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Foster Care Adoption: An Overview of Challenges Experienced by Parents

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Foster Care Adoption: An Overview of Challenges Experienced by Parents

by

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MSW Clinical Research Paper

Presented to the Faculty of the
School of Social Work
St. Catherine University and the University of St. Thomas
St. Paul, Minnesota
in Partial fulfillment of the Requirements for the Degree of

Master of Social Work

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The Clinical Research Project is a graduation requirement for MSW students at St. Catherine University/University of St. Thomas School of Social Work in St. Paul, Minnesota and is conducted within a nine-month time to demonstrate facility with basic social research methods. Students must independently conceptualize a research problem, formulate a research design that is approved by a research committee and the university Institutional Review Board, implement the project, and publicly present the findings of the study. This project is neither a Master's thesis nor a dissertation.

ABSTRACT

Purpose: This research strives to understand challenges of parents adopting foster children. **Design and Methods:** A qualitative, semi-structured interview was used to collect data from 11 social workers on their experiences working with adoptive parents. **Findings:** Findings indicate clear challenges/needs for these adoptive parents pursuing. Identified needs include quality training/education, desirable parental qualities, adoption-competent professionals, support, and resources to help with challenges brought by adoptive parents, the child and system. **Implications:** Findings enforce the importance of best practices though continuing research and the need for improvements to policy and practice. Several policy suggestions are made include ensuring timely delivery of information to adoptive parents, listing of all available children on the state adoption exchange, and to eliminate adoption disincentives.

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Foster Care Adoption: An Overview of Challenges Faced by Parents

The United States foster care system is designed to protect children and ensure basic needs. On average, the U.S. has just under 500,000 children in foster care at any given time (Dorsey et al., 2008), with more children entering than exiting the system on a yearly basis (Child Welfare Information Gateway (CWIG), 2012). For example, in 2010 there were an estimated 408,425 children in foster care, with 254,375 incomings and 254,114 exiting care that year (CWIG), 2012). This is a significant number of children experiencing problematic care during the critical developmental years of their lives.

For children placed in foster care, the removal from the home starts an often difficult journey within the foster care system. The transition consists of various losses and gains and can be overwhelming and confusing. They are removed from their home and known care givers, often with extended family, friends, neighbors, and other familiar norms no longer accessible. The change is usually part of a series of difficult events and is often experienced with traumatic effects often results in a high level of anxiety and the unknowns about the future. The difficult environment from which foster children begin, in conjunction with the losses suffered in the removal process, and uncertainty for the future, complicate their ability to heal and form new attachments (Wallace, 2003).

Foster parents often receive children from the child welfare system from varied backgrounds with a high likelihood of having experienced some form of child abuse, neglect, and/or trauma (Dorsey et al., 2008). Children entering care commonly have lived through maltreatment, abandonment, or abuse from distressed families who have been struggling with hardships like poverty, domestic violence and substance abuse (Stott & Gustavsson, 2011). These children often exhibit challenging behaviors that may have

served them well in their families of origin, but are considered disobedient in a healthy

environment. For example, a child who was only recognized when he became violent is

now in a foster home where he is expected to articulate his wants/needs. The expectations

are drastically different and confusing. Because of these challenges, parents need to have

adequate training, access to resources, knowledge of the system and support to care for

their needs (Cooley & Petren, 2011).

      Some children are able to find stability in their foster parents, and sometimes a

permanency resource. While many foster parents plan to be a temporary placement for a

child, others wish to offer permanency and grow their family through the adoption of a

child in foster care. Foster parents are faced with multiple challenges and a lengthy,

demanding process to become licensed to receive an adoptive placement of a foster child.

They are required to participate in extensive training and an intrusive home-study process

that often deters many families. Then, once they are approved for placement, they go

through a difficult matching process, followed by the challenging time of acclimation to

life with a foster child and caring for his/her special needs. Sometimes, the family and

child are able to establish permanency, an adoption is completed, and a family

established. Other times, the process does not turn out as well, the placement is disrupted,

and the foster child experiences another move and more loss.

      Multiple factors contribute to numerous moves a foster child may experience.

Such things as challenging behavior, lack of permanent placement availability and

changes in child or family needs often result in new placements for a foster child

(Holland and Gorey, 2004; Stott & Gustavsson, 2010). Multiple moves and care givers

increase the instability for the child can decrease the likelihood of healthy attachments

and positive outcomes (James, 2004), having a great impact on their future success. These experiences can lead to a sense of worthlessness and disconnectedness (to self and others), a lack of trust, instability as an adult, and increasing the likelihood of negative outcomes (Stott & Gustavsson).

To address these concerns, concurrent planning (a policy and practice tool that pursues reunification and adoption simultaneously) (Duerr Berrick, & Foulkes Coakley, 2006) is sometimes implemented. In these instances, children are placed with foster parents willing to commit to adoption if reunification efforts with their biological family fail. This type of placement greatly reduces the trauma, stress, and uncertainty often experienced with extended stays in the system. For children in this type of placement, the foster care system can be less traumatic as some uncertainty is removed and the process is easier to understand.

Children come into the foster care system for multiple reasons and usually with difficult histories. Often they have not had needs met, or the opportunity to form healthy attachments. Their foundation is fragmented and foster parents take on the mission, with the help of other professionals, to support and guide them to happier, healthier lives. In this process, some fortunate children are able to find stability and sometimes a permanency resource through adoption. The purpose of this study is to examine challenges faced by parents pursuing foster adoption. It will look at how closely reported experiences associate with challenges identified in the associated literature, as well as the preparedness of parents to deal with these challenges. This research will strive to add to the previous research elaborating on the needs of parents who wish to adopt foster children and help them live more stable, healthy lives, through adoption.

Literature Review

This literature review will look at the development of foster care in the U.S. from its beginnings of ensuring basic needs to the quest for permanency. The origin of foster care provides an understanding of its complexity in today's society, helping to ensure basic needs, health services and reunification/permanency for the child's wellbeing. During this pursuit, foster parents are at the forefront for meeting the foster child's needs as well as dealing with his/her challenging behavior. This literature review aims to examine the previously documented challenges as well as the needs of parents in the adoption of foster children.

History of Foster Care

Foster care is grounded in a long history of caring for the needs of the poor. Hundreds of years ago, poor and orphaned children were cared for by extended family, churches, or left to their own devices (Askeland, 2006). At this time, child welfare policies did not exist. Abuse, neglect and hard labor were common for poor or homeless children (Youcha, 1995). Local authorities established an initial form of foster care taking poor or abandoned children to be sold or given to anyone willing to take them in (Askeland). They lived difficult childhoods, working long hours in exchange for the barest of necessities.

In the 1830's, orphanages became more common across the United States (Askeland, 2006). Disease and war left many children without families or homes, prompting the growth of facilities to care for large numbers of children. Thus, orphanages were established to offer shelter, food, clothing, religion, and education to destitute

children. These children were available for adoption, but a majority remained in

orphanage care until venturing out on their own in their teens (Youcha, 1995).

By the late 1800's, studies on the negative outcomes of institutional care surfaced

(Mink & O'Conner, 2004) and challenged existing systems. In 1909, the first White

House Conference on the Care of Dependent Children recommended homes for children

instead of institutional care and by the mid 1900's, foster care was established as part of

child welfare and institutional care began to fade (Mink & O'Connor). Adoption agencies

placed children in homes; however, all non-biological children, foster or adopted, held

the foster stereotype (The Adoption History Project (TAHP), 2012) for being lesser status

and not la natural part of the family.

Government and researchers began to focus on child welfare and in the 1960's,

and years of research on the harmful effects of child battery prompted the development of

the first child abuse laws (Mink & O'Conner, 2004). This monumental event expanded

the theme of foster care from basic needs to include child safety (The Adoption History

Project (TAHP), 2012). The addition of child protection greatly increased the size of the

foster care system (Mink & O'Conner) and established the current US foster care system

as we know it.

Today, children entering foster care often have traumatic histories, are older, and

have multiple issues they are managing (James, 2004). Often, their unstable beginnings

result in developmental, health and behavioral problems which increases their complexity

of care (Holland & Gorey, 2004) making them more challenging to parent. Their special

needs can result in placement instability and increased likelihood of negative outcomes

(Stott & Gustavsson, 2010), and a difficult time finding permanency (Holland & Gorey, 2004).

From Foster Care to Adoption

Children who have entered the foster care system are not always able to return to their biological families. Foster care was intended to be a short-term solution but by the late 1970's, the number of children in foster care had grown to approximately 500,000 (The Adoption History Project (TAHP), 2012). At this time, most biological parents maintained their parental rights while their children received care. Thus, these children were ineligible for an alternate form of permanency even if it seemed inevitable they would not return to their biological family. Unfortunately, this meant they would have an extended stay in the foster care system and often would age-out of care and return to their distressed biological family in adulthood (TAHP, 2012). This scenario became a vicious cycle of unhealthy families maintaining their dysfunction through generations of children growing up in foster care (TAHP), never establishing the health it was intended to ensure.

At this time, a Termination of Parental Rights (TPR) was a difficult, lengthy process that seldom occurred. A TPR, a complete severance of legal rights to a child, would only be considered after an extended period with good cause why the child could never return to his/her biological family (The Adoption History Project (TAHP), 2012). Thus, once a TPR was accomplished, and the child eligible for adoption, they have experienced years in the system. Thus they have experienced multiple placements, care givers, are older, and less desirable to potential adoptive parents (Katz, 1999). Many of these children aged-out of care, meaning they turned 18 and were released from the system with no family ties to support them throughout life.

In response to the growth of the foster care system, as well as rising costs of caring for foster children, congress enacted the Adoption Assistance and Child Welfare Act (AACWA) in 1980 (The Adoption History Project (TAHP), 2012). This act required states to focus on establishing permanency through assistance to families to help them to stay together, as well as the ability to seek earlier TPRs (Stott & Gustavsson, 2010) and facilitate adoptions. The goal of the legislation was to implement restrictive time lines so foster children would find permanency faster.

The 1990's brought research on the benefits of permanency and the harm of extended stays in foster care (Katz, 1999), resulting in the 2003 Adoption Promotion Act (APA), attempting to minimize extended foster care by eliminating it as a viable option (US Department of Health and Human Services (USDHHS), 2005). This act also defined foster children over the age of nine as special needs and allowing financial assistance to families upon their adoption (USDHHS).

Foster Care Today

In the last ten years, permanency has become increasingly prevalent in foster care and has been established as the over-arching goal for all foster children. In 2010, of the 408,425 children in foster care, 51% had the goal of reunification, with the remaining 49% pursuing other forms of permanent homes, such as relative custody or adoption (Child Welfare Information Gateway (CWIG), 2012). For each child, the pursuit of permanency is unique, varying from concurrent planning (Gerstenzang & Freundlich, 2005) to temporary foster homes (Stott & Gustavsson, 2010).

      Concurrent Planning

Concurrent planning is a strengths-based approach to minimizing time, multiple

placements, and instability typically found in foster care (Berrick & Foulkes Coakley,

2006). It involves several key elements to promote the child's health and wellbeing. Early

family assessment for reunification is implemented (Frame, Berrick & Foulkes Coakley),

birth parents are provided full disclosure and frequent parental visits to motivate and

engage timeliness in their activities (Frame, Berrick & Foulkes Coakley). The goal is to

shorten the child's length of time in foster care, decrease the number of placements, draw

biological families into the process, and facilitate healthy families and relationships (Stott

& Gersenzang, 2010).

The process of concurrent planning implements a dual plan for permanency.

Workers simultaneously work with the biological parents toward reunification and with

the foster parents on adoption to expedite permanency while meeting the child's best

interests (Gerstenzang & Freundlich, 2005; Frame, Berrick & Foulkes Coakley, 2006).

When a child is removed from the home, typically an emergency placement is obtained

while workers find a committed foster family. At the same time, the biological parent's

social worker develops a reunification plan, with goals for them to provide a safe, healthy

home for the return of their child. While the biological parents work their case plan, the

child is placed with foster parents willing to adopt if reunification efforts fail. Thus, the

child will either return to their biological parents in a timely manner or are already

established in his/her adoptive home.

