

VANCOUVER ISLAND UNIVERSITY

Experiences of Individuals Involved in the Complexities of Adoption and Permanency Process in  
Preventing Adoption Disruptions

by

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A Graduate Applied Project Submitted in Partial Fulfillment of the  
Requirements for the Degree of

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We accept this Graduate Applied Project as conforming  
to the required standard.

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### Abstract

Dr. Antoinette Oberg stated, "You are always already in your inquiry." Through my research and experience, there seem to be a few common areas of concern in the process of ensuring permanency for children and youth in foster or government care that contribute to adoption disruptions/breakdowns regardless of whether it is reunification to the birth parent(s), grandparents, relatives, or through adoption. A common theme that has been reported by those involved in an adoption disruption or breakdown is the lack of supports available for adoptive parents; once the adoption has been finalized, the adoptive parent(s) is not fully prepared and or does not fully understand the complex needs of the child(ren) they are adopting. The adoptive families are therefore not building a healthy attachment with their adoptive child(ren) due to the focus being on managing the child(ren)'s needs and behaviours rather than on the child(ren).

This applied project focuses on the development of connections between multiple facets of the child's world. I have created four educational workshops intended to support the child's care team (adoptive parent(s), bio-family, Social Workers, community supports, teachers, the educational system helps, etc.) and adoptive parents in understanding childhood and in-utero trauma, attachment, claiming the child as their own as if the child was born to them, openness, and building boundaries with biological families to build the new norm of the newly formed nuclear family.

*Keywords: historical trauma, adoption, permanency, adoption breakdowns, adoption disruptions, mental health, exceptionalities, openness, nuclear family*

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**Dedication**

To my children: Kris, Amanda, Meaghan, Crystal, Nathan, Ashley, Sophia, Karlee and my grandchildren, Mason, Seth, Oliva, Ryder, Reylynn and Josee, for inspiring me to always do my best and reminding me that families are formed in many ways, including ours.

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## Chapter 1

### Introduction

The goal of permanency is to support a child's right to feel safe and experience unconditional love from a family they can call their own. The United Nations Convention on the Rights of a Child (June 1993) echoes this same belief and is supported by almost every country globally. It is important to understand the value of the experience for children and youth and those involved in the adoption process. To understand this, it is important to be aware of the feelings that a child may go through, when they are told some strangers have chosen to love them, care for them, keep them safe and want to be their forever parents. It is also important to understand how difficult the process can be to adopt, and the emotional rollercoaster individuals go on in becoming an adoptive family. Having a common understanding of some of the key terms used must be a starting point for understanding and exploring permanency. A meaningful definition of permanency that is used by Janet Boddy from the University of Sussex in her review of research for the Care Inquiry (2013) speaks of recognizing the key qualities of family relationships for children and adults across generations – including a sense of belonging and mutual connectedness and of continuity between past, present and future.

Campbell-Whatley (2008) explained that when children understand their strengths and weaknesses, they can more easily process and utilize the supports around them and also are more apt to excel in life by having a strong understanding of self. Contrasted with this is the belief that children with special needs struggle to understand self, thus having little or no awareness to enable them to excel in life (Wehmeyer, Argan, & Hughes, 2000). Ensuring the successes of

permanency for children and youth, whether through the exploration of reunification to birth parent(s), grandparents or other relatives or through pursuing the placement of children into stranger adoptions, a great concern is the high rate of adoption breakdowns and or disruptions. In practice there needs to be options for the child need to be conceptualized with a common understanding and an objective for permanency:

- Aiming to provide high-quality and stable care.
- Supporting children's sense of identity and belonging; and
- Connecting past, present and future through childhood and transitions out of foster care, and on into adult life.

In my current role as a Guardianship Social Worker, focusing on permanency for children, I work under the provincial legislation that provides the guiding principles within the *Child, Family and Community Service Act (1996)*. The guiding principles state: this Act must be interpreted and administered so that the safety and well-being of children are the paramount considerations and in accordance with the following principles (Child, Family and Community Service Act 1996., p.7):

- (a) children are entitled to be protected from abuse, neglect and harm or threat of harm.
- (b) a family is the preferred environment for the care and upbringing of children and the responsibility for the protection of children rests primarily with the parents.
  - (b.1) Indigenous families and Indigenous communities share responsibility for the upbringing and well-being of Indigenous children.
- (c) if, with available support services, a family can provide a safe and nurturing environment for a child, support services should be provided.
- (d) the child's views should be taken into account when decisions relating to a child are made.
- (e) kinship ties and a child's attachment to the extended family should be preserved if possible.
- (f) Indigenous children are entitled to

- (i) learn about and practise their Indigenous traditions, customs and languages, and
  - (ii) belong to their Indigenous communities.
- (g) decisions relating to children should be made and implemented in a timely manner.

I envision that this thesis and applied project would be used by all the child's team members; the prospective adoptive family and all those involved with the child(ren) in order for these adults to see the whole child before seeing their exceptionalities. As part of this process I have developed a mechanism to identify the gaps in the knowledge of various involved groups. This will include foster parents, adoptive parents, the children themselves, Social Workers, families of origin (biological families of the subject child) and other individuals who have been part of the team around the child(ren) we are working toward permanency for. Additional learning will include recommendations for educational components to support a greater understanding of specific exceptionalities like Fetal Alcohol Spectrum Disorder (FASD,) Autism Spectrum Disorder, Genetic Deletions or Additions, childhood trauma, and the effects of witnessing violence, all of which could be useful tools for the child, adoptive family and care team.

### **Successful Adoptions**

Brownlie and King (2011) discussed the importance of children and youth having a sense of belonging. Belonging relates to a child's social-emotional well-being. When a child and/or youth has a strong sense of belonging, they will also feel they have a sense of power and control over the decisions being made for their future. When children and adoptive parents engage in building a healthy attachment where the child knows they are wanted and that they were chosen by their adoptive family to be their child, this would be no different than if they were born to them. A successful adoption occurs when the parents can see beyond their new child's trauma,

exceptionalities, or where they are simply having a bad day. When the day is done, the next day will come and go, and each day will be a new day. When parents take a moment to stop and think through the rollercoaster ride of life, witness their adoptive child's resiliency, understand their developed need for self-advocacy, and self-preservation, the attachment between them will become stronger. To look through all adoptive children's eyes, we will see their resilience, their creativity, and that they are talented, polite, and articulate in their understanding of their needs. They will thrive when they know they have a voice and their voice is being listened to and heard.

### **Adoption Disruptions / Breakdowns**

Research has shown that adoption disruptions or breakdowns appear to be higher in other countries than Canada. When an adoption is finalized through the British Columbia provincial child protection agency - Ministry of Children and Family Development (MCFD), the numbers do not follow the same trend of disruptions or breakdowns. Research on the disruption or breakdown to adoption placements can be somewhat misleading due to the different terminology used and the methodology used. The majority of adoptions provide residential permanence for children, although measuring the incidence of adoption breakdown is delayed by the terminology and methodology of tracking this information because it is not standardized or consistent (Palacios, Rolock, et al., 2019).

Through my research I recognized several recurring themes in the literature pertaining to contributing factors of adoption breakdown. Good (2016) discussed how children with special needs are the children who are not adoptable because they have needs outside of the ordinary which in turn, makes parenting more difficult. The Adoption Network of BC (2020) lists some of the noted causes of adoption disruption as poor attachment between adoptive parent(s) and

child(ren) and/or the adoptive parent(s) not being fully prepared or understanding of the complexity of the needs of the child(ren). Selwyn and Meakings (2016) discussed that there was ineffective or little to no supports for adoptive parent(s) during transition especially when there are challenges with transitioning. They report that as well as the lack of support after the finalization of the adoption, the adoptive families are also unable to build a healthy attachment with their new child(ren) because of their focus on managing the child(ren)'s needs creates a lack of openness between adoptive parent(s) and the biological family.

### **Inclusive Collaboration**

Often the collaborative team can struggle to maintain cohesiveness due to frustrations within the various systems and lack of supports. Yude and Goodman (1990) reported that children with exceptionalities are more likely to be rejected, isolated and/or victimized by other children and adults without exceptionalities. Rejection, isolation and or victimization can be prevented if the collaborative team is open to sharing information and working together in the best interest of the child. Research findings have shown that when the collaborative team continues to demonstrate cohesive, inclusive and positive relationships, the interactions between children and their team are found to influence teaching and management strategies in the classroom and at home (Capell, 1998).

When developing an Individual Educational Plan (IEP), Katz (2013) discussed the importance of staying focused on the student's individual needs and determining the purpose of the IEP and how it will benefit the student. There is a similarity between the development of an IEP within the school system and the creation of a Care Plan for a child within the foster care system. Similarities include the development of goals and strategies, strengths and challenges, and the setting of specific, measurable, achievable, realistic and timely goals for achievements. A

desired outcome is identified (the goal) and then specific strategies are implemented towards accomplishing that goal. An IEP or a Care Plan must be viewed as a living document that will be reviewed and revised on a regular basis to ensure that it remains relevant to the child's needs and overall goals.

Both the IEP and Care Plan open the door for the child's input as to their unique individual needs, such as, adaptive equipment, Boardmaker, individual iPad's, one-on-one support, community supports, and a platform to display the child's successes and honor their capacity and desire for learning.

A common misconception is that the tools are only utilized in each specific individual professional lanes of expertise. I don't believe this to be true and suggest that the tools can be implemented and used by multiple professionals, in various systems, throughout the child's life. As a society we often learn best through our experiences, keep what is working and change what no longer works. This is an ever-changing process that creates knowledge, curiosity, and gives reason for celebrations.

As the child grows and develops, their needs will change, new recommendations and interventions will need to be developed and achievements will be celebrated as they accomplish the goals that were set. The child's Care Plan will always be reviewed in light of the previous goals and amended to be reflective of the supports or interventions that are necessary, and then updated as necessary. The IEPs are updated twice a year with the parents/caregivers' input.

