Connecting of Disconnecting? Adoptive Parents’ Experiences of Post Adoption Contact and their Support Needs


Document Version:
Publisher's PDF, also known as Version of record

Queen's University Belfast - Research Portal:
Link to publication record in Queen's University Belfast Research Portal

Publisher rights
Copyright © HSCB and Queen's University of Belfast (2017) | Published by Health and Social Care Board.

General rights
Copyright for the publications made accessible via the Queen's University Belfast Research Portal is retained by the author(s) and / or other copyright owners and it is a condition of accessing these publications that users recognise and abide by the legal requirements associated with these rights.

Take down policy
The Research Portal is Queen’s institutional repository that provides access to Queen’s research output. Every effort has been made to ensure that content in the Research Portal does not infringe any person’s rights, or applicable UK laws. If you discover content in the Research Portal that you believe breaches copyright or violates any law, please contact openaccess@qub.ac.uk.

Download date: 12. Oct. 2019
CONNECTING OR DISCONNECTING?

Adoptive Parents’ Experiences of Post Adoption Contact and their Support Needs

Mandi MacDonald
The Author

Dr Mandi MacDonald is a Lecturer in Social Work at Queen’s University Belfast. She is a qualified social worker and prior to joining Queen’s in 2010 she had extensive experience working in statutory children’s services, in family support and child protection teams, and, most recently, in permanence and adoption. She is interested in the needs and rights of children who are in care or adopted and their families, in particular in the experience of family life in permanent placements. She has carried out research and published articles on post-adoption contact, adoptive parenthood, kinship foster care and informal kinship care.

ACKNOWLEDGEMENTS

We are very grateful to the 123 adoptive parents who responded to the survey and to the 26 who took part in group interviews. It is clear from what they told us that post-adoption contact brings added complexity to already very busy family lives. We appreciate everyone who took the time to read the study information, answer questions and join in the focus group meetings. We also appreciate the honesty and the level of detail with which they shared their thoughts, feelings and experiences.

This study was initiated and funded by the Health and Social Care Board and we welcome their interest in the experiences of adoptive families and their efforts at understanding the benefits and challenges of post-adoption contact. The study could not have been completed without the enthusiastic hard work of Adoption UK staff. In particular Tracey Mitchell Helpline Adviser and Administrator, who sent and received all the emails and communication, the peer group co-ordinators who set up the focus group, Marie McKeown, Sandra Rodgers and Anne Lakin Volunteer Coordinator, AUK.
I am delighted to write the foreword to this very valuable report, which seeks to capture the voices of adopters in relation to the important but often contentious area of adopted children’s contact with their birth families. The Health and Social Care Board commissioned this study from Adoption UK as we were very keen to hear the experiences and views of adopters in this relatively new and under researched area. The study follows on from the “Listen Up, Speak Up” survey with adopters commissioned by the Health and Social Care Board in 2012 and completed by Adoption UK and Dr Greg Kelly. That survey, which covered a wide range of topics, indicated that almost half of adoptive parents were not happy with the quality of the direct contact between their adopted child and their birth family.

While adoption severs the legal ties to the birth family, in Northern Ireland in recent years the court has directed that many adopted children should have direct contact with their birth parents and other members of the birth family on a number of occasions per year. Therefore while the legal relationship ends on adoption, there may be a level of ongoing contact between the birth family and adopted child. This can be a surprise to prospective adopters who have a more traditional view of what adoption means and never envisage an ongoing relationship with their child’s birth family.

We know these arrangements may cause anxiety for prospective adopters and as a result some may never progress their application to adopt.

The Health and Social Care Board was delighted that Priscilla McLoughlin, Director, Adoption UK, Northern Ireland, agreed to take on the research project. She approached the project with her usual enthusiasm and dedication to improving the lives of adopted children and their families. Priscilla secured the help of Dr Mandi MacDonald from Queen’s University to complete the study. Mandi is no stranger to adoption either and has completed a number of studies in this field in Northern Ireland. So she came to the work with a comprehensive understanding of the issues, and a real commitment to hearing and understanding the views of adoptive carers.

Some of the key findings in the study are that many adopters felt that maintaining some form of contact after adoption may help their adopted children and young people in processing their losses. On the contrary other adopters found that contact was very complex, often difficult and brought a range of challenges for the child, the adopters and the birth parents.

The complexity of relationships between birth parents and the adopted child was evident. This was exacerbated by the fact that the adopted children or their siblings had often suffered significant harm while in their birth parents care. All of this is played out against a background of complexity and often strained relationships.

This report gives us all so much to consider and reflect on. Contact should be demonstratively beneficial for the child and focused on their needs. The security of the placement should be safeguarded as a priority, and where contact has a destabilising effect this should be reassessed and consideration given to alternative arrangements for maintaining identity and links with the birth family. In some cases, this may result in contact arrangements being altered to secure the placement.

The report demonstrates that the purpose of contact needs to be clear and the arrangements need to be kept under review as the child’s needs change as they grow older. The study reinforces the essential message that on-going contact must be in the child’s best interests.

This report marks a wonderful beginning, but as always, more work needs to be done to ensure we hear the views of adopted children themselves about contact, and we also need to seek the opinions of the social workers who often provide support to all the parties in the adoption triangle. I would like to thank all the adopters who completed the survey and participated in the focus groups. Direct contact post adoption is a relatively new phenomenon we must all watch carefully so we learn together, and ensure we keep the welfare of the child as the paramount consideration.

Dr Una Lernihan
Commissioning Lead, Adoption and Permanence
Social Care and Children’s Directorate,
Health and Social Care Board
Welcome

PRISCILLA MCLoughlin,
DIRECTOR ADOPTION UK NORTHERN IRELAND

Many children adopted from care in Northern Ireland continue to have contact with members of their birth family after adoption. Often this contact involves face-to-face meetings, and/or letterbox contact with birth parents, siblings and other birth relatives. Supporting their children in maintaining contact with birth families, either directly or indirectly, can present a range of challenges and rewards for adoptive families. We wanted to understand more about what contact arrangements are like for adoptive families, what assistance is currently available to them, and how they might best be supported.

Adoption UK was keen to respond to a request by the Health and Social Care Board to undertake a study aimed at understanding the realities of post adoption contact for many of our members. We are grateful to the HSCB for commissioning this invaluable study and delighted to work with Dr Mandi MacDonald from Queen’s University Belfast who led this work.

Through this study we have been able to find out more about the extent of post-adoption contact in Northern Ireland, what form that contact takes and with which birth relatives, and to understand the associated challenges and benefits for adoptive families. We have also discovered what types of assistance adoptive families can call on if they require help with contact, how helpful they find this support and some of the difficulties and gaps in this provision.

The findings from the study will help inform the Health and Social Care Board in its commissioning of post-adoption support services and the Health and Social Care Trusts, and Adoption UK’s ongoing work with adoptive families.
Adoptive Parents’ Experiences of Post Adoption Contact and Their Support Needs

Contents

Forword 3
Welcome 4
Acknowledgements 4
Introduction 6
What we did 7
How we conducted the survey 7
How we conducted the focus groups 7
Who took part? 8
The characteristics of the children 9
The nature and extent of contact arrangements 10
Face-to-face contact 11
Contact by post, email, social media, text or telephone 13
Multiple or complex contact arrangements 13
Unexpected forms of contact 14
The experience of contact 15
The benefits of contact 17
Comments on the benefits of contact 18
The overall quality of contact 19
Comments on the overall quality of contact 20
Impact of contact on the Adoptive parents 23
Impact of contact on adopters’ sense of parenthood 23
Adoptive parents’ relationships with birth relatives 25
Adopters’ comments on their relationship with birth relatives 26
Children’s experiences of contact 28
Comments on the impact of contact for children 30
Emotional impact 30
Poor quality interaction 31
Challenges change as children grow 32
Children’s needs and wishes 32
Sibling contact 34
The views of those with no current contact 35
Support for contact 36
Comments on support for contact 38
Adoptive parents’ suggestions for support provision 39
Summary and conclusions 40
Connecting or Disconnecting?

Introduction

In recent years adoption has increasingly been used to secure alternative permanent families for children in state care who cannot return home to their birth parents or other birth kin. This is referred to as public adoption or adoption from care, and is the main route to adoption in the UK. Alongside this, adoption has become increasingly more open. In place of the secrecy that previously characterised many adoptions, there is an expectation that adoptive parents will help children to know and understand their birth history. Many adopted children will also have some form of continued relationship with birth relatives via direct face-to-face contact meetings, usually accompanied by their adoptive parents, or indirect contact via letters, telephone or the internet.

This study aimed to find out more about the extent of post-adoption contact in Northern Ireland, what form that contact takes, and to understand the associated challenges and benefits for adoptive families. The findings are intended to inform the ongoing development of post-adoption support services and to provide a foundation for further research on the experience of post-adoption contact for birth and adoptive families.

Maintaining contact between the adopted children and their birth relatives can be challenging for adoptive families, bringing with it a range of difficulties and benefits (McSherry et al, 2013). Relationships between birth and adoptive families can be complex, and sometimes risky, particularly following adoptions from care, where children are more likely to have experienced harm while living with birth parents (Faulkner and Madden, 2012), and adoptions are more likely to be involuntary (Kelly and McSherry, 2003). Contact can be particularly challenging, and involve exceptionally complex relationships and intense emotions, for example, in situations where the child has contact with a relative who previously cared for them and who had neglected or abused them (Neil et al, 2011). Furthermore, when adoptions are made without the formal consent of birth parents, as is the case for many adoptions from care in Northern Ireland, the status of birth and adoptive parents and their respective relationships to the child, can be ambiguous and contested (MacDonald, 2015). Contact arrangements are usually negotiated and agreed at the time the Adoption Order is made, often with the input of social workers, legal advisors and the Courts. However, it is not clear how many adoptive families in Northern Ireland are having contact with birth relatives, what form this contact takes, how often, and with which birth relatives. Nor is it well-understood how adoptive families manage contact arrangements, what resources they draw on for support if difficulties arise, and whether they identify any support needs for their adopted children or family as a whole.

There is some evidence of a strong presumption of contact, particularly direct contact, in Northern Ireland. From the anecdotal accounts of adoption practitioners in this region there seems to have been a trend in recent years towards increased rates of post-adoption contact, with more children having face-to-face meetings with birth relatives. This was reflected in Kelly’s (2012) survey of 89 adopters in Northern Ireland in which the majority (89%) of domestic adopters reported some form of post-adoption contact, with a trend towards higher rates of contact generally, and direct contact in particular, in more recent adoptions.

Social work support for contact in the UK has tended to take the form of indirect letterbox contact (Neil et al, 2011). While social work agencies in Northern Ireland have been developing post-adoption support services in response to the increase in face-to-face contact, there remains a need for practice models to guide this work (Neil et al, 2011). In Kelly’s (2012) survey of adoptive parents in Northern Ireland, almost half (48%) of adoptive parent respondents were unhappy or very unhappy with the quality of face-to-face contact. Similarly, Neil et al’s (2011) study of direct contact in complex cases in England reported that in just over half of cases there were unresolved issues with contact. There is a need, therefore, to identify empowering and un-intrusive ways of supporting families with all forms of post-adoption contact, and particularly with managing the complexities of face-to-face contact.

This study explored solely the perspective of adoptive parents, not those of their children, nor of birth relatives or social workers, all who may have differing experiences and views. Given this possible diversity of needs, wishes and feelings it would be important to hear the varied perspectives of all the individuals involved in order to have a more thorough understanding of contact after adoption and the complex relationships it entails. By providing information on the extent and range of arrangements in Northern Ireland this study will lay a foundation for further research on the experience of post-adoption contact for birth and adoptive families.
We were particularly interested to find out about active contact and more recent arrangements. Participants who had more than one adopted child were asked to complete the questionnaire in relation to their most recently adopted child for whom they had birth family contact. They had an opportunity to answer selected questions in relation to other children at the end of the survey.