Concurrent planning is helpful in moving children toward permanency faster,

decreases placement/care giver changes, and facilitates relationship development through

open, honest communication with all parties (D'Andrade, 2009). It allows foster parents

to have open ongoing communication with the child and his/her social workers about

what the future holds while supporting the development of open relationships with the

child's biological family through regular visits and contact (D'Andrade,). It supports

biological parents in facilitating decision making, shared parenting with foster parents,

and relationship development for the child to maintain post foster care (D'Andrade). The

pro-communication and relationship focus of concurrent planning results in better

relationships and quicker achievement of permanency (Child Welfare Information

Gateway, 2012). It is largely viewed as an effective strategy in foster care (Gerstenzang

& Freundlich, 2005).

Traditional Foster Care

While concurrent planning is implemented to some degree in all 50 states, it is not

always a feasible option (Child Welfare Information Gateway, 2012). Katz (1999)

outlined how the simple idea of concurrent planning requires multifaceted casework by

highly trained workers that show attention to detail and timeliness in their work. Katz

(1999) further emphasizes that social welfare workers, agencies and courts need to work

as a team for successful implementation. In Minnesota, for instance, many foster children

have a county social worker, a child protection worker, Guardian Ad Litem, and

sometimes a Child Specific Recruitment worker. They all work together with the family's

agency social worker and the court system to implement a concurrent placement.

Foster care has come a long way since its origination. The Adoption and Safe

Families Act (ASFA) of 1997 and the Fostering Connections to Success and Increasing

Adoptions Act (FCSIAA) of 2008 have helped to find permanency for many children

(Children's Defense Fund, 2011). The Children's Defense Fund (2011) reported the

number of children in foster care, as well as their length of time in care, has been

declining in recent years due to such legislative efforts. While legislative processes have

had a positive impact, approximately 100,000 children are constantly waiting to be

adopted throughout the foster care system (Child Welfare Information Gateway, 2012).

Many are less likely to be adopted as they are older teens with challenging

behavioral issues (Lindsey & Schwartz, 2004). Many state agencies do not have adequate

resources to implement concurrent planning efforts (Frame, Berrick & Foulkes Coakley,

2006). Thus, foster care, and sometimes extended foster care, is the only option. For

these children, foster care workers focus on ensuring placement with capable parents to

care for them and access services for their special educational, physical and mental health

needs (Fox & Berrick, 2007). Once the children are properly being cared for, then the

workers can begin their search for an adoptive family.

Findings by Stott and Gustavsson (2010) indicate that children in foster care are at

heightened risk for negative outcomes due to their lives prior to entering care, losses

associated with entering care, and experiences while in foster care. For children who are

unable to find permanency quickly, placement changes and instability add additional

complications to their already challenging lives (Scott & Gustavsson, 2010). Research by

Van Oijen and Knot-Dickscheit (2011) adds that most children in foster care feel

insecure, have attachment issues, educational difficulties, and have experienced trauma

that causes them to show signs of self-blame, powerlessness, loss and betrayal,

stigmatization, destructiveness, and personality disorders. Their research also indicates

that as little as one change of placement while in foster care increases risk of mental

health problems in adulthood (Van Oijen & Knot-Dickscheit 2011). These findings

reinforce the need for caring, educated parents to help them overcome their turbulent

beginnings and elevated risk factors to live healthy, happy lives.

Challenges Faced by Parents Pursuing Adoption through Foster Care System

Adoptive parents are the primary source of care for children in foster care and

have a significant impact on their success (Cooley & Petren, 2011) but face multiple

challenges in providing care. Children from foster care often have many challenging

behaviors, issues with attachment, and other developmental, educational, and/or cognitive

delays (Steele, Hodges, Kaniuk & Steele, 2010). For this reason, foster parents participate

in extensive training to learn the required skills to facilitate positive growth and

development. For example, in Minnesota, potential foster care parents are required to

complete a minimum of 18 hours of required training as well as complete the lengthy

home-study process (MNAdopt, 2012). The process is time consuming, challenging and

demanding as material covered ranges from child development to sexual abuse and

trauma (MNAdopt). It can be heavy and difficult learning that takes a lot of time and

energy.

Needs of Adoptive Parents

Research indicates that parents have multiple needs in pursuing foster care

adoption. Foster children have various risk factors which put them at an increased

likelihood of ongoing mental health, social and educational problems (Holland & Gorey,

2004). Hughes (1999) emphasizes the need for specialized education, support and

treatment to be provided to parents to address the special issues in foster care adoption.

Their challenging behaviors, thought processes, special medical needs, adjustment and

attachment difficulties make transitions difficult for them. Upon entering care, they are

placed in environments where their previous coping skills are no longer helpful and can often cause more difficulties.

Research by Cooley and Petren (2011) found quality training, resources, support and a strong desire for personal learning are required to be successful parents to foster children. These findings coincide with those of Dorsey et al. (2008) indicating adoptive parents need adequate education and support to assist children from the child welfare system in coping with their turbulent history and multiple losses. Having this knowledge will help adoptive parents to facilitate the process of healing, adjustment and attachment post-placement with increased success (Dorsey et al., 2008).

Training/Education

Training and pre-adoptive services help adoptive parents address any issues they may have and to prepare them for upcoming challenges. It gives adoptive parents skills and techniques to improve their ability to assist in the repair of past damage, attachment, and relationship building (Hughes, 1999). Findings by Dorsey et al. (2008) coincide with those of Cooley and Petren (2011) illustrating the need for solid, quality training for parents to ensure needed skills. Corresponding research by Fox and Berrick (2007) indicates that training directly relates to outcomes of foster children. Parents need an understanding of how to foster wellbeing, curb negative behaviors, provide positive reinforcement, and implement redirection techniques (Cooley & Petren, 2011) for positive outcomes.

Resources

Adequate training is most effective when it is combined with sufficient resources. Cooley and Petren (2001) found "training does not prepare families adequately to the

things they experience" (p. 1971) and it is important for parents to know how to use

resources as well as understand how the system works. Supportive services are often

available but can be challenging to find and access. For instance, in any given

government social services program individuals need to understand how to advocate to

get needs met (Cooley & Petren, 2011). Often parents have to know whom to contact,

where to go for additional information, and how to navigate the system to access

additional services. Training can provide parents with the foundational knowledge, but

for many it is a challenge to identify and access needed resources (Cooley & Petren).

Research by Holland and Gorey (2004) suggests that due to their troubled pasts,

foster children are likely to have problems in school, social difficulties, and distorted

personal perceptions. The responsibility of ensuring foster children needs are met lies

primarily on the adoptive parents who may or may not be prepared to navigate multiple

systems to access needed services. For example, some families live in communities

without the needed services, others have access but lack transportation, and others simply

struggle to locate what they need in a complex system (Cooley & Petren, 2011). Often

parents need assistance from others to learn how to access resources and advocate for the

foster child's needs, which is where experienced supportive workers and peers are

helpful.

Finding and accessing resources are essential, but it is important to note that once

a foster child becomes an adopted child, resources and assistance change. Every child in

foster care qualifies for medical assistance until adulthood, but they vary on the level of

additional help they and their family receives. According to the Minnesota Department of

Human Services (2012) each child in care the foster parents receive a maintenance

payment between $650-$775, and additional supplemental difficulty of care payments for

children with medical, physical and/or emotional problems, ranging from $7-50, monthly,

with yearly increases. Additionally, a child from foster care receives benefits through

his/her county including child care assistance, respite, and transportation as well as

managed care services through child protection (Child Safety and Permanency Division

(CSPD, 2006). Funding and services are provided to families to ensure their child can

receive his/her needed services. However, upon finalization of the adoption, monthly

maintenance is reduced to between $247-$337 monthly per child, with no annual cost of

living adjustments (Child Safety and Permanency Division (CSPD, 2006). Supplemental

payments are also reduced and limited families continue to qualify for additional post-

adoption services like child care, respite, and family counseling (CSPD, 2006).

Additionally, county workers, who once assisted adoptive parents with support in

decision making and accessing needed resources are removed from the case post-

adoption (CSPD) and no longer a resource for them as an adoptive parent. Thus, adoptive

parents lose some of their financial assistance, supportive services, and worker assistance

and support upon finalization.

Support

Research by Holland and Gorey (2004) coincides with the findings of Cooley and

Petren (2011) indicating adoptive parents need ongoing support to meet the challenges of

parenting a child from foster care. It is a great help if adoptive parents understand the

foster care system and what they can expect in the process (Cooley & Petren, 2011).

Also, knowing what resources are available through the child welfare system and

community as well as how access services and advocate for their children is important for

the success (Cooley & Petren). For these reasons, networking is essential for parents

adopting from foster care. Communication skills and being able to talk with social

workers, providers and other parents who have adopted from foster care who understand

or have had similar challenges and can suggest resources or techniques is highly

beneficial. It also helps parents feel less alone and like their situation is more

manageable.

　　　　According to research by Gerstenzang and Freundlich (2005), because foster

children are at an increased risk for problems, adoptive parents' perceived competence is

directly correlated to success. It is important adoptive parents feel like they have the tools

and support to help their children from foster care (Cooley & Petren, 2011). Having

confidence and a positive attitude are just as important as having the proper tools for

success; all three are important when taking on the challenge of parenting a foster child.

　　　　As illustrated by Cooley and Petren (2011), the previously outlined needs of

training, resources and support are essential from the success of parents adopting children

from foster care. It is highly beneficial for parents to make connections, learn about

resources, and establish support networks in the process of receiving training (Holland &

Gorey, 2004). Training can also help in the gathering of resource information and to

make connections in the community, in effect better equipping adoptive parents to access

resources to help their children post adoption.

Conceptual work

　　　　The Systems Theory is a general approach to human interaction in mutual

relationships and different interconnected groups (Allen-Mears & Lane, 1987). It holds

that human behavior can only be understood within the context of the individual and

his/her interactions with other variables, called systems (Germain, 1979). Zastrow and

Kirst-Ashman (2010) define a system as "a set of elements that are orderly and

interrelated to make a functional whole" (p. 30). Systems have relationships with other

systems through which they are interpersonally connected (Zastrow & Kirst-Ashman,

2010). As illustrated by Greene (2008) a change in any member of a system it affects the

system as a whole which in turn influences the other system members (Greene, 2008).

The strong influence systems have on individuals' biological, social, and emotional

perspectives (Germain, 1979) make it the ideal conceptual work for this research paper.

        While systems act independently, individuals interact with and are part of,

multiple systems and often subsystems, a smaller system within a larger system (Zastrow

& Kirst-Ashman, 2010). A macro system is the largest type of system, including church,

school or community (Kirst-Ashman & Hull, 2009). Mezzo, moderately sized, systems

include an individual's extended family, work and/or social groups, and the smallest,

called micro, systems consist of immediate family members or a significant other

(Zastrow & Kirst-Ashman, 2010). Each of these systems is open or closed in nature, has a

structure/organization, and members have roles to play within them (Greene, 2008). For

example, a macro system such as a church is an open system allowing new members to

the congregation at will and the priest has his role to play, as leader, just as does the

congregation. A smaller, micro, system, such as a family, is a closed system with

members having specified roles and new members seldom taken in.

        All systems are goal seeking and self-regulating in nature (Broderick, 1993). As

illustrated in Zastrow and Kirst-Ashman (2010), within a system, all members are

interdependent. They rely on each other to develop and maintain equilibrium and

function efficiently (Greene, 2008). This is why dysfunction affects the entire system when present.

Family systems are a key aspect of the foster/adoption dynamic as foster children can be a member of multiple family systems. Research by Broderick (1993) indicates family behavior begins to affect an individual at birth and has continuous impact throughout one's life. Greene (2008) illustrates that communication and interaction between family members intensely shapes thoughts, feelings, and actions of the individual producing the development of patterns of interaction. Thus, birth family problems are strong predictors of challenges children will face later in life (Holland & Gorey, 2004) so even if children are removed from a negative environment, their thoughts, feeling and actions have been shaped by their previous environment and will greatly influence them moving forward.

In this way, systems theory is the ideal conceptual work for the foster care/adoption relationship. The dynamic is composed of multiple systems, and family systems, that interact and are interconnected to influence development (Greene, 2008) and behavior. While the foundational systems of foster children may have been less than ideal, systems do not remain stagnant. Systems are constantly growing and developing, similar to the foster/adoption relationship. Upon receiving a healthy environment, stability and support, foster children can learn, grow, and develop in a more positive manner.

METHODOLOGY

In order to gain a better understanding of the challenges parents face in the adoption of foster children, a qualitative research design was used. Eleven licensed social

workers who work with foster care/adoption were interviewed to gather their perceptions.

