

Executive summary

An adoptive family offers a tremendous opportunity for maltreated, rejected, or abandoned children who cannot live with their birth or extended family, not least in providing an environment that supports developmental recovery (Palacios and Brodzinsky, 2010). Many adopted children do make immense progress. One of the strengths of adoption lays in the stability that it provides. The report on the first national study of adoption disruption in Wales found that over an 11-year period, the cumulative risk of disruption (post order) stood at just 2.6% (Wijedasa and Selwyn, 2014). That proportion was similar to the rate in England, where the risk of disruption over the same timeframe was 2.9%, and 3.2% over a 12-year period (Selwyn *et al.*, 2015).

However, the encouragingly low rate of adoption disruption, when considered in isolation, belies the bigger picture - that being the substantial strain and turmoil experienced within many more adoptive families. Findings from the recent study on adoption disruption in England, revealed that more than a quarter (26%) of the 390 adoptive parents surveyed, whose child lived at home, reported major difficulties in adoptive family life (Selwyn *et al.*, 2015). It is essential that we develop a greater understanding of the challenges adoptive families face and the support services that are needed to promote family cohesion and prevent disruption.

In this study, an adoption was considered to have disrupted when an adopted young person had left their home under the age of 18, because of difficulties in family life. They might have become looked after, gone to live with extended family or friends, or moved into independent living. Step-parent and inter-country adoptions were excluded. The study built on a similar study on adoption disruption in England, conducted by the same research team (Selwyn *et al.*, 2015). Where appropriate, similarities and/or differences in the findings between the two studies will be highlighted.

This study explored the experiences of ten adoptive parents living in Wales, who had faced an adoption disruption, as well as the experiences of ten parents, whose adopted child lived at home, but where family life was considered difficult and at risk of disruption. Whilst the families are not typical of adoptive families generally, given the consistency of accounts and

the similarity with many findings from the study in England, we do consider that as a group, they are typical of adoptive families in difficulty.

Pre-adoption

It was striking how little parents knew about the adoption process and how little information and support they were given to make such a momentous decision. Most parents were unaware that they could choose which agency to approach for an adoption assessment. Several parents received a very discouraging response when they made contact with their local authority (LA). Some parents received no response at all. Although this sample of adopters persevered, it is likely that many other potential adopters would have been put off by their early experiences.

Most parents also said that they had faced a change of social worker during their assessment and preparation. The delays that resulted, left parents frustrated but more importantly, it impeded the development of a trusting relationship with their social worker. Most parents thought that they had not been well prepared for adoption. Five parents were not given the opportunity to attend any preparation or training groups, children already living in the family were not included in the preparation, and those wanting to adopt older children thought that the preparation was too focused on the adoption of younger children. Six parents, who had been assessed and approved by a VAA, spoke more positively about their initial experiences.

The majority of parents were matched with a child/ren by the social worker. Six matches were adopter led. Surprisingly, 12 of the 20 parents had been linked with other children before being matched with the child/ren they eventually adopted. The failure of these links to proceed left some parents guilty, or with a profound sense of loss. Parents were not given enough information and support when the links did not proceed. Some did not know why they had not been matched with the child.

Information was also lacking on the children and their circumstances, who were eventually adopted by the parents in this study. Some parents did not know why the child had been unable to live with their birth family, or had very little knowledge about the child's birth and early developmental progress. Seventeen parents thought that information about the child

had been withheld, or only partially revealed. Some thought that social workers had not trusted them with information about their child.

The ten boys and ten girls in this study were, on average, older at entry to care, at placement and at the time of the adoption order (6 years old), compared with most other children adopted in Wales. The average of all children in Wales at the time of the adoption order is 4 years old. The children's older age put them at greater risk of disruption and of having challenging behaviours. Most of the children had been maltreated in their birth families - eight had been sexually abused. Seven of the 20 children had been placed as part of a sibling group, although at the time of the study nine other children were or had been living with siblings, created through adoption.

Parents thought that most of the children had not had good experiences whilst looked after. Thirteen adopters reported that the quality of foster care for their child had been poor. Children were often shown little warmth and/or were treated differently than the foster carers' own children. Half of all the parents thought their child had been poorly prepared for adoption. Children had not understood the nature of adoption, been confused about who was 'mummy' and 'daddy' and had been misled about why they had left their birth families.

Most adopters had not attended a meeting in which introductions were planned. Instead, the adopters and the foster carers were expected to sort out arrangements between themselves. Social workers either were completely absent or took a low profile. Consequently, most introductions did not go smoothly, often leaving the children, adoptive parents and foster carers feeling stressed and upset.

Throughout the period before the children moved in, adoptive parents were often aware that those most intimately involved, were experiencing intense sadness, with feelings of grief and loss. Foster carers did not seem to have been supported by social workers, but were left to manage in the best way they could and children's feelings were not taken into account. The social work view seemed to be that everything would settle down once the child was in placement.