We conducted the survey using a computer-assisted self-interview (CASI) approach. This allowed us to set up the survey questionnaire in such a way that respondents would automatically skip questions that were not relevant to them based on their answers. For example, the first question asked adoptive parents whether they had any form of contact with birth relatives post-adoption. Those who answered ‘no’ to this question were directed to the end of the questionnaire where they could comment separately on this topic. The CASI design also meant that responses could be given anonymously and costs and the risk of data errors were reduced since researchers were not needed to ask the questions or record the answers (Olson and Sheets, 2008).

The CASI questionnaire was hosted on the SurveyMonkey website (Gold licence). Adoptive parents were sent an invitation email with a web-link to the survey that could be used only once from any device. Researchers had no access to any identifying information about respondents.

The CASI format is inevitably more attractive to those who are comfortable using computers and internet-based services. To compensate for this possible bias in self-selection, adoptive parents could request a paper copy of the questionnaire that they returned by post. Four people responded in this way and their answers were inputted to SurveyMonkey by Adoption UK staff.

The questionnaire was made up of a mix of multiple choice questions, rating questions and open-ended questions. It was divided into five sections – background information on the most recently adopted child and their placement; details of direct face-to-face contact arrangements; details of indirect contact via post, phone or internet; the experience of contact; and support for contact.

We collated all the responses to the open-ended questions and used Maxqda software to complete a content analysis (Krippendorff, 2013) of all this qualitative data generated by the survey questionnaire. This allowed us to organise comments into themes and to quantify how many adoptive parents shared the various views and experiences that these themes represented.

We had three main questions that we hoped to answer:

• What is the nature and extent of post-adoption birth family contact experienced by adoptive families in Northern Ireland?
• What are the challenges and benefits for adoptive families associated with contact?
• What types of support for contact do adoptive parents use and how helpful do they find these?

To do this we invited all members of Adoption UK in Northern Ireland (approximately 533 families) to take part in a survey of their views and experiences and participate in focus group interviews.

93 adoptive parents who had post-adoption contact completed the survey between June and September 2016.

26 adoptive parents took part in one of four focus group interviews held in May and June 2016.

The study was granted ethical approval by Queen’s University Belfast.

HOW WE CONDUCTED THE SURVEY

We were particularly interested to find out about active contact and more recent arrangements. Participants who had more than one adopted child were asked to complete the questionnaire in relation to their most recently adopted child for whom they had birth family contact. They had an opportunity to answer selected questions in relation to other children at the end of the survey.

We conducted the survey using a computer-assisted self-interview (CASI) approach. This allowed us to set up the survey questionnaire in such a way that respondents would automatically skip questions that were not relevant to them based on their answers. For example, the first question asked adoptive parents whether they had any form of contact with birth relatives post-adoption. Those who answered ‘no’ to this question were directed to the end of the questionnaire where they could comment separately on this topic. The CASI design also meant that responses could be given anonymously and costs and the risk of data errors was reduced since researchers were not needed to ask the questions or record the answers (Olson and Sheets, 2008).

The CASI questionnaire was hosted on the SurveyMonkey website (Gold licence). Adoptive parents were sent an invitation email with a web-link to the survey that could be used only once from any device. Researchers had no access to any identifying information about respondents.

The CASI format is inevitably more attractive to those who are comfortable using computers and internet-based services. To compensate for this possible bias in self-selection, adoptive parents could request a paper copy of the questionnaire that they returned by post. Four people responded in this way and their answers were inputted to SurveyMonkey by Adoption UK staff.

The questionnaire was made up of a mix of multiple choice questions, rating questions and open-ended questions. It was divided into five sections – background information on the most recently adopted child and their placement; details of direct face-to-face contact arrangements; details of indirect contact via post, phone or internet; the experience of contact; and support for contact.

We collated all the responses to the open-ended questions and used Maxqda software to complete a content analysis (Krippendorff, 2013) of all this qualitative data generated by the survey questionnaire. This allowed us to organise comments into themes and to quantify how many adoptive parents shared the various views and experiences that these themes represented.

HOW WE CONDUCTED THE FOCUS GROUPS

Focus group interviews were structured to facilitate discussion on the challenges and benefits of contact and evaluation of support provision. The group interview format was intended to be less intimidating and to facilitate discussion of ideas, and opinions. It was also a useful way of gaining the views of several adoptive parents at one time.

We digitally recorded and transcribed the focus group discussions and used Maxqda software to manage a thematic analysis. We analysed the conversation of the groups (group data), rather than the comments of individuals (individual data) or the interaction of the group (group interaction data) (Onwuegbuzie et al, 2009). We took an inductive approach to thematic analysis (Braun and Clarke 2006), identifying key ideas that emerged from the discussion rather than looking for pre-set themes. Working with the record of each focus group in turn, we identified themes that expressed the key ideas raised by that particular group. We then compared themes across groups and identified the predominant ideas that emerged from the focus group data as a whole.
WHO TOOK PART?

An invitation to take part in the study was sent by email to all 468 member families of Adoption UK Northern Ireland for whom the organization had email addresses. The study was also advertised in the regular newsletter which is mailed to all Adoption UK members in Northern Ireland (approximately 533 families). The email and newsletter provided information on how to take part in the focus groups, complete the survey online, or request a paper version of the survey questionnaire.

The invitation email contained a link to the web-based questionnaire. To avoid duplicate entries, this web link could be used only once from any device.

A total of 123 adoptive parents responded to the survey, 95 indicated that they or their child had had some form of contact with birth relatives since adopting, and 93 of these went on to complete the questionnaire. This means that more than a quarter (26%) of those who were sent an invitation email responded to the survey and a fifth (20%) indicated that they had some form of birth family contact and went on to complete the questionnaire. This figure represents approximately just less than one fifth of the families who are members of Adoption UK in Northern Ireland. The 28 adoptive parents who visited the survey but had not had any post-adoption contact were invited to tell us their views on this topic. What they told us is summarised at the end of this report.

Four separate focus group interviews were held in Lisburn, Dungannon, Antrim and Belfast. A total of 26 adoptive parents shared their views and experiences at these.

While the study was open to all Adoption UK members in Northern Ireland, the method of self-selection is inevitably prone to bias. We cannot know how representative the participants are of all adoptive parents, or to what extent their views and experiences are the same or different to other Adoption UK members. We also cannot know why some members chose to take part in the study and others did not. It is possible that the study appealed more to certain types of adoptive parents, for example those who have had particularly difficult experiences, or those who feel strongly in favour of post-adoption contact. From analysis of the findings, however, this does not seem to have been the case.

Participants reflected a broad range of different contact experiences, some positive and some negative. We have tried to capture the diversity of their experiences in this report and to quantify the numbers of survey respondents who expressed a particular view point.
The responses to the survey represent 93 children all of whom were the only or most recently adopted child in their family who had contact. Most of the children (94%, n=87) were aged between 0 and 5 years when they were placed with their adoptive parents, and the modal age at placement was 1 year old (n=22). The majority of the children had been adopted within the past 5 years (75%, n=70). All but 5 of the children had been adopted in the last 10 years. Among the children who had face-to-face contact, all but 2 had been placed with their adoptive parents when they were between 0-5 years old and most (80%, n=58) had been adopted in the previous 5 years.

To give an indication of what proportion of the total population of children adopted from care in Northern Ireland this represents, in the ten year period April 2006 to March 2016 there were 684 looked after children adopted – an average of 68 children per year although this fluctuates slightly from year to year with more recent increases. In the 5 year period April 2011 to March 2016 there were 398 looked after children adopted in Northern Ireland (DoH, 2016). The 70 children represented in this survey, who were adopted in the past 5 yrs and having contact represents an estimated 18% or approximately 1 in 5 of that total.

For most (58%, n=54) their birth parents had not given formal consent to the adoption while 19% (n=17) of respondents indicated that they did not know whether formal consent had been given. Almost a third of respondents (n=30) indicated that their child was having face-to-face contact with a birth relative in whose care they had previously experienced neglect or abuse.

Most of the children were initially placed with their adoptive family on a fostering to adopt basis (62%, n=58), either concurrent care (n=18) or dual approval (n=40). Direct face-to-face contact was slightly more prevalent among these families compared with those whose placement began as fostering or who were placed for adoption. Of those who described the original status of their child’s placement as concurrent care 89% (n=16) had direct contact, while 87% (n=33) of those whose original placement status was dual approval, 75% (n=9) of those whose placement originated as fostering and 71% (n=15) of those whose placement was for adoption from the beginning were having direct face-to-face contact with birth relatives.

The percentage of children from each initial placement type who had direct and indirect contact

FIGURE 1

All of the children had been placed for adoption by one of the HSC Trusts in Northern Ireland with adopters approved by a HSC Trust or voluntary adoption agency. Most respondents had their child placed by either the Northern HSC Trust (26%; n=24) or South Eastern HSC Trust (30%; n=27). 8 participants adopted through a voluntary adoption agency. There were no ‘other’ routes to adoption e.g. step-parent.

14 of the children had a learning disability, 1 had a physical disability and 6 had fetal alcohol spectrum disorder.
Connecting or Disconnecting?

The Nature and Extent of Contact Arrangements

93 adoptive parents told us about the arrangements for their most recently adopted child’s contact with birth relatives. These families had a wide variety of arrangements for contact including direct face-to-face meetings, indirect contact via post, phone or internet, or a combination of both. Figure 2 below shows the number of children having each type of contact.

A broad range of birth relatives were included in contact meetings or were involved in postal, phone or internet contact. Figure 3 shows the range of birth relatives that children kept in touch with.

IN SUMMARY:
- The majority of the children (81%; n=73) had face-to-face meetings with birth relatives.
- Almost half of the children who had face-to-face contact also had contact via post, phone or internet (n=35).
- In total, over a third of the children (38%; n=35) had multiple arrangements for both indirect and direct forms of contact.
- For six children the planned contact had run into difficulties and was currently stalled.

FIGURE 2
Number of children having each type of contact

- Face-to-face contact only: 38
- Both face-to-face and indirect contact only: 35
- Indirect contact only: 12
- Contact currently stalled: 6
FACE-TO-FACE CONTACT
More than two thirds of the adoptive parents (n=73) indicated that their child had face-to-face contact with a birth relative and these meetings were with a wide variety of birth relatives (see figure 3). Figure 3 shows the range of birth relatives that children kept in touch with.

IN SUMMARY:
- Most of the face-to-face contact was with birth siblings who were living in a variety of placement arrangements - 82 separate arrangements in total (49 direct; 33 indirect).
- The second most prevalent contact was with birth mothers.
- Face-to-face contact was much more likely to be with birth mothers (n=44) than birth fathers (n=16).
- Most families had contact visits twice a year, but a third (n=26) had more frequent meetings, up to twelve times a year.
Connecting or Disconnecting?

While there was a great deal of face-to-face contact with birth siblings, children were much more likely to have contact with brothers and sisters who were fostered or adopted elsewhere (n=30) rather than with siblings who were living with birth parents (n=8) or other birth relatives (n=11). Contact with all birth siblings was more likely to involve face-to-face meetings rather than being maintained via post, phone or internet.

The numbers of birth fathers (n=16) involved in the child’s most frequent face-to-face contact was much lower, almost three times lower, than birth mothers (n=44). There were also fewer paternal than maternal grandparents involved in these arrangements. Birth fathers and paternal grandparents were the only relatives with whom contact was more likely to be indirect than face-to-face.

Other research has also shown that birth fathers tend to be less connected with children after adoption. Clapton and Clifton (2016) found that birth fathers can feel mistrusting or antagonistic towards social services and adoption social workers, making it difficult to negotiate suitable contact plans. Some adoptive families have been unable to have contact with birth relatives because of perceived threats from birth fathers who do not accept the adoption (MacDonald, 2016). This suggests a need for targeted support to help birth fathers become more supportive of their children’s adoption.

Sometimes other birth relatives also occasionally joined in meetings, but compared to birth mother contact, there were relatively few extended birth family members involved in the children’s most frequent face-to-face contact. This may be a missed opportunity to maintain children’s connection with their birth family if contact with birth parents is not achievable or is unacceptably difficult. Contact may work best with birth relatives who support the adoption, acknowledge the adopter’s role as parents, show commitment to the child’s welfare, and have reasonably settled personal circumstances. In some situations this range of conditions is more likely to be found among birth grandparents or other extended kin (MacDonald, 2015; 2016).