A semi-structured interview schedule was used with simple open-ended questions. These

questions were developed to allow for the deep probing of topics as well as the

exploration of additional concepts presented by the interviewees. This type of research

was chosen as it is optimal for gathering the in-depth, complex, and rich information

(Berg, 2009) desired.

Interview Schedule

The interview schedule covers the domains explored in the literature review. The

open-ended questions addressed the identified challenges while giving room for

participants to explore additional areas of concern for parents adopting foster children.

Prior to use, the interview schedule was pretested on multiple social workers in foster

care/adoption and was found to be interpreted as intended.

The interview schedule was developed by this researcher to be reliable and valid.

The schedule was as follows:

1. What are the challenges you see in the foster to adoption process?

    a. For parents pursuing adoption?

    b. In the concurrent planning practices?

2. Do you see challenges from the system getting in the way of adoption?

    a. Characteristics of the child getting in the way of adoption?

3. What do you see as the needs of parents pursuing adoption?

    a. Training?

    b. Resources?

4. Are there specific attributes needed by parents wishing to adopt through the foster

   care system?

5. When parents are pursuing the adoption of foster children, how well prepared are they

   for the challenges they face parenting their special needs?

6. How well prepared do they believe they are to parent the special needs of his/her

   foster child?

   a. Upon beginning the process?

   b. At the time of adoption?

7. What do parents need to do to become ready to parent the special needs of their foster

   child?

8. Do you think your training process is sufficient? If no, what would you change?

9. Can you recommend other foster care/adoption workers that I can contact that may be

   willing to participate in this research project?

Validity & Reliability

Validity refers to the level of accuracy in the measure of the data (Monette,

Sullivan, & DeJong, 2011). The interview schedule provided face validity and content

validity in that it makes sense and uses terminology consistent with previous foster care

and adoption research.

Reliability, which is directly linked to validity, refers to the interview schedule's

ability to yield consistent results (Monette, Sullivan, & DeJong, 2011). The interview

questions were considered reliable in that they are stated simply, clearly, and use

terminology consistent with the profession.

Participants

A sample of convenience was obtained for this research project. Eleven social workers employed in foster care/adoption were interviewed. An enquiry email was initially sent to individuals listed on the state adoption exchange, an online database, used to convey information on Minnesota foster care. The individuals were listed as general contacts on the site as resources to gather information on waiting children in Minnesota. The enquiry email designed to explain the researchers MSW research project, described what was involved in the interview process, convey its voluntary nature, and enquired about participation was sent to respondents. Those who agreed to participate sent a response email and scheduled an interview with the researcher at his/her convenience.

During the interview process snowballing was used to gather additional participants. During the interview process participants were asked if they could recommend fellow social workers with relevant experience who may be willing to participate in this research. Referral information was gathered and the potential participants were contacted via email as previously illustrated.

The eleven interviewed participants possess varying ranges of experience. Their knowledge was derived from two to thirty-plus years working with Minnesota foster care/adoption, in one capacity or another. Additionally, several participants have adopted through the foster care system or were themselves children in foster care. All participants are currently employed in some aspect of foster care adoption, including adoption social worker, child recruitment, adoption training, and agency director. The participants are employed in five private agencies, across Minnesota, and several counties in the Twin

Cities Metro area. They were selected from various locations and agencies for the

purpose of gathering an extensive view of the subject in Minnesota.

Human Research Protection

Federal regulations were followed in this research project to ensure ethical

practice and the protection of participants (Monette, Sullivan & DeJong, 2011). To

comply with this, the interview schedule was reviewed and approved by University of St.

Thomas Internal Review Board (IRB).

This research project was designed to be low risk and implemented a number of

safeguards to protect participants. The enquiry email asked about willingness to

participate in a MSW research project consisting of a private interview regarding

challenges of parents adopting through foster care. It was relayed to potential participants

that participation was voluntary and was designed to ensure privacy. Participants were

informed that their name, participation or interview information will be kept strictly

confidential.

All information and data were stored in a password-protected file, on the

researcher's password-protected computer, and only accessed by the researcher to ensure

privacy. Interviews were digitally recorded and then transcribed by the researcher. The

transcribed material was compiled, and recordings deleted to prevent voice recognition. It

was stored in a compiled format to eliminate participant association and will be kept until

June, 2013 to ensure project completion and then destroyed.

Data Analysis

Eleven individual interviews were privately conducted and digitally recorded.

After the completion of all interviews, the recordings were then transcribed by the

researcher for easier analysis. The transcriptions were reviewed multiple times by the

researcher. Open coding was used to organize and interpret data (Berg, 2009), and assist

in the identification of patterns or developing themes (Monette, Sullivan, & DeJong,

2011). After the identification of general ideas and themes presented in the data, focus

coding was used to further review and simplify the findings (Monette, Sullivan, &

DeJong). This process organized data into refined, mutually exclusive categories (Berg,

2009). These categories were directly linked to those found in the literature.

Limitations

This research has several limitations. The time constraints of the school year have

limited the project to nine months resulting in a small sample size and low

generalizability. The lack of randomization in this sample of convenience and

snowballing further limit its generalizability. Results are further limited as all participants

were gathered from a local pool of social workers in Minnesota, limiting data due to

demographic similarities.

Researcher biases also contribute to the limitations of this study. As an adoption

social worker who has worked with foster children and adoptive families, this researcher

has developed her own opinions about the challenges parents face in pursuing adoption

from foster care. Additionally, this researcher has facilitated foster care trainings and has

ideas about what does and does not work in the process. This researcher has experienced

varying degrees of collaboration from county social workers in Minnesota which has

influenced this researcher's views of that population.

This researcher has controlled her biases through acknowledgement and

awareness. In conducting and analyzing research, this researcher intentionally looked for

contrary information to her perceptions of what she thought she would find. Additionally, this researcher used probing questions to ensure understanding during the interview process as not to infer her ideas, meanings or opinions on the interviewee.

Advantages

There have been multiple advantages to this research project. The exploratory design allows for in depth exploration on challenges in foster care/adoption because of its qualitative nature and use in-depth interviews. Another advantage is the ease in gathering participants. Through emailing workers listed on the state adoption exchange the researcher received responses from a majority of those contacted, with most of them willing to participant. Additionally, through snowballing, participants offered supplementary names and contact information during the interview process. Participants were gathered from five agencies statewide plus three Metro counties in Minnesota. This allowed the researcher to gather pervasive views on foster care adoption and challenges facing parents throughout Minnesota.

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Findings

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After analyzing the collected data, specific themes were identified as challenges to the adoption of children from foster care. Respondents included challenging themes of desirable parent qualities, the need for quality training/education, needs of resources and support, issues in concurrent planning, as well as systematic challenges and those brought by the foster child. Specific quotations from the participants were found to support these themes.

Parental Qualities

Respondents discussed multiple parental qualities that are beneficial for parents adopting through the foster care system. They identified that parents need to be open-minded, understanding, flexible, structured, patient, committed, supportive, and able to communicate well. Additionally, respondents said that it is important to have a sense of humor, positive attitude, and a secure sense of self.

Open mindedness. Respondents said that adoptive parents pursuing the adoption of children in foster care need to have the desire to learn about the reality of children and the program and to be realistic of their needs. Adoptive parents need to be open minded to new ideas and to change the way they think about parenting, as it will be different from the way they parented their biological children. They need to be willing to access services, to learn appropriate discipline and parenting techniques for re-parenting hurt children based on the child's history and needs. One respondent said

> It is important for parents to come into this with an open mind, especially those with previous parenting experience. It is important for them to understand that this is not going to be the same. [Children from foster care] are not going to respond the same to the parenting techniques that [they] used with their [biological] children because they are coming from a completely different place. [Foster children] don't understand that they are safe, that they are loved, and that they are in a permanent place.

Respondents reported that adoptive parents need to "be open to getting help, support, services, and accessing resources" that they will need for their child. Another respondent commented that

[Parents] need to be open to different ideas and possibilities and willing to try

different things… one size does not fit all, so what works for one kid is not

necessarily going to work for another.

Understanding. Respondents said that parents need to be understanding of the

complexity, challenges, and realities of the children and process. Parents need to

understand that they will not know everything about the process or adoption, but are able

to learn on the way. Parents need to realize that in this type of adoption, there may be

mostly challenging times. One respondent said

…families come in [to the program], a lot of them don't have a realistic

understanding of the children that are available. I meet a lot of frustration in those

families because they aren't able to adopt the healthy, mild-needs four-year-old

that they thought.

A respondent remarked that "…many families do not understand the magnitude of the

needs of the [children in foster care] so that's a learning process for them." Another

respondent added that expectations are an influential challenge. "What [adoptive parents]

are expecting of the child's development or behavior, and what that is going to look

like... then when they say they are not able to [parent], expectations are one of the

biggest things there." When they expect one thing and get another, their expectations are

getting in the way of their potential success. Another respondent said

Those first few months can be a real roller-coaster ride [for the adoptive parents].

If they are lucky, they may have a honeymoon period, but within about two

months usually the children are beginning to feel safe enough to do some testing.

I try to always equate testing with the growth of intimacy so that they can flip that

and see that this is part of the natural process of developing the relationship.

[Foster] children are less regulated and sometimes more intense and more

frequent with their testing behaviors.

Flexibility. Respondents said that adoptive parents need to be flexible. They need

to be able to adapt to situations and to adjust parenting techniques according to the needs

of the child. One respondent commented

[Adoptive parents] need an ability to roll with the punches and be flexible. If

everything in life has been perfectly controlled, the lawn in manicured, the dog is

perfectly groomed, and all that stuff. Then adopting special needs [children] is

really going to cramp [their] style because life will not be predictable.

Respondents emphasized the need for flexibility. One respondent said "The child [has

behavior that is one] way and working on [certain areas of improvement]… so [adoptive

parents] have to be flexible. [Progress] may not go the way [they think it should]."

Adoptive parents need to be flexible in their expectations. Another respondent said

Rigidity in [adoptive] parents, whether it is past parenting strategies of "this

worked for my birth kid," or the sort of expectation of, "it's my way or the

highway," those are not helpful… Yes, [children] need to have limits and

structure, and a lot of love and nurturing and compassion goes along way, but

with that, flexibility.

Respondents remarked on the need to parent according to the needs of the child. One said

it is important "to come at a situation from a new angle, and to learning how to parent

[children from foster care]… that is really important."

Structure. Respondents said that parents need to be able to provide a structured environment for the child, to be able to follow through when they say something, and to provide the consistency that the children need. One respondent said

It is important for parents to provide structure. [Foster children] need significant boundaries. They need to see what the expectation is and then… [parents need to] follow through on it. If a rule or guideline is set, [parents] need to follow through on it so [children] can see [the parents] really mean it.

Communication. Respondents said that adoptive parents need to communicate their needs as well as those of the child. They have to be able to advocate and educate others on how to work with their child.

A respondent said "it is helpful [for adoptive parents] to be good communicators, in terms of working with other [professionals] who are involved in the case. That's so they can be supported and given some direction in making [the adoption] a success." Another respondent commented

As part of the parent process… they need to be willing to be a strong advocate for the child… and themselves… A lot of times adoptive parents end up being community educators. Not just about adoption, but the special needs that the children might have, helping to educate people on the best ways to work with their child, teaming with teachers or the scout leader or whomever their child might be coming into contact with.

Patience. Respondents said that adoptive parents need to have patience and be able to be comfortable with delayed gratification and to find fulfillment other places as parenting does not always provide the satisfaction. One respondent commented

These [children from foster care] are not going to be like "oh you saved me, I love

you forever." [Adoptive parents] are not going to get that... [Children from foster

care] are going to fight, test, and push [adoptive parents] to see if they really mean

what they say. [Adoptive] parents need to be able to find their fulfillment

elsewhere and continue to be filled in whatever way works so that they are able to

continue to pour [their energy] into the children. Patience is really key.

Actively Engagement. Respondents said that adoptive parents need to be active

in the process. They need to fully participate in training and the matching process.

A respondent said that adoptive parents "need to want to learn more. Some

[adoptive parents] want to walk into the agency…get done the minimum requirements to

move forward, have the hardest time thorough the process." Another said that adoptive

parents are encouraged "to be very engaged in the process… Ideally [as a worker] I am

tuned into all families, equally, but people who are more active and putting themselves

forward, it's easier to pay attention to them."

Commitment. Respondents said that the adoptive parents need to be fully

dedicated to the child once they make the commitment to move forward in adoption.

