

Adopters' Perspectives of Adoption Support in the UK: An Empirical Study.

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Abstract

Recent Government guidelines promote the expedition of the adoption process to reduce timescales for children waiting to be adopted. However, concerns exist that suggest this will increase pressures on already-insufficient adoption support systems (Holmes, McDermid and Lushey 2013), ultimately impacting adoption placement stability.

The aim of this study was to explore adoptive parents' experiences of adoption support in the UK, as little research exists from their perspective. This was achieved by using thematic analysis to explore the data obtained from questionnaires completed by twenty current adopters. Despite the small sample size, several themes emerged that portrayed an overall dissatisfaction with the quality of support services. Adopters stated that they had encountered problems obtaining support and expressed concerns at the lack of resources, experience, training and attitudes of the professionals involved.

The researcher concluded that future studies would be necessary to explore the findings from a larger sample of adoptive parents to compare their experiences. They also felt that it would be beneficial to reproduce this type of emancipatory research as a matter of course to evaluate and direct adoption support services in the future.

Keywords

Adoption support; adoption disruption; adoption support social worker; adoption legislation; adoption preparation; adopter perspectives.

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Introduction (1500)

In 2016, 4,690 adoptions took place in England and Wales, whilst 2000 children were still waiting to be placed with an adoptive family (DfE 2017). Approximately 5% of looked after children achieve permanence through adoption (DfE 2013a). Permanence is defined in the Children Act 1989 Guidance as 'a sense of security, continuity, commitment and identity ... a secure, stable and loving family to support them through childhood and beyond' (HM Government 2010 p.11).

Adoption is a legal procedure in which a child leaves the care of their birth parent/s and lives with an adoptive family, who then obtain full parental responsibility. Adoption can often provide successful outcomes for looked after children in the care system (Wright 2009). It can offer some of society's most vulnerable children a stable and permanent home and can be a positive alternative to them remaining in foster care until adulthood.

However, not all adoptions are successful and may break down, commonly referred to as *disruption*. For the purpose of this research, disruption is defined as the adopted child leaving the home after being placed with their adoptive family, either before or after the Adoption Order is granted in court.

The impact on adoptive parents who commit to care for a traumatised child, and the level of support that they may require, should not be underestimated (Sugeno 2015). Transitioning to becoming an adoptive parent can be stressful and present many issues, such as attachment, mental health and unrealistic expectations of familial relationships (Moyer and Goldberg 2017).

There is a wealth of information pertaining to the impact of traumatic early-life experiences on looked after children, but what is less known is what happens after they are placed with adoptive families and the support needs that may follow (Stock 2016; National Institute for

Health and Care Excellence (NICE) 2015; Bonin et al 2014). If the support needs of the children and parents remain unmet, a potential outcome can be a relationship breakdown, or even disruption. As Dhimi, Mandel and Sothmann (2007 p. 163) state, 'Post-adoption services are vital in the consideration of adoption and in helping adoptive families cope with the difficulties that may arise'. However, 'Appropriate supports can promote placement stability and also help to improve other child outcomes' (Bonin et al. 2013 p. 1523).

Law and Policy around Adoption Support

The Adoption and Children Act 2002 places a duty on local authorities (LA) to provide adoption support services and was introduced to create greater service consistency and quality. Section 3(1) of the 2002 Act requires 'each local authority to maintain a service designed to meet the needs of all those affected'. However, 'In *law*, adoption replicates the autonomous normative birth family, whilst in *policy* it provides reparative parenting for particularly vulnerable children' (Luckock and Hart 2005 p. 125). In practice, this may create confusion, not only for social workers, but also the adopters requesting support.

The Adoption Agencies Regulations (AAR) 2005 state that adoption agencies must provide information to the prospective adopters about the child's needs and background. The regulations were amended in the Adoption Agencies (Miscellaneous Amendments) Regulations 2013 (AA(MA)R 2013) to specify that the adoption agency must prepare a plan for the adopters to include information about counselling, preparation and training.

In 2012, the Government introduced their new strategy to speed up the adoption process, entitled 'An Action Plan for Adoption: Tackling Delay' (DfE 2012). Yet concerns exist that the adoption support infrastructure is already insufficient and speeding up the process may

only increase the burden on social workers (Holmes, McDermid and Lushey 2013). Reduced timescales may have implications on social work practice, potentially leading to shorter, less-informed assessments of prospective adopters and rushed matching processes.

Since the release of the 2012 strategy, the Department for Education's (DfE) statistical annual review (2017) showed that the time children spend in care before being adopted has reduced by 4 months (22 months in 2013 down to 18 months in 2016). However, the approval process of adopters has slowed down during the same period (50% approved within 6 months of registration in 2013, down to 31% in 2016).

In England and Wales, the DfE produced the Adoption Statutory Guidance 2013 which is the Government's adoption support guidelines that agencies must adhere to. This document imparts certain duties and processes that are to be followed in relation to preparing and supporting prospective adopters. Part of this guidance, which includes the publishing of the Adoption Passport, 'sets out in one place the help and support that is available to [adopters]' (DfE 2013b p. 5).

Other pertinent policies, legislation and guidance that provides the legal framework for adoption support is included in the Adoption Support Services Regulations (ASR) 2005, Statutory Guidance on Adoption (SGA) 2013, and DfE's (2014a) Adoption: National minimum standards 2014, amongst others. The ASR 2005 focuses largely on the needs of adopted children and their families and stipulates provisions for assessment and decisions for support provisions. In 2014, the Adoption Support Services (Amendment) Regulations stipulated that the LA must inform adopters about what support services are available to them and how to access it.

In Scotland, the Adoption Support and Allowances (Scotland) Regulations 2009 provides the legal framework that underpins the provision of support and allowances for those affected by adoption.

The Adoption Process

Since the DfE's 2012 report, prospective adopters now undergo a two-stage recruitment and approval process lasting around six months. This involves an in-depth assessment of the family, preparation course and training around relevant issues. During the process, prospective adopters should be informed of what to expect, not only from adopting a child, but also what support they may require and be entitled to. The process concludes with the applicants attending an adoption panel, consisting of various professionals, before proceeding to the next stage of being matched with a child, subject to panel approval.

From the time a child is placed with the family, the child's LA holds responsibility to provide support for three years, after which time this transfers to the authority where the family resides. Adoption support is often provided by the child's social worker alongside the adoptive parent's social worker. However, other professionals, such as play therapists and psychologists, may also be requested to support the family. Looked after children will usually retain their social worker until the point that the Adoption Order is passed. Adoptive parents can have access to a social worker beyond this point by request, should support needs arise.

Support Needs

The support needs of adoptive parents can be multiple and varied (Rushton 2003). Support may only be required for a short period or it may last until the child reaches adulthood. The specific needs and

characteristics of adopted children is outside the scope of this study, although this will inevitably have an impact on the support needs of the adoptive parents. This research focuses on what the support needs of adopters are, if they are being met and their perspective of the services they have received.

Many adoptive families will experience difficulties due to the nature of caring for children that have suffered trauma of varying degrees. Selwyn, Wijedasa and Meakings (2014) suggest that adoption disruption rates could be lowered with better support. The Adoption Support Fund (ASF) was introduced by the Government in 2013, and was available to all LAs in England from the 1st May 2015. The aim of the fund is to provide financial assistance to adoptive families that require therapeutic support. However, it is unclear how beneficial adoptive families have found the ASF or how accessible the funding is, as it has been suggested that adopters face a postcode lottery in terms of adoption support funding (Thomas 2013).

Rationale

At present, there is little research available for adoption support (Selwyn, Wijedasa and Meakings 2014; Wright 2009), either from a LA viewpoint, or from the perspective of adoptive families. The evidence that does exist suggests that there is a mismatch between the support needs of adopters and the availability of support services (Holmes, McDermid and Lushey 2013; Pennington 2012).

The frequency of adoption disruptions is unclear. The reason for this lack of information may be due to the fact that LAs have no requirement to remain in contact with adoptive families once the Adoption Order has been passed. The DfE (2012 p. 28) note that 'We do not currently have any comprehensive national information about [adopters'] experiences'. Rushton (2003 p.30) also states, 'More needs

to be known about the views of adopters who have experienced a disrupted placement, who do not attend, or quickly drop out from, services provided’.

As Rushton and Dance (2002 p. 114) state, ‘Most authorities do not monitor adopters’ views routinely, although they survey all other carers’. Knowing what adopters as well as foster carers consider to be beneficial in regards to placement stability would be useful information in relation to informing future practice.

Much of the research into adoption-related matters has either been conducted or funded by the DfE, a ministerial department of the Government. Adoptive parents may feel reluctant or unwilling to provide completely truthful experiences of their adoption experience for fear of repercussion or potential impact on their placement. Therefore, future research conducted by an independent body may reduce the risk of inaccurate data.

