ABSTRACT

A SUPPORT GROUP FOR POST ADOPTIVE PARENTS :

A GRANT PROJECT

By

Judy Hwang

May 2015

The purpose of this project was to locate a potential funding source to fund a support group for post adoptive parents of foster youth from the child welfare system. The support group will educate the parents of the transitional process of adoption and provide group support through networking and sharing resources. An extensive literature review was performed to analyze the history of adoptions, adoption policies, theoretical implications, protective factors, risk factors, the needs and effectiveness of a support group program. A search for potential funding source was conducted through Internet, which resulted in selecting Stuart Foundation as an appropriate funding source. With evidence-based findings of a need for a support group, the primary goal of the proposed program was to equip the adoptive parents with knowledge and resources to decrease the prevalence of dissolution and disruption. The actual submission and funding of this grant were not a requirement for the successful completion of the project.

A SUPPORT GROUP FOR POST ADOPTIVE PARENTS:

A GRANT PROJECT

A THESIS

Presented to the School of Social Work

California State University, Long Beach

In Partial Fulfillment

of the Requirements for the Degree

Master of Social Work

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May 2015

UMI Number: 1589624

UMI
Dissertation Publishing

ProQuest®

ACKNOWLEDGEMENTS

Thankful for my dad Anthony, who believed that I was emotionally and cognitively capable of completing the proposal. Though he was not vocal, his mannerism and actions conveyed his firm belief.

Thankful for my mom Eun, who was my biggest emotional, physical, mental support. She knew exactly when I needed her support even before I externally expressed any signs.

Thankful for my sister, Gina, who always swamped me with her concerns which made me forget about my thesis-related stress.

Thankful for my together-in-Paris roommate Lindzie, who saw me at my worst and the best of this process. She was patient with me at my worst, encouraging me with words of affirmation and acts of service, such as doing my dishes without complaining once.

Thankful for God who is more than deserving of all my work and has given me the motivation to continue on. In addition, thankful to Family Worship and my church body, who have kept me accountable in prioritizing what is important.

Hence, I dedicate my grant project to those who have walked through this process with me.

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CHAPTER 1

INTRODUCTION

Adopting a child is a complex process that may be comprised of multiple issues including legal documentation, transference of parental rights, attachment concerns, emotional instability, and sometimes cultural differences. Once a child is adopted, both the child and the parent need to adjust the new dynamics of the family. According to the Survey Census (2010), 2.4%, which is about 2 million children, were adopted in United States (Ishizawa & Kubo, 2014). Still today, United States has more than 500,000 children in its foster care system waiting to be either reunited with their family or adopted into a permanent home (Administration for Children, Youth and Families, 2013). As social workers aim to achieve a successful reunification or adoption, Goldberg, Moyer, Kinkler, & Richardson (2012) identified various challenges in adopting through the child welfare system. Heterosexual couples face challenges such as lack of support and disorganization within the agency while homosexual couples, in addition to the stated challenges, face the possibility of discrimination in the process of adopting.

As adoptions are more frequently practiced, prospective parents have multiple mediums to adopt a child–public agency, licensed private agency, independent, unlicensed, and international adoptions (Child Welfare Information Gateway, 2010). Public agency adoption is processed with foster children under the care of the

Department of Children and Family Services. These children have been in the care of foster homes due to abuse and neglect from biological parents. Private agency adoptions occur when biological parents pass their parental rights to the agencies. Independent adoptions mainly take place with infants and are handled by adoption lawyers. Lastly, unlicensed adoption is similar to independent adoption but instead of a lawyer a facilitator supervises the adoption. Unlicensed adoption is prohibited in some states due to lack of restrictions. According to Ishizawa and Kubo (2014), 53% of the families who adopted from the foster care system had at least one biological child in their household. Also, interestingly, those who indicated below the 200% poverty were the highest percentage to adopt within the foster care while those above 400% poverty level adopted internationally. Children who were Black in ethnicity, older in age, and special health care needs were the general profile of children in the foster care adoption.

One of the highest needs of adoption is within the public agency domain as thousands of children wait for permanent homes. In the fiscal year 2012, 51,225 foster children were discharged for finding a permanent family. According to the Administration for Children, Youth and Families (2013a), the number of public adoptions and foster care have stayed consisted in the last decade. In 2002, the Administration for Children, Youth and Families (2013b) counted 51,000 public agency adoptions and 52,000 public adoptions in 2012. Even though the number of adoptions has been consistent nationally, the number of adoptions in California, specifically, has been declining since 2009 (Administration for Children, Youth and Families, 2013b). The

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decline may be explained by various reasons such as certain legislations that were passed to stricken the adoption process with long waiting period and lack of support services.

In 2010, California was the leading state in United States in the number of adoptions with 157,427 adopted children under 18 years (Kreider & Lofquist, 2014). The California foster care system counted 399,546 children in 2012 which was a 23.7% decrease from 2002 (Administration for Children, Youth and Families, 2013a). According to the Needell et al. (2015), Los Angeles County alone recorded 1,307 adoptions in 2013, which makes Los Angeles County of the highest adopting counties.

<div align="center">Definition of Terms</div>

Adoptive parent: The legal parent of adopted a child who has the same rights and responsibilities as a biological parent (Adoption Connection, n.d.).

Finalization: A completion of legal paperwork, which gives the new adoptive parents full parental rights.

Foster care: A 24-hour care that substitutes the care of a parent while the child is detained from his or her families. The State is responsible for the care and licensure of these foster care homes (Code of Federal Regulations, 2000).

Disruption: Termination of the adoption process before the legal documentation is finalized and the child is entered to foster home or another adoptive home (The Child Welfare Information Gateway, 2012).

Dissolution: Severance of adoption process after all documentation has been finalized and the child is returned to foster home or another adoptive home (The Child Welfare Information Gateway, 2012).

Post-adoption placement (PAP): Situations where adoptees return to foster care (Festinger & Maze, 2009).

Transracial adoption: Placement with adoptive parents who are of another race or ethnicity than the child (Adoption Connection, n.d.).

<u>Problem Statement</u>

Lack of comprehensive support services and intervention can often lead to disruption and even dissolution of an adoption. Both events result in the child's return to either foster care or a new adoptive placement. An article reported that disruption rate ranges between 10 to 25% per year in United States with higher rate among adoptions involving older children (Child Welfare Information Gateway, 2012). The article listed lack of social support and unrealistic expectations to be some of the key factors as an adoptive parent. Though only 1 to 5% of adoptions dissolve, statistics show continuous occurrence of dissolutions every year. There is limited understanding of reasons for dissolutions but researchers suspect lack of education to be a key factor.

<u>Background</u>

Research showed a significant relationship between mental health diagnoses and children adopted from the child welfare system (Hussey, Falletta, & Eng, 2012). The study supported a finding that children who were placed into adoptive homes at an older age were more likely to be diagnosed with mental health problems. The challenge is to provide comprehensive care throughout the process with the countless children in the foster care system and those in the adoption process. Follan and McNamara (2012) described the bond between adoptive parents and children as a fragile but committed

relationship. The researchers listed four experienced themes of eight adoptive parents with reactive attachment disorder (RAD) children: being profoundly unprepared, being insecure in self, being assailed by unexpected emotions and being committed. With insecurities being formed in the parenting process and the difficulties in forming stable relationship, the researchers encourages for support services. The findings support the need to provide proper care to the youth and adoptive families in the realm of mental health and the difficulties that follow with children with mental health diagnoses. Lack of proper services will limit the families from providing appropriate care for the children and put the family in danger of dissolution.