Adoptive parents need to be realistic as well as committed to doing what needs to be done

to help the child and to put the child and their needs first. One respondent said

Families [need to be] able to make a commitment and stick to it, no matter what.

Some families… are just able to do that. When they say they are going to do

something, they are going to do it no matter what, how challenging or frustrating

it gets. They are going to make it work.

Multiple respondents talked about commitment. One respondent said that parents "…

realized that this has to be a life-time commitment… because these [children] are so

excellent at pushing people away or running away emotionally themselves." Another

added that parents "… need to be realistic, that goes back to that these [children] need

more than love and a warm place to sleep." Another respondent emphasized that these

[children from foster care have a] high risk for difficulties… it's very challenging" and

adoptive parents need to be able to make that commitment and stick to it.

A respondent also remarked that adoptive "parents have to be committed to the

child above everything else… above their reputation as being the nicest, most courteous

person in the world…" Another said that when things get difficult they have to be able to

address issues with their family, peers, or professionals and tell them "Look, this kid

needs this, and I'm sorry if I am offending you, but I really need you to get what I'm

talking about. … My child comes first. They need this, and I need you to get that."

Positive attitude. Respondents said that parents need to have a positive attitude

and a sense of humor. They need to be able to reframe negative talk and be optimistic.

Parents need to be able to gauge success by looking at the child's progress and not

comparing them to other children.

Respondents reported healthy parenting skills are important for success. One

respondent said "Humor is important, the ability to reframe things, laugh at yourself and

at things that others may not think as funny." Another said "Seriously, if [adoptive

parents] couldn't [laugh] they would absolutely go crazy. They have to be able to laugh at

something that none of their friends will think is funny." Another respondent said

…to look at where the child is right now, and gauge their sense of satisfaction as a

parent or success in the job [they] are doing with the [child] by comparing the

child to themselves, rather than all other ten year olds…

Secure sense of self. Respondents said that adoptive parents need to be secure

with themselves and their history, and to be self-aware and connected to their emotional

and mental wellbeing. Adoptive parents need to have a strong marriage and family to

handle the challenges that arise bringing a special needs child into the family.

Respondents said that parents need to have "good ego strength. They need to have

some healthy attachment patterns themselves because [foster children] are not able to

give back…" One said "Adoptive parents need to be emotionally and mentally healthy

themselves." Another respondent commented

Successful families tend to have had some sort of challenging life experience

themselves… That can be a big variety of things… loss of someone, or experience

of some sort of abuse or neglect themselves… [it could be] a whole variety of

things, but something that required them to have to use their own resources and

overcome a challenging situation. Families who have that sort of experience and

have successfully… come to a good place… they can often be good advocates for

the children that they are taking in.

Ability to not personalize behavior. Respondents said that adoptive parents need

to be able to use the child's history to help understand behavior. Adoptive parents have to

understand that the child, his/her behavior, and ability to cope are a result of their

previous environment, not the current situation. It is challenging but, adoptive parents

must not interpret behavior or acting out as being directed at them. One respondent said

An acronym that I teach parents is, "QTIP: Quit Taking It Personally." It's easy to

say but very hard to do when you have some raging kid in front of you, but

because [foster children] are coming kind of fully loaded with stuff, the only way

they are able to work thorough things is with the people in front of them. Their

birth parents aren't there any longer, other people from their past aren't there any

longer, and the people that are in front of them are their adoptive parents so a lot

of the behaviors the [children] are working though have nothing to do with them.

Yet it's the parents that have to bear with the brunt of it and they have to be able

to not personalize it…

Family Composition. Respondents reported that there are multiple factors

adoptive parents possess that can influence their ability to adopt foster children.

A respondent said that sometimes adoptive "parents own factors that relate to

what kind of limitations they might have, and what kind of [children] they are open to."

Another respondent remarked

Families who have younger children in their home can sometimes have a

difficulty with this program. There are so many dynamics in bringing a foster

child into a home that already has children in it. A lot of times the families that

have more [children] in their home already end up waiting a lot longer to find a

good fit because a lot of foster children are not appropriate to be in the same

household with smaller children.

Preparation. Respondents said adoptive parents need to have adequate

preparation for the placement and adoption of a child from foster care. One respondent

said

Challenges that come to mind for parents, initially… lack of preparation. I don't

think there is really any way to be fully prepared… what that is going to look like,

how it will impact the family, when that child transitions….

Multiple respondents commented that adoptive parents "are never going to be [fully]

prepared. It is one thing to know this stuff, intellectually, and it's another to experience it

in the living room while standing in their pajamas." Another respondent said

…a family that is really interested in learning, and understands the importance of

it, they are willing to go above and beyond... do a lot of reading and research...

Those families are the ones that are most successful… whereas the families who

enter in with the attitude that they will just do… what they are told to do. [They

feel they] were meant to parent, and it will just come naturally. [These adoptive

parents] are less prepared and more overwhelmed when they see the kinds of

significant behaviors [children from foster care] have.

Training/Education

Respondents discussed a variety of training/education needs adoptive parents

have. They identified the need for adequate training, including foundational knowledge

on a variety of topics. Respondents also discussed worker roles, and the benefits of

participating in training. They reported that people have many reactions to training, some

become overwhelmed and scared away, and other find it really resonates with them and

they move forward. For those that move forward it is important that they are willing to

work, learn, and grow in the process.

Benefits of training. Respondents said that training gives adoptive parents factual

information and a basic understanding of the waiting child program, available children,

and their issues/needs. It is a format providing education and growth for adoptive parents.

Training gives them information about the realities of parenting children from foster care

and to help them decide what types of behaviors they can and cannot handle. It also

provides adoptive parents a means to develop relationships, peer support, to learn about

recourses and advocating for their child. One respondent commented

> We explain the whole process to the family… a lot of families do not know the
>
> system, so we explain that to them. What foster care looks like, child protection,
>
> who the children in foster care are, and all that… for understanding.

A respondent commented that "training is really important, because… too many adults

come into this thinking that all [children in foster care] need is love, and security, and

three meals a day… yes they need all those things, but [adoptive parents] need training

about the realities." One also said "Often [adoptive parents are] glazed over by the end of

training class, or periodically [in class] because it sort of has this effect of scaring them…

a sort of wake up to reality [of their needs.]" Another respondent said

> Families who have more training end up asking for more services because they
>
> know more of what they are getting themselves into and what is needed to
>
> successfully parent the child. More training often will naturally lead to families
>
> being more proactive themselves, being better advocates for more services, and
>
> realizing they need the support in seeking that out.

Topics for training. Respondents said that adoptive parents need training in

multiple areas, including trauma, prenatal trauma and exposure, the effects on brain

development, attachment, mental health issues, effects of abuse and neglect, parenting

special needs, as well as child-specific areas. Adoptive parents also need to be instructed

on specific strategies and how to parent according to the developmental stage of the child and not the child's chronological age. It also teaches the importance of a child's history and the best ways to support and help a child from foster care.

Respondents said that "It is very important to talk to [adoptive parents] about the realities of adoption and the [foster care] program… about the challenges they will face and helping them to see that it's not going to be [an] easy [process]." A respondent also said parents need "training on loss and how that works itself out. [Adoptive parents] need specifics about the special needs of the child they are adopting… so [they] are better equipped to handle things." They need "to understand their history and mental health needs… and the effects of abuse and neglect." Another respondent commented

> [Adoptive parents] have to be intimately aware of the impact of trauma, including
> prenatal trauma, and how that affects children developmentally, behaviorally,
> emotionally, that we have to look at attachment issues… and prenatal exposure to
> alcohol and drugs for the same reasons, because all of these things are actually
> altering the way the brain is developing and organizing itself at young ages and
> stages.

Respondents emphasized the importance of learning and knowledge in these areas for adoptive parents. They said it is really helpful to "understand… how brain development is affected… gives good concrete reasons as to why the children are going to function the way they are." Because of these challenges, a respondent commented that "as the [children in foster care] get older their developmental state may be far younger than their chronological ages" and training helps "people understand that they really have to parent to the developmental stage and not to the chronological age."

Foundational knowledge. Respondents said that different people have different needs in training, however, overall, training provides an opportunity for personal growth and gives adoptive parents the basics on which they can build their knowledge and understanding for the challenges yet to come. Typically, adoptive parents need more training than they think they do, for they require a solid foundation on which to build awareness and understanding.

Several respondents remarked that adoptive parents need a lot of training, more than they think they need. One respondent said that "The training that they get early on, that is [like] kindergarten. That they really need to think about ongoing… learning new concepts, new parenting approaches… as their [children from foster care] go through different developmental stages." Another respondent commented

> They not only need to come to [required] training and participate and think about it, but they need to go to every training there is and ask questions and talk to other families. They need to come to… support groups… and really hear the nitty-gritty of what it is like to live with children who have lived [challenging] lives before they came to their family.

Resources

Respondents discussed the need for adoptive parental resources including services, information, and self-confidence.

A respondent remarked that adoptive parents "have to have some type of resources so they don't feel like they are the only ones [going through a challenging time] or to internalize [the behavior]." Another said that "The [children] are extraordinarily hard… and [parents need] good resources."

Services. Respondents commented that adoptive parents need access to services for their child and family. Their child may need respite care, behavior specialists, occupational therapy, play and in-home therapy. Respondents said the entire family will benefit from adoption-competent therapists, those who understand the attachment, grief and loss, and other issues predominant in adoption, and established resources post adoption.

One respondent reported that "sometimes a lack of appropriate services for the child and the family [can be a challenge] because the system "doesn't build in support the way it should." In Minnesota, foster children who are adopted maintain their medical assistance post adoption, but coverage must be transferred to their new county. Because of this technicality, another noted that "families need to [re-apply for services] in their home counties" which takes time. A respondent said that families "should automatically receive needed services [post-adoption] and not have to apply for this service and that service and then wait for approval."

All parents adopting children from foster care will need various services. A respondent commented "they need … competent therapists with trauma, attachment, grief and loss, and all that stuff, foundations in those to be able to provide the needed services." A respondent also commented that "most… [children] do not have the prefrontal development for talk therapy, so… other kinds of therapy... Attachment based play-therapy or in-home therapy." One respondent remarked that many families can benefit from "behavioral management strategies to make life livable and manageable for both the parents and the [foster children] in the home." Another respondent commented

that "occupational therapists working on sensory integration and regulatory issues [can]

be very helpful" to foster children as well.

A respondent commented "often children go from residential [treatment facility],

where no adult spends more than eight hours a day with them… to being discharged into

a family… and then all of a sudden [parents] are expected to provide twenty-four seven

care." One respondent said that families need "respite care… but a lot of people are

resistant to that." Another indicated "It [is better for adoptive parents to] recharge one

weekend a month, get a break and… then maybe be energized to keep [going], versus

waiting until there is a crisis. Ideally… monthly respite is best for everyone."

Another respondent said that it is important to remember that "mental illness and

damage from prenatal exposure, none of that goes away with adoption." They

emphasized that children and families need these services.

Information. Respondents said that adoptive parents need accurate information

about the foster child's history and biological family so they can fully understand the best

way to proceed. They also need be able to recall the training material to better understand

those needs as well as identify areas in which they may need additional knowledge.

Several respondents remarked adoptive parents need to know "the child's history

to be able to be meet them where they're at." One respondent said adoptive parents need

to know "what kinds of things are in this child's background, what… triggers [they have],

how many loss experiences [they] had, how do they respond to routines, or whatever their

issues might be." Another respondent said that with this information adoptive parents can

identify and access "tools to be able to address [behaviors] right off the bat… even if they

don't have the tools, give them the resources to be able to access the information as the need arises."

Respondents agreed that "Adoption is a lifelong event … as families evolve and children age, different questions or issues may arise… they will need more information." A respondent said "The beginning hours… in classes and meetings are just... the beginning of the big picture." Another commented that adoptive parents need "more training specific to [their] child's needs and to address whatever is happening in their home." A respondent also said that "After time, [adoptive parents] get it more… it's explored in a better way than just in a class… When they go through that experience, or say that I've been through it… and can relate to what is being taught."

Respondents emphasized that adoptive parents need information. A respondent commented "There are several really good web sites… to access online training regarding a multitude of topics. Whether it's things on ADHD, attachment, or sexual behaviors, things like that are available." This information can be helpful as adoptive parents can access it as needed.

