly." One family had an extended visitation period because they wanted to move to a larger home before all the children moved in with them. "We had five and one-half months of visitation, and we put a lot of miles on the cars." The families who felt they had a say about the length of the visitation period, appeared to be the most satisfied with the visitation process.

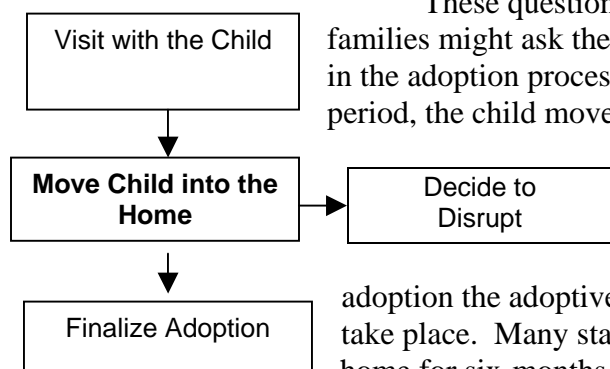
What Did we Learn?

It is difficult to say from the information collected in this study whether the length of the visitation period influenced decision-making at this step since all of these parents ended up moving forward with the adoption regardless of how long their visitation schedule was. There is, however, some indication that the length of the visitation schedule does impact adoption adjustment. The families in this study whose visitation schedules were, for various reasons, prematurely shortened seemed to experience a more difficult adjustment period. The visitation process appears to work best when the needs of the families and the adolescents, rather than external factors, control the timeline.

RECOMMENDATION 5: Allow parents and adolescents to have an adequate visitation schedule prior to moving the adolescents into the home. Speeding up the visitation too much may result in a more difficult adjustment period because both parties have to get to know each other and learn to live together at the same time. When a full visitation schedule is not possible, provide extra support to the parent and adolescent to help them with this dual adjustment.

Move Child into the Home

Can we make a permanent commitment to adopt this child? Are we prepared to meet the challenges this child will bring to our family? Will this child make the changes needed to become a member of our family?



These questions are typical of those that prospective adoptive families might ask themselves at the fourth and final major decision point in the adoption process, *move child into the home*. After the visitation period, the child moves into the adoptive home to continue the process of getting acquainted. The major decision for the family at this point is whether to finalize the adoption. If it decides to move forward, assuming the child has already been legally freed for adoption the adoptive family can determine when the finalization will take place. Many states, however, do require that the child be in the home for six-months before the adoption can be finalized.

If, after moving the child into the home, the family chooses not to go forward with the adoption, a disruption is said to occur. If the adoption process disrupts, the family must decide whether it wants to continue with the adoption process. If a decision is made to look for a new child to adopt, the family goes back to the *establish criteria* step, reconsiders their criteria for adoption, and begins another *search*.

Finalization Decision

As previously stated, the primary decision for families at this stage in the process is whether to finalize the adoption. While some parents in this study used the placement period to see if they really wanted to adopt this particular child, many of the parents made the commitment to the adoption prior to the child moving into the home. Because they were already committed to the adoption, these parents used the placement period to focus on helping the adolescent and other family members to adjust to one another rather than to decide whether they wanted to adopt this child. As one mother explained, “We were committed to him from the time we got him. We felt like he was ours.” When asked if he considered disruption, one of the fathers replied “No, I couldn’t get rid of him if I had to.” Another couple reported, “We had a commitment and he wasn’t going to scare us.”

Placement Challenges

Regardless of their level of commitment to adopting a specific child, parents in this study admitted that moving an adolescent into a new home, often with little preparation for themselves or the teen, and with minimal contact between the family and teen prior to the move was a challenging experience for all involved. As one couple said, “He came at 13, and it’s hard to attach to 13-year-olds, even if you really like them and they’re really good.” Even the most dedicated of parents talked about how difficult the situation could be. “Thinking about sending our kids back is something that we can’t even abide even though that would be a temptation at times,” reported one mother. Another parent was idealistic about the adoption, at least until his child moved in. He said, “I think that when you go into adoption, you have this dream that this is all going to be perfect, and it is going to be as real as a family can be. Maybe that is true if you adopt a baby, but I just don’t know.”

Many parents described behavior problems during the placement period that caused them much heartache and distress. Eight families spoke of a “honeymoon period” where the adoptee was on his or her best behavior for a time after coming to live at the house. Often, the problems began either shortly before finalization or during the first year of the adoption. For two of the families, the “honeymoon” lasted well past placement and into the adoption. These parents reported having more problems with adoptees in their later teens and early twenties than when they were first adopted. As one of these parents said, “There weren't any negative issues initially but things started breaking down.”

All of the prospective adoptive parents described challenges associated with this step. One father spoke for others in saying, “There were a lot of up and down struggles during the first year.” Based on parents’ comments, three primary categories of struggles were identified: becoming a family; working through emotional issues; and coping with adolescence.

Becoming a family. Parents in this study described the placement step as a time to begin the process of adjusting to living together as a family. For some, this meant learning to become a parent. When talking about this period, one father said, “I was learning how to be a dad to him also.” For others, this meant blending children already in the home with the new adoptee. Most parents with these blended families experienced some adjustment issues. One couple said that their birth son, “has surprisingly always been favorable to his new brother.” The father went on to say that even so, “It was a big adjustment, and I would say, disruptively so, for about a year.” For most, becoming a family meant learning what it means to be in a family. Since all of these adolescents were from dysfunctional families or had never experienced being in a family, many parents had to help their teens learn to be family members. A mother said, “She had to learn what a family is, and now she is a family girl.” Another parent talked about building new traditions as a family. “We started family traditions and tried to teach them what families do such as eating together and celebrating the holidays together. Just the normal, simple things are important and should be done consistently, and they learn from your example,” this parent explained. For parents in this study, becoming a family was critical to the success of the adoption. The process of becoming a family began when the adoptee moved in with his or her new family and continued long after the adoption was finalized.

Working through emotional issues. All except one of the adoptees spent time in foster care or orphanages prior to being adopted. All had emotional scars as a result of this experience. As one mother was told, “...they all come with baggage that you'll have to deal with, that you didn't cause, but you're going to have to deal with it.” Most of the adoptees (71%) received counseling during the placement period to help them deal with these issues.

One immediate issue for a few parents concerned medications prescribed for various emotional or behavioral problems. Some parents thought their adolescents were medicated inappropriately, so they worked with doctors to wean them from their prescriptions. One mother said her child did not need drugs; she needed a change of placement. She explained that if the doctor had known about her foster care situation, “I don't think she [adoptee] would have ended up getting as drugged up as she did.” Soon after this adolescent moved into her new adoptive home, her mother talked with the psychiatrist about withdrawing her new daughter from some of the medications. At the time of the interview, she was off all medications and doing well. Other parents thought their adoptees had not received proper treatment for attention problems or depression. They sought medical help to get them this treatment. For example, one father said, “He had ADHD and was never medicated and didn't receive counseling.” With appropriate

medication and counseling, this young man was able to adjust to his new family and do well in school.

The majority of the parents (82%) said the adolescents they adopted had behavior issues during the placement period. Most believed the teens feared rejection and were testing their commitment to them. As one couple explained, “I think he was just testing us to see if we were going forward and not kick him out. He did some pretty nasty things.” Two other parents expressed similar sentiments when they said, “He tested me and still does. He always thought that I was going to send him back,” and “It was important to him that it be finalized, and we did it quickly. He didn’t believe us. Everyone he had known who had been adopted got kicked out. One of the first things he asked me was, “What do I have to do to get kicked out of here?”” Another parent said that her adoptee withdrew instead of acting out. “When he first came to our home, it was difficult in that he would spend hours and days in his room without talking with any of us,” said this mother. “He really locked himself away a lot. He just wasn’t connected at all to anyone.”

Some adoptees particularly targeted their adoptive mothers with negative behavior, which often caused stress in the marriage. “I was the one who saw all the resistance,” said one mother, “and for a while my husband thought I was over reacting to her behavior.” Another mother said, “She was real sweet and cutesy with my husband and real nasty and underhanded with me. You start to take it personally because you’re always getting dumped on.” At first, her husband did not see what was happening. At a workshop, they learned that adoptees often target the adoptive mother as a result of their anger towards their birth mother. After learning what was really happening, this couple made some changes, and the situation improved.

Three parents said their teens became very disruptive just prior to finalization of the adoption. One mother was typical of the others in describing this difficult period. “I think it was the finalization, that this was really going to happen. He was just testing us to see if we really wanted him. We had more therapy and I took the gloves off because I had been acting like the nice mommy for a long time and overlooking a lot of things. I just started treating him like he was mine.” Another parent said, “There was once just a couple of months before the adoption was finalized where he had to go into respite because he was acting out so much, but it never crossed my mind that the adoption wasn’t going to happen.”

The adolescents in this study began working through their emotional issues during the placement period, but it did not end there. Most parents reported that they continued to deal with the emotional scars long after finalization. As one parent reported, “After five years, I am not sure that she is fully adjusted. We are still making adjustments and probably always will.”

Coping with adolescence. Many of the challenges faced by parents in welcoming the adoptees into their homes were the same issues faced by most parents of teenagers. Some of the parents in the study had already raised teens, but it was a new experience for others. “She is a relatively normal teenage girl,” said one of the mothers who had experience raising teens. Another mother with no experience with adolescents commented, “We struggle with what part is the adoption process and what part is the teenage thing.” “She has a nasty teenage attitude,” stated another experienced mother. “I think it has to do with the fact that he is a teenage boy,” explained yet another parent. First-time parents relied on the training they received and their support groups to get them through the trying times.

In addition to dealing with typical adolescent behaviors, adoptive parents were also faced with normal developmental changes associated with adolescence. Some of these developmental

changes, such as identity development and individuation or separation from the family, conflict with adoption-related tasks associated with becoming a family member (Brodzinsky, Lang, & Smith, 1995). The teens in this study were trying to find their own identities and begin to separate from their families while, at the same time, trying to bond to new parents and siblings and adjust to family life. This period of conflicting objectives began for many adopters at placement and continued throughout their teen years. One mother summarized the situation, “Adolescents are in the process of breaking away, when he [the adoptee] is trying to bring things together. So, everything is structured to help with the transition of breaking away as opposed to the structure of bringing things together.” Parents and teens coped with these issues as best they could. A few teens needed more time to bond with their families before breaking away from them. These teens tended to stay home longer than their peers by delaying college or jobs or by going to a college or taking a job close to home. One such teen went away to college, but was too homesick to stay. His father described this experience, “At first I was disappointed when he said he was coming back home, but then one of the nights when I was driving back, I thought about the fact that a few years ago he didn’t have a home to want to go home to. I told him that he could transfer back home, if he wanted to be closer to home.”

Another way in which parents worked to help their teens deal with the conflicting feelings associated with being a teenage and being adopted was to give them control over some aspects of the adoption. A few teens were allowed to exercise control by deciding whether to be adopted. One parent said, “I gave her the choice and said it was up to her. When she came to live with me, her social worker told her that he would find another place if she didn’t like it here.” Other parents left the timing of the adoption finalization up to the teen. “I left it up to him to make a decision about finalizing the adoption,” explained another parent. “He picked the day, and he looked forward to it. It made all the difference since he was in control over the adoption.” A few of the teens were allowed to exercise control by deciding whether to take their adoptive parent’s name. “She had to pick her name, and she took three months to decide what name she wanted. She decided on a hyphenated name. It was entirely her decision,” said one mother. One sibling group changed both their first and last names. Controlling some aspects of the adoption process appeared to help the adolescents better accept the adoption decision.

Length of Placement Period

As previously described, 30 families in this study planned to adopt and followed the adoption decision-making process depicted in Figure 3. Three of these families (10%) adopted internationally and had no placement period. The others had placement periods ranging from six months to five years. Most of the families (67%) had the adolescents in their homes between six and 18 months prior to finalization. The remaining 23% of families were in a foster-to-adopt program, which, for a variety of reasons, tended to result in longer waiting periods before finalization. The placement period for children in foster-adoptive homes ranged from 18 to 60 months before the adoption was finalized. This long waiting period combined with the insecurity about whether or not the adoption would take place was especially difficult for one of the families. The mother explained, “I think the children were dangling emotionally. I think we were all kind of on our best behavior and trying to make it work, but maybe not really working through the real dynamics, and it was a more stilted environment. It was very counter-productive.”

What Did We Learn?

Initial placement is a stressful, but exciting time for adolescents and families. It is exciting because a new or expanded family is forming. It is stressful because families are not only trying to make a decision about finalizing the adoption, they are also working to get to know one another better and dealing with various adolescent- and adoption-related issues. There is pressure to make life-changing decisions in a relatively short amount of time. Failure to connect with one another and continue with the adoption finalization is traumatic for everyone. Parents in this study were able to face a variety of challenges and remain committed to the adolescents that came into their homes. Many of the parents found this step in the process to be particularly difficult and especially rewarding.

TO BE ADOPTED OR NOT TO BE ADOPTED...

The previous section discusses the adoption decision-making process from the parent's perspective. This section looks at it from the adoptee's. All of the adoptees in this study were adolescents at the time of adoption. Unlike younger adoptees, children adopted as adolescents tend to play a greater role in the decision-making process. However, because they are not yet adults, adolescents do not have full decision-making authority. The actual legal decisions about adoption are ultimately left up to the adoption agencies, caseworkers, judges, and prospective parents. Nonetheless, adolescents can and do influence adoption-related decisions in a number of ways—most notably through their involvement in the adoption process and their acceptance of adoption decisions made on their behalf.

In a review of the literature, no research was found on how adolescents influence the decision to adopt. In this study, adoptees were asked a series of questions designed to explore how they influenced the adoption decision and why they agreed to be adopted by the particular families who adopted them. Thirty-seven adoptees from 30 different families agreed to be interviewed. They ranged in age from 14 to 35 at the time of the interview. Twelve of the adoptees were 18 or older, and five of them had left home at the time of the interview. Older adoptees and those who have already left home appear to have a broader perspective of the adoption process than those who are still actively involved in adapting to family life. They have had time to reflect on their adoption and are developmentally better able to conceptualize the process. Younger adoptees, on the other hand, provide a more immediate perspective of the adoption process in that they are still going through the adjustment period. Both perspectives are valuable in analyzing the adoption decision-making process.

Adolescent Involvement in the Adoption Process

During their interviews, adolescent adoptees in this study talked about their involvement in the adoption process. As one might expect, some were more involved than others. In analyzing responses to questions about their level of involvement, two factors emerged as having a significant impact on adolescents' participation in the adoption process: agency characteristics and individual characteristics.

The Impact of Agency Characteristics on an Adolescent's Involvement in the Adoption Process

Most adoption agencies in the United States allow for at least some level of involvement by adolescents in the adoption process. This is largely due to the fact that in the United States, the adoption process usually includes a series of pre-placement visits followed by several months in the home prior to finalization. In cases where the adoptive home was also the foster home, the child might be in the home for years prior to finalization. Consequently, both the adolescent and the adoptive family have an opportunity to get to know one another before the actual adoption takes place. Together, they can decide if adoption is right for them. As one adoptee said, "I figured out that I wanted to be adopted during the six-month period that I lived with him. I felt that I have found a match for myself. I found out that it was right for me." Another adoptee explained, "My experience with them as a foster child led me to believe that they were going to be okay."

In contrast to the adolescents adopted from domestic agencies, the adolescents in this study who were adopted from international agencies (all orphanages) seemed to have less involvement in the decision-making process. Because of geographical distances, the

intercountry adoptees seldom had the opportunity to meet their adoptive families more than a day or two prior to the finalization of the adoption. While all seven of the intercountry adoptees interviewed for this study said that the staff at the orphanage did at least tell them about the adoption before their adoptive parents came to take them back to the United States, the amount of preparation and notice that they received varied. Two of the adoptees (siblings) were able to have a pre-placement visit with their adoptive family a couple of years prior to the actual adoption, and despite repeated delays with finalization, they corresponded regularly in the interim. One other intercountry adoptee reported having significant communication with her new family prior to their first meeting. Another three adoptees said although there was no pre-placement correspondence, they were given information about their adoptive families before their initial meetings. The adoptee who was given the least amount of information about her pending adoption was told only moments before she was taken to the hotel where she met her new family and stayed with it from that point forward. This young lady expressed the opinion shared by many of the intercountry adoptees when she said, “I didn’t want to go to America, and they talked me into it. I felt like I didn’t have a choice...that if I said no they would keep talking and pressuring me.”

While the type of adoption agency (i.e., domestic versus international) often determines how much contact the adolescent has with his or her new family prior to the adoption, individual agency policies and caseworker attitudes can also play a role in the teen’s level of involvement throughout the adoption process. Agencies differ—even within United States—as to how much effort they are willing to put forth in finding homes for adolescents, often considered *hard-to-place* or *special needs children*. With limited time and resources, many agencies focus their efforts on placing younger children who do not have special needs and who are typically easier to find homes for. The goal for many adolescents is listed as *independent living*. Several adoptees in this study said that adoption was not considered an option for them until their case was turned over to an agency that specialized in placing older children. One young man said, “When I was 15, my case was referred to a special adoption agency for hard-to-place children, and it was that caseworker who suggested that he might be able to find an adoptive home for me.” Another adolescent complained that the agency and the courts did not include her in the adoption decision. “I didn’t really have someone sit down with me and talk to me and see how I really felt about it. I wanted to be adopted, and they wouldn’t let me, and I had to go through four years of struggles....They asked if I wanted to be adopted, and I said that I did, but they said I wasn’t old enough to make that decision.”

Several adoptees mentioned that their caseworkers’ attitudes about adoption were instrumental to their being adopted and had either a positive or negative effect on their participation in the adoption process. One intercountry adoptee commented, “She [her caseworker] really cared about us. If she had not encouraged me, I don’t know if I would have gone to America.” Other adoptees said that they appreciated having a caseworker who took the time to get to know them. As one adoptee explained, “The last social worker that I had actually took more of a personal interest in me rather than just a case history. He was the first person actually that I could tell was not on a timeline, and when he came to visit me, he wasn’t looking at his watch.” Still other teen adoptees were grateful to their caseworkers for including them in the process and giving them a say about what kind of family they wanted. When speaking about his former caseworker, one young man said, “He kind of asked me what it would be like if I could describe my perfect family. After I gave him a description, he said that he would try to find it for me.”

The Impact of Individual Characteristics on an Adolescent's Involvement in Adoption Process

As mentioned above, for the most part adolescents adopted from agencies in the United States reported that they had some involvement in the adoption process. The extent of their involvement can be seen as existing on a continuum from *little* to *considerable involvement*. In addition to agency policies and caseworker attitudes, the adolescents' own personalities played a major role in determining how much influence and involvement they had in the adoption process. Some of the adoptees interviewed for this study indicated that they were more outgoing and had definite opinions about what they did and did not want in their adoptive families. Situated on the *considerable involvement* end of the continuum, these adolescents tended to be proactive and very involved in their search for an adoptive home. In fact, six of them (16%) even asked their parents to adopt them. One of these adoptees said, "I brought it up because I didn't like the system. I was tired of moving from place to place. I didn't really care if he would be a good father or not. I felt it would be better than being in the system." Another adoptee got mad at her biological mother for not keeping promises. During one of their frequent arguments over the phone, she suddenly lashed out, "I want to get adopted!" Afterwards, this young lady talked with her foster mother about the possibility of adoption. "At first she [her foster mother] wasn't sure if that was a good idea, but after a couple of months, we both decided it was okay," she said.

At the opposite end of the continuum, having *little involvement* in the adoption process, were those who admitted to not being as vocal about their adoption needs and wants. Many of these adolescent adoptees appeared to be less outgoing, more hesitant, or perhaps, just more laid back about the whole process. One adoptee confessed that he did not remember much about the adoption process. He said, "I don't really quite remember how it happened other than one day they were going to court over me, and the next thing I know, I was adopted." He went on to say, "It wasn't a big question that I had to think about. It seems like a natural process." Another adoptee at the *little involvement* end of the continuum reported, "My caseworker always had the intention to have me adopted, especially after my mother died. I had no choice. I knew I didn't want to be alone. I didn't care at that point." This young woman was willing to go along with whatever the agency had planned for her.