Over a third of the children (n=30) were having face-to-face contact with a birth relative in whose care they had been neglected or abused. In this scenario, children might experience a range of emotions or frightening memories at contact (Neil et al., 2011). While visits can be supervised to ensure children’s physical safety, it is important that we also provide for their emotional and psychological protection and consider how to ensure that they feel safe during contact.

In all but two families, adoptive parents accompanied their child to contact meetings. In most cases (78%, n=57) a social worker, family support worker or contact worker also attended this contact. A small number of adoptive parents (n=5) had contact with birth relatives without their child present. Half of the adoptive parents (n=36) said that they had a written agreement for the face-to-face contact.

Approximately half of the face-to-face contact took place at frequency of twice per year (n=36). However, over a quarter of the children (n=20) met with birth relatives three or four times a year, and a few children had much more frequent contact, meeting with birth relatives 10 (n=1) or 12 (n=5) times per year. These high frequency visits involved birth mothers, siblings living with birth family and one paternal grandparent.

Almost half of the face-to-face meetings were timed to take place in school holidays (n=31). Compared with the indirect contact, far fewer of the face-to-face arrangements coincided with special occasions, with only 7 children meeting with birth relatives around the time of their birthday and 6 meeting up at Christmas.

Most of the face-to-face meetings took place in a public place such as a park or restaurant (n=50) or in a formal venue such as a contact centre or social services facility (n=23). Some children were able to meet up with their birth siblings because they attended the same activities (n=5). A small number of families had contact meetings in their own home (n=5) or in the birth relative’s home (n=5), although none of these meetings involved birth parents. This home-based contact mostly took place at birthdays, Christmas and in school holidays and for two families occurred 12 times per year.

More than half of survey respondents took the time to describe a typical face-to-face contact. Meetings that took place in a soft-play area, park or other activity-based venue, or involved a shared meal in a child-friendly restaurant, were described as more ‘natural’ and ‘relaxed’. Children could take part in activities they enjoyed and had the freedom to play and interact with adults as they chose. Two respondents commented on visits that took place in contact centres and these venues were described as “intimidating” and “uninviting”.

The following comment illustrated a typical contact that was unproblematic. While this was by no means representative of all adopters’ experiences, as discussed in later sections, it illustrates how contact visits might deliver some benefits to all involved:

_“We have an hour’s contact twice a year, always over holiday times which means it’s quite easy to organise. Our child’s birth mum always has presents for him as we meet her just after his birthday and normally again around Easter time. One of us is always present during contact where we give her a summary of what he has been up to since the last contact. We take our mobile phone with us and are able to show photos, which is a good way to have a catch up. We find after about three quarters of an hour his mother is happy to finish up contact and seems settled that she has had a catch up. Our son will sometimes have further questions about half brothers and sisters which we encourage him to ask his birth mother himself. Sometimes he can be a bit unsettled after it but this has settled down as he gets older.”_
CONTACT BY POST, EMAIL, SOCIAL MEDIA, TEXT OR TELEPHONE

Just over half of the adoptive parents (n=48) indicated that they had contact with birth relatives via post, email, social media, text or telephone involving a wide range of birth relatives.

IN SUMMARY:

• Most of the indirect contact was with birth mothers (n=38).
• The next most frequent indirect contact was with siblings (n=33), in particular siblings who were fostered or adopted by another family (n=20).
• As with face-to-face meetings, there was less indirect contact with birth brothers or sisters who were living with birth parents (n=5) or other birth relatives (n=8).
• Compared to the face-to-face contact there were more birth fathers involved in postal, phone or internet contact (n=27).

In all but 6 cases the indirect contact involved a postal exchange of letters, cards, gifts or photographs which mostly took place once (n=21) or twice (n=22) a year. Almost half of this correspondence was timed to coincide with a special occasion such as birthdays (n=10) or Christmas (n=13). Marking special occasions or rites of passage in children’s lives in this way is a seemingly simple gesture but can send a message to children and birth relatives that they are connected in an important way (MacDonald, 2015;2016). Only 11 participants indicated that emails or text messages were exchanged with birth relatives, however in 3 of these cases this contact occurred 12 times per year. Similarly, a small minority (n=7) indicated that contact occurred by telephone but for some this contact was frequent occurring up to ten times a year. Virtual contact that takes place via digital technologies and internet based social media can work well to supplement other forms of contact where there are well-established relationships (Greenhow et al, 2016). There were few reports of positive use of virtual contact to support contact. Most comments related to difficulties in negotiating the boundaries, as discussed in the sections below, for the use of social media, particularly the posting of children’s images on social media sites.

For most of the indirect arrangements there was a written agreement in place. While most participants used a 3rd party, for example a social services letter box scheme or other mediated arrangement (n=43), almost a third (n=14) indicated that at least some of the correspondence was exchanged directly with birth relatives. Just over half of the children (n=27) contributed to the correspondence with birth relatives. However, 16 children were not aware of the correspondence with their birth parents. Most (all but 1) of these children were aged less than 5 years and had been adopted in the preceding two years.

MULTIPLE OR COMPLEX CONTACT ARRANGEMENTS

Many families were managing arrangements for contact that were particularly complex either because their child had different types of contact with various birth relatives or because there was more than one adopted child in the family and they each had different contact plans.

IN SUMMARY:

• 18 participants indicated that their child had separate plans for face-to-face contact with different birth relatives. Most additional visits were with siblings fostered or adopted elsewhere (n=13) who children met with separately from other birth relatives.
• In almost a third of the families (n=26) there were 2 or more adopted children who were having contact, mostly in the form of face-to-face meetings.
Connecting or Disconnecting?

In their comments to open-ended questions, 14 adoptive parents specifically highlighted the multiple arrangements for contact that they had with different birth relatives. This resulted in numerous individuals attending some contact visits, or meant that several different visits had to be arranged to accommodate the various relatives separately. With so many individuals involved, these meetings required a great deal of effort to coordinate and set up. Respondents highlighted the logistical difficulties of finding a time and venue that suited everyone. Some families had to make additional arrangements to meet separately with birth parents who were estranged from one another. Some birth parents who had gone on to have more children with new partners also wanted their blended families to attend visits. A particular practical challenge was finding a way of bringing together ‘multiple siblings in multiple placements’ that would suit children of all ages. This all made for a very busy and complicated schedule of contact arrangements. One adoptive parent told us that in order to facilitate siblings of varying ages, contact took place 7 times a year. Furthermore, visits that involved a lot of people could be quite chaotic, as one respondent wrote ‘it feels like a circus’. As one person described the list of individuals whose needs had to be accommodated:

“my two children, who are siblings, and then their other two older siblings and then birth mum and dad as well as post adoption worker, myself, another adoptive father and a foster mum all have to arrange a suitable date and venue! This is very hard... We also do sibling contact 4-6 times a year above this.”

The focus group discussions also highlighted the burden that multiple contact arrangements could place on families - from the expense of paying for day trips and refreshments during visits, to the challenge of fitting visits into busy lives. One of the biggest difficulties was the need to take annual leave to secure days off work to attend contact visits. This was particularly problematic for families with unrelated adopted children who had separate contact arrangements. If visits were cancelled by birth relatives and had to be rescheduled, this meant adopters having to use yet more of their leave entitlement.

UNEXPECTED FORMS OF CONTACT

The focus group discussions revealed two further forms of contact that were not included in the CASI questionnaire: contact with former foster carers and unplanned contact.

Participants identified contact with previous foster carers as an important but sometimes overlooked experience for the children. One person who initiated contact with previous foster carers after adoption described their motivation:

“It was just so unfair for the boys and for the foster family just to suddenly say you are not going to see these people who have loved and cared for you for a number of months really, and you know there was a really strong attachment with them.”

The contact with foster carers primarily allowed the children to “check out that the foster family were ok”. Some participants maintained regular, albeit infrequent, contact with foster carers but for most this contact “eased off” over time. In terms of unplanned contact, the focus groups shared numerous incidents where children had been recognised by strangers as being related to their birth kin or of “bumping” into birth relatives. Some made efforts to avoid shopping or leisure activities in areas where this might be likely. Some of the children who bumped into birth parents unexpectedly found this difficult to cope with and it had a negative impact on subsequent contact visits:

“She now has not seen her birth father for two years because he wasn’t supposed to see her without supervision by social workers, and he approached her in [town] on a wet winter’s afternoon and frightened the life out of her. From then she refused to go.”

Older children tended to have large social networks and some had come to know about birth siblings or cousins ‘on the grapevine’. One participant related how her son unexpectedly brought his birth cousin home to visit after he had met them through a third party. Others expressed a concern that with large extended networks of birth siblings and half-siblings there was the potential that young people might inadvertently choose boyfriends or girlfriends to whom they were biologically related.
The Experience of Contact

The middle section of the CASI questionnaire asked respondents a series of open-ended and detailed rating-style questions about various aspects of their experience of contact. 83 adoptive parents who were having contact completed this section of the questionnaire.

We asked adoptive parents to rate how satisfied they were with the following aspects of contact: their child’s relationship with birth relatives; their own relationship with birth relatives; their child’s comfort with contact; and the overall quality of contact.

We also asked adoptive parents to tell us whether they agreed or disagreed with a series of 25 statements about the experience of contact. 16 of the statements were adapted from the Adoptive Parent Views of Contact measure developed by Elsbeth Neil and colleagues (2011). All of the statements marked * were taken from that measure. All other statements were written specifically for this study and were based on findings of previous work by Mandi MacDonald (2016) and on knowledge of issues commonly raised by Adoption UK members. Responses to these statements gave us insight into the nuances of the contact experience, although we cannot know to what extent these views are shared by other adoptive families. Nor can these statements capture the complexity of contact. It was therefore important that the survey also asked some open-ended questions that allowed adoptive parents to comment on aspects of contact that we had not thought to ask about directly.

This measure contained a mix of positively and negatively worded statements. Each statement was rated on a 6-point scale and average scores were calculated for each statement. This gave a broad sense of the extent of satisfaction with the various elements that make up the contact experience. Positively worded statements were rated: strongly agree = 6, mainly agree = 5, slightly agree = 4, slightly disagree = 3, mainly disagree = 2, strongly disagree = 1. Negatively worded statements were scored in reverse i.e. with strongly agree weighted at 1 and strongly disagree weighted at 6. This meant that for all statements, higher average scores indicated more positive views, and lower average scores indicated more negativity about this aspect of contact.

Table 1 shows how many adoptive parents agreed or disagreed with each statement. For ease, the positively and negatively worded items are shown separately.

Adapting the Adoptive Parent Views of Contact measure (Neil et al, 2011) allowed us to make some comparison between the views of adoptive parents in Northern Ireland and those in England, who took part in Neil’s study. Overall, our survey respondents expressed fewer positive and more negative views of contact. Adopters in both studies seemed prepared to continue with contact in the hope that it would deliver benefits to their children, despite the additional pressure it placed on them as parents. Notwithstanding some negative experiences, both groups of adoptive parents indicated that they did not regret having the contact. The adoptive parents in Northern Ireland, however, expressed a stronger level of negativity about the effect of contact on their children.

On the whole, while most of the adoptive parents were broadly in favour of contact, believing it had the potential to benefit their children, the actual experience of contact was not always easy. The following quotations from the focus groups illustrate the disconnection between the theory and practice of post-adoption contact:

“ I mean you can tell somebody the theory of it you can teach the theory of it but it’s the day to day living of it that is hard.

Hypothetically, it is a good thing, I think in practical terms it is very, very complicated. ”
Connecting or Disconnecting?

IN SUMMARY: . . . cont

• Adoptive parents were clearly concerned about the emotional impact of contact on their child. While most agreed that their child was better off having contact, there was also a strong indication that contact was a difficult and unsettling experience for most of the children. The majority agreed that contact upset or confused their child, and that they took a long time to settle afterwards.