Self-confidence. Respondents said that adoptive parents need strength, self-confidence, and hope for the future to handle the challenges they encounter. It takes time but a lot of healing happens in a healthy environment. The adoptive parents' strength is their own resource. One respondent commented

> Self-confidence ebbs and flows forever. Quite frankly, a lot of parents never quite
> think they can do it, but that is an ok place to be because they are responsive to
> help and resources…. It's partly about confidence but it's also partly about getting
> used to it… To readjust to what you expect life to be like going forward.

A respondent also said that adoptive parents "need to have confidence and be realistic" with a foundation of "love [for] their children and [to] do what is best for them." Another respondent said "being hopeful is important because there is a lot of healing that happens in families when [children from foster care] are in a stable place, but it can take a lot of time." One remarked

>…some people are just innately more able to do what they need to do [with the children from foster care], and some people have to think things through a little more… no matter, if they are adopting a challenging child there are going to be things that are going to throw them for a loop. That is the time to reach out… before [adoptive parents] are hanging on by [their] fingernails because by that point it's so much harder for anyone to help. [Adoptive] parents [have to] realize reaching out is a sign of strength and not a sign of weakness.

Support

Respondents emphasized that adoptive parents need support. They can obtain this through comprehensive services, professionals, and peers. Multiple respondents remarked that adoptive parents greatly benefit from established relationships with other families who have adopted from foster care and who have had similar experiences. One respondent said

>[Adoptive parents] really need to be getting good support for themselves and for the child, probably, intermittently, for a life time... Therefore they need to access good and reliable community services, mental health services, occupational therapy, special education, and they need to get support for themselves. Generally the best support is going to be some of the other families who are going through

similar experiences because their parenting journey probably will be a unique

parenting experience to most of the families they are in touch with.

Comprehensive services. Respondents said that adoptive parents are in need of

comprehensive, supportive services for their child from foster care and their family given

the challenges of parenting children from the foster care system. Adoptive parents will

need adoption-competent therapists, respite care, and school services to name a few. One

respondent commented

Mental health support and services for the children is vital. Educational plans, and

therapy for children… having a personal care attendant or a behavioral specialist,

therapeutic services, all of those things are really important and underutilized.

Either parents don't think they need them or they don't know how to access them,

or don't know the questions to ask.

Another respondent added that adoptive parents have to understand that children from

foster care "have a much bigger range of needs and [adoptive parents] need to be able to

easily access professionals who can easily get answers" for the better of the child and the

family.

Peer support. Respondents said that adoptive parents need supportive peers

whom they can ask for help and can relate with during similar experiences. Peers can

provide adoptive parents with ideas on what worked for them, information on locating

resources, and provide a sounding board when adoptive parents just need to talk to

someone who will understand.

Respondents emphasized the need for understanding support for adoptive parents.

A respondent said that "Other people in their support system have maybe fallen away, or

are like 'why are you doing it this way' or 'why don't you parent like this' or 'you're just

letting them walk all over you'." Another commented that adoptive parents need to "be

around a lot of special needs and understand some of the difficulties [adoptive parents]

have and their challenges." One respondent said

> [Adoptive parents] need to… meet other families that have been there, because
>
> when you have a couple special needs children in your home and you go to your
>
> friend's house who doesn't, your friendship changes and that whole support might
>
> change. They really need to educate their extended family about the special needs
>
> of these children also.

Additionally, another respondent commented that when adoptive parents "are having

really low moments, and things get really hard, [it is important] they have someone to

talk to who can really understand where they are coming from and be a support system."

Professionals. Respondents said that adoptive parents need support from workers

and other competent professionals. During training, workers need to challenge the

adoptive parents to go deeper, learn, and grow. Throughout the adoption process workers

support adoptive parents and are resources for them in times of stress. Additionally, post

adoption, respondents said that adoptive parents need competent professionals, focused

on attachment and adoption issues, to work with their children and families to increase

healing.

A respondent said that "Adoptive parents need professionals to work with them

and the child and to support them in their struggles." Another said that adoptive parents

"have to be intentional about who [they] work with, mental health providers, etcetera,

who know this population of [children] because otherwise they can often be worse than

nothing. [Professionals] need to know what they are doing [to help this population]." One respondent commented

> In Minnesota, we have a few therapeutic providers who are very focused on attachment and working on that with families, but I don't think there are enough of those really highly-skilled, attachment-focused therapists and workers available. Families end-up waiting [to get into see them] when they could really be benefiting… right away.

A respondent remarked that "the lack of adoption-competent professionals in the community [is a challenge] particularly in terms of clinical help…" A respondent also said that sometimes families "get clear… inaccurate [help] from a well meaning provider… [that] can do more harm than good [if the professional] doesn't have experience or specialize in these issues."

Concurrent Planning

Respondents with experience in concurrent planning said that concurrent placements are challenging, difficult situations for all involved. A concurrent placement has a different primary goal, that being reunification between biological parent and foster child, not adoption which changes the entire premise of the placement. It is a challenging undertaking for the adoptive parents and child because of the uncertainty of the future. Thus, the adoptive parents are really potential adoptive parents as they need to understand that their adoption is not the foremost objective, but rather an opportunity which may arise if reunification is unsuccessful. Concurrent placements are complex to arrange due to the high level of preparation and accord in implementation. Additionally, copious

communication needs to be established between workers, courts, and families to work together in harmony, and for the best interest of the child, to allow for a smooth process.

A respondent commented that concurrent planning is "a risk" and "a difficult situation" for the child and adoptive parents. One respondent said "It is asking families, emotionally, to do something very difficult… to invest and support reunification, even in situations that they don't feel are ideal… and getting them to do that without sabotaging it because of their feelings for the child."

System. Respondents said that because of the uniqueness of the concurrent situation, typical state contracts do not apply so agencies need to draw up special arrangements with the individual county to implement concurrent placements. Additionally, a concurrent placement places a lot of demands on the potential adoptive parents and they need education and support to be able to effectively assume a unique role in the process.

A respondent remarked that the organization they are employed at has "not had a lot of [concurrent] placements because there [is not] a clear process… because the Termination of Parental Rights has not happened, the state contract doesn't yet apply… [so] there has [to be] some sort of [county] arrangement."

Another respondent commented that "concurrent families have not been provided the kind of education and support that they need, for what it is supposed to be, which meant the number one goal is to support the kid going home" to the biological parents. Another said "Families are not going to find it an easy task."

Adoptive parent. Respondents said not all adoptive parents are capable of managing a concurrent placement as they need to pursue a dual motive, to support

reunification and be available as a permanency resource if reunification efforts fail. It can be devastating to potential adoptive parents when reunification happens, and not everyone has the emotional strength to enter into a concurrent placement with no guarantee of adoption. Additionally, concurrent placements are challenging because potential adoptive parents cannot give the child a sense of permanency that they really need to feel safe and secure.

A respondent commented that one challenge to a concurrent placement is that "families need to [have] a different approach; it is asking some different things from them as far as emotional understanding and their role." Another said "Not everyone can do that." One respondent commented that

> [Potential adoptive] parents kind of need to have a two track perspective, to support reunification… [to] provide stability to the child and help get them to visits with their birth mom or dad… [Birth parents] might even call… and [they] may have moments where [they] are mentoring and giving them information about their children... It's very different … [but] they also still have to have the willingness to adopt.

Additionally, a respondent said that "families struggle with how to approach the children while they are in the home… they can't tell them [they] are permanently [going to stay with the adoptive parents] but they also can't tell them that they are going to be returning to their biological parents." Another remarked it is difficult because potential adoptive parents "invest a lot of time, energy, and emotion into a child… to find out… they will not be able to stay… It's a challenging… because there is so much uncertainty and risk involved."

Child. Respondents said that a concurrent planning placement is a scary process for the foster child as there are so many unknowns. Because the foster child is unable to have that guarantee of permanency, he/she can have more challenging behaviors for there are so many unknowns in the future. One respondent said

> I think the difference with concurrent [planning] is the risk involved and the uncertainty of the future. The kid's behaviors can sometimes be more significant because [potential adoptive parents] can't give them that permanency, which is what children really need, that permanency to know [they] are [his/her] parents, [that] they are going to love [him/her] forever, it doesn't matter what [he/she does] they [have the reassurance that the potential adoptive parents] are going to stay there and [they are] not give up on [him/her]. In this type of placement parents are not able to give them that because it is out of [potential adoptive parents'] control and they don't know what the future will hold.

Systematic Challenges

Respondents discussed several systematic challenges for potential adoptive parents including bureaucratic challenges, financial disincentives, and social workers, inconsistencies in the state adoption exchange, the treatment of parents and the child.

A respondent commented that "the first challenge [to foster care adoption] is an unwieldy child welfare system." Another respondent said "The logistics of just how it all works… is confusing to parents who are not familiar." Another commented that "it is a very messy process… It's just a long and complicated... with a lot of challenges"

Bureaucracy. Respondents said that the child welfare system can be difficult in multiple ways including legislative mandates, elongated paperwork and extensive

processing times. Things like background checks, the home-study process, court timelines, and, if applicable, the Indian Child Welfare Act (ICWA), all can slow child availability. Additionally, courts can be biased, and sometimes rulings do not turn out as one would think. One respondent commented

> When the mindset in the [U.S.] is not supporting higher taxes and better social services, then there is a finite amount of money and a lot of mandated services. A lot of times [government] will come up with… unfunded mandates where a law will be passed and no additional funding for the services that are required.

A respondent remarked that "a challenge [is] that families feel like it takes forever… it doesn't necessarily take forever; they just feel like it does." One respondent said "The slowness of bureaucracy [is a challenge]. Whether that might be over worked social workers or multiple court hearings, those kinds of things… It takes time" Another said "when filing a petition for adoption, [agencies or counties] have to give notice of the hearing to anybody who has ever indicated an interest in the child, relatives, previous foster parents, etcetera, of the proceedings."

A respondent also commented that another challenge is "there are certain things… [adoptive parents] can't control… [like the time] it takes for background checks… how DHS processes the information… or how quickly the [family] is giving information… those things can cause delays in the process." One respondent said "Rulings by the court; sometimes they can make what appears to be some rather capricious rulings based on personal values." Another said "Often courts do not make decisions in a timely manner... and [Native American] tribes, which is another big challenge, they are slow to get things get done."

Financial disincentives. Respondents said that there is also a financial disincentive for adoptive parents to adopt from foster care in Minnesota. Adoption assistance in this state is considerably less than the foster care placement a family receives pre-adoption, and some services are discontinued post adoption.

A respondent commented that "Minnesota… [has] financial disincentives" to the adoption of children from foster care. Another said, "Adoption assistance has a significant dollar amount difference between foster care assistance and adoption assistance… It's almost incentive to keep the child in foster care."

Social workers. Respondents said that many counties do not have enough funding or social workers, thus large case loads are common, response time slower, and time to invest in families limited. In Minnesota, a foster child can have multiple workers and personalities can conflict and interfere with the collaboration for the child. Sometimes workers have differing ideas about the child's best interest or they may be prejudiced against the family or another worker complicating the process. This dynamic can also complicate communication with the family.

A respondent said "I don't know how [county workers] do all of the things that they are mandated to do… It's a lot… [large] case sizes and the degree of their issues… Everyone at the county has more work than they could possibly do." Another replied, "County workers'… case loads are way too big… different paperwork pieces that don't get done as quickly because workers simply do not have time."

One respondent commented on personality challenges. "There can be… personality issues between the foster parent and the primary worker, then some personal

biases are coming into play, and those personal issues work against the fact that this child

will have stability." A respondent said

> Also, [there are] multiple workers and personalities in a case… a child [can have]
>
> a children's mental health worker, an adoption worker and a… recruiter on
>
> [his/her] case…. I think a different mindset and a different view can cause a
>
> challenge… The more workers, you have the reality is that I think you have to
>
> have a plan that everybody… can have a separate agenda.

Multiple respondents commented on these challenges. One respondent said that "some

county workers are hesitant to provide child information to families." Another said in

doing this, then adoptive "parents are not getting the information that they need, in terms

of social and medical histories [for the foster child]" even though the "statute reads that

[adoptive parents] are supposed to get the information prior to meeting the child, but it

doesn't seem to happen that way." Another respondent responded that "It is important

information [and] for some reason there is resistance, but more information is better for

the family."