It is unclear what impact current policy and support services are having on adoptive placements and current research suggests that further studies need to explore and understand adoptive family experiences and establish the effectiveness of support interventions (Stock 2016; NICE 2015). Current research recommends that further studies are needed to explore and understand adoptive family experiences of adoption support (Stock 2016; NICE 2015). It is the intention of the researcher to explore this area further.

Aim

The primary aim of this study is to explore adoption support from the perspective of adoptive parents in the UK.

Objectives

The aim of the study will be underpinned by the following objectives using data obtained from research questionnaires:

1. To explore any strengths of adoption support services
2. To explore any weaknesses of adoption support services
3. To explore which factors can impact on effective adoption support
4. To identify ways in which adoption support services could be improved

Research Question

“Do adoptive parents feel that adoption support services in the UK are adequate?”

Literature Review (2500)

At present, there is little research available that primarily focuses on adoption support (Selwyn, Wijidasa and Meakings 2014; Wright 2009). Over the last 30 years, around 12 studies into adoption outcomes have been conducted (Rushton and Dance 2004) and in recent years only a few studies have sought feedback on the views of adopters (Boswell and Cudmore 2014; Pennington 2012; Neil et al. 2010). Without sufficient and specific research, it is unclear what impact adoption support provisions are having on adoptive placements, whether they are effectively targeting the needs of adoptive parents or meeting their expectations.

This literature review summarises the key themes that have emerged from the studies that are available, with a view to highlight areas requiring further investigation to guide the current research paper. This chapter will focus on previous research into factors affecting adoptive placements, as well as the needs and experiences of adoptive parents accessing adoption support.

The researcher utilised several online referencing systems, namely EBSCOhost, Social Care Online and SAGE Journals Online, to conduct a thorough journal search. Parameters for the journal search included keywords such as 'Adoption Support', 'Adoption Disruption', 'Adoption Agency' and 'Adoption Experience'. Only peer reviewed journals were selected for this review as this helped to ensure research accuracy and methodological validity (Perry 2017), and the publication dates were all within the last 20 years. The researcher drew on material found in libraries as well as conducting internet searches.

Theme 1 - Social work resources, pressures and experience

Rushton and Dance (2002) conducted semi-structured telephone interviews with LA post-adoption support workers. The aims of the study were to explore the current availability and accessibility of support services for adoptive families. They had a 69% response rate with a total of 208 respondents from both LAs and voluntary agencies.

The results showed that some LAs had anxieties around pressures from Government targets to increase the numbers and speed at which children are passed through the adoption system. The respondents felt that this may result in the possibility of inadequate preparation of both children and adopters, 'Such an outcome may of course lead to an increase in the rate of disruption' (p. 75). However, most LAs felt that they managed adoption support at least reasonably well prior to the Adoption Order (90%) but this dropped to 40% after the Order had been granted.

Current Government policy and legislation has highlighted how adoption services can be improved, such as reducing the length of time children have to wait and increasing the support services that adoptive families receive (DfE 2012). However, concerns still exist that these Government guidelines will increase the burden on already stretched adoption support resources (Holmes, McDermid and Lushey 2013). For example, Farmer et al. (2010) found that potential adoptive placements were being jeopardised due to social workers' workload pressures and lack of adoption experience. This is a view supported by Ravalier (2017), who also discovered that social workers are being put under strain due to increasing workload pressures.

Provision of adoption support can be determined by the quality of the social worker's assessment of the family. Holmes, McDermid and Lushey (2013) state that a lack of resources, as well as poor social

worker knowledge into the needs of adopted children, were a major inhibitor for LA provision of adoption support services.

Research conducted by Boswell and Cudmore (2014) also suggests that there is a lack of structure and social worker knowledge around the process of children's transition into adoption. The adopters in their study were often left to make their own decisions on very emotive issues, such as allowing the child to see previous family and/or carers, with little or no guidance from social workers.

This theme is worthy of further exploration from the perspective of adoptive parents, as effective and supportive working relationships are crucial when dealing with traumatised children. The researcher suggests that adopters could be considered best placed to evaluate support service provision as they witness the impact of that support on their daily lives.

Theme 2 – Satisfaction of support provision

Specific research into the experiences that adoptive parents have of adoption support is limited. Neil et al. (2010) focussed on the specific support provisions for adopters facilitating contact with the child's birth family. The authors used qualitative and quantitative methods, combining questionnaires, interviews and focus groups to gather data.

The type of support received by adoptive parents included coordination of contact, administration, and emotional support. Just over half of the adopters were largely satisfied with the support received from the LA to manage contact, whilst just under half had concerns about the services they received. However, as focus groups were used to obtain some of the data, respondents may have given opinions that they deemed acceptable within the group. There may have been a

reluctance to provide truthful feedback for fear of repercussion or judgement by peers and/ or modulators (Denscombe 2010).

Adoption UK (2010) conducted an online survey of adopters' experiences of the recruitment process. Although the study focussed on the stages prior to children being placed with adoptive parents, of the 179 respondents, two-thirds reported that they were satisfied with the support they received. 41% of adopters in a study by Hoffman (2013) reported being satisfied with their adoption preparation course. They found the course content useful in terms of learning about children's behaviour, identity and loss, as well as forcing them to reflect on their attitudes towards parenting. By contrast, 19% of families felt dissatisfied, partly due to there being too much emphasis on negative outcomes of parenting, but also because the course was seen as 'another hoop to jump through' (p. 162).

Farmer et al. (2010) examined the effectiveness of different adoption matching processes by conducting surveys in 10 English LAs and interviewing adoptive parents. 'Post-placement support proved very valuable and there was room for further improvements to ensure that those adoptive parents who particularly needed such support (including financial assistance) received it' (p. 8). Data obtained from the interviews showed that 16% of the adoptive placements had insufficient support. Adoptive parents described adoption support social workers (whose role is to support the adoptive parents) as 'brilliant' or 'very helpful' yet they had a more mixed experience of the children's social workers. Feedback from the adopters cited informal support from friends and fellow adopters, including support groups, as playing an important role in their coping strategy.

In contrast to the findings of Farmer et al., Sturgess and Selwyn (2007) examined the support provided to adopters beyond the first year of adoption using interviews. They found that social services provided the

majority of support initially, but once the Adoption Order had been granted, agencies such as Child and Adolescent Mental Health Services (CAMHS) and health and education services took on a more involved role. They reported that 'Many adopters felt that the services provided had been "too little too late"' and that they failed to provide support that was deemed to be 'sufficient or effective' (Sturgess and Selwyn 2007 p. 13).

Bonin et al. (2013) found that adopters experienced anxiety about how to parent their children and whether they were meeting the child's needs adequately, whilst Rushton, Dance and Quinton (2000) reported that adoptive parents highlighted a lack of adoption support specifically directed at improving parenting skills. Approximately 80% of adopters found their adoption support worker very useful and were left feeling very satisfied, as opposed to less than 50% of respondents rating their child's social worker that highly. Feedback about informal support from family was generally positive, where available. It was identified that if it was unavailable, the placement could put a strain on the adopters.

Holmes, McDermid and Lushey's (2013) study of post adoption support found a lack of universal arrangement to review adoption support plans. There would seem little point in preparing a support plan, as required under the AA(MA)R 2013, if they are not going to be consistently reviewed to ensure their suitability in meeting the needs of the adopters and their children. One adoption manager interviewed as part of their study stated, 'Most [adoptive families] go away quite happily and we never hear from them again' (Holmes, McDermid and Lushey 2013 p. 16). What was unclear from the study was whether this was due to satisfactory outcomes or not.

Previous research has not been able to demonstrate a link between effective support services and placement stability. However, this

potential relationship is worthy of further research and will be a focus of the current study.

Theme 3 – Awareness of, and difficulties obtaining, support

Pennington (2012) conducted an online survey for adoptive parents to comment on their understanding and need of adoption support to gain a more accurate picture of adoption support provision. The 455 respondents represented over 700 children adopted in England. This report highlighted the adoptive parents' lack of understanding or awareness of their entitlement to adoption support services. 62% of parents didn't realise the importance of support prior to adopting and 50% said that they had little or no understanding of their entitlement to support.

Pennington also found that adopters faced difficulties when requesting support services. Only 63% of adopters who requested an assessment for support ever received one and only 31% of respondents received the support services identified in full. For example, 30% of adopters requested short 'respite' breaks yet only 7% received the service.

The findings of Pennington are supported by evidence obtained by Holmes, McDermid and Lushey (2013) who reported a mismatch between the support needs of adopters and the availability of support services. These findings highlight the difficulties that adoptive parents faced when requesting post adoption support. The authors suggested that adopters may feel more able to request support if there was 'better preparation of prospective carers, normalising the need for support, along with continuity of adoption staff and services' (p. 9).