• Most adoptive parents agreed that having contact puts more pressure on their family than not having contact, and there was strong disagreement to the statement that contact ‘supports me as a parent*’.

• Adoptive parents identified some benefits for their family. The majority agreed that contact encouraged the family to talk about birth relatives more often and most felt proud or pleased to be able to tell birth relatives about their child's achievements.

Table 1 – Adoptive parents’ views of contact

<table>
<thead>
<tr>
<th>POSITIVELY WORDED STATEMENTS</th>
<th>Agree</th>
<th>Disagree</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>I think my child is better off because he/she has this contact with birth family*</td>
<td>63%</td>
<td>37%</td>
<td>3.57</td>
</tr>
<tr>
<td>Seeing/hearing from his/her birth family comforts my child*</td>
<td>40%</td>
<td>60%</td>
<td>2.87</td>
</tr>
<tr>
<td>My child feels comfortable with this contact*</td>
<td>55%</td>
<td>45%</td>
<td>3.51</td>
</tr>
<tr>
<td>I feel comfortable with the contact I have with my child's birth family*</td>
<td>56%</td>
<td>44%</td>
<td>3.66</td>
</tr>
<tr>
<td>Seeing/hearing from my child's birth family is helpful to me*</td>
<td>38%</td>
<td>62%</td>
<td>3.45</td>
</tr>
<tr>
<td>The contact we have with our child's birth family supports me as a parent*</td>
<td>26%</td>
<td>74%</td>
<td>2.44</td>
</tr>
<tr>
<td>I am happy with how often contact takes place</td>
<td>67%</td>
<td>33%</td>
<td>4.04</td>
</tr>
<tr>
<td>My child’s birth relatives have accepted the adoption</td>
<td>57%</td>
<td>43%</td>
<td>3.73</td>
</tr>
<tr>
<td>I feel proud/pleased to tell birth relatives about my child's achievements</td>
<td>88%</td>
<td>12%</td>
<td>4.99</td>
</tr>
<tr>
<td>Having contact with his/her birth family encourages us to talk about them more often</td>
<td>64%</td>
<td>36%</td>
<td>3.98</td>
</tr>
<tr>
<td>I find birth relatives easy to relate to</td>
<td>41%</td>
<td>59%</td>
<td>3.09</td>
</tr>
<tr>
<td>The birth relative respects my role as mum/dad</td>
<td>61%</td>
<td>39%</td>
<td>3.90</td>
</tr>
<tr>
<td>I feel I have the right amount of control over decisions about contact*</td>
<td>60%</td>
<td>40%</td>
<td>3.94</td>
</tr>
<tr>
<td>My child enjoys this contact*</td>
<td>51%</td>
<td>49%</td>
<td>3.51</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NEGATIVELY WORDED STATEMENTS</th>
<th>Agree</th>
<th>Disagree</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>I worry that this contact may be doing my child more harm than good*</td>
<td>63%</td>
<td>37%</td>
<td>3.12</td>
</tr>
<tr>
<td>Seeing/hearing from his/her birth family upsets or confuses my child*</td>
<td>63%</td>
<td>37%</td>
<td>3.08</td>
</tr>
<tr>
<td>Having contact with his/her birth family causes my child to worry more about them*</td>
<td>38%</td>
<td>62%</td>
<td>3.96</td>
</tr>
<tr>
<td>I worry that his/her birth family will be a negative influence on my child</td>
<td>63%</td>
<td>37%</td>
<td>3.18</td>
</tr>
<tr>
<td>It takes my child a long time to settle after having contact</td>
<td>61%</td>
<td>39%</td>
<td>3.07</td>
</tr>
<tr>
<td>I worry about these birth relatives intruding in my family’s life*</td>
<td>63%</td>
<td>37%</td>
<td>3.17</td>
</tr>
<tr>
<td>Seeing/hearing from my child’s birth family makes it harder for me to really feel like my child's parent*</td>
<td>43%</td>
<td>57%</td>
<td>4.00</td>
</tr>
<tr>
<td>Having contact puts more pressure on my family than not having contact*</td>
<td>63%</td>
<td>37%</td>
<td>3.27</td>
</tr>
<tr>
<td>I regret having this contact with the birth family*</td>
<td>37%</td>
<td>63%</td>
<td>4.07</td>
</tr>
<tr>
<td>If I had a magic wand I would stop this contact today*</td>
<td>46%</td>
<td>54%</td>
<td>3.75</td>
</tr>
<tr>
<td>It is difficult when birth relatives do not turn up for contact or change plans at the last minute</td>
<td>88%</td>
<td>12%</td>
<td>1.99</td>
</tr>
</tbody>
</table>
In the answers to open-ended questions there were 145 separate comments that identified challenges and difficulties associated with contact. These comments related to:

- difficulty in negotiating roles, relationships and boundaries (n=42);
- breaches of agreed plans for contact (n=33);
- complex interactions with siblings (n=28);
- poor quality interaction between children and their adult birth relatives (n=26);
- the emotional impact of contact on the child (n=21);
- the logistics of maintaining a variety of contact arrangements (n=20).

Most adoptive parents expressed a strong motivation for making contact work. This did not mean that contact was always easy, in fact adopters reported a number of significant challenges and felt ambivalent or negative about many aspects of the experience. Despite this they showed commitment to continuing with contact. Almost two thirds (n=52) indicated that they did not regret having contact and over a half (n=44) indicated that if they had a magic wand they would not stop the contact. Indeed over a quarter of respondents strongly disagreed with these statements (n=23 and n=22 respectively). While they worried about the emotional impact of contact, the majority of adoptive parents agreed that their child was better off having contact (n=52) although agreement with this statement was not strong with a third (n=27) only slightly agreeing, and a fifth (n=17) strongly disagreeing. More than half of the adoptive parents identified benefits to having contact. 48 indicated that contact was helpful to them, although agreement with this statement was not strong, with half of those (n=24) agreeing only slightly with this statement. The majority of respondents (n=71) agreed that they felt proud or pleased to be able to tell birth relatives about their child's achievements. Almost two thirds (n=53) agreed that contact encouraged the family to talk about birth relatives more often. This is important as it has been suggested that willingness to discuss adoption related issues in a sensitive way within the adoptive family has more influence on outcomes for children than the type of contact they do or do not have with birth relatives (Brodzinsky, 2006).

**THE BENEFITS OF CONTACT**

![Figure 4](image-url)

I think my child is better off because he/she has this contact with birth family*

Seeing/hearing from my child’s birth family is helpful to me*

If I had a magic wand I would stop this contact today

I regret having this contact with the birth family*

Having contact with his/her birth family encourages us to talk about them more often

I feel proud/pleased to tell birth relatives about my child’s achievements

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

<table>
<thead>
<tr>
<th>Agree</th>
<th>Disagree</th>
</tr>
</thead>
</table>

Adoptive Parents’ Experiences of Post Adoption Contact and Their Support Needs
Connect or Disconnect?

COMMENTS ON THE BENEFITS OF CONTACT

More than half of those who completed the survey (67 comments from 56 participants) commented on the benefits of contact. While contact was fraught with challenges, these adoptive parents could also identify positives for themselves or their child, describing contact as vital and providing reassurance that birth relatives were ok:

“We view it as necessary and important; but not always easy.”

The exchange of information via contact had a two-way benefit. Adoptive parents appreciated the opportunity to update birth relatives on the child’s achievements and to catch up on birth relatives’ news. Contact visits provided a useful opportunity for the adults to catch up and get to know one another (6 comments). Visits with siblings were a chance to develop supportive relationships with other adoptive parents or carers:

“The kids would play and the foster and adopted parents would chat.

We look forward to the letters from our daughter’s sister, we are as keen to know their progress as well as tell our progress.”

The main benefit of contact was that it opened up opportunities for family communication about adoption. Contact led to conversations with the children about their life story and birth family circumstances (7 comments).

“Whilst it can be challenging it offers the opportunity to discuss things openly and gives a vehicle to air any concerns etc.”

Contact helped answer children’s queries (8 comments) and could give access to information that helped ‘nurture their identity’. 5 respondents commented on the value of seeing birth relatives for helping the child understand their own story and the reasons for their adoption. This in turn helped ensure that the child had a realistic understanding of their birth parent’s situation and counteracted romanticised notions of what their birth family might be like. One respondent highlighted that contact helped to absolve their child of any sense of responsibility for their circumstances:

“the children as they get older should be able to get some sense of why this set of parents couldn’t look after them… it would help children to stop blaming themselves and feel less shame about their story.”

Six people commented that contact was more advantageous to the birth relatives than the child. As one respondent put this:

“I believe it is designed to benefit the birth family more than the child.”

Focus group participants also highlighted the potential for contact, when managed well, to be important source of information. In some cases this was factual information such as medical conditions among extended kin. It was also an opportunity for children to ask the questions that were important to them such as “why they were put for adoption; what were they like as small children, and what were they like as babies”. When this was done in collaboration with social workers who could help birth parents to prepare, it was particularly beneficial to the children. As one participant said:

“you kind of realise just how meaningful this was just to have those memories and to know somebody remembered what his favourite toy was and what he was like when he was newly born and all of those wee things were just so important and I think I had totally underestimated that for them… something was brought to light that he had lost”
Contact helped the children make sense of their complex family networks and helped support a sense of belonging and feeling settled in the adoptive family. Some participants disputed that contact gave the children an accurate knowledge of their birth parents. Indeed they felt that contact visits based around fun activities, gifts and treats fuelled an unrealistic impression of what life with birth parents would be like:

“Creates an illusion that the birth father would be kind, caring and capable of looking after them. Contact visits... are made up of fun, treats and presents, what child doesn’t want these. But creates illusions of birth family life.”

The most beneficial contacts were those that allowed the children to see their birth relatives “warts and all”. Contact visits that were realistic and did not attempt to gloss over difficulties helped to establish a foundation for truthfulness and reality that helped children to understand their situation and kept fantasies at bay. Loxterkamp (2009) has argued that we do children a dis-service if we do not give them truthful, accurate knowledge of their birth family. As they develop their own identity, this information allows them to choose which parts of their heritage they want to identify with, or distance themselves from. The following extracts from focus group discussions illustrate this:

“‘It means there are no secrets, there is no intrigue there is nothing because they know exactly who their birth family is they don’t fill in the voids with fantasy information.’”

“‘It debunks the whole myth that birth mum is this perfect person, again she gets to see birth mum warts and all. We have friends whose two adopted kids are now teenagers and they are both have come through a stage were ‘everything would have been so much better if we had been allowed to stay with birth mum’, they think they were perfect people and adopted mum and dad are less than perfect - so (child) needs to see that.”

THE OVERALL QUALITY OF CONTACT

It is encouraging that 43% of respondents were either satisfied (n=29) or very satisfied (n=7) with the overall quality of contact. However, a third (n=28) indicated that the quality of contact was not satisfactory with equal numbers indicating that they were unsatisfied and very unsatisfied in response to this question.

**FIGURE 5**

Satisfaction with the overall quality of contact

- Very satisfied: 14
- Satisfied: 29
- Neither Satisfied or Unsatisfied: 14
- Unsatisfied: 21
- Very Unsatisfied: 7
Almost two thirds of respondents indicated that having contact puts more pressure on their family than not having contact (n=52). However, similar numbers agreed that they were happy with how often contact takes place (n=55). For most families, contact visits took place twice a year. This may account for adopters' satisfaction with the level of contact and may also suggest that increasing the frequency of visits would also increase the pressures on adoptive families.

The most challenging difficulty, with the strongest level of agreement of all the statements, was that it is difficult when birth relatives do not turn up for contact or change plans at the last minute. The majority of respondents (n=67) agreed with this statement, more than half (n=45) strongly agreeing. This statement had the lowest weighted average indicating the least positivity with this aspect of the contact experience. This was reflected strongly in the comments to open ended questions and was also a dominant feature in the accounts of those who told us about contact arrangements that had stalled or been terminated.