An assessment graph helps to determine the needs of the child and helps to ensure that the adoptive family can meet their child's long-term needs. The assessment graph is created to depict the preparation and development of a permanency plan for a child moving from being in government care to an adoptive home. At the beginning of the permanency plan, the Care Team

or Adoption Circle as it recently (2018) became known, meets to develop and review the child's anticipated life-long needs. The concept of the Adoption Circle was created through the integration of Indigenous practices and the reconciliation efforts that are happening within the Province of British Columbia. "For many Aboriginal peoples, children are considered sacred gifts from the Creator, with their place in the center of the circle" Included in the circle is the children, family, and community (Aboriginal Policy and Practice Framework, 2018, p.13). This includes looking at the child's needs in all domains of their life including academic, emotional, physical, legal, and relationships. The Care Team or Adoption Circle typically includes the foster parent or caregivers, school supports, community supports, the Guardianship Social Worker, possibly members of the child's birth family. and the child themselves if appropriate. Once these areas have been identified as to how to best meet the child's needs, the Guardianship Social Worker will read home studies of current approved adoptive parent(s). Home studies are the final stage of the application process. The home study process takes time to complete. There are several home visits by the Adoption Social Worker and in-depth interviews with all members of the family, any adult children and non-related references are all taken into the assessment process.

The Guardianship Social Worker will then select three to four home studies to take to the *Matching Meeting*. During the Matching Meeting, as a collective, the team will go over the pros and cons of each of the families for the purpose of selecting the best match for the child. Once the adoptive parent(s) has been chosen, they are given the *Proposal Package*, which is a collection of all the medical, educational, psychological and birth family history of the child that has been collected by the Guardianship Social Worker, to review and determine if they feel equipped to meet the needs of the child and if they believe the child would be a good match to

their family. Once the adoptive parent(s) have *signed the Letter of Acknowledgement* of the Proposal Package, the Adoption Circle together with the new adoptive parent(s) join in the circle meeting to discuss and develop the *Transition Plan* that will take place over the next number of weeks. During the Transition Plan the child will be informed by the Guardianship Social Worker about their pending adoption. This will include information about the adoptive parent(s). What they are like, where they live, who is all in their family, if they have pets, what their house looks like, and try to answer any questions the child may have. The Adoption Circle will continue to meet to review how the transition is going, what is working well, identify struggles and how the team can best support the transition moving forward by answering any questions anyone has and to support the process from the development of the Transition Plan through to Notice of Placement.

Once the child has officially moved to their new adoptive home, *Notice of Placement* is signed. This is when the child is permanently placed with their new family. At this time the *child's file is also transferred to the Adoption Social Worker* who will *monitor* the new family for the next six months during the *Residency Period*. At the end of the Residency Period, the Adoption Social Worker will *complete the court package* to submit to the Supreme Court for the Adoption Order (The Adoption Act, (1996)).

If the transition is not going well and the supports given are not enough for the child or the family to be able to move forward with the adoption, then a family can withdraw from their application to adopt the child or the Guardianship Social Worker stops the process if they believe that it is not in the child's best interest to continue moving forward. If this is the case, then the process to find the child's forever family will start again from the beginning. The process goes

back to looking at what the needs of the child are and ensuring that all needs are being addressed in the best possible way with the best possible match.

The key elements to ensuring that the adoption selection and transition are successful are that the care team and the adoptive parents need to be transparent, inclusive, collaborative and to never lose sight of the importance of the best interest of the child.

### **Needs of Children**

Maslow's (1943) Hierarchy of Needs states that "people have an inborn desire to be self-actualized, that is, to be all they can be. To achieve these ultimate goals; however, several more basic needs must be met such as the need for food, safety, love, and self-esteem" (p.1). This is especially important for adoptive children as their understanding of basic needs and feelings of security are skewed. Many of these children have experienced their basic needs not being met in their early years. Often a child, who has been adopted does not share a typical view of having their basic needs met as experienced and shared by their non-adopted peers. When non-adopted children are sad, they often receive a hug and are assured that everything will be okay and together they will get through it, which meets their need for security; however, this is not shared by all adoptive children, as stated earlier, and for those children this is heartbreaking and of great concern.

The percentage of children in foster care who are being placed for adoption and have also been diagnosed with special needs seems to be of great concern as parents and/or caregivers tend to focus on what is wrong with the child(ren) diagnostically, and forget they are still children trying to navigate their world. Children who have lived in foster care often are faced with additional life challenges which may include feelings of guilt, inadequacy, or feeling responsible for not being with their biological parent(s). It is my belief that children are never in foster care

on account of their behaviour or any challenge they may face, but rather children are in foster care due to the adult's inability to meet the needs of the child and keep the child safe. Adopted child(ren), just like all children, crave to feel that they are loved, safe, wanted and belong.

Adoptive children, just as birth children, do not want their parents introducing them by their disabilities instead of by their name saying, "this is my son he is living autism, and therefore he is acting this way". Like all children, they just do not want to be defined by their disabilities or challenges.

### **Uniqueness and My Journey Through "Normal"**

It was within my role as a Permanency Social Worker that I came to understand that we, as a society, need to have a common goal of creating a well-balanced future for all children.

When caregivers/parents provide opportunities for children to thrive where they are in the process, this gives the child the greatest gift of all; a sense of importance and valued, simply for being present in the world. Unfortunately, much of society has become consumed with the idea of creating uniformity and universal standards of what is "normal" with the belief that a diagnosis will fix the child's disability/challenges or exceptionalities to ensure they act "normal".

As a child, I strived to be normal. I desired to fit in, to be just like my peers and to be one of the first to be chosen to join a sports team. During my journey through my teens and into adulthood, I found myself changing in that I no longer desired to be normal, instead I wanted to be unique. I wanted to be valued for my strengths and what I could offer to my community. This epiphany occurred when I was asked to play on the boys' basketball team. I was asked to play because of my skills, positive attitude and a genuine love for the game. I became part of the team due to my merit, not because I had to conform to the societal expectations. Due to my life

experience this has developed my practice in emphasizing the importance of ensuring that each child is heard and valued for the uniqueness they bring.

### **Capabilities Approach**

The capability approach is a theoretical framework that entails two core normative claims: first, the claim that the freedom to achieve well-being is of primary moral importance, and second, that freedom to achieve well-being is to be understood in terms of people's capabilities, that is, their real opportunities to do and be what they have reason to value (Robeyns & Byskow, 2020). The approach has been developed in a variety of more specific normative theories, such as (partial) theories of social justice or accounts of development ethics. It has also led to a new and highly interdisciplinary literature in the social sciences resulting in new statistics and social indicators, and to a new policy paradigm which is mainly used in development studies, the so-called 'human development approach' (Robeyns, 2016).

McNiff (2016) spoke about using a capabilities approach, and the importance of capacity, ability and capability. This concept focuses on the core task of creating a solid permanency plan for children and youth. In capacity, both the child's strengths and challenges of the child(ren) will be looked at so they can be placed with the best suited match for the forever family. Highlighting the strengths and identifying challenges demonstrates what the child has mastered and the areas that need further support. It is important to look at the children/youth's needs to support their growth and their ability to flourish and grow. In capability, the focus is on developing a plan that promotes opportunities for the children/youth to grow and develop in all facets of their lives.

The capabilities approach stands to be forgotten or overlooked when we are focused only on the 'result' of something. Having the result attained must also ensure the success of the journey toward that result. On the journey to permanency, families may have to revise the route and explore side roads to reach the solid and stable foundation of a truly connected child or youth who is fully integrated and engaged with their new adoptive family. Through experience and self-reflection, I was often caught up in being the best, trying to impress my family and peers, losing my own identity, my significance, and my uniqueness. All children have qualities that could have a negative or a positive influence on the future outcomes with whom they interact. As a society we also have the ability to choose how those influences will affect not only one's future, but also the futures of those we are working with.

In the process of inclusion, meeting policies, standards, and completing the required tasks as a Social Worker, it is sometimes forgotten that these children are our future. I believe we need to become more interested and more curious. When we become curious, we stop searching for a deficit and change to wanting to know more about the child. What makes them tick? What are their greatest accomplishments? Greatest fears? What makes them laugh until they cry? What horrifies them? Why are people the way they are? It is not a means of changing them to the ominous "normal" but to celebrate their differences as a great addition to society's tapestry. It may be as simple as taking a moment to laugh at a joke that is not that funny or laugh along with a child or adult who has an infectious laugh to simply be present with another. In the challenges of my role working for MCFD, the process of inclusion, meeting policies, standards, and completing the required tasks we are given, we can easily forget the needs of the children and that each child's needs are unique. It can feel good to laugh, smile and appreciate the simple things in life and the uniqueness we each bring to relationships and society. As a society it is

important to reflect on the experiences in life such as, getting to know individuals, and being curious about their wonders about the future.

### **Overview of Study**

Through this applied project I will explore the research question, "When individuals are adopting a child from the foster care system, what are the components of a resource document that would support the adoption circle to build an understanding of child(ren)'s potential unique complexities, in order to achieve a more successful permanency"? These challenges need to be addressed in order to equip the adoptive parent(s) to address and overcome potential challenges. Providing adoptive parents with the support and tools to overcome the challenges lowers the potential of adoption disruption or breakdown (Palacios, Rolock, Selwyn & Barbosa-Ducharme, 2018). Raising a child who may have experienced neglect, endured trauma or witnessed domestic violence requires adoptive parents to know how this can impact their child's development. Adoptive parents who are aware of and accept support for their adoptive child(ren) strengthen the family's attachments. Likewise, if the adoptive team embraces specific and intentional education that is offered, they will build lifelong support and acceptance around the adopted child.

In this applied project I wove in my own experiences with adoptive parents, adopted children, teachers, and foster parents together with what I have learned from the literature. The findings were interwoven into educational workshops that I have created explaining the permanency process through the capabilities approach. I have collected data through reflection, journaling, and literature reviews. I focus on three main points of the capabilities approach: capacity, ability and capability. It is important for the teacher, the parents and the care team to have a clear understanding of the language being used and reframe that language to help them

understand where the child is at, their needs, and how we can support them in moving forward and eventually removing the need for a plan (Atkinson & Riley, 2017).