Competent professionals. Respondents remarked that adoptive parents need

competent professionals, focused on attachment and adoption issues, to work with their

children and families to increase healing. One respondent said

> [Another challenge] is the lack of adoption competent professionals in the
>
> community, particularly in terms of clinical help… I think once families get
>
> [children from foster care] in their homes and are trying to access services and
>
> stuff, they get very clear messages [that are] not accurate and can do more harm
>
> than good.

State adoption exchange. Respondents talked about challenges with the Minnesota state adoption exchange, a web site devoted to finding permanency for children in foster care. Many children are not listed when they are available for adoption. One respondent said

> The state adoption exchange lists all of the children that are available for adoption through the foster care system. There are a lot of flaws with it. A lot of the smaller counties, around the state, are not educated about how the system works, about listing the children on the web site and as a result there are a lot of children out there who the workers… are unaware of.

A respondent commented that "families in home-study say 'there is a crisis, there are four hundred waiting children, ninety of them are on the state adoption exchange, what about the rest?" Another said that unfortunately, social workers do not "know who they are [due to system] inconsistencies in posting." One respondent commented that in Minnesota, "there are probably four people… whose job it is to figure out who those children are… and still [there is] no information available."

Treatment of parents. Respondents said that adoptive parents are not always treated as part of the team by workers, even though they are the child's primary care taker and advocate. One respondent commented

> I think one of the hardest things [for an adoptive] parent… is they have a ton of responsibility for the child and almost no power. While we give lip services to having them be part of the team, I don't think they are treated as part of the team a lot of the time…

Treatment of child. Respondents said that foster children should be considered and treated as the primary client and their best interest needs to be first. Additionally, society holds foster children at second or third class status amplifying their challenges for they are seen as substandard.

A respondent said "... so much of what [social workers] do, the paperwork, generates revenue, and that's a sad reality. [Workers] don't have time for clients, because [they] are so busy… It sounds dismal, but [the system] has lost the focus of the children." Additionally, a respondent said that "the second or third class status of children who are waiting for families is a challenge because they do not get good services. They don't get good support." Another said that children in foster care "get substandard care… because their social worker is not as invested as a parent is." Still another respondent commented

> Children get [brought into] the child welfare system and [have additional] damage [done] to them once [taken into care], way beyond what happened to them in their biological families. That is a child welfare system issue, not as a bad kid, because the children end up [struggling].

Child Challenges

Respondents identified multiple challenges are brought to foster care adoption by the children in foster care, including their history, desire to be adopted, biological family, issues/needs, and adoptive parent's lack of preparation for the placement of a foster child. One respondent commented

> The children are really… hard, [the child welfare system] has some profoundly damaged children, there is no question… but [the system] has profoundly

traumatized [them too] … it goes beyond what they have experienced in their

biological families.

History. The foster child's age and previous experiences can be a challenge to

him/her finding permanency. Depending on his/her life events, he/she may be more or

less open to the idea of adoption or family.

A respondent said that the challenges a foster child brings "depends on history,

how old the child is, and if the child has lived with his/her biological family for a long

time." A respondent remarked that children in foster care "may or may not have a harder

time understanding what it means to really be a part of a family and to have a family"

based on previous experiences. Another respondent said

A lot of the children that are in the [child welfare] system have already been

placed in pre-adoptive homes and then have had those placements disrupt.

Beyond that, a lot of these children have had multiple, multiple placements,

beyond what should ever happen for a child… That plays a huge role in their

ability to be open to entering in to an adoptive family because it has been proven

to them time and time again, that they cannot trust adults. That nothing is certain,

nothing is permanent and they internalize that. [This is] especially [true] when

entering into a pre-adoptive placement where the [foster child] is told that this is

[his/her] forever family, [he/she] are not going anywhere, and [the adoptive

parents] will love [him/her] forever. Then it doesn't work out. It makes it much

more difficult for [him/her] to trust that adoption is what they want because they

have already experienced that and it didn't work out so well for them.

Desire to be adopted. Respondents said that regardless of the situation with the biological parents and their reasons for coming into the child welfare system, children in foster care always want to return to their biological parents. They are devoted to them because they are their biological parent and many cannot see beyond this desire, which can be a big challenge to adoption. Additionally, many children in foster care do not have the ability to see anything beyond the present and have a hard time looking toward the future. Also, children in foster care can be completely against the idea of adoption but once they understand the realities of adoption, which social workers strive to help them understand, they can become more open.

A respondent said foster "children and teens not wanting to be adopted is a big challenge." Another said "From a child development perspective, the [foster children only] see the here and now. [Most of them] don't have the ability to look long term... all you can do is talk to them… make sure they have all of the information." Still another commented that "attitudes toward adoption is a really hard challenge because [the foster child] has been given no reason to believe that it will work out, given their birth family history and then their experiences in foster care." Another respondent remarked

> A lot of times [foster children just say they] want to go back to [their biological] mom or dad, point blank. They don't want to be adopted, [they] don't want to talk about it, and [they] don't want to think about it. They are not doing it. In those situations, you can make them go to every [matching] event [to meet adoptive parents] and you can talk to them… but if they're not on board with it… you can't do it. Part of what I am trying to do is to try and get them to compromise, so that [the foster children] know that adoption is not replacement. The reality is that

even when TPR occurs, that doesn't take away the memory, legally that's changed,

but mom and dad and grandpa, whoever that relative, is still there… Adoption

doesn't replace any of that, if anything it's in addition to what [they] already have.

I think when that is understood, and you have to say that over and over again, but

eventually you get them to get to a place where they really believe [it] and know

that [they] don't have to pick one over the other. [Foster children] don't have to

confuse that loyalty.

Biological family. Respondents said that it is important for workers and adoptive

parents show respect for the foster child's history and biological family. One respondent

said

One huge thing I see… is talking bad about birth family. The… history is there,

and you got to know that it's unproductive to speak negatively about [that]

because that's sensitive to that child… I've had that happen, situations where the

child is ready to make the transition to an adoptive home, but in the process…

[they] completely shut down… and became closed in the name of loyalty to the

birth parent [because of negative talk]…

Parents' lack of preparation. Respondents said that it is hard to match children

in foster care with adoptive parents when the populations are not easily compatible. Many

adoptive parents come to the foster care adoption with children already in their home, and

they cannot always be open to the realities of the children in foster care who are

available. For example, some children in care have experienced sexual or physical abuse

and may not be able to be in a home with other children, or may need around the clock

supervision if they are around other children due to their behaviors. Additionally, after

placement, testing behavior begins by children from foster care for they need to test the

waters and see if adoptive parents are going to reject them or not. The behaviors can be

challenging for the entire family, but through training and support, adoptive parents can

be more prepared to handle the challenges. One respondent remarked

> Foster care has older children, particularly teenagers, who need families, and then
>
> we have a population of families who prefer babies and younger children. It is
>
> like two inverted triangles where [foster care] is top heavy with children who are
>
> older or in sibling groups and available families… open to younger [children] or
>
> smaller sibling groups of like two, who are not as hard to place.

Respondents said that a foster child's "behaviors after a placement can definitely be more

than a family thought." One respondent said, "Yes, the children [in foster care] are totally

screwed up… but children don't disrupt placements, adults do. It's not because [adoptive]

parents are bad, it's because [adoptive parents] are not prepared, [or do not have] the

right information [or the] support they need." Another respondent commented

> [Adoptive parents] can never be fully prepared for the needs of the child that is
>
> going to come into their home... Every child is unique, has their own experiences,
>
> their own interpretations, perspective of what has happened to them, and they all
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> react and cope in their own way… [Adoptive parents] are never able to be fully
>
> prepared for that. That being said, certainly they can be more prepared versus less
>
> prepared.

Discussion

Research findings indicate that the topics covered in the literature review are not

necessarily barriers to adoption, but present more like significant challenges for adoptive

parents. The better prepared adoptive parents are able to understand and embrace the areas the greater the likelihood their success with foster care adoption.

Respondents were able to elaborate on all of the areas covered in the literature review, including adoptive parents need for adequate training/education, support, and resources. They also touched on the challenges of concurrent planning, and those brought to the process by the foster child and the child welfare system. Respondents also elaborated on desirable parental qualities for adoptive parents that are needed to facilitate positive outcomes. Those discussed included multiple characteristics including the ability to be open minded, understanding, flexible, good at communication, patient, have a positive attitude, and secure sense of self to name a few. Some of these qualities were discussed minimally in the literature, but this research has compiled a much needed list.

Needed Parental Qualities

Respondents talked at length about multiple characteristics needed by parents to be successful in the adoption of children from foster care. Desirable characteristics include open mindedness, understanding, flexible, structured, good communicators, and patient, actively engaged, committed, positive attitude, secure in their sense of self, ability to not personalize behavior, and openness to learning and getting the training/education they will need. Areas can be a challenge for adoptive parents who are not naturally inclined to these behaviors or struggle with them in some way.

Literature on the adoption of foster children talks about many of these characteristics. A quality like the need of adoptive parents to be committed is commonly covered in the literature and rather obvious because adoption is about making a lifelong commitment to a child (Askeland, 2006; Children's Defense Fund, 2011; Child Welfare

Information Gateway, 2012; Child Welfare Gateway, 2012; Cooley & Petren, 2011;

D'Andrade, 2009; Doresy et al., 2008; Festinger, 2002; Fox & Berrick, 2007; Duerr

Berrick & Foulkes, 2006; Gerstenzang & Freundlich, 2005; Holland & Gorey, 2004;

Hughes, 1999; Katz, 1999; Leathers, Spielfogel, Gleeson & Rolock, 2011; Lindesy &

Schwartz, 2004; Look, 2011; Steele, Hodges, Kaniuk & Steele, 2010; Scott &

Gustavasson, 2010; The Adoption History Project, 2012; Wallace, 2003). Given the

circumstances of the situation this is something that is discussed in almost all adoption

literature. However, a parental quality like a secure sense of self is not as readily thought

of and was not blatantly discussed in the literature but still very important to success.

Respondents relayed the importance of open mindedness, understanding, and

patience for adoptive parents because of the challenges they face in foster care adoption.

They emphasized the need for adoptive parents to be open to learning about the realities

of the children in foster care as well as learning new parenting techniques to parent their

special needs. To do this they need to be open to understanding about the child and

his/her history. This will allow adoptive parents to have a better understanding of

behaviors, increasing patience. It is much easier for the adoptive parents to have patience

when they understand why behaviors are happening. These topics emerged in this

research and were not covered in the literature review.

Respondents addressed the need for adoptive parents to be able to provide

structure as well as flexibility for success. They said children from challenging

backgrounds in foster care need structure and routines to help them feel safe and secure.

Most of the children who have spent time in the child welfare system have not

experienced the world as a safe, dependable place. These findings mirror those by Katz

(1999) that children in foster care have experienced multiple care givers and moves, and as a result their world can feel chaotic and unbalanced. Respondents said that rules and structure help foster children learn what to expect. Also, with the enforcement of rules and structure children know if A, then B. It is dependable and reliable and there are no surprises bringing them a sense of safety and security.

Respondents also indicated that while providing structure is a good thing, adoptive parents must also be able to be flexible and not be rigid in their views with black/white or right/wrong thinking. They emphasized that adoptive parents need the ability to go with the flow and not overreact when things don't go as planned. Additionally, they said that adoptive parents need to be flexible in their parenting styles and realize that children from foster care have different needs because of their history. These findings coincide with those of Dorsey et al. (2008) that flexibility is important for adoptive parents' success. One respondent said that just because a parenting technique may work for one child does not mean it will work for another. Other respondents agreed with this statement and said that adoptive parents need to be able to change things up and adjust as needed to what will best serve their child from foster care.

Another important characteristic identified by respondents was the need for adoptive parents to be good communicators. Respondents said that adoptive parents need to effectively communicate their needs as well as those of their child to others. Communication is important for them to work well with professionals and to get the resources and support they need. These findings indicate that children from foster care have many needs and most importantly they need adoptive parents who are willing to put themselves out there and advocate for them or educate others on effective ways to work

with them. Adoptive parents' ability to communicate directly relates to their ability to get services as illustrated by Cooley and Petren (2011), and it is important for adoptive parents to feel they have the tools to support their child from foster care. As reported by respondents, if adoptive parents are unable to communicate needs they are less likely to get needed resources and support. Adoptive parents need to be the child's number one advocate, and the only way to ensure needs are met is to communicate effectively.