16 participants gave comments that indicated a generally positive experience of contact and noted that visits could be an enjoyable time and that siblings particularly enjoyed the opportunity to play together. As three respondents put this:

"It's a positive experience when managed well.
After the initial awkwardness everyone has an enjoyable time.
My children love to see and spend time with their siblings."

While some people felt that contact visits were somewhat tokenistic, others attributed the success of contact to the fact that it was brief and did not involve very intense emotions or close interactions, as this comment suggests:

"Generally the children are happy to check birth parents... are ok and happy to leave again."
In contrast to this, some people felt that time spent on contact was important. The following comment shows how for one family the sibling contact was beneficial when children could spend a more extended period enjoying one another’s company as this laid a firm foundation for lasting relationships:

“Contact can be 2-4 hours - it can be a meal, a walk, cinema, outdoor pursuits. It is precious time for siblings to talk. Siblings are reassured when they see each other. It allows them to bond and maintain relationships which they can continue into adulthood.”

In cases where birth relatives clearly accepted the adoption, respected the adoptive parents’ role, and demonstrated care and concern for the child, contact was reported to be a beneficial experience for everyone. The following comment from one survey respondent illustrates some challenging aspects of face-to-face contact, but also, in contrast, some of the ingredients that combine to make a positive contact visit:

“Contact with birth Mum has been awful as she has never accepted the adoption and does not think about my son’s perspective at all. She does not stick to agreements about bringing presents etc. She has posted pictures taken at contact on Facebook which was specifically not allowed. At the last contact birth mum hardly spoke to me or my son… She has told her remaining children that I am my son’s granny and am looking after him and that he will someday come back to visit… Alternatively, contact with birth Dad is generally positive and has been beneficial to my son. He knows who he is and they get on well - with birth Dad showing a keen interest in his welfare and giving me my place as his Mum, also showing much appreciation.”

Many adopters commented on the difficulties posed when birth relatives did not keep to the terms of the contact agreements. This happened in two main ways. Over a quarter of survey respondents (27%, n=25) commented on the challenge of birth parents not turning up for contact or changing arrangements at the last minute. Some also commented on birth parents posting photographs of children on social media and this was a theme that generated a great deal of discussion in focus groups. Some respondents commented that birth parents had been asked to engage in contact but had ‘refused’ or ‘declined’. For others, birth parents attended erratically and were unpredictable meaning that contact would have to be arranged or re-arranged at very short notice. Some acknowledged that birth parents’ difficult circumstances, for example chronic substance misuse, mitigated against them sticking to a routine for contact. They had put arrangements in place to manage this, for example waiting until the day of contact to see if birth mother planned to visit. When birth relatives did not turn up for contact this was hard for adoptive parents to explain to the child.

There was a sense of powerlessness in some of the comments that contact would be good to have but impossible to achieve without birth parents’ co-operation and willingness. As one adoptive parent wrote:

“both birth father and mother have broken off contact which is detrimental for my child.”

A number of people commented that they were expected to continue to facilitate contact even though birth parent attendance was unreliable. One respondent wrote:

“I think that when birth relatives don’t turn up for contact in over a year then contact arrangements should be reviewed.”
One respondent expressed a sense of injustice at the perception that adopters do not facilitate contact, when it is sometimes birth relatives who do not avail of the opportunities offered:

"It is wrong to give the impression that contacts are not available to adoptive children... when maybe they are and it is the birth relative who chooses not to facilitate them"

Another way that contact agreements were breached was through the use of phones, photographs and the internet, and adopters found this very difficult to manage. Two adoptive parents commented specifically on unsupervised or secretive social media contact between child and birth parent. In both cases this created significant strain that was damaging to family relationships. That this issue was raised by so few perhaps reflects that most children were not yet using social media independently. Most concerns centred on birth relatives taking photographs on mobile phones during visits without adoptive parents' consent or knowledge and subsequently posting these on social media sites. As one respondent commented:

"Our children are all over the internet (with a statement saying) they have been forced into adoption"

A frustration expressed in all of these comments was that there appeared to be no recourse to any means of stopping this happening. While most had agreements in place that digital photographs should not be taken during contact visits, many found that birth relatives disregarded this photographing the children sometimes surreptitiously. As one respondent wrote with emphasis:

"There is NOTHING being done about it!!!!!!"

Focus group participants identified some advantages to using social media, for example to maintain contact with birth relatives living in other countries, to seek out birth relatives when contact had been lost, or for siblings to stay in touch in a "more normal" way. However, they were very concerned at the lack of privacy settings on birth parent's accounts and at the extent to which children's images could be shared and re-shared. They felt a loss of control over their children's images and privacy, and emphasised the need for agreements to be more assertively enforced and to help birth relatives understand their concerns re this issue:

"I think that it's taken a right away from the child that it's the child's right whether her photographs should be online or not and it's nearly a violation to me of her rights ya know but that's sort of the way I would look at it, it's up to her when she is older if she wants to be on Facebook and wants to put her own photos up, but while she is only two you don't want that trail left there ya know from the age of two and who's to say some of her friends in school aren't going to come across one one day and say who's that man that has that picture up of you. It's up to her to tell people her background, it's not to be taken from her"

One survey respondent explained how social media posts had led to a breach of the child's privacy in their local community:

"this led to my son being recognised by friends in our neighbourhood who put two and two together and now realise who his birth mum is which was his private business"
Adoptive Parents’ Experiences of Post Adoption Contact and Their Support Needs

IMPACT OF CONTACT ON THE ADOPTIVE PARENTS

Over half of adoptive parents indicated that they felt comfortable with the contact \( n=47 \) and that they felt that they had the right amount of control over decisions about contact \( n=49 \). However, 40\% \( n=34 \) of those responding did not feel that they had the right amount of control over decisions. This was reflected in their comments where many indicated that they felt pressurized into agreeing to contact plans, and in the focus groups where participants seemed to be unsure of their rights.

There was some evidence that contact had some impact on adopters’ sense of parenthood. There was strong disagreement to the statement that contact ‘supports me as a parent’ with 61 respondents disagreeing and of those most \( n=36 \) strongly disagreeing with this statement. More than two fifths \( n=36; 43\% \) agreed that contact made it harder for them to really feel like their child’s parent.

FIGURE 7

<table>
<thead>
<tr>
<th>Statement</th>
<th>Agree</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seeing/hearing from my child’s birth family makes it harder for me to really feel like my child’s parent*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The contact we have with our child’s birth family supports me as a parent*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel I have the right amount of control over decisions about contact*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel comfortable with the contact I have with my child’s birth family*</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

IMPACT OF CONTACT ON ADOPTERS’ SENSE OF PARENTHOOD

A sizeable minority of survey respondents \( n=17 \) commented that they felt pressurised in relation to contact arrangements. Respondents felt that their views of contact were ‘not always listened to’, in particular reporting that social workers insisted on maintaining contact that adoptive parents felt was poor quality, of very little benefit or indeed was upsetting to children:

“\textit{I am unsure whether or not my child benefits from contact at all, but feel pressurised to continue.}”

In some of the comments \( n=7 \) adoptive parents clearly felt very concerned about the impact of the contact on their child but felt powerless to change the situation. One adoptive parent put this strongly:

“\textit{I would never allow my birth child to experience something so emotionally damaging nor would I ever feel obliged to do so, however I don’t feel I have the freedom to allow my little boy to stop facing his abusers.}”
Another expressed frustration that they felt powerless to alter contact arrangements that were clearly problematic commenting:

"I don't think too many adoptive parents are selfish enough to not see the benefits long term but when it's causing such huge problems why can't it be cut back with an attempt to re-establish after a period of time??"

Some comments (n=11) reflected a sense that adopter's role and expertise as parents was not valued, and that their wishes and opinions were of lesser importance in the whole process of agreeing contact plans. One respondent said 'We have been almost 'harassed' to maintain contact', and another commented on the diminished sense of parenthood that came from feeling that they had little authority over contact arrangements:

"Being tied to a post adoption contact agreement makes it seem that we are not the real parents and that ultimately we are actually foster carers"

Other adopters have reported feeling that their role and status as parents is challenged or not fully recognised and this can become particularly apparent when there are disagreements about contact (MacDonald, 2016). It is important that adoptive parents are allowed to feel free to express their misgivings or concerns about contact, and are empowered to nurture and protect the children's welfare.

In the focus group discussions participants shared a sense of being constrained by the decisions of the Court. They felt that they had to stick to contact agreements, even when arrangements were proving difficult or upsetting or when children were refusing to attend:

"When you go to the court then, and you hear the judge reinforce those messages about contact how it is important, there is this narrative going on behind the actual process, that you kind of feel it is being imposed on you"

"When the court's decision is made it is quite, that's a decision and that's the way it is you can't change that too easily ya know so it's a big thing when that decision is made when the adoptive parent is legally you are bound to sort of keeping that ya know recommendations whatever the court decides ya know"

Contact plans were understood as legally binding although adoptive parents seemed unsure what the consequences would be if arrangements were altered. Indeed, there was some joking among the groups that adoptive parents were "waiting to be thrown in prison" because planned contacts were ceased at children's request. On a more serious note, negotiating contact in a legal arena made this process seem adversarial and divorced from considerations of the children's welfare. Adopters felt particularly undermined by solicitors' letters that emphasised the birth parents' "entitlement" to meet with the children. The following extract from one of the focus group discussions illustrates this:

"The contact isn't happening this year, so of course the solicitors' letters are flying back and forth and the letter from her solicitor she is entitled to see her children. It's a court order that she is entitled to see her children and that very sentence 'entitled to see her children'

That wrenches you.

It does.

Well, if the birth mum wants to come and challenge us about why we stopped contact - even though it was her that stopped contact - because it is only her word against our social worker's word or against her social worker's word, and I think that's an unfair situation to be left in"
Adoptive parents seemed to be unclear of their rights in relation to contact plans and were unsure to what extent they could act independently of social services and the courts to either reduce contact they felt was detrimental or to work directly with birth relatives to establish contact:

“You don't feel like you have a say... legally maybe you don’t have a say.

No control

But is that child not yours now, is it not an adopted child completely with the law?

Yeah

Well then it's your child is that not the whole idea?

It is yeah, but I mean there was a contract signed that says she sees her twice a year.”

These discussions in focus groups highlighted a sense of disempowerment especially among those who had adopted recently. Participants with more experience encouraged them to take ownership of the authority that comes with legally being a parent:

“You are told from the day and hour you start the process, this is ingrained into your psyche, this is what you will have to do (have contact) you must do this and it is only when you get more educated about the process itself you go ‘I am sorry’ there may be times when you don’t have to because you are the mum and dad of the child.”

ADOPTIVE PARENTS’ RELATIONSHIPS WITH BIRTH RELATIVES

We asked adoptive parents to tell us how satisfied they felt with their relationship with the child’s birth relative. The majority either felt ambivalent (n=37) about their relationship with birth relatives or were satisfied (n=19) or very satisfied (n=10).

FIGURE 8
Adoptive parents’ satisfaction with their relationship with birth parents

<table>
<thead>
<tr>
<th>Satisfied</th>
<th>Very Satisfied</th>
<th>Neither Satisfied or Unsatisfied</th>
<th>Unsatisfied</th>
<th>Very Unsatisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>10</td>
<td>9</td>
<td>9</td>
<td>37</td>
</tr>
</tbody>
</table>
61% of those who told us about their contact experiences agreed that the birth relatives respected their role as mum/dad (n=50). Slightly fewer, just over half of those responding (n=46) felt that the birth relatives had accepted the adoption, although almost a fifth of respondents (n=15) strongly disagreed with this statement. However, 63% of respondents (n=52) agreed that they worried about birth relatives intruding on their family life. More than half indicated that they did not find birth relatives easy to relate to (n=48).

ADOPTERS’ COMMENTS ON THEIR RELATIONSHIP WITH BIRTH RELATIVES

In the survey comments five respondents indicated that the birth relatives had accepted the child’s situation or were ‘slowly coming to terms with the adoption’, and recognised and respected the adopters’ role as parents. A further positive feature in these comments was that the birth relative clearly demonstrated an interest in the child and concern for their welfare:

“Can clearly see a love for the child. Birth mum freely calls me ‘mum’ in front of the child. Able to communicate well with birth mum and exchange info regarding child’s past and present.”