Most of the adoptees fell somewhere in the middle of the continuum. While they did not actively seek adoption or ask someone to adopt them, they did express opinions on certain aspects of the adoption. For example, several of the adoptees had definite ideas about the types of adoptive homes they would prefer. One young woman said, "I wanted a single woman who was not married. I [already] had a dad." Other adoptees expressed opinions on issues such as name changes or contact with their biological families. "The only thing that I didn't want to do was change my last name," said one teen. "I wouldn't have agreed to the adoption unless I could have contact with my siblings," said another. Many of the adoptees gave their adoptive parents credit for including them in the adoption process and giving them control over various aspects of the adoption such as the timing of finalization and the type and frequency of biological family contact.

What Did We Learn?

It is clear from their responses that adolescent adoptees in this study had varying degrees of involvement in the adoption process. Adoption agencies and caseworkers, through their policies, priorities, and practices either facilitated or inhibited this involvement. While most agencies in the United States allowed teens to have at least some voice in the adoption process,

international agencies were less able to offer the same level of involvement to their teens being adopted overseas due to language and geographical barriers. Researchers in this study also found that the adoptee's personality plays a role in determining his or her level of involvement. Those with more assertive personalities often took the search for adoptive homes into their own hands and asked someone to adopt them, while others appeared content to simply go along with whatever the agency had planned for them. Most adoptees expressed some opinions about the process and were able to exert some influence over certain aspects of the adoption such as the timing of the finalization and the type and frequency of biological family contact.

RECOMMENDATION 6: Employ caseworkers who specialize in adolescent adoptions. These caseworkers should have positive attitudes about teens and be eager to find permanent homes for them. Include teens in the adoption process. Streamline the process as much as possible so that the teens can be adopted when they are ready. Many adolescents are adopted because a dedicated caseworker is determined to find a good home for them. With the proper preparation and support, teens can be convinced that adoption is a good alternative for them. Once they have accepted this fact, teens wanted the legal process to move swiftly so that they can move forward with their lives.

Acceptance of the Adoption Decision

As mentioned previously, adolescents—as minors—have no real decision-making authority in the adoption process. While they can influence the decision through their involvement in the process, it is left up to adults to make all of the critical decisions in the teen's life. The biological parents decide to be good parents or not to be good parents. The agency, law enforcement, and/or the courts decide to remove the child from his or her home and put the child into foster care. The judge decides if and when the birth parents' rights should be terminated. The prospective adoptive parents decide whether they want to adopt this particular child. And to some extent, even the adolescent's level of involvement in the adoption process is determined by agency policies and caseworker attitudes. The only true decision that adolescents have in the adoption process is how they accept the decisions made on their behalf. For most of the adolescent adoptees in this study, this acceptance came in two stages. The first involved coming to terms with the fact that adoption is their best option and agreeing to participate in the adoption process. The second was agreeing to be adopted by a particular family.

Letting Go of the Past and Agreeing to Participate in the Adoption Process

The adolescent's acceptance of the decision by the agency to terminate parental rights is critical for his or her future adjustment. The realization that no one in the child's biological family can take care of him or her is an important first step in the adoption decision-making process. In this study, 11 adoptees (30%) specifically mentioned that they had come to this realization. One adoptee said, "I decided I didn't want to be with my mom, and I decided I would go with adoption." Another said, "We spoke about adoption because I realized that my biological family was not getting any better or trying to get me back." Regardless of the termination decision made by the agency, it appears that some adolescents also need to make the decision that, though they still love them, their biological family will not meet their needs, and they need to move forward.

While some adolescents are able to come to the conclusion that adoption is their best option on their own, others still need to be convinced. Many of the adoptees in this study indicated that they had reservations about being adopted when the subject was first brought up. One young man explained, “I needed to be convinced that the people who adopted me were not going to give me up like all the other foster homes and other people who said they wouldn’t give me up and they did.” Another adoptee said, “I wasn’t ready when they first brought it up, and they didn’t press it. It was a good thing for me that they didn’t pressure me. I usually rebel when someone tries to push me.” Although this young lady was given the opportunity to accept the adoption decision on her own timeline, other adoptees were not so lucky. Several of the intercountry adoptees indicated that they did not want to be adopted and felt like they were “talked into” it. As one adoptee said, “I didn’t think I wanted to come, but they pretty much made me come.” Whereas the teens adopted from the foster care system in the United States complained about having had bad experiences in foster homes or being tired of moving from place to place, the adolescents adopted from international orphanages did not seem to have been particularly dissatisfied with their former lives. Most had been relinquished at birth or soon thereafter, and orphanage life was all they knew. Consequently, they were not eager to venture into the unknown world of adoption. One intercountry adoptee said, “I really didn’t care [about adoption] at first because I was happy with my life. I never suffered from hunger or anything like that.” Another said, “I didn’t want to leave my friends because I was happy down there.”

What Could Have Made Accepting the Adoption Decision Easier?

The adoptees in this study were asked about what else could have been done to help them accept the decision by the agency to put them up for adoption. While many of those interviewed (46%) said that nothing more could have been done, the process was fine, they did not know what would have made it easier, or they gave no response at all, others had definite opinions on the matter. Fifty-four percent gave one or more responses. These responses were broken down into the following categories: more adoption preparation, better resolution of biological family issues, and a speedier process.

Of those who responded to this question, 75% said that the amount and kind of preparation they received from the agency had a positive or negative impact on their attitude towards being adopted. Preparation for the adoption seems to come down to whether information was provided or not. Several of the adoptees felt that their adoption agency and caseworker had provided adequate information on what to expect from the adoption process. As one adolescent said, “I think they did a very fine job. They gave me the information about the adoption. They told us what would happen and [about] the possibility of my [biological] family being upset with me and rebelling against me.” Other adoptees complained about the lack of information provided to them about the adoption. One adolescent said he did not understand the process. “We were always told that either your mom is going to get you back or you are going to foster care. We never heard about adoption until the total end.” Another adoptee wondered why she could not be adopted with her brother. “They didn’t tell me why they didn’t do it,” she said. Several of the intercountry adoptees felt that they could have been better prepared for their adoptions if they had been taught English ahead of time.

In addition to being better prepared for adoption in general, 10% of those responding to this item also indicated that they could have benefited from some assistance resolving biological family issues. As mentioned previously, in order for adolescents to fully accept the adoption decision, they must first understand and accept the fact that their birth parents cannot care for

them and that they will not be returning to live with them. In short, they must let go before they can move forward. A couple of the adoptees seemed to have difficulty doing this. As one adolescent said, "I don't think anything could have helped with my decision because I felt that I was betraying my family, and I felt I was stuck in limbo." Another adoptee stated, "...I really didn't want to be adopted. I wanted to have a chance to be with my real mother. I will never give up the search in finding my mama." Five years into the adoption, this same young lady summed up her feelings by saying, "I'm happy here, but deep down inside there's a part of me missing because that's the only place that my real mama can fill." Still another adoptee faced the opposite issue. He wanted to let go of his biological family but feared that it would not let go of him. "I was worried that my father would come back and try to take me away. As a child, I didn't know if that was possible or not, but I worried about it quite a bit. They had the document from my biological mother releasing me but not [from] my father."

While some adoptees had a difficult time letting go of the past and accepting adoption as their best option, other adoptees complained that they were ready to move forward with adoption long before anyone else was. Thirty percent of the adoptees who answered this question said that they wish they could have been adopted sooner. One adoptee explained, "I think it would have been nice to have the system work more quickly for me to be adopted. I should have been adopted even before my mother was dead. I was in the system too long." Making a similar point, another adoptee said, "I think things could have gone a lot quicker. A child doesn't really feel like he belongs until he actually belongs. I lived in limbo about three to four years, not knowing if I was going to stay or not."

Agreeing to Adoption by a Particular Family

The second stage in an adolescent's acceptance of the adoption decisions made on his or her behalf is agreeing to be adopted by a particular family. As stated previously, sometimes it is the adolescent who asks a family to adopt him or her. Other times, it is the family who initiates the discussion about adoption. In many cases, it is the caseworker who first broaches the subject. But regardless of who introduces the possibility of a union between child and family, it is ultimately up to the prospective adoptive parents to decide whether or not they are willing to adopt that particular child. Several of the adoptees in this study clearly recognized their limited role in the decision-making process. As one young man explained, "The family basically chose us. We didn't choose the family." Another adoptee said, "It was not someone that I would have chosen...I would have chosen a family with a mom and dad." In an effort to determine how and why they came to accept being adopted by a particular family, the adoptees were asked a series of questions pertaining to their reasons for agreeing to the adoption as well what benefits and difficulties they anticipated as a result of being adopted.

Reasons for Agreeing to the Adoption

Adoptees were asked why they considered adoption with this family. Responses were analyzed, and four categories of reasons for accepting the adoption decision were identified. Some of the adoptees provided more than one explanation. One adoptee said he just wanted to be adopted. He offered no explanation other than, "I felt it would be better than being in the system." It is interesting to note that only one of the four categories, *sense of belonging*, relates to any kind of love for or attachment to the adoptive family. Over half of the adoptees did not really know the family who planned to adopt them prior to start of the visitation period. These adoptees' reasons for agreeing to the adoption tended to be more practical in nature.

Sense of belonging. Almost half of the adoptees (46%) said that the reason they agreed to be adopted by their parents was that they felt like they belonged in that family. Some went so far as to say they wanted to be adopted because they loved the family and becoming a part of it just “felt right.” As one adoptee said, “I loved him, and we were very close. We had a lot of fun together...I had nowhere else to go, and it just felt right.” Similarly, another adoptee responded, “I felt that I have found a match for myself. I found out that it was right for me.” Others were less attached but still seemed very positive about their relationship with their new family. “She always made me feel welcome the whole time I was there. We did things together and got along very well,” noted one adoptee.

Stability issues. The second largest category of reasons why adoptees consented to being adopted by their family had to do with issues of stability. Forty-one percent of the adoptees said they wanted a stable home and a family. Many were tired of moving around and wanted a permanent place to call home. One adoptee shared his expectation of the adoption, “It felt like that maybe I could find somewhere stable and not move from place to place to place.” Another said, “Knowing that I didn’t have to move again was great.” Several adoptees expressed their desire to be part of a family with comments such as, “I just wanted to feel loved and have a normal family”; “I liked it because I didn’t have a family, and she decided to adopt me”; and “We wanted to be part of a family.” Although some of the adolescents knew their adoptive parents from foster care or from other associations and wanted to live with this specific family, others just wanted any family. One teen explained, “I knew that I couldn’t be choosy when it came to adoption because I only had four years left until I would be 18. The time was short to find me a family and I had to give anyone a chance.” Another said, “We talked about it a little bit, and of course, at that time, I was just looking for a family.”

Better opportunities. Sixteen percent of the adoptees said they agreed to this adoption because they thought it would provide them with better opportunities than they would have had otherwise. Not surprisingly, the majority of responses falling in this category came from intercountry adoptees. As mentioned before, adolescents adopted from other countries typically did not have the chance to bond with their new families prior to the actual adoption so there was no emotional attachment associated with their reasons for agreeing to the adoption. And because all of the intercountry adoptees in this study lived in orphanages prior to coming to America, they did not experience the instability of frequent moves within the foster care system. Furthermore, these intercountry adoptees did not seem to be unhappy with their lives in the orphanages, although several did mention wanting to be part of a family. The primary motivation for adolescents from other countries to be adopted by an American family was the opportunity for a brighter future. As one intercountry adoptee explained, “I thought America was a great place to be...I was happy at the orphanage, but I thought I would have better opportunities here.” Another said, “I decided that I could have a better future in America. I wanted to be a lawyer, and the orphanage could not afford to pay for law school.” At least one American adoptee also saw adoption as a way to improve his future. “I had a better life over here so I kind of got coaxed into it. I could do more stuff over here than in [my home state],” he stated.

Being with siblings. Fourteen percent of the adoptees saw adoption as a way of being able to live with their siblings. One young lady expressed her delight in being reunited with her siblings, “Because we had been separated for so long, they didn’t want us to be separated again because we were scared we might not find each other any more. I was happy because I then

knew I would be with my family, if not all of it, at least half of it.” Another adoptee said, “Being with my sisters was a big plus.”

Anticipated Benefits

In addition to asking about their reasons for agreeing to their current adoption, adoptees were also questioned about what good things they anticipated happening as a result of this adoption—both to them personally and to their adoptive families. Some of the adoptees struggled with these questions and said they never really thought about it before; however, with some explanation and prompting, most were able to provide an answer.

Benefits for the adoptee. When asked about what good things they anticipated happening to them personally as a result of the adoption, all but three of the adoptees (92%) were able to give a response. These responses were analyzed and the results broken down into five categories. The categories are similar to those in the previous section dealing with reasons for considering the adoption in the first place. Once again, some of the adoptees talked about love and bonding, while others spoke of more practical benefits.

1. *Have a Family.* Of those responding to this question, one-third (35%) said that prior to their adoption, they thought that the best thing about being adopted would be having a family. This meant having a permanent place to live and people on whom they could depend. Several adoptees in this category talked about feeling safe and secure, having someone to fall back on if needed, and having a sense of belonging. One adoptee said, “I knew she was a good person and that she would take care of me the way everyone wants to be taken care of. I knew I would feel safe and secure with her.” Another said, “I would have a family who would always be there for me. I wouldn’t have to move around all of the time.” One important part of having a family was having someone to lean on after turning 18. As one young lady explained, “And no matter what, when I grow up and I move out into my own house, I would always have a mother to come back to. When I have kids, they will actually have a grandmother.” Another adolescent said, “I knew after witnessing my sister go through long-term foster care that she probably couldn’t go to college. She had to find a place on her own as soon as she turned 18. I wanted to have parents and to have someone to care for me and to fall back on.”
2. *Find Love and Care.* Approximately one-fourth of the respondents (24%) said that they saw adoption as a way of finding someone who would love and care for them. “It wasn’t the fact of having a family as much as having people that loved me and cared enough about me to spend time for me,” said one young lady. Another said, “I thought I would be happier and would be loved.”
3. *Provide Opportunities.* Twenty-one percent of the adoptees answering this question thought that being adopted would provide them with more opportunities in life. Most talked about having the chance to become a better person or to do new things. As one adoptee said, “I knew my parents would raise me with good morals and that I could be whatever I wanted to be.” Another said, “I thought I would meet nice people and have more experiences.” One teen talked about how being adopted changed the course of his life, “I probably would have been a hoodlum or causing a lot of trouble if I didn’t come to this choice in my life to be adopted.” Several adoptees felt that they would have more educational opportunities by being adopted. “I thought I would get a chance to go to a good school and maybe go to college,” explained one young man. Another adoptee said,

“Finishing high school was a big plus for me. I was the first in my biological family to graduate.”

4. *Live with Siblings.* Six percent of the adoptees who responded to this item said that they were excited about being able to live with their biological siblings again. When asked about the anticipated benefits of being adopted, one young lady stated, “Being with my brothers and sisters.” Another adoptee said, “I would actually have a family and be with my brother.”
5. *Miscellaneous Benefits.* The remaining fifteen percent of those answering this question identified various other miscellaneous benefits to adoption. One adolescent said, “I would have more freedom, as in I feel more like a human being and not like I am someone’s property. Before the adoption, I was the property of the state, and when you are a property, you can only do so much.” Another said, “I thought that maybe our real parents would leave us alone. We had a lot of difficulty with our birth parents.” One adoptee thought she would have “no more problems...no more worries,” while another said he would “get to do fun things.” Still another adoptee said, “Me and my parents would bond, which we have. I would get back on my feet, which I have.”

Benefits for the family. The adoptees were less sure about what good things they thought would happen to their families as a result of the adoption. Seven adoptees (19%) could not anticipate how their families would be better off as a result of adopting them, and eight (22%) did not answer the question at all. Of the 22 who did answer question, more than half (59%) felt that their adoptive parents would benefit from having children and expanding their family. “I knew that she wanted a child in her life, and that would be fulfilled,” said one young lady. “I could tell that they wanted to be parents. They wanted more people in the family to love,” answered another. Twenty-three percent of those responding to this item saw adoption as a way for their adoptive families to fill a void in their lives. With a teenager in the home, their parents would no longer be alone; they would have someone to keep them company. As one adoptee explained, “They had an empty nest, and I would provide entertainment for them. I keep them in stitches all the time.” Another said, “I thought it would be good having me around since he lives by himself, and he would not be lonely.” The remaining 18% of respondents said that they felt that their adoptive families would be happier and better off as a result of their adoption. “They were a lot happier having a kid. And having a brother,” commented one adoptee.

Anticipated Difficulties

All of the adoptees responded to the question about the types of difficulties they anticipated in being adopted. Eleven of the adoptees (30%) said that they did not foresee any difficulties or, if they did, they could not remember what they were. The others anticipated a variety of difficulties that could be grouped into four categories. Five of the adoptees (14%) anticipated multiple difficulties that fell into two or more of these categories.

1. *New Family Issues.* Twelve adoptees (32%) expressed concerns related to their new families. Some thought that they would have problems adjusting to family life. “I thought it would be difficult to become adjusted to new parents and new rules....Being able to show love back to them would be a difficult thing to do,” said one adoptee. Another stated, “I thought I would find it difficult adjusting to the environment and adjusting to getting along with the family—actually trying to get along with my brothers and sisters again since we had been apart for so long.” One young woman thought she would have trouble getting

used to having a mother since she had never had one before. “A mother-daughter relationship would be hard because I was experiencing a lot of anger and hurt...I had never lived with a mother before so it was a very different environment,” she explained. The intercountry adoptees were particularly prone to adjustment concerns since they did not have the opportunity to get to know their new families prior to the adoption. As one young lady commented, “I didn’t know if I would like my parents...I didn’t have a chance to visit with them and then have them come back for me. They only made one trip, and I had to come back with them.” A few of the adoptees expressed a fear of rejection or failure. One adolescent said, “Before the adoption I was real hesitant because none of the other relationships ever worked out, and I didn’t think this one would. But I’m still here.” Another said, “I thought that maybe after a while they would want to give me up when they saw the problems that I had.” And another said simply, “I was afraid of rejection.” A couple of adoptees mentioned difficulties associated with missing previous caregivers. “Leaving my last foster home was hard because I really liked them. They were good parents also,” said one young lady.

2. *Social and Cultural Issues.* Social and cultural concerns were mentioned by eleven (30%) of the adoptees. Many worried about making friends and fitting in at school and in the community. One adolescent explained, “I thought I would not be accepted, but I have friends. I expected to be an outcast since I was adopted, but in this town everyone’s pretty friendly.” Similarly, another adoptee also feared that adoption would make her “different” from her peers. “They will know I am not her biological child, and this is not my biological mom like they have,” she stated. Another adoptee said, “I had to change schools again. I was starting a new middle school, which is a whole new ball game. Just going into a new community was difficult.” Several were concerned about changes in lifestyle. “I knew that the different lifestyle would change me, and I would definitely feel out of place because of the lifestyle and the people in the community because they weren’t like the people I had been exposed to in my early childhood,” said one young lady. “When you are in foster care you have a lot of restrictions, and being adopted completely changes [your] social scene,” said another. A couple of adoptees talked about having to adjust from rural to urban life or vice versa. “It was out in the suburbs, and I was used to the city. It took a few months to become adjusted,” explained one adolescent. The intercountry adoptees seemed especially concerned about the cultural difficulties they expected to encounter as a result of moving to a new country. One young lady said she feared “being in a different culture.” “I didn’t speak English at all. I didn’t know how America would be,” she said. Another commented, “The language would be a problem. I would miss my friends and [the] food [back home].”
3. *Biological Family Issues.* Five of the adoptees (14%) worried about whether they would be allowed to have contact with members of their biological families. “I wanted to keep contact with my sister and my grandmother. I thought that might bring up some problems,” stated one adoptee. Another said, “After I was adopted, I didn’t think they would ever let me see my brothers again.” One adolescent was afraid of how her biological family might react to her being adopted. “The only difficulty that I thought I might have was what my family might do. My family is very rude, and they are not really a family.” This same adoptee said that she felt guilty for being adopted. “I felt like I was giving up my family and I was the one betraying them,” she explained. Despite these feelings of fear and betrayal, this adolescent is quick to point out, “I don’t feel that way now.”

4. *Miscellaneous Difficulties.* Three adoptees (8%) anticipated having other types of difficulties with adoption. One worried about legal problems associated with the adoption due to his biological mother being an illegal immigrant. “There was a lot of red tape in trying to first become a permanent resident before I could be adopted. This didn’t happen until I was 18 years old,” he explained. Another older adoptee was concerned about losing her Medicaid benefits. “I worried about health benefits and my skin condition,” she said. The third adoptee’s concern was more generic, “I thought I might have trouble.”

