

'It's Quite a Journey': Australian Parents' Experience of Adopting Older Children from Overseas Orphanages

Kate Alessia¹ and Louise Roufeil²

¹ Private practice, Horsham, Victoria, Australia

² Mount Isa Centre for Rural & Remote Health, James Cook University, Mount Isa, Queensland, Australia

Intercountry adoption, often of children post-infancy, is one way of forming a family in Australia. However, few studies have invited Australian parents who have incorporated older children into their family to tell their story. Fathers are under-represented in studies of parenting generally and adoptive parenting specifically.

As part requirement for a clinical psychology dissertation, with ethics approval from the relevant university, 28 parents (13 fathers and 15 mothers) were interviewed about their experiences of adopting children over the age of 24 months from orphanages in China, Ethiopia, India and Thailand. Although parents' experiences and recollections were diverse, almost all parents had been confronted by difficult child behaviours, at least initially. Contrary to previous research, the child's gender, age or duration of institutional care did not appear related to parental experience.

Six major themes emerged from parent interviews: (1) the long wait and intense emotions of adoption; (2) disparity between expectations and reality; (3) recognition of children's difficult past experiences; (4) parenting as a path to self-discovery; (5) the perception of needing to present as coping; and (6) unmet needs. Mothers blamed themselves for their children's behavioural problems, rather than attributing difficulties to children's previous adverse life events. Both mothers and fathers were reluctant to use support services because they felt scrutinised and feared repercussions, and those who sought assistance generally found professionals ill-informed and unhelpful. Parents made recommendations about how the adoptive parenting process could be improved and expressed a strong desire for more information, both pre- and post-placement.

■ **Keywords:** adoption, child, fathers, mothers, siblings, intercountry, institution, Australian, parenting, behaviour

'This is such a personal, personal journey. It's so emotional. No one can really, really fully understand it until you've been through it.'

Introduction

For most adults, becoming a parent tends to be an intensely significant and personal event which alters lifestyle, view of self and primary relationships. The means by which people become parents is not confined to biological means; family formation by adoption has occurred throughout the centuries. In Australia in recent decades, intercountry adoption has become a means of family formation and the most common form of adoption, accounting for 56 percent of adoptions in 2010–11 (Australian Institute of Health & Welfare

(AIHW), 2011) and higher in previous years (e.g. AIHW, 2006).

The process of becoming a parent for the first time or incorporating a subsequent child into the family necessitates numerous adaptations, on a practical as well as personal level. Parents struggle with fatigue and often discover previously unrecognised aspects of themselves. The challenge of adapting to the parenting role is ongoing, with individual factors of parents and children influencing perceived stress levels and coping. In general, parents whose child has

ADDRESS FOR CORRESPONDENCE: Dr Kate Alessia, Droylsden House, 143-145 Baillie Street, Horsham 3400, Victoria, Australia
Email: Kate.Alessia@bigpond.com

sleeping, feeding or other problems experience higher levels of stress (Loutzenhiser & Sevigny, 2008). It could therefore be expected that Australian intercountry adoptive parents are particularly likely to experience such difficulties as two-thirds of intercountry adoptions in Australia are of children over a year old (AIHW, 2011) and international research suggests that placements of children post-infancy are more likely to be problematic due to the trauma histories of many of these children (Forbes & Dziegielewski, 2003); the increased incidence of cognitive, behavioural and medical problems (Johnson, 2004; Rutter, O'Connor, & English and Romanian Study Team., 2004); and difficulties with attachment (Farina, Leifer, & Chasnoff, 2004; Zeanah, Smyke, Carlson, & Koga, 2005).

The condition of children adopted from overseas post-infancy is further compromised by the fact that most children have been cared for in institutions pre-adoption. The quality of institutional care varies but children who have been cared for in institutions are at increased risk of ongoing health, cognitive, emotional and behavioural problems (e.g. Hoksbergen, ter Laak, van Dijkum, Rijk, & Stoutjesdijk, 2003; Johnson, 2000; Rutter et al., 2007). Adoptive parents are likely to have to contend with children who are malnourished, have health issues and may have been abused (Forbes & Dziegielewski, 2003; Hoksbergen & van Dijkum, 2001).