A small number of respondents (n=4), however, commented that the birth parents had not accepted the permanence of their child’s adoption or the adopters’ parental role and that this made for difficult interactions during contact. Two respondents commented that their children’s birth mothers needed more help to become reconciled to the adoption:

“They continue to treat the children inappropriately and refer to themselves as the parents and mum and dad”

“We feel she (birth mother) needs more support in order to cope better and understand the reasons why her children were placed into care initially.”
Adoptive Parents’ Experiences of Post Adoption Contact and Their Support Needs

A small number of respondents (n=4) described their interactions with birth relatives as tense, awkward or difficult. As two people put this:

“Trying to make conversation with people I didn’t know and had very little in common with.”

“Feel like we are putting on an act”

More concerning was the challenge that some described with maintaining appropriate roles and boundaries in contact. These comments highlighted the difficulty of birth relatives telling the child inappropriate information; surreptitiously encouraging children to use their original surname; or being overly affectionate with children who found this difficult to cope with. For one family this breach of boundaries was very concerning as they described being ‘pursued’ by birth relatives who turned up at the school gate and followed them home.

Similarly, a key theme in the focus group discussions was the ambiguity of roles and relationships that adopters felt was confusing for the children. Adoptive parents were keen to show respect to birth relatives and “give them their place”, however felt that at times their own position as parents was challenged or undermined. For example, adopters who tried to manage their child’s behavior during contact were made to feel like “the big bad wolf, horrible parent’s coming in, telling him off”.

Participants also found it difficult to explain or put a name on the various relationships between the child’s birth and adoptive family. The following quotation illustrates the complexity of this:

“... She (child) tries to work out who everybody is, and she would say what is (birth sister) to you, to me mummy? What is (birth sister) to you, and I would say she is your sister, but she is not related to me but she will always be your sister but she doesn’t live with us. And she sort of gets her wee head around that bit okay, but she likes to know who belongs to who and what way it all fits in. She is constantly, ‘what is (birth brother) to you mummy? He could be…. And I would say he is your brother, and he is a very good friend to me, but I never really know how to answer it properly because it is difficult.

To put a name on that relationship”

Focus group participants also shared how intensely emotional and stressful they personally found the contact visits and identified a need for support for this:

“I think contact is very stressful for the children but I think also for us. Because it sometimes is hard for you sitting and looking and knowing that this person did whatever or treated your children in whatever way... and it’s very difficult to keep that emotion and to keep that emotion away from your children.

And at different times that will awaken you more than others.

So you are going through all of these emotions… and then when you start to realise that there still is actually some of that stress there. And you are more uptight than you normally would be.

You just sometimes think I wish I could talk to somebody about how it makes me feel...
Focus group participants empathised with birth parents who they imagined must also find contact to be easier in theory than in practice. They recognised that contact might be emotionally challenging for birth relatives, many of whom are struggling with a range of difficulties and that they would benefit from support to help manage the strong emotions that they imagined contact must raise:

"I suppose if you think of it you could assume the majority of people who have had their children placed for adoption are going to have a lot of trauma in their own lives and their ability to regulate their emotions and cope with issues I would imagine is going to be a stumbling block for lots of contacts for them.

But I think that’s were social services should be coming in to work with the birth parents. I know it is not always possible and not all birth parents are accepting of that help but I think sometimes that’s where it can fall down were it, you know there isn’t enough work done with birth parents post adoption.
"

CHILDREN’S EXPERIENCES OF CONTACT

We asked adoptive parents how they perceived their child’s experience of contact. 84 survey respondents rated their child’s relationship with their birth relatives and 85 rated their child’s level of comfort with contact.

IN SUMMARY, WE DISCOVERED THAT:

- Approximately a third of the adoptive parents (n=30) were satisfied (n=21) or very satisfied (n=9) with their child’s relationship with their birth relative.
- A third (n=30) were satisfied with their child’s level of comfort with contact.
- However, slightly more adoptive parents, (n=34), were unsatisfied with their child’s level of comfort with contact.
- Over half of the adoptive parents (n=54) worried that the contact may be doing their child more harm than good.
FIGURE 11
Satisfaction with Children’s comfort with contact

- Very satisfied
- Satisfied
- Neither Satisfied or Unsatisfied
- Unsatisfied
- Very Unsatisfied

FIGURE 12

- I worry that this contact may be doing my child more harm than good*
- My child enjoys this contact*
- My child feels comfortable with this contact*
- Seeing/hearing from his/her birth family comforts my child*
- Having contact with his/her birth family causes my child to worry more about them*
- I worry that his/her birth family will be a negative influence on my child
- It takes my child a long time to settle after having contact
- Seeing/hearing from his/her birth family upsets or confuses my child*

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Agree Disagree
It is encouraging that most adoptive parents felt satisfied or neutral about their child’s relationship with birth relatives and with how comfortable they were with contact. Only around one in four of the children were perceived as having an unsatisfactory relationship with their birth family in contact. However, over a third of children were perceived as being uncomfortable with the contact and there was strong agreement that contact could be difficult and a potentially negative experience for them.

Almost two thirds agreed that contact upset or confused their child (n=52) and that they took a long time to settle afterwards (n=51) and similar numbers worried that their birth family would be a negative influence on their child (n=52). In their comments, the adoptive parents noted that contact was useful for reassuring the children that their birth relatives were ‘ok’. However, a sizable minority of respondents to this question (n=32) indicated that contact caused their child to worry more about birth family and more than half (n=49) disagreed that contact comforted their child. Slightly over half indicated that their child felt comfortable with the contact (n=45) or enjoyed the contact (n=43). This of course meant that a sizeable proportion of parents believed that their child was not comfortable with the contact (n=38) and/or did not find it enjoyable (n=40). It is not surprising therefore that the majority (n=54) worried that the contact may be doing their child more harm than good.

COMMENT ON THE IMPACT OF CONTACT FOR CHILDREN

EMOTIONAL IMPACT

Over a third of adopters commented on the negative emotional impact that contact had on their child. These comments varied in intensity - some described the child being upset or unsettled and some used much more intense language describing contact as ‘traumatic’; ‘harm’, ‘destructive’, ‘rejection’; ‘emotional harm’ or ‘turmoil’. Several noted their child’s apparent “regression” following visits. Children were described as being over-exciited, agitated, anxious or confused by contact visits and being withdrawn or tearful and displaying upset, bed wetting, or needing comforted at night.

Can this sentence be changed to:

"The contact itself is relatively uneventful, birth mum brings some toys and my daughter engages with her and us. However in the days afterwards, she becomes very clingy and stubborn and tearful. For a few weeks after the last contact, she kept asking us if she would "stay here forever?''. It is heartbreaking to see her go through the anguish that obviously ensues in her mind after contact."

"Our daughter gets so very over-exciited before it and so very anxious and insecure afterwards, it takes a huge toll on the whole family."

"My child has been so undermined in his progress in becoming secure and becoming part of our family due to the contact with his birth mother... every time we bring him to see his birth mother he becomes incredibly confused about who will care for him long term - it has taken four months to regain his trust after the last contact and in this time his whole life has been in turmoil with lots of regression."

A similar comment from a focus group participant illustrates how the emotional impact of contact undermined the child’s sense of security in their adoptive family:

"Our little boy is so insecure that he now thinks every time he meets someone from the past that he is going with them and that it is no longer forever... So we met birth mum and he hasn’t trusted since then that he is with us forever... and because of that any progress that we have made has totally gone by the wayside and we are back I would say to where we were two years ago in terms of him feeling totally insecure."
Adoptive Parents’ Experiences of Post Adoption Contact and Their Support Needs

Focus group participants also described how children’s reactions to contact dominated family life. Children displayed "insecurity", "fear", "explosive" behaviour, and stress-related illnesses. This meant that parents had to rearrange commitments and social activities to be able to support one another and the children in the days following contact.

POOR QUALITY INTERACTION

More than a quarter of survey respondents (n=26) specifically commented on poor quality interaction between birth relatives and the child during contact visits. In the main, adopters were concerned that birth relatives appeared to be disinterested in the child (12 comments) or did not interact in a meaningful or positive way with them (14 comments).

Those who commented on birth relative’s apparent disinterest expressed frustration that birth parents often spent a great deal of contact time on their mobile phones, focusing their attention on the other adults or talking about their own situation and needs rather than enquiring about the child. One respondent reported that the birth mother would leave the contact visit "after about 5 mins (or less)". Some said that their young children were happy to play by themselves or with supervising social workers, and did not seem to notice or mind this lack of attention from birth relatives, while others commented on their child’s frustration and sense of disappointment. Most commented that the birth relative seemed unsure about how to interact with the child and took it upon themselves to try and facilitate more positive engagement. As one person put this:

"Birth parent was happy to just watch our child rather than initiate play, despite our best efforts"

Some of 14 respondents who commented on poor quality interaction found some behaviours very difficult to manage during contact. Some noted that the birth relatives to be "rude" or inappropriate, for example, "birth mother and older sibling were boasting about being thrown out of school". One person reported that the birth mother would ask the child for money then leave. Another commented on indiscriminate or intrusive affectionate behaviour:

"Birth mum smothering my son in affection... she follows him around telling him she loves him & trying to kiss him constantly, he is so uncomfortable with it but much too nice a child to tell her to stop"

These contact visits were described as "superficial", "meaningless" or "uninspiring" and functioned more as a checking-in exercise rather than facilitating any depth of relationship

"It takes place in a play area and engagement is very superficial."

Focus group participants also queried the value of visits where there was minimal conversation and little effort to play with the child:

"Apart from checking up that she is still alive there’s probably no real benefit"

During the focus groups there was a great deal of discussion about strategies for managing poor quality interaction and facilitating more meaningful contact visits. For example, while children enjoyed going to soft play centres these venues did not encourage interaction as children could happily go off and play on their own. Moving contact to a venue with “less distractions” “so the interaction has to be between parent and child” helped resolve this problem, but meant that adopters had to work harder to help along the conversation between birth relative and child.
17 respondents commented that the child's age influenced the quality of contact and the child's comfort with contact. Half of these comments \((n=9)\) expressed a preference for contact at a young age and half \((n=10)\) indicated that contact was more positive when the children were older. For younger children the contact was described as being "like a play date". The children were too young really to understand the complexities of contact or to notice some of the difficulties. Five of these comments anticipated that contact would become more problematic as time went on. This was borne out in the experience of those with older children:

\[\text{As the children in particular get older the information passed between them is more challenging to work with}\]

On the other hand, 10 people commented that contact was better and more meaningful for older children who were able to understand and cope with the complexity of the relationships. They commented that because young children found it very difficult to understand their situation, it was more likely that they would find it upsetting and confusing. Older children were reported to be more settled after contact and to place greater importance on the birth relationships. One respondent summed up these comments:

\[\text{I do not believe that very young children should be put through this, it is too confusing and unsettling for them, especially when they are adjusting and settling into life with their forever families. I do believe that older children who have more capacity to understand and communicate should have the opportunity to have contact}\]

**CHILDREN’S NEEDS AND WISHES**

Almost half of survey respondents commented on the importance of prioritising the wishes, needs and feelings of the children. 13 of these specifically encouraged all involved to more actively seek out and listen to children's views, and urged social workers to more assertively safeguard the child's comfort and well being. The following quotations were typical of these comments:

\[\text{In my position I have to put him first}\]

\[\text{The emotional well being of my child is paramount}\]

\[\text{The social worker would be more directive in making sure the child is protected at the meeting from emotional harm}\]

Ten respondents described how contact had been altered in some way in response to the child's expressed wishes. Either set up when the child requested it or the child was given the option whether or not to take part. Adopters could be particularly flexible with letter based contact where children were encouraged but not forced to contribute to the correspondence:

\[\text{I write the letter, my daughter is encouraged to contribute but doesn’t want to.}\]
Adoptive Parents’ Experiences of Post Adoption Contact and Their Support Needs

Not all adoptive parents were convinced that their child would be assertive or articulate enough to clearly express their wishes and feelings about contact. As one survey respondent wrote:

“I don't believe he's the type of boy to ever say he doesn't want to go. I just hope he gets what he needs out of it & can share his worries with us.”