What Did We Learn?

Based on findings in this study, it is clear that acceptance by teens of the adoption decisions made on their behalf is critical to the success of adolescent adoptions. Adults can foster this acceptance by providing information to teens about what is happening and what options are available to them. Having input into the process and being able to express concerns and share opinions appear to make the adoption go more smoothly. Teens need to come to terms with biological family issues and accept that their birth parents cannot adequately perform as caregivers. When these issues are dealt with prior to adoption finalization, adjustment to the new family tends to be less difficult.

Although many caseworkers and judges worry about giving the biological family enough time to reform, some of the adoptees in this study felt that they were given too much time and that this kept them from moving on with their lives. It is interesting to note that finalization of the adoption was important to the adoptees. Several mentioned that they did not feel like they really belonged until it was finalized.

Once they had accepted the fact that adoption was their best option, the adolescents had many reasons for agreeing to adoption by a particular family. Those who had gotten to know the family and had formed attachments tended to have more emotional reasons for wanting to be adopted. Others had more practical reasons, such as wanting stability, better opportunities, or the chance to live with their siblings again.

Prior to actual finalization, the adolescents in this study anticipated numerous benefits and difficulties associated with being adopted. Not surprisingly, the anticipated benefits were similar to the reasons for agreeing to the adoption: having a family and someone to love and care for them, the opportunity to have a better life and to do more things, and being able to live with their siblings again. Several of the adoptees also thought they would have more freedom by being adopted. Although they would still have to live with rules, these rules would be negotiated as a family instead of being imposed on them by a system that they did not like or trust.

Most of the difficulties anticipated by the adoptees related to adjusting to new situations and having to make more changes in their lives. Many of these adolescents had already experienced multiple moves and adjustments in their short lives, and they anticipated that learning to live with yet another new family would be difficult as well. However, the idea that this might be the last time they would have to make this type of adjustment was appealing to many. Nevertheless, the teens continued to worry about being rejected by both the family and the community. They were also concerned about their biological families. Although many had given up on their biological families, they still cared deeply about them and worried that they were betraying them by moving on. Being able to have continued contact with their biological families was important to many of them. The fact that these teens could weigh the pros and cons and still choose adoption is a testament to their desire for an improved existence despite the anticipated difficulties.

RECOMMENDATION 7: Individually prepare adolescents for the adoption process by doing six key steps: 1) explain their legal status, 2) offer adoption as a viable option for permanence, 3) offer support and information as they consider adoption, 4) explain how the adoption process will proceed, 5) assess adolescents to determine their level of adjustment regarding birth family issues, and 6) provide support as needed to help them deal with these birth family issues appropriately. Keeping adolescents aware of what is happening and what may happen to them is important. When they do not know what is going on, they tend to make up their own story, which seems to make them more worried about the process.

PRE-ADOPTION SUPPORT SERVICES

Parents in this study reported receiving support services from their adoption agencies as they went through the adoption process. While the level and types of pre-adoption support offered varied from agency to agency, most parents (84%) thought that these services were adequate. It appears that many of the parents did not expect too much from the agency and were not disappointed when it was not provided. A few parents (16%), however, felt they did not receive the appropriate level of support. One parent expressed his frustration with the lack of support by saying, “I think more preparation would have helped our family to adjust more quickly—preparation for the children and for us. Once the children were placed with us, everyone disappeared. That was even before finalization.” The parents who were satisfied with the support they received identified several critical types of support.

Note that many of the parents in this study acknowledged having difficulty remembering exactly what services were provided and by whom, as well as when they were provided (i.e., before or after adoption finalization). It is likely that the figures in this section may actually be higher and that more services were provided than are discussed here.

Caseworkers

In general, parents in this study found support from their caseworkers to be very helpful to them as they proceeded through the steps of the adoption process. Thirteen (27%) of the adoptive parents even said that their caseworkers were “wonderful”. These parents credited their workers with making sure they received all the services they needed. Many of these caseworkers appeared to have gone above and beyond the call of duty. One mother explained, “She’s [caseworker] made certain that anything that she’s [adoptee] eligible for, she got.” Another parent said, “We could call her social worker at anytime, and he was real close to her, and he would call periodically to see how she was doing. She has kept in contact with him for years.” One of the mothers talked about having problems with several caseworkers because they would not call her back. In the end, she found a terrific caseworker. She said, “I even had her home number which is a rarity.”

Adoption Preparation Classes

All of the parents, except those working in adoption field, were required to take adoption preparation classes. Almost half (47%) of the parents found the classes to be invaluable. As one parent said, “We learned we were in for a major challenge.” Three parents said that the information was probably provided but they did not know enough at the time to really grasp what was being taught. In hindsight, they wished that they had paid more attention.

The remaining parents (53%) appreciated the classes but had suggestions for improvement. Two parents (4%) felt the classes focused too much on younger children, and seven thought the classes did not cover all of the needed information. Parents who had already raised children prior to the adoption tended to be least complimentary of the adoption preparation classes. When asked if these classes had been helpful, one such parent voiced a common sentiment, “No, because we raised two children, and we had that experience. We just applied it to the other ones.”

Counseling

Most parents in this study accepted the fact that the adolescents they were planning to adopt needed counseling. Many also recognized that counseling would be needed for the rest of the family as well. Seventy-one percent of the adolescents in this study were either in counseling prior to coming to the adoptive home or began counseling shortly thereafter. One parent said the counseling ought to be mandatory for all teen adoptees. “I paid for her to go to counseling and she continues to go. I told her she had to go for counseling or I wouldn’t adopt her. That was the bottom line.” The most frequently mentioned counseling-related issues reported by parents were finding the right therapist, paying for the counseling, and transporting the adolescent to the counseling sessions.

Finding the right counselor seemed to be the biggest challenge for parents. Some of the families found counselors who understood adoption issues. This appeared to make a huge difference in the effectiveness of the counseling efforts. One parent identified characteristics to look for in a therapist when she spoke about her own family’s experience with counseling, “Our county had just hired—for the first time—an expert in that very area and she was a marvelous consultant. She had worked previously with children who had attachment issues and older children who were adopted and also with parents who were older.”

Paying for counseling was another major concern for some parents. Some of the therapists did not accept Medicaid, the primary health care coverage for children in foster care. A few of the parents said that they were able to put the child on their own insurance policies prior to adoption finalization but discovered that their policies only paid a portion of the costs of therapy. One couple, who adopted across state lines, also had some issues with medical coverage, especially coverage after age 18. “Medical assistance more readily across the state line would have been helpful. Her issues continue well past 18,” said one mother. Another parent stated that she had to compromise on the therapist due to cost factors. “We actually had a great deal of difficulty in getting a child psychologist who was covered by my insurance and knowledgeable in adoption... We ended up having to compromise with who we picked, to fit all those criteria. I think that’s why it was not as effective.”

Transportation to and from counseling sessions was an issue for some parents. While a few reported that the counselors came to their homes, most had to go to the counselor’s office for therapy. This sometimes involved a huge commitment of time on the parents’ part. One parent who was self-employed talked about having to take time away from work in order to get her new daughter to counseling. “Financially, it was devastating to me because I was taking her to counseling five times a week,” she explained. Prior to adoption finalization, the adolescents who were in counseling went at least once, and sometimes several times a week. The number of visits typically tapered off as some of the initial adoption issues were resolved and the teens became more comfortable in their new homes.

Support Groups

When asked about the services received prior to adoption, support groups generated almost as much discussion as counseling. While only 22% of the parents reported attending a formal support group, many others talked about why they did not or how they had formed their own informal support network.

One of the most often cited reasons for not participating in a support group was that it was too far away to attend on an ongoing basis. This was especially true for those living in rural areas. One mother who attended regular meetings despite the distance explained, “The support

group that I attended was an hour away, and I found it to be very valuable.” Another reason for not going to support group meetings was that the family was too busy to add another meeting to its calendar.

Many parents mentioned that they had developed their own informal support network, either as an alternative or as an addition to a formal support group. These support groups included friends, extended family, former foster parents of the adolescent, and others. The invaluable role of support networks is evidenced in the following comments made by parents: “I have found that if you don’t have a good support group, you are in trouble.” “I dug up my own network of support. If I had not had the type of support that I had through the foster parent and the social worker, I would really have been in trouble.” “We do a lot of work in this field, and we have had a chance to talk with a lot of top adoption experts who were able to tell us things.”

Several parents also talked about the need for adolescent support groups, although most admitted that it was difficult to get the teens to attend. These parents said that it was important for teens going through the adoption process to meet other young people who had been adopted and to realize that this experience was not unique to them. As one parent explained, “He had a friend who was adopted and was about his age, so knowing that adoption wasn’t a strange thing [helped him].” Another parent whose son did not have regular contact with other adoptees said that he thought group therapy would have been beneficial for his child. It would have given him an opportunity, said the father, “to be with other kids like him because he was convinced that he must be the worst person in the world to have been thrown out of two homes.” A few parents described weekend camps offered by their adoption agency. They felt these camps were a good alternative to weekly support groups but unfortunately were not offered on a regular basis. “I think if he had had something like that where he could drop in and out of would have help him a lot. It would have helped him make connections,” said one parent.

Other Services

In addition to the support services described above, parents in this study mentioned receiving several other types of assistance from agencies prior to the adoption, including Medicaid (67%), legal fees (31%), and respite care (12%). As mentioned previously, most of the adolescents were receiving Medicaid at the time of placement and were eligible to continue receiving it even after finalization. A few saw this as a major benefit. As one parent commented, “They were on Medicaid, and that has worked very well for our children.” A few of the parents opted to put their children immediately on their own insurance policies instead. “He had a Medicaid card, but I never used it since I put him on my insurance right away,” said one father. Several parents reported getting legal fees associated with the adoption paid for by the agency, either in-part or in their entirety. Only a few of the parents reported receiving respite care services. As one parent explained, “We proposed respite care, but it is difficult to actually get it for a teenager because they don’t think they need a babysitter. We trade off with a friend who has adopted children.” A couple of the parents said they used their respite care allowance to pay for summer camp for their teens.

What Did We Learn?

The parents in this study were grateful for the support they received from their agencies and caseworkers throughout the adoption process. While all adopting families require some support, these parents felt that people who adopt adolescents need both more and different kinds of support. Among the services deemed most beneficial by these parents of teen adoptees were

attentive and knowledgeable caseworkers, adoption preparation classes, counseling, and support groups and networks. Several parents also talked about the importance of assistance with medical needs, legal fees, and respite care. Families in the process of adopting an adolescent need appropriate and timely support as they work through the decision-making process and move towards finalization.

RECOMMENDATION 8: Design and implement an adoption training program that focuses on various age ranges of children to be adopted (e.g., infant, toddler, school-aged, adolescent, etc.) and that includes information on resources available to families both before and after the adoption. All adoption agencies provide basic adoption preparation training, but not all agencies offer adoption training focused on the age of the child to be adopted. Adopting parents need to be prepared for the types of challenges they are most likely to experience with their child, and they will be more receptive to all of the information shared during the training if they can see how it pertains to their own adoption. Adopting parents particularly seem to like hearing from others who have adopted in the same age range. While it is difficult to discuss specific services available to each individual family in a group setting, a thorough overview of the types of resources and supports that exist would be beneficial to adopting parents to at least give them some idea of what is out there. Individualized follow-up is needed after the training to insure parents remember what resources are available.

Recommendation 9: Provide formal and informal support groups to families throughout the adoption process and into the adoption. Adolescents who have spent time in foster care or in orphanages are prone to having special issues that can make adjusting to family life more difficult. Families, both parents and teens, can benefit from talking to others who have been or are going through the similar situations. Support groups are especially useful beginning when the child moves into the home and continuing into the first year or two after finalization. It is important to remember that this is a very busy period in these families' lives and that unless the support groups are conveniently located, the families are unlikely to attend. An alternative for these families might be an online chat room or LISTSERV where adoptive parents and adopted teens can talk to others about their shared experiences and exchange ideas.

POST-ADOPTION SUPPORT SERVICES

According to parents in this study, the level of agency support and the types of services provided after the adoption was finalized varied across agencies, and in some cases, disappeared completely after the child's eighteenth birthday. Overall, parents were less positive about the support they received after finalization than about support received beforehand. Sixty-five percent of the parents thought the post-adoption services they received were adequate or good compared to 84% who felt the same about pre-adoption services. Sixteen percent thought there were not enough services or the ones offered were not helpful. The remaining 19% of the parents had some concerns about the services provided but were not totally negative about them. Most of the parents in this last category wanted the agency to either offer more post-adoption support services or to continue its support after the adoptee turned 18.

Table 5 shows the most common post-adoption services provided by the agencies to parents in this study. These figures may indicate fewer services than were actually provided because some of the parents had trouble remembering what services were offered, which ones they used, and whether they were received before or after adoption finalization.

Table 5. Frequency and Percentage of Post Adoption Services Provided to Parents

Service	#(%)
Adoption Subsidy	37(76%)
Medical Assistance	31(63%)
Counseling	30(61%)
Support Groups	7(14%)
Respite Care	4(8%)
Residential Treatment	3(6%)

Adoption Subsidy

Subsidies are generally available for special needs adoptions. Since adolescents are considered to be a special needs population, many families in this study (see Table 5) received a subsidy. A few families in the study did not receive a subsidy because it was not available to them (international adopters and those adopting a child 18 or older). Some parents turned down this subsidy, and others reported that they did not know it was available to them. Almost half of the families (49%) said they could have afforded to adopt even without the subsidy. Thirty-five percent of the parents said they could not have adopted without the subsidy. The remaining 16% said they could have adopted, but it would have been more difficult.

Parents used these subsidies in creative ways, often providing extras they could not have otherwise afforded. One mother explained, "This allowed me to stay home with them." "It paid for her private school," reported another mother. A father said, "She went to a drama camp this summer, and we used some of her money for that." "I ended up using a therapist who was not fully covered by my insurance, and the state subsidy paid the difference," commented another father. Several of the parents said they used the money to buy braces for their teens.

Medical Assistance

As discussed in the previous section, the majority of adolescent adoptees in this study were eligible for Medicaid as one of their pre-adoption support services. For most of these teens, eligibility continued into the adoption. Nearly two-thirds of the parents (see Table 5) reported that their child continued to receive Medicaid coverage after finalization. Some parents used the card as the primary medical coverage for the adoptee. "We couldn't have afforded insurance out of our pocket," said one parent. Others did not use the Medicaid Card at all. These parents

covered the adolescents with their own insurance plans. This allowed them more freedom in the choice of doctors and therapists. International adoptees and those who were 18 prior to finalization were not eligible for Medicaid coverage.

Medical coverage became a problem for many of the adolescents when they turned 18. In several states, Medicaid coverage was discontinued on the adolescent 18th birthday. One father was distraught about the cancellation of coverage. "I would like Medicaid at least until he graduates high school. He will turn 18 midway through his junior year. He will still need counseling because I think he is going to have issues forever. Foster care kids can stay on it until they are 21, and more people would probably adopt teenagers if they had a little bit of help." Parents who put the adolescents on their private insurance policies also had problems maintaining coverage. As long as the children remained in school full-time, they could continue to cover them. However, some of the teens were not ready for, or did not want to attend a postsecondary school full-time and this made them ineligible for their parents' insurance.

Counseling

Counseling and other mental health services were provided for 61% of the adoptees (see Table 5) after the adoption was finalized. This is down from the 76% of families receive pre-adoption counseling support. A few of the adoption agencies had counselors or therapists on staff; however, in most cases, parents had to find someone to provide these services on their own. The parents who used agency counseling services were generally quite pleased. "She is an in-house counselor that works with parents. She came to my work and talked with me on my lunch hour. It was good to have someone to talk with," said one mother.

The parents who had to identify a therapist on their own sometimes had a more difficult time. Counseling services could be a huge expense, and for many, Medicaid was their primary method of payment. Unfortunately, Medicaid does not always provide for the best therapists. Even the parents who put their children on their personal health insurance plans sometimes had difficulties as they discovered that their policies rarely covered all of the high cost of mental health services. As one mother stated, "It would have helped if [the agency] had paid continuously for her counseling because even with our insurance, the co-pay was expensive." Fortunately, as the adolescents grew older and became more adjusted to their new families, many were able to cut back on the number of counseling sessions and their ensuing expense. One parent explained, "They were going every week, but now they don't go as often. We now go about every six weeks."

Other Services

As can be seen in Table 5, some parents used formal support groups while adjusting to having a new adolescent in the home. All said they found these groups to be very helpful. Another nine parents mentioned the need for these formal support groups or for support groups that were more conveniently located. Many said this service was needed for the adolescent as well as the parents.

Also seen in Table 5, a few of the parents took advantage of respite care services offered by the adoption agency. This respite was usually in the form of summer camps, weekend retreats, or other activities more suitable for teens than traditional childcare services. Seven additional parents said they would have used respite care if it had been offered, or they would have used the weekend retreats more frequently had they been available.

A few of the adoptees (see Table 5) had behaviors that were so disruptive that they needed residential care for a period of time. In one instance, the parents paid for these services with their own insurance; in the other three cases, the parents looked to the adoption agency for payment. A fifth couple, whose son had received residential treatment services while a foster child in their care, hoped that he would never need this service again. They reported that, “In our county, if a child gets out of control and requires placement, they charge the parents with neglect. That terrifies me...this could cause me not to seek help. The reason they do that is because if they didn’t, it becomes a voluntary placement, and then the parents frequently get fed up and go pull the kids out before they are ready to be released.”

What Did We Learn?

It is clear that parents in this study needed various kinds of support after adopting an adolescent. Adjustment challenges were not easily resolved and often required long-term attention and support. The most critical areas of support needed were subsidies, medical assistance, and counseling.

Subsidies appear to be important regardless of family income. Low-income families in this study reported that they could not have adopted without financial support. Middle-income parents found subsidies useful for some of the major expenses that they did not have the time to anticipate and prepare for. Parents in this study used the assistance in a variety of creative ways to help the youth they adopted. Many parents also relied on the adoption agency to assist with the medical needs of the child. Most of the teens were eligible to continue receiving Medicaid after the adoption. While several parents opted to cover the child on their own insurance policies instead, over half maintained Medicaid as their child’s primary medical coverage. The biggest complaints about Medicaid were that it did not always allow for the best treatment and that it did not continue after the child’s eighteenth birthday. Counseling, another critical post-adoption support need, ended up being a major expense for most families despite the assistance offered by the agencies. Other post-adoption support services received by families in this study included support groups, respite care, and residential treatment.

The findings in this study echo those found in a review of the literature (see related research below). In addition to the supports described in this section, both the research and the parents in this study talked about educational services as being another critical post-adoption need. Parents repeatedly stated that the teens they adopted had many educational delays that required extra support. Despite this need, the parents in this study typically did not receive formal agency assistance in this area. While some parents did use their subsidies to help fund educational services, others either tutored the adoptees themselves or relied on the school system to provide that support. Because educational services was not an agency-sponsored support in this study, it will be discussed later in a separate section of this report.

RECOMMENDATION 10: Provide monetary and other supports throughout the adoption. Most families, regardless of their income, benefit from receiving a subsidy for the adolescents they adopt. While some families would not be able to adopt without financial assistance, others are able to use the subsidy to help with counseling expenses or to provide extras to the teen that they would not otherwise be able to afford, such as braces, summer camp, tutoring sessions, or private school. Subsidies can be especially useful for teens wishing to attend college, as their adoptive parents frequently have not had much time to prepare and save for this expense. Many adoptive parents report that their teens are about two years behind their peers as far as their social and educational development is concerned. A lot of these adolescents will not complete high school until they are 19 or 20 years old. Consequently, financial support to these families should continue past the adoptee's eighteenth birthday. Similar consideration should be given to other post-adoption support services offered by the agency.

Related Research

Based on his review of four studies focusing on adoption disruption, Watson (1992) concludes that while not all of the studies agree on the causes of disruption, they do all acknowledge the importance of postplacement services as a factor in preventing disruption. Unfortunately, postplacement services and supports are often among the more "neglected contributors to placement success" (Barth & Berry, 1988, p. 76). Some of the more common postplacement needs include educational services, adoption-related therapy, support groups, respite care, residential treatment services, and financial and medical subsidies.