<center>Overview of Literature</center>

Goldberg et al. (2012) identified difficulties heterosexual and same-sex couples experience when adopting through the child welfare system. The study consisted of 42 couples; 17 lesbian, 13 gay, and 12 heterosexual couples who had adopted a child within 3 to 4 months prior to the interview. One of the greatest challenges Goldberg et al.'s respondents reported was that children and older youth had experienced heavy emotional stress that was often linked to behavioral problems. The couples were asked to complete a packet of questionnaires in addition to an hour long phone interview. The researcher noted legal, social service agency, and birth family contact to be the three overlapping challenges experienced by all participants. Many foster children have varying degrees of legal issues pertaining to the adoption, which led to feelings of legal insecurities by the prospective adoptive parents. Also, the disorganization of the child welfare system along with the lack of support services increased the stress level for the parents. Lastly, couples

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noted the difficulty of navigating through the birth family challenges, especially, the visits with birth family members. In midst of these stress factors, the adoptive parents commented on the discontinuation of support services in the pre- and post- adoption stages by phrasing it as feeling abandoned.

Goldberg, Kinkler, Moyer, & Weber (2014) further conducted research on the relationship changes of the family dynamic as the couple transitions to a family. The qualitative study consisted of 42 couples from their earlier research. The median age of the sample was approximately 38 years old with 86% of the couples being White. The data were based on telephone interview questions that focused on transitions into parenthood, especially on the relationship of the couple. The first finding was the shift in the couples' management of time and energy with the placement of the child. The couples commented on the decreased amount of couple time they experienced while their energy was spent primarily on the child. The second finding indicated a shift in the family roles as one parent took the responsibility of the primary parent, who disciplined, while the other parent automatically assumed the responsibilities as a secondary, fun, parent. The different parental roles created resentment between the couple, especially with the primary parents, resulting in frequent conflicts. Also, another contributing factor to conflicts was a difference in parenting styles between the couple. Lastly, the child's misbehavior was a significant challenge in the family relationships. Some participants mentioned that the benefit of the struggle was that it strengthened the marriage. Many of the families received therapy for the child, parents, both, or attended support groups. All

who participated in therapy or support groups discussed the benefit of the support

services as it normalized the challenges and corrected skewed understandings.

With the increase in adoption, the likelihood of disruptions and dissolution of

adoptions increases as well (Coakley & Berrick, 2008). Bryan, Flaherty, & Saunders

(2010) evaluated a program called Adoption Support for Kentucky (ASK), which

provided adoptive parent support groups facilitated by an adoptive parent. The group

provided mentoring, policy education, training, and other resources that pertained to

adoptions. The study aimed to find significance in the effectiveness of the program and

to interview the adoptive parents' perception of the program. From total of 32 ASK

groups throughout the state, the study surveyed six groups from diverse geographical

areas. Notably, parents who adopted from the child welfare system represented the

highest enrollment response. Bryan et al. found that 206 of 231 respondents agreed that a

safe place to discuss personal struggles was beneficial. It showed that adoptive parents

primarily attended the group for social support, which demonstrated the high need for

guidance and support among adoptive families. The support group was as a stabilizer for

many families, as half of the participants admitted that adoption processes were more

difficult than expected and prevented parents from choosing to disrupt or dissolve from

finalizing the process.

<u>Target Population</u>

The target population for the grant is parents who adopted children from the

public welfare system, specifically within Los Angeles County. Adoptive parents can

include single parents, same-sex couples, and heterosexual couples. The grant intends to

serve those who are in need of support services upon completion of their adoption process. Since the support services is intended for parents who have adopted through the welfare system, the target population will be accessed through the welfare system and partnering non-profit agency, Olive Crest. The purpose of the grant is to decrease the number or disruptions and dissolutions and to relieve the burdens the adoptive parents experience through the process by providing support groups.

Needs Assessment

Information needed for the grant will be obtained through the Los Angeles Child Welfare website, U.S. Children's Bureau, and California Child Welfare Indicators Project. According to the Administration of Children, Youth and Families (2013a), children placed in foster care system is estimated at 638,000, of which 101,666 were waiting to be adopted. The literature review indicates the need for continual support services after the adoption process in order to ease transitioning and to prevent dissolutions. To assess the need for the program, further data will be collected through current and past literature and internet research.

Budget

The majority of funding will be spent on the group facilitators. A total of four part-time employees will organize the support group. All employees will work about 10 hours actually facilitating the group, preparing materials for the group, making phone calls, providing case management services, and recruiting participants. A licensed clinical social worker will be compensated about $23,000 to oversee the program and supervise the facilitators. Then there will be two social workers to mainly facilitate the

groups and provide case management services. Each social worker will be paid $20,000

and will partner with a parent liaison. A parent liaison will attend the groups to share real

life experiences as one who has already experienced the adoption process and is currently

raising an adoptive child. The parent liaison will also assist in recruiting potential

participants and be compensated $10,500. Extra funds will cover office supplies as well

light refreshments for the group meetings. There will be small incentives provided at the

end of the program to motivate and encourage consistent attendance. Therefore, total

budget for the program will calculate to about $75,000. In-kind resources will include

utilities, telephone, and receptionist services.

<div align="center">Multicultural Relevance</div>

Since mid-20th century, transracial adoption has significantly increased (Johnson,

Mickelson & Davila, 2013). Even though there have been policy changes to

accommodate the needs of transracial adoption, the challenge of transracial adoption

continues to remain. According to the Evan B. Donaldson Adoption Institute (2008),

transracial adoption heightens the difficulties of feeling different in the family,

developing positive racial identity and learning to cope with discrimination. In addition,

Goldberg et al. (2012) found that even though adoptive parents also experience variety of

challenges, homosexual couples, especially, are concerned about placement disruptions

from sexual orientation discrimination.

Importance to Social Work

The literature revealed difficulties adoptive parents experience with the child welfare system. The research allows social workers to evaluate the quality of services being provided and to understand the great need for support even after the adoption has been finalized. The field of social work will benefit from a cost-effective and efficient program by using groups to provide a more comprehensive service to assist the clients. According to policy statements issued by the National Association of Social Workers (2012), post adoptive services should be extended to adoptive families beyond the legal adoption consummation.

CHAPTER 2

LITERATURE REVIEW

<u>History of Adoption</u>

In the history of the United States, the purpose of adoptions has evolved for various reasons. In the 19th century, family members lived apart not only because of economic reasons but in order to train children to be independent and skilled (Brodzinsky & Pertman, 2011). The most common purpose for parents sending their children away was for apprenticeships and skills training. Even though well-intended, this particular parenting style left many children in danger for their safety and when many children fled from their apprenticeships, they became homeless. According to Brodzinsky and Pertman, some fortunate children who were orphaned or abandoned found permanency through informal adoption arrangements made by relatives or acquaintances. Numerous children continued to remain homeless without permanent caretakers during this historical period, which prompted an increase in orphanages. The orphanages were religiously affiliated and provided only the basic necessities to homeless children. The purpose evolved to provide safety, permanency, and well-being for all children.