Some adoptive parents (n=14) were frustrated that when their children did express a preference, their choices were not heeded. Some reported that social workers had “insisted” that contact should take place even if the children expressly did not want it, or were reluctant to attend. As two adoptive parents observed:

“She (child) used to remark when contact was due ‘I wish I had a broken leg and didn't have to go’.

‘Things have to get desperately bad before it can be stopped’

Some adoptive parents commented that birth parents’ rights and needs were given precedence over the welfare of the child. For some this was the case even when children were very upset by contact:

‘Thinking dictated too much by needs of birth parent and not enough consideration given to children’

Some of the respondents commented on a difference of opinion with social workers over what was in their child's best interests and felt that the opinion of social workers held more sway than their own assessment of their child's needs. As one adoptive parent put this:

“We always maintained that our child was upset by contact but were told that the birth mother could go to court and insist on having contact. We were advised that contact was highly recommended and would be best for our child.”

These comments made a call for more meaningful contact that was of benefit to the child rather than tokenistic or intended to benefit solely birth relatives. As one respondent stated:

“Contact needs to benefit the child not as a process to appease birth relatives, or a tick box exercise.”
SIBLING CONTACT

Almost a third of survey respondents (n=28) commented specifically on contact with their child’s birth siblings. Twelve of these highlighted the positives of this contact especially if it took place in a “natural setting” or was based around a fun activity such as “a meal, a walk, cinema, outdoor pursuits”. Even if the interaction with birth parents was superficial or difficult, the contact visits were still beneficial because they gave the child access to sibling relationships which were positive and enjoyable. On the flip side, if birth parents had disengaged from contact, siblings could be a source of information about them and were a way of staying updated about their welfare. The following comments summarised some of the benefits of sibling contact:

“Our daughter has direct contact with siblings who are with different adoptive parents. This is a positive experience for her and also for us as it helps us to promote her identity and helps her feel connected.”

“My child does not have post adoption contact with his biological parents but the contact with siblings is extremely important to him and his siblings.”

There were comments about the risks and challenges of contact from 16 respondents. Most were concerned about inappropriate or inaccurate information being passed by the sibling to the child resulting in stress, confusion and upset. Three people indicated that sibling contact had been suspended or restricted because of this. Some adoptive parents said that children worried about their welfare of siblings who were living with birth parents and were acutely aware of “massive difference in their lives”. Others were concerned about the negative influence of older siblings. One respondent described how their child revered an older sibling who had been expelled from school:

“This is who my child looks up to and he is now mis-behaving (was caught smoking and drinking alcohol) at school and doing little or no work. This might not have happened if he didn’t have contact.”

A further difficulty was noted when birth parents joined in the sibling contact. Some survey respondents (n=7) commented on the differential treatment of the various children, with birth parents focusing their attention on some siblings and others being overlooked. Birth parents were reported to interact mainly with older children who they had previously cared for and who they knew better. This resulted in the younger siblings “being left out”. Some tended to ignore shyer or quieter children or showed a clear gender bias towards sons or daughters. As one person commented:

“The father favoured the sibling (who is a boy) and it was noticeable that he seemed to be deliberately emphasising his interest in the boy, rather than our daughter.”

Families who had adopted a sibling group commented on the upset caused when birth relatives treated one child more favourably than the other. Participants were concerned about the negative impact this perceived rejection might have on individual children, but also worried about the potentially divisive effect on the sibling relationship:

“Our children have the same birth mother but different birth fathers and they have both had two very different experiences of birth mother. Our son was more or less rejected from when he was born, but our daughter was put on a pedestal and very much given anything she wanted... At the very first contact... it was horrendous and the birth mother was all over our daughter and the son he just... said he never wanted to see her again.”
Focus group participants recounted similar experiences, for example:

“The (birth father) would do things like hand money visibly to the brother in front of her... It was the very same with my daughter, the older brother was the blue eye and she was, there was hardly any attention paid to the children, but any that was, my daughter didn’t get it at all.”

“The focus is always on the older two siblings but not on the younger two. Our wee boy is part of the younger 2 siblings and it’s very hard for me to watch that cos our wee boy is not very hard to get along with... he’s a sociable wee fella, he’s great but ya know it’s very hard for him and he’s going ‘why are they not talking to me?’ He’s going round to that way of thinking now ‘they are not talking to me so why would I want to go’.”

Managing the logistics of bringing siblings together was a key theme in the focus group discussions. Sibling contact that was arranged directly with other foster carers or adopters could be more informal or flexible and was described as “relaxed”, “normal” and a “regular fun day”. Some found Adoption UK activity days to be useful for getting siblings together. There is general consensus that it is important to maintain connections between siblings after adoption, but much less certainty about the best way to go about this (Jones, 2016b). This is partly because sibling relationships hold different meanings for different children and will be influenced by a wide range of pre- and post-adoption experiences. As Jones (2016b) suggests, we need a better understanding of sibling relationships from the children’s point of view and to find out more about the impact of sibling contact on adoptive placements.

THE VIEWS OF THOSE WITH NO CURRENT CONTACT

28 people who responded to the survey indicated that they had had no birth family contact since the adoption and so were invited to give their views on the issue generally. Four participants had had contact with birth relatives before the adoption was finalised but had none since. Several adoptive parents reported that they had difficulty getting the agreed contact up and running and cited unresponsive birth relatives and lack of social work support as reasons for this. Four adoptive parents indicated that they had sent letters to birth relatives as agreed but these had not been reciprocated or in one case collected and so could not be considered contact with birth relatives.

One respondent summarised a tension between the potential benefits and challenges of contact:

“Have heard stories from others of how their child’s behaviour has deteriorated after contact so I’m not sure how useful or how good it is for a child but at the same time having none for our daughter is sometimes hard to explain to her when the ‘whys’ start!”

Five adoptive parents who visited the online questionnaire had adopted inter-country. One inter-country adopter had sent letters to their child’s birth family via a lawyer and another suggested that good practice guidelines should be developed to assist those families with children adopted from overseas who might wish to consider contact. Another inter-country adopter emailed the researcher to indicate that contact had been a factor in their decision to adopt from overseas.
Support For Contact

We asked adoptive parents what support they received with birth family contact. We also asked them to rate how helpful they found the various types of support they received and their satisfaction with support provision overall. Figure 13 below shows the types of support that we asked about and the numbers of respondents who received each type or support. Figure 14 shows the level of satisfaction with support provision generally.

IN SUMMARY

- Three quarters of survey respondents (n=70) told us that they receive some formal support in relation to contact.
- All forms of support were rated as being helpful.
- The most common supports were help with making and reviewing arrangements and direct supervision of contact meetings.
- These most frequently received supports were also the most positively rated.
- Half of all survey respondents indicated that they were satisfied with support provision generally.
- Adopters appreciated social workers who were accessible, knowledgeable, empathic and who were prepared to intervene to resolve problems.

FIGURE 13

Number of respondents receiving various types of support

- Counselling or therapeutic support
- Direct Support to child
- Helping with relationships outside of contact
- Co-ordinating letter exchange
- Help to manage risks
- Helping with relationships during contact
- Practical assistance
- Acting as go-between to resolve difficulties
- Worker attends contact meetings
- Supervising contact
- Reviewing arrangements
- Help with making contact arrangements
Three quarters of survey respondents (n=70) told us that they receive some formal support in relation to contact. Almost all of these families (n=61) were having direct face-to-face contact with birth relatives, and in almost all these cases a worker attended contact meetings and provided supervision. This means that a only a minority of those who had face-to-face contact (n=9) were receiving no formal support with these arrangements. A similar minority (n=9) had support for letter-based contact only. This reflects the higher levels of face-to-face contact compared with letter, phone or internet based contact and suggests that support is available to a sizable proportion of families who have direct birth family contact. The formal support was mostly provided by the agency that placed their child with them for adoption.

All forms of support were rated by most as being helpful. The most positively rated supports were also the most frequently received and these were targeted mainly at the practical aspects of contact. Over two thirds (70%; n=66) of those having contact received help with making contact arrangements and most rated this support as either very helpful (n=36) or mainly helpful (n=25). Almost two thirds (63%; n=60) had help with reviewing arrangements and rated this support as very (n=26) or mainly (n=27) helpful. Slightly fewer, but again almost two thirds (60%; n=57) had a worker attending contact meetings and this was also positively rated with 88% (n=50) of those who received it rating it as either very (n=31) or mainly (n=19) helpful. Over a half (57%; n=54) received practical assistance for contact e.g. arranging venues and providing contact, and almost all rated this as either very (n=26) or mainly (n=24) helpful. The most positively rated support was supervision for contact with almost all of the 57 respondents who received this rating it as very (n=33) or mainly (n=20) helpful. Just over half of those having contact (52%; n=49) received help with relationships during contact meetings (e.g. encouraging communication or play) and two fifths (40%; n=37) received help with relationships outside of contact meetings (e.g. through preparation and debriefing). While most people who received relationship support either during or outside of contact meetings found this helpful, only around a quarter rated it as very helpful (n=12 and n=10 respectively).

The types of support received by the fewest respondents were counselling or therapeutic support (n=31) and direct support to the child in relation to contact (n=35). These were also the supports that were rated as being the least helpful with over a quarter of respondents (26%) who received these types of support rating them as unhelpful (n=8 and n=9 respectively). 80 people rated their overall satisfaction with support provision. This included some who received no formal support. (Figure 14). Most respondents were either very satisfied (n=17) or satisfied (n=30) with the support they received for contact.

A slightly higher proportion (20%) of those who did not receive formal supports compared with those who did (6%) indicated that they were very satisfied with the overall quality of contact. This may be because there was not the same felt need for support in situations where contact worked well and perhaps indicates that in some circumstances contact arrangements can be managed very effectively by the families involved, and it would be useful to explore further what contributes to this to this success.
The focus group participants emphasised the value of having a good and trusting working relationship with social workers. They generally found this easier with the social workers who had completed their adoption assessment and who they felt knew them and were highly motivated to support them. Some recognised that their assessing social worker was continuing to offer support even though it was not technically their job to do so. Participants found it more difficult when post-adoption support was transferred to a different worker or team. The infrequency of contact visits, in comparison to the very intensive assessment process, meant fewer opportunities to develop a relationship with new social workers.

In general, participants valued social workers who were easy to get in touch with, who took the time to listen to their concerns, who recognised the emotional impact of contact on the child and adoptive parents, and who could actively intervene during visits to monitor and guide the interactions. They particularly valued being able to phone their social worker following the contact visit to debrief and to plan for the next visit while the experience was still fresh. More than a quarter of survey respondents (n=24), however, commented on difficulties with social work support for contact. The increase in post adoption direct contact has inevitably placed a great deal more demand on adoption teams to provide support both practical and emotional and undoubtedly this has lead to additional workload without a commensurate increase in resources. The types of difficulties noted included a breakdown in trust or sense of partnership with social services particularly following protracted legal proceedings (2 comments), or feeling that social workers were unreliable, for example by turning up late to contact or not booking transport for birth relatives (6 comments). Others noted that poor communication meant that contact was set up with little notice, arrangements were not confirmed with birth relatives, or plans were not put in place at all. The following comments illustrate this:

"The social worker always phones to arrange a date less than a week beforehand. Because there are a lot of people involved this can cause complications"

"We have sometimes turned up for sibling contact and one or no siblings have arrived due to no taxis being booked or birth family/ foster carers not knowing about contact"

This suggest that social workers should not overlook the importance of seemingly small and very practical aspects of their role. Where support for contact was not helpful, this was because formal support was unavailable or minimal (n=14). Six people commented that they had expected to have post-adoption support but that this had not been forthcoming or had been delayed. One person who commented on contact that had stopped wrote:

"Contact stopped because of not having post adoption services in place"

Among those who did have a social worker helping with contact, five commented on the difficulty caused when the worker lacked knowledge of adoption related issues or the specific details of the child's situation. One respondent, for example, wrote that, in her view, due to a lack of understanding of attachment difficulties, the social worker misinterpreted the child's 'faux socialbility' as positive engagement rather than the 'highly anxious state' that the child's behaviour actually signified. Three further respondents commented that the history of abuse or neglect or the child's ongoing difficulties were minimised or overlooked by social workers during contact as the following comments illustrate:

"I was left feeling that I just had to sugar-coat what I was telling birth mum"

"Pretending nothing ever bad ever happened is not helpful to the child"
ADOPTIVE PARENTS’ SUGGESTIONS FOR SUPPORT PROVISION

We asked respondents whether they had any suggestions for supporting adoptive families with contact. A number of respondents (n=13) exhorted all involved in post-adoption contact to listen to the wishes of children and prioritise their needs. Their views are summed up in the following comment:

“more emphasis on the child’s well-being instead of taking into account how hard it is for the birth family”

The focus groups emphasised how much they appreciated the support from Adoption UK peer groups which they felt were a "safe environment" and felt that many others could benefit from this.