Caring for children with special needs is frequently expensive. Adoptive parents struggle with the high costs of medical care, therapy, special education needs, respite, and residential treatment services. For many parents, financial and medical subsidies are essential to the success and stability of the adoption (Brodzinsky & Pinderhughes, 2002; Freundlich & Wright, 2003). Barth and Berry (1988) found that families receiving higher levels of subsidies experienced greater adoption stability. Furthermore, families who did not receive any subsidy were more likely than those who did to disrupt. The provision of subsidies has also made it possible for lower income, minority, and foster families to adopt (Brodzinsky & Pinderhughes, 2002). Despite these findings, many adoptive parents still complain about their difficulty in accessing or obtaining adequate postplacement subsidies (Rosenthal & Groze, 1992).

Many special needs children have learning or developmental delays, and many others simply lack strong educational foundations (Rosenthal & Groze, 1992). It is not surprising then, that educational services are one of the most frequently reported postplacement needs of families adopting special needs children (Barth & Berry, 1988; Brodzinsky & Pinderhughes, 2002; Watson, 1992). Common educational needs include tutoring, special schooling, after-school care, and summer activities (Watson, 1992; Festinger, 2001).

In addition to educational services, adoptive parents often express a need for help identifying and locating mental health resources within the community. The need for therapy, including individual, group, and family counseling, is ongoing and can change throughout the life of the adoption (Barth & Berry, 1988; Rosenthal & Groze, 1992). It is important that the family has a therapist who understands specific adoption-related issues such as bonding and attachment, grief and anger management, and identity formation (Barth & Berry, 1988). When a therapist does not understand and fully support the family's objective of providing a home for this child, he can do more harm than good (Rosenthal & Groze, 1992).

Some adoptive families have found support groups and informal contacts with other special needs adopters to be extremely helpful (Barth & Miller, 2000; Rosenthal & Groze, 1992). Not only is there less negative stigma attached to support groups than to therapy, but support groups can often link parents with the resources they are looking for (Rosenthal & Groze, 1992). They provide a good outlet for parents to share both the joys and stressors of adoptive parenthood (Rosenthal & Groze, 1992) and to learn from others what may or may not be normal in the adoptive process (Barth & Berry, 1988). Rosenthal and Groze (1992) found adoptive parent support groups to be especially valuable for single parents. Berry (1990) suggests that support groups are beneficial to adoptees as well as to their parents.

Another common need of special needs adopters is that of respite care. Walsh (cited in Freundlich & Wright, 2003) found that respite care is especially valuable to younger parents who have older children and to parents of children with major disabilities. Parents of these children often have difficulty in obtaining babysitting services through traditional means (Rosenthal & Groze, 1992). Unfortunately, many parents either do not know that respite services exist or they do not know how to access them (Barth & Miller, 2000).

In some cases, special needs adopters may find that they are unable to care for their child at home and that the child needs to be placed in a residential treatment facility. This typically happens when the child's emotional or behavioral problems are so severe that they are a risk to either his own or another family member's safety (Babb & Laws, 1997). Residential treatment needs may be time limited as with a drug rehabilitation program or ongoing as with some mental health care. Unfortunately, a growing number of families are finding that they are unable to afford residential treatment services for their children (Freundlich & Wright, 2003). Not only are these services very expensive, but insurance companies seldom pay for them (Babb & Laws, 1997). Without other options, many families are forced to relinquish their children to foster care in order to access the services their children need (Freundlich & Wright, 2003).

BIRTH FAMILY INVOLVEMENT

There is much discussion in the literature about the pros and cons of open adoption. (See related research at the end of this section.) Despite the controversy, most of the parents in this study entered into the adoption assuming that the adolescents they were adopting knew their birth family and would therefore want to stay involved with them. The primary indicator for level of involvement was the amount of contact they maintained. Decisions about contact seemed more related to how much, how structured, how positive or detrimental rather than whether it would happen. As one parent said, “We think they have to find out for themselves what birth families are all about.”

Types of Contact

Most of the families in this study (90%) had some type of contact with the adolescent’s birth family. As one mother said, “I’m not sure adolescent adoptions can succeed if the kids knew their birth families—and most of them did—and the adoptive family is not willing to be at least open to some contact with the birth family.” The amount of contact and with whom the contact was maintained varied greatly among the families.

Adolescents from 11 of the adoptive families (22%) had contact with all types of family members including parents, siblings, grandparents, aunts, uncles, and cousins. Teens from 13 of the families (27%) had contact with only one segment of their birth family (i.e., siblings or extended family). Teens in the other 20 families (41%) had contact with a few, but not all segments of their birth families (e.g., siblings and extended family, parents and siblings, etc.). A discussion of the various types of contact appears below.

Only five families (10%) reported having no contact with the birth family. In two additional families, the contact was only with the siblings with whom they were adopted. In all seven of these families, the adoptive parents were open to contact, but other factors intervened. Three of these families adopted internationally and did not have access to the birth families. One family was under court order not to allow contact with the birth family. In the remaining three families, it was the adoptee’s choice not to have contact with his or her birth family. One father explained, “He has a half brother and half sister but he has no desire to see them.” If these three adolescents change their minds, their families are amenable to establishing contact.

Contact with Birth Parents

Twenty-seven of the adoptive families (55%) had contact with one or more of the adolescents’ birth parents. In seven of these families, there was some contact, during placement or early in the adoption; however, the contact has since stopped. In some cases, the adolescent ended the relationship. One young man thought that his birth family would bring him down. Some are in jail and others are following in their mother’s footsteps. He explained, “I chose not to have a relationship with them.” In other families, the birth mother stopped the contact. “Right after the adoption, we tried to get their mom to arrange a visit and she wouldn’t answer any of our calls or the agency’s calls,” said one mother.

Thirteen adoptive families have ongoing contact with one or both of their adolescents’ birth parents, though the type and frequency of this contact varied. Some have frequent contact. “I see my dad and talk to him everyday but our calls are for like five seconds,” said one adopted teen. One parent said that her daughter “still has contact with her mom about every week.” Others have less frequent contact with birth parents although the contact is ongoing. One teen

said, “I see my real dad and his side of the family probably twice a year.” Another teen said, “I don’t talk to my birth mother except occasionally and then she cries and tries to lay a guilt trip on me. I tell her that I love her and that there is a place in my heart for her but I have moved on.” Still others communicate with their birth parents through phone calls or letters. One adoptee reported, “My dad’s in jail, but I’ve started writing him.”

Seven of the adolescents reestablished contact after they turned 18. One mother explained her daughter’s situation. “She had been removed from them for quite a long time, and she reestablished contact with them after she left our home.” A few have ongoing contact, while others contacted their birth parents once or twice and then stopped. One adoptee said, “I have seen my biological mother once but lost contact because it really wasn’t something that I wanted to keep up.”

Contact with Birth Siblings

Thirty-six families (73%) had contact with their adoptees’ birth siblings. Fifteen of the families adopted sibling groups so contact was very easy. For others, planning was required to maintain the contact. One adoptee explained, “I have always been close with my sisters and it was important to me to keep in contact with them. I started seeing them a couple of months after I moved in with my dad. We started getting real involved with them because they are all close by.” One mother commented, “Because of the myths they carried, I think it was good for them to have a real relationship with their siblings. We have really encouraged this and it has been a positive thing.” A few of the teens said that sibling contact was very important right after the adoption but once it was established, it became less important. “It was important to me for a while when I was first adopted, but now it is not a big issue. We talk on the phone occasionally now.”

A few of the adolescents had contact right after the adoption, but then discontinued contact—either by their choice or someone else’s. One young man receives cards from his brother and mother but chooses not to write back. A sibling group had another brother visit, but after unsuccessfully trying to get them to reattach to their birth mother, he did not return. Another adoptee became suicidal after a visit from her sister. Her adoptive parents discouraged visits for the time being.

Contact with Extended Birth Family

Twenty-five of the adoptive families (51%) had contact with the adolescents’ extended families. Some of the teens had been close to these family members during their childhoods, and some had even managed to maintain contact throughout foster care. One parent said, “We have always kept in touch with their grandmother. She was close to them.” An adoptee explained, “It is very important to me to be able to talk and visit with them. They are my life. I went to my grandfather’s funeral and saw a lot of the family.” Other teens have gotten to know their extended birth families since they have been adopted. Several credited their adoptive parents with reuniting them with their biological relatives. One adoptee explained, “[She] went into my files when I was adopted...She found letters from my biological family with addresses on them, and she contacted them and arranged for me to visit them.” Once established or re-established, contact with extended family typically continued. However, one family did not continue this contact. In this case, the uncle moved his family to another state and never contacted his niece again. The other families continued to have contact with uncles, aunts, grandparents, and cousins.

Structured Contact

Although many of the parents allow and even encourage contact with the birth family, they try to structure this contact to minimize the damage it can cause. As one mother said, “It’s important for him to have contact with these people. We just have to kind of walk with him while he figures that out. It’ll take a while.” Other parents talked about having to take breaks from contact due to the emotional turmoil and negative behaviors it caused. “He’s seen his sister some, and that’s not healthy, so that won’t be happening again for a while,” reported another mother. “When it does, it’ll be really heavily supervised because she is less well adjusted than he.” Sometimes this structure is difficult because the birth family does not always cooperate. This occurred in one family when the sister was scheduled to visit. “We had to call and ask her not to come and we would plan for another day. She showed up anyway. She talked about her mother and the fact that she had seen her and that really threw our daughter and we had another of her suicide attempts. She was upset that her mother would see her sister and not see her.”

Facilitators and Inhibitors

There appear to be a number of factors that either facilitate or inhibit involvement with the birth family. In this study, the primary facilitators were people who actively pushed for the involvement including the adoptive parents, the adoptees, and the birth family. When one of these people decided involvement was critical, they took steps to make it happen. They made the initial contacts, arranged the time and place of the visits, and negotiated continued contact.

In this study, adoptive parents often searched for birth family members so that the adolescents they adopted would know about their roots. One father is typical. “I found the obituary for his real father and started calling his brothers and sisters and I found an aunt. I told her that I had adopted him and [she] said they didn’t know what had happened to him.” His son now gets together with his birth family about twice a year. This father went on to say, “He is glad to know about them and he is glad to see them but that is not his family now.”

A few adoptees in this study contacted their birth families on their own. One young woman did not know anything about her birth family. Her mother was deceased, and she had never met her father. After she turned 18, the family records were released to her and, with the encouragement of her adoptive mother, she searched for her birth family. She talked with aunts and uncles. She met her father, half-sister, and half-brother. She still corresponds with her uncle’s wife, sees her father regularly, and sees her siblings about once a year.

Even when someone is acting as a facilitator, there are often other factors that come into play and serve as inhibitors to contact. In this study, common inhibitors were court rulings, mental health and drug issues, distance of the birth family from the adoptive family, and the individual parties’ willingness and availability for contact. Some of the adoptive parents were open to birth family contact, but the courts prohibited it until the children reached adulthood. One mother said, “It was court ordered with our children that there could be no contact with the birth family until each one of them turned 18 years of age...We never discouraged it.” Frequently, alcohol, drugs, mental illness, or abusive behavior acted as inhibitors to contact. Some adolescents chose not to stay in touch. One adolescent reported, “I have seen my biological mother once, but lost contact because it really wasn’t something I wanted to keep up. [She] has not developed mentally completely...she is not mentally stable.” Several parents recognized the birth families’ propensity towards negative behaviors, and rather than prohibit contact altogether, they worked to teach their teens to be safe. One young woman learned to

detect dangerous situations. “Yesterday, I went to visit my grandparents and my uncle was there and he has a major drug problem. I left because my mom would not have allowed me to go had we known he was there.”

Unresolved Issues

Several of the families in this study had to deal with extended birth family members interfering with the adolescent’s adjustment to his or her new family. Caseworkers all too often place youth for adoption without first identifying and contacting the extended families to determine if they would be appropriate caregivers and if they might be willing to adopt these children. This can cause confusion for the child and undermine adjustment efforts if, later, after the adoption, the teen comes in contact with family members who say they would have been willing to adopt him or her if only they had been asked. One family’s story illustrates this point. After the adoption, the teen met his grandmother, and she told him that she would have adopted him if the agency had contacted her. After this meeting, his mother reported, “he became very belligerent and he really acted out. I finally went to the agency and asked them if it would be all right if he went to live with his birth grandmother because you can’t make a child want to be with you and love you when they’re confused like that. And they told me that would be fine, and that’s where he went. He was there from the time he was about 15 until he was 17.” One other teen went to live with his biological grandmother under similar circumstances. Situations like these are upsetting to the teen, the extended family, and the adoptive family, and they could have easily been resolved prior to the adoption. Often these extended birth family members are not suitable or would not really have considered adoption; however, they tell the teen a different story. Eliminating them as candidates for adoption is essential for future adjustment.

What Did We Learn?

Findings in this study, to a large extent, echo those found in previous research. The primary difference is that most families in this study felt that adopting a teen meant adopting his or her biological family—for better or for worse. Although, in many ways, it was positive, and sometimes essential, birth family involvement also brought many issues and challenges to adoptive families in this study. It was one of the most emotionally-charged issues that the adoptive families had to handle. Sometimes the adoptive parents took it upon themselves to go out and find the lost family members. Others were forced to stop contact when it became inappropriate or dangerous. Always the parents had to deal with the aftermath and side effects of the contacts, including everything from their teens acting out to suicide attempts. Despite the emotional turmoil that contact with birth families often caused, most of the parents realized that these visits helped their adolescents deal with the realities of their families and their problems. It is more difficult for adoptees to believe the myths they create about their birth families when confronted with truth on a regular basis.

Understanding that, after age 18, they would no longer be able to monitor or structure contact with the birth family, some adoptive parents took it upon themselves to help the teens learn to recognize danger and protect themselves from harmful situations because their birth relatives would not protect them. This appears to be a very constructive useful strategy for the teens’ long-term protection.

Agencies can help parents address potential unresolved issues with birth families by locating the extended family and determining if they are willing and able to care for the child

before putting him or her up for adoption. With this option eliminated, adolescents can move on with their lives and work on adjusting to their new families.

RECOMMENDATION 11: Initiate or continue contact with birth families when it is safe to do so and when the adolescents desire it. Since adolescents typically have a long-term history with their birth families, they typically have strong attachments to them. As a result, ongoing contact with the birth family is usually desirable. This contact can be helpful to the teens in coming to terms with their families' limitations and in learning how to protect themselves in unsafe situations around them. When possible, contact with extended family should be initiated by the adoption agency prior to the adoption so that there are no lingering issues about whether the teen should be adopted outside of the birth family.

Related Research

Open adoption, which permits and fosters an ongoing relationship between the adopted child and the child's birth family, is one of the more controversial trends in adoption today. (Berry, 1993; Grotevant & McRoy, 1998). Grotevant and McRoy (1998) describe open adoption as a continuum with varying degrees of mutual knowledge, communication, and contact that differs between families and can change over time. On one end of the continuum, the biological and adoptive families may never meet, but they have identifying information on one another. On the other end of the continuum, the families have direct, ongoing communication and contact with each other.

While open adoption would seem to be especially appropriate for older children who know and have ties to their birth parents, siblings, and extended family (Barth & Berry, 1988), findings are mixed as to its relative benefits for special needs adoptions. Critics argue that open adoption prevents the child from bonding with his adoptive family (Brodzinsky & Pinderhughes, 2002). Dual loyalties may cause confusion and adjustment problems for the child (Brodzinsky & Pinderhughes, 2002). Also, continued contact with the child prolongs the grief of the birth parents (Babb & Laws, 1997; Brodzinsky & Pinderhughes, 2002). Some birth parents discontinue contact abruptly and without explanation, causing the child more pain and confusion, and other birth parents become so involved or needy with the child's new family, that the adoptive parents become uncomfortable with the relationship (Babb & Laws, 1997).

Supporters of open adoption, on the other hand, contend that it is a good arrangement for the adoption triad. It provides information on the child's background and allows the child to hear his birth parents' story of adoption, which can help with the grief process (Babb & Laws, 1997; Brodzinsky & Pinderhughes, 2002; Silverstein & Roszia, 1999). It can also help alleviate any attachment disorders the child might have as a result of repeated relationship losses (Brodzinsky & Pinderhughes, 2002; Silverstein & Roszia, 1999). In some cases, open adoption might actually facilitate the child's bonding process with his adoptive family, especially if the adoption is supported by his birth family (Silverstein & Roszia, 1999). For the adoptive parents, open adoption often results in "a more realistic and empathic view of the birth family" (Brodzinsky & Pinderhughes, 2002, p. 303) and helps alleviate concerns that the birth family will harm the child or take him away (Silverstein & Roszia, 1999). This, in turn, can promote a sense of security and empowerment for adoptive parents (Brodzinsky & Pinderhughes, 2002; Silverstein & Roszia, 1999). Furthermore, birth parents may be more willing to relinquish their parental rights if they know they will be permitted continued contact with their child, thereby

avoiding expensive and lengthy court battles (Silverstein & Roszia, 1999). Open adoption may even encourage birth parents to work to improve their lives so that they can participate in their child's life (Silverstein & Roszia, 1999) as well as help with any postplacement grief (Brodzinsky & Pinderhughes, 2002).

Despite concerns about open adoption, it appears that many families are actually practicing it on some level. Both Barth and Berry (1988) and Meezan and Shireman (1985) found that the majority of adoptive families in their studies (79% and 61% respectively) had contact with members of the child's birth family or with former caregivers at some point after placement. Rosenthal and Groze (1992) identified fewer families participating in open adoption—only about one-third (34%); however, this figure is still high given the controversy surrounding the practice. It must be noted that the nature and frequency of contact with the birth family or former caregivers varied widely. In some cases, contact was with the birth parents, and in others, it was only with siblings or other relatives. Often contact was limited to former foster parents. Some adoptive families had extensive, ongoing contact with people from the child's past; other families had minimal contact.

Barth and Berry (1988) found no significant differences in disruption rates between open and closed adoptions. Rosenthal and Groze (1992) report that 43 percent of adoptive parents participating in open adoption feel that it has contributed “very positively” (p. 193) to their overall satisfaction with the adoption. Only 13 percent said that contact with the birth family caused the child “more harm than good” (Rosenthal and Groze, 1992, p. 192). For most children, Rosenthal and Groze conclude, open adoption produces “at least moderately positive outcomes” (p. 195). However, due to the stress some families experience as a result of having contact with the child's birth family, Barth and Berry (1988) caution that open adoption may not be for everyone. Contact with people from the child's past “seems to be a desirable addition for an adoption that is progressing smoothly, but is a threat to risky placements (Barth and Berry, 1992, p. 152).”

RACIAL AND CULTURAL ISSUES

Eleven families in this study (22%) (three single Caucasians, six married Caucasians, and two mixed-race couples) adopted adolescents with racial or cultural backgrounds different from their own. Ten of these families adopted transracially, meaning that the child was not the same race as the adoptive parents. (Both parties in the one remaining adoption were of European descent, so it is not being considered transracial.) All of these families had to make adjustments, beyond those typically made in adopting adolescents, to deal with the racial differences. As one father explained, “My training emphasized that, as a white parent, I had a responsibility to help him maintain his racial identity.” Four of the families (including the one identified above as not having adopted transracially) adopted children from outside of the United States. These adoptions are often referred to as international or intercountry adoptions. In addition to adjusting to racial differences, international adopters are faced with the added burden of dealing with language and cultural dissimilarities as well. Despite these challenges, the parents in this study who adopted transracially and/or internationally managed to creatively and effectively assimilate two diverse cultures into their family’s life while at the same time helping their child to maintain his or her racial and ethnic identity.

Struggling with Identity

Many of the transracial and international adopters talked about their child experiencing an identity crisis related to his or her being different from other family members and peers. The parent of an African American adoptee said, “It was hard for him. When I looked at our family, I saw an interracial family. When he looked at it, he saw a white family.” The identity issue seemed to be especially profound for the five families in the study who adopted bi-racial adolescents. Several of the parents described their child’s struggle with who he or she really is. One mother reported that her daughter recently learned that she is biracial and was just beginning to admit this to her friends. “She told her boyfriend and one of her girlfriends that she is biracial,” the mother said. Another parent of a biracial teen said, “He doesn’t consider himself white or black. He still struggles with that a lot.” This mother went on to point out that her son’s struggle with his racial identity is not necessarily related to his being adopted. She feels that he would have the same problems no matter what. “He doesn’t see that this would still be a problem with his birth mother, even though she is white,” the mother explained.