<u>Laws and Regulations in Adoption</u>

As the purpose of adoption evolved, Congress passed various laws to respond accordingly to the societal trends. In 1851, the first adoption law known as the 1851

Adoption of Children Act was passed in Massachusetts (Bussiere, 1998). The law, for

the first time, gave power to the judges to determine whether the adoptive parents were

suitable to meet educational needs and provide nurturing care for the children. However,

the law jeopardized the safety of children under each judge's personal discretion rather

than following a concrete formal guideline for consistency. Then in 1968, the Child

Welfare League of America granted permission for unmarried adults to adopt (Hansen,

2008). The new perspective slowly allowed the government to modify restrictions on

prospective adoptive parents, such as marital status, income, race and more.

One of the first regulating adoption laws, the Indian Child Welfare Act (ICWA),

was enacted in 1978 as a response to a high percentage of Indian detention. The ICWA

allowed tribal jurisdiction for Native American children to protect and promote the best

interest of Indian children and their families. The concept of "best interest of the child"

was initiated by the ICWA when Congress realized the importance of cultural and social

factors in the families. The Act respected the cultural belief that Indian children, if raised

in an American home, would inherit evil spirits. Therefore, the ICWA provides

minimum regulation in removing an Indian child and aims to place removed Indian

children in Indian foster homes, which reflect values of Indian cultures. These landmark

legislations helped to define the nature of child welfare services and adoptions in the

United States (Mallon & Hess, 2014). In 1993, 66 countries signed a multilateral treaty

on universal standards on intercountry adoptions to protect the rights of children, birth

and adoptive parents at the Hague Convention on Intercountry Adoption.

The Adoption Assistance and Child Welfare Act (AACWA) in 1980 was

significant in creating a policy framework model for foster care (Allen & Bissell, 2004).

The AACWA ensured to protect children from entering the foster care system and aimed

to reunify foster children with their biological families. The social services workers were

mandated to show reasonable efforts to meet the goals of the AACWA. The policy,

ultimately, provided federal funding to continue foster care services but also provided

financial incentives to foster families to promote permanency and adoption. Even with

the AACWA, foster children, especially children of color, experienced delays in finding

permanency (Bussiere, 1998). Congress passed a policy regarding transracial placements

called the Multi-Ethnic Placement Act (MEPA) in 1994 in response to the delays in

placements. The previous regulation facilitated adoption between same race foster child

and prospective foster or adoptive parents, which created a visible discrepancy in the

representation in the public system between White children and African American

children (McRoy & Griffin, 2012). The study discussed that same race adoption has

always been a preference among agencies but when placing children in prospective

homes, race, ethnicity, and color became an obstacle in achieving permanency especially

for children of color. By passing the MEPA, the law attempted to address three major

concerns: length of time children waited to be adopted, recruitment of families, and

prevention of discrimination (Johnson et al., 2013). Mainly, the MEPA prohibited

placement denials based solely on race, color, or national origins but continued to

maintain cultural and ethnic backgrounds in consideration when placing children (McRoy

& Griffin, 2012). Johnson et al. (2013) also described the MEPA as a response to limited

placement options with the increase in the number of foster children and with the pressure to place the children in a short time frame. Lastly, the MEPA aimed to recruit more foster and adoptive families in order to proportionately reflect the racial diversity of children under the state care.

Then, the Adoption and Safe Families Act (ASFA) of 1997 was introduced to encourage adoptions and, again, to shorten the length of children's waiting time. The act believed in permanency through quick parental termination and promoted adoptions through increased financial incentives (United Nations, 2009). According to Allen and Bissell (2004) the ASFA made the following changes in the foster care system: expedited decision making process, prioritized safety, clarified reasonable efforts definition, eliminated long-term foster care, formalized kinship care, increased financial incentives, provided more support services, and emphasized measurable outcomes. In conclusion, the implementation of the MEPA in 1994 and the ASFA in 1997 showed improved results with the decrease in the amount of time children spent in the public system from 48 months in 1998 to 38 months in 2005 (Maza, 2007).

Over decades, perspectives on adoption evolved from expecting adoptive parents to be a two parent heterosexual couple to being transracial or homosexual couples or single parents. Many stereotype that homosexual couples do not want children but Gates, Badgett, Macomber, and Chambers (2007) found that 41% lesbian and 52% gay couples stated their desire to rear children. Also, the researchers reported 1 in 3 lesbian and 1 in 6 gay individuals were already raising children in the United States. The concept of adoption is becoming more popular within the homosexual community but remains

controversial in the broader society. Some states continue to prohibit the consummation of two individuals solely because of their sexual orientation. Florida has been a state known for its opposed stance on same sex adoption until the people appealed the government three times for its unconstitutional regulation (Brodzinsky & Pertman, 2011). Currently in the United States, more than 4% of adopted children are being raised under homosexual adoptive parents (Gates et al., 2007). With continual increase in the number of adoptions in both traditional and nontraditional adoptive parent context, the focus is on the well-being of the family as a whole.

<p align="center">Theoretical Implication</p>

The family life cycle helps understand the development of an adoptive family using the frameworks of generalized family life transitions and normative behaviors for each transitional period. According to Nichols (2013), the first component of the model is that families need to adjust to the growth process of a family member; second, the development of a family member may impact one or all of the other family members. The stages follow a cycle: leaving home as single adults, joining of families through marriage, having young children, having adolescents, launching children, and experiencing family at a later life phase. The adoptive families most likely have difficulties in adjusting to families with young children or families with adolescents stage. The families with young children are challenged with accepting the new family member as parents and grandparents make adjustments to their family and marital system. In alignment with the findings of Goldberg, Kinkler, Moyer, and Weber (2014), the relationship of parents are also challenged while redefining roles of each parent and

consenting to the division of the roles. Nichols (2013) states that problems occur when families encounter an environmental change and families are unable to cope with the change. The author recognized that families resist unfamiliar changes at first until their problems are normalized and secured. Also, these changes are not smooth nor the same for all families, but the commonality lies in the discontinuous transition that is difficult regardless of the various forms of families.

The stress and coping model complements the family life cycle model by incorporating various domains of functioning among individual, dyadic, and family in adjustment and readjustment periods (Pinderhughes, 1996). Stress and coping theory relates a meaningful life situation with stressful emotions when a loss or a threat is imposed (Brodzinsky, Smith, & Brodzinsky, 1998). The stress and coping model of adoption adjustment associates the transitional period with loss and stigmas for the family. According to the authors, prospective adoptive parents must seek help and rely on their social network during difficulties in the adoption process. The decision to adopt and finalization of adoption is followed by great stress, even though adoptive parents are able to handle the stress at most times (Senecky, Agassi, Inbar, Horesh, & Diamond, Bergman, & Apterm, 2009). As advised in the study, adoptive mothers were observed to be just as prone to postpartum depression as biological mothers. The adjustment period begins prior to the actual adoption for adoptive parents (Brodzinsky et al., 1998). Prior to making the decision to adopt, many prospective adoptive parents struggle with infertility. Then once the adoption is finalized, the adoptive parents adjust with integrating a new family member and defining new roles in the family. The adjustment and readjustment

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phases of the stress and coping model continue in the lives of adoptive parents and adopted children for a lifetime as both sides experience each stage of the family life cycle.