In total the adoptive parents made 43 separate suggestions for practice that might support contact. These were broadly divided into help with boundaries and relationships, help with practical arrangements, therapeutic support and suggestions for practice that might be more empowering for adoptive parents. In summary their suggestions included:

- Establish clear rules for contact and consistently reinforce these - especially in relation to the giving of gifts and to the taking of photographs and the publishing of these on social media.
- Social workers should be ‘a strong presence at contact’ and actively intervene to remind birth parents of negotiated boundaries and to encourage positive interaction with the children.
- Prepare everyone for contact by briefing birth relatives on the child’s needs and updating adopters on birth parents’ situation.
- Provide ongoing support for birth parents outside of contact to help them understand and accept the adoption and the reasons for it.
- Help birth relatives to have an age-appropriate understanding of children generally and of the individual child’s needs and how these might best be met during contact.
- Help with finding a suitable venue for contact meetings. One person suggested establishing a dedicated contact venue:

“An area like a park etc for the trust so other forever families could use for contact and families might feel more comfortable if it’s other families just like them and not the public”

- Regularly reviewing the appropriateness of arrangements, perhaps annually, to enable contact to be more responsive to children’s changing needs.
- More readily available access to therapeutic support or counselling for children to help them with the experience of contact.
- Provide opportunities for adoptive parents to debrief after contact visit and to work through their own feelings in a supportive environment.
- Listen to adoptive parents’ views and wishes and try to understand their feelings about contact and how challenging it can be. In the comment below one respondent made a striking plea for empathy from social workers. Others acknowledged that decisions about contact were strongly influenced by the Courts and wished for greater understanding of adoptive parents’ experiences and recognition of their parental role and expertise in the legal arena:

“Don’t force it on families. Social workers get to go home after contact, we get to take a disturbed child home and deal with their nightmares …..but the SW gets a good night sleep!!”

- Give adoptive parents information about their rights and options in relation to contact so that they feel equipped to make informed choices.
- Listen to what adoptive parents are saying about their children’s needs and welfare and trust them to act in their children’s best interests.
Summary and Conclusions

This study aimed to find out the views and experiences of adoptive parents who have contact with their adopted children’s birth relatives. The invitation to take part was open to all members of Adoption UK in Northern Ireland, but we specifically wanted to hear from those who have birth family contact.

We advertised the study to all member families (n=533) and sent an invitation by email to all those we had an email address for (468 families). This email contained a link to the web-based survey questionnaire. A total of 123 adoptive parents responded to the survey, 95 indicated that they or their child had had some form of contact with birth relatives since adopting, and 93 of these went on to complete the questionnaire. This means that more than a quarter (26%) of those who were sent an invitation email responded to the survey, and a fifth (20%) indicated that they had some form of birth family contact and went on to complete the questionnaire. We held four focus group interviews and a total of 26 adoptive parents took part in these discussions.

The adoptive parents who took part provided us with a lot of detailed information about their experiences. They had a variety of arrangements for contact with a range of different birth relatives. The quality of relationships with birth relatives and their evaluation of the support they received were also variable. It was clear, however, that contact involved complex relationship dynamics, and elicited strong emotions in parents and children. It is difficult to do justice to the complexity of the adoptive parents’ experiences, but the following is a brief summary of the answers we found to our three main research questions.

What is the nature and extent of post-adoption birth family contact?

• For the majority of the children, contact took the form of direct face-to-face meetings with birth relatives.
• A wide variety of birth relatives took part in contact meetings but most visits were with birth siblings who lived elsewhere, particularly those who were placed with a different adoptive or foster family.
• The second most prevalent contact was with birth mothers who were much more likely to have face-to-face contact than birth fathers.
• Most families had contact visits twice a year, but a third had more frequent meetings, up to twelve times a year.
• More than a third of the children had multiple arrangements for both indirect contact via post, phone or internet and face-to-face contact meetings.
• Contact via post, phone or internet involved a wide range of birth relatives but, like face-to-face contact, was mainly with birth mothers or siblings who were fostered or adopted by another family.
• There was less contact of any kind with birth brothers or sisters who were living with birth parents or other birth relatives.
• More birth fathers were involved in postal, phone or internet contact than in face-to-face meetings.
• Many families were managing arrangements for contact that were particularly complex either because their child had separate plans for face-to-face contact with different birth relatives, or because there was more than one adopted child in the family and they each had different contact plans.
• In almost a third of the families there were two or more adopted children who were having contact, mostly in the form of face-to-face meetings.

What are the challenges and benefits of contact for adoptive families?

• Most adoptive parents expressed positive views about birth family contact. They broadly agreed that in theory contact could be beneficial, but in practice it was fraught with challenges.
• The majority of adoptive parents identified a range of benefits to having contact. Most agreed that contact encouraged the family to talk about birth relatives more often, and helped children to come to a more realistic understanding of birth parents’ circumstances and their own life story.
• Contact with birth brothers and sisters could be very enjoyable and laid a foundation for lasting relationships. However, sibling contact could also be difficult, particularly if birth relatives treated some of the children more favourably than others.
• There were some aspects of contact that most adoptive parents viewed negatively. They found it particularly difficult when birth relatives did not turn up for contact or changed plans at the last minute, or breached contact agreements, for example by posting photographs of the children on social media.
• Most adoptive parents felt that having contact placed additional pressure on their family. This pressure came from the practicalities and the logistics of maintaining a variety of contact arrangements, difficulty in negotiating roles and boundaries, and poor quality interaction between children and their birth relatives.
• Adoptive parents felt pressurised into agreeing and maintaining contact plans. They were unsure of their rights, particularly in relation to contact agreements negotiated in court, and were not confident that they would be able to change contact arrangements that they felt were detrimental to the children.
• Most of the adoptive parents were clearly concerned about the emotional impact of contact on their child. While they mainly agreed that their child was better off having contact, the majority also indicated that contact upset or confused their child, and that they took a long time to settle afterwards. Over half of the adoptive parents worried that the contact may be doing their child more harm than good.

What types of support for contact do adoptive parents use and how helpful do they find these?
• Three quarters of survey respondents received some formal support in relation to contact. Most of the families who had face-to-face contact were receiving support and this mainly took the form of help with practical arrangements, reviewing contact plans, and direct supervision of contact meetings.
• All forms of support were rated as being helpful, but the most frequently received supports were also the most positively rated.
• Half of all survey respondents indicated that they were satisfied with support provision generally. Some were concerned that provision of support was sparse or hard to access, or found it difficult to get to know and trust post-adoption social workers.
• Adopters valued social workers who were accessible, knowledgeable, empathic and who were prepared to intervene to resolve problems. They particularly appreciated it when social workers enforced agreed boundaries and were seen to prioritise the needs of the children.
• Many felt that more should be done to support children, birth relatives and adopters outside of contact visits to help resolve difficulties and facilitate more meaningful interaction during face-to-face meetings.
Conclusions

All research has its limitations and there are some important things that this study cannot tell us. We were interested in finding out about post-adoption contact from the perspective of adoptive parents and so we did not seek the views of social workers, birth relatives or the children themselves. It must be acknowledged that they each may have different perceptions on how contact is going, what the challenges and benefits are, and how support is provided. There remains a need to hear the voices of all involved in adoption.

We do not know what motivated this particular group of adoptive parents to take part in the study, how many other adoptive families are having contact with birth relatives and whether their experiences are the same or different. We also cannot accurately know the extent of post-adoption contact in Northern Ireland.

What this study does give us is a detailed insight into the views, experiences and support needs of a sizeable sample of adoptive parents in Northern Ireland, and an approximate estimate of the rate of birth family contact. The Health and Social Care Board commissions Adoption UK to provide a range of peer support services to all adoptive families in Northern Ireland. As a result, Adoption UK have contact details for a significant proportion of adoptive parents in Northern Ireland and the majority of those who have adopted in the last five years. The number of adoptive parents who took part in the study represents approximately one fifth of the total membership of Adoption UK in Northern Ireland.

In England and Wales it has been estimated that a significant minority (Neil et al, 2011), perhaps around one in five [Jones, 2016a] children adopted from public care are likely to have direct contact with a birth relative. Our study suggests that birth family contact is at least this prevalent among children adopted from care in Northern Ireland. Three quarters of the survey respondents were answering questions in relation to a child who was adopted in the past five years. All of these children had some form of contact with birth relatives (n=70) and most (n=58) had direct face-to-face contact. These figures suggest that just less than a fifth of the total number of children adopted from care in the past five years were having contact, and for one in six this contact took the form of face-to-face meetings with birth relatives. Indeed the rate of contact among recently adopted children may be higher since it is likely that there are more families having contact who did not know about or wish to complete the survey.

Adoption agencies in Northern Ireland appear to have committed significant resources toward sustaining birth family connections. It is apparent that post-adoption support provision in Northern Ireland has developed to take account of the types of contact that families are experiencing. Help with practical arrangements, reviewing contact plans, and a worker in attendance at contact meetings was available to most families who had face-to-face contact and was rated as being helpful.

There are other aspects of contact, however, that adoptive parents found challenging but did not receive as much support with. In particular, they felt that those who negotiate contact agreements in Court and the agencies that support them thereafter did not have a thorough understanding of the emotional impact of contact on the children. They felt that a higher priority should be placed on children’s wellbeing and expressed a need for more therapeutic services to help children cope with the difficult emotional and behavioural responses that contact provoked.

The range of reactions in children that adoptive parents described suggest that planning for contact and services to support it need to be well-informed by an understanding of attachment and of the long-term impact of trauma and adversity.

Adoptive parents also wanted more support with relationship dynamics. Many said that they and their children found it difficult to relate well with birth relatives or to develop the kind of relationship where they could work together to resolve difficulties. They sometimes felt unable to enforce boundaries or insist that agreed rules for contact were maintained. It would be beneficial for workers to be trained in mediation techniques and to have the time to work with adoptive parents and birth relatives outside of contact meetings to scaffold more positive interactions during visits with children. Furthermore, adoptive parents were unsure of their rights in relation to contact and felt pressurised to agree to contact plans, and may benefit from recourse to legal advice, particularly when contact decisions are in the legal arena.

What is striking from the survey responses and the focus group discussions is the amount of activity that was being directed toward maintaining adopted children’s connections with their birth relatives. Adoptive parents considered birth family contact to be important, although not always easy. While they were not entirely convinced that the benefits would ultimately outweigh the difficulties, most were in favour of continuing with contact, even if it was stressful, in the hope that it would help their children to understand their own life story. They generally showed commitment to sustaining contact arrangements and went to considerable effort to find ways of making the experience comfortable and meaningful for the children. They also would have liked some of the challenges to be acknowledged and resolved. It is the hope that services to support contact will continue to develop, informed by insight into relationship dynamics, sensitivity to the wishes and feelings of all the parties, and understanding of the needs of children.
References


MCSHERRY, D., FARGAS MALET, M. and WEATHERALL, K., 2013. Comparing Long-Term Placements for Young Children in Care. London: BAAF (British Association for Adoption and Fostering)