Despite the risk factors known to be associated with adoption of older children from overseas institutions, until recently there have been few Australian studies of parents' experiences of such adoptions. Fathers' perceptions of adoption have been rarely researched in any context, and not at all in regard to the adoption of older children from overseas. This study set out to discover parents' reports of their experience of adopting older children from overseas institutions.

Methodology

Procedure

Approval for this study was provided by the ethics department of the university at which the author was a doctoral student. Ethics approval was also requested from the ethics committee responsible for the state government adoption department but the committee concluded that there was no necessity for this as participants were general members of the public. Participants were recruited by arranging with adoptive parent support groups, a post-placement support agency, and the state government adoption agency to publicise details of the study. Links were provided to a website that explained the study and invited parents who had adopted children over the age of 24 months from overseas institutions to share their experiences. Particular encouragement was provided for fathers to participate due to their under-representation in previous studies. All parents who indicated an interest in the study were provided with a verbal and written explanation of the purpose and structure of the study. Participation was entirely voluntary and parents were

TABLE 1

Children's demographic information

	Girls (n = 11)	Boys (n = 10)
Mean age at placement (range) ^a	59.6 (30–79)	60.4 (24–125)
Mean time (range)	65.2 (12–141)	74.6 (23–106)
Country of origin		
India	5	6
Ethiopia	2	2
Thailand	3	1
China	1	1

^aCorrected age estimate (months) based on bone scans

informed they could withdraw their participation consent at any time. Once interviews began, further participants were recruited by parents who had been interviewed.

A semi-structured questionnaire was used as a prompt to elicit parents' stories of their experiences. Questions were asked about early experiences in adopting, changes over time, high and low points, strategies for coping with difficulties, and supports. Parents were encouraged to tell their own story, rather than being confined to pre-determined questions, so interviews varied in duration and topics discussed. Parents were interviewed on one or two occasions, but in addition some parents provided extra information by telephone or email. Confidentiality was ensured by the separation of identifying data, such as demographic data, from recorded interviews. Interviews were transcribed for ease of analysis but did not include interviewees' names or other identifying data.

Participants

Twenty-eight parents volunteered to take part in this study: 13 fathers and 15 mothers. Equal numbers of parents were from city and outer metropolitan/country areas. Between them, these 28 parents had adopted 26 children, 21 of whom were included in this study, with nearly equal numbers of girls and boys (11 girls; 10 boys). These 21 children included four sibling groups, a disproportionately high ratio as in 2010–11 only 16% of intercountry adoptions were of sibling groups (AIHW, 2011). It is possible that this suggests a greater eagerness of parents of sibling groups to talk about their experience.

Adopted children came from India, Ethiopia, Thailand and China, and had been in care for up to five years, having entered institutions at ages ranging from birth to seven years. Children were between 24 and 125 months old (mean age for girls 59.6 months; for boys 60.4 months) at time of placement with their parents. At the time of the study, children had been with their parents for between 1 and nearly 12 years (mean time for girls 65.2 months; for boys 74.6 months).

Data analysis

Inductive qualitative methods were used in order to elicit parents' views of relevant information and to capture their unique experiences. This was important because there was insufficient previous research to be sure which topics or aspects of adoption of an older child were most salient to parents' experience. The decision was made not to analyse data by computer analysis as the understanding of intended meaning so often depends on context. Interpretation of some statements in the interviews depended on reading preceding and subsequent comments and recalling data other than words (e.g. crying). No themes or expectations were generated prior to undertaking the interviews as this was an exploratory study about a scantily researched topic. The method of analysis used drew heavily on inductive thematic analysis (Hayes, 2000) and interpretative phenomenological analysis (Smith & Osborn, 2003; Willig, 2003).

Interviews were recorded and transcribed. Transcripts were read first for impression and to refresh memory of the interview (including nonverbal aspects). Each transcript was then read again to identify salient words and concepts, which on third reading were clustered into themes. Themes were checked within interviews before being compared across interviews. A constant comparison method was used to identify themes across the different interviews, reviewing transcripts to identify overlooked examples as new themes emerged (Braun & Clarke, 2006). A comprehensive list of themes was developed, with examples from each interview in which that theme emerged. The emphasis remained strongly on parents' narratives, and quotations from parents were used as the names of the themes. To confirm and validate the themes, transcripts were also read and analysed by three other professionals adhering to confidentiality guidelines.