Coping with Racial and Cultural Differences

In a review of the literature, several recommendations for parents involved in transracial and intercountry adoptions were identified. These include finding same-race mentors and supports, moving to an integrated community, attending integrated schools and churches, and incorporating the adoptee’s culture and traditions into family life, where possible (Babb & Laws, 1997; Rosenthal & Groze, 1992). Parents in this study used all of these strategies in an effort to help their adopted teens maintain cultural ties and overcome identity crises.

Mentors and Supports

Many of the parents said that they looked to their circle of friends and coworkers to find someone who was the same race as their adopted child to be a mentor for the child and a support for them. One such mother stated, “He [her friend] helped me deal with racial issues and was a great role model for my son, as a black man who was very successful in a predominantly white

career field.” The mother of several Chinese adoptees said, “They all have a special adult friend within the Chinese community.” One couple found support for their bi-racial son at his school. “The assistant principal, who is a black man, has been phenomenal in terms of support. He thinks [our son] can succeed. And [he] can,” the parents said. This couple went on to say that they have also received a lot of advice and guidance from other parents in their support group. “We have been heavily involved in our adoptive parents support group. And probably that—more than anything else—is where we got the support....Most of those parents are black. They’ve been very helpful and supportive,” explained the mother.

Integrated Communities, Schools, and Churches

A few of the families who adopted transracially lived in or moved to a more mixed-race community or larger city in order to seek more diversity. “We live in a very mixed neighborhood. It’s racially mixed. It’s culturally mixed. We have a lot of Jewish families. We’ve had Indians. We’ve had Asians, Japanese and Chinese. And there are African Americans....The school that our kids went to is 75% black,” said one parent. Another parent stated, “The neighborhood we moved to was around 50% African American, and he was less of a minority.” Still another parent who moved to a larger community after adopting her child commented, “There is more diversity at the bigger school she is in now.” Transracial adopters also sought diversity at church. One parent said, “The church we belong to is a very small inner-city church....[It] has been very supportive. Plus, it’s a church that’s largely black.” Another parent said, “We have had a little bit of a struggle in finding diversity in our church faith community so we go to two churches. We go to one in our neighborhood that is all white, and we go to one in the city, which is all black, so we get both exposures.” Not all parents of transracial adoptees, however, were able to or felt the necessity to relocate in order to accommodate their child’s skin color. One father explained, “He became the greatest ambassador for diversity the school has ever had. They quit seeing [him] as being a different color and he just became [himself].”

New Family Traditions and Practices

In an effort to incorporate the adoptee’s culture and traditions into family life, many transracial and intercountry adopters established new traditions and practices. Several of the parents made sure that their children stayed involved in their ethnic communities. One father said, “[My son] is Hispanic, and we live in city that is 60% Hispanic...we get invited to Hispanic events, so he is involved in cultural things as well.” Another parent said, “We have a Chinese dentist, and they attend a Chinese school. They remain part of the Chinese community, which they need.” And still another said, “We have a pretty Hispanic community here, and we have gone to some of the fiestas and the Spanish stores.” Some parents took their children to their native countries on vacations. “We take them back to visit China,” said one mother. “We went back to Russia once since the adoption,” said another. Other families made a special effort to visit ethnic parts of town when they went to large cities. “We went to Chinatown in Toronto, and that was a lot of fun,” reported another mother. Closer to home, parents tried to incorporate their adopted child’s culture and traditions into day-to-day living. One of the more common ways families did this was with food. Several parents learned to cook foods from their children’s past, or they let their adolescents cook for the family. As one parent who adopted internationally said, “They have cooked some of their foods for us, and we buy food that is familiar to them.” Another said, “She does a lot of her own cooking because she doesn’t want a lot of American

food.” A few parents also talked about purchasing books and music from their child’s birth country so that he or she would feel more at home.

Dealing with Prejudice

No discussion of race and culture would be complete without at least mentioning how families dealt with racism and prejudice. Despite their best efforts to provide a diverse and welcoming environment for the teens they adopted, many parents admitted that their children and their families still were victims of discrimination at times. “We live in a culture that is still racist,” said one mother who adopted transracially. For the most part, parents felt that their immediate family members and close friends were very supportive of the adoption and of their child. A few parents indicated that some people had reservations in the beginning, but that most quickly forgot them once they got to know the child. One parent said, “My mother thought it was the worst thing that ever happened until she met him.”

Racial tensions seemed to be more of an issue within the community, especially at school. For many parents, this was their first personal encounter with racism. As one parent explained, “There was an incident where [my son] was cornered in the bathroom by the local gang of KKK, and they harassed him and said that they didn’t want any more black kids in their school. I had never dealt with those issues before.” Sharing a similar story, another father said, “There were a couple of incidences at school. These were with kids who were espousing their parents’ racist viewpoints. The school absolutely did not tolerate it, and it was short-lived. [My son] had grown up dealing with this kind of stuff, and I had more problems dealing with it than he did.” Another family changed churches after having a negative experience at the church it attended prior to adopting. “We were asked to leave a church because we were bi-racial. That was not a pleasant experience. He [son] asked me why weren’t going back, and I explained it to him. We did find a church that was very welcoming and very diverse. He noticed the difference from the first day,” the mother said.

Dating was an issue for several of the transracial adoptees. One mother’s story is representative. “The biggest conflict that we had was the issue about dating. He is a very good-looking man, and the white girls chased him. Their fathers would find out, and they would call us and be very ugly. It was very painful for him to be rejected because these were girls who had pursued him, and he was basically told that he was not good enough for them.” A few parents reported that their adolescents dealt with this issue by not dating for a while during high school. As adults, most appear to be having more success in their relationships.

What Did We Learn?

Although the parents in this study who adopted adolescents with racial and cultural backgrounds different from their own did have some concerns about how these differences might affect their families, most seemed to manage these issues without too much difficulty. The biggest issues associated with transracial and intercountry adoptions were helping children through identity crises, assimilating diverse cultures, and overcoming prejudice. Despite these obstacles, the families appeared to enjoy exploring racial and cultural differences and similarities.

EDUCATION ISSUES

Adoptive parents in this study were asked whether the teens they adopted had problems with schoolwork and whether the schools were supportive of the adoption. They had a great deal to say about both of these topics. It is not surprising, given the upheaval in their lives, that most of the adolescents had problems with schoolwork. In coping with these educational issues, parents reported receiving varied levels of support from schools. Despite their educational difficulties and, in some cases, lack of support from schools, almost all of the study participants graduated from high school or were on target to graduate.

School Performance

Five of the parents (10%) reported that the teens they adopted did not have problems with schoolwork. When asked about school-related issues, one mother said, “No problems. She goes to class.” Two of the adolescents had all As when they were adopted. Despite being moved frequently and having all of the problems associated with foster care, they were able to maintain their high grades. One mother explained her daughter’s success in school. “She felt that she had to do well in school to be loved. We said that she had to meet her ability level and it doesn’t have to be perfect.”

The remaining 44 parents (90%) reported that their adopted adolescents had problems with schoolwork at some point in their school careers. Two parents said their teens were unable to read when they came into their homes. One mother reported that her son never learned cursive writing. Most of the adoptees had problems with reading, math, or both. As a result of their difficulties in school, some adoptees had self-esteem issues. These teens were so far behind that they thought they could not learn. “He didn’t think he was very smart and in fact, thought he was pretty stupid. He just barely squeaked by to graduate,” said one parent.

Factors Contributing to Educational Difficulties

In order to help their children, parents first determined why they were so behind in their studies. These parents identified a number of factors that contributed to their teens’ lack of academic achievement.

Gaps in Education

Twelve parents (24%) thought their teens’ educational deficits were related to gaps in their education. Frequent moves while in foster care caused many school changes. With each change, they got farther behind. “Yes, he is very weak in math,” said one father. “Between the third and sixth grades, we figured out that he was in ten different schools, and so he lacks a lot of basic math skills.” Frequent moves in foster care also meant that there were no consistent caretakers to keep track of their educational progress. “Other kids in the program didn’t have an advocate,” said one adoptive mother who works in the adoption field referring to the fact that once diagnosed with a learning disability, many children retain that diagnosis simply because no one is around to monitor their progress. “I’ll bet half the foster kids are labeled and never reevaluated and just stay forever,” this mother said.

Many parents thought the gaps in their children’s educations were due to differences in the quality of the schools. The international adoptees had problems initially because they did not know the language, and their previous schools were of poorer quality. One mother explained, “She didn’t have history and not much science. She super excelled in math.” The quality of

schools was also an issue for some children adopted domestically. One mother reported that her child moved from a rural area in another state to her home in the suburbs of a big city. There was a large disparity between the quality of the two schools. “He was at a huge disadvantage because he had been the top math student, and up here, there were five levels of math classes, and he was put in the next to the bottom. So he came up looking like a kid who was very behind,” this mother explained. Another mother described similar issues. “She was an honor roll student in [her old school], but the scaling of grades is different so where she might have been okay [before], [now] it is a little harder.”

Cognitive Disabilities and Attention Disorders

Twenty-five of the parents (51%) reported that the adolescents they adopted had been diagnosed with learning disabilities, attention deficit disorder, speech problems, emotional problems, mental retardation, or developmental delays. These children were placed in special education classes for at least part of the day. While most of these teens did need these special education services, five of the parents reported that their children had been misdiagnosed. One such story was typical. “He was also diagnosed as slightly or borderline mentally retarded,” said the father. After the adoption, this father had his son tested, and the professionals found he had normal intelligence. “The neuropsychologist was furious because he said [that] you don’t recover from mental retardation and there is no cure. He told [my son] he was not mentally retarded and never had been,” the father recounted. Another mother said, “He had been told that he wasn’t smart, and he thought he wasn’t. It was a lot of rebuilding his self esteem.”

Emotional Disabilities and Behavior Issues

Twenty-two parents (45%) said that their adopted teens had emotional disabilities and behavior issues, and some of these issues were severe enough that they interfered with their schoolwork. “She had a lot of emotional turmoil, so she wasn’t really focused during the elementary years. She missed a lot of the basic skills, and she had a harder time later on,” explained one mother. Another teen was diagnosed with bipolar disorder during her first year in college. She could not cope with being away at school and had to come home. Once she becomes more stable on her medication, this adoptee plans to return to college full-time. The adolescents with post-traumatic-stress disorder (PTSD) sometimes had flashbacks at school. One mother talked about the effect this disorder had on her child. “The school was calling me all the time. She was having really bad flashbacks, and she was totally out of it—screaming and hollering. This went on for quite a while. She didn’t want me to leave her, and she tried to commit suicide.” Obviously, these episodes made it difficult for these teens to keep up in school.

Sometimes, the treatment for emotional issues required residential care. This often caused the teens to get further behind. One parent explained, “The 7th grade was very difficult for her because she was hospitalized two or three times, and she got really far behind. We arranged an IEP for her, and that took a lot of time. We didn’t get her transferred into another program until April. She lost three-fourths of the 7th grade.”

Some of the teens did not have a specific disorder but acted out and had disciplinary problems at school. Their parents made many trips to the school to deal with these issues. One such parent said, “There were some minor disciplinary issues at school. There were several times that we had to go in and work things through with the disciplinary officer.” Parents of teens with these behavioral and emotional problems tried to work with the school to help their

teens keep up with schoolwork. Sometimes they had their child repeat the grade or transfer to a school better equipped to handle their specific issues.

Resolving Educational Issues

Adoptive parents in this study were quite involved in their adolescents' educations, and they were committed to helping them resolve or overcome any educational difficulties they might have. In an effort to do this, parents employed numerous strategies, including working closely with school staff to see that their teens received the appropriate support, tutoring the children themselves or hiring someone else to tutor them, and, when all else failed, transferring the adolescents to other schools better able or willing to provide the needed support and assistance. While most of the adolescents either graduated or were on target to graduate with their peers at the time of the interview, several were a year or two behind as a result of the types of issues described previously in this section.

Parent Involvement

Many of the parents indicated that they were very active in their child's school. They met regularly with teachers, guidance counselors, school psychologists, and administrators to explain any adoption-related issues the child might be experiencing and to discuss the teen's special educational needs. "...I went in and talked to the teachers ahead of time," said one mother. "When I told them the situation, they went, 'Oh, I get it!'" The parent of several intercountry adoptees stated, "I explained to them at school when they first came [to America] that they should have no homework and no math problems or testing in English because they just don't get it." Several of the parents mentioned that they volunteered in their child's school. Others talked about how they periodically showed up at the school unannounced to check on their child. One such parent explained, "I'll show up at the school at any time...I talk with the teachers. I stay informed." These parents were not shy about voicing concerns to school staff. As one mother said, "...I was in there and down their throats all of the time." Most of the parents reported that their efforts to be involved in their child's educations had paid off. Not only were their adolescents doing better in school academically, but many teachers seemed to go out of their way to accommodate the adoptee's special needs. Parental comments about teachers included, "They really cooperated and tried to help [him]. They had him sit up front and gave him directions and made sure he understood instructions"; "They've made a lot of concessions for him"; and "They took their planning periods and tested him orally until they built his confidence up that he could do the work."

School Support

Parents were asked specifically about whether their adolescent's school was supportive of his or her adoption and to explain their responses. Forty-five parents (88%) answered this question. Their responses varied as to how understanding and accommodating the schools had been. A few of these parents (18%) stated that the fact their child was adopted had no impact on the types of support and assistance provided by the schools. One mother said, "It was no big deal." Another said, "They really didn't do anything. It was neutral." The rest of the parents who responded to this item were much more vocal in their opinions about school support.

Almost half of the parents (49%) said that they found the schools to be extremely supportive and helpful. As one father said, "His teachers were really happy for him and just thrilled. And the administrators all congratulated me and said that [my son] really deserved it."

Many parents did not specifically say how the school reacted to the adoption or what types of assistance were provided to meet the special needs of the child; they just stated that they were impressed with how the school handled the situation overall. One mother said, "...the school is incredible. It is the best school to be in for foster care and adoptive care." Others said that specific staff members went out of their way to be helpful. One mother stated, "The teachers have been marvelous. The assistant principal who helped us to move her to the ninth grade was really supportive with having her tested." Another mother had children in four different educational programs due to their various disabilities. This mother was very pleased with the help she received from the school, especially from its in-house psychologist and social worker. "They got everything worked out. I just had to basically show up and fill out paperwork, and they were in," she said.

Another 20% of the parents responding to this item were fairly satisfied with the support their family received from the school system, but they did have a few negative experiences. Two parents reported that the school their teen attended when he or she was first adopted was not particularly supportive; however, the child's new school was much better. When speaking about her adolescent's first school, one mother said, "The school was not real supportive to foster care and adoptive kids. They labeled them as troublemakers, and they really weren't supportive." This mother said that the school they transferred their child to was "incredible" and "very positive." Several said that the schools were not very flexible and refused to accommodate the needs of adopted children. For example, many parents in this study enrolled their child in school with his or her new last name, even though the adoption was not yet finalized. For most, this was no problem, but four school districts would not allow this, and it caused some embarrassment for the teens later on when they had to explain why they suddenly had a new name. A Caucasian father who adopted a Hispanic teen was very put out by this policy. The father said, "I think it would have been a lot easier on him had the school allowed him to take my name to begin with instead of...after we finalized the following summer." The name change was confusing to a lot of people when the teen returned to school in the fall. The father explained, "We had a couple of people make the comment that he was trying to be white [due to his new last name]. In fact, this comment was made by a coach. I was furious." Two other parents talked about schools not being sensitive to adoption issues. One mother said that her only negative experience with the school was when a teacher asked her if she were "the adoptive mother" as opposed to being just "the mother." The other parent, who adopted internationally, said that her children had some adjustment issues when they were first adopted, and they sometimes told school staff that "this was a horrible place and they were terribly unhappy and miserable." Instead of understanding that the teens were upset about leaving their home country, "the school seemed to treat us as if we were bad parents," explained the mother.

The remaining 13% of parents were very dissatisfied with the schools their child attended. One parent simply said, "They [the schools] have not been very supportive." Others were more specific about their criticisms and most of their complaints were adoption-related. One parent stated that the "school was of no assistance" in helping her children make the necessary social and academic adjustments associated with going to a new school. Furthermore, this mother was concerned that school administrators had shared confidential information about her children's histories with their teachers. "They already had a pre-conception of our children before they even started," she said. Another mother did not learn about some of the issues that went on at her child's school until after he had graduated. After seeing her other adopted children go through the schools, she does not think that they were supportive at all. Still another

parent, who adopted internationally, said, “The school that we were in had no ESL [English as a Second Language] program. We had a lot of problems with the school system. The first semester she sat there with no help with anything.” One father described his son’s educational experience as “a disaster” and “a nightmare.” Although his son was capable of performing well in school, he had numerous behavioral and emotional issues that frequently kept him from doing so. For a while, the school provided special services to his son that really seemed to help, but once he started to do well, they discontinued these services despite the father’s objections. The old behaviors quickly returned, and his son’s grades plummeted. Another parent had a problem with his son being bullied. While this parent does concede that the school was “supportive of the adoption and of his [son’s] situation,” he was not happy that it was “not responsive to the bullying.” After his son developed health problems related to stress caused by repeated harassment, the father withdrew the child from that school and home schooled him.

Tutoring

In order to help their adolescents overcome their educational deficits, many parents either tutored the teens themselves or they hired someone else to tutor them. Parents reported spending many hours with their teens in an attempt to help them get caught up in school. One mother explained, “He was in the 10th grade and didn’t know his multiplication table. We really had to work with him.” Another mother said, “I spent a lot of time helping her with her work and the comprehension.” Still another parent said, “[My son] would not do work on his own, but he was willing to sit there and ask for help, and my husband worked a great deal with him.” Some parents looked for creative ways to make learning fun. “We always made a game out of school....There are certain ways to help you remember things...like mathematical equations....We made a game out of it all together,” said one father.

Several parents hired tutors to help their teens better understand their schoolwork. Typically, this was in addition to working with them at home. “I hired tutors, and that helped give her confidence....Generally, she has tutors every year for something....” reported one mother. Some parents found tutors through the schools. “She goes to afterschool tutoring every day,” said one parent. Another parent, who adopted internationally, said, “They had some students from the university to come and tutor [my children] in their classes. The students would come and sit in their classes with them and explain everything to them.” In some cases, tutors were sought because the teens did not work well with their parents. One such parent explained, “When we tried to help her, she would be hysterical. We ended up not helping her, and she would get her help from school, and that was a resolution to that problem.”

Overall, these parents were rewarded for their efforts. Most of the adoptees made considerable progress as a result of the extra assistance they received outside of the classroom. As one parent said, “Once we started working with him, he did okay...It was a lot of hard work, [but] he graduated on time.” Another said, “He makes all As and Bs, with a few Cs....He will graduate with a diploma.”

Changing Schools

A few of the parents reported being so upset with the lack of support from their child’s school that they transferred their child to another school. A couple of parents were not happy with the public schools their children had been in during foster care and moved their child to a private school at placement. One mother stated, “The public schools are not any good.” This mother was very pleased with her daughter’s new school, however. “She was in an excellent

school. It was private, and they were very supportive.” Another parent was also pleased with her son’s private education. “We put him in the Christian schools, and they were very supportive,” the mother said. A few other parents transferred their teens to different public schools in the community. “We are now bussing her to a bigger town,” said one mother. Another parent reported that her sons were accepted into a charter school. Still another parent got so frustrated with the school system that he withdrew his son from high school and enrolled him at the local community college.

What Did We Learn?

Most of the teens in this study had problems with schoolwork due to interrupted schooling, emotional issues, poor educational foundations, and the lack of a consistent advocate who could attend to school issues over time. After falling behind for so many years, some of the teens did not believe that they could do the work. Many stopped trying, believing they were too stupid to learn. It is interesting to note that most of these teens, with the help of diligent adoptive parents, were able to turn themselves around and do well in school. Sometimes this was accomplished with the assistance of the schools, and sometimes the families did it on their own. The parents reported spending many hours at home with their children working on schoolwork and additional hours at school advocating on their behalf. While many parents said that their teens were at least a year or two behind their peers when they were first adopted, most have been able to get caught up and either graduated or are on target to graduate on time. Of those adoptees interviewed for this study who were 18 years of age or older, all had either graduated from high school or were still in school. Graduation data were not collected on the adolescents from participating families who did not agree to be interviewed, so graduation rate comparisons could not be made. Parents who adopt adolescents need to be prepared to tutor and/or hire tutors to help them overcome their educational deficits.