Education is an important component because, not only does it involve student learning in permanency placements, it also alerts the learning needs to prospective parents, teachers, support staff, Social Worker, and any other person who is important in the child's life. Most children who are in the process of adoption, in my perspective as a Guardianship Social Worker, have exceptionalities, experienced extreme trauma, are predisposed to substances, or may have a likelihood of having learning disabilities and mental health concerns. It is important to view the child as an individual and not let them be defined by their exceptionalities. This applied project will offer insights on what the process of adoption is like in the long term with attention to barriers, required supports, successes, and hopes and dreams of those involved. This applied project will highlight common themes and demonstrate how the capabilities approach can help foster successful long-term permanency. The knowledge created will be personal and subjective and I hope that my experiences will be shared through each permanency plans. Through this project I hope to bring awareness of potential gaps in the adoption process. This new awareness will transform the work of those by providing them with a better understanding of, and ability to plan for, future permanency placements.

### **Justification of Study**

My role as a Permanency Social Worker is to, 1) build a relationship with each of the children on my caseload, 2) understand each child's unique and individual needs, 3) recognize the supports each child may need both now and, in the future, and 4) be in conversation with each child to discuss what permanency could look like for them. I am always curious about the

children's thoughts about permanency especially what they envision their forever family to look like if they cannot live with their biological parents. I have four years' experience working with children and youth in the school system and working as a youth addiction worker. Each of these positions have influenced my understanding and interest in children with exceptionalities. As a Permanency Social Worker, I believe my work will continue to grow and flourish through collaboration and the sharing of information, which I believe to be the key ingredients in creating a solid permanency plan for children and youth if they are conducted with honesty and sensitivity. I have experienced true goose bumps in telling a child that I had found her forever family when she squealed in excitement. I could not have experienced this without the support and collaboration of co-workers, teachers, EAs, support staff, the children's extended families and the children themselves. This team of experts helped me understand the importance of understanding the whole child; their needs and wants, their likes and dislikes, their triggers, and how to help them calm themselves. I gained awareness of what makes them happy, what makes them feel sad, and their hopes and dreams for their future. This huge undertaking is not a job completed by one person or by solely looking at the child's exceptionalities or deficits. The process must be inclusive and expansive to include their deficits, their gifts, and their uniqueness. I believe that looking at the child with a wholistic and all-encompassing point of view is imperative in preventing adoption breakdowns.

### **Conclusion**

In chapter one I discussed the adoption process, the importance of the child's Care Team or Adoption Circle and how important it is that they work together collaboratively in the best interest of the child, and I explained how the child may be feeling during the adoption process. There were discussions as to why adoption disruption/breakdowns occur, and what is needed to

prevent them from happening. Some of the ways to avoid adoption breakdowns include the importance of attachment, getting to know the child beyond their exceptionalities and accepting the child as their own child. We must gain an understanding of what the child truly needs and wants; to be loved unconditionally, to be heard, to belong and have their family, their person.

In chapter two I will discuss the importance of children and youth having a sense of belonging and a family to call their own so they can experience unconditional love. In the research provided in chapter two, I will discuss the rates of successful and failed adoptions I will discuss how to achieve successful adoptions by going through the adoption competencies, and what is necessary to ensure the longevity of an adoption. I will discuss the common challenges and the gaps in the adoption process that have been the cause of adoption breakdowns. And discuss the focus need to be on the well-being of the child and meeting the child's basic needs, unconditional love, and need for stability and permanency, In next chapter I will discuss the importance preventing an adoption breakdown/disruption there needs to be a healthy attachment and openness between the adoptive and their child. I will discuss the negative impacts of adoption breakdowns/disruptions on children and how they are retraumatized and feel hopeless, and unwanted.

## Chapter 2

### Literature Review

“There is no Friendship, and no love, like that of a parent for the child.”

Henry Ward Beecher, 2020)

#### Introduction

In this chapter I will review available literature and explain the factors that contribute to the lack of understanding of children who have been adopted. These factors will make clear what needs to happen to reduce adoption disruption and avoid further trauma for these children. I will identify the educational elements that are needed to enhance the adoptive parent(s') and care team's awareness and increase their skill set to support these children on their journey to adulthood. Finally, in this chapter I will reflect on the role of the adoptive parent(s) and the child's present and future care team(s) regarding their understanding of the complexity and uniqueness of the child (ren) they are adopting.

In 2017-2018 the Adoptive Families Association of BC (2020) reported that 244 children in government care were adopted, 77 were international adoptions, and 30 were local private agency adoptions of infants. There were 1347 children registered as available for adoptions in 2017-2018 and 445 were over the age of 12, and 570 youth unfortunately aged-out of care (reaching the age of majority within the province of British Columbia while remaining in government care), without a family to call their own. Representatives of Child and Youth (RCY) completed an adoption report in 2014 reporting that out of 457 prospective adoptive homes that were part of the study, 197 successfully completed adoptions were made during the six-year period. However, 240 applicants withdrew from the program at some point along the way (RCY,

2014, p.3). It is concerning that the number of successful adoptions is low and that there are still 1346 children still waiting to meet their forever family in British Columbia. Focus on Adoption magazine stated, “about 15% of adoptive families find their dreams shattered as they realize that despite everyone’s best intentions, the adoption isn’t going to work (McCreight, 2015). Practices around adoption need to change so that there is a decrease in adoption disruptions. This change can occur with increased parental satisfaction, better parent-child relationships, more collaboration, and an open-minded understanding of the uniqueness’s of children in the foster care system.

Addison (1992) explained that Bronfenbrenner believes the primary relationship needs to be with someone who can provide a sense of caring that is meant to last a lifetime. Bronfenbrenner was one of the first psychologists to adopt a holistic perspective on human development via his bioecological systems theory (Bronfenbrenner 1970). This relationship must be fostered by a person or people within the immediate sphere of the child’s influence (Ryan, 2001, p.3). It is important to understand the experiences of those involved in care and adoption, both in achieving successful permanency and how this experience impacts individuals’ identities, sense of belonging, mental health and physical well-being. Schools and teachers fulfill an important secondary role but cannot provide the complexity of interaction that children who have been adopted through the Ministry of Children and Family Development (MCFD) require. Children adopted through MCFD have typically endured various traumas often including substance abuse, neglect, lack of sense of safety, physical and or emotional abuse, hunger, and insufficient parental structure from their birth parent(s). These children are further traumatized by the fact they have been in foster care. Foster care, while it serves a purpose of ensuring the safety and well-being of children who have been removed from their family of origin, causes

trauma by the severed attachment and abuse and neglect they may have endured. Further trauma, even if positive in being adopted does occur as the child makes sense of being adopted. Often children will experience feeling unwanted, neglected, and more often that they are not worthy of love, which can have lifelong effects.

### **Making Adoptions Successful**

Woodman-Worrell and Higgins (2018) discussed how to achieve permanence for children with special needs and or mental health disabilities. It was noted that 40 percent of children who were adopted have some form of disability (Cousins 2016). At one time it was recommended that healthy children be adopted before children with disabilities, which left many children in foster care. The adoptive parent must receive full disclosure of the child's disability, but unfortunately this does not guarantee the child(ren) would be adopted. I was concerned that with all the research there would still not be a lot of data detailing what contributed to successful adoptions or what supports are necessary to ensure the longevity of the adoption. Wright and Flynn (2006) discussed how adoptions can be successful despite challenges by conducting an exploratory study and found that challenges such as the lack of information, supports, and the complexity of the child(ren's) behaviour could cause the adoption to be unsuccessful. Woodman-Worrell and Higgins (2018) discussed several common themes that need to be in place for a successful adoption, 1) supports during and after the adoption process (which I believe is lacking in BC), 2) full disclosure of the child's special needs or mental health concerns, and 3) transparency from all parties involved. The study discussed the lack of awareness of the resources available or the need for the adoptive parent to successfully care for their child while they are bonding with their child. The author's discussion noted this study was focused on play

therapy between the child and adoptive parent to help foster a secure attachment. However, that was as far as this particular study went and was set aside compared with the other possible theories. This study touched on the importance of the child's well-being as essential to strengthening the attachment between the child and adoptive parent(s). Included in the discussion were the necessary areas of training for adoptive parents, which were specifically around the child's development in natural settings such as imaginative play, reading stories, and basic interactions between parent and child. These interactions are necessary for any child, with or without a disability. These are simple interactions that can be taught to adoptive parents to easily support a successful adoptive placement.

Atkinson and Riley (2017) explained that there is a need for adoption training for prospective parents. This training would meet the requirements set out in the adoption competencies. Adoption competencies are; 1) adoption history, law and process, 2) Introduction to adoption-competent mental health practices, 3) Clinical issues in planning, preparing for and supporting adoptions, 4) clinical issues in providing therapeutic services: Grief, loss, and separation, 5) trauma and brain neurobiology, 6) attachment, 7) adopted adolescents and identity development, 8) clinical issues in working with birth and adoptive families, 9) clinical work with adoptive families: managing challenging behaviours, 10) openness in adoption, 11) race and ethnicity in adoption, 12) integrating adoption competencies: knowledge, skills and values (p. 2). The Atkinson and Riley (2017) discussion brought up how adoptive parents lacked the skills and understanding of how to address on-going concerns and behaviour of their children with complex needs. The author collaborated with different disciplines such as child welfare agencies, private non-profit agencies, and adoption agencies to define and implement the nine domains of the adoption competencies. These domains include mental health, therapy, openness, skills,

values, trauma, attachment, identity, and culture. There was an emphasis on supporting adoptive parents in their understanding of the implications of trauma and interruption of attachments which would result in the parents having a stronger understanding of the child(ren)'s diagnosis, mental health and or extreme behaviours. It must be kept in mind that this research is simply a guide to support a child as it is as important to remember that each child is unique and each child's adoption process will be different.

The adoption training, as discussed by Atkinson and Riley (2017) is best developed in a few different approaches such as family-based, strength-based, and evidence-based and it also involves a mid and end training survey to ensure the competencies were met to maintain a positive adoption process and decrease adoption breakdowns. Depending on the results of the survey's, the curriculum may need to be adjusted. Training may need to occur in the beginning, middle and remain ongoing for a time after the adoption has been finalized. Another area to be mindful of is ensuring that the adoptive parent(s) fully understand the complexity of their child(ren)s needs as Adoptive parents need to remember that their child is wanting to have a sense of belonging and to be part of their parents' world without being defined by their special needs, mental health, and/or behaviour.

