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**IMPACT OF PARENTING SKILLS DEVELOPMENT ON
SUCCESFUL ADOPTION OF HARDLY-ADOPTABLE CHILDREN**

Cristina Dumitru (a)*, Nelida Ghițulescu (b)
*Corresponding author

(a) University of Pitești, Pitești, 627143, Romania, cristinadumitru@gmail.com
(b) DGASPC Argeș, 110053, Argeș, Romania, cias_nghitulescu@yahoo.com

Abstract

Adoption is the best solution to provide a permanent family to the child for whom an adequate environment cannot be found in his or her biological family and for which such a solution responds to the needs identified during the assessment process by the professionals in the field. As a result of efforts to reform the child protection system after 1997, the number of children protected in residential services, public and private placement centres continued to decline during the period 2008-2013, from 25,114 in December 2007 to 22,124 in September 2013. The present study aims to identify the profile of parents opened for an adoption of a disabled child and also to implement a program of developing parental skills in order to facilitate the integration of the child into the family. The research carried out in February-May 2018 used several methods: interviews (N=18) and focus-groups (N=20) with adoptive families and an analysis of a national sample of Romanian adoptive families from Argeș county (official data offered General Direction of Social Assistance and Child Protection Argeș (DGASPC Argeș)). The findings show a slight interest in diversifying the preferences of families in adopting also a child to children with disabilities. That interest is a result of an intensive and supporting program of development of parental skills as a child with disability needs a special and personalized approach.

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1. Introduction

In recent decades, there have been several changes to Romanian adoption law and practice, but still more has to be done to stimulate adoption of hardly adopted children, those with disabilities and other special needs. The willingness and the ability to adopt these “hard to place” children are still well below the level required. This imbalance urges national authorities to take some actions for identifying obstacles and programs to overcome them. The adoption is an interesting sociological phenomena and it stimulate debates around some key concepts like family, humanity. The demand for children to adopt is increasing due to delayed childbearing, increased infertility, and an increasing acceptance of adoption as a way to build a family (Boatright, Wilson, Kahn, & Weiner, 2015). But we have to take into account other factors that can contribute to the stagnation of adoption: effective birth control leading to a decrease in the number of unplanned pregnancies, the provision of income support for single parents and changed community attitudes to single parenthood, resulting in an alternative to adoption (Australian Institute of Health and Welfare, 2004), decrease of birth rate. Hence, the numbers of adoptions have fluctuated in the past decade. Muntean et al (as cited in Buzducea, 2011) identifies five motivations for adoption: a "social profit" for the old age, infertility, financial benefits; when the child is of a family member or a relative, for compassion and love for children. Several laws were adopted to reform the child protection system after 1997 in Romania, in result the number of children protected in residential services, public and private placement centres continued to decline during the period 2008-2013 from 25,114 in December 2007 to 22,124 in September 2013 (on the base of a report provided by General Direction of Social Assistance and Child Protection Arges, DGASPC Arges). Although there is an increased number of children finding their new families, a certain number of children still struggle for being adopted, it is the case of children with disabilities. Even though some children may be categorized as hardly adopted, either because of the challenging they raise once they join the family (complex care needs, for children with disabilities; more difficult bonding for older children), they all have the need and the desire to belong to a family and they also can offer so many special moments for the parents. Adopting a child is about offering a chance of a family to a child, a safe environment, emotional and physical security, affection.

2. Problem Statement

2.1. The European and national legislative framework

The Convention on the Rights of the Child is the basic framework adopted at the global level. Intercountry adoption is specifically regulated by the 1993 Hague Convention on the Protection of Children and Cooperation in Respect of Intercountry Adoption, which has now been ratified by more than 80 States, including Romania (Cantwell, 2011). The adoption in Europe is covered by the European Convention on the Adoption of Children (2008). Jurisprudence from the European Court on Human Rights has served to set standards for the Romanian legislation. The adoption process in Romania is regulated by the Law no. 273/2004, republished in the Romanian Official Monitor. The law was modified several times by the Law no. 49/ 2009 and more recently by the Law no. 233/2011 and by the New Civil Code, which entered into force through the Law no. 71/2011. Even if, in the field of adoption important changes have been made, there is still the necessity to corelate the Romanian legislation with international and European ones. By signing and ratifying international and international conventions, Romania accepted to assure most of the

human rights of children. However, a number of issues are still proving to be controversial, and this has implications for the implementation of these standards. One of the issue is adoption of children with disabilities, with serious illness. It is understandable that the future parents want a healthy and a child who doesn't need special care. According to European Reports (Cantwell, 2011), "hard to place" children and the is well below the number of children who are legally determined to be adoptable all over the world. For facilitating the adoption for hardly adopted children more has to be done, because parents are still resilient and not ready with knowledge and competences to take care and integrate the child with special needs. Psychological integration of the child into the adoptive family foster and determine a successful adoption, mostly explained by positive and bonding relationships between parent and child, and a "subjective sense of permanence" (Neil, 2012). Studies such as Dumitrescu (2016) reinforce the idea that ensuring stability and effectiveness of this safeguard is related to the selection of adoptive parents, to the "match" between the family and the foster children and also to the empowering of foster children. Very important is the role of society through the values that it promotes, as it can contribute to the integration of this category in the community and give them the right to life.