SUCCESSFUL ADOLESCENT ADOPTIONS

The American Heritage Dictionary defines success or successful in two ways that are relevant to adolescent adoptions: 1) achieving something desired or planned and 2) having a favorable outcome. The achievement of something desired or planned, the first way adoption success is defined, relates to the legal finalization of the adoption. This is referred to in the literature as stability or family intactness, extending past legal finalization and on until the youth emancipates (Ward, 1997; Groze, 1996). Stability in adoption can be measured quantitatively: the number of those adopted as adolescents who are legally adopted or the number of these adoptions maintained until the youths emancipate. Having a favorable outcome, the second way success in adoption is defined, relates to the qualitative factors associated with the adoption. This is referred to in the literature in terms of relationship quality (Ward, 1997) and the satisfaction of parents, adoptees, and caseworkers with the placement (Groze, 1996). The quality of the adoption can be more difficult to identify and measure.

Explanations of Success

All of the families in this study achieved success in terms of finalizing the adoption and maintaining it through the time of the interview. In fact, only families who had finalized and maintained the adoption were recruited for participation in the study. The other way of defining success, having favorable outcomes, was explored in depth in this study. This in-depth exploration of adoption success began with parents and adoptees explaining what they considered adoption success to be.

Parents' Perspective

Parents in this study were asked if they thought the adoption was successful, and, if so, what made it successful. All of the parents felt their adoption was successful and most were able to articulate why they felt successful. Some parents did not share an explanation of success beyond the fact that they stayed together at least until the child became an adult. Other parents explained success in only one way while still others provided multiple explanations of success. Three categories of explanations for success were identified.

Operates Like a Family

Over half of the parents (57%) felt the adoption was successful because they did things like or just felt like a family. As one couple said, "I feel good that they feel the love that we have for them and they feel a part of something, of a family, whereas they didn't before." Another parent said, "I consider it successful because I know in my heart that they are very much at home and comfortable here with their lives." Another mother said, "They do think of us as their parents and they are a part of our family, yes, and in that way, it was successful."

Attains Favorable Outcomes

Eighteen percent of the families thought that the adoption was successful because they had good outcomes for the adolescents they adopted. Some of the teens got married and had families. As one mother said, "We gave her a place to launch into adulthood. She graduated from high school and was the first to do so from her biological family on both sides. She got married before she got pregnant and is still married ten years later." Some of the adolescents have grown into adults and told their parents how much they appreciate their assistance. One

couple said, “He has told us if it weren’t for us, he [would have] headed down the wrong road, and he’s very thankful we came into his life.” Others were more global in their responses, “They function well in the world,” commented one parent.

Works So Far...

Eight percent of the parents said the adoption was successful because the adoptees were doing well so far. One couple said, “It’s successful because he’s still here. While he has rebelled, he has not left.” Other parents were grateful they had all survived thus far. “I always say that, after eleven years, I am alive and she is alive, so it is a success,” explained a mother. Another parent said, “At 16, I just say I got him to 16. He is alive and well.”

Adoptees’ Perspective

Adoptees were not directly asked to define success in adoption, but they were asked to rate the whole adoption experience on a scale from *one* to *ten* with *one* being awful and *ten* being great. Most of the adoptees were enthusiastic about their adoption, with 86% rating it between a *seven* and a *ten*.

Nineteen percent rated the experience a *ten*. One teen spoke for many when she said, “I would give it a *ten* because I have a normal life now. I have a driver’s license, and I drive. I have friends, and I get to go on overnights. There is no comparison to what my life is now and what it was before.” Another young woman said, “Number *ten* all the way. Everything I ever wanted from a family, I got—love, comfort, warmth, someone to love me.”

More of the adoptees (38%) rated the experience a *nine* than any other number. One adoptee said, “I would rate it as a *nine* because it was my first time being adopted, and I was happy. Things are going good...it is not the same as having real parents, but I like it here.”

Almost one-quarter of the adoptees (24%) rated their experience an *eight*. This group felt that there were some down sides, so they could not quite rate it a *ten*. “*Eight* or *nine*, there isn’t really a negative part,” said one adoptee. He continued, “The whole experience is really great. There were some feelings that were not really great like wondering if they were going to keep me. I didn’t have those feelings after we went to court, and they officially gave me my last name.” Another adoptee said, “I just wanted to be able to connect with someone...I knew that school would be difficult and would be challenging but I knew that I would feel safe and secure and have someone who really cared.”

Five percent of the adoptees rated the experience a *seven*. One adoptee said he rated it a *seven* because, “It was a little bit rough at first.” Another five percent of the adoptees did not rate their experience at all. The remaining 8% rated it as *five* or less. These adoptees were dissatisfied with the length of time it took to get adopted. As one teen said, “I would rate it a *one* because I was in the system too long.”

Keys to a Successful Adoption

The in-depth exploration of adoption success continued with parents and adoptees describing keys to adoption success. One parent declared that it was “just pure dumb luck” that made his adolescent adoption successful. Other parents and adoptees articulated a variety of keys to success in their adoptions.

Parents’ Perspective

In addition to describing the ways in which they felt their adoptions were successful, parents in this study also talked about why they thought they were able to attain this success. An

analysis of parents' responses revealed five keys to success in adoption. Most of the parents identified more than one key.

Commitment

A large group of parents (69%) said commitment was the key to their success. These parents were determined to make the adoption work regardless of what they had to go through with the adolescent. Being able to stay committed even during the difficult times was important to these parents. As one parent said, "I think being willing to just hang in there during the difficult times is what made it successful." Some parents made the commitment before meeting the adolescent. One father said, "First of all, when I decided to adopt, I decided in my own mind that whoever it is, I would have to decide to adopt this child before I ever physically met him. I had to." Others made the commitment after forming an attachment to the teen. One of these parents said, "We were very clear in that we wanted to do it and that we had made a commitment to him."

A significant subgroup (59%) of those identifying commitment as a key to their success said that the teen has to want to be adopted in order for the adoption to work. One parent was typical of others in saying, "Number one was having a child that really wanted to be adopted." Others talked about how much work the teen put into making the adoption work. As one parent said, "He did a lot of hard work to make it successful. He wanted a better life, and he was willing to make the changes he needed to make." Another parent said, "His attitude and willingness to work and put up with some of the stuff that he didn't like and his willingness to trust me and just hang in there made all the difference."

Realistic Expectations

Another group of parents (37%) felt that a major key to success was having realistic expectations of the adolescent. One parent said, "I didn't have any expectations for them, and that was a help because sometimes people have expectations that are very unrealistic. I think people sometimes go into it thinking the child is going to be grateful [to you] for saving him or her. That is not going to happen nor did I expect it to." Another parent said, "You have to accept the person for themselves." Several parents talked about the adolescent's past life and how it had an impact on living in a more typical family. As one parent explained, "I think that you need flexibility in that you can't expect to set very strict rules for a child who has had no boundaries."

Support

Another group of parents (31%) thought that having a strong support system was a key to successfully adopting an adolescent. Support came in many forms, including professionals, family, friends, and church members. A variety of professionals provided support, but two groups stood out: caseworkers and counselors or therapists. Some thought their caseworkers were particularly helpful. "A lot of the caseworkers were very supportive. They encouraged us, and they congratulated us," said one mother. She went on to say, "They told us that if we had problems, they would always be there." Counselors were probably the biggest source of professional support for parents and adoptees. One parent explained, "I think the biggest thing that helped us keep her in our home as long as we did was the counselor. The counselor helped us with anger management—helping us understand why she did certain behaviors and teaching us behavior modification to deal with them."

Friends and family also provided critical support for many of the parents. “There is a support group for adoptive parents facilitated by this county,” commented one parent. Having an opportunity to talk with others who were experiencing similar issues with their adopted adolescents helped many parents keep their sanity. Since formal support groups were often difficult to find, most parents developed their own support networks. A number of parents relied on their friends at church. One parent said that the key to success was, “having a supportive community/church.” She went on to say, “without them, the adoption may have been different.”

Personality

Twenty-two percent of the parents in this study felt that their own personality characteristics and life experiences were key to their adoption success. They felt that flexibility, a sense of humor, good communication skills, and even prior parenting experience helped them get through the difficult times. Several parents talked about having flexibility. “I am pretty flexible, and I had a good background with kids who had problems before I got her, and nothing she did was too shocking to me,” said one mother. Other parents talked about having a sense of humor. As one mother reported, “We both have a ridiculous sense of humor. We think everything is funny, even when it is not.” Others talked about the importance of having good communication skills. One couple explained, “We strategize things out. We don’t do anything quickly. We talk about stuff, and what we do is very deliberate.” Still other parents attributed their success to having been parents before they adopted. As one parent said, “I think the fact that we had already parented teenagers made all the difference in the world.”

Faith

A couple of parents (4%) said their faith in God got them through the bad times. One parent explained, “God helped us through everything and made us hang in there.” Another parent said, “I can pray and ask Him to guide me with these children, but He’s the one who sends the blessing.”

Adoptees’ Perspective

The adoptees also had some opinions on why the adoption worked. Most talked about parental assistance, being compatible, and working together as keys to success. Some adoptees talked about their compatibility in interesting ways. One adoptee commented, “It worked because my Mom is *not* a nut bag. We worked together. We went to counseling. We never gave up.” Another adoptee was less colorful, but shared a similar sentiment. “It worked because my mom and I had a lot of things in common,” she said.

Some of the teens talked about their need for support and the importance of having one person devoted to their needs. “I think [it worked] because my mother had the resources available to her because of her profession [social worker] and because she was single,” said one adoptee. She went on to say, “There was no husband, no boyfriend, and no siblings.” Another teen said, “My Dad is very laid back and doesn’t yell, and that was what I needed. I need him for support.”

Others talked about their commitment to each other. “It worked because of my parents’ perseverance and understanding of me,” explained one teen. He continued, “I know I didn’t make it easy for them.” Another teen said, “I think it worked because my dad and I had a chance to get to know each other, and we were very close. We hardly had any difficulties, and we were both dedicated to making it work.”

Still others talked about their positive attitudes. “I am a good girl and don’t make any trouble,” commented one young woman. Another said, “It worked because I went into it with an open mind. I chose not to be rebellious because there is no purpose in it. I am pretty easygoing and want to do things right.”

Disruption of the Adoption Process

The in-depth exploration of adoption success concluded with a question about what parents did when the going got rough. All of the parents were asked if they ever thought the adoption would disrupt. Thirteen families (26%) said they had considered it. One mother called the adoption agency and had social workers come to the house twice. She said, “We worked through the issues by talking about it and having meetings. Things began to get back in place.” This mother also asked the preacher to talk with her son. According to her, it helped him turn the corner and get on a better path. Another mother reported being frustrated at her daughter’s unwillingness to take responsibility for anything. She said, “The first year, I just didn’t know if I could handle it. I felt guilty and thought that if it disrupted that she was going to be turned away again. I loved her but couldn’t stand her sometimes.” Working closely with the counselor helped this family to resolve many of their problems. Another mother reported that three weeks before the adoption, she called the agency and said, “Hold up the train and let me off.” Her son was really acting out; the closer they got to finalization, the worse he got. The mother said, “We had more therapy and I took the gloves off because I had been acting like the nice mommy for a long time and overlooking a lot of things. I just started treating him like he was mine.” Things got better for this family and the adoption went forward.

Some of the parents in this study who considered disruption did so because they were not prepared for the mental health issues that their adolescent displayed. One mother described the first year of the adoption as a very difficult time. “The darkest hour was in the first year,” she said. “She became suicidal after her mother’s death and was dealing with all of that. The fact that we stuck with her through all of that kind of galvanized our relationship,” the mother explained. One couple said, “It was scary when he needed residential care.” These parents reported that many of their friends encouraged them to disrupt in order to get rid of the financial burden. Instead, these parents worked out the costs and made it through the crisis. They said, “We’re pretty pigheaded.”

Seven (14%) of the parents in this study said they never really considered disruption, but they did have some serious doubts at times. One father spoke for many parents in saying, “No, but some nights I felt overwhelmed, and I can’t say that I never wished that I hadn’t done this.” A mother said she had, “a brief second thought shortly before the adoption.” It was a place in our lives I didn’t think we would make it, and I thought it was going to cost me my marriage too.”

Twenty-nine (59%) of the parents in this study said they never considered disruption. These parents were totally committed to the adoption. One parent even said, “No, never. Not even when he tried to kill me.” Another parent said, “We never thought it was going to disrupt because we won’t let it disrupt. I don’t think you should go into the adoption with that idea.” Another parent shared a similar sentiment. “We believed that once you make a commitment to a kid, that commitment is forever. It is a permanent commitment. There was never any discussion about whether or not it was going to work,” this parent explained.

Sibling Disruption

Fifteen of the families participating in this study decided to adopt a sibling group that included an adolescent. In two of these families, one of the siblings disrupted. One family explained that the disruption occurred because one of the adolescents they planned to adopt did not want to be adopted. This adolescent became a behavior problem, and the adoptive parents believed they had lost control of situation. This couple decided not to adopt this adolescent, and the child went back to his birth family. The adoptive couple did, however, continue with the adoption of his brother. In the other family who experienced a disruption, one of the siblings was violent. The adoptive parents recognized that they needed help and asked the county agency to pay for residential treatment. The county refused to pay for these services. The county eventually stopped the adoption of this child and put him in a special foster care home with intensive therapy. The adoptive family was able to successfully adopt the other siblings, and the child who disrupted eventually received services and was adopted by another family.

Satisfaction with Life

Adoptees were asked to complete the *Extended Satisfaction with Life Scale (ESWLS)* to provide additional information about adoption success. This is a reliable instrument for obtaining information concerning people's satisfaction in nine areas of life: general life, social, sex, self, physical, family, school, work, and relationship (Alfonso, Allison, Rader, and Gorman, 1996). This instrument allows items to be dropped without compromising the results (Alfonso et al., 1996). Five items about the person's sex life were deleted from the scale leaving 45 questions divided into eight subscales. Twenty-three of the 37 adoptees participating in the study completed the instrument. Adoptees rated each item on a seven-point Likert scale from *strongly disagree* to *strongly agree*. As directed by the instrument's developers, "scores for each of the subscales were calculated as the sum of the ratings for each of the items comprising the subscale" (Alfonso et al, 1996, p. 283). Higher scores indicate greater satisfaction with life.

Table 11 compares the adoptees with the norm group on mean scores and standard deviation for each of the eight subscales used on this instrument. As can be seen on Table 6, the adoptees in this study were more satisfied with life than the norm group on all subscales.

Table 6. Mean Scores and Standard Deviation of Adolescents Taking the *Extended Satisfaction with Life Scale* Compared with the Norm Group

Subscale	Adoptees			Norm Group*		
	Sample Size	Mean	Standard Deviation	Sample Size	Mean	Standard Deviation
General Life	23	26.5	7.3	301	23.9	6.1
Social Life	23	26.7	6.9	301	25.1	6.1
Self	23	27.7	4.6	302	25.1	5.1
Physical Appearance	23	23.1	7.9	300	19.6	6.4
Family Life	23	26.3	8.4	299	23.8	8.3
School Life	18	28.4	6.4	297	24.8	4.7
Job Satisfaction	9	48.9	9.2	182	48.2	11.0
Relationship	6	26.0	6.4	261	23.3	7.8

* (Alfonso et al, 1996, p. 285)

The above scores, along with interview, data indicate that those adopted as adolescents in this study are satisfied with their lives after adoption. More study is needed to determine if adoptees are more satisfied with their adult lives than those who were raised by their birth

parents and those who aged out of the foster care system. Comparing adopted adolescents with matched adolescents who have not been adopted may lead to some important differences not revealed through the simple comparison to the norm group used in this study. It also would be interesting to compare adoptees' scores with the scores of adolescents remaining in foster care. Much further study is needed here.

What Did We Learn?

In this study, parents and adoptees explained their adoption success in ways that generally correlate with those found in the literature (see Related Research at the end of this section). Both parents and adoptees described having normal family relationships as a key indicator of success. Neither expected perfection in family life—just love and stability. Favorable outcomes were seen as relative. Many of the parents explicitly stated that having realistic expectations was essential.

Research shows that older children, especially those with multiple problems, experience more disruptions and dissolutions. It also shows that married people, those with lower incomes, those with fewer children, those with younger children, and those who adopt multiple children seem to have more positive outcomes. Parents in this study were single, married, divorced and widowed. They had a range of incomes. All adopted older children, many with multiple problems. Some adopted multiple children and sibling groups, but many adopted only one adolescent. Yet, all the families in this study were successful in adopting at least one adolescent.

Sorting out exactly why some adoptions work and others do not is challenging and beyond the scope of this research. It appears that there are some things that contribute to successful adoptions, but these factors are not present to the same degree in every successful adoption. Parents and teens in this study identified four major keys to success: commitment, realistic expectations, personality, and support. These keys suggest some of what is needed to make adoptions work. These keys correspond to many of the parental characteristics described by Katz (1986) as being essential to adoption success (see Related Research at the end of this section).

Commitment. Both parents and adoptees talked about a need for commitment in terms of making the adoption work no matter what. Adoptees described commitment as working with their parents, and parents described it as “hanging in there” no matter how difficult. It appears that people approach commitment in different ways. Some parents and adoptees are committed to the *concept* of adoption. In other words, they decide to adopt or be adopted and make it work regardless of the person involved. Others bond or attach to a particular person and make a commitment to that person. In some cases, this bond is immediate, based solely on looking at a picture or meeting the person one time. Other times, the parties must get to know one another before becoming attached.

Realistic expectations. Having reasonable expectations was key for many parents and teens. They expected the adoption to work, but did not think it would be perfect.

Personality. Parents and adoptees talked about personality as being a key to successful adoption. Adoptees thought having a positive attitude was important, while parents talked about flexibility and having a sense of humor as being key. Both thought that working together made the biggest difference. Adoptees also said it was important for the parents and teens to be compatible. It made things much easier when those involved had common interests and got along well.

Support. Both parents and adoptees talked about the need for support. Both groups seemed to be saying, do not go it alone. Parents talked about getting support from a variety of people including professionals, family, and friends. Adoptees just talked about needing the support of their adoptive parents. A few parents talked about getting their ultimate support from God. Things just seemed to work out. Regardless of the source, it is clear that having someone to talk to or someone who would listen and give advice during the difficult times is important.

A review of the literature on disruption is instructive in determining what parents need during the difficult times (see Related Research at the end of this section). It is apparent that getting help at critical periods is key. This means that parents have to ask for the help in a timely fashion, and when services are needed, the agency must respond to the families' needs in a timely manner. Most of the parents in this study got the help they needed when they needed it.

It is clear that older children with multiple problems present more difficulties in adoption. This research study shows that a committed family with a good support system can successfully adopt an adolescent who wants to be adopted.

RECOMMENDATION 12: Agencies need to provide ongoing support for parents and teens and to make sure that families are aware of these services and how to access them. Parents must seek this support in a timely fashion, and the agencies must provide it in a timely manner. Adopting an adolescent can be stressful and a strong network of support from a variety of people including professionals, family, and friends can reduce the strain. Regardless of the source, it is clear that having assistance and support during the difficult times is a key to success.

Related Research

A review of the literature related to what makes adoption successful revealed several studies focusing on characteristics of parents and adoptees associated with placement adjustment. In one study, McDonald, Propp, and Murphy (2001) surveyed 159 parents 18 to 24 months after adoption. The age at placement ranged from 1.7 to 12.8 years with an average age of 7.7 years. Their overall findings were very positive. Two child characteristics were significantly correlated with placement adjustment: the number of special needs the child has and the age of the child at the time of placement. Having more special needs meant poorer adjustment, and older children had more difficult adjustments than younger children. One parent characteristic, marital status, was correlated with placement adjustment. Placement adjustment was also found to be related to three family characteristics: age of the youngest child in the home, the age of the oldest child in the home, and the community size. Families with younger children had more positive adjustment as did families living in large, densely populated communities. A regression analysis of child, parent, and family characteristics revealed that the number of special needs of the child was a significant predictor of adjustment. Other characteristics found to be predictors of adoption adjustment in the regression analysis included: marital status (married couples had more positive adjustment), total number of children in the family (more children meant less positive adjustment) number of adopted children (more adopted children led to more positive adjustment), and family income (higher income led to less positive adjustment) (McDonald et al., 2001).