Results

Overview

Six major themes emerged as representative of parents' experiences: (1) the initial meeting (*finally it happened*), (2) unpredictability (*it's a lottery*), (3) awareness of the child's experience (*it's incredible what they've been through*), (4) self-discovery (*I found out things about myself*), (5) sense of being judged (*you have to be seen to be coping*) and (6) recommendations for improvements to the process (*there are other needs*). Each of these will be examined in more detail.

In addition to these six themes, an over-arching theme emerged. Many parents used the analogy of a journey when talking not just of the protracted process of becoming parents but also the ongoing unpredictable demands of parenting. This seemed to signify the way in which the parenting landscape changed over time. The *Oxford Dictionary* (2012) describes a journey as 'a long and often difficult process of personal change and development', which seems applicable

to the experience of parents who adopt older children. The expression used by one of the fathers – *it's quite a journey* – became the title for this study as it captured many aspects of parents' stories.

'Finally it happened'

When sharing their experiences, the first significant series of events that parents discussed in detail was the process of being allocated a child (or children) and finally meeting them. Parents spoke of the unpredictability and uncertainty of the adoption process, describing notification of an allocation as 'the news we'd been waiting for'. The elation of allocation was complicated by distress about what the children might be suffering while parents waited for permission to travel to meet them. From the moment they were informed about their children, many parents already considered themselves to be *their* parents and felt a bond to them. This pre-adoption attachment has been found in other studies of adoptive mothers (Fontenot, 2007; Koepke, Anglin, Austin, & Delesalle, 1991; Solchany, 1998) but in this study fathers also spoke of feeling as if the child was already theirs.

'I was so happy to see him' summarised one aspect of parents' reports of first meeting their child. Despite not believing that children were matched to parents, many parents in this study stated that the immediate bond they felt with their child, and the way in which this grew over time, indicated a predestined pairing of parent and child. They reported feeling that their child was 'meant' for them and that no other child would have fulfilled that role. Amidst their joy at meeting their children, parents expressed awareness of how overwhelming and confusing the experience must be for the children.

First-time parents spoke of the internal changes that occurred as they assumed a parental role for the first time; some parents reported observing this change in their partner. One mother spoke of the restraint she had always had around children dissolving at first meeting her child; she immediately felt like 'Mum'. The length of time that adoption takes from initial application to placement of child is no guarantee that parents will feel like the parent of that child (Cronin, 2003). In this study, although some parents felt they became a parent at allocation of their child or at first meeting, others reported that the feeling of being a parent developed over time. One parent emphasised that, although it is possible to feel like a parent immediately, the parenting role deepens and develops over time.

The complexity of family formation was identified by a number of parents, who spoke about children needing to develop an understanding of family, parents needing to adjust to a changed relationship with their partner, and the family needing to form an identity. Almost all parents reported problematic or challenging behaviour in their children in the first three to twelve months. Many children did not understand or expect close or ongoing relationships as they had scant experience of adults consistently

meeting their needs and some had never experienced family life. Some parents of sibling groups reported that relationships between siblings remained stronger than the bond between child and parent would ever be. Despite the difficulties, many parents referred to how lucky they were to have their children.

'It's a lottery'

Despite expressing the belief that their children were meant for them, parents spoke of the unpredictability inherent in adoption. Not only were the personality, health and gender of the child unknown, but so were age, size, personality and even the number of children. Although parents nominated how many children they wanted when applying to adopt, some parents in this study received more than they expected (a sibling group of three, rather than two), while others received fewer (one rather than two). Health problems are often undiagnosed in children in institutional care. This was a significant issue for one couple who felt that because they had nominated not to accept a child with a health concern, they should not have to deal with health issues. Age was a particular area of uncertainty. Some parents received a baby as part of a sibling group, when they expected only to be granted older children. One parent, who initially applied for a one year old, eventually had a 7½ year old placed with her. Eight of the 21 children were discovered via bone scan not to be the age their parents were initially told they were. One child was two years younger than had been stated, meaning that he had started school at the age of three. Other children were up to three years older than their nominal age.