Saunders and Selwyn (2009) note the importance of adoptive families understanding what support is available and how to access it prior to

the children being placed. 'Difficulties in obtaining support can increase the stress felt by adopters and may put the placement in jeopardy' (p. 160). Their results showed that 77% of LA adopters reported that they didn't get the support services that they expected.

For adoption support to be effective, it must be easily accessible and efficiently delivered. However, it is unclear from previous research whether Government guidelines are improving adopter awareness of, and ease of access to, adoption support services. Therefore, a focus of the current study is to explore the point at which adopters are being made aware of the support available to them and what challenges they face when requesting it.

Theme 4 – Multi-agency working and information sharing

Pennington's 2012 survey reported issues around the lack of information provided by agencies regarding support offered, poor multi-agency working relationships, and disparity between the support needed by adopters and actual services offered by local agencies. They also highlighted the variable quality of information on the adopted child provided to the adopters by the LA, a factor that was highlighted as being a contributor to potential disruption.

Randall (2009) also identified the need for improvements in communication between the agencies involved with children and adoptive families as a key priority in their study. They stated that the impact of poor or inaccurate information regarding the child's history can lead to adoptive parents being understandably angry when they 'believe that they have been duped' (p. 53). Barth and Miller (2000) found that adoption agencies had been accused by adoptive parents of providing sparse or inaccurate information of children to improve their chances of being adopted.

Moyer and Goldberg (2017) undertook a qualitative study to examine adopter's unmet expectations of adoption and how support services impact on these. They found that adopters were able to modify their expectations of becoming an adoptive parent during the preparation training. However, when their expectations were not met, and they perceived a lack of support to address this, their stress levels increased.

Rushton and Dance (2004) followed up their original study from 2000 to interview the adoptive families four years later when the children were adolescents. 71% of the placements remained intact, however, 33% of these were still highly problematic. Their recommendations for placement policy included 'more intensive multi-professional support, available as needed over an extended period' (p. 58).

The current study will seek to build on existing research and explore adoptive families' experiences of multi-agency support, the level of information that they were provided about their child/ren prior to placement, and whether they feel this had an impact on placement stability.

Theme 5 –Disruption data

The results of Rushton, Dance and Quinton's (2000) study into permanent placement stability showed that 5% (3 of 61) of placements disrupted by the end of the first year. Placement stability was determined by whether the parents felt that their relationship with the child was developing satisfactorily or not. After one year, 72% or placements were deemed *stable* and 23% (14 of 61) *not stable*. Of the 14 instances where there was an absence of a developing relationship, the parents identified a lack of support, both before and after placement, as an issue.

Rushton and Dance (2004) stated that four out of five adoptions were likely to continue (i.e. not disrupt) in their study of adoption of older children. The authors noted that any further studies would likely result in the same figures, unless the adoption support services were 'much more effective' (p. 49).

Statistics into adoption disruption are sparse (Randall 2009). There are no monitoring processes to keep track of their occurrence, therefore there is no centrally-held data. The current study seeks to explore not only the rate of disruption amongst the respondents but also the experience that adoptive parents have of support services aimed at preventing disruption and those provided following disruption.

Research question

Do adoptive parents in the UK feel that adoption support is adequate?

Methodology (1500)

'Research seeks the development of knowledge derived from empirical evidence' (Lietz and Zayas 2010 p. 188). The researcher chose to conduct primary research for this study due to the relatively limited number of previous studies in this field, and for the opportunity to create new knowledge that has the potential to influence policy and practice in the future.

The aim of this cross-sectional study was to explore adoptive parents' experiences of adoption support in the UK. Therefore, questionnaires (Appendix 1) were used to collect primarily qualitative data with some statistical information about the respondents, meaning that a mixed-method approach was used.

The researcher found that an interpretivist paradigm was a useful approach to implement as the current study deals with the subjective, personal experiences of a relatively small number of respondents. 'Researchers who are using interpretivist paradigm and qualitative methods often seek experiences, understandings and perceptions of individuals for their data to uncover reality rather than rely on numbers of statistics' (Thanh and Thanh 2015 p. 24). In addition to this, Carey (2013 p. 105) states that 'A methodology influenced by interpretivism will emphasize the importance of meaning, identity and personal experience to research participants'.

One of the main criticisms of interpretivism relates to the subjective nature of the approach and how this may impact on researcher bias and the reliability of the data obtained (Dudovskiy 2016). With this in mind, the researcher included direct quotations from the respondents and provided rich data to demonstrate the range of responses, not just the most frequent. With any form of qualitative research, it is important that the researcher acknowledges their own prejudices and bias and the potential impact that this may have on the interpretation of data (Miller and Crabtree 1999).

Literature Review

The purpose of the literature review was to discover what is already known and offer an overview of the research topic. As Carey (2013 p. 27) states, 'It provides the foundation of established knowledge that you can build on, develop and steer in a new direction'. A narrative review was used to identify and select a range of materials in journals, books and internet articles to include in the literature review. Narrative reviews are useful when identifying and summarising published material and seeking gaps in the literature to create new study areas (Ferrari 2015).

Ethics

One of the aims of this research was to conduct emancipatory research into a relatively under-researched group, enabling service users of adoption support to have a *voice*. The researcher has considered reflexivity, their place within the research, through supervision with their University tutor.

The respondents were not asked to provide any identifying information as this was not deemed necessary for the purpose of this study. The nature of questionnaires also enabled participants to take their time when considering and answering the questions, meaning that they don't feel rushed or under pressure from the researcher.

All paper-based questionnaires were stored in a locked box to ensure that data protection and confidentiality were maintained. The questionnaires that were completed electronically were sent to a secure email account and were stored on a password-protected laptop.

The researcher adhered to the University's Research Ethics Policy and the British Association of Social Workers' Code of Ethics (The Policy, Ethics and Human Rights Committee 2014) at all times. A Student Project Ethical Review form was completed, that included a summary

of the ethical issues and necessary actions to address them, to ensure that the research satisfied the University's Ethical Committee.

Consent was given by the participants by virtue of the fact that they all voluntarily responded to the research request. The participants were provided with information on the background and purpose of the study, the reason for the research request and how the data would be stored and destroyed.

Sample

Four LAs were contacted by telephone, prior to sending a follow-up email at their request. The researcher requested that each adoption team contacted current adopters to establish their interest in participating in the research. The adopters would then be able to contact the researcher to request a questionnaire pack. However, no responses were received from any of the LA adoption teams after the initial email request was made.

The charity organisation, Adoption UK, were also contacted to assist with publishing a research request for the study on their adoption website forum. The organisation agreed to create and publish an electronic link to enable the respondents to complete the questionnaire online and submit it to the researcher via email. The respondents could also email a request for a paper copy of the questionnaire to be sent to their postal address, with a stamped return envelope provided.

Method

An eight-week deadline was given for respondents to return their completed questionnaires. Only one participant failed to return their completed questionnaire by the deadline date, however, the response was received in time to enable their data to be included in the study.

A detailed cover letter (Appendix 2) and instruction sheet (Appendix 3) were included with the questionnaires, providing the participants with an introduction to the researcher and the research topic, along with guidance on how to complete the form and contact details for the university, should they have any queries.

The questionnaire was designed to capture the best evidence from the sample group, ensuring that a mixture of open and closed questions were incorporated to obtain both qualitative and quantitative data. A total of twenty-five questions were included, separated into three sections.

Section One comprised of ten questions, focusing on the adopter's personal experience of adoption support, using grading scale questions and answers. There was an option to expand with written information if required. Section Two comprised of fifteen open-ended questions to gain more in-depth responses from the adopter. Finally, Section Three gathered demographic information about the respondent, such as their age category, occupation and number of adopted children. Additional paper was provided at the rear of the questionnaire to expand on any of the answers if required.

Data Collection Tool

The use of semi-structured questionnaires was chosen as the preferred method of data collection due to the potentially large sample size that could have been obtained, as the request for respondents was posted on a national website forum. Semi-structured interviews, group interviews and focus groups were considered initially, but as a large quantity and a broad range of respondents were sought, and research resources limited, it would not have been feasible to complete the interviews and subsequent analysis within the given timescales. As Carey (2013 p. 144) states, 'well-constructed questionnaires can also

accommodate small numbers of participants and can ask and explore in-depth themes in a similar way to interview’.

Questionnaires also allow for the study to be not only cross-sectional, but also longitudinal, facilitating replication and comparison in the future. Interviews permit variations in style and technique, both of which may impact the result produced if conducted by a different researcher, whereas written questions will not alter. In addition, bias can largely be eliminated through piloting and proof reading of the questionnaires to ensure that the questions do not lead the respondent to answer in a particular way.

There are certain limiting factors to the use of questionnaires that could not be overcome. For example, dysgraphia or illiteracy could prevent a willing participant from responding, whereas interviews would enable the vast majority of people to be included. The request for participants was eventually exclusively made on the internet, which precluded those without access from responding. Originally, it was hoped that numerous LAs would contact adopters in their region directly, but due to a lack of response from the authorities this did not happen.