With a greater variety of families in the adoption pool, a larger number of children to place, and more special needs adoptions, several researchers focused on the increasing rate of disruptions (adoption abandoned between placement and finalization) and dissolutions (adoption

dissolved after legal finalization) (Barth, Berry, Yoshikami, Goodfield, & Carson, 1988). Estimates of the rate of disruptions and dissolutions vary considerably. In a review of the literature on special needs disruptions, Westhues and Cohen (1990) found the lowest rates to be around 8% and the highest to be around 47%, with most of the studies describing disruption rates between 10 and 15%. Many studies show that as the child's age increases so does the probability of disruption (Berry & Barth, 1990).

Both parent and child characteristics appear to play a role in disruption (McDonald, et al., 2001). Several researchers reviewed the literature and found a variety of parent and child risk factors associated with special needs adoption. Brodzinsky and Pinderhughes (2002) found older age of child at adoptive placement and the presence of severe problems such as attempted suicide, stealing, sexual acting out, fire setting, and aggressiveness as the most frequent correlates of adoption disruption. They also found factors such as a history of physical and particularly sexual abuse prior to adoption and large numbers of foster care placements put older children more at risk for disruption (Brodzinsky & Pinderhughes, 2002). In their review of the literature, McDonald et al. (2001) found that parents who lacked experience in parenting, had strong religious beliefs, or negative attitudes about children or the adoption process were associated with a higher disruption rate. Westhues and Cohen (1990) analyzed the differences in functioning between families able to sustain special-needs placements and families in which they disrupted. Their findings suggest that a family that adopts a special-needs child appears to require the active participation of the husband/father as well as the wife/mother. A nurturing husband/father can have a great impact upon what happens in the marital relationship as well as with the children.

Based on her own experiences, Katz (1986) is convinced that parental characteristics are more important to adoption success than child characteristics. She identified nine qualities that stand out in parents who maintain the placement of adopted special needs children despite all of the difficulties (Katz, 1986).

1. "A tolerance for one's own ambivalence and/or strong negative feelings" (Katz, 1986, p. 574). These parents accept the inevitability of negative feelings toward the child given the child's problems. They often use humor to express and defuse their feelings.
2. "A refusal to be rejected by the child and an ability to successfully delay gratification of parental needs" (Katz, 1986, p. 574). These parents continue to love the child despite the child's constant rejection. They are able to postpone the rewards of parenting for a very long time.
3. "The ability to find happiness in small increments of improvement" (Katz, 1986, p. 575). These parents have realistic expectations and find success in small daily tasks.
4. "Parental role flexibility" (Katz, 1986, p. 575). These parents work as partners taking over for each other when one parent needs relief. Each partner assumes the caretaker role as needed.
5. "Systems view of their family" (Katz, 1986, p. 576). These parents look at their total system to find answers. This offers a richer base for problem solving after placement rather than looking for one person to label as the problem.
6. "Firm entitlement" (Katz, 1986, p. 576). These parents take full ownership of the child in a short time and incorporate their history and differences comfortably.
7. "Intrusive and controlling qualities. The parents of older children are both intrusive and caring in a caring way" (Katz, 1986, p. 576). Effective families assume control, try to

anticipate behaviors, interrupt behavior spirals early, and provide a great deal of praise, positive reinforcement, and physical affection. They are not deterred by the child's protests or withdrawal.

8. "Humor and self-care" (Katz, 1986, p. 577). These parents are not martyrs and take regular evenings and occasional weekends away from the child. This time away is viewed as necessary to keeping the parents strong and healthy enough to raise the child.
9. "Open versus closed family system" (Katz, 1986, p. 577). These parents will seek and accept help. The fact that they will honestly share their feelings is the key to finding help.

BEST AND WORST ASPECTS OF ADOPTION

To further clarify the concept of a successful adolescent adoption, parents and adoptees were asked to describe the best and worst aspects of their adoptions. Although a few had trouble coming up with the worst aspects, most readily identified the best and worst parts of their adoption experience. Some admitted they were surprised—both positively and negatively—by their experience and their reactions to it. Overall, both parents and adoptees were very pleased with their overall adoption experience.

Best Aspects

Most of the parents described more than one positive aspect of adoption. Four themes emerged from their responses.

- *Family Expansion.* Almost half of the parents (48%) felt the most positive aspect was just having a child or an additional child in their family. It made their families more complete. As one parent said, “The most positive was having him in our family. I feel as though every person that becomes a part of your life adds his or her own special thing to it.” Many parents were overjoyed to have children. One parent’s response was typical of the joy these parents experienced. “For me, I got to be a mom, and I have incredibly wonderful relationships with all of my kids that I just wouldn’t trade for the world.” Another said, “I like being a parent, even on the bad days.” Still another said, “The most positive was just having them here. They are a tremendous blessing in our lives. They are like a ray of sunshine. I can’t imagine my life without them.”
- *General Improvement.* Forty percent of the parents said, in various ways, that their lives had improved or that they felt better about life as a result of the adoption. Some thought they grew personally. As one parent said, “The most positive was the amount of personal growth that we experienced when we successfully dealt with all that strain and tension.” Another said, “We have shown each other and ourselves that we are much stronger than we ever thought we could possibly be.” Others talked about having fun and feeling younger because of their teen. One father said, “She is wonderfully entertaining and, in some ways, more so than our boys were.” Another parent said, “It has been exciting and made us feel young again.” Still another parent explained, “You can get in a rut when you are my age but she will not allow me to be in a rut.” Some of the parents talked about how wonderful it was not to have an agency involved. One foster parent said, “CPS [Child Protective Services] is very controlling and there are a lot of things that foster kids are not allowed to do that your own kids can do. We don’t like having two sets of rules.”
- *Satisfaction and Pride.* Many parents (21%) expressed satisfaction and pride in what their adopted children have been able to accomplish. One father commented, “I have the neatest kid in the whole world. I can’t imagine having a birth child that would make me feel more satisfied or have more pride in or being connected to than my son.” Another parent had similar feelings and said, “The most positive is having a child and being able to love her and nurture her and also watching her grow and seeing that what I have contributed to her has made a difference in her life.”
- *Relationships Improvement.* A few of the parents (9%) talked about having relationships with friends, family members, or spouses improved by the adoption. One wife said of her husband, “I think it has brought us at times closer together.” Another parent talked about the impact on his birth son. “I think it has helped my son be less selfish and more considerate of

his own personal wants.” Some parents talked about it bringing the whole family together. One of these parents said, “It has made our family a lot closer. That closeness is really valued by everybody.”

Adoptees were also very positive about the adoption experience. Two general themes emerged from their responses.

- *Forever Family.* Two-thirds of the adoptees said, in various ways, that having a family—people who will always love you—is the most positive aspect of the adoption. One adoptee was typical of the others in saying, “The best parts are having a permanent home and having a nice family and people that care everywhere.” Others talked about having an extended family too. “It is not just my mom. She has seven brothers and sisters, and I love everyone of them.” The stability of the family was also an important aspect of the adoption. One teen said the best part of adoption was, “finally having a family that I knew I was going to be with for the rest of my life and not for ten years here and another two years there with another person.”
- *General Life Improvement.* One-third of the adoptees said their lives are just better as a result of the adoption. Some talked about feeling free. As one young man exclaimed adoption meant having the, “freedom to grow up and not feeling like you’re in a prison.” Others talked about having a pet for the first time, feeling financially safe, and just getting extra attention. One young woman said, “The best part for me was finally having Christmas.” Another teen was more global, “Everything is good about it.”

Worst Aspects

While they spoke passionately about the positive aspects of adoption, most parents were also able to identify a negative aspect or a worst part of the adoption experience. Only a few parents (17%) could not think of anything negative about the adoption.

- *Stress and Tension.* Almost half of the adoptive parents (44%) talked about the stress, tension, and emotional drain that they felt as a result of their adolescent’s difficult behaviors and adjustment issues as being the most negative aspects of the adoption experience. One mother said, “It was a lot of work, especially for a single mother. It was not bad, but it could be exhausting.” Another talked about traumatic behaviors saying, “She attempted suicide a few times, and that was really hard.” For some, these behaviors continue into adulthood and are still causing the parents stress. One of these mothers said, “A lot of the behaviors and the issues that he had when he first came to the house, he still has and that has caused great stress and difficulties for him and for us.” Another talked about the physical toll of all the stress. “The stress level on your body when you do something like this is compounded more than you can imagine and it has had a physical impact on me. I just didn’t handle it as well physically as I should have.”
- *Relationship Issues.* Over one-fourth of the parents (26%) said the adoption had taken a toll on some of their relationships. For some parents, adoption caused problems within the marriage. One parent explained, “The upheaval between my husband and myself over issues about him [adoptee] was very bad.” Others had problems with their extended families. One mother’s comments are representative of the extreme break in a few of the families. “His family turned against us even to the point that when his father died, they didn’t even acknowledge our children in the obituary.” Some had problems with friends. “I have lost a couple of friends and I wouldn’t have expected that.” Some had problems with their children

already in the home. One mother said, “Some of my kids are not that favorable about large families or adoption.” Another said, “She [biological daughter] felt slighted because she had to share a room.”

- *Personal Freedom Issues.* Nine percent of the parents reported experiencing a loss of personal freedom as a result of the adoption. While they described this as a negative aspect of the adoption, none seemed overly concerned about it. They recognized that most parents probably have thought of escape and freedom during the difficult times. Some of the parents are parenting their second set of children and realize they could experience a lot more freedom had they not chosen to adopt at this time in their lives. One of these fathers said, “It is very hard when they are acting out to realize that our biological child is now almost 26 years old, and we could have been on easy street a long time ago, and here we are dedicated to these kids.” Other parents talked about their inability to travel as frequently as they would have liked. “I am retired now, and it ties us down,” responded the parent.
- *Adoption Process Problems.* Seven percent talked about difficulties surrounding the adoption process as being a negative aspect of the adoption experience. One parent spoke for others in saying, “I hate that we had to go through all that turmoil to get them.” Another parent talked about the difficulty in getting the children freed for adoption. “Their mother was into drugs and substance abuse, and the ride we had up and down with the courts was very frustrating. We had to take vacation days from work. We made numerous trips to court which was ninety minutes away” she explained.
- *Financial Problems.* A few parents (6%) experienced financial problems as a result of the added expenses incurred in adopting an older child. Parents who worked outside of the home missed many days of work responding to their adolescent’s numerous crises. One mother talked about financial strains as something she did not expect. She said, “I expected to have another mouth to feed, but I didn’t expect the interference on the work as much. I am working to remedy that as she becomes more stable.” Another parent said, “We want her to have a lot of things, and definitely, she is an expensive hobby.”

Although just over one-fourth (27%) of the adoptees reported that there were no worst aspects of the adoption and another 8% did not respond to the question, the remaining 65% of adoptees were able to share at least one negative aspect of the adoption experience. Their responses centered around two major themes.

- *Birth Families Issues.* Almost one-third of the adoptees (32%) talked about dealing with their pasts, especially the loss of their birth families, as being a negative aspect of adoption. Although many of the adolescents still interact with some members of their birth families, there is still some sadness about not being able to live with them. One adoptee spoke for many in saying, “The only bad part is leaving your biological family, but I am fine with it now.” Another said, “The worst part was letting go of people from my past.” A related issue for many of the teens was not having pictures or someone to tell them about their early histories. One adoptee explained, “You don’t get to see what you looked like when you were a baby.” Others were upset that they could not live with their siblings. “The worst part is not having all my brothers and sisters living together,” said one teen.
- *Adjustment Issues.* Another third (32%) of the adoptees thought the worst aspect of adoption was adjusting to a new family, school, and community. Of these, fitting into a new family was the biggest concern. Several mentioned all of the rules they had to follow. One adoptee explained, “When you come from an orphanage into a family, they give you a bunch of

rules.” Another said, “The worst part is having a curfew when I’m not in church.” (His church activities are exempt from the curfew.) Adoptees also reported having more consequences for not following the rules. One said, “I get on punishment, like I can’t get on the phone, can’t go outside, no TV, and no radio.” A few reported not getting along well with one or both of their new parents. One of these adoptees said, “The worst part is the fights that me and my mom get into. But my Dad and me always do some stuff. I’m always helping him out.” A few adoptees reported having problems with the change in their environments. One teen explained, “I had a lot of high expectations for my grades like I had at my other school. I was cocky because I was smarter than everyone else for the most part. But over here, I’m just average.” Another adoptee reported that she used to escape when things got hard. Now she has to stick it out. “Sometimes life is hard, and I was used to being able to move to a different place and live with different people. Sometimes, I just wish that I could leave right now.”

What Did We Learn?

There was some convergence of opinion between parents and adoptees as to the best and worst aspects of adoption. Both groups talked about the joy of having a family and being loved. Having a new extended family was an unanticipated bonus for a few of the adoptees. Some experienced grandparents for the first time. Both parents and adoptees also talked about life being better. There were some similarities and differences as to why life was better. A few of the parents and adoptees talked about being freed from government rules and having a more normal life. Parents, talked about growing personally, being entertained by their children, and doing new and different things with them. Adoptees focused more on being allowed to have pets and experiencing better holidays. Although there were differences, both parents and adoptees seemed to be saying life was better because of the family they had now and the fun things they do with their families. Parents talked about their satisfaction with their families and their pride in their accomplishments.

Most of the parents and adoptees identified some negative aspects of the adoption. The adoptees talked about change and having to fit into a new family and community. They were also sad about having to leave their birth families and their pasts behind as they embarked on their new lives. Parents had different negatives to talk about, including some they expected like the stress and strain and loss of personal freedom, and others that were more surprising to them, such as how difficult the adoption process itself was. Some parents also talked about dealing with changes in relationships that were, for the most part, unexpected. A few lost friends, some became estranged from parts of their family, and some had marital problems that they had not experienced before. Despite the negatives, both parents and adoptees seemed genuinely happy about their adoptions. They were pleased that they had decided to adopt or to be adopted.

THE MOST MEANINGFUL ASPECTS OF ADOPTION

Parents in this study were asked to share the most meaningful aspect of their adoption experience. All of the parents were quite eloquent in their responses. While most were able to identify the single most meaningful aspect, some thought of several and described them all. Four themes emerged from the parents' responses.

Seeing the Accomplishments of All Involved

Almost one-third of the parents (31%) talked about having pride in the adolescent they adopted, feeling a sense of accomplishment at what he or she has done or become, and feeling good about their own contributions to their child's life. One mother explained, "I felt good about taking a child out of the system. I feel good about what I am able to give her and what I get in return." Another parent said, "Just seeing the changes in her since the adoption has been wonderful." Other parents, especially those who adopted an older adolescent, viewed their child's accomplishments and their own contributions in a more practical light. For example, one mother who adopted a teen with a history of frequent disruptions was proud that her daughter did not leave her home until she turned 18. For this mother, the most meaningful aspect of adoption was, "knowing that for at least two years out of her life, she was safe and cared for."

Giving the Adolescent More Opportunities

Other parents (19%) were pleased to give the adolescent an opportunity to be all he or she could be. One father expressed a sentiment shared by others when he said, "Here was a kid who had basically been thrown away and given up on... that had been condemned to never being able to do anything positive in life. They had him compartmentalized into a violent child that would never be able to attach or be able to appreciate. I still shudder to think what would have happened to him if I, or someone else, had not found him. I guess just knowing that he had the opportunity to do what he is capable of has been the most meaningful aspect." Another parent commented on the differences between her daughter's life as a foster child and as an adopted child. She said, "It is nice to see her change and take advantage of opportunities—many things that were normal but seemed like extravagances in foster care."

Helping the Adolescent Understand Family Life

Another third (31%) of the parents said the most meaningful aspect of the adoption was helping their child gain an understanding of what it is like to be part of a family and feel loved and providing a place for him or her to call home. Many of these adolescents did not understand what having a functional, loving family meant. They had no concept of a positive family life. Helping them to understand this concept was very important to parents in this study. One mother explained, "Now she knows how it is to have parents love you." Another said, "You can look in their eyes and see the trust there. You know that it is something good and it is going to continue on. And when the kids take a step and it is in the right direction, you know you have worked so hard." Yet another parent said, "I feel like I've done something really good in my life that can never be undone. I've given a home to a child who needed a home."

Being a Parent

About one-fourth (24%) of the parents thought the most meaningful aspect of adoption was becoming a parent. Many of them talked about the special feeling they get from being

called mom or dad. As one mother explained, the most meaningful part of adopting was, “when Mom becomes more than the word mom.” Another said, “When he called me dad while we were having an argument, that was very meaningful.” Others expressed their delight in being a parent. One mother was effusive, “I have three beautiful children. They are delightful.” Another enthused, “My life is much richer. I have gotten back so much, I feel selfish. I would never have known about Pokeman, NASCAR, etc.” Yet another proclaimed, “I love being a parent. It was absolutely fabulous. I wanted to be a mother, and she fulfilled that.” Some talked about the joy of parenting—even the hard parts. One parent spoke for many in saying, “There have been hard times and sacrifices, but I don’t see them as sacrifices—more as choices. I’d rather be helping him than whatever it is I used to do.”

What Did We Learn?

Parents in this study were, overall, very pleased with themselves for sticking with the adoption and were pleased with their children for what they had become. As already described, parents make the decision to adopt for a variety of reasons, and those reasons are reflected in what they found to be most meaningful. Those who wanted to be a parent had that wish fulfilled and they appear to be thrilled with their experience. Those who wanted to help a child are able to see the fruits of their labor in the person their child has become. Those who wanted to provide a permanent home for a child can look back and see that this child now understands what having a family is about. These parents are justifiably proud of their children and feel the struggles to raise them have been or are being rewarded by the life they are now able to lead.

WOULD YOU ADOPT OR CHOOSE TO BE ADOPTED AGAIN?

Nearly all of the parents and adoptees in this study said, without hesitation, that they would adopt or agree to be adopted again. Adoption clearly changed their lives, and, for most it was for the better.

Parent Perspective

Parents in this study were asked, “If you had to do it over again, would you adopt a child? A teenager? What would you do differently?” Overall, the responses to these questions were more practical than emotional. Parents weighed the rewards and sacrifices and clearly stated the rationale for their positions. Several parents had already adopted another teen; a few others had plans to do so in the near future.

Yes, I Would Adopt Again!

Ninety-two percent of the parents (45) indicated they would consider adopting again. Some clarified their positive answers by saying they would have adopted the same child over again, but not at their present age. They were too old now. One mother explained, “I don’t think I’ll do it again, but if I were younger, I would do it again. I thought it was a positive experience.”

Two-thirds (30) of the parents who said they would adopt again also said that they would do nothing differently if they were to do it over. A few mentioned that they were initially concerned about adopting a teenager, but after having experienced it, they would do it again. One parent’s comments are representative of this group. “I would absolutely do it all over again with a child the same age or even an older child. I am not so scared now of older kids.” A few others set out to adopt an older child, and their adoption experience reinforced this decision. As one parent said, “We would definitely adopt teenagers because we don’t want to start over with little children.” One mother said she would adopt another teen because she knows “that there are so many children that are stuck in the system and don’t have an opportunity to get out until they are teenagers.” But this same mother also wondered if she could make more of a difference in a child’s life if he or she were younger at the time of adoption. On the other hand, one couple who initially thought adopting a younger child would be better, changed their minds on the issue after adopting a teen. The father explained, “I think that we were dreaming that we could have more of an influence or that we would make a better attachment with a younger child. I am not so sure that is true now.”

The remaining one-third of parents who said they would consider adopting again, indicated that they would make some changes the next time around. Most talked about changes in terms of getting more support, being better prepared, or gathering more information about the child. The following comments are typical: “I think I would have had psychological support lined up for my husband and me.” “Definitely, I would get more tools before I did it again.” “Maybe I would want more upfront information, and know what questions to ask that I didn’t know at the time or Social Services didn’t think was pertinent.” Other parents wanted to change the age or gender of the child. A mother who had fostered and adopted many teens commented, “I have had my share of them [teenagers].” Another said, “I would adopt a teenage boy but not a teenage girl.”

No, I Would Not Adopt Again!