Difficulties in adoptive family life

Most families (n=15) began to experience difficulties soon after the child moved in. According to parents, many children did not accept intimacy or comfort and resisted attempts to be parented. Mother and child relationships were particularly difficult. Parents also described children who were angry, controlling, had sleeping difficulties, hoarded food, and soiled. From a very early stage, some parents were troubled by sibling relationships, which were marked by intense jealousy and aggression. Although the relationships between children in the family were sometimes fraught, parents also recognised that for most children, their sibling relationship was very important.

Some parents were surprised by the extent of children's developmental delay and noticed physical health conditions that had either not been identified or treated in foster care. The majority of parents stated that they had felt unsupported by their adoption worker and the child's social worker. They described feeling abandoned once the child was placed. Some parents received no social work visits, whilst others were visited but by workers who seemed to have had little knowledge of adoption or expertise in supporting parents who were already managing challenging behaviour.

For most families the early challenging behaviours did not settle down over time, but became more frightening during adolescence. Five parents described relative calm in the first few years of adoptive family life, with the situation changing rapidly when their child became an adolescent. Child or adolescent to parent violence had occurred in all the families who had experienced a disruption and was occurring in seven of the ten families whose child still lived at home. Violence towards siblings was also of concern to parents, as was the potential for emotional harm, through witnessing a parent being violated. All those families who reported late onset difficulties (aged 11+), went on to experience an adoption disruption, as did all those children living in a family with birth children (n=5).

Support post order

The majority (n=16) of families were in touch with LA adoption teams when difficulties in family life escalated. Parents commented on how frequently social workers changed, the inexperience and inertia shown by staff and the lack of available resources. Adoption social workers in Wales rarely worked with families, other than by way of providing emotional

support and referring families onto other services. The services commissioned by the LAs were generally valued by parents, but were considered insufficient. Some parents had concerns about the children and families team social workers who engaged with the family, because of their apparent lack of knowledge and experience in adoption related matters.

All but two children were thought by parents to have needed CAMHS support. In the main, parents were dissatisfied by their contact with CAMHS, with complaints that staff did not appear to understand the complexities and sensitivities of adoption. Some parents felt that they were not listened to and/or excluded.

Seventeen of the parents described children's significant difficulties in school, but only three children had a statement of special educational needs. SENCOs had been involved with the majority of children. The children who were living at home, were receiving more support in school compared to those whose adoptions had disrupted and more children living at home had a clinical diagnosis. This might suggest that the 'At home families' had access to more support for their child's difficulties.

Surprisingly few parents had felt supported by their family and friends during difficult times in adoptive family life. Parents often did not want to burden others. For some, disagreements within the wider family about the care of the child had caused serious rifts. Whilst some parents soldiered on, feeling socially isolated, others had established a new social network of like-minded individuals, who were often other adoptive parents and/or foster carers.

Adoption Disruption

Most of the ten disruptions occurred in families with a child late placed for adoption (average age 5 years old at placement). At the time of the disruption, the children's mean age was 14 years old (range 6-17 years). All but one child had lived in their adoptive home for more than seven years. In the months leading up to the move out of home, parents described children who were defiant and out of parental control. Half were regularly running away. The police were involved with eight of the 10 families in the days leading up to the disruption and/or on the day of the disruption itself.

Children's well-being

Parents completed two measures of children's well-being: the Strengths and Difficulties Questionnaire (SDQ) and the Assessment Checklist for Adolescents short form (ACA-SF). All the children were over the SDQ cut off scores, suggesting that had they had been seen by a mental health professional, they would have been assessed as having an emotional and/or behavioural disorder. In comparison with the findings from the English study of adoption disruption, parents living in Wales reported that the children had more problems with peers, and for those still living at home more emotional problems such as anxiety and sadness. The ACA-SF also revealed high levels of disturbance. All but one child was in the clinical range on the non-reciprocal scale. That scale measures an avoidant, disengaged style of relating. Most children were also indiscriminately friendly with an absence of personal boundaries in social relationships. Most of the children who had left home had displayed symptoms of trauma. Compared to children in the English study, fewer children (n=9) in Wales had received a clinical diagnosis for their difficulties.

Contact

Prior to adoption, most of the children were having contact with a member of their birth family. A quarter of the children had no contact with any adult relatives whilst in foster care. Six children had had a final farewell meeting with their birth parents *at the same time* as being introduced to their adoptive parents. Face-to-face contact was not planned to occur for any of the children post adoption. Letterbox arrangements were planned for most. Unlike the English study of adoption disruption, many of the adoptive parents lived close to the child's birth family. Proximity may have been one of the reasons no direct contact was planned, but there was also less social work support offered for contact at the start, or later if contact issues arose.