Questionnaires do not allow for the researcher to probe or ask follow-up questions at the time of questioning, which could mean that potential rich data is lost or not uncovered. Also, if the participant does not understand the question, or accidentally omits one, there is no opportunity to clarify this with them. Therefore, piloting, question selection and clarity was key to ensuring validity, as if the wrong questions are asked, the research question will remain unanswered (Matthews and Ross 2010).

Piloting

The researcher noted the importance of remaining reflexive throughout the process of data collection, taking this into consideration during the

piloting process. Reflexivity is defined by Oxford Dictionary as 'taking account of the effect of the personality or presence of the researcher on what is being investigated' (English Oxford Living Dictionaries 2017). 'Reflexivity is a critical part of managing research reactivity and bias and should be evident in the research article' (Lietz and Zayas 2010 p. 193).

The questionnaire was piloted on a select group of test respondents (current adopters) over a three-week period, to ensure the validity of the questions i.e. that they were appropriate, unbiased and would capture the desired information. If too many questions were included, the respondent may feel overwhelmed and not complete the questionnaire fully, yet if too few questions were asked it may lead to insufficient data being obtained, therefore, the piloting process was extremely important to get this balance right.

Several questions were changed or removed as a result of this process, either because they didn't elicit a productive response, were duplicating other questions or allowed the respondent to deviate off topic.

Data Analysis

Thematic analysis was used as an inductive method to extract pertinent data from the responses to the questionnaires, paying particular attention to the aims and objectives set out in the research question. Thematic analysis is described as 'a process of working with raw data to identify and interpret key ideas or themes' (Matthews and Ross 2010 p. 373), to be used to 'generate debate and draw conclusions from' (Carey 2013 p. 34).

The key components to thematic analysis are transcription, analytic effort and theme identification, which overlap considerably (Howitt and Cramer 2011). Once the questionnaires had all been received, the

researcher read through the contents several times over to become familiar with the data. At this early stage, it was important to reflect on the previous literature whilst paying particular attention to any emerging themes that may present themselves from the new data (Robson 2011).

Transcription was not necessary as the data was already recorded in written form. Therefore, the next stage involved the researcher creating and applying basic *codes* to words or phrases that appeared and reoccurred throughout the responses. Carey (2013 p. 188) refers to codes as 'meaningful units of information'.

The codes were then sorted and compiled into *themes*, from general to more focussed, that were of particular interest with regards to the research objectives. For example, a respondent may describe difficulties in the relationship with their adopted child and request support to address this need. The code may be 'lack of emotional warmth' and the researcher would apply the code whenever it reoccurred in future responses. From this code a theme may emerge relating to adopters requesting support for help with their parent/ child relationships. Codes and themes may need revisiting throughout, as thematic analysis is a fluid and evolving process.

Despite thematic analysis being commonplace in qualitative research methods, there is criticism regarding its simplicity and fallibility to incorrect interpretation of the data by the researcher (Jones and Forshaw 2012). However, by continuing with the analysis until the point of saturation (joining or splitting of themes until they go no further), thematic analysis can be used effectively to give clarity and structure to the data.

Limitations

The research was somewhat limited by the total number of responses received. Despite there being a range of LAs represented by the respondents, a larger sample size may have yielded different data in terms of reliability and validity.

As the nature of the study is a review of a service, it is possible that people may have been more inclined to participate if they had a negative experience of adoption support rather than a positive one. Therefore, the way in which the request for participants was conducted may have elicited a higher percentage of dissatisfied service users as opposed to a completely randomised trial.

The research seeks to capture adopters' experiences of support by using questionnaires. Due to the transient nature of an experience, the data could vary if retested at a later date (Fallon 2016). However, a recommendation of the researcher would be to monitor such experiences on an ongoing basis to provide more accurate and reliable data.

Results (2500)

This section will seek to portray the key findings obtained from the questionnaire responses. The data will be displayed in narrative form with some of the key statistics represented in charts. Direct quotes from the respondents will be written in italics to differentiate from the researchers own words. Due to the small sample size, the figures have been presented as actual number of respondents rather than using percentages, as this could yield misleading results.

The terms 'respondent' and 'adopter' are used interchangeably throughout this section. Each respondent was given a number to identify them anonymously in line with data protection.

The respondents were from various LAs across the UK. One adopter had moved from England to Scotland after adopting and, therefore, had a different experience of adoption support, partly because the ASF is not available in Scotland.

Twenty respondents completed the questionnaire in total, all as a result of the request on the Adoption UK website forum. None of the four LAs that were contacted responded to the research request. Not all of the twenty respondents answered all the questions, therefore, there is a variance in the total sample size for each question.

Almost all adopters (19 out of 20) had received some form of adoption support since having a child placed with them. Five of the twenty respondents adopted one child, eight families adopted two children whilst seven adopters had three children placed with them. Twelve families adopted through the local authority and seven through an adoption agency.

The results will be separated into various sections, or themes, as described in the methodology, to represent the key points that emerged from the data.

Theme 1 – Adoption support resources and social worker experience.

The respondents were asked how many social workers they had been assigned since adopting and whether they felt that this impacted on their experience of adoption support. One adopter stated:

'It was really positive having one social worker who took us through the assessment process and then remained with us during the first year or so of placement. It was so helpful to have the consistency of someone who knew us during the early days of placement and could guide us through accessing support and therapy' (Respondent 15).

However, the vast majority (15 of 19) of adopters had been assigned two or more social workers, four respondents reported that they had four or more since the start of the process. One respondent that had experienced multiple changes of social worker felt that this had a negative impact on the overall quality of support as they had to keep repeating their story. Another respondent stated that they were never assigned an adoption support social worker, instead they only received help from a support worker.

Adoptive parents reported a mixed experience of their social workers, however, the overwhelming majority of adopters (15 out of 20) reported either a lack of support, contact or knowledge from their social worker. Three adopters stated that they felt a sense of blame from their social worker for the difficulties that they were facing and that there was an attitude of:

'If you are asking for support then you can't cope' (Respondent 3).

Several adopters also felt as though there was a lack of understanding and experience amongst social workers in relation to the key issues

that adoptive families face, the support that is available and how to relate to parents of traumatised children. One adopter recalled their experience after adopting their fostered son 7 years ago:

'We literally saw the last of the social worker 3 days after his adoption day – nothing since. His social worker told us that "It would save a whole load of paperwork if you kept him"' (Respondent 18).

Eleven respondents stated that adoption support resources could be improved by enhancing the training given to social workers, adoption support workers, schools and health professionals, as well as training for the adoptive parents. Two respondents suggested that including adoptive parents as part of the training for social workers would be a beneficial resource, as they are best placed to understand *living the life*.

Twelve respondents stated the importance of peer support and found it to be an under-utilised resource. It was noted how vital it is to speak and meet with other adopters that understand the issues faced when caring for traumatised children. As one adopter stated:

'Only other adoptive parents "get it"' (Respondent 14).

Another respondent recommended that:

'Support groups to be compulsory for prospective adopters so they gain a sense of reality and a source of support after placement' (Respondent 17).

Respondent 19 reported that, along with the support of fellow adopters:

'Supportive extended family and friends are vital'.

Theme 2 - Satisfaction and effectiveness of support provisions

Five out of eighteen respondents rated the overall quality of the adoption support that they received as *good*, eight rated it as *average*, three felt the support service was *poor* and two rated it *very poor*. None of the adopters rated their experience of adoption support as *excellent* (see Figure 1).

Five out of ten respondents that adopted through the LA rated their overall satisfaction of support services as *good*. This figure was only two out of seven for agency adopters. Two out of ten LA adopters rated the support as *poor* or *very poor*, whilst this figure rose to three out of seven for agency adopters.

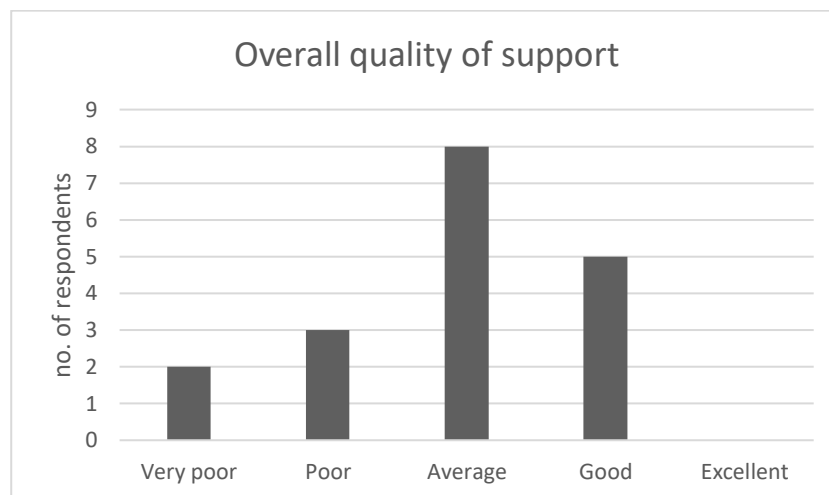


Figure 1. Overall satisfaction of adoption support services.