<center>Protective Factors</center>

A study by Wind, Brooks, and Barth (2007) validated the importance of support services for the adoptive parents, regardless of the low utilization rate. The data of adoptive parents were gathered from the California Long-Range Adoption Study. The study measured pre-adoption risk, pre-adoption preparation, and post-adoption service on two-, four-, and eight-year timeline. The post-adoption services referred to general services, including but not limited to individual therapy, family therapy, and crisis interventions. The final number of participants totaled 560 adoptive parents, which proportionally represented both male and female participants. The results of the study discovered that, on average, participants reported using five different preparations prior to adoption. The first measurement of pre-adoption risks measured the risks of adoption by asking about environmental and behavioral problems. Then, pre-adoption preparation surveyed the types of services used prior to adoption in areas of general, biological, and behavioral concerns. Lastly, the participants answered questions about types of post-adoption services utilized. Overall, the results yielded the increase in the post-adoption services, especially clinical services. The researchers found that understanding of the system and its complex process was linked to higher likelihood of post-adoption services. The pre-adoptive services were a resourceful tool, particularly for children with special needs and their parents. According to the study, the familiarity and reality of the

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adoption process is considered as a protective factor in the adoption process. The

adoptive parents who have children with biobehavioral risk were found to utilize the

post-adoption services the most in comparison to others in the survey.

A study by Sánchez-Sandoval and Palacios (2012) continues to discuss that

support services are a protective factor for adoptive parents. The participants of the study

consisted of 156 families who adopted domestically in southern parts of Spain. The

sample was recruited through the local adoption agency and the adoption workers

conducted home visits to interview the families. The study measured the background of

the adoptive parents, parental stress, parenting style, and parent's comparison to

normative families. The study first stated no significant difference in the stress scores

reported between mothers and fathers. Then it pointed out two characteristics and

circumstances that were stressful to adoptive parents. One characteristic of adoptions

that was found to be stressful was when adoptive parents simultaneously adopted

siblings, especially adolescents. Another predictor was how adoptive parents perceived

their differences and similarities in comparison to non-adoptive families. The greater

parents rated their differences, the higher they scored on the stress level indicator. The

study referenced findings from Viana and Welsh's (2010) study that found pre-exposure

to family expectations and reality significantly influenced the stress of adoptive parents.

The study validates the stress model experienced by adoptive parents but points to

support and resources as a protective factor, especially for adoptive parents who perceive

adoptive parenting greatly different than non-adoptive parenting.

Adoptive parents are at risk of environmental instability, which places children at risk of caregiver instability with various factors contributing to the risk (Proctor et al., 2011). A total of 285 children from Southwestern site of Longitudinal Studies of Child Abuse and Neglect was sampled to study factors that contribute to concerns of instability for children and for adoptive parents. Proctor et al. defined caregiver stability according to the changes in primary caregiver for children who range from six to eight. The statistics from the sample indicated that one out of seven children in the foster system experienced caregiver instability. In 2012, 399,546 children in United States were removed by child protective workers and were placed in the care of the state (Administration for Children, Youth and Families, 2013). The large scale of the problem required scrutinizing observations to find various ways to improve the problem. The study (Proctor et al., 2011) measured stability with the following predictors: placement permanency, neighborhood environment, caregiving atmosphere, and child characteristics. The results of the study reported that adoption provides the most permanent placement, but an involved father figure was another significant predictor. Marsiglio, Amato, Day, and Lamb (2000) also recognized the importance of father-child relationships as it can be a protective factor in achieving permanency.

<u>Risk Factors for Adoptive Parents</u>

Goldberg et al. (2012) identified difficulties heterosexual and same-sex couples experience when adopting through the child welfare system. The study consisted of 42 couples: 17 lesbian, 13 gay, and 12 heterosexual couples who had adopted a child within three to four months prior to the interview. One of the greatest challenges Goldberg et

al.'s respondents reported was that children and older youth had experienced heavy emotional stress that was often linked to behavioral problems. The couples were asked to complete a packet of questionnaires in addition to an hour-long phone interview. The researchers noted legal aspects, social service agency, and birth family contact to be the three overlapping challenges experienced by all participants. Many foster children had varying degrees of legal issues pertaining to the adoption, which led to feelings of legal insecurities by the prospective adoptive parents. Also, the disorganization of the child welfare system along with the lack of support services increased the stress level for the parents. Lastly, couples noted the difficulty of navigating through the birth family challenges, especially the visits with birth family members. In the midst of these stress factors, the adoptive parents commented on the discontinuation of support services in the pre- and post-adoption stages by phrasing it as feeling abandoned.

Goldberg et al. (2014) further researched on the relationship changes of the family dynamic as the couple transitions to a family. The qualitative study consisted of 42 couples from their earlier research. The median age of the sample was approximately 38 years old and 86% of the couples were White. The data were based on telephone interview questions that focused on transitions into parenthood, especially on the relationship of the couple. The first finding was the shift in the couples' management of time and energy with the placement of the child. The couples commented on the decreased amount of couple time they experienced while their energy was spent primarily on the child. The second finding indicated a shift in the family roles as one parent took the responsibility of the primary parent, who disciplined, while the other parent

automatically assumed the responsibilities as a fun secondary parent. The different parental roles created resentment between the couple, especially with the primary parents, resulting in frequent conflicts. Also, another contributing factor to conflicts was a difference in parenting styles between the couple. Lastly, the child's misbehavior was a significant challenge in the family relationships. Some participants mentioned that the benefit of the struggle was that it strengthened the marriage. Many of the families received therapy for the child, parents, or both, or attended support groups. All who participated in therapy or support groups discussed the benefit of the support services as they normalized the challenges and corrected skewed understandings.

A risk factor, according to Senecky et al. (2009), was that adoptive mothers are prone to postpartum depression as likely as biological mothers. The study sampled 39 women whose ages ranged from 27 to 54. The sample was referred by various local adoption agencies. The participants were surveyed pre- and post-tests using the standard measurements: the Beck Depression Inventory (BDI), the Brief Symptom Inventory (BSI), and the Edinburg Postnatal Depression Scale (EPDS). The post-survey, which was conducted 6 weeks after the adoption, showed that rather than income, other factors such as lack of preparedness of the adoption, coping with infertility, differences in race and culture, and reactions by others were bigger contributors to the depression. People expected adoptive parents to easily transition into parenthood without providing proper support and knowledge. The study demonstrated the similarities in the extent of difficulties adoptive mothers and biological mothers experience.

In addition to previously reviewed studies (Goldberg et al., 2014; Senecky et al., 2009) McKay, Ross, and Goldberg (2010) reiterates the vulnerability that occurs in adoptive parenthood. The study followed the systematic research synthesis (SRS) procedure, which analyzed the pre-existing data of articles in a specific area of interest. Some of the keywords used to sort through the articles between 1990 and 2009 were various forms of the following words: adoption, parents, adoptive parent, depression, psychopathology, relationship, health, stress, and more. The search noted the scarcity of research done among adoptive parents, therefore, gathered only about 11 articles for the study. One of the common findings from the studies was that even though reported stress score is lower than biological parent, depression is commonly diagnosed among post-adoptive mothers. The study further revealed that many adoptive parents struggle with mental health problems, which impacts their parenting. The mental health problems are seen to greatly influence adoptive parents in their transition into parenthood. These early signs of mental health problems are strongly encouraged to be addressed by service providers to ensure stability and safety of adopted children.