Wright and Flynn (2006) discussed how adoptions can be successful despite challenges by exploring the complexity of the needs of the child and understanding the needs of children through their developmental stages. Wright and Flynn (2006) investigated successful adolescent adoptions in North Carolina and across the USA with attention to how the participants, both parents and adolescents, described successful adoptions. Qualitative, exploratory research involved research interviews with 91 participants and collected demographic data as well as

information about “(a) how participants described successful adolescent adoption, (b) the challenges they faced, and (c) how they accounted for success” (Wright & Flynn, 2006, p. 494). Their findings identified the characteristics they deem necessary for successful adoptions to take place and they are related to *becoming a family*, and *quality of life* (p. 494). The key issues around becoming a family included fitting in, emotional relatedness, commitment, acceptance, the reward of parenting, and the meaning of having a stable family. Both parents and adolescents identified improved quality of life in the present, with parents also projecting possible quality of life impacts into the future. In addition to the identification of successful key areas, the findings also identified challenges that were faced. For parents, these challenges included behaviour problems, parental effects, and financial hardships. Adolescents described missing their birth family and relationship issues with the adoptive family. Both parents and adolescents described the adoption process issues as challenging. The researchers noted the value and implications of this study for providing detailed information and support about potential challenges and the focus on success required by all adoption partners. This study was limited by the data collection method of single interviews, and the potential of researcher bias in interviews and interpretations.

Arkansas State University (2016) stated:

“The importance of an Individualized Education Plan (IEP) cannot be understated. IEPs are education plans developed specifically for student with exceptionalities by a team of professionals and family members. IEPs are unique in that they focus on a child’s strengths, include measurable goals including non-academic goals and specify the adaptations necessary for a child’s learning environment in order to ensure progress in priority areas”. (p. 1)

This is a common misconception that our tools are only utilized in our own lanes of expertise. I don’t believe this to be true and would challenge that the tools can be used by multiple

professionals and throughout the child's life span. As a society we often learn best by our experiences and keep what is working for us and change what no longer works. That is an ever-changing process that creates knowledge, curiosity, and gives reason for celebrations.

Wright and Flynn (2006) discussed concerns with the adoptive parents not forming a healthy attachment with their adopted child. Without healthy attachment, the adoptive parents separated themselves from their child's disfunction and they failed to help and support them, consequently they were unable to *fix* their adoptive child. On the other hand, those parents who demonstrated that they had formed a healthy attachment with their adoptive child(ren), addressed the child's behaviour differently. The authors described these parents as having a connection with their child and that their child was family. These parent's expectations were lower, which allowed their child to achieve a sense of mastery. The stressors the families faced during the adoption transition and or after the adoption was finalized left them stressed and emotionally drained. It appears one of the reasons some families were successful in overcoming the struggles they endured raising exceptional children was because they accessed family and outside supports to guide them in working through the child's behaviours they were managing.

In their research discussion, Wright and Flynn (2006) noted that several children reported that they were unhappy because they were not placed with their biological siblings. They expressed missing their biological family and they did not have enough time to adjust during the transition to their forever home. However, one child explained that they felt their parents chose them and wanted them, and because of this they felt unconditional love; they felt that their adoptive parents had molded them into the person they are today. Therefore, maintaining

positive and healthy biological family connections can be a support for the adoptive family when they are struggling with their child's behaviour.

### **Negative Impacts of Adoption on Children**

Sewyn and Meakings (2016) explained that there were concerns with adolescent-to-parent violence from adopted children between the ages of fifteen and seventeen. In their paper they discussed that the challenging behaviour has a detrimental effect on the child-parent relationship when the parents felt threatened because most of their energy was focused on keeping themselves and the other children in the home safe, which in the end, was the root of the adoption disruption.

Sewyn and Meakings (2016) explained how the adoptive parent(s) voiced that they felt they were being blamed by outside agencies for not being able to appropriately address their child's behaviour. The authors ask us to remember that the adoptive parents also had their own feelings of shame because they believed they had failed their child. In my experience this is a common statement that I often hear from adoptive parent(s) who are struggling with the children they are in the process of adopting. I tell adoptive parent(s) that it really does not matter what other people say or think about their parenting if they are doing their best for the child and their actions are congruent with their "individual selves". Your child(ren) should feel loved, wanted and feel a sense of belonging. I remember telling my own children, when we were disagreeing or arguing (and to be honest the occasional screaming match), that it was my job and role as their parent to make sure that they have all the necessary skills, values and beliefs so that they can grow up to be amazing adults. I tried to instill a positive belief system so they could believe that change and great things can happen in this crazy world in which we live. Even though the road is

bumpy, we are still moving in the right direction. All this to say that there is no right way to parent, parenting is an ever-changing process.

Selwyn et al. (2016) discussed potential causes of the child's challenging behaviour; was it a reflection of witnessing domestic violence in the home, or was it a learned behaviour? Why do they believe it is acceptable and normal to assault the mother in the household when situations do not work out as they would like them to? These questions were not clearly answered in their article; however, what I have learned through my training from MCFD (2013) regarding domestic violence and trauma informed training is that children who have been exposed to domestic violence and intimate partner violence are at a higher risk of repeating the same violent behaviour in their relationships with peers and in any other future relationships.

Another point that Selwyn et al. (2016) explained throughout their paper was about the lack of transparency between the children, adoptive parents and Social Workers. Children were not informed about what was happening, why they were being adopted, and by whom. Essentially children were randomly placed with total strangers. In my practice I have always questioned how this is a positive process for the child and adoptive families in creating positive attachment and less disruptions.

Green and Furrer (2007), explained the focus should be on fast-tracking adoptions so that children do not remain in care. As children age, it becomes more difficult to place them in adoptive homes. Unfortunately, it is a common belief that adoptive parents only want babies or children under five years of age. The authors stated that government officials felt that fast-tracking adoption was extremely important, and this policy was legislated in the state of Oregon. However, the state of Oregon was one state that refused to implement this legislation. Oregon

felt it was important to put more services in place for parents to become educated and confident in addressing any child welfare concerns that need to be mitigated.

Green and Furrer (2007) further explained how other American states appeared to have a focus on parents who struggle with addiction and who were not going to get their lives back on track and leaving the adoption process was the next step. The authors discussed that there was also a lack of services and supports for these parents. Personally, I wonder if this barrier caused the bias that parents were not able to get their lives back on track in order to be able to care for their children. The authors went on to say that Oregon State explained that they understood the need for fast-tracking adoptions in some cases, but Oregon also felt the importance of working with the family to keep the children in the birth home. If parents are engaging in services and need a bit more time, (e.g. maintaining sobriety, learning the basic parenting skills, and/or being able to meet the child's fundamental needs), then time should be made available to encourage and support them in their goals.

Green and Furrer (2007) focused on one thought, even when the results did not show that fast-tracking adoption was a faster process and that it was truly not in the best interest of the child. I question why the researchers did not speak with the children who they were fast-tracking into adoption. The researchers also did not speak about the added trauma that would be inflicted on these children by fast-tracking their adoption to total strangers.

Neagu and Sebba (2019) found differences between the experiences of male and female participants who were in foster care and determined that male participants who were not connected to their birth family had feelings of loneliness, depression or anxiety about their future. At the age of 16, male participants mentioned that they no longer celebrated their

birthday. Female participants focused on adults that had provided mentorship, such as teachers, coaches, and/or caregivers. Female participants would leave foster care before they aged-out of care in search of identity, love, and feeling wanted, thereby often becoming at risk of being victimized through prostitution, domestic violence, and/or becoming homeless. Lifestyle risks are increased as these children seek to have their needs met in the world. Identity is the key to human development for the way in which humans perceive themselves and how they interact with others. Identity is closely connected to one's belonging, and self-esteem (Braumeister, 1986). Without a sense of identity, (who you are, and where you come from), it is difficult to form healthy attachments with family, and peers.

Neagu and Sebba (2019) also found that children who were placed in foster care with supportive caregivers who embraced the importance of helping these children work through the stigma surrounding being in foster care, addressed the grief and loss of not being with their biological parents, home, and friends. Where children who were placed in foster care where the caregivers did not have the understanding or the skills to address the above noted concerns, these children struggled with their identity, especially their self-worth, and many suffered from mental illnesses. Information is power, and with support children can process difficult information in a productive manner without lifelong residual effects. These authors suggest that relationships are key to developing a child's identity which in turn helps to build a healthy self-esteem which supports the child's healthy transition into adulthood.

Coleman (2011) discussed the impact of the stigma surrounding adoption. They found that children struggled with peer interactions; peers were kept at arm's length, or appeared guarded to

protect themselves from being bullied, ostracized, or from feeling unwanted. This also influenced a child's self-esteem and affected future relationships.

### **Importance of Self and Well-being**

Campbell-Whatley (2008) explored the “multifaceted interrelated dimensions of self” and endeavored to decode how children and youth with special needs learn (p.1). The author explored the ways used to teach children and youth with special needs to learn self-determination and understanding of self. They explored such concepts as the supports that are needed to educate these students. However, even before being able to look at educational strategies, the author stated that it is important to query if the student can self-regulate and to develop their perception of the world. The author discussed the importance of having the child look at their own strengths and weaknesses; they are then able to process easier to utilize the supports they need to excel in life when they have a strong understanding of self. Parents and educators at times stress that children need to understand the importance of excelling academically, this thought is often lost when children at times struggle to understand themselves and what they need. Contrasted with the belief that children with special needs who struggle to understand self and have little or no self-awareness to enable them to excel in life.

In my career thus far as a Social Worker who creates permanency plans for children, I have witnessed the amazing resiliency, self-understanding, self-advocacy, and self-preservation of children and youth. I have witnessed this both in typical children as well as children with exceptionalities. I have seen children whose world has been characterized with uncertainty, chaos and aloneness rise and demonstrate immeasurable creativity, awareness and optimism for their future.

Minnes and Weiss (2015) explored how parent(s) are caring for their children with developmental disabilities and how they are managing their frustrations, distress and well-being. They studied parent(s) struggling with understanding their child's disabilities and how they tried to figure out which community supports and services they can utilize to support their family. The authors explored many issues, but one of the concerns voiced by parent(s) was the lack of support in transitioning their children into school. Parent(s) found it exhausting having to reframe their child's behaviour and needs to fit needed services. Another concern was the financial stress and the struggle in meeting the cost for on-on-one support at daycare, the purchase of adaptive equipment, transportation to specialist appointments, and/or additional assessments that are not covered by their medical insurance.