Prior to placement, some parents had heard horror stories from other adoptive parents or had read of problems in children who are older at placement or who have been in institutional care. These parents were pleasantly surprised not to encounter such severe problems; one parent spoke of being so prepared that it was a shock when problems were minimal. In contrast, other parents felt they should have been informed of the range of problems that can occur during the first 12 months. Several parents mentioned that they wished they had been better informed about attachment issues and felt that the pre-adoptive training could have explicitly addressed issues specific to older children. Parents' feelings of unpreparedness, despite the work done prior to adoption, were captured in one parent's statement that 'nothing prepares for the actual'.

The three main categories of problems encountered by parents were exhaustion, emotional distress and marital distress. As has been found with biological parents (Fägerskiöld, 2008; Meijer & van den Wittenboer, 2007), adoptive parents found the sleep deprivation and constant demands of parenting beyond what they imagined. This was compounded by emotional distress arising from tantrums, emotional outbursts and, in some instances, rejection by their children. Although parents were generally very appreciative of their partner, they recognised the strain that their

children's behaviour and emotional needs placed on the marital relationship. Parents tended to rely heavily on other adoptive parents of older children for guidance, or managed on their own without assistance.

'It's incredible what they've been through'

Although it is often impossible to know what adopted children have experienced pre-placement, parents exhibited realistic awareness of what their children were likely to have witnessed and been exposed to. Many parents spoke of 'wanting to make it better'. They not only wished they could undo past traumas, but also wanted to remove the grief and loss that children experienced post-placement. Parents realised that their children had lost all aspects of life as they had known it: culture, language, foods, smells, people, and routine. In addition, for some children incorporation into a new family triggered mourning the loss of their original family, even though that might have occurred years previously.

Most parents acknowledged that their children's earlier experiences continued to affect their behaviour. A number of children had physical scars indicating previous abuse, and parents spoke of their distress at realising their children had been exposed to deprivation, abuse, trauma and death (several children had witnessed the death of a parent). Parents were aware that these experiences could not simply be forgotten and regarded them as contributors to current behaviours such as lying and indiscriminate affection. Discipline was a topic frequently raised. The importance of clear limits and consequences for misbehaviour was mentioned by several parents, some of whom had been told to establish boundaries immediately post-placement. Parents varied in their awareness of the significance of the parent-child relationship in setting and enforcing limits. Fathers more often expressed a stronger belief in the need for firm discipline than did mothers, who tended to emphasise relationship, but generally parents recognised that children's earlier experiences and lack of attachment need to influence responses to behavioural problems.

'I found out things about myself'

Nearly half the mothers in this study reported feeling a failure and inadequate. Fathers did not express the same conflict between their ideal role and their actual parenting role, possibly because 'mothering' is a much stronger, more idealised role in our society. Mothers often spoke about the type of mother they hoped to be and the ways in which they fell short, similar to thoughts often expressed by biological mothers (Mauthner, 1999). Almost all children exhibited challenging behaviour in the first months after placement and some appeared to meet the criteria for diagnosis of attachment disorder but few parents blamed the children. Parents often recognised the origins of such behaviours, but continued to blame themselves for not preventing misbehaviour or not responding better.

'I felt very low' was one parent's expression of life post-placement. Other parents described their experience as post-adoption depression, something that has been recognised previously by Gair (1999). The symptoms described by many mothers and one father were similar to the response of many biological mothers when adjusting to the role of parent (Jackson & Mannix, 2003). However the parents in this study were grappling with more severe behavioural problems and issues, such as culture shock, which biological parents do not have to face. Older children from institutions have a higher rate of behavioural and emotional problems, so the risk of lowered mood is increased in their adoptive parents (Kalmuss, Davidson, & Cushman, 1992), and was a common experience in the cohort in this study.