The growth of transracial adoptions shifted the focus onto realities and issues of transracial adoptive parents. Samuels (2009) studied 25 adult Black-White multiracials to explore three main areas transracially adopted children experience. The sample was provided from the findings in Extended Case Method (ECM), which is an ecological case study to further concepts and theories. The participants were interviewed about their adoption stories, biological and adoptive parents, and their childhood environments. The three explored areas were: absence of racial resemblance, discordance in parent-child

race, and perceptions of multiracial family. The absence was observed by the communities the participants grew up in, which were predominantly White communities. The participants reported that multiracial interaction experiences were scarce and expressed desire to have had people who they could physically relate to. Resemblances, especially in family settings, provide opportunities to validate our self, to find family belonging, and to verify our existence (March, 2000). In some families, the absence of racial resemblance signified racial blindness, which resulted in the absence of racism discussion in the family. Second area of focus on the discordance of parent-child race found that the discordance led to parents instructing children to dismiss racism, if not, they passively dealt with it. The colorblindness of parents ultimately left the adopted children to navigate the racialized society on their own. Many participants vocalized gains growing up in predominantly White communities, but the loss was in the racial disconnection in knowing themselves and the limited access to experience of race due to stigmatization. Lastly, perceptions of multiracial family from the society greatly influenced the growing up experiences of the participants. The societal perceptions shaped the understanding of race in their adoption story, which also impacted their racial functioning in adulthood. In conclusion, the study reinforces the difficulties of multiracial persons finding a sense of belonging in a highly racialized community. The complex experiences of transracially adopted children emphasize the need of racial knowledge and awareness in adoptive parents to provide a multiracial socialization. The lack of support and guidance for transracially adopted children may lead to intrafamilial racism (Miranda, 2004) and become a barrier in defining their identity.

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Needs of Adoptive Parents

Adoptive families have a set of needs that specifically pertain to their concerns and struggles. Atkinson and Gonet (2007) studied 500 hour-long telephone responses from 460 adoptive families to examine the experiences of adoptive families. The study aimed to expose the variety of challenges and the needs of families in the process of adoption. The families were recruited through the Virginia Adoptive Family Preservation Program (AFP), which is a program that provides a system of services to support and preserve adoptive families. The services include case management, crisis intervention, and parent and children support groups. According to the study, AFP families sought services due to 60% behavior problems, 38% adoption issues, 27% attachment issues, and 8% social adjustment. When adoptive parents were asked about the most helpful service, parents cited support in general, which mainly referred to parent support groups. Parents expressed their desire for continuing education of the system, useful resources to be better parents, and affirmation in their stages of adjustment. Also, researchers reiterated that quotes from the parents validate the need for continuous emotional and informational support after finalization of adoption.

Adoptive parents need support as children with history of abuse and neglect are at risk for displaying more intense emotional and behavioral problems (Atkinson & Gonet, 2007; Rushton, Mayes, Dance, & Quinton, 2010). According to McDonald, Propp, and Murphy (2000), adoptive children are linked with various characteristics that often may lead to disruptions. The disruption rate is higher among children who are older since the likelihood of abuse and neglect increase with age (McDonald et al., 2000). The study

was conducted to better understand adoptive families in order to provide more comprehensive support services. The sample size of 309 adoptive families was collected from the 1995 Kansas adoption data file. An initial survey was mailed to the adoptive families followed by a phone interview. The questions aimed to hear about the adoption process and the experience from the parent's perspective. The majority of the parents indicated positively about the adoption experience and noted the positive contribution the adopted child had on the family. However, parents indicated negatively on social support system category and the legal process of adoption. The parents voiced that the most needed services during the adoption process were support or self-help groups but none were offered. The study implies that even though adoptive parents reported positively about adopting a child, the parents need support in order to support permanency.

Dhami, Mandel, and Sothmann (2007) evaluated post-adoption services to review various needs and usage of the services by adoptive parents. The evaluations of post-adoption services were provided by the Adoption Support Program (ASP) from Children's Health B.C. located in Canada. The program began in 1989 and has offered counseling, support groups, respite care, and more to over 300 families. A mail survey and a follow up telephone survey were distributed to the sample of 211 families who were previous participants of ASP post-adoption services. The study indicated that the majority of adoptive parents expressed a need for post-adoption support services. Statistics showed 57% of parents expressed a need for post-adoption services after a stressful event and 45% expressed a need for post-adoption services immediately after adoption finalization. Other times for post-adoption service needs were when adoptive

parents were preparing for adoption process, when adopted child started attending school, and became a teenager. Lastly, the researchers commented that low usage of the services occurs due to various factors rather than adoptive parents not needing the support. Such factors can be lack of knowledge or availability, inconvenience in time and location, choosing alternative resources, and employing only as a reactive solution. Overall, the evaluations of post-adoption services illustrated the need for positive ratings of helpfulness and satisfaction.

Multiple researches over the years validate the need of support for adoptive families. Rushton et al. (2010) recruited 156 families who adopted children along with their adoption social worker to question the child's behavior and to complete a Strength and Difficulties Questionnaire survey. The survey measured psychosocial problems of adopted children in areas including emotions, behavior, concentration, peer relationship, and pro-social behaviors. A total of 37 completed the survey and participated in the parenting interventions. Both interventions—cognitive behavioral approach and educational approach—aimed to provide the child with a more positive and consistent environment. The cognitive behavioral approach consisted of rewards for positive behaviors and ignorance for negative behaviors. The educational approach educated the parents of triggers and meaning of children's behaviors. The findings showed high satisfaction with both interventions even though no significant differences appeared in the child's psychosocial problems. The adoptive parents understood the capacity of children's behavior and provided a base for future problems. The result of high satisfaction level despite insignificant change in the child's problematic behaviors

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proposes that adoptive parents appreciate even the simple provision of resources and support regardless of outcomes.

Effectiveness of Support Groups

With the increase in adoption, the likelihood of disruptions and dissolution of adoptions increases as well (Coakley & Berrick, 2008). Bryan et al. (2010) evaluated a program called Adoption Support for Kentucky (ASK), which provided adoptive parent support groups facilitated by an adoptive parent. The group provided mentoring, policy education, training, and other resources that pertained to adoptions. The study aimed to find significance in the effectiveness of the program and to interview the adoptive parents' perception of the program. From total of 32 ASK groups throughout the state, the study surveyed six groups from diverse geographical areas. Notably, parents who adopted from the child welfare system represented the highest enrollment response. Bryan et al. found that 206 of 231 respondents agreed that a safe place to discuss personal struggles were beneficial. It showed that adoptive parents primarily attended the group for social support, which demonstrated the high need for guidance and support among adoptive families. The support group was as a stabilizer for many families, as half of the participants admitted that adoption processes were more difficult than expected and prevented parents from choosing to disrupt or dissolve from finalizing the process.

To analyze the effectiveness of adoptive support services, Henderson and Sargent (2005) studied the development of parenting program specific for adoptive parents in United Kingdom. The program branched from an existing package called the Incredible Years and four points of Incredible Years program was implemented at the Coram

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Family Center. Adoptive parents with children ranging from 3-8 year old were mainly

recruited through the Coram's Adoption Service but few were referred from other local

agencies. A total of 42 adoptive parents started the program and 35 parents completed

the program. To measure the effectiveness of such programs, a pre-test using the

Parenting Stress Index and a post-test using the Strength and Difficulties Questionnaire

were used in the surveys. The study supported the findings from other studies that

behaviors of adopted children present a considerable challenge, which contributes to

adoptive parents' stress score (Atkinson & Gonet, 2007; Goldberg et al., 2014;

McDonald et al., 2000; Rushton et al., 2010). The researchers found significant statistics

on adoptive parents' stress as being correlated with the adopted child's characteristic. A

significant number of adoptive parents reported an increase in their confidence level as

well as more positively reinforcing the children. Even though the decrease of the

parents' stress level was not scientifically significant, the contributors of stress noticeably

decreased. An unexpected finding from Henderson and Sargent was that the group had

taken an unintentional role as a support group. The adoptive parents expressed loneliness

in that non-adoptive families are not able to fully comprehend their struggles. The

decrease in the parents' stress level through educational group and finding support helps

the adoptive parents not only in their emotional health but in providing proper care for

the adopted children.