Of the nine respondents that considered disrupting their adoption, the three that did disrupt rated the overall quality of support as *average*, *poor* and *very poor*. Of the six respondents that considered disrupting but didn't, four rated the support as *good*, one *average* and one *poor*.

In terms of the impact that the adoption support provisions made to the stability of the placement, two out of fourteen adopters found the support to be *very effective*, three experienced *some improvements*

whilst seven out of fourteen said the support was *satisfactory*. Two families reported the support to be *ineffective* or *made things worse* (Figure 2).

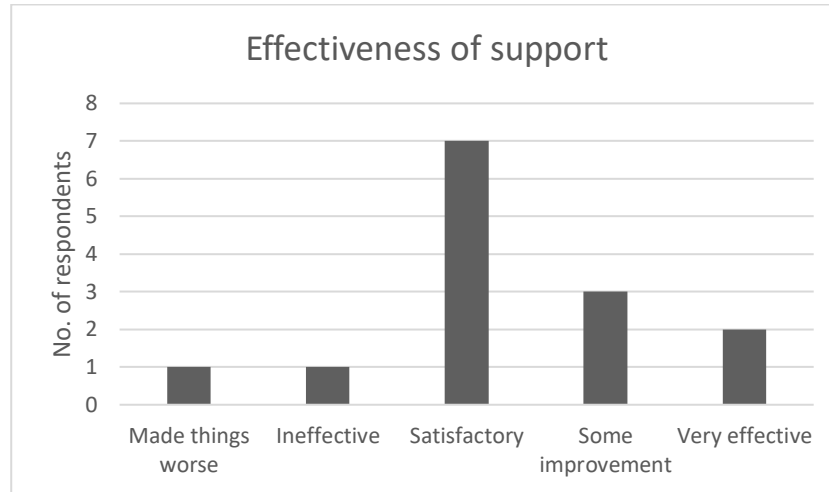


Figure 2. Overall effectiveness of adoption support services.

Theme 3 - Awareness of, and difficulties obtaining, support services

Seventeen respondents answered the question of when they were informed of the adoption support services available to them. 'Before' relates to the adopters being told about support details prior to the assessment stage, 'During' means at the time of assessment and/ or matching, and 'After' refers to the child/ren having already been placed. Three out of ten respondents that adopted through the LA stated that they were never informed about adoption support services, whereas three out of seven adopters from agencies were never informed (Figure 3).

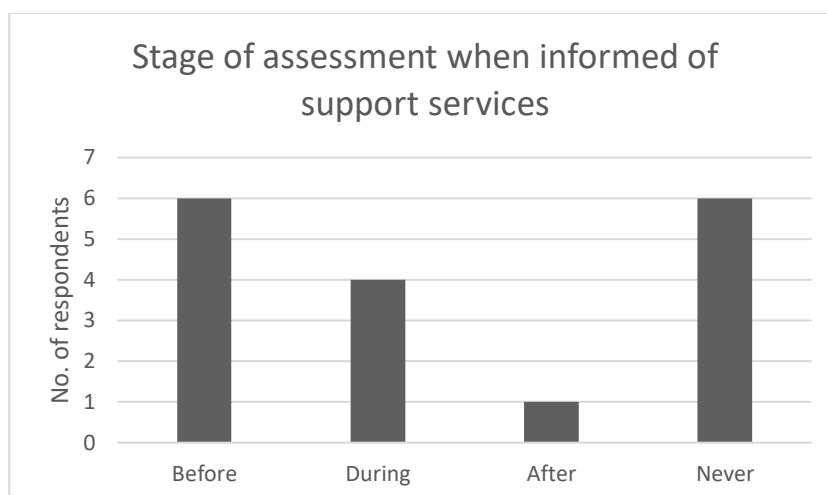


Figure 3. Stage of the adoption assessment process when adopters were informed of adoption support services.

Five out of eleven respondents that adopted through the LA stated that they found it *quite difficult* to access adoption support, three out of eleven found it *very difficult* and only three out of eleven found the task *easy*. This is in stark comparison to the findings from those that adopted through an agency, where five out of seven found the support *easy* to access (Figure 4).

Not only did the majority of adopters (10 out of 18) experience some level of difficulties accessing the support, there were then long delays in receiving it. Ten out of seventeen respondents stated that it took over a month to receive the support they had requested, in two instances it was over a year. The quickest experience of any of the respondents was one week.

Of the nine respondents that considered disrupting, two out of the three adopters that did disrupt stated that accessing the support was *very difficult*. Five out of the remaining six respondents that considered disrupting but didn't found accessing adoption support *easy*.

The chart below represents the adopters' experience of the support-requesting process.

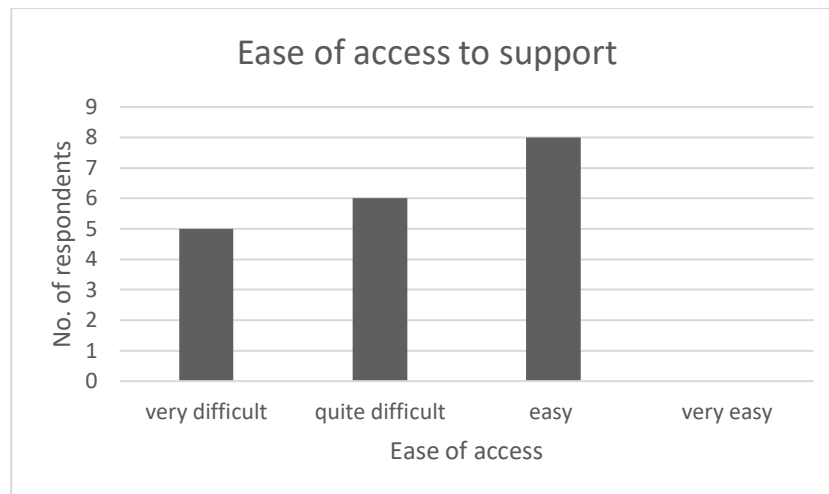


Figure 4. Ease of access to adoption support services.

Adopters experienced a mixed rate of 'success' to their support requests. Success in adoption is difficult to define and quantify, as will be discussed later in this study. However, for the purposes of the questionnaire, the researcher focussed on the support requests made by adopters, the support provided to them and their overall satisfaction of adoption support as a service in general.

The most common types of support provided to adopters were:

- Therapeutic support (n=5)
- Training courses (n=4)
- Adoption allowance (n=2)
- Theraplay (n=2)
- CAMHS (n=2)
- Life story work (n=2)

Half of all respondents received all the support services that they requested, seven adopters received 50% or more, whilst one adopter did not receive any of the support that they requested. Respondent 12,

who requested counselling, DDP and support with education, experienced difficulties with the school:

'We were always told [that there were] no problems at school so we can't help you'.

Another adopter stated that:

'Support wasn't put in place as [my] son's social worker refused to accept there were problems and didn't do much to try and find any support' (Respondent 2).

Respondent 4 stated that they felt an:

'Unwillingness from many services to provide necessary help particularly as kids got older... [They were] keen to show criteria not met therefore support does not need to be given...deliberate blindness'.

In relation to another adopter's mixed experience of the support that they received from CAMHS:

'I'm not sure they had any specific expertise in attachment and trauma. We saw a number of different therapists due to illness, staff changes etc. which I'm sure didn't help and they just seemed to do a bit of Theraplay but it didn't really change anything. We moved to [a different LA] CAMHS and the experience couldn't have been more different. They had a dedicated adoption service which completely understood the impact of attachment and trauma. I think I learnt the most parenting skills by these weekly sessions and felt like there was support for me there too – probably for the first time' (Respondent 15).

There appeared to be a difficulty in contacting adoption support services, as Respondent 7 found when trying to request support:

'The phone would often ring out'.

Another adopter stated that:

'Services not taking responsibility, having to fight [for support] constantly' (Respondent 18).

The vast majority of funding (16 out of 19) for adoption support came from either the ASF (8) or directly from the LA (8). The remainder of the support provided was financed through either the NHS, Pupil Premium or self-funded by the adopters and their family.

In relation to the process of applying for support using the ASF, many adopters encountered difficulties:

'We are trying, along with about 6 other adopters to get funding through the ASF for some training but it is proving to be too difficult as there are a number of local authorities involved. It's a real shame as it could be an effective use of the ASF helping a number of families at relatively little cost but the bureaucracy is proving to be too difficult' (Respondent 15).

Another adopter had a similar experience:

'The assessment of need work prior to ASF application didn't happen because the social worker is completely overworked, I didn't push it and she moved on' (Respondent 14).