Parenting can be a journey of self-discovery. As one parent expressed it, "This brings out all your rubbish." Several parents spoke about how parenting raised their awareness of many aspects of themselves, particularly the less desirable aspects. Although one parent spoke of learning about her strengths and adaptability, other parents focused solely on what they had learnt about their negative aspects, such as their ability to be angered by behaviour. One mother expressed the belief that when life is relatively easy, flaws in the individual, couple and family can be overlooked, but when things are difficult they become evident and need addressing. It appears that greater self-awareness is a common feature of post-adoption life.

In hindsight, some parents would have liked to have changed aspects of their parenting in the early days post-placement and this was expressed, for example, by 'I should have been a bit more empathetic.' Although mothers were more likely than fathers to be critical of their parenting, a couple of fathers also expressed regret about their early parenting practices. These regrets often arose as a result of parenting practices when under pressure that did not match the ideals of the individual and were generally about minor incidents of frustration or lack of patience.

'You have to be seen to be coping'

Throughout the interviews, parents repeatedly spoke of their perception of being judged and evaluated. 'We were being judged all the time' was a common perception of adoptive parents, arising not just from the evaluation they had undertaken as part of the adoption application process, but also due to the post-placement evaluation/support process and general visibility in the community. The visits by adoption department staff in the 12 months post-placement were commonly viewed as carrying the risk of their children being removed if the parents failed to measure up. This made parents reluctant to seek assistance, either from department staff or other professionals. One mother reported, 'Adoptive parents feel they always have to be perfect,' and another parent said, 'You have to be seen to be coping.' Adoptive parents tended to retain this perception of judgement even years post-placement.

Intercountry adoptive families are generally visible in society because the children are obviously of a different race to the parents. While one parent was comfortable with the visibility and the links it created, many others found it invasive. Even well-intentioned questions highlight the differences between adoptive families and other families and were seen as intrusive. Parents sometimes perceived an element of blaming, particularly when comments were made about their children's challenging behaviours. Parents were also sensitive to how comments or questions might affect their adopted children, especially when people asked questions about the children's background or past experiences.

Despite the diversity in the fathering role, fathers almost uniformly avoided contact with support services in any form. Sometimes that was due to the perception that support-seeking was the mother's role; in other cases it was related to the belief that men don't discuss emotional issues. The fathers who did utilise ancillary services were more comfortable with practical services (such as education or health), rather than emotionally focused services (such as counselling). Despite the high level of emotional and behavioural issues in their children in the first year post-placement, few parents sought formal supports. When formal support services were used, the outcome was not necessarily positive. Of the small number of fathers who utilised services, one's view of government services was 'All I thought they were doing was splitting up a family'. Another father felt the adoption department staff were more interested in finding something wrong than solving problems. Parents who had sought formal supports generally reported a fault-finding response that was not helpful, or a lack of knowledge and awareness by professionals.

In contrast, a few parents regarded formal supports as 'something that can really make a positive difference'. One couple found a psychologist who understood the issues of adopted children and used her expertise over an extended time, describing her as their 'guardian angel'. Another couple preferred to use a telephone counselling service where they could seek assistance but remain anonymous. A greater number of parents were more comfortable utilising informal methods of support, particularly other adoptive parents whom they perceived as more helpful than professionals who were unlikely to have direct experience of the issues.

'There are other needs'

Parents were outspoken about ways in which they felt that they could have been better prepared for parenting older post-institutional children. Their responses were grouped into a need for better information, recommendations about how preparation for adoptive parenting could be improved, a demand for the provision of therapy services, wanting a more personal approach, and various other recommendations.

'We needed more information than what was available' was a frequent refrain of parents, both in terms of information about what to expect post-placement and where to

access services to address problems that arose. Despite the reluctance of parents to seek formal supports, 14 parents strongly recommended that adoptive parents should be informed about how to address various sorts of problems and who could assist with each type of problem. A welcome pack including a list of resources, a documentary, a manual of strategies, a book of the experiences of other adoptive parents of older children, internet resources and a booklet of services were suggested.

