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## Achieving Successful Adoptions

*Voices of Prospective and Current Adoptive Parents from the  
Wendy's Wonderful Kids Evaluation*

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Prepared by:



## **AUTHORS**

This brief was prepared by Raquel Ellis, Ph.D., formerly with Child Trends, now a Senior Study Director at Westat. Please direct questions and comments to Karin Malm at Child Trends ([kmalm@childtrends.org](mailto:kmalm@childtrends.org)).

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Pursuing an adoption of a child from foster care is a major decision that requires much patience, time, and motivation on the part of the prospective adoptive parents. The process can span a few months to several years or more. It can include completing extensive adoption application paperwork and a home study, being formally assessed by a committee to determine whether the prospective parents are the most appropriate match for a child, having pre-placement visits with the child, having the child placed in their home, and eventually attending an adoption finalization hearing.

Throughout the process, prospective adoptive parents are generally assisted by an adoption recruiter or caseworker. Ideally, any challenges that are encountered during the process are addressed by this worker, whose ultimate goal is not only to facilitate an appropriate match between a child in foster care and a permanent family, but also to ensure that the family successfully reaches adoption finalization.

Barriers and challenges associated with adopting children from foster care have been well-documented by previous research. However, much less is known about what helps to facilitate a *successful* adoption.

This brief summarizes previous research regarding barriers and facilitators to successful adoptions, and presents new data from the voices of prospective and current adoptive parents who received services from the Dave Thomas Foundation for Adoption's Wendy's Wonderful Kids (WWK) adoption recruitment program. As part of the evaluation of the program, Child Trends explored the views of current and prospective adoptive parents, who were interviewed about their experiences with the adoption process. (See textbox.)

### What previous research has shown

Past studies have documented a multitude of barriers to successful adoptions. In some instances, adoption staff themselves can serve as barriers to the process. For example, prospective adoptive families have reported experiencing difficulty obtaining assistance from staff when encountering challenges during the adoption process,

### WENDY'S WONDERFUL KIDS

Since its inception in 1992, the Dave Thomas Foundation for Adoption (DTFA) has aimed to increase the numbers of adoptions for children waiting in the U.S. foster care system. In 2004, DTFA launched the Wendy's Wonderful Kids (WWK) initiative to further this goal.

The WWK program is unique for several reasons, among them the fact that it represents a corporate philanthropic commitment to solving a social problem.

To support the program, Wendy's restaurants and their customers raise funds for DTFA, which in turn issues grants to local adoption organizations in the communities where the funds are raised. The agencies hire WWK adoption recruiters who spend 100 percent of their time finding permanent, loving families for children in their local foster care systems who are considered challenging to place in adoptive homes due to age, sibling group membership, or disability.

DTFA describes the WWK model of adoption recruitment as "child-focused," requiring WWK recruiters to focus exhaustively on an individual child's history, experiences, and needs in order to find an appropriate adoptive family.

The program has grown considerably since its inception, with 122 recruiters now in all 50 states and the District of Columbia, as well as in four Canadian provinces. For more information on DTFA and the WWK program, visit [davethomasfoundation.org/research](http://davethomasfoundation.org/research).

experiencing poor communication with adoption staff, and receiving insufficient information about the child they were trying to adopt (Geen, Malm & Katz, 2004; Reilly & Platz, 2003; Rodriguez & Meyer, 1990). Other barriers to successful adoptions described in past research involve program- or community-level factors, including culturally insensitive policies and practices, the length of the adoption process, inadequate parent training and preparation, and a lack of awareness and availability of community resources for adoptive families (Festinger & Pratt, 2003; Festinger, 2002; Geen, Malm & Katz, 2004; Hollingsworth, 2002; McRoy, 1999).

Among the few who have examined factors that may support or facilitate adoptions, Berry and Barth (1990) found that successful adoptions are associated with adequate adoption subsidies, foster parent adopters, the appropriateness of the adoptive parent's age in relation to the adopted child, and having other foster children in the home. Additionally, one study found that adoptive parents of children with special needs<sup>1</sup> identified their commitment to adopting that particular child, their effective parenting skills, having a strong supportive network, and their abilities to seek extra resources when needed as factors contributing to successful adoptions. Some parents also identified a number of program-level facilitators, including sufficient training, thorough and honest sharing of information about the child, good matching on the part of the agency, moral support and advocacy, and financial support. In contrast, 33 percent of parents that participated in the study reported that their adoption agency did not contribute to the success of their adoption (U.S. DHHS, 2007).

Although these previous studies provide valuable insights, it is apparent that additional research is needed to further explore these issues. More information is available in the **Evaluation Report Summary**.

### **Key barriers to achieving a successful adoption**

Of the parents who participated in the interviews, one in four reported that the adoption process ended prematurely. The

## **METHODOLOGY AND PARENT PARTICIPANTS**

Semi-structured telephone interviews were conducted with 101 prospective adoptive parents between June, 2009 and June, 2010. The parents were currently pursuing, or had previously pursued, an adoption of a child from WWK. To be eligible to participate in a 20-minute phone interview, each parent had to: 1) express interest to a WWK recruiter in potentially adopting a particular child or sibling group on the WWK caseload, and 2) have direct contact with the WWK recruiter on two or more occasions. Five eligible parents from the caseloads of each of the WWK recruiters were randomly selected to participate in a phone interview.