Minnes and Weiss (2015) compared parent(s) who appeared to have achieved a sense of emotional and financial well-being to parent(s) who had not. Parent(s) who stated that they were doing well reported that they felt confident in their abilities in caring for their child(ren) with developmental disabilities while the parent(s) who felt they were not doing well said that they felt trapped, and that their child(ren) had caused difficulties in their relationship. This study showed a correlation to positive and negative outcomes in the parent's sense of well-being. I was disappointed that there were no recommendations in this study to address the negative outcomes. This literature review, once again, highlights the common concern that there continues to be a lack of focus in fostering healthy relationships between adoptive parents and their child.

### **The Art of Transparency**

Good (2016) discussed how children with special needs were the children who were not adoptable as they were children who have needs that are *out of the ordinary* thereby making

parenting more difficult. It was noted that these children came from multi- ethnic and cultural backgrounds and their needs were comprised of significant emotional, physical, or mental impairments. It was found that there were several issues that needed solving. Some things that hinder adoptions are when adoptive parents do not have a clear understanding of the child's exceptionalities, when they hold the belief that love, and stability will fix everything, and when there is a divide within the care team, and if there is a lack of transparency and trust that everyone is working towards permanency for the child. Based on these findings, I maintain my belief that there needs to be further training for foster parents, teachers, Social Workers, support staff and community members regarding the permanency process. We need to clarify how to meet the adoptive children where they are, understanding how to meet the child's need and not defining the child by their exceptionalities and childhood trauma. There needs to be training around the importance of working together collaboratively as a team in supporting the child and the adoptive parents through the adoption process.

Good (2016) reported that the adoption process in the USA is quite lengthy and takes a minimum one year in length, from application to permanency, and there is a formal and approval waiting phase. Good (2016) also reported that most adoptive parents wanted babies, which meant older children remained in foster care. Good (2016) reported by adoptive parents were 1) better communication from external services and adoption agencies, 2) supports navigating openness, and 3) being advised they would not be receiving extra financial supports to appropriately care for their children's specific needs. Good (2016) stated that parents need additional support and understanding about the impact of adoption on the family unit and extended family. The author stated that one of the struggles adoptive parents face is having a relationship with their child's

birth family after this birth family has failed their children. Even though openness is in the best interest of the child, some adoptive parents and children resist the concept.

Good (2016) explained that due to lack of information sharing and financial stresses, 15 percent of adoptions end in disruptions that are usually unratifiable. Adoption agencies and community professionals could practice the art of transparency, the adoption rate may drop drastically. Adoption agencies, private and public, are only in the beginning stages of changing the adoption process to be more informative at the start and adding financial supports until the child(ren) turns 19. This author states that positive outcomes can be obtained when adoptive parents are appropriately educated regarding the specific special needs of their child and what is available to them regarding external family supports. Unfortunately, this research depicts more negative adoption experiences than positive which does not paint a positive picture for children with special needs finding their forever families.

Palacios, Rolock, Selwyn, and Barbosa-Ducharne (2019) discussed implications of adoption breakdowns, failed adoptions, and dissolutions of adoption. They found that definitions and terminology differ depending on the country being researched. The author shared that in the US they changed the terminology to avoid the “forbidding sense of finality and doom” that came with the term failed adoptions (p. 1).

Palacios, Rolock, Selwyn, and Barbosa-Ducharne (2019) explained that when an adoption ends before the court order has been granted, this is called an adoption breakdown. The author’s continued to stated that, “it comes as little surprise that the percentage of breakdowns reported are as varied as the studies themselves “and this causes great concern to me. (Palacios, Rolock, Selwyn, & Barbosa-Ducharne, 2019, p. 3). Festinger (2014) pointed out that studies can

be misleading, as the results vary between the group or subgroups that are being studied (p. 3).

The author discussed the importance of ensuring that the adoptive family is prepared, understand the complexity of their child(ren), and that the prospective family has the ability to provide stability and permanency for children with diversities (p. 9). The complexity of this work that was provided by Child Welfare Information Gateway (2006) bulletin which outlined the basis of adoption practice. During the adoption transition of a child into their forever home, the following areas need to be attended to by to provide the best opportunity for the success of the adoption.

- 1) Birth parents - in all adoptions, but especially in adoptions of older children who have a relationship with their birth parent(s) working together with the birth parent to help them be able to give permission to their child to love and attach to their adoptive family is vital. Helping the birth parent(s) to understand that they are not being replaced in their child's heart, but rather expanding their child's family to include parents who are able to provide the care and stability that every child needs.
- 2) Openness in adoption – children who are being adopted do not need to sever all ties from their life before adoption. Agreements are made with each party to support and acknowledge the ongoing relationships that are healthy and beneficial for the child, lifelong.
- 3) Sharing information with families, involving youth in their placements – when children or youth have an active role in what is happening in the formation of their new family, they are able to feel empowered that their voice is being heard and listened to. The unknown is not as scary because they can ask questions, share their views and wishes and give feedback into what is working or not working for them.

- 4) Post placement services to support with attachment – Social Workers have a vital role to ensure that supports and services are put into place to assist in the development of the attachment between the child and their new family. This could include counselling that focuses specifically on attachment and ensuring that both child and new parents have a solid understanding of trauma, attachment, and the struggles that most adoption placements face as they grow together into a new family unit.
- 5) Support services once adoption has been legalized – most adoptions of children from child protection agencies have some type of post-adoption supports. This is often an income tested service that can offer financial remuneration based on the projected ongoing needs of the child. This may include counselling, assessments, tutoring, braces, or ongoing mental health supports due to the child’s pre-adoption experiences.
- 6) Family and child Assessments – as previously stated, children adopted from the foster system have most often experienced trauma. Having the availability for assessments to identify exact needs of the child and how these needs can be met within the context of the new family are imperative to support the adoption and prevent disruptions or breakdowns.

### **Capabilities Approach**

McNiff (2016) described some different approaches being used to assist with the process of adoption as well as the benefits of connecting and utilizing the different experiences and thoughts of the child’s team. McNiff (2016) spoke about the *capabilities approach*, and the importance of capacity, ability and capability. McNiff (2016) states that this concept is at the core of creating a solid permanency plan for children and youth. In *capacity* we need to look

within to see the strengths and weakness of the child(ren), this helps us to find the best suited match for the child(ren)'s forever family as well as demonstrating what the child has mastered and in which areas they are needing support. In the area of *ability*, we look at what the children/youth needs to support their growth and their ability to flourish and grow. And, in the area of *capability*, we look at how we can develop a continuous plan which supports and offers the opportunities for the children/youth to grow and develop in all facets of their lives (McNiff, 2016).

The capabilities approach can be forgotten about when we are only focused on the “end result”. Part of reaching the desired “end result” means that the team needs to be focused on being successful on the entire journey. It is true that at times we may have to veer off the plan in order to be successful and we have to be ok with taking a detour.

### **Gaps in the Adoption Process Regarding Ongoing Educational Development**

Good (2016) discussed how children with special needs were the children who were not adoptable as they were children who have needs outside of the ordinary and makes parenting more difficult. Throughout the research I have reviewed there have been commonalities as to what causes adoption breakdowns; lack of transparency, lack of information sharing, lack of supports available, as well as the adoptive family having no understanding of how to support their child through their trauma (Randell, 2013).

### **Conclusion**

My main goal in choosing the articles that I did was to show that there are many positive outcomes that could occur in the adoptive process. Research indicated that if adoptive children

were asked if they would like to be involved in some of the steps in their adoption as well as if the Team strives to better understand the complexity of the child's trauma, grief and special needs then the process could result in greater chances for adoption permanency. The research explains there needs to be with someone (Adoptive parents) who can provide a sense of caring that is meant to last a lifetime. Flynn (2006) discussed how adoptions can be successful despite challenges by conducting an exploratory study and found that challenges such as the lack of information, supports, and the complexity of the child(ren's) behaviour could cause the adoption to be unsuccessful. Wright and Flynn (2006) discussed concerns with the adoptive parents not forming a healthy attachment with their adopted child. Without healthy attachment, the adoptive parents separated themselves from their child's disfunction and they failed to help and support them, and how this has long term effects adoption disruptions have on the child(ren) when they have placed back into care.

Good (2016) discussed the results of a project in which Social Workers had a great idea to start a weekend group geared to support adoptive children in understanding the world of adoption. They spoke of the importance of understanding that the activities and tasks for the children need to be age appropriate and interesting for the children's greatest success. I was encouraged to see the outcome from the variety of research papers I had perused as there was a visual layout of the student, which is how I conceptually learn. As I previously mentioned, I believe it would be beneficial for children to move into a concurrent plan as opposed to directly into adoptive plan. A concurrent plan is a plan where the adoptive parents' care for the child(ren) for a minimum of six months prior to Notice of Placement or the formal signing of the child being placed into an adoption home. Notice of Placement is then initiated once the child is officially placed in the adoptive home for permanent adoption. This is important for the child so

they can begin their healing journey while the transition process begins and then move to their new adoptive home.

Through this research review I also learned that adoptive families need education regarding the special needs that their child may already have or may develop in the future. For example, the child may have been exposed to severe trauma, may have Autism, ADHD, FAS, FASD, cognitive delays, mental health or other health issues, brain injury, or genetic deletions or additions, to name just a few. Ensuring that adoptive parents have the education, knowledge and support they need to support their new child is imperative. The adoptive parents would benefit greatly by understanding how their newly adopted child is dealing with their trauma and or special needs. It is important that the adoptive parents see their child as a wonderful whole person, rather than defining their child by their areas of special needs.

In Chapter 3, I will discuss the intent and rationale of the applied project. I have created five, 1 ½ to 2-hour long educational workshops, that will address the gaps that I found through my research and through practice. The five workshops were designed to support the child, and their care team, to fill in the gaps in hopes of preventing adoption breakdowns/disruptions. The workshops will cover collaboration, childhood trauma, adoption process, causes of successful adoptions and adoption breakdowns, understanding a child's exceptionalities, and attachment and openness.