CHAPTER 3

METHODOLOGY

<u>Target Population</u>

The target population for the grant is parents who adopted children from the public welfare system, specifically within the Los Angeles County. Adoptive parents can include single parents, same-sex couples, and heterosexual couples. The grant intends to serve those who are in need of support services upon completion of their adoption process. Since the support services intend for parents who have adopted through the welfare system, the target population will be accessed through the welfare system and partnering non-profit agency, Olive Crest. The goal of the grant was to decrease the number of disruptions and dissolutions and to relieve the burdens the adoptive parents experience through the process by providing support groups.

<u>Needs Assessment</u>

Information needed for the grant was obtained through the Los Angeles Child Welfare website, U.S. Children's Bureau, and California Child Welfare Indicators Project. According to the Administration of Children, Youth and Families (2013a), children placed in foster care system estimated 638,000, of which 101,666 were waiting to be adopted. The literature reviewed indicated the need for continual support services after the adoption process in order to ease transitioning and to prevent dissolutions. To

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assess the need for the program, further data were collected through current and past literature and internet research.

<center>Identification of Potential Funding Source</center>

Finding an appropriate funding source is an essential part of a successful grant process. An appropriate funding source will not only allow provision of resources and services to meet the observed inadequacies of the community but also contribute to the well-being of the community by meeting their supportive needs. The most helpful technique used to find the appropriate funding source was an internet search by utilizing the directory of foundations and organizations. The comprehensive directory of potential sources was provided by the grant advisor. Within the directory, the first set of keywords used were "foundation" and "trust" to distinguish funders and organizations. The first filter resulted in a handful number, which was easier when needed to do further in depth search. In addition to the assistance of the directory, extended internet search was done by referring to previous grants similar to the proposed support group. The Google search engine was used for majority of the internet based search.

The key consultant during the process of funder search was the grant writing advisor. The advisor provided the extensive list of potential funding sources and helped with other potential source suggestions. Through the extensive search, the following potential funding sources were identified: W.K. Kellogg Foundation, Ford Foundation, Annie E. Casey Foundation, May & Stanley Smith Charitable Trust and Stuart Foundation.

Criteria for Selection of Actual Grant

The Stuart Foundation specifically targets vulnerable youth in the welfare system to build up self-sustaining and responsible members in the community, particularly in Washington and California (Stuart Foundation, n.d.). Partnering with the child welfare agencies, the foundation contributed to services and resources for foster families to promote long-term care. After reviewing the potential funding sources, the Stuart Foundation best aligned with the purpose and goals of the proposed grant. One of the four stated values of the foundation is congruent with the values of the grant, in which that children need a lifelong connection to a caring, committed adult. The foundation, also, values to aspire for the foster youth as they are our own children, especially by providing educational opportunities to succeed. Lastly, the foundation believes extraordinary results are the outcomes of authentic partnerships. The authentic partnership of the proposed grant and the foundation hope for an exceptional outcome to support the adoption process of foster youth.

The Stuart Foundation is currently located in San Francisco, California. The foundation supports organizations that aim to develop innovative programs, improve public policies, or support the development of youth. Once the Foundation has partnered with an organization, the partnership tends to last more than a year.

Description of Funding Source and Submission Process

The Stuart Foundation (n.d.) was formed in 1985 as Elbridge Stuart Foundation, Elbridge and Mary Stuart Foundation, and Mary Horner Stuart Foundation merged into one joint foundation. The series of family foundations initially began independently as

Elbridge A. Stuart Foundation was established by the father, Elbridge and Mary Stuart Foundation jointly by father and mother, and Mary Horner Stuart by the son. The three foundations came together to focus on the education, development and protection of children and youth. The historical record shows that the foundation has donated over 250 million dollars, especially to those who are in foster care and are struggling economically. Funding amount varies by proposed grant but in 2012, Stuart Foundation supported various grants with about 20 million dollars. The foundation has previously granted more than 13 grants for permanency, 6 grants for safety, and 20 grants for well-being oriented programs. One of the grants in 2011 funded 50,000 dollars to support the Caregiver Center, which was organized by the Grandparents as Parents, Inc., to service kinship families with peer counseling and other supportive resources. Another previously funded program facilitated by California Community Foundation in 2010 aimed to improve integration of services, build knowledge of early child development in practice, and increase access to and utilization of support services for children and their caregivers. The Stuart Foundation funded 25,000 dollars to implement the program. In addition, both programs were based in Los Angeles, California.

The eligibility is determined by the alignment of the foundation's goals and objectives and the foundation does not support individuals or donate to capital campaigns. The potential grant seeker will review that the grant reflects values of the foundation. Then the grant applicator will submit a detailed information in the letter of inquiry. The forms and application packet are available for the public on web. Then the

foundation will respond within 60 day period to either request for a proposal or reject the

offer. The final step involves the determination of grant based on the proposal.

CHAPTER 4

GRANT PROPOSAL

<u>Problem Statement</u>

A study found that out of 10 developed countries, United States was the only country to show a decrease in the number of children in the out-of-home care mainly due to increase in adoptions in the past 10-15 years (Smith, 2014). However, the lack of comprehensive support services and intervention often lead to disruption and even dissolution of an adoption process. Both events result in the child's return to either a foster care or a new adoptive placement. A report found that disruption rate ranges between 10 to 25% per year in United States with higher rate among adoptions of older children (Child Welfare Information Gateway, 2012). The report listed lack of social support and unrealistic expectations to be some of the significant factors adoptive parent struggle with. According to Smith (2014), 46% of children adopted from foster care receive mental health services. Even though a substantial number of adopted children receive mental health services, the numbers and services do not proportionally reflect in the utilization of mental health services for the adoptive parents. Though only a 1 to 5% of adoptions dissolve, statistics show continuous occurrence of dissolutions every year. There is limited understanding of reasons for dissolutions but one study showed that 27% of middle school aged foster children had not formed a healthy attached

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relationship with a parent even after a year of placement (Rushton, Mayes, Dance, & Quinton, 2003). The study attributed the lack of attachment to increased behavioral problems that contributes to the main cause of disruption and dissolution, especially when adoptive parents are not prepared or supported to respond to such behavioral problems. Also, Brown (2005) found significance in how familial environment is correlated to risk and protective factors for children.

<div align="center">Description of Project</div>

To increase the successes in finalizing and maintaining adoptions, the support group will aim to provide support and education to decrease the number of dissolutions and disruptions. The program will be composed of 12, 1 ½ hour weekly psycho educational parent support group sessions with a maximum of 12 adoptive parents per rotation. The support group will provide the adoptive parents, those who have adopted a child of any age through the child welfare system, the tools to effectively parent the children in transition. The grant will allow the program to provide two rotations of recruiting, facilitating, and evaluating the support group. The group will be established on values based on the North American Council on Adoptable Children (NACAC) parent support group model. Through the use of support groups, adoptive parents will be able to validate one another's feelings, celebrate major events together, provide a space to share and suggest resources, identify and solve problems as a group, help each other understand the child's perspective, and reduce feelings of isolation during adjustment periods.