Telephone interviews were conducted with parents from 18 states and the District of Columbia over a 12-month period. The average age of the parents was 44 years old, and nearly two-thirds (63 percent) of the parents were married. The majority of participants identified as white (60 percent) or African American/black (31 percent).

The instrument included a range of questions related to the participants' experiences with their WWK recruiter. Data presented in this brief were derived from open-ended questions about how the recruiter assisted the parent through the adoption process, the types of barriers experienced during the adoption process and, where relevant, what led to the adoption process ending prematurely.

most common reasons that led to the decision not to continue with the adoption were the parents and/or child reporting that they were not well matched or that the placement had disrupted. Parents explained that the placement disruption or inappropriate match was mainly a result of experiencing one or more of the following barriers:

**Meeting the child's needs.** Some parents reported feeling unprepared to meet the intensive needs of the child or sibling group they were pursuing to adopt. A few parents noted that the children's sexually acting out behaviors led to significant concerns. Other parents reported feeling unable to meet the needs of the children in foster care due to the severity of the children's physical ailments. Lastly, changes in family circumstances led to parents no longer feeling able to care for the prospective adoptive children. For example, one parent reported that dealing with her own recent medical challenges hindered her from being able to continue to meet the intensive and ongoing health needs of the foster child in her care.

**KEY FINDING:**

Parents feel unable or unprepared to meet the child's needs.

Some parents also reported feeling unprepared to meet the needs of the child or sibling group they were pursuing to adopt because of the lack of information they received about the children's needs. A child's history and current needs are typically fully disclosed during the matching meeting or a subsequent meeting prior to a child being placed. Parents are also provided an opportunity to review all documents in the child's case file to further understand the child's history and current needs. However, some parents reported a lack of full disclosure of the emotional health or general history of a child in foster care prior to the child being placed in their home. For example, several parents reported that it was only after the children exhibited serious behavioral issues (such as fire starting or sexually acting out) in their home that child welfare staff disclosed that the children had exhibited these behaviors in the past. Further, a few parents reported that they were not provided an opportunity to review the full case file. Instead, they received a file with pages or entire sections missing.

**Integrating the child into the family.** Several parents reported having difficulty integrating the child into their families. Specifically, parents reported having difficulty meeting the needs of the child in addition to the needs of the existing children in their home. Also, parents reported finding it difficult to change their home environment and family routine for the child. For example, one parent reported having difficulty establishing ground rules with the child, which led the child to request to be removed from the home.

**KEY FINDING:**

Parents perceive a lack of supportive services in their community.

**Supportive community services.** Several parents reported a need for more community services, such as intensive in-home therapy, to assist them in stabilizing a child in their home. A few parents also noted the need for additional financial supports in order to meet the needs of the children placed in their homes. For example, one parent explained that many physicians in her community do not accept the Medicaid coverage that is provided to children who are adopted, which can lead to additional expenses for the adoptive parent or disruptions in services while the parent searches for another physician who provides the specialized medical services the child requires.

**KEY FINDING:**

Parents perceive a lack of supportive services in their community.

**Key facilitators to achieving a successful adoption**

The prospective adoptive parents who participated in the phone interviews were asked about ways in which their WWK recruiter was helpful as they navigated through the different stages in the adoption process. Many parents, particularly those who had reached the pre-adoptive placement or adoption finalization stage, expressed a number of individual and program-level facilitators to successful navigation through the adoption process.

**Individual-level facilitators**

Many parents described recruiter-specific characteristics as facilitators to their success in moving through the adoption process. One of the most common characteristics reported by parents as being helpful was a recruiter being *personable* or “down to earth.” Another characteristic that was perceived as helpful was the emotional support the recruiters provided to the parents as they assisted with challenges throughout the adoption process. The recruiters’ support was demonstrated through their pep talks with the parents, their ability to serve as a “sounding board” for the parents, their ability to express empathy toward the parents, and their attempts to always bring a positive outlook to a situation.

**KEY FINDING:**

Being personable, emotionally supportive, dedicated, and available are helpful recruiter characteristics.

Several parents also reported appreciating the moral support that recruiters provided to them through their attendance at adoption finalization proceedings and post-finalization family celebrations. Many parents also described their recruiters as dedicated to their work, doing whatever it took to facilitate the adoption process. For example, some parents (including those seeking out-of-state adoptions) reported that the recruiter helped to arrange or facilitate visits between the prospective adoptive parent and the child and/or transported children to local visits. Finally, several parents described recruiters as being *available* or accessible to the parents when they were in need.

**Program-level facilitators**

In describing the assistance they received from the WWK program and recruiter, parents also highlighted a number of service-level facilitators to navigating the adoption process and successfully reaching adoption finalization. WWK recruiters were described as playing important roles in advocating for families, providing helpful information and referrals to services, and providing crisis intervention as needed.