In general, although almost half of all reported support was funded by the ASF, the process of accessing the funds was found to be too complicated, untimely and unnecessary. A suggestion proposed by one respondent was to enable the adopter to access the fund directly to reduce delay in obtaining the support. Three further respondents stated that they thought the fund needed to be quicker and easier to access. As one adopter said:

'They [social services] insisted in going through the process of applying through mental health first and would not act until all stages had been completed – nearly 2 years' (Respondent 4).

Five respondents said that the annual allowance of £5000 per child provided by the ASF needs to be increased as this amount can be used up very quickly given the cost of some support service provisions. Another adopter stated that there needs to be consistency of service provision throughout the country because at the moment it is a 'postcode lottery'.

Theme 4 – Multi-agency working and information sharing

In terms of multi-agency working, Respondent 11 found:

'A lack of understanding and willingness to work together from other partner agencies such as education or health'.

It was noted by four respondents that schools need to be better educated to understand the issues faced by adopted children and the challenges that are presented to adoptive parents.

Nine respondents reported issues relating to support from education establishments, including the child experiencing bullying, inability for child to focus, a lack of support and understanding from school. Problems with education was the second most frequent answer to the question relating to the main issues faced by the adopters (aggressive behaviours being the most common). Respondent 3 recalled, in relation to their child's behaviours at school:

'School [was] not getting it'.

Three adopters resorted to home schooling their adopted children as a result of their negative experience with school support.

Eight respondents felt that receiving a lack of information relating to their adopted child's history had an impact on their placement. Issues included a reluctance from the LA to find out more information on the child's history and a lack of honesty from the social worker, family finder and previous foster carers.

Suggestions on how to improve multi-agency working included post-adoption support workers working with schools to support adopted children, more detailed history of the children provided from the beginning and ensuring that life-story books (usually folders containing photographs and other childhood memorabilia) are shared more efficiently.

Theme 5 - Disruption

Nearly half of all adopters (9 out of 19) had considered disrupting at one time or another. Three families had proceeded to the point where one or more of the adopted children had left the adoptive household. Respondent 11 remarked:

'The number of families we know who have disrupted is alarming'.

Reasons given for the adoptive placement disrupting included;

- The child being beyond parental control
- Extreme behaviours impacting younger siblings
- Allegations made against the adoptive parents
- Parents unable to provide emotional care to the child

One respondent, who adopted three children, stated:

'We asked for her to be accommodated due to extreme behaviour and impact on younger siblings but were refused. [She] was

accommodated when she made allegations against me'
(Respondent 16).

When asked about the support that they had received since disrupting, one adopter stated:

'NONE! ...the social worker was clueless' (Respondent 1).

Another adopter said that they received:

'Parent mentoring nine months later. Requested support for younger siblings but got nothing so [we] funded it privately'
(Respondent 13).

Respondents that considered disrupting but didn't, gave the following insight into why they didn't proceed with the disruption:

- Adoptive parents pulled each other through
- Support from fellow adopters
- It would have caused total break-up of the family unit
- The adopted child's violence stopped
- Post adoption support worker fighting for additional support

Two respondents stated that the reason the adoption did not break down was due to having an overwhelming sense of failure and guilt on their part and because they wanted to honour the commitment that they had made to their child.

Not all respondents disclosed to their social worker about the possibility of disrupting. For those that had begun the process, when asked what support had been offered to prevent the disruption, the responses included:

- 2 years of therapeutic support
- Support from school to prevent exclusions
- No support given
- Psychologist support with the parents.

Analysis

This section of the dissertation seeks to critically analyse the results of the current study, comparing and contrasting them to findings from previous literature and to discuss the potential implications of this study to the social work field.

Theme 1 - Social worker support (knowledge & experience)

The importance of the adoption support social worker's role should not be underestimated as, according to the respondents, they contribute to the success, or failure, of an adoptive placement. Their involvement starts during the adopter's assessment phase and can continue after the Adoption Order has been granted. Fahlberg (2011) discusses the need for the social worker to ensure that the transition for a child from foster care to an adoptive home be seamless, to ensure that the child allows the adoptive parents to resume the role of the main carers.

This early stage of the adoption process is crucial in terms of children forming attachments with their new family and the parents bonding with their child. It requires the social worker to have experience and insight into the needs of both the child and adopters if they are to be effective. Attachment theory is prevalent in adoption support services as children's attachments to their caregivers are thought to be key in improving outcomes, particularly when a substitute carer is involved (DfE 2014b). However, Barth et al. (2005) suggests that attachment theory has a limited scientific base, particularly in predicting a child's future behaviour and informing therapeutic interventions.

Attachment theory states that if a child experiences neglect or early-life trauma, relationship bonds can become affected and brain development can be impacted. Therefore, it is important that social workers and adopters have a sound knowledge of attachment, achieved through training, support groups and mentoring, as it may

aid their understanding of the difficulties experienced in the parent/child relationship and reduce adopter's feelings of guilt or blame.

Another theory that is important for those involved in adoption support to have a sound knowledge of, and closely relates to the principles of attachment theory, is loss and grief. Adopted children will have experienced loss when they were removed from their birth family. As Thompson (2002 p. 4) states, 'The breaking of attachments involves losses that can have significant bearing on the child's psychosocial development'. It is the role of the adopter, with support from support services, to facilitate the *reattachment* of the child to their new parents.

Although there was some positive feedback from adopters on the support offered to them by their social worker, the vast majority felt as though they did not actually receive adequate support. Reasons for this included too little contact from their social worker, a feeling that the social worker lacked relevant knowledge and experience, and too many changes in workers.

The researcher suggests that the lack of contact and consistency could be due to the workload pressures placed on adoption social workers, a view supported by social workers interviewed as part of a study conducted by Rushton and Dance (2002). Social workers reported anxieties relating to the increase pressures to reach Government targets relating to the number and speed at which they are expected to pass children through the adoption system. It was acknowledged by professionals that these pressures could lead to inadequate preparation of adopters, and ultimately increased risk of disruption, a view also held by adopters in Rushton, Dance and Quinton's (2000) study.

Farmer et al. (2010) stated that social workers' workload pressures were jeopardising potential adoptive placements. Holmes, McDermid

and Lushey (2013) stated that concerns already existed prior to the Government's Action Plan (DfE 2012) aimed at tackling adoption delay and that the current adoption support infrastructure was insufficient. They noted that speeding up the adoption process may only increase the burden on already lacking social work resources.

Three adopters out of nineteen stated that they were reluctant to request support as they felt a sense of the social worker blaming them for the problems that they were experiencing. These findings are similar to those found by Sturgess and Selwyn (2007 p. 18) who reported 13% of respondents in their study had 'been reluctant to ask for help for fear of appearing a failure; of being blamed for the child's difficulties; or of the child being removed'. The authors also noted that '58% of adopters described feeling inadequately supported by them at some point since their child was placed' (p. 24).

The fear of blame and failure by adopters is a significant point as it may lead to a reluctance to ask for support when it is needed. One adopter in the current study commented that they did not ask for support from their social worker for fear of their child being removed. This additional anxiety could lead to further stress on their fragile relationships. The researcher suggests that a shift in social work culture to become more client-centred and less target-driven, is needed. This will only come about through change in policy to reduce or remove targets, as well as social workers gaining more relevant adoption experience and training, in which adopters should be encouraged to actively participate.

It was identified by several adopters in the current study that having adequate support from their social worker was a crucial factor in placement stability. One respondent reported how helpful it was to have the consistency of working with just one social worker from the beginning. However, only four of the nineteen respondents kept the same social worker throughout the adoption process, possibly another

reflection of a lack of resources leading to high staff turnover. A recent study of social worker well-being by Ravalier (2017) found that there is currently an increased pressure on social workers due to budget cuts, lack of resources and increased caseloads, ultimately putting service delivery under pressure.

Respondents noted the importance of professionals being sufficiently trained not only in the issues that adoptive families face, but also that they are experienced in managing the behaviours exhibited by traumatised children. These findings are supported by Sturgess and Selwyn (2007 p. 26), who noted that 'some adopters complained that agencies had little understanding of the needs of adopted children'. If the social worker lacks adoption experience, this can cause delays in support provision due to a lack of knowledge relating to the support application process (Farmer et al. 2010).

The responses given by adopters in the current study demonstrated that the majority felt that professionals involved in providing support lacked knowledge, understanding and relevant training. If adoptive parents feel that their expectations of adoption are not being met and they don't perceive that support services are helping, they may experience an increase in levels of stress (Moyer and Goldberg 2017), potentially contributing further to placement instability.

Theme 2 – Satisfaction and effectiveness of support provision

It is acknowledged that there is an overlap between Themes 1 and 2 as the social workers providing the support may not have the knowledge, experience or resources to effectively deliver the support to adoptive families, resulting in reduced satisfaction reported by the adopters.