Eight percent of the families (4) said they would not adopt again—each for different reasons. All four had been foster parents and all adopted a teen they had been fostering. Three of the adoptive families consisted of single mothers and one was a married couple.

One mother felt she was too old to adopt children. She began taking foster children after her husband died and was in her seventies when she adopted two teenage boys. She said, “No, if I was 40 years younger, yes, I would. But not at this age, I didn’t *need* to do it then.” This “no” is not unlike the “yes, but I’m too old now” response described by parents who said they would adopt again. However, this mother, unlike the others, said she was too old when she adopted the first time. This mother also described having some problems with her oldest adopted son. She said, “He boomeranged on me. He got nasty and arrogant. If it wasn’t for the Lord, I think I would have laid him out in here.” When asked if she would advise others to adopt, she said, “No, don’t do it!”

Two of the mothers who said they would not adopt again talked about false allegations made by foster or adoptive children. One of these mothers was particularly bitter about the allegations. She explained, “But they [the teens] come into your home, and if you don’t agree with something or if you don’t let them do something, then they go and create a problem. I don’t think it’s fair that foster parents that are opening up their homes and their hearts have to be subjected to losing their license—being labeled as abusive or molesters—all because of those allegations.” The risk of false allegations did not turn this mother off adoption totally, however. At the time of the interview, she was adopting two young foster children that she has had since they were babies. The other mother also talked about false allegations made by her foster children. It is not clear whether she was the target or if they were made against someone else. Her comment on the subject was, “When the child makes a complaint against you, they have to investigate, even if it’s false. For that reason, I would not adopt or be a foster parent because I don’t want to go to jail for nothing.” This mother also talked about being worn out by parenting. “Even though you enjoy giving, I find by 8:00, I’m just worn out.”

The fourth parent who said she would not adopt again in the future was married, had adopted several children (including a teen), and had cared for numerous foster children. She gave two reasons for not wanting to adopt again, especially another teen. First, she said, “It would really hurt the children to be adopted as far as services provided by the state.” In her home state, foster children who age out of the system have their college tuition paid for and are set up in an apartment. They do not receive these same benefits if they are adopted. This mother’s second reason for not advocating teen adoption was that, in her opinion, teenagers are in a transition period on their way to independence and consequently, they do not want to be adopted.

Adoptee Perspective

Adoptees in this study were asked, “Knowing what you know now, would you choose to be adopted again? Why or why not?” Most of the teens were pleased with their adoptions, and would do it again. Even the two who said they did not want to be adopted again were happy with their families and the placements. It was other aspects of the adoption process that they did not like.

Yes, I Would Choose To Be Adopted Again!

Ninety-five percent (35) of the adoptees interviewed said they would do it again. One teen spoke for many in saying, "I would definitely choose to be adopted again. I know that it can be the best thing in the world." Others had similar sentiments such as, "It is better to have a true home—one place to stay"; "Yes I would, and there is nothing that would change my mind"; and "I think if I had known what I know now, I would have started working on it sooner." Others were committed to the adoption but were not pleased with the long process. One adoptee explained, "I would want to be adopted by the same family, but I wouldn't want to go through the long process."

No, I Would Not Choose To Be Adopted Again!

Two of the teens, part of a sibling group, independently said that they would not want to be adopted again. They had different reasons for feeling this way. The first talked about the length of the process. He said, "No, because it's a long process and a lot of paperwork. They were bombing you almost every month with different paperwork, asking thousands of questions." It seems that he was responding more to the thought of having to go through it all again rather than the outcome of the adoption. Other than this response, he seemed happy with the adoption, however, he never specifically said that he would be willing to do again.

The other sibling was more concerned about being separated from her biological mother. She said, "I would not like to be adopted again for the simple fact I would like to have a chance to be with my real mother." She was taken from the home at a young age and did not really understand what happened. She wanted to "get to know her and the person she is and why we were taken from her." Although she had good things to say about the adoption in response to the other questions, she went on to say, "If my mama was not available, I would still rather be in foster homes because it just seems like being in foster care is more satisfying. Even though you're switching from home to home, you get to meet new people." Then she added, "But at the same time, I want to be with my family." This young woman was adopted with most of her siblings. Although she reports that she would not do it again, she appears to be happy in her current placement, in large part, because she is with her siblings.

What Did We Learn?

It is clear that most of the parents and adoptees in this study were pleased with their decision to adopt or to be adopted. Although not an easy experience, they believed that it has changed their lives for the better. Some parents thought they were too old to adopt again now, but most said they would repeat the adoption, if they were younger.

It is difficult to draw a clear message from the four parents who said they would not want to adopt again. The age of the parent at the time of the adoption does seem to make a difference in the energy level that he or she had for parenting. However, there does not appear to be a magic age when someone is too old to adopt. More preparation prior to the adoption may have helped some of these parents cope with allegations of abuse.

The adolescents who would not have wanted to be adopted again were clearly frustrated with the adoption process. A faster and more efficient adoption process would have reduced stress levels for many teens in this study. Improved communication with the adolescents about the adoption process and more attention to their need to resolve birth family issues would have helped many of the teens in this study.

ADVICE FOR THOSE CONSIDERING ADOPTION

Almost half (47%) of the children available for adoption in the United States are between the ages of 11 and 18 (DHHS, 2003). When compared to all American youth, those who age out of foster care are less likely to complete high school, have higher rates of unemployment, more often receive public assistance, frequently do not have health insurance coverage, are more likely to become incarcerated, and regularly report having or fathering a child at an early age (Avery and Freundlich, 2003). Adoption offers these youth an alternative to aging out of foster care. However, research also indicates that older child adoptions are more likely than younger child adoptions to disrupt, and the older children are more likely to face difficulties in adjustment (Berry & Barth, 1990; Brodzinsky & Pinderhughes, 2002; McDonald, Propp, & Murphy, 2001). Given the enormous improvement in outcomes of adoption over the poor outcomes predicted for those who age out of foster care, the pursuit of adoption appears to be worthwhile, despite the difficulties.

This study was conducted to determine elements of successful adoptions so that they could be shared with others and replicated. As a part of this study, parents and adoptees were asked to give advice to those considering teen adoption. Both groups readily shared their wisdom and experience.

Advice From Parents to Parents

All of the parents interviewed for this study had at least one piece of advice to share with friends considering teen adoption. Their responses have been analyzed and summarized into ten categories listed below.

1. *Go Ahead and Adopt.* Thirty-three percent of the parents encouraged others to go ahead and adopt a teen. As one parent said, "I'd say, good for you! I hope you enjoy this adventure in life." Another urged, "Go ahead! They need homes too, and what people don't realize is teens, sometimes more than younger kids, really need that permanence in their lives." Some added a little extra advice along with the encouragement. One mother said, "I would tell her to go for it, but be sure you have love in you heart for her because children will not always be good." Another mother recommended, "I would say go for it, but go into it with your eyes wide open, and get information, get information, get information!" Yet another mother said it depends on which friend wanted to adopt. "I would tell most of my friends they should do it. I would tell them to put their own ego on the back shelf for a very long time."
2. *Be Realistic!* Another thirty-three percent of the parents cautioned that because a teen has already been shaped as a person, adoptive parents need to have realistic expectations of how much he or she will change. As one father explained, "With teenagers, it is kind of what you see is what you get, and you can make a good assessment as to whether that child is a good fit or not." Another parent said, "It is kind of a whole different experience finishing raising a child who was initially raised by someone else. A lot of the shaping has already taken place." Still another parent advised, "Just let the kids progress as they can. They need so much of your time." Some parents talked about learning from the teen. "I would tell them, let your new adult child teach you as much as you want to teach the kid." Another parent commented, "You can't go into it full force and think that you are going to be the master. Teenagers balk. They don't like to be told what to do." One parent warned that teens who have been in foster care for years often do not behave like normal teenagers.

- “They want the freedoms and the privileges of a teenager, but they don’t have the judgment and insight that a normal teen has.”
3. *Learn About the Child.* Just over one-quarter of the parents (29%) suggested gathering as much information about the teen as possible before agreeing to the adoption. As one parent said, “It’s best to find out the background, which they don’t want to give you... I think it’s right to let people know what they’re getting into. Then it is up to them if they want to go ahead and get into it.” Another parent advised, “Do a lot of research before you do it. They all come with baggage that you didn’t cause, but you’re going to have to deal with it. If you can’t put them first in your life, then don’t do it.” Another parent explained that it is not just the paper history that prospective adoptees need to learn about. “I would tell them to be very sure and to get to know the child very, very well. Please spend a lot of time with them,” this parent said. As another parent put it, “Their evil twin is going to come out sooner or later.” This mother also encouraged parents to spend time with the teen before the adoption.
 4. *Get Advice from Others.* Just under one-quarter of the parents (22%) suggested getting advice from other parents who have adopted teens. As someone who had already experienced teen adoption, one parent described what she would tell her friend. “I would always be encouraging but, I am a realist, and I would talk about the negative and balance it with the positive,” she said. Another parent said, “I would advise them to get into a support group or at least hook up with a mentoring adoptive family.” One of the veteran parents observed, “One of the things that happens when a person wants to adopt is that they hear all of these horror stories, but they think they are different and that they are capable. Then when it happens to them, they wish they had listened!”
 5. *Be Prepared.* Twenty percent of the parents said you can never be too prepared. One mother advised, “I would tell him or her to get as much education as you can. I would refer him or her to various resources.” Another parent stated, “Definitely, I would get more tools before the adoption in terms of how to deal with certain behaviors. You are going to be dealing with those problems. They will be erupting.” One parent summed it up by saying, “The more you are educated or prepared, the better off you will be.”
 6. *Stay Committed.* Sixteen percent of the parents said commitment is important in maintaining the adoption. As one parent observed, “It takes a lot more than love. If you are not committed in your mind, then it won’t work.” Parents also cautioned prospective adoptive parents to be committed over the long haul. “I wouldn’t want anyone to get into it without being sure that they could hang in there for the long haul because I think it is detrimental for the kids if you are not in it for the long haul.” Many of these parents talked about the need for the child to come first. One parent spoke for others in saying, “If you can’t put them first in your life, then don’t do it.”
 7. *Get Ongoing Support.* Another 16% of the parents talked about the need for ongoing support. Most talked about the need for counseling. “I would definitely tell him or her to go to counseling and go together with the child,” recommended one parent. Others talked about having people you can turn to who will not be judgmental. “Support groups are helpful,” stated one parent. Many talked about needing an entire team of supporters. One father said, “If you are a single parent, it would take a good team of support.”
 8. *Consider All Possible Impacts.* Fifteen percent of the parents recommended that prospective adoptive parents consider how the adoption will impact all aspects of their lives and know why they want to do it. Some talked about the impact the adoptees will have on

other children in the family. One mother said, “I would probably talk to them about the impact on the children that they already have and see if they were aware of that, because there really is an impact.” Others talked about the impact on the marital relationship. “Make sure your relationship is solid if you are married,” urged one parent. “If you are doing it to keep your relationship together, forget it. You will be separated within a month.” Others simply said, “Be sure you are ready to parent.”

9. *Know That Adopting Teens Is Not Easy.* Thirteen percent of the parents cautioned that adopting a teen is not easy, but it can be very rewarding. “It is a gratifying experience, but it is not without its drawbacks,” commented one parent. Another parent said, “It won’t necessarily be easy, but you are still going to get a great kid.” After listing some of the problems he has had, one father added, “There is so much to be gained out of it, also.”
10. *Have a Sense of Humor and Be Flexible.* Another thirteen percent of the parents talked about how important flexibility and humor are to maintaining sanity. “I would tell them to have a sense of humor and to try to remember what it was like when they were teenagers,” said one parent. Another said, “You have to know it is not about you. It’s about what is best for them. Have a sense of humor, and be flexible.” One father explained, “You have to be so much more flexible with them. They are semi-adults, and they are less willing to accept authority. They are trying to establish their own identities and independence.” It also helps if your employer is flexible. One parent said of her employer, “They were very flexible because I had been a very dedicated employee and I had always gone above and beyond for them.”

Advice From Adoptees to Adoptees

The adoptees were asked what advice they would give to other teenagers considering adoption. Like their parents, they had a lot to say on the subject. Most felt that teens are never too old to be adopted. This advice was analyzed and grouped into four categories.

1. *Agree to Be Adopted.* Many of the adoptees (41%) said that they would advise teens to agree to being adopted. One young man was particularly eloquent in saying, “If you get a chance, it’s the greatest thing in the world. No matter how old you are, you still need love and to give love. You need someone to see on the holidays, and you need grandparents. You need a family and the support they give.” Most of the adoptees felt that adoption was better than being in the system. One person said, “Do it! You don’t want to be a part of the system until you are 18 because you will have no one. It is never too late for a teen to be adopted.” Another said, “Seize the opportunity. You will have a stable family and someone to fall back on. You will have a last name to call your own. You don’t have to worry about where you will be next week or next month.”
2. *Make Sure You Are Comfortable With the Family.* Almost one-quarter of the adoptees (24%) advised teens to make sure they are comfortable—that they “click” with the family before agreeing to be adopted by that family. As one teen said, “Make sure that you are comfortable with the family, and make sure they are comfortable with you. If you and the family are clicking—actually getting along and working together, then I would say to go for the adoption.” Another said, “Make sure that you don’t rush into it when you first get placed in foster care. Take time to learn about the family. It is just like having a girlfriend. You need to get to know the person first before you jump into the relationship.” Yet another adoptee urged, “Take some time to think about it because your life really does change. Mine has been changed in a positive way.”

3. *Do What Is Right for You.* Another group of adoptees (19%) suggested that teens take adequate time to consider the adoption, and to do what is right for them, not what others want them to do. They recommended that adolescents follow their hearts and intuitions. As one teen advised, “Don’t hold back your feelings. If you want to be adopted, don’t hold back because of what peers think. Do what is right for you, and what’s going to help you in life.” In a similar vein, another adoptee said, “My suggestion is to look at all of your possibilities, and do what your heart tells you. Do what feels and looks right to you.” Another urged, “Don’t be pressured if you don’t want to be adopted.”
4. *Work with the Family.* Sixteen percent of the adoptees suggested that teens should try to work with the families who adopted them. One teen recommended, “I would tell them to be good, and don’t give any trouble.” Another teen said, “It can be easy, if you make it easy or it can be difficult if you don’t try.” Yet another teen urged, “Try to be cooperative, and listen to the people that are taking care of you now because they really do know best.” Others suggested that teens open themselves up to love. “I would say to open up and let the people who are going to adopt you, love you. Sometimes it is hard to do.”

What Did We Learn?

Parents and adoptees participating in this study generously offered advice to others considering adolescent adoptions. Although the parents were more prolific with their advice, the adoptees also shared some important information. The advice of both groups can be distilled into four major recommendations.

Get to Know One Another

People considering adoption—both parents and children—should get to know as much about one another as possible before agreeing to the adoption. Adoptees advised teens to make certain they are comfortable with the family before making a commitment. Parents advised prospective adopters to learn as much as possible about the child’s background in order to be better prepared to deal with his or her individual needs.

Make the Right Decision

Although they used some different words, both parents and adoptees urged others thinking about adoption to make the decision that is right for them. Both recommended considering all of the possibilities before agreeing to the adoption. The adoptees said that teens should not let themselves feel pressured, and the parents said that families should consider how the adoption will impact all aspects of their lives.

Work Together

Parents and adoptees suggested that adoption goes more smoothly when both parties work together. Adoptees urged adolescents to be more easygoing and to try to get along with their new families. Parents advised the adolescents to use their sense of humor and be flexible.

Do It!

Ultimately, both parents and adoptees said that adoption is worthwhile and that, despite the difficulties, they would highly recommend it. The parents described it as a great adventure that changes the lives of all involved. The adoptees thought it was a terrific opportunity and was much better than being in the system.

RECOMMENDATIONS FOR FURTHER STUDY

This study helped to confirm some commonly held beliefs about adolescent adoption. It also provided some new insights into certain aspects of adolescent adoption that may help in promoting teen adoptions. In addition, this study taught researchers some lessons about involving adolescents who have been adopted in research studies. It also raised more questions about adolescent adoption that will require further study. Study findings and insights are addressed in other sections of this report. This section will cover the lessons learned about involving teens in research and about the need for future study.

Involving Teens in Research Studies

In conducting future studies, researchers are advised that many teens are emotional about the issues around their adoptions. Some of the teens in this study had put the adoption behind them and did not want to talk about it with anyone. These teens just wanted to have normal lives and not be singled out. This attitude makes it difficult to obtain a representative sample of teens and gather all of the perspectives teens have concerning adoption. In addition, some of the teens complained about paperwork associated with adoptions. This distaste for paperwork may carry over into other areas. Data collection strategies should be designed to minimize intrusion and paperwork. Some Web-based data collection tools may be more appealing to teens who have been adopted.

Some of the teens who did agree to be in the study struggled with a few of the questions. Having others to prompt them may have helped them think through their answers more quickly and clearly. Focus group interviews in addition to individual interviews may have helped participants come to consensus on some of the issues. This would have strengthened the findings. In addition, combination parent and adoptee focus group interviews might have also provided insight on some issues. Researchers should consider these approaches in future studies.

Need for Future Study

It is clear that many questions about adolescent adoptions remain to be answered. Further study is needed in a variety of areas including encouraging teens to consider adoption, caseworker attitudes, policy disincentives, and specific recruitment strategies for teen adoption.

Encouraging Teens in Foster Care to Consider Adoption

Many people say that teens do not want to be adopted. However, adoptees in this study were generally eager to be adopted despite the obstacles they knew they would face and their fears of rejection. The question that needs to be answered is, *are adoptees in this study significantly different from their peers who age out foster care?* Issues related to this question that need to be addressed include the following:

- What is the opinion of adolescents currently in foster care concerning adoption?
- Would they like to be adopted? Would they like to know more about adoption?
- If they would like to be adopted, what is keeping them from being adopted?
- If they are opposed to adoption, what would it take to convince them to be adopted?
- If they had to be convinced, would they have adoption success rates similar to those who did not have to be convinced?
- Would they have more difficult adjustment periods than those who did not have to be convinced?

Caseworker Impact on the Adoption Decision

Caseworkers are critical links in the adoption process. Based on parent and teen responses to questions in this study, researchers discovered that some of the families had wonderful, energetic caseworkers who made a difference in the success of their adoptions. Others talked about caseworkers dragging their feet and discouraging adoption. In this study, caseworkers were described as one of the factors facilitating adoption. Issues related to caseworker attitude that should be addressed in future studies include:

- What is the current attitude of caseworkers concerning teen adoption?
- How much of an impact do these caseworkers have on teens' opinions of adoption?

Disincentives to Adolescent Adoption

In many states legislators, prompted by social service agencies, have become concerned about poor outcomes for teens aging out of foster care. These legislators have, in turn, passed laws establishing programs designed to assist teens in their transition from foster care to the adult world. For example, teens are being set up in apartments, provided stipends, and given expanded medical coverage. Some parents in this study said these special programs for foster children were disincentives to adopting teens. Several parents mentioned that their teens need some of these services (e.g., independent living) even though they have been adopted. Future studies should address the following issues:

- What programs or services have been established in states for those aging out of foster care? Are parts of these programs available to adoptees?
- Are these programs or services acting as a disincentive to adolescent adoptions? If so, what can be done to eliminate the disincentives?
- Are these new services and programs helping youth as they age out of foster care?
- Do adopted adolescents need these services?
- If provided, would they help adoptees make the transition to the adult world more smoothly?

Recruiting for Adolescent Adoption

Based on parent and teen responses to questions in this study, we know that people take different paths to adoption. Some just want to adopt or be adopted, and others must form an attachment in order to adopt or be adopted. As with any continuum of responses, there are in-between paths too. Specific efforts to recruit people to adopt were suggested as part of the recommendations in this report. Other recruitment issues which need further study include:

- Would a recruitment effort focusing on helping teens and adults form attachments help to increase the number of adolescent adoptions?
- Would it increase the success rate of adoptions?
- Would these programs or a variation of them be useful in stretching prospective parents with regard to the age of the child at adoption?

What Did We Learn?

This study of Successful Adolescent Adoptions confirmed commonly held beliefs and provided new insights about adolescent adoption. It also taught researchers a few lessons about designing research studies to accommodate adolescent concerns. Finally, the study raised almost as many questions as it answered about adolescent adoptions. Much remains to be studied in this area.

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