Respondents also expressed that parents adopting from foster care need to have a positive attitude, be optimistic and have a healthy sense of humor. These qualities were not covered in the literature review but are simply important skills for any parent. However, they were indicated by respondents as essential when tackling the challenges of parenting a child from foster care. There may be challenging times and negative talk by the child and it is important for adoptive parents to remain positive in challenging times, and to remember to laugh and be a positive influence in the child's life.

Respondents also stressed the importance of adoptive parents' ability to not personalize the child's behavior. Adoptive parents need to understand that children from foster care are just behaving in accordance with their history. Respondents said that a child from foster care my not have learned appropriate behavior or coping skills in their previous environments. Adoptive parents need to understand that their child is not acting out because of them, but rather because it is his/her way of dealing with his/her past experiences in relation to his/her current environment. The adoptive parents are receiving the brunt of the behavior but are also there to help the child work though his/her challenges and learn appropriate coping skills and responses. These findings coincide with those by Cooley and Petren (2011) in that parents need to help their child from

foster care learn skills to have healthier behaviors. Respondents emphasized that while not personalizing behavior is a hard thing to do, it is a really an important skill to have. Adoptive parents need it to be able to help their child from foster care work through his/her issues to get to a better place. To do this, adoptive parents' ability to have hope, see the positive things, and reframe negative talk or behaviors are critical. Not only will it help the child, but it is important for the adoptive parents' mental health as well.

Many respondents talked about adoptive parents being drawn to adopting from foster care as a result of having experienced challenges themselves. Some adoptive parents may have suffered a loss, abuse, and instability in childhood, and experiences such as these can help them to empathize with the child's experiences and better support them in getting to a healthier state. Respondents also talked about the importance of adoptive parents being at a healthy place and having a secure sense of self. They need to have come to terms with their previous challenges and be in a good place with their past experiences. Respondents said that if adoptive parents are still struggling with past trauma, for example, it is very challenging for them to work on their issues at the same time as helping a foster child. Foster children are good at reading people due to their previous experiences and can clue into things an adoptive parent is struggling with and activate their triggers. If this happens, adoptive parents will have a harder time managing the child and his/her challenges because they are still dealing with their own issues. These findings are consistent with those by Gerstenzang and Freundlich (2005) that adoptive parents' perceived competence is directly associated to success in parenting children from foster care. If adoptive parents are struggling with their own issues, they will feel less capable of handling those of the child. When adopting a child from foster

care, parents need to focus on the child because of his/her high level of needs due to his/her previous history.

Finally, respondents emphasized the importance of adoptive parents being actively engaged in the entire process. They said adoptive parents need to have the desire to learn and participate in training as well as get additional training, which may be helpful to parent their child from foster care. These findings are consistent with those by Colley and Petren (2011), and Dorsey et al. (2008) that adoptive parents need to have ample training and a desire to learn to parent the special needs of children from foster care. Respondents emphasized, as did findings by Hughes (1999), Colley and Petren (2011), Fox and Berrick (2007), and Dorsey et al. (2008) that for parents adopting for foster care, preparation really is the key to success. While respondents stated that they do not believe adoptive parents can ever really be prepared for the challenges they will face adopting for foster care, they state that adoptive parents can definitely be more prepared and open to learning and growing in the process to facilitate success.

Training/Education

All respondents talked about the importance of quality training and education. These findings mirrored those of Hughes (1999), Dorsey et al. (2008), Cooley and Petren (2011) and Fox and Berrick (2007) illustrating the need for adoptive parents to have quality training and education to meet the needs of children adopted from the foster care system. Respondents remarked that the foundational knowledge they receive in training is important for adoptive parents moving forward in the process to ensure positive outcomes.

Respondents said that topics covered in training include an overview of the program, the demographic of the children available, and a broad overview of their special needs. These findings mirrored research by Cooley and Petren (2011) that training and education provide adoptive parents with essential information. A respondent commented that this introduction starts adoptive parents thinking about what they can and cannot handle and the skills they will need have a successful adoption. Respondents reported for some adoptive parents, these realities will detour them from pursuing foster care adoption, for they may become overwhelmed by what they hear. This can be a good thing because children in foster care have a lot of needs and not everyone can take on the challenge. However, respondents also said that for some adoptive parents, the training material resonates with them and gives them more determination to move forward pursuing adoption from the child welfare system.

Respondents emphasized the importance of adoptive parents having access to information on the foster child's history to give them the proper care moving forward. They said that knowing this information allows adoptive parents to make adjustments in their parenting techniques that will better help the child with his/her specific issues. These findings mirrored those by Hughes (1999) in the importance of adoptive parents knowing all aspects of the child's history to be able to effectively parent a child with a turbulent history. Additionally, respondents talked about the importance of parenting to the child's developmental age, which can be quite different from his/her chronological age. Children with trauma, abuse, or neglect will have delays in relation to their developmental stage and will have different needs than children with a healthy start (Hughes, 1999). Respondents emphasized the need for adoptive parents to understand

that children from foster care need more than simply love and security. Children from foster care can have a fragmented foundation, and based on their history, adoptive parents will need specialized parenting techniques and tools to successfully parent to their needs.

Respondents also said that there is no way adoptive parents can be completely prepared for the challenges they will face parenting a child from foster care. These findings correspond with those by Cooley and Petren (2001) that no amount of training can fully prepare adoptive parents for the challenges of parenting children from the foster care system. However, respondents stressed that training can help adoptive parents be more prepared for the things they encounter and that adoptive parents need to be open to learning new techniques and to grow personally in the process.

Resources

Respondents talked at length about the need for parental resources including services, information, and self-confidence to parent the needs of children from foster care. These comments coincided with findings by Cooley and Petren (2001) illustrating adoptive parents' need for resources and services when adopting from foster care. Respondents emphasized the need for resources for adoptive parents, as well as the knowledge and confidence to use them.

As previously discussed, respondents commented that adoptive parents need accurate information on the foster child's history to understand the best way to proceed in his/her care. These findings coincide with research by Holland and Gorey (2004) illustrating the wide array of needs children from foster care experience due to history. Research by Holland and Gorey (2004) also coincides with these research findings in that respondents said foster children may require multiple types of services to manage

educational, emotional, cognitive, behavioral, and social challenges. Respondents emphasized the importance of services such as respite care, behavioral specialists, educational services, occupational therapy, and other types of therapy to provide reparative services for the child and to assist the family in the process.

Respondents also talked about the need for adoptive parents to learn techniques and have access to information on parenting children with special needs. Whether it is ADHD, attachment issues, or sexual behaviors, respondents talked about the need for training, therapists, and even websites that provide good information to adoptive parents on how to parent children with challenging issues. Respondents emphasized the importance of parents having these resources to turn to. These findings mirrored those by Hughes (1999) that adoptive parents need specialized education and treatment to address the unique issues foster children struggle with.

Respondents also discussed that sometimes services can be challenging to locate and adoptive parents need to have the strength and self-confidence to persevere. These findings are similar those by Cooley and Petren (2011) as it is up to the adoptive parents to locate and access services in a complex system. Respondents said that the system is not always easy to understand, especially for these adoptive parents who are new to it. Adoptive parents have to have the confidence to inquire about services when they need them and to be persistent if their needs are not immediately met. Once they know they or their child is in need of services, parents need to have the strength to continue searching until that need is met.

Support

As indicated in the literature review, resources and support are closely related and are important for success. Findings by Holland and Gorey (2004) and Cooley and Petren (2011) agree with reports by respondents that adoptive parents need multiple types of support to successfully parent children from the foster care system. Respondents identified needed supports including comprehensive services, competent professionals, and peer support as a requirement for success in foster care adoption.

Respondents said that needed comprehensive services include things like school services, respite care, and therapists. They emphasized the need for competent professionals in these areas as families adopting children from foster care have unique needs. All respondents talked at length about the need for highly skilled professionals. This need was not covered in the literature review. Respondents agreed that it can be challenging to find attachment-focused and adoption-competent professionals who are skilled in the needs of this population. One respondent commented that working with someone who is not educated in these areas and familiar with the unique needs of parents adopting from foster care can negatively impact their situation. These findings emerged in this research and not documented in the literature review.

Respondents reported that not only do adoptive families need experienced professionals, but that they also benefit from peer support. Multiple respondents talked at length about how the family's life will dramatically change once a child from foster care enters the home with his/her unique, special needs, saying that it is really beneficial for parents to have peers who understand their challenges and needs. Research by Holland and Gorey (2004) reflected these findings, indicating the need as well as the important of

training for adoptive parents to begin to make connections. They need to have peers to call on when they encounter challenges.

Concurrent Planning

Many of the respondents said that they did not have experience with concurrent planning in their work with foster care adoption. Those who did have experience with concurrent planning agreed with Stott and Gerstenzang (2010) saying that it is a challenging process on multiple levels. Respondents added that, in their experience, due to the multiple challenges, concurrent planning is not implemented very often in Minnesota.

Responses with experience agreed that concurrent planning placements are difficult for all parties involved: social workers, potential adoptive parents and the foster child. These findings coincide with research by Gerstenzang and Freundlich (2005), D'Andrade (2009), and Berrick and Coakley (2006) that concurrent placements are challenging for everyone involved.

Respondents commented that one significant challenge is the honest communication of the uncertainties of concurrent planning. While open, honest communication is a positive thing, respondents argued that this was one of the drawbacks to this practice because potential adoptive parents cannot give the child the guaranteed permanency they need to feel safe. Respondents said concurrent planning is a challenging situation because the lack of termination of parental rights keeps the child's future uncertain. The child may or may not return to their biological parents. Thus, the potential adoptive family is unable to give reassurance of what the future holds. Respondents said that due to this uncertainty, child behaviors can become more

challenging. These findings are contrary to research D'Andrade (2009) indicating the

emphasis of honest communication with all parties is a positive. Since concurrent

planning is such a new practice it is likely that more literature on its effects will soon

emerge.

Several respondents emphasized systemic challenges in Minnesota's

implementation efforts of concurrent planning. Due to the uniqueness of a concurrent

placement, respondents said that potential adoptive parents need to have additional

education and support to take on this task, which is not always something they receive in

the pre-placement process. Additionally, one respondent emphasized that a clear process

has not been established in Minnesota because the termination of parental rights has not

happened and the child is not a ward of the state and not bound by those regulatory

processes. Thus, respondents said that concurrent planning cases are done on an

individual basis with special arrangements/agreements made per situation making them

more challenging and complicated to execute. These findings were not illustrated in the

literature and could be due to the unique dynamics of the systemic processes in

Minnesota.

Additional Needs/Challenges

The data analysis uncovered several emerging themes including systemic and

child challenges faced by parents adopting children from foster care. These findings were

not related to the literature and research, but rather materialized during the respondent

interview process. These areas are not necessarily barriers to adoption but are significant

challenges adoptive parents must contend with and manage successfully to adopt from

foster care.

Systematic Challenges

The systemic challenges indicated are particular to foster care adoption in Minnesota, which was not examined in the literature. Respondents commented on bureaucratic challenges, financial disincentives, challenges with social workers, drawbacks to the state adoption exchange, and the treatment of parents and foster children by the system. These challenges may or may not be unique to the Minnesota child welfare system. However, all social workers interviewed in this research project practice in Minnesota, thus information may or may not be applicable in other states as policies and procedures vary. While many of these challenges were not covered in the literature review, this research indicates that these are important findings that greatly impact parents adopting children from foster care in Minnesota.

Respondents specified that in Minnesota, financial disincentives exist as well as a reduction of services upon the finalization of a foster care adoption. They said that this can act as a deterrent for some adoptive parents. They said that upon finalization in Minnesota, the child's monthly stipend, to assist with expenses incurred in their care, is greatly reduced and some services are removed all together. Respondents commented that for some adoptive parents, this reduction can act as a deterrent to their finalization of the adoption. Additionally, respondents said that children in the foster care system typically have multiple social workers that assist the adoptive parents in locating needed resources and making decisions. They stated that it is hard on adoptive parents when workers are removed upon finalization and they no longer receive that support. These findings coincide with the literature review as found in the *Pathways to Permanency* (2006) indicating a reduction of financial support and services post foster care adoption.

Respondents also reported bureaucratic challenges that are out of the adoptive parents' control, but greatly impact their experience adopting from foster care. Respondents discussed that legislative mandates and paperwork processing are all time consuming and can delay the adoption process. For instance, respondents said that in the home-study process, adoptive parents partake in an extensive bio-psycho-social-financial-spiritual assessment including counseling, education, background checks, and foster care licensing. They remarked the process can move slower if the social workers or other professionals are unable to be timely in their work. Respondents all agreed that the home-study process is a large undertaking and when adoptive parents are anxious to grow their family, it can be stressful. This challenge was an emerging theme, thus not supported in the literature review.