The most frequent response from adopters in the current study show that they were generally *satisfied* with the support received and that

the overall quality was *average*. These results are in contrast to the findings of a study by Sturgess and Selwyn (2007 p. 13) who found that services appeared to be failing to provide support that was deemed to be 'sufficient or effective'.

Adoption preparation courses are usually the first instance where prospective adopters will engage with a social worker, learn about the challenges of caring for traumatised children, and develop their expectations of adoption. Therefore, it is crucial that this stage of the process is managed correctly, with appropriate advice and training being provided. Several respondents in the current study stated that improvements could be made by making greater use of adoptive parents throughout the course as their advice was invaluable. This confirms the findings of Hoffman (2013), who discovered that participants found great value in listening to the first-hand perspectives of experience adopters during the preparation course.

The data obtained in the current study suggests that there may be a correlation between placement stability and effectiveness of support. The three families that disrupted rated the support they received as *average*, *poor* and *very poor*, compared to the majority of adopters that considered disrupting, but didn't, who rated the support as *good*. These findings imply that improving the quality of support could reduce incidents of disruption, but further research would be needed to investigate this relationship.

It would be beneficial for LAs to record and monitor data relating to adoption support service provision and disruption rates. Such information would facilitate service evaluation which, in turn, could lead to more efficient and targeted support for those adoptive families in need of help. Without this information, social workers and other support services are more likely to be reactive rather than delivered in a proactive, planned, evidence-based manner.

However, statistics relating to positive outcomes of an adoptive placement are very difficult to classify, as *success* is subjective, personal and a matter of opinion, and only relates to the specific factors being evaluated (Rushton and Dance 2004). McNeish and Scott (2013 p. 4) state that 'A basic marker of success in a permanent placement (long-term fostering or adoption) is that it remains intact for as long as needed'. Yet just because an adoptive placement lasts the intended duration, it doesn't necessarily mean that it is a happy and successful one. Therefore, it could be argued that monitoring placement outcomes has limited value as it would not necessarily be indicative of the quality of the placement.

The researcher proposes that the only way to monitor the success and effectiveness of adoption support services would be to obtain regular feedback from adoptive parents. This was one of the aims of the current research, to enable the voice of adopters to be heard and to gain feedback on their direct *lived* experience of what works and what doesn't.

Theme 3 - Awareness of, and difficulties obtaining, support.

As with any form of support service, it only has the potential to be effective if people are aware of it (Bonin et al. 2014). When a prospective adopter registers their interest in adopting 'in all cases' (DfE 2013 p. 75) they should be provided with the Adoption Passport, a document that highlights the support available to them. It is the duty of the LA to inform adopters about support services and how to access them (ASR Amendment 2014). However, two of the eight respondents that adopted since the Government introduced the Adoption Passport in 2013 stated that they were never informed about their entitlement to adoption support services.

Six out of seventeen respondents in the current study stated that they were never informed of the availability of adoption support services. These findings are comparable to the results of Sturgess and Selwyn (2007) and Pennington (2012) and raises questions about the quality and effectiveness of the preparatory stages of adopter recruitment. It also calls into question whether the duties placed on LAs to notify adopters of support services, as stated in the ASG 2013 and ASRA 2014, are being fulfilled.

Half of the respondents in the current study received all the support which they requested, whilst seven out of nineteen received 50% or more. Whilst this response rate is encouraging, the respondents experienced varying degrees of difficulties navigating the process of obtaining the support. Eleven out of nineteen adopters reported finding the process of accessing the support either *difficult* or *very difficult*.

These results support the findings of Pennington (2012) who also discovered that adopters faced difficulties when requesting support services. They also found that only 63% of adopters that requested an assessment for support ever received one and only 31% of respondents received the support services identified in full. Holmes, McDermid and Lushey (2013) also reported a mismatch between the support needs of adopters and the availability of support services in their adoption study.

It is crucial that the request and assessment process of adoption support is simplified and that provisions are provided quickly and effectively. Any delay could jeopardise the stability of the placement and adopters should not have to 'Constantly fight for support' (Respondent 18). One adopter commented that there appears to be a general attitude by professionals that, once looked after children leave foster care to move to an adoptive family, their trauma and issues somehow disappear, resulting in additional difficulties obtaining support.

One respondent in the current study reported that support provision availability appears to be geographically inconsistent, which suggests that LAs are failing to uphold their duty to provide a uniform and consistent adoption support service under the 2002 Act. Lowe et al. (1999 p. 400) also found that 'good quality adoption services were a lottery'. One potential reason for this was offered in a report by the Adoption Research Initiative, which found that in some areas there were 'significant tensions between the agencies around commissioning and contracting' (Sellick 2010 p. 2). Such organisational tensions could result in inconsistent support provision that will only negatively impact adoptive families.

Respondents in the current study not only reported difficulties in getting support from the LA but also from other organisations such as schools and health services. Respondent 12 found that, as their child did not display challenging behaviours at school, there was an unwillingness from staff to provide additional support. Rushton (2003 p. 45) states, 'Parents continue to have battles with the education system over obtaining psychological assessments, appropriate school placements and educational help and advice. The school system, like the therapeutic system, also needs to be more adoption-sensitive'. This supports the views of many adopters in the current study who stated that adoption training needs to be provided to all professionals that are involved with adopted children.

Rushton, Dance and Quinton (2000 p. 68) suggested that, to improve the stability of adoptive placements, 'Professional intervention will need to focus on helping the child to cope with the experience of rejection'. This will require the adoptive parents to have a sound understanding of attachment and trauma, supported by relevant training on how to handle the resulting challenging behaviours. Boswell and Cudmore (2014) proposed that adopters should be provided with specific training, such as attachment and loss, as standard rather than

having to request a social worker's assessment and wait for the provision. This could not only reduce delays in adopters receiving the training but also alleviate some of the workload pressures on social workers.

Theme 4 – Multi agency working and information sharing.

One of the main themes to emerge from the responses was a lack of, or incomplete details pertaining to the adopted child's history. Eight respondents said that they felt more accurate and detailed information needs to be provided to prospective adopters as, at times, they felt misled or even lied to about the children that they were being matched with. Pennington (2012) also highlighted the variable quality of information supplied to the adopters about the children, noting disruption as a potential outcome of this.

Aggressive behaviours by the adopted child was the most frequent issue faced by the respondents in the current study (11 out of 19). Respondent 7 struggled with their children exhibiting aggressive behaviour towards them and that both of her adopted children suffer with attachment disorder, which was not mentioned to them prior to the placement. They stated that as much information should be provided to the prospective adopters as possible, a view supported by Sellick & Thoburn (1996). Thomas (2013) noted that looked after children are much more likely to have emotional and behavioural difficulties than their peers. This will likely require their adoptive parents to need additional support services to help them manage these behaviours.

Barth and Miller (2000 p. 449) proposed that adoption agencies were providing 'scanty information about the child, or information which seemed too favourable, perhaps to increase the child's chance of being adopted'. It is understandable then that adopters in the current study

felt dissatisfied with adoption services if they were not provided with an accurate picture of their child prior to adopting them, or if the child's support needs have not been sufficiently identified. Randall (2009 p. 53) supports this point by adding it 'can lead to understandable anger when adopters believe that they have been duped'.

The AAR 2005 Part 5 (31:1a) instructs adoption agencies to provide the prospective adopters with a copy of the child's permanence report and 'any information the agency considers relevant'. The DfE's Adoption Guidance 2011 (p. 90) clearly states that 'It is unacceptable for agencies to withhold information about a child and provide a picture that bears little relation to the reality'. However, the findings of the current research, and those from previous studies, raise questions about whether the placing authorities should be solely responsible in deciding what is relevant information to pass on to the adoptive parents. It could be suggested that more transparency is required to enable adopters to have further insight into their children's history.

Theme 5 – Disruption

Three out of the twenty (15%) respondents in the current study reported that their adoption had disrupted. These figures are within the range proposed by previous literature of 2%-50% (DfE 2014c; Beckett, Pinchen and McKeigue 2014; Wright 2009). Randall (2009) comments that it seems remarkable, given the potential devastation and trauma that can be caused as a result of an adoption breakdown, that there remains a lack of national monitoring and evaluation of adoption support services and disruption rates. Sturgess and Selwyn (2007 p. 26) state that, in relation to preventing disruptions, 'Timely and effective ongoing post-adoption support services could go a long way towards alleviating these situations'.

Saunders and Selwyn (2009 p.160) note that 'Difficulties in obtaining support can increase the stress felt by adopters and may put the placement in jeopardy', therefore it is imperative that improvements are made. The disruption statistics reported in the current study support this statement, as two of the three adopters who disrupted found support *very difficult* to obtain. This is in comparison to five of the six adopters that considered disrupting, but didn't, who experienced obtaining support as *easy*.