The adoptive parents will be referred through linkages with the child welfare agency or through the adoption agency as the adoption process is being finalized. The

sessions will be hosted through Olive Crest, at its Los Angeles, California office. The group will be open to all parents who adopted a child through the welfare system and share resources among group members. The program will provide childcare available for adoptive parents who are not able to find or afford childcare. The program will be available in English only. At the end of 12 weeks, the parents will receive a certificate to celebrate the completion and to symbolize their commitment as parents.

<div align="center">Program Results and Objectives</div>

The primary goal of the parent support group is to equip the adoptive parents with the knowledge and resources to not only decrease the number of dissolution and disruption but to prevent the revocation of adoptions. The group will aim to provide a place to vent frustrations, find mutual support, advocate for their needs, and share resources. The resources and support will assist adoptive parents in the process of building a life-long relationship with their adopted children.

Objective #1

The clinical therapist will provide psycho educational information for approximately 45 minutes of each group session. The adoptive parents will understand the stages of family life cycle and the changes involved at each life cycle, which allows the parents to predict the family dynamic changes that will occur with the transition of child placement.

Objective #2

The clinical therapist will provide an opportunity for parents to engage in mutual support and receive resources for approximately 30 minutes following the educational information.

Objective #3

The case manager will provide referrals to agencies and hotlines for intensive support (24 hour) to parents with significant challenges. The support group will provide adoptive parents with an emergency phone number list, which includes the police, child risk hotline, kid's net connection helpline, post adoption services helpline, and the agency that processed their adoption.

Structure

The group will be facilitated by the therapist and the case manager on a weekly basis from 7 p.m. to 8:30 p.m. in a space provided by the Olive Crest Agency. The support group will begin with a discussion on confidentiality and group rules and expectations. The 12 sessions will be modeled after the North American Council on Adoptable Children Conference workshops. The director and the therapist will be required to attend the conference as part of training for the program, which will allow them to facilitate discussions regarding the emotional cycle adoption experience. The sessions will include: coaching parents to support grieving process of children, developing trusting relationship, learning innovative changes for permanency, addressing controversies of transracial adoptions, informing trauma-related adoptions, empowering the family, providing legal advice, and engaging in mutual support.

<u>Program Evaluation</u>

At the end of each program implementation, the support group program will be evaluated by the participants. The overall evaluation of the program will be modeled after, the ASK Program Survey using the 5 point Likert Scale and open ended questions (Bryan et al., 2010). The evaluation will contain multiple questions regarding motivation for joining support group, gained benefits from attending parent support group, barriers to participation or attending, satisfaction level, recommendations for future implementations. The questions will be used to better understand the motivation for participant's attendance and measure the effectiveness of support program. The open-ended questions will allow participants to elaborate on their experiences in the program. In addition to the ASK Program Evaluation Items, the Incredible Years parent group peer and self-evaluation will be administered to further review the leadership skills of the facilitator in facilitating psycho educational and support services (Bryan et al., 2010). The sessions will be documented weekly by the facilitator along with the receipts of all referrals provided for end of the group evaluation. The findings and the results from both evaluation tools will enhance the implementations of future support groups.

<u>Timeline</u>

<u>Months 1 - 3</u>:

Olive Crest Agency will announce the job opening internally and will interview and assign the Program Director.

Olive Crest Agency and the Program Director will recruit and fill open positions internally assign the following positions: therapist and case manager.

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The Program Director will orient the team about the target population and the goals and objectives of the support group.

The therapist and the case manager will connect with local agencies for resources and recruit parents.

Months 4 - 7

The therapist and the case manager will perform an initial assessment on all participants of first rotation.

The Parent Support group will be implemented.

The therapist and case manager will evaluate the implementation of the program through interviews and surveys.

The surveys will be analyzed by the Program Director along with the Olive Crest Agency.

Months 8 - 12

The therapist and the case manager will perform an initial assessment on all participants of second rotation.

The Parent Support group will be implemented.

The therapist and case manager will evaluate the implementation of the program through interviews and surveys.

The surveys will be analyzed by the Program Director along with the Olive Crest Agency.

The program will be composed of three key employees: program director, therapist, and case manager. The program director will be a licensed clinical social worker with at least three years of managerial experience in program development. The program director will oversee the support group program and will be a liaison between the program staff and other leadership figures in the Olive Crest Agency. The program director will also be responsible for attending conferences and trainings to keep staff updated with current resources.

The therapist will have a Masters in Social Work with at least two years of paid work experience. The main responsibility of the therapist will be to plan and facilitate group sessions for 12 weeks. However, the therapist will provide any individual crisis counseling on as needed basis for the program participants. The experiences in leading support groups and ample knowledge in adoption processes will allow the therapist to be competent. The therapist will, also, accompany the director in the annual North American Council on Adoptable Children conference to learn about the trends of adoption disruption and successes.

The case manager will have a bachelor's degree in Social Work or related field with at least a year of related work experience. The case manager will co-facilitate group sessions with the therapist and will provide case management services to the clients. Also as a co-facilitator, the case manager will be responsible for recording attendance, group notes, and referral sources. The case manager will be responsible for providing the participants with resources and continue building alliances with local

resource agencies. The therapist and case manager will both lead the evaluation and recruit potential participants for the program.

Two child care workers will be employed to provide child care for adoptive parents who are unable to find adequate substitute for child care during the support group. The preferred qualification of a child care worker is a bachelor's degree in early childhood or related field. The child care worker must, however, need to take four required classes: development in early childhood, young child in the family and community, instructor to teaching young children, and curriculum development and classroom management.

Budget

See Appendix.

Budget Narrative

Personnel

Program Director: The expense will be to hire a part-time program director to oversee the adoptive parent support group program. The position will be hired internally, which allows the director to allocate only a portion of their time to the program. A Masters in Social Work professional will earn a salary of 65,000 per year and spend 20%, which calculates to $13,000, of their employment for the parent support program. In addition, the director will earn benefits at 20% at calculated portion of salary. The expense during the year of implementation will be funded by the grant.

Therapist: The part-time (40% FTE) therapist will provide individual crisis counseling but mainly facilitate the support group. The therapist will a yearly salary of

$50,000 but 40%, which is $20,000, and benefits at 20% of the salary, $4,000, will be funded by the grant. The therapist will be a Masters in Social Work professional with experience in facilitating parent support groups. .

Case Manager: The case manager will have at least a bachelor's degree in social work or related fields and will be hired part-time (40% FTE), which calculates to $14,000, to co-facilitate the weekly support group and provide resources to the adoptive parents. The allocated portion of the time is used for assisting in facilitating the group and researching local resources for parents. The case manager will obtain benefits at 20% of the paid salary, which calculates to $2,800.

Child Care Workers: Two child care worker will at least have a high school diploma and four required classes to be qualified. The child care volunteer will be paid based on a hourly rate of $11 an hour to supervise the children of participating adoptive parents. The workers will be available 15 minutes before and after the group time for set up and cleanup. The total number of hours for one implementation of program is 24 hours, 2 hours per session for 12 sessions.

Operational Expenses

Rent: An approximation of $20,000 will be used to rent a space where the support groups will be held and the employees to be based in for a year. The rent expense will be provided by the Olive Crest agency since the space will be held at the Los Angeles office.

Utilities: An approximation of $15,000 will be spent on utilities to operate the groups for one year. The allocated expense will include any maintenance needs during

the year. The expense will be provided by the Olive Crest agency since the agency will

provide the meeting space as well.

Supplies: An approximation of $2,500 will be used to provide pens, paper,

learning materials, and other supplies needed to facilitate group. The cost will, also, be

used to print certificates to adoptive parents who attended majority of twelve

meetings. The expense is a total for both implementations and will be reimbursed by the

grant.