2.2. General recommendations for adoption of hardly adopted children

For adopting parents, "expecting a child" takes a special form, and they need to be well prepared for both the medical and psychological problems that may occur (Hoksbergen, 1997). "Expecting a child with special need" is a more challenging job. Generally speaking, the term "special needs" means a child who receives or needs special education or who has a disability of some sort. In adoption, the term is defined differently and may include several factors. In general, children with special needs are those who have serious illness, are older than 6-7 years, are coming with a negative background of abuse or neglect, have emotional problems, have siblings and that impose the requirement to be adopted together, belong to ethnical and racial minorities. Almost any prospective adoptive parent who has the commitment, skills, and preparation to parent may adopt a child. Although, requirements for adopting a child with special needs tend to be less restrictive than requirements for adopting a healthy infant. Early age for the placement is one critical factor for successful integration of children in adoptive families, in addition to few or none negative experiences in pre-placement encounters. Studies such as Dozier and Rutter, (2008) state the difficulties to develop new attachments for children with extended time spent in foster care or for children that have had been placed in a care system multiple times. Also to these factors mentioned above, we can add abuse and neglect and poor institutional care as challenges in bonding with adopted parents.

Experts (Welch, Jones, Stalker, & Stewart, 2015) have proved that older children and children with disabilities would be at risk in integrating and fostering belonging and bonding links with the adoptive family, experiences mostly insecurity and attachment problems. Although the presumption that adoption process is stressful for children is not recent, Brodzinsky, Smith, & Brodzinsky (1998) based his research on stress and coping theory and urges the need to understand the feelings that often can be ambivalent and confused (feelings of fear, anxiety, sorrow, regret, uncertainty etc.) with regard to creating a relationship with his family which is not their biological one and accepting the loss of the biological family. Neil (2012) summarize in his article the impact of child emotional being on the cognitive and behavioral development, as well as on the fostering of self-esteem and cultural identity.

Throughout the adoption process, authorities should take into account several facts: creating a positive first contact with the future parents, conduct a professional matching children and families process and also with the future parent's involvement in the process, parenting training, monitoring and support services post-adoption (Buzducea et al., 2013). For a good development of adoption process is important to establish an open communication between all parties involved: authority and parents, parents and children, children and social workers.

3. Research Questions

This paper reports interviews conducted with twenty families and their children and young people adopted from Arges county, declared final and irreversible have been analysed; they dated between January 2016 and July 2018 and were closed under the law 233/2011. Our study explored their experiences and views on the bonding and parenthood and the attitude towards adopting children with special needs.

4. Purpose of the Study

The *aim* of the present study is to explore and build understanding on how parents can change the attitudes towards adopting a "special child". We envisage to explore the question of how to increase the number of adoption of children with disabilities.

4.1. Research objectives:

To identify the profile of the parents willing to adopt a "special child".

To implement the counselling program to improve parenting skills and develop a positive attitude towards children with special needs.

To evaluate the efficacy of the Counselling program to improve parenting skills.

4.2. Research hypothesis:

If parents are informed, trained and supported in the process of adopting a child, the rate of adopting children with special needs is expected to increase.

5. Research Methods

To achieve the proposed research objectives, the study was based on analysis of written social documents provided by DGASPCs from Arges county and a questionnaire investigation. A number of 20 cases of adoption declared final and irreversible have been analysed. Our research was mainly based on qualitative analysis of the data, but we summarised some patterns by using also quantitative techniques. Research methodology was designed starting from the interpretative paradigm with implementing descriptive and association techniques, in order to identify and tackle the motivation and reasons behind the adoption process. We designed and conducted our research on that objective. The used instrument was a questionnaire consisting on 18 closed questions, and 2 opened questions, parents and children, adoption process, in general, about their motivation and resources.

6. Findings

As a result of efforts to reform the child protection system after 1997, the number of children in residential services, public or private placement continued to decline during 2008-2013 years, although the decrease is less pronounced in late years, from 25114 children in 2007 to 22124 children in 2013 and 18197 children in 2017. In Romania, more than 18000 children are waiting for permanent homes. (Figure 01).