The state adoption exchange, Minnesota's resource for assisting children in foster care to find permanency, was also indicated by respondents as a challenge. Unfortunately, respondents reported multiple issues with the state adoption exchange, most importantly a lack of accessibility to all foster children available for adoption in the state. Respondents said that only a fraction of available foster children are listed on the exchange, and that adoptive parents and workers alike find this to be a frustrating challenge. This was also an emerging theme and not covered in the literature.

Respondents also commented that adoptive parents are not always given the respect they deserve as the primary care giver to children in foster care. One worker remarked that social workers talk about how adoptive parents are "part of the child's team" but the worker has repeatedly witnessed information being withheld from adoptive parents who are struggling to care for the needs of their child from foster care.

Additionally, several workers talked about adoptive parents not receiving pertinent child information until they were approaching finalization, not prior to placement as outlined in Minnesota Department of Human Services procedures. This was another emerging theme and not covered in the literature review.

Additionally, respondents mentioned the negative societal judgments imposed on children in foster care. One respondent talked at length about how, even though it is not the foster child's fault they are in foster care, they are often considered of lesser status than the rest of society. This thought was mirrored in the statements of other workers as these are troubled children with difficult histories and many have behaviors that are less than desirable by societal standards. Respondents said that it is important to continue to educate society as many of these behaviors are simply manifestations of their previous environment, coping mechanisms, and survival tools. Children are not in foster care as a result of their doing, and need not be seen as lesser by society. These findings were not covered in the literature but rather another developing theme.

Furthermore, respondents said that children in foster care are being cared for by the system, not an invested parent, so they do not receive the same quality care or support they may from caring parents. One respondent remarked that once in the child welfare system, foster children are labeled, moved around, and given basic care by workers who are unable to invest as deeply as a parent. Another respondent commented that the care foster children receive once they have entered the child welfare system can be far more damaging due to the system's inability serve the children as the primary client, focusing instead on following systemic guidelines and cost effective measures. This was yet another emerging theme that was not covered in the literature review.

All of these systematic challenges were indicated by respondents as challenges for adoptive parents in adopting children from foster care. They may or may not be specific to Minnesota, but never the less were emerging themes in this research. These areas were not covered in the literature review but indicated by respondents as significant challenges for adoptive parents.

Child Challenges

Finally, respondents identified challenges brought by the children in foster care. They reported things like the foster child's history, desire to be adopted, and adoptive parents' lack of preparation for caring for the child's individual needs. These findings were an emerging theme and indicated by respondents as significant challenges in the adoption of children from foster care.

Multiple respondents commented on the challenges a foster child's history can present in his/her ability to find permanency. They discussed that his/her age, history with his/her biological parents, and length and experiences in care can affect his/her desire to be adopted all of which have a significant impact on his/her view of adoption. Respondents said that the older the child, the longer they are in care, and the less stability they have experienced in his/her life decreases his/her desire to be adopted and his/her understanding of permanency. These findings coincide with research by Scott and Gustavsson (2010), and Holland and Gorey (2004) that the experiences of children in foster care greatly influence their ability to find permanency. One respondent said that many children in foster care have experienced multiple placements and pre-adoptive placements which have disrupted, damaging their ability to believe in permanency or adoption as something desirable because it hasn't worked for them previously.

Additionally, respondents commented that it can be challenging to match foster children with adoptive parents as many are not open to the type of children available for adoption in the foster care system. They said that this demographic consists of a larger percentage of older children, sibling groups, and children with moderate to severe special needs. This is contrary to the typical desire of parents, wanting younger, milder needs children which, as indicated by respondents, are what they desire but not what is available. These findings are similar to those by Katz (1999), and Lindsey and Schwartz (2004) indicating most children available for adoption in foster care are older, with challenging behavioral needs, and thus less desirable to adoptive parents. Respondents said that the available population is one of the reasons training is so important for adoptive parents. It educates them on the children available for adoption in foster care and with this information they can decide if they would like to continue in the process.

Limitations

This research has several limitations. The first limitation of this study was the small sample size. It would have been ideal to have more respondents and data but given the time constraints of one academic school year, in which the researcher was confined, this resulted in a need for limited data and number of participants. However, this researcher did have additional respondents agree to participate in the research project indicating a strong desire to talk about the challenges of foster care adoption. This indicates that there are definite challenges social workers would like to see addressed.

Another limitation to this study was the lack of randomization. The sample of social workers interviewed was that of convenience, resulting in participants from a concentrated pool of Minnesota social workers. Since the sampling method used to gather

participants was not chosen at random, but rather from a specific population, the findings

cannot be generalized to any other population.

Practice Implications

      This research project was designed to get a better understanding of the challenges

adoptive parents face in adopting children from foster care. The findings provide some

general implications for social work practice, particularly in Minnesota where the

respondents practiced.

      First, research findings indicate multiple parental characteristics that are

beneficial for parents adopting from foster care. These characteristics include open

mindedness, understanding, flexibility, structure, good communication, patience, active

engagement, commitment, and possession of a positive attitude, secure sense of self,

ability to not personalize behavior and desire to learn and be prepared. Respondents

emphasized the need for these characteristics to ease the process for both parents and

children. These characteristics should be looked for by professionals working with

adoptive parents and addressed during adoptive parents training. Additionally, this list of

parent characteristics can provide a foundation for future research in this area as current

literature touches on some of these areas, but a thorough analysis of these topics would

greatly benefit the foster care adoption community.

      Second, this research indicates the need for quality training and education for

parents adopting from foster care. Professionals need to understand the important of

facilitating growth and learning for adoptive parents and their role in that process.

Respondents repeatedly discussed the benefits of training, need to cover specific topics,

and the significance of the foundational knowledge adoptive parents receive in the

process. They said adoptive parents need to learn about trauma, prenatal exposure, brain and child development, attachment, mental health issues, abuse and neglect, and parenting special needs, as well as child specific areas and strategies that work. Additionally, respondents said workers need to ensure adoptive parents are mentally healthy and not struggling with unresolved issues themselves when they pursue foster care adoption. Workers need to make sure adoptive parents have realistic expectations of the children and relationships they will gain adopting from foster care. Future research needs to focus on improving adoptive parent training and education to increase success rates.

As presented in these findings, resources and support are interrelated and important components of success for parents adopting from foster care. Not only do adoptive parents need access to services such as behavioral specialists, adoption-competent therapists, occupational therapists, and respite providers, but they also need to understand the importance of these services for success. Respondents emphasized that adoptive parents cannot meet the high needs of children from foster care alone and will need the support of professionals and peers to succeed. This research highlights adoptive parents' need for training with peers to build relationships and make connections, for they gather information, knowledge, personal strength, and self-confidence through this format. Currently with the increasing availability of on-line training increasing, these findings need to be taken into consideration. These are important things professionals need to ensure they are providing adoptive parents with as it is their responsibility to ensure they have the tools they need to succeed.

Fourth, respondents talked about concurrent planning and the challenges of implementation for all involved. As this practice is still fairly new (within the last 25 years) more research needs to be done to address challenges and to develop best practices for children.

Fifth, respondents also touched on the challenges the foster child beings to the dynamic and the effects of his/her history on his/her ability to be open to and accept permanency. This is an important consideration, for foster care should truly be used for safe, short-term care as it was intended for. These requirements are outlined in the focus of providing permanency by the United States government (USDHHS, 2005). As indicated in these findings, sometimes experiences once in care can deter children from wanting to be adopted and finding permanency as services are sometimes not in their best interest. Providers need to do everything in their power to ensure success with the least amount of trauma inflicted on the child as possible. Future research needs to be conducted to ensure best practices and positive experiences and outcomes for children in foster care.

Finally, respondents talked at length about systematic challenges they have observed in Minnesota including financial disincentives, worker biases, and issues with the state adoption exchange. Social workers indicated that these areas make it challenging for parents adopting from the child welfare system. These findings indicate problems with the foster care adoption process in Minnesota and research about practices in other states may be helpful in findings solutions. Findings also indicate that more research is needed to ensure children are being served using best practices.

These research findings indicated numerous challenges in the adoption of foster

children and multiple areas for further research. In addition to future research areas which

have already been listed, findings indicate several additional areas to be explored. This

research project primarily focused on the adoption of children from foster care in

Minnesota, and it is important to see if these themes are present in other states. It would

beneficial to see if a larger sample size would indicate similar results. Additionally, it

would be advantageous to interview parents who have adopted from this population to

see how their views compare to those indicated by social workers.

Policy Recommendations

These findings indicate that multiple policy recommendations can also be made to

assist with adoption from foster care. As a general, over-arching theme, the child welfare

system needs to focus on serving the best interest of the children in foster care, and in

Minnesota, policy makers need to make some policy changes to meet their needs. The

findings indicate that children are not being best served by multiple workers per child and

large case loads. It would make more sense to have an individual worker assigned per

child, enabling smaller case loads and avoiding some of the communication and

personality challenges that currently exist. Fewer workers would allow adoptive parents

to be a more integral part of the foster child's team as the primary care giver and be more

connected to decision making.

Research findings also state that Minnesota legislators need to rectify the financial

disadvantages and the reduction of services post adoption. The system should not be

penalizing families for finalizing their adoption. Thankfully, legislators in Minnesota

have been working to address this issue. On May 17, 2013, just a few days before the

publication of this paper, the state of Minnesota approved the Northstar Care for Children, a program designed to eliminate financial and services disincentives from adoption. This program will unify foster care assistance, relative custody assistance, and adoption assistance payments by putting them under the same program, Northstar Care for Children, standardizing payments and services for all children in care. The goal of this program is to prevent the adoption disincentives and promote permanency for all children in care. Northstar Care for Children is scheduled to be implemented January 2015, and although specifics are still being written by the state, it appears that this program will greatly benefit children in foster care.

Findings also indicate that adoptive parents are not being provided essential child information in a timely manner even though workers are federally mandated to do so. This research indicates that the state is in need of some sort of regulatory process to ensure information is provided to adoptive parents earlier in the adoption process.

Minnesota must ensure that all foster children available for adoption are listed on the state adoption exchange. Since this is the state's primary recruitment site, all children in care not only need to be listed but in a timely manner. If foster children are not listed then it will prolong their time in care, which does not benefit them. Workers need to be required to list all children on the state adoption exchange in a timely fashion. This is the only way to get them available and increase their chances of finding permanency more quickly, as well as to reduce problems from extended time in care.

Finally, these findings indicate the importance of adoption-competent professionals. Minnesota needs to ensure the professionals providing services to these families are educated in this area and are easily accessible by families.

Conclusion

In conclusion, this study was able to demonstrate multiple challenges parents encounter when adopting a child from the foster care system. Although this study has limitations, clear themes were developed. Research findings provide professionals with clear needs of adoptive parents pursuing foster care adoption, including the need for quality training/education, support, and resources. These areas are just as important to success as desirable parental qualities, adoption-competent professionals, and a supportive system to parents adopting children from the foster care system. These findings further enforce the importance in continuing research and the need to make improvements to policy and practice. We must ensure that services provided are based on best practices working for optimal outcomes for children and families. Best practices are the only way to accomplish this.

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APPENDIX G

St. Catherine University and the University of St. Thomas School of Social Work
MSW Program
Approval of Clinical Research Paper

STUDENT NAME: Lisa Thibodeau_____ Student UST ID# 100927415____

MSW CLINICAL RESEARCH COMMITTEE ACTION:

CHAIR: ____ Clinical Research Paper is Approved **and** Presentation Completed

_____ _____ _____
Name (PLEASE PRINT)   Signature   Date

SIGNATURES OF MSW CLINICAL RESEARCH COMMITTEE MEMBERS:

1. COMMITTEE MEMBER:

____Proposal is Approved with minor amendments
____Proposal is Approved with required amendments
____Proposal is Not Approved

_____ _____ _____
Name (PLEASE PRINT)   Signature   Date

2. COMMITTEE MEMBER:

____Proposal is Approved with minor amendments
____Proposal is Approved with required amendments
____Proposal is Not Approved

_____ _____ _____
Name (PLEASE PRINT)   Signature   Date

Attach details of amendments that must be in place for the Clinical Research Paper to be
approved by the chair.