As a Guardianship Social Worker, practicing in the area of Permanency Planning, I am forever faced with the persistent query of how we can collaboratively put supports in place to help engage a child's long-term success in the classroom and with their forever family.

Throughout the five workshops that I have created, I will also provide some ideas of successful

interventions that may entice the child to learn to love education and find a way to form a healthy attachment to their forever family.

### **Chapter 3**

#### **Considerations for Implementation of Applied Project**

##### **Introduction**

In this Chapter I will outline my applied project and how it will be presented. The project consists of five sections with each of the sections consisting of a workshop that is designed to be presented via PowerPoint. During these workshops there will be opportunity for input and discussions with the participants, as well as video clips, news articles and research findings. Participants will be asked to participate in group discussions that will be selected by the presenter. The five workshops topics will be:

- 1- Adoption Disruptions & Breakdowns
- 2- Collaboration
- 3- Attachment & Openness
- 4- Childhood Trauma
- 5- Exceptionalities

At the end of each workshop the participants are asked to reflect on what stood out for them, what inspired them, what they struggled with, what they would change about the presentation, and then have the opportunity to express other elements of the adoption process that they would like more information about. These inclusive workshops support the educational growth of the child's care team, and pre-adoption through to the finalization of the adoption order through the Supreme Court.

The overall intent of the educational workshops is to decrease the gaps in knowledge within the various silos of the child protection agency. The ultimate goal in this work is to help the child's inclusive team and the adoptive families see the children beyond their exceptionalities and behaviour(s) and see them as amazing, resilient loving children who want to be loved and

supported - unconditionally. I believe the best way to deliver this information is by helping all members of the child's team to understand the importance of the children and their needs, wants and desires. We often forget that the children are often mirroring the adults in their lives, so it is very important that we don't forget that they are the future; they are the future teachers, doctors, educational assistants, nurses, advocates and Social Workers!

The best way that I feel I can assist the child's care team to understand how these children are affected by trauma and their need for healthy attachment and unconditional love, is to bring the discussion back to the basics by creating a safe learning environment where people are free to share their similarities, uncertainties and possible misconceptions about the adoption process without the risk of feeling judged. To do this, I have created educational workshops where the participants can access the presentation and the real-life examples from a facilitator who creates a safe and inclusive learning environment.

### **Overview of Project**

The Joint Special Report on the Health and Well-Being of Children in Care in British Columbia: Educational Experience and Outcomes (2007) concludes that: children in care change school more frequently than children who have never been in care, very few children in care graduate from high school, and children in care do less well on developmental and academic assessments (p. ix). Children in care have also often witnessed violence, neglect, and trauma, and this information needs to be explained to the professionals in the educational system, caregivers, Social Workers, parents, and community supports. However, these children do not seem to receive the necessary supports due to privacy issues, and teachers do not receive the information needed for the children to be successful in school, to have healthy relationships with their peers, or to experience a normal childhood. Why is this still occurring? A phrase that is often stated, "in

the best interest of the child” (Skiveness, 2001) must always guide the adoption process. It appears that everyone on the child’s the care team has a different definition of what is *in the best interest of the child*. When the team is not all working from the same definition of ‘best interest of the child’ important aspects of planning for the child can be overlooked or missed. How is this possible when the care team is supposedly working towards the same goal for the child?

The five educational workshops that I have created are intended to support all members of the care team to work from the same lens (best interest of the child), with the addition of their areas of expertise. The conversation during the workshops will include the perspective of the teacher, the caregivers, the child, the Social Worker, and community support workers which, when put together, creates a greater understanding of the dynamic of the child’s strengths, fears, struggles and experiences of trauma, attachment, openness, style of learning, and exceptionalities. The educational workshops are delivered in a PowerPoint format and can be delivered through Zoom, Skype, Microsoft Teams, or through in-person training. The premise of these workshops is to create a collaborative understanding of the needs of children in care and how we can support long-term permanency for them.

### **Intention**

Through the five workshops I intend to help those involved in the child's adoption experience to see the child beyond their exceptionalities and presenting behaviour. I believe that there needs to be a change as to how children in foster care are perceived by their peers, caregivers, adoptive parents, support system because it can affect a bias in the process, because children in foster care are often perceived as dysfunctional or unfixable. I believe that a positive shift can occur within the child's collaborative team comprised of the teacher, EA, counsellor, community support, and forever family. In the decision-making process, the team must have all

the information they require to be able to make the best decision, as a collective. The team must know the child's strengths, weakness, what helps them learn, how they process information, how they solve problems, and to be part of their decision-making process. As a collective the inclusive team must be mindful that knowledge is power and ever changing.

Another intention I have is to encourage educators, parents, community support, as well as the child, to reach out and be curious in their understanding of how children may have been affected by trauma. I also want them to understand the importance of helping the child stay connected to their family of origin and the individuals with whom they have built healthy relationships. As was determined in the review of literature, this collaboration will support growth for the child's four domains of permanency: relational, legal, physical, and cultural.

### **Rationale for Creating the Workshops**

Halbert and Kaser (2014) discussed the importance of creating change by approaching all roadblocks collaboratively through creativity and learning. We all need to come to the table and share the knowledge we have. This type of sharing creates a solid foundation for the multi-disciplinary team to be creative in designing innovations. Collaboratively the team can develop and craft new ideas and reflect openly on what has worked or not worked.

Each of the five workshops will consist of a PowerPoint presentation. The presentation will provide both visual and audio content to engage participation and questions. Yueng (2009) felt that PowerPoint presentations were overused and there was a discussion as to whether PowerPoint should be discouraged as a form of training or information sharing. According to this author's survey findings, 60 to 90 percent of respondents found using PowerPoint ineffective and that it bored their audience. However, if used thoughtfully, including interactive conversation-evoking slides, animation, and add-on functions Yueng (2009) determined that PowerPoint can

be a powerful tool to help the audience understand the material being presented. It is common knowledge that the main key to delivering a successful PowerPoint workshop, is preparation and a clear understanding to the information that is being presented.

Pinch and Bijker (1987) explained that the issue is not with the software; it is with the actual intent of the workshop and its delivery. A PowerPoint presentation is the creation of information or a message; like writing a letter or song. The information gathered for a PowerPoint presentation is from research, surveys, interviews that is reconstructed to meet the needs of the participants. Pinch and Bijker (1987) also debated whether PowerPoint was effective or a waste of time. This debate appeared to have started around 2001. The PPT program is accessible to anyone who has access to Microsoft computer programs.

Richard Bretschneider, the lead program manager for PowerPoint claims that it was one of the famous "Dilbert" comic strips that made the critiquing of PowerPoint popular. In 2001, an article by Ian Parker that internationally is one of the most often cited in this context was published in the New Yorker (Parker, 2001, p. 77). "PowerPoint, instead of destroying old skills of arguing, theorizing, and communicating, can generate new learning opportunities. Entailing discovery, criticism and plurivocality" (Gabriel, 2008, p. 256). The effectiveness of using PowerPoint in a workshop ultimately lies with the presenter and how the workshop is delivered. The PowerPoints will be delivering either in person, or online, through Skype, ZOOM or Microsoft Teams. I have found throughout my research and practice there are similar gaps that have been stated or are present. Another similarity is that there are common struggles that seem to cause adoption breakdowns/disruptions, such as, lack of supports for caregivers, lack of transparency, caregiver not skills to meet their child needs, lack of funding and resources.

Educational workshop:

First sub-section is **Workshops 1: Adoption Disruptions and Breakdowns**

This workshop was created for adoptive parents, educators, supports workers, foster parents, children, and youth depending on their age, and social workers. It was created to provoke open discuss as to the factors that cause adoption breakdowns/disruptions and how we as a care team can prevent adoption breakdowns form happening. I will be covering the adoption process from the being and until the child turns 19 years of age. The differences between adopting a child(ren) privately or through MCFD. The importance of creating an adoption circles, to discuss the adoption plan, what is going well, what supports are needed. There is information regarding the acts that MCFD must follow in the adoption process while keeping the child needs in the forefront through the four dimensions of permanency. This PPT and facilitator notes for workshops one is in Appendix A.

Second subsection is Workshops **2: Collaboration**

This workshop was created for adoptive parents, educators, supports workers, foster parents, children, and youth depending on their age, and social workers. It was created to provoke open discuss as to the importance of collaboration in the adoption process. Collaboration is an area that is forgotten, as individuals working in our silo's, it is easy to be consumed by completing our daily task, or closing files, meeting our mandates, that the process in completing our daily task might be less consuming if we reached out to our community partners. In my professional role as a social worker, I have found that there are many individuals, who have contact with each child every day, such as; teachers, parents, caregivers, community partners, and educator, yet, no one is talking to each other. No one is listening to one another thoughts, ideas or sharing their piece of the child struggles and successes, instead we stand alone without the support of the team, to meet the child's day to day needs. However, in the adoption

process, collaboration is key to the success of preventing adoption breakdowns/ disruptions.

This PPT and facilitator notes for workshop two is in Appendix B.

Third subsection is Workshop **3: Attachment and Openness**

This workshop was created for adoptive parents, educators, supports workers, foster parents, children, and youth depending on their age, and social workers. It was created to provoke open discuss as to the factors that cause adoption breakdowns/disruptions and how we as a care team can prevent adoption breakdowns from happening. In this workshop I will be discussing the importance of the need for nurture, being curious and for the child to stay connected to their biological family and their important people in their lives. This is a difficult concept for adoptive parents and professionals involved in the child's adoption process. There will be discussion the different types of attachment and how to create healthy attachment between their adoptive parent(s) and their child and how-to unbiased openness between the adoptive family, and the child's important people in their lives. I will be discussion how the children are affected, academically, emotionally, and physically when there are struggling with attachment and early trauma. This PPT and facilitator notes for workshop two is in Appendix C.

Fourth subsection is **Workshop 4: Childhood Trauma**

This workshop was created for adoptive parents, educators, supports workers, foster parents, children, and youth depending on their age, and social workers. This workshop was created to provoke open discuss how childhood trauma has an impact on adoption breakdowns/disruptions and how we as a care team can prevent adoption breakdowns from happening. In this workshop I will discuss the different types of childhood trauma, factors that determine the impact of trauma events have an impact of the child's functioning. This workshop will discuss how trauma effect the child's body, brain, emotions, attachment, their identity,

behaviour, and future development. This PPT and facilitator notes for workshop one is in Appendix D.