Equipment: Approximately $3,200 will be spent on three laptops, each laptop for

program director, therapist, and case manager. The expense will, also, include a fax and

copy machine for other administrative needs. The estimated equipment cost for the year

will be donated by the Olive Crest agency.

Training: The program director and the therapist will attend the North American

Council on Adoptable Children conference held in Southern California. The conference

costs $340 per person to attend for all three days. A total of $680 is allocated for both

staff members to attend and the attended staff members will share and educate the other

staff members.

Miscellaneous: Approximately $700 will be spent on providing refreshments such

as, coffee, tea, and finger snacks at each group meetings. The cost will, also, be used to

purchase motivating rewards, such as gift cards or educational books.

CHAPTER 5

ANALYSIS OF THE APPLICATION PROCESS

Identification of Need for Proposed Program

The need for proposed program was initially identified through a professional experience of the grant writer. The grant writer, while interning at the Department of Children and Family Services, encountered a case that involved dissolution of a completed adoption process and was given a privilege to interview the child about his experience. The experience was heartbreaking and through the interview, much of the consequences of dissolution was revealed. Consulting with the social worker of the case, the grant writer realized the need for adoptive parents to be educated in the behaviors of adopted children and the crucial need for the provision of support for adoptive parents for successful transition.

The needs of the program was then assessed through a comprehensive review of scholarly research articles. One of the barriers during the need assessment was finding current statistics that focused on the dissolution and disruption of the adoption processes, especially one that focused on Los Angeles County. The statistics provided by the state or other institutes categorized the foster youth population by age, ethnicity, adoptive parent characteristics, and other criteria but few were categorized by the rate of dissolution and disruptions. A comprehensive statistic report that maintained accuracy

despite multiple disruptions or dissolution occurrences on the same child were: California

Child Welfare Indicators Project (CCWIP) and Child Welfare Information Gateway. The

two institutes provided more accurate information and even narrowed statistics for Los

Angeles County.

The research articles demonstrated various types of challenges adoptive parents

struggle in appropriately coping during the transitional period and in parenting adopted

children. The research evidenced the effectiveness of support groups for adoptive parents

through finding support in parenting and in marriage, expressing difficulties in

transitioning, learning parenting skills, and networking resources.

<u>Grant Writing Process</u>

The grant writer learned that grant writing requires extensive research, planning,

and visioning of the program. The writer first identifies the problem through a

professional experience or research. The problem will need to be paired with a vision

that will formulate into a specific and needed program in order to receive funding. Also,

the program will only be effective and supported when the vision of the grant writer is

congruent to that of the supporting agency. Secondly, grant writer found empirical

evidence to prove a need for the proposed program. The research allowed grant writer to

strongly demonstrate not only a need but the effectiveness of the proposed support

program. The search was a time consuming and comprehensive process. Then, grant

writer conducted an internet based research in finding an appropriate funding

agency. The vision and goals of the program needed to align with the funding

agency. With literature proving a need and a potential funding agency, the grant writer

lists how the grant will be used for the program. The budget includes staff and supplies to run the program, which allows for the identified funding source to fully understand the financial request for the program.

Through the process of writing a grant, second step that aimed to prove a need for the program was the most challenging. The research was arduous and required cohesive reasoning to argue for the program. Since numerous service programs are proposed to various grant programs, grant writer realized strong literature review was crucial compete against other grant proposals. However, the grant writing process was a enjoyable learning process. The writer gained valuable knowledge of steps involved in grant writing that will assist in future professional social work practice.

<u>Location of Potential Funding Source</u>

Location of a funding source was selected based on the alignment of goals and vision of the program with the funding foundation. The process of finding potential sources was more difficult than expected due to various guidelines and eligibility criteria. The grant serves adoptive parents and adopted children, which seemed to be a popular population to fund. There were various foundations that supported adopted children in academics, mental health well-being and permanency but few considered the ecological perspective. Many foundations aimed to address the problem by providing educational assistance, mental health services, and mentorship. The difficulty was finding a funding source that was considerate of the environmental factor, such as the adoptive parents. A thorough review of the literature showed evidence that adoptive parents need support as much as adopted children in the process of transition.

The Stuart Foundation was carefully chosen after a review of their past funded

programs. The foundation funded millions of dollars to programs that partnered with

Department of Child Welfare Services to promote permanency by supporting kinship

families and foster communities. The grant applications are accepted throughout the year

and the acceptance to further the application process was granted after initial letter of

inquiry. With strong program goal alignment and a need for adoptive parent support

program, the grant proposal seemed highly qualified.

<u>Social Worker Implications</u>

Ryan, Nelson, and Siebert (2009) focused on the adoptive workers who provide

post adoption resources and services. The increase in the number of adoptions in the

United States inevitably yields more disruptions and increases the burden on professional

adoption workers (Coakley & Berrick, 2008). The stress and coping model have stated

the difficulties of adjustment for both the children and the adoptive parents and the

significance of post adoption services to ease the difficulties (Pinderhughes,

1995). Ryan, Neolson, and Siebert (2009) rationalized the importance of removing

barriers for adoptive families to access the services as competent service providers. The

study gathered 33 adoption professionals as the sample from Southern state agencies in

United States. The professional participants were assessed with a mail survey and were

then interviewed by telephone. The interview responses were organized by concept

mapping method where qualitative data set is converted into domains of concepts. to

analyze the interrelationships. The most common response to adoptive parents' barrier in

accessing services was funding limitation, followed by interstate issues and lack of

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services. Responses to the following question about ways to overcome the barriers suggested expanding financial supports and expanding adoption specific services. The study further discussed the unfair distribution of services where waiting times for certain services vary by geographic location. One of the recommendations mentioned in the study is the expansion of adoption specific services to meet the needs of adoptive parents.

APPENDIX

BUDGET

Line Item Budget

	One Year
Salaries and wages	
Paid Staff	$ 47,000
Program Director ($65,000 x 0.2 FTE)	$13,000
Therapist ($50,000 x 0.4 FTE)	$20,000
Case Manager ($35,000 x 0.4 FTE)	$14,000
Benefits	$ 9,400
Program Director ($13,000 x 0.20FTE)	$2,600
Therapist ($20,000 x 0.20FTE)	$4,000
Case Manager ($14,000 x 0.20FTE)	$2,800
Volunteers	$528
2 childcare volunteers x 18 hours @ $11/hour	
Other operating expenses	
Rent	$ 20,000 (In-kind)
Utilities	$ 12,000 (In-kind)
Supplies	$ 2,500
(Paper, pens, printing, publications)	(In-kind)
Equipment	$ 3,200
3 Lap tops	(In-kind)
Fax/copiers	
Training	$ 680
North American Council on Adoptable Children (2 attendees x $340/person)	
Travel Expenses	$40
(reimbursement @ 55 cent/mile)	
Miscellaneous	$ 700
(Refreshments, gift cards)	
Total in-kind donations acquired by Community Agency Partner	$ 38,200
Total Expenses for Community Agency Partner	$ 99,008
(including in-kind expenses acquired by Community Agency Partner)	
Actual Expenses for Community Agency Partner	$ 60,808
(excluding in-kind expenses provided by Community Agency Partner)	
Cost Efficiency: Cost per single implementation of intervention	$ 49,504
Cost Effectiveness: Cost per participant who completes the intervention	$ 4,125.33

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