Nineteen of the 28 parents reported that preparatory courses prior to adoption were irrelevant, although five of these parents were able to identify at least one thing in the pre-placement education that they subsequently found useful; often this came from hearing other adoptive parents speak of their experiences. Parents were resentful that the courses focused on the adoption of infants, and did not equip them to address issues such as attachment difficulties. Several parents resented that they, unlike biological parents, were required to attend courses. In addition, some felt that it was difficult to retain information until it was needed post-placement, particularly with the stress of waiting for approval to adopt. It was suggested that handouts with concrete suggestions would make the preparatory sessions more meaningful.

Nine parents felt they should have been given written information about professionals and formal support services to address problems that arise; other parents said they would have liked contact details for specific types of support. Parents felt information about services, and encouragement to use them, should be provided both pre- and post-placement. Marital counselling was mentioned as being of value, for both preventive and remedial reasons, due to the stress placed on the marital relationship by the challenges of parenting a post-institutional adopted child, especially immediately post-placement. Although some parents had found a paediatrician who was familiar with health conditions in children adopted from institutions, many families had not been that fortunate. A general lack of child-focused public services was raised as an issue, as was the lack of familiarity with adoption issues in the private sector. Parents reported difficulty finding counselling professionals who were aware of the specific needs of adopted older children.

Eight parents expressed the need to 'personalise this whole process'. While one parent was frustrated that telephone calls were not returned promptly and professionally, other parents spoke of wanting to make the adoption department more personal and welcoming. Comments were made about frequent changes in workers in the department and preference expressed for having continuity of workers throughout the pre- and post-adoption process. Several parents considered that the adoption department staff could be a valuable resource if parents were aware there was someone available with extensive experience in resolving post-placement issues. Such a contact person could be of value even years post-placement, as some problems emerged years later.

Various other forms of assistance were recommended to ease parenting stress. The use of interpreter services immediately post-placement was suggested by a couple of parents, as most children had minimal English and parents had minimal facility in their children's native language. Although communication was not regarded as a major problem, one parent said the use of interpreters would facilitate the communication of more subtle topics, such as important safety information, and allow parents to explain unfamiliar situations and children to communicate their emotions or fears. Household assistance with practical chores immediately post-placement was recommended as a way of alleviating family stress. Parents who had experienced this when staying in their children's country of origin said that household assistance freed them to focus on building relationships with their children. Mention was also made of the importance of family assistance, due to the cost of adoption and the cost of supplying a post-infancy child with all s/he requires.

Limitations of this study

The sample in this study cannot be taken as representative of all Australian adoptive parents of older children. The study was conducted in one Australian state only, and the call for participants might not have reached parents no longer involved with the adoption community. As participants constituted a self-selected cohort, parents dissatisfied with their experience might have chosen not to participate, thereby biasing the sample in favour of parents for whom adoption had a satisfactory outcome.

Adoptive parents' perceptions alter across different stages in the adoption process; parents commented that their responses would have been different if interviewed earlier when their children were more challenging. This study included adoptive parents whose children had been with them from one to nearly 12 years, which leads to a view of parents' perspectives across time. Collected narratives, such as those obtained in these interviews, are not a straightforward reflection of reality, but rather snapshots of impressions and recollections that respondents choose to share at that point of time. Consequently, the themes and concepts elicited cannot be construed as definitive. Also the diversity of institutions from which children were adopted made it impossible to identify factors associated with particular behaviour patterns.

The themes identified from the data also contain elements of interviewer subjectivity, despite efforts to limit this. It is easy to be swayed by themes that emerged in highly emotive interviews, as compared to less intense interviews. The process of analytic induction, constantly testing identified possible themes against the data (Pope, Ziebland, & Mays, 2000) hopefully reduced this bias. Identification of salient themes is informed by the interviewer's personal and professional history and by impressions formed during the interviews. Although attempts were made to bracket expectations and allow themes to arise from the transcripts by

repeatedly re-reading the transcripts and having three other people read them, it is possible that unconscious biases might have swayed prioritisation of themes.