Fifth subsection is **Workshop 5: Exceptionalities**

This workshop was created for adoptive parents, educators, supports workers, foster parents, children, and youth depending on their age, and social workers. It was created to provoke discussion on what are exceptionalities, how is the child affected and how does it factor in the success or failure of their adoption process. In this workshop we will discuss the different exceptionalities in detail and the importance of understanding a child's exceptionalities. How does the child's exceptionalities affect their day to day functioning and ongoing cognitive, emotional, and physical development? This workshop will cover the 12 Ministry designations. I will discuss the importance of getting to know your child beyond their exceptionalities, by seeing the child as a child first, re-examine one's own beliefs about exceptionalities, and remembering every child should believe they belong. This workshop will cover strategies and resources that help the family support their child. This PPT and facilitator notes are in Appendix E.

### **Conclusion**

Through my experience as a Permanency Guardianship Social Worker, I firmly believe that inconsistency in the adoption process creates errors that will affect every aspect of a child throughout their life span. It is extremely important that we work as an inclusive and collaborative team to ensure that no stone is left unturned when planning for permanency for children in care.

We also need to be consistent with our documentation on our successful and failed permanency plans. Consistency will create baseline data that will enable us to see change and how we can improve our practice, or add on the correct supports in the plan, which requires that

we are collectively aware of what works and what does not work. Without consistency, the process is flawed; the matching process, the larger adoption process circles, the sub-meetings, sharing of information and experiences, and the transition plan. If the team does not remain consistent, the care team is causing further trauma to children and their families, and the care team becomes part of the dysfunctional cycle that inevitably never creates hope for a brighter future.

I believe that we often are so caught up in being our best and trying to impress our families and peers, that we lose our own identities, our significance and uniqueness. Everyone is a gift and can have either a negative or a positive influence on future outcomes of the adoption. Everyone on the team also has the power to choose how those influences are going to affect not only our own future, but also the futures of those with whom we are working.

To me, the concerning part of this research is that after years of adoption disruptions and breakdowns there is still a lack of research regarding how to address the concerns that are clearly can affect the success of adoptions.

In Chapter four I will reflect on what I have learned throughout my master's program and growth within my practice. I will identify common gaps I have found within my research and practice, in the adoption process. I will discuss the areas of concern in adoption disruptions/breakdowns, attachment and openness, collaboration, childhood trauma and exceptionalities. I will add recommendations in the areas of supporting, the child, adoptive, parents, caregivers, teachers, EA's and community supports in creating lifelong permanency and preventing children coming back into care.

## Chapter 4

### Reflection

*Learn from yesterday, live for today, hope for tomorrow. The important thing is not to stop questioning.* (Albert Einstein)

### Introduction

In this chapter I will bring it all together. In chapter one I discussed the goal of permanency and the need for every child to feel safe and experience unconditional love and a family to call their own. In this chapter I will discuss the importance of understanding this process from the child's perspective as they are at the forefront of the decision-making process. A meaningful definition of permanency that is used by Janet Boddy from the University of Sussex in her review of research for the Care Inquiry (2013) speaks of recognizing the key qualities of family relationships for children and adults across generations – including a sense of belonging and mutual connectedness and of continuity between past, present and future.

Chapter one discussed how a child feels in a successful adoption and when the adoption disrupts or breakdown. I discussed the importance of cohesiveness, positive relationships, and the interactions between children and their team and how they influence the outcome in an inclusive collaboration session. I addressed the capability approach which is a theoretical framework that entails two core normative claims: first, the claim that the freedom to achieve well-being is of primary moral importance, and second, that freedom to achieve well-being is to be understood in terms of people's capabilities, that is, their real opportunities to do and be what they have reason to value (Robeyns & Byskow, 2020). This is particularly important when

planning permanency for children in care to understand their needs, wants and desires in the moment and for their future. In planning for permanency, it is important for the adoptive parent(s) to understand their child's capacity, capabilities and to ensure that the adoptive family has the understanding and supports needed to care for their child long-term.

In Chapter two I discussed the importance of children having a sense of belonging, unconditional love, stability, and a family to call their own. I also discussed the rate of successful and failed adoptions. I discussed the negative impacts that adoption disruptions / breakdowns have on the children and the adoptive families. I reviewed the literature that explained the factors that explained the lack of understanding of children who have been adopted and reflected on the role of the adoptive parent(s) understanding of the complexity and uniqueness of the child(ren) they are adopting. Wright and Flynn (2006) discussed how adoptions can be successful despite challenges by exploring the complexity of the needs of the child and understanding the needs of children through their developmental stages. This occurs during the adoption circle stages to ensure that the entire care team has a clear understanding of the child's needs and how to support the adoptive parents through the process.

In Chapter three I outlined my applied project and how it will be presented. The project consists of five educational workshops that are designed to be presented via PowerPoint. I provided a description of each workshop, I discussed the intention of the workshops, and the importance of looking beyond the child's behaviours, and exceptionalities. The main concept discussed in chapter three was that the decision-making process needs to be collaborative. Every person in the child's care team has important information to share about the child's needs, aspirations, and desires so they can exist within their world as their peers and new family.

Concluding with chapter 4 where I have reflected on my journey throughout my master's program, professional growth, and the creation of the workshops which I developed to help fill in some of the gaps that I found. I discuss the learning implications, the recommendations from my research and professional practice to aid in the filling of the identified gaps.

### **Limitations**

Some of the limitations I faced throughout the research is that there were several commonalities such as lack of supports and funding for adoption, parent(s) lack of transparency and information sharing, and little or no collaboration amongst the silos. These same commonalities I have experienced in my professional practice. I was dishearten to see the lack of follow-through, in the research I found and in my professional practice, in making these changes to prevent adoption disruption/breakdowns. Our system needs to change regarding our systems and practices; we need to do better!

### **Learning Implications**

Brownlie and King (2011) discussed the importance of children and youth having a sense of belonging. A sense of belonging strongly correlates to a child's social-emotional well-being. Through my learning, studying and reflection of the adoptions I have been part of in my professional life, I am reminded again of the importance of attachment. This could be the single most determining factor in the success or failure of an adoption. But to achieve success in an adoption it is not as simple as picking a set of parents and matching them to a child in their desired age range, sex, and color. More importantly is developing a cohesive plan that addresses the child's previous life experiences, develops a plan for the newly formed family to take with them into their new family unit that they can access at each developmental stage of their child's life to continue to build upon the attachment and relationship that has been developed within the

adoptive family. The plan also needs to acknowledge the struggles that may come up within the family and have suggestions in place to support the family. Through the educational workshops that I have created I provide the opportunity for all those involved with the adoption process to have a deeper understanding of the unique needs within an adoption.

As I reflect on this applied project, and the creation of the educational workshops I found myself better understanding my part in the process of permanency for children in foster care. I asked myself how I can continue to translate special education research into practice? I have found that I am continuously being challenged with new ideas and strategies that could support the child(ren) for whom I am planning permanency. A large majority of children fall within the scope of those who have special educational needs.

During the planning process, I typically find myself on a roller coaster and doing a bit of a dance while negotiating with the collaborative team, the children and perspective adoptive parents to understand the importance of attachments, learning and developing skills together, while also ensuring the best interest of the children is always the priority. Abraham Maslow (1943, p. 2) detailed five critical needs for human survival: “safety, belonging and love, esteem and self-actualization”. The only way children in the foster care system can experience Maslow’s five critical needs is through collaboration; being curious and listening to the voices that are part of the research that impact the implementation of positive changes. This process is, at times, difficult for the collaborative team to explain the complexity of an adoptive child’s exceptionalities.

In creating the educational workshops, I came to the conclusion that it is important to prioritize, be transparent and keep the best interest of the child’s needs in the forefront of all

planning to ensure permanency for the child in moving from living in foster care to transitioning to their forever home.

I found it interesting, as Arkansas State University (2016) explained:

“The importance of an IEP cannot be understated. IEPs are Individual Education Plans developed specifically for a special need’s child by a team of professionals and family members. IEPs are unique in that they focus on a child’s strengths, include measurable goals—including non-academic goals—and specify the modifications necessary for a child’s learning environment in order to ensure progress in priority areas”. (p. 1)

This is a common misconception. The individual tools, such as the IEP, can be used beyond just the school setting and the various domains of expertise can, and should, share tools for multiple uses. Within my role as a Permanency Planning Social Worker a tool that we use is called a Care Plan. As stated earlier, this is very similar in nature to a school-based IEP and much of the information contained in both documents is a replication of the other. I would challenge that the tools can be perhaps jointly created, implemented, and be used by multiple professionals in multiple domains throughout the child’s life span. An IEP, just as a Care Plan is a living document that is always being reviewed and modified as new goals are being set when previous goals are revised or achieved. As a society we often learn best by our experiences and keep what is working for us and change what no longer works. That is an ever-changing process that creates knowledge, curiosity, and provides reason for celebrations.

Another similarity to both tools, is that they look at the child’s needs in all domains of their life which includes academics, emotional well-being, physical well-being, legal implications, and relationships. In both the school setting, as well as in the foster care system, these tools invite curiosity, discussions, the need for problem solving, creativity and thinking outside the box as to how we can best support the child as well as celebrate their successes throughout their lifespan. When I brought the similarities to my team, they did not realize that

both child protection and the education system were both using the same tool with the only difference being that each professional team called the tool by a different name; IEP versus Care Plan. As I continue to grow academically and professionally, I'm starting to see how we can use historical documentation to develop new and innovate strategies to support the adoptive process. Without taking into consideration the wider influences that may impact the child, their family or environment, we are not doing the best permanency planning as we are not looking at the multiple influences on the child's life.

I will continue to challenge myself and those around me to take a moment to be curious, trust our instincts, be open to other ideas, experiences and inputs, to look at each child as a unique person, and to embrace a different way of looking at a child's development and exceptionalities. I continue strive to build on my understanding of the uniqueness that each child brings to the planning process. Change takes an open mind.