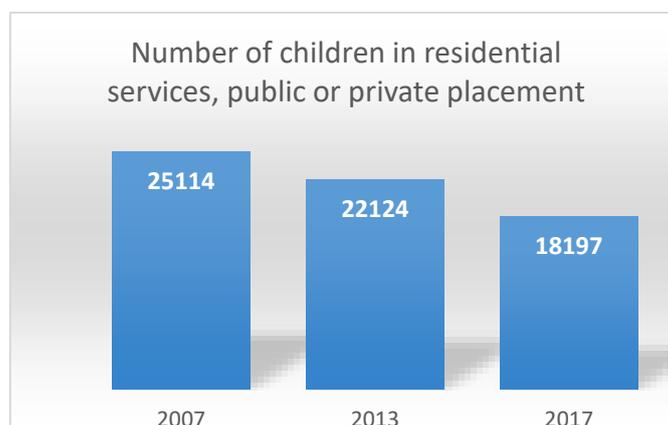


Figure 01. The distribution of children in residential services, public or private placement

The evolution of adoption cases (provided by DGASPC Arges) for a period of 8-year (2011-2018) are presented in the table 01 below. The number of initiated adoption action increased in 2018 also, due to our counselling activities organized within DGASPC Arges, Adoption Office.

Table 01. Situation of the internal adoption from Arges county

Procedure	2011	2012	2013	2014	2015	2016	2017	2018
Adoption process initiated	11	18	55	33	34	45	47	54
Conviction for adoption	17	14	11	20	22	18	32	22
Adoption aproval	11	21	15	33	22	20	32	22
Closure of monitoring process after adoption	41	40	12	19	11	24	12	16

Even though the number of children decreased, still actions need to be done in order to find a family for all children. Most children in the residential protection system are 14 to 17 years old, followed by 10 to 13 year olds and have a disability (sensorial, intellectual, physical). According to the data collected and analysed, the profile of the adopted child doesn't fit with the profile of adopted children (which is, according to a research done by Buzducea and Lazăr (2011) following the medium age of the child desired to be adopted is 41.7 months, and they should be clinically healthy (91%). Taking into account those data we implemented a counselling program to improve parenting skills and develop a positive attitude towards adopting children with special needs. In the initial phase it was a resistance towards adopting "special children". Following implementation of the counselling program the attitude changed. To identify and understand the factors that motivated families to adopt we used a qualitative approach, including focus-

groups with: single people and adoptive families from Arges country. The most powerful factor influencing acceptance was the interaction of the future family with the adopted child with disability (23%). A positive relation with the mother (i.e. affection, respect, trust and willingness to communicate) has a positive impact on the child behaviour and thus on the success of the adoption process. Although, challenging behaviours of children can have negative influence on the adoption process. With appropriate counselling session with focus on parenting skills development, the percentage of families accepting to consider adopting a disabled child increased (13%). Also, the increased number can be explained by the state support offered in helping the family to take care of the child (compensation, support services). Although, findings show that the decisive point in taking the decision to adopt a “special child” is the humanitarian motivation, to help a child in need and to give love and affection for a child that need it the most. The research results show that parents who adopt children with special needs will need to follow a parenting training in order to find the emotional, physical, mental, and financial resources to be a successful parent. During our research all 20 families that decided to adopt a child with disabilities made a self-assessment before taking a decision and also followed the parenting program that included meetings and inputs from doctors and other health professionals, educators, psychologists, social workers. We tried to identify the profile of parents willing to adopt “special children” and the correlations were significant between age and studies, but no correlation were found between gender, or environment (rural, urban areas). According to our data, couples aged 36-40 years old, with higher education studies are more opened to adopt children with special needs. But those results cannot be generalized as the research group was a small one. During observations and interviews held with parents our findings shows that young parents are more likely to consider adopting mainly children with minor and nonvisible disabilities like a child with a hearing loss, a child with mild specific learning disabilities like dyslexia. There is still a resistance towards adopting children with challenging behaviours and from autism spectrum disorders. Our research states that a successful adoption depends on the quality of the relationship with the social worker managing the case and his abilities to detect parenting skills and socio-emotional resources of the prospective adoptive parents. From our research group 60 % said that the positive experience with their social worker and counselling program had a big impact on taking the decision to adopt a child with disabilities. Social workers have an important role and are needed to conduct the trainings and home studies. However, as we learned during our focus groups, miscommunication or mishandling had seriously affected the way parents can the creation of a “special family”. Adoption has to focus on children and parents needs and interests. However, after the counselling program, adoption from the perspective of a disabled child, which is given a chance to a family unit, became a positive, favourable measure.

7. Conclusion

Adoption is the best solution to provide a permanent and caring family to the child from residential centres. The study showed that developing parental skills and a good counselling program can empower future parents with necessary resources: emotional, psychological, financial to adopt a hardly-adopted child. Moreover, it's crucial to motivate parents to engage in this type of programs, because they contribute to the development of their parenting skills and enhance the opportunity to establish a good relationship parents-children, regardless of the disability. Children with special needs are typically harder to place

for adoption than other children, but our study has shown that children with special needs can be placed successfully with families who want them. Our study suggests that a good counselling program offers a positive change in adopting preferences, broadening the options.]

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