If disruptions rates are to be reduced, it could be argued that more intense and prolonged support is required. A number of respondents suggested that the ASF allowance needs to be increased from the current limit of £5000 per child, as therapeutic services are extremely expensive and this budget can be used very quickly. The Government plan to provide a further £5000 for therapy per child, in addition to the £5000 allowance from 2016-2017, as well as an additional £2500 if specialist assessments are needed (First4adoption 2017).

However, it could be suggested that until disruption rates are monitored, and the views of adopters are continually sought, it will not be possible to determine what support strategies are most effective in reducing placement breakdowns. Even if disruption rates were monitored, they alone cannot be used as an indicator of support effectiveness, as discussed earlier in this chapter.

For adoptive families that suffer a disruption, more needs to be done, not only to attempt to prevent it, but to support the family through the traumatic process. Macrae (2004 p. 15) states that 'Experts believe that family hurt can only be healed through letting grief take its course....Parents need to remember also to seek counselling for themselves'. Grief and loss theory would suggest that it is important for adoptive parents, as well as the children who have suffered a broken attachment, to grieve their losses, rather than feel blamed for a failed placement.

Conclusion (1250)

The main aim of this study was to gain an insight into the state of adoption support services from the perspective of adoptive parents. Despite the small sample size, this study has enabled adoptive parents to have a voice and has highlighted some important issues that need to be addressed if adoption support is to become more effective in its purpose of improving the stability of adoptive placements.

In general, there was a notable lack of positive experiences of adoption support from the respondents. Although the majority of adopters found the support was satisfactorily effective, it was reported to be difficult to obtain, and a third of adopters said that they were never informed about their entitlement to adoption support. This raises questions about the effectiveness of the Government guidance introduced to ensure that all adopters are made aware of support services.

If adopters lack confidence in their social worker's knowledge or ability to support them (as fifteen out of twenty respondents reported), or if they feel a sense of blame and failure, it is possible that they will be reluctant to request further support. Nearly half of the respondents considered disrupting at one time or another, yet what is more concerning is that some respondents didn't disclose to their social worker that they were considering disruption.

It appears that a lack of resources in the adoption teams, and cuts to social services in general, may be creating a barrier to effective and efficient support service provision. However, investing more in the early stages of the adoption process, such as preparation courses, training and matching, might reduce the financial burdens created by the need for increased support and disruptions.

It is imperative that adopters should be given all the information available relating to the children they seek to adopt, as this will enable them to make an informed choice and receive sufficient preparation

and training. Eight adopters felt as though they were not given enough history, which then had a negative impact on the stability of their placement. This could be addressed by improving communication and multi-agency working between fostering and adoption teams, foster carers, birth family and prospective adopters.

The researcher surmises that the key to improving adoption support services for adopters is for them to be listened to, not feel judged or blamed by social workers, to be informed of, and have immediate access to, effective training and support. This should then lead to increased placement stability and, ultimately, a reduction in disruption. Outcomes such as these will not only be positive for adoptive parents but also the wellbeing of the children involved.

These changes don't necessarily require additional money to be spent on resources as they relate to a change in approach rather than policy. However, it is important that current policies and guidance are implemented correctly, such as the Adoption Passport, so that adopters are aware of all service available to them.

Future research and Recommendations

It is clear from the relative lack of research on adoption support, particularly from adoptive parents' perspective, that there is a need for further studies.

The researcher recommends that future studies should be conducted with a larger sample group representing more LAs, including voluntary adoption agencies. This would allow for the selection of a randomised sample group to gain a wider understanding of adopters' experiences, needs and outcomes of adoptive placements. Replication of this study on a larger scale could strengthen the evidence base to bring a change in Government policy, guidance and legislation, and to reduce unnecessary targets that may be compromising adoptive placements.

It has been suggested that current guidelines to reduce adoption timescales are jeopardising adoptive placements (Holmes, McDermid and Lushey 2013). Future research should focus on current policy relating to such timescales and whether they are too short, leading to an increase in requests for support and disruption rates. It could be argued that by ensuring adequate time is spent completing the matching processes and more robust adopter assessments, the risk of placement breakdowns and requirement for support could be reduced, having positive implications both financially and practically.

Further investigation into the quality and effectiveness of adoption preparation courses would also be beneficial. The current and previous studies have identified this period as crucial in determining the prospective adopters' expectations, as well as equipping them with the necessary parenting and coping strategies. The researcher suggests that by improving the content and advice provided during this period, utilising the expertise and experience of adoptive parents more effectively, there is the potential to increase the long-term stability of adoptive placements.

The researcher concurs with Rushton, Dance and Quinton (2000) who suggest the need to explore the notion of adopted children *re-attaching* to another primary care giver, as this is pertinent to adoptive families and has implications for support provision. Almost half of the respondents in the current study reported that experiencing poor relationships with their children was one of the main reasons that lead to them requesting support, and a cause of disruption. Therefore, the re-attachment process may be a crucial determining factor of placement stability and is worthy of further research.

The final recommendation would be to conduct research into how social workers are trained and equipped to offer support to adoptive parents and whether this training is matching the needs of adopters. The current research suggests that there may be a need for change in

social worker attitude, particularly towards adopters considering disruption and requesting support. Several adopters in the current study reported feeling a sense of blame and lack of understanding by their social worker when they were experiencing difficulties with their placement. This may not only impact the working relationship between adopters and their social worker, and potentially hamper support provision, but it also goes against the ethical and non-discriminatory principles of the social work profession.

Appendix 1 - Questionnaire



Section 1 – Experience of Adoption Support

Please circle your answers and expand in the spaces below, if required. There is extra lined paper at the back of the questionnaire.

1) How many Social Workers have you had since adopting?				
1	2	3	4 or more	
2) Has this had an impact on the overall quality of support that you have received? If so, how?				
Yes		No		
3) Have you ever received adoption support in any form? (If no, please go to Section 2)				
Yes		No		
4) How would you rate the overall quality of adoption support services provided to adopters?				
Very poor	Poor	Average	Good	Excellent
5) When were you made aware of adoption support services during the adoption process? (Circle all that apply)				
Before	During	After	Never informed	
6) How many times have you accessed adoption support from the Local Authority?				
Never	1 - 2	3 - 4	5 – 6	more than 7
7) In general, how easy was the support to access?				
Very difficult	Quite difficult		Easy	Very easy
8) How quickly was the support given?				
Within 24 hrs	Within one week	Within one month	Longer than one month	

Section 3 – Personal

Your age:	18 – 25	26 – 35	36 – 45	46 – 55	Over 56
Year in which you adopted:					
Occupation:					
County living in:					
Composition of household e.g. number and ages of adults and children living in the household:					
Who did you adopt through e.g. Local Authority, Adoption Agency, charity, etc?					
Number of children adopted:					
Age/s of children when adopted:					
Do you have birth children? If so, what age/s?					

Appendix 2 – Cover Letter



Dear Sir/ Madam,

Firstly, I would like to thank you so much for showing an interest in this subject matter and taking the time to complete this questionnaire.

I am a final year Social Work student at Robert Gordon University in Aberdeen. The title of my dissertation is 'Adoption Support in the UK, a Qualitative Study'.

The aim of this research is to gain a greater understanding of adopters' experiences of adoption support.

As you may or may not be aware, post-adoption support is greatly under-researched in the UK, therefore, little is known about the level, quality or success of the support that is offered.

It is my hope that, with your valuable input, this research will highlight those areas of adoption support that are currently working well, but also what needs to be done better. Gaining the direct experience of adopters is crucial in establishing this.

Many thanks,

Jon Benfield,

Social Work Student,

Robert Gordon University.

My email address - j.benfield@rgu.ac.uk

Tutor's email address (Graham Paterson) - g.j.paterson2@rgu.ac.uk

Appendix 3- Questionnaire Instructions



The questionnaire comprises of three sections.

The first part contains short questions about your experiences of adoption support. This will include scaling answers that require you to 'score' your experience by circling the appropriate response.

The second section includes questions to gain more of an in-depth insight about what you feel has worked well in terms of adoption support, but also what could be done differently to help adopters and their families.

The third and final section is about your personal information, such as age category, composition of household, etc.

There is separate sheet at the back for you to expand on your answers should there not be sufficient space in the boxes provided.

All documentation will be securely stored in a locked box and destroyed upon completion of the study. The information that you provide will be treated as entirely confidential and will not be shared with any other party.

Should you require clarification at any point I have included a contact email address so that you can ask any questions relating to this questionnaire. I will endeavour to respond as quickly as possible.

I have included a stamped addressed envelope for you to return your completed questionnaire.

Please can you ensure that they are completed and sent back by Friday 5th May 2017.

Once again, your participation is greatly appreciated,

Jon Benfield

Robert Gordon University.

j.benfield@rgu.ac.uk

Tutor's email address (Graham Paterson) - g.j.paterson2@rgu.ac.uk

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