### **Recommendations**

Throughout my research and professional practice, I noted that there are several commonalities and gaps within the adoption process which has led to several adoption breakdowns/disruptions. These gaps stemmed from a lack of supports before and after the adoption is finalized, and a lack of understanding of the child's exceptionalities. There was no ongoing support in learning the causes of their child's behaviour or what type of trauma the child may have endured. Adoptive parents and support systems felt unheard. The recommendation to collaborate was vague or nonexistent yet one of the areas of concern was the lack of true collaboration and sharing of information between the care team about the child. How can we adequately create a permanency plan for each child with all their information? Each person/professional has day to day contact with the child, yet no one is talking to anyone.

Therefore, I thought as a system we need to start somewhere, as noted below. Therefore, I have created a few recommendations that could be initiated easily if everyone kept the child's best interest in the forefront of permanency planning.

### **Recommendations for Social Workers**

- It is important to include and involve the foster parent(s) or caregivers of the child. They must be an integral member of the child's care team. Foster parents have been entrusted to take on the responsibilities of the child's day to day care - physical, emotional, and spiritual needs. Foster parents are an important part of developing the permanency plan and its implementation.
- It is important to use Suitability Assessment for the preparation of adoptive parents and children, and matching, sharing, and explaining information about adoptive child(ren) (Palacios, Rolock, Selwyn, & Barbosa-Ducharme, 2019).
- It is important that foster parents be recognized and respected as valued team members.
- It is important that foster parents help maintain the relationship and communication with the child's birth family, community professionals, counsellors, teachers, dentists, doctors, therapists, and Social Workers.
- It is important that foster parents are advocates for the children they care for. They are responsible for making sure the child's rights and interests are adhered to, respected and protected. (Adopt BC Kids 2020)
- It is important that Social Workers ensure they are informed and understand new strategies, policy and policy changes, and limits to systems that are utilized by the members of the permanency team. (Rockhill, Green, & Furrer, 2007)

**Recommendations for Educators (Teacher, EAs and Support Staff):**

- Teachers, EAs and Support Staff are generally the ‘other adults’ that spend the most time with a child. Most often they are the respected confidants of the child, especially the younger children. Teachers should be informed as soon as a plan is in place so that they have the opportunity to support the child in the classroom. It is important for them to know what is happening so they can have a good understanding of what the child is going through, be prepared for potential behaviour issues, and a possible increase in emotional sensitivities.
- Teachers, EAs and support staff need to be knowledgeable of the child’s schedule, which home they are coming from and going to during the transitioning, and who to contact with any concerns.
- Teachers, EAs and support staff need to ensure that the classroom is an inclusive environment and demonstrate a sensitivity to different kinds of families. Teachers should take note that various special occasions such as Mother’s Day and Father’s Day can be a difficult time for children in foster care or adoptive homes. They may not have baby pictures of themselves (often asked for at graduation times). There needs to be learning about various kinds of families as this is part of the BC curriculum. There are many ways to create an inclusive classroom with posters, books, etc.
- It’s also important to let the child take the lead on how much family information the child wants to share with their classmates. The teachers can normalize how adoption is a way to create a family just as marriage creates blended families.
- There could be an information package created to give to a teacher when a child in their classroom is going through an adoption process.

**Recommendations for adoption process:**

- Create and implement an adoption model that is standardized throughout the organization no matter what office the adoption is happening through.
- Permit the transition process to be led by the child. Hurrying or rushing the process to get children out of foster care is not in the child's best interest.
- Recognize that foster parent involvement in adoption goes beyond the Notice of Placement.
- Focus, during the transition process/scheduling, on building family memories and relationships between the child and their new adoptive family.
- Remain truthful but sensitive with the child about their family of origin and why they were not able to remain with them.
- Create a better understanding for foster homes that they need to have a solid understanding and education as to the importance of their role in the transition of children from their home to their forever home.
- Understand that the child may have had several different Social Workers during their stay in care; therefore, make sure that all the information is shared with adoptive parents is current and complete before placement (regarding the child's needs and behaviours).

**Recommendations for Adoptive Parents:**

- Adoptive parents should be offered lots of support and check-ins by their Social Worker to ensure any questions or hesitations are being answered or supported. (Harlow, 2018)
- Adoptive Parents need to have more education on trauma and understanding of attachment and disrupted attachment.

- Adoptive parents need to have a realistic understanding of openness and Openness Agreements.
- Adoptive parents need to be transparent and explicit as to the past histories, traumas, hopes and expectations of their adoptive child, and how do they manage stress.
- Adoptive parents should receive training and support in caring for children with exceptionalities, emotional support, financial support for the cost of trainings and interventions (Woodman-Worrell & Higgins, 2019).

## **Conclusion**

Throughout this chapter I have reflected on what I have learned about the importance of having a collaborative team around a child's adoption journey. I have also reflected upon the important role each member of the adoption team, and I have been able to make some recommendations specifically geared to the identified parties in order to improve the adoption experience for a child leaving foster care and joining their forever family.

Through my experiences with Permanency and Adoption Disruptions I have identified several key areas that I see as being imperative to the success of an adoption which ultimately relates to a child living an exceptional life. In this applied project the focus has been on children who are being adopted from the foster care system, which has its own unique set of challenges and needs that may not be faced in the adoption of a newborn baby. Children who have been adopted from the foster care system have most often experienced trauma, which is often a contributing factor to the low success of such adoptions as discussed in chapter one. I discussed this further in chapter two as I looked at several articles that provided a scholarly review about adoption. As I moved into chapter three and provided the overview of this applied project, I introduced training workshops that I created to delve deeper into adoption breakdowns,

collaboration, attachment & openness, childhood trauma, and exceptionalities in children. I created these workshops so they could be used in the training of adoptive parents, professionals, and non-professional alike; all those who are involved in supporting children who are in an adoption process. Providing an opportunity for a deeper understanding of what the child may be experiencing and how we, as those supporting the child, can help them to securely attach to their new adoptive family.

This brings me to this chapter where I was able to bring the adoption process full circle and show the linkage between having a solid understanding of the adoption process for a child from foster care to the successful integration into their adoptive family.

### References

- Adopt BC Kids, 2020. <https://www2.gov.bc.ca/gov/content/life-events/birth-adoption/adoption/how-to-adopt-a-child/adopt-from-foster-care/adoption-process>
- Asher Woodman-Worrell & Martyn Higgins (2018): Successful Adoption for Disabled Children Or Children with Mental Health Conditions: *A Systematic Review, Practice*, DOI: [10.1080/09503153.2018.1526274](https://doi.org/10.1080/09503153.2018.1526274)
- Arkansas State University. (2021). IEPs Are Important Because Special Education Students are Important. <https://degree.astate.edu/student-services.aspx>
- Atkinson, A. J., & Riley, D. B. (2017). Training for Adoption Competency: Building a Community of Adoption-Competent Clinicians. *Families in Society*, 98(3), 235-24  
<https://doi.org/10.1606/1044-3894.2017.98.23>
- Boddy, Janet (2013) *Understanding permanence for looked after children: a review of research for the Care Inquiry*. Other. The Care Inquiry, Online.  
<https://thecareinquiry.files.wordpress.com/2013/04/understanding-permanence-for-lac.pdf>
- Brownlie, F., & King, J. (2011). *Learning in safe schools: Creating classrooms where all students belong* (Second ed.). Ontario, Canada: Pembroke Publishers Limited.
- Campbell-Whatley, G. (2008). Teaching students about their disabilities: Increasing self-Determination skills and self-concept, *International Journal of Special Education*. 23(2).
- Good, G. A. (2016). Adoption of children with disabilities: an exploration of the issues for Adoptive families. *Child Development and Care*, 186(4), 642-661, DOI: 10.1080/030407804430.2015.10.

- McNiff, J. (2016) *You and your action research project*. Retrieved from <https://ebookcentral.proquest.com>
- McCreight, B. (2020). Adoptive families Association of BC, Increasing adoption placement Success. <https://www.bcadoption.com/print/69010>
- Minnes, P., Perry, A., & Weiss, J. A. (2015). Predictors of distress and well-being in parents of Young children with developmental delays and disabilities: The importance of parent Perceptions. *Journal of Intellectual Disability research*, 59(6), 551-560. Doi: 10.1111/Jir.12160
- Neagu, M., & Sebba, J. (2019). Who do they think they are: Making Sense of self in residential care, foster care, and adoption. *Children and Youth Services Review*, 105, 10449. doi:1016/j.chilyouth.2019.104449
- Palacios, J., Rolock, N., Selwyn, J., & Barbosa-Ducharne, M. (2019). Adoption breakdown: Concept, research, and implications. *Research on Social Work Practice*, 29(2), 130-142. doi:10.1177/1049731518783852
- Robeyns, I. (2016). The Capability Approach, *The Stanford Encyclopedia of Philosophy* (Winter 2016 Edition), Edward N. Zalta (ed.) <https://plato.stanford.edu/archives/win2016/entries/capability-approach>.
- Robeyns, Ingrid., Byskov, M. F (2020). "The Capability Approach", *The Stanford Encyclopedia of Philosophy* (Winter 2020 Edition), Edward N. Zalta (ed.), URL = [<https://plato.stanford.edu/archives/win2020/entries/capability-approach/>](https://plato.stanford.edu/archives/win2020/entries/capability-approach/).
- Ryan, D. P. J. (2001). Bronfenbrenner's ecological systems theory. Retrieved January 9, 2012. [https://www.researchgate.net/publication/265485344\\_Bronfenbrenner's\\_Ecological\\_Systems\\_Theory](https://www.researchgate.net/publication/265485344_Bronfenbrenner's_Ecological_Systems_Theory)

Selwyn, J., & Meakings, S. (2016). Adolescent-to-Parent Violence in Adoptive Families. *British Journal of Social Work, 46*(5), 1224–1240. doi:10.1093/bjsw/bcv072rns

Skivenes, M., & Thoburn, J. (2016). Pathways to permanence in England and Norway: A critical Analysis of documents and data. *Children and Youth Services Review, 67*, 152160.

<https://doi.org/10.1016/j.childyouth.2016.05.020>

Wright, L., & Flynn, C. C. (2006). Adolescent adoption. Success despite challenges.

*Children and Youth Services Review, 28*(5), 487-510. Doi: 10.1016/j.childyouth.

2005.06.004