**Advocacy.** Recruiters were reported to advocate for many of the parents at all stages of the adoption process. Many parents reported that the recruiters helped them address problems with the public agency, such as intervening when a

child's caseworker was unresponsive or uncooperative with a prospective adoptive parent. Recruiters were also described as advocating for parents throughout the finalization process and helping them to troubleshoot any problems that arose. Additionally, recruiters were reported to provide advocacy for the families to ensure the needs of the children were met by participating in such activities as Individualized Evaluation Plan (IEP) meetings and mental health appointments. Other parents noted that the recruiter assisted with securing important documents for them, such as the child's birth certificate, and ensured that the appropriate subsidies and medical benefits were in place when the child's adoption finalized.

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**KEY FINDING:**

It is helpful for recruiters to advocate for parents at all stages of the adoption process.

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**Information and referrals.** Parents noted that recruiters were available to answer questions throughout the entire adoption process. Many parents noted that recruiters helped them to manage their expectations (e.g., explaining that there would be a "honeymoon phase" when the child was placed in their home), navigate through adoption policies and paperwork, and educated them about the child's specific needs and history. Several parents also expressed their appreciation for their recruiter's openness and honesty in sharing information. Additionally, parents found it helpful to have a recruiter educate the children who were being adopted about the adoption process and answer all of their questions or concerns.

Many parents also reported that their recruiters referred them to a variety of helpful community services, including parent support groups, continuing education and training for adoptive parents, and medical and mental health services. Other referrals that the parents found helpful, particularly post-placement, included referrals to youth employment programs, summer camps, after school programs, special needs services, respite services, and day care.

**Crisis intervention.** Providing crisis intervention was another service that parents described as helpful. Some parents described their recruiter as being willing to address any challenges that might cause the adoption process to end prematurely. For example, a few parents reported that recruiters helped them work through their concerns about the children in their care having birth family contacts.

### **Implications and conclusions**

The findings from this study offer several insights into the experiences of prospective adoptive parents in navigating through the adoption process. Consistent with past research, this study found that a lack of available community resources was perceived as a barrier in achieving a successful adoption. It is uncertain whether this finding is also an indication of a lack of awareness of the community services that are available. Nonetheless, it is important for child welfare agencies to keep abreast of the needs of prospective adoptive families and develop partnerships with community agencies, particularly mental health agencies, respite or temporary residential programs, and Medicaid offices to ensure that commonly needed services are (or become) available. This will be essential in addressing such reported issues as feeling unable or unprepared to meet the needs of the child they are trying to adopt and having difficulty integrating the child into their existing families.

The feeling of being unprepared that was shared by several parents also has implications for adoption preparation procedures. Since the WWK adoption recruitment program serves a disproportionate number of children with special

needs, it is likely that prospective adoptive parents who seek to adopt through this program will need intensive, individualized parent training once the parent is matched with a child from WWK, as well as when the child is initially placed in the parent's home. Likewise, the availability of post-adoption services will be essential to ensuring that these families receive the ongoing support they need.

Consistent with past research, this study found that prospective adoptive parents are not always provided the information needed to make an informed decision about the appropriateness of their match with a particular child or sibling group. It is uncertain whether this withholding of information is intentional. Geen, Malm and Katz (2004) suggest that individual workers may vary in how much information they share about a child. It is possible that staff share selected sections of the files they feel will be most informative for parents, or that the prospective adoptive parents have difficulty navigating through the case file to find the most relevant information. This finding may also be an indication that sections of files have been misplaced or lost, which can occur when a case file has multiple volumes and the older volumes are stored in different areas on- or off-site. Given that past research suggests that the failure to provide adequate background information on a child from foster care is one of the strongest predictors of an adoption disruption (Rosenthal, 1993), child welfare agencies should assess whether their current policies around disclosure of case information to prospective adoptive families are appropriate and are adhered to by all staff.

**KEY FINDING:**

“How” services are provided is just as important as “what” services are provided.

In addition to providing insights into the barriers experienced during the adoption process, this study identified individual and program-level factors that facilitate a successful adoption. Parents' reports of what has helped them through the process reinforce the importance of adoption recruiters having strong advocacy and clinical skills, and continually assessing the service needs of prospective adoptive families. The worker-level factors reported suggest that “how” services are provided is just as important as “what” services are provided. It may be helpful for the promising practices identified in this study to be used to inform adoption staff trainings. Above all, the findings suggest that the adoption process can be challenging to navigate and prospective adoptive parents need a great deal of education and support in order to reach the goal of successfully adopting a child from foster care.

For more information on the research, please visit [davethomasfoundation.org/research](https://davethomasfoundation.org/research). For more information on the Foundation, visit [davethomasfoundation.org](https://davethomasfoundation.org).

<sup>1</sup>The term “child with special needs” generally refers to a child who may require additional financial assistance or resources to be adopted, due to characteristics which can include age, membership in a sibling group, racial/ethnic minority status, or a particular medical or behavioral health diagnosis.

<sup>2</sup>Mandated by the Individuals with Disabilities Education Act, an IEP meeting is convened by public schools for students with disabilities to develop a plan to meet their individual educational needs, which includes developing guidelines to help teachers understand the student's disability and how to best help the student learn.

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