At the time of the interview, 11 children had no contact with their birth families. Many letterbox arrangements had never started and only two arrangements involved two-way communication. Contact with grandparents had been stable and increased. Two adopters had started direct contact with birth relatives. Some parents had thought about starting direct contact, but had been told that no social work support would be available. Parents concerned about the use of social media were refused advice and support.

Talking about adoption

Parents stated that discussions with their child about adoption were usually initiated by them. Most children were said to show little curiosity about their histories, or wanted to block painful memories. Girls showed more interest in their histories than did boys. During adolescence, children wanted more information about their pasts, but parents were unsure how they had coped with details. Only parents' views were collected in this study and the children may have a different view on the openness with which adoption could be discussed in the family. Some children struggled to make sense of their early lives and were acutely aware that their early childhoods had not been like those of their friends. A quarter of the parents thought their child had been bullied because of their adoptive status.

Post disruption

Seven of the ten children had needed to leave home rapidly and therefore the move was not planned. Even when it was possible to prepare for the move, arrangements were poorly executed. All the young people became 'looked after' on, or soon after moving out of home. Initially, seven children went to live with a foster carer, two young people moved in with extended adoptive family and one young person entered residential care. Most placements were unstable, as carers could not manage the challenging behaviours. Since leaving home, five young people had moved between one and four times, whilst two children had moved more than ten times. Six parents had worried about the vulnerability of their child. Five young people were known, or suspected to have been sexually exploited or abused since the adoption disruption.

Half of the parents reported feeling devastated by their child's move out of home, whilst the other half were relieved. Five of the ten young people were thought to have been upset by the disruption. Surprisingly, five young people were thought, by parents, to have been largely unaffected by their move out of home.

All but one parent wanted continued involvement in decisions about their child's care. However, only one couple were satisfied with the extent of their involvement. Although five parents thought initially that their child's move out of home would be a temporary arrangement, there had been no work to reunify the young person. Instead, young people

were put on a leaving care pathway, with the intention of moving quickly into independent or supported living.

Most parents reported that the social work focus was entirely on the child who had left home. The support needs of other children (including other adopted children) in the family post disruption were said to have been overlooked. In two instances, the adoption disruption seemed to set into motion a chain of events, which led to a second adopted child moving out of home prematurely. Only three sets of adopters said that they had been supported post disruption. In two of these instances, the support had been provided or facilitated through a VAA.

Three parents said that the relationship with their child had improved post disruption, three parents reported that the relationship with their child had deteriorated and two parents reported no change. Two other parents felt that the relationship with their child now was too different to make a comparison.

Parents' reflections on their adoption experiences

Most parents stated that despite the challenges they had faced, being an adoptive parent was a positive experience. They recalled happy memories of seeing their child make small improvements and of knowing their child had a better life than had they remained in care. Nevertheless, there had also been a negative impact on many areas of their lives. Eight parents had symptoms of anxiety; six of whom also had symptoms of depression. More parents mentioned physical complaints that they attributed to the stress of parenting. Half of the parents also thought their employment, social life and finances had also been adversely affected.

Reflecting on the whole adoption experience, parents wished they had understood more about attachment and the parenting of maltreated and traumatised children. For parents whose child had left home, losing their child, or the events surrounding the disruption were their worst experiences. Parents' advice to those contemplating adoption was to ensure that they had a strong relationship with their partner, to go into adoption with eyes open, obtain full information about the child and to be prepared "not to be loved" by the child. Support from social workers and from other professionals was viewed as essential.

In the main, findings from the studies in Wales and England are very similar. In both countries, the families in difficulty had late placed children, whose early years were marked by abuse and neglect whilst living with their birth families. Once removed, adoptive parents said that many children had not received the good quality foster care that may have enabled children to start the process of recovery. In both countries, most adoptive parents said that they had endured child to parent or adolescent to parent violence and that professional support in dealing with this was not forthcoming. In contrast to the findings in England, parents in Wales reported that local authority social workers changed more frequently, and lacked specific knowledge and skills in adoption. Parents in England and Wales were similarly disappointed by the CAMHS provision for adoption children. Post disruption, most parents had felt excluded from the decisions that were made about their child's care and there had been little focus on reunification. Parents had felt judged and blamed for their child's behaviours. The accounts from parents in Wales also suggested that overall, compared to England, there was less social work oversight and less of a presence (including less support), in all stages of families' adoption journeys - from pre placement to post disruption. Many parents in this study thought that they were expected to 'go it alone'.

The adoption system in Wales is in the midst of change. The recently launched National Adoption Service has set out a commitment to improve adoption services in Wales. It is hoped that this exciting development will lead to all adoptive families (wherever they are in their adoption journey), feeling valued and able to draw on support when needed.