Conclusion

Summary of findings

With the exception of one couple, the 28 parents who participated in this study were positive about their experience of adopting older children from institutions in India, Ethiopia, Thailand and China. Adoption had proved unpredictable in both timing and the characteristics of the children obtained, yet several parents reported a sense of fate about the linking of themselves with their children. Despite the variation in ages of children, length of time spent in institutional care and post-adoption history, there were marked similarities in parents' reflections post-placement and no apparent correlation between children's gender, age or length of institutional care and subsequent problems, contrary to that found in previous research (e.g. Palacios, Sánchez-Sandoval, & León, 2005; van IJzendoorn, Juffer, & Poelhuis, 2005).

Parents experienced joy at first meeting their children, contaminated by awareness of their children's ambivalent emotions and past traumas. The process of developing into a family and settling into the role of parent took time. Many mothers were critical of their performance as parent and some reported 'post-adoption depression'. This was exacerbated by the challenging emotions and behaviours which almost all children displayed immediately post-placement. Problems varied in intensity and duration but most abated within the first 12 months. However, the after-effects of past trauma sometimes remained evident in other forms and parents struggled with how best to discipline when bearing in mind their children's difficult past experiences. Often the issues faced were not those for which parents had prepared, and several parents expressed resentment that they were not forewarned of likely difficulties during pre-adoption training. Despite the problems, the perception that they were being judged by adoption department staff and the community meant that few parents sought assistance. Those who did reported difficulty locating appropriate services and often encountered professionals with inadequate knowledge and what they perceived as judgemental attitudes.

Parents were vocal in expressing dissatisfaction with the adoption process, although satisfied with the final outcome. Many recommended that future adoptive parents be provided with better information about what to expect when adopting older children and advocated a more personal approach within the adoption department, such as having the same key worker throughout the process and having a resource person to contact regarding post-placement difficulties. Although parents were reluctant to access services, the majority recommended that information about support services should be provided and that parents should be en-

couraged to utilise services such as individual and couples counselling.

Strengths and implications of the study

This study provided intercountry adoptive parents of older children with a forum to give voice to their unique experience, emphasising events as they saw fit. It also provided a voice to fathers who too frequently have been omitted from studies of parenting, particularly adoptive parenting. The fathers who participated in this research varied in the way they allocated responsibilities, invested time and expressed emotions. From this emerges a need for professionals to avoid making assumptions about fathers' roles. Further research conducted by a male interviewer or a group forum in which fathers can share their journeys of adoptive fatherhood might generate more comprehensive and candid data.

Given the frequency with which parents dealt with behavioural challenges in the first months after placement, it is important that parents are informed that such problems are likely and are provided with strategies for addressing them. Parents strongly expressed a need for this. Although parents in this study rarely utilised support services, they requested that appropriate services be provided and information about these be disseminated routinely to all adoptive parents. The frequency with which parents reported a need for better information throughout the adoption process indicates that parents want to be active participants in the process. Adoptive parents are already recognised as being especially skilled (Hamilton, Cheng, & Powell, 2007). Therefore, providing them with the information and access to resources that they request could enhance the likelihood for positive outcomes for adoptees and adoptive families, as has been recommended previously (Gray, 2002; O'Neill, 2000). Information about how to discipline with appropriate consideration of the ongoing effects of children's past experiences would enhance parenting confidence and practice.

Parents reported that professionals from a range of backgrounds are unaware of adoption-related issues. There is a need for adoption-aware professionals of whom adoptive parents are routinely informed about and encouraged to use. Adoption department staff could take the lead in normalising use of these services and emphasising their disconnectedness from any evaluatory role. In addition, professionals (such as psychologists, psychiatrists, social workers, paediatricians, teachers, occupational therapists) need to be better informed about adoption-related matters. This training could be included as part of university modules about family and parenting for upcoming professionals, and offered in the form of professional development for current practitioners. It would seem particularly appropriate for the complexities of post-institutional adoption to be included in clinical psychology courses. Research into professionals' awareness of the need to consider adoption issues in service provision seems warranted. Identifying how much

professionals currently know about such issues, evaluating what is currently covered in various professional courses and assessing what needs to be included might be the first steps to better meeting the needs of adoptive parents of older children.

Regardless of the problematic behaviours children presented initially, most parents rated the adoption journey as undeniably worthwhile. If their recommendations about better preparation and improved post-placement supports are implemented, the adoption journey of future adoptive parents might be eased.

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