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Meeting the Long-Term Needs of Families Who Adopt Children Out of Foster Care: A Three-Year Follow-Up Study

Doris M. Houston and Laurie Kramer

The purpose of this study was to assess the extent to which agency and nonagency supportive resources contributed to the stability and well-being of 34 newly adoptive families over 3 years. Results revealed significant pre- to post-adoption declines in families' contact and satisfaction with formal and informal helping resources. Greater pre-adoption contact with formal adoption agency staff predicted adoption stability and lower levels of family conflict at the 3-year assessment. The results highlight the importance of providing adoptive families with formal and informal support that meets their evolving needs.

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Post-foster care adoption has emerged as a viable and pre-
ferred familial arrangement for abused and neglected chil-
dren unable to reside with their families of origin without
risk of harm (Barth & Berry, 1988; Berry, 1990; Children and Fam-
ily Research Center, 2000; Hollinger, 1993; Seltzer & Bloksberg,
1987; Triseliotis, 2002). Because adoptive families offer a sense of
permanency and commitment not typically available through tra-
ditional foster care placements (Barth, 2000; Festinger, 2002; Hol-
linger, 1993; Rosenthal & Groze, 1990), child advocates have fought
vigorously to remove longstanding legal, financial, and social bar-
riers that prevent families from adopting. The passage of several
federal and state initiatives such as the Adoption and Safe Families
Act of 1997 (Public Law 105-89) and the Multiethnic Placement Act
of 1994 has led to dramatic increases in the numbers of children
adopted out of foster care. For example, between 1995 and 2003,
the number of U.S. adoptions of children in substitute care in-
creased steadily each year, from 25,693 in FY 1995 to 50,362 in FY
2003 (U.S. Department of Health and Human Services, 2005).
Adoption rates have increased even more substantially in states
with aggressive permanency initiatives. For example, postsubsti-
tute care adoptions in Illinois increased more than 500% between
1994 and 2000 (Illinois Department of Children and Family Serv-
ices [IDCFS], 2005) with more than 38,000 foster children adopted
over the past 10 years.

   Children adopted out of substitute care often present complex
histories of physical abuse, neglect, sexual assault, drug exposure,
HIV exposure, and disrupted attachments (Howard, Smith, & Ryan,
2004; Lakin, 1992; Wind, Brooks, & Barth, 2005; Zosky, Howard,
Smith, Howard, & Shelvin, 2005). An assessment of previously
abused and neglected children receiving post-adoption services in
Illinois revealed that 65% were depressed, 47% were suffering
from posttraumatic stress disorder, and 79% experienced problems

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of separation, loss, and attachment (Smith & Howard, 1994). Moreover, when compared with nonadopted children and children adopted as healthy infants, children adopted out of foster care have significantly lower levels of school and social functioning (Howard et al., 2004). When young children begin their formative years under such traumatic conditions, the transition to a stable adoptive family life may be challenged.

Families who adopt children with histories of abuse and neglect are likely to encounter a variety of stressors which may contribute to family discord (McGlone, Santos, Kazama, Fong, & Mueller, 2002; Smith, Howard, & Monroe, 2000). Although currently no databank tracks the numbers of adoption disruptions occurring either before or after legal finalization, estimated rates of adoption disruption range from 6% to 20% (Barth & Berry, 1988; Testa, 2004). Brodzinsky (1993) estimated the disruption rate for children with special medical, emotional, and developmental needs as 13%.

Previous research confirms that the amount and quality of support that adoptive families receive when parenting a child with a history of abuse or neglect is an important factor that contributes to family permanency (Barth & Berry, 1988; Brooks, Allen, & Barth, 2002; McDonald, Lieberman, Partridge, & Hornby, 1991; Partridge, Hornby, & McDonald, 1986; Zosky et al., 2005). Whereas informal and formal supportive resources have been found to enhance families' adjustment to adoption (Berry, 1990; Groze, 1996; Rosenthal, 1993; Westhues & Cohen, 1990), little is known about the long-term impact of these supportive services and the degree to which they contribute to adoption stability and child and family well-being.

The objective of the present study was to assess the extent to which families' pre-adoptive use and satisfaction with formal and informal supports was associated with family stability and child well-being over a 3-year period.

Examining Child and Family Well-Being Within the Context of Support Systems

The importance of support for improving child and family outcomes and offsetting the effects of stress is well documented (Bronfenbrenner, 1979; Clark, Prange, & McDonald, 1996; Coyle & Lyle, 1983; Feigleman & Silverman, 1979; Kagan & Reid, 1986; McGlone et al., 2002; Smith, et al., 2000). Within the context of adoption, a strong support network can increase families' abilities to cope with the ongoing demands of parenting a child who presents emotional, developmental or physical difficulties (Barth & Berry, 1988; Groze, 1996; Nelson, 1985; Partridge et al., 1986; Zosky et al., 2005). Groze identified three types of supportive resources that enhance adoptive families' adjustment: emotional support, informational support, and concrete aid. According to Groze, emotional support consists of interpersonal exchanges that help individuals to feel cared for, validated, and able to mobilize psychological resources necessary for coping. Informational support consists of knowledge that may enhance the parenting of a child with special needs such as detailed background information about the adoptive child, preparatory information about the kinds of problems families are likely to encounter, skill building to help families develop specialized parenting strategies, and ways to access available community resources. Concrete aid consists of tangible forms of assistance, which may include medical care, educational services, psychotherapeutic services, child care, recreational opportunities, and financial subsidies.

Sources of Support for Adoptive Families

Adoptive families who seek to access emotional support, informational support, and concrete aid are likely to draw from multiple service providers and social networks that span across formal and

informal social domains. Each plays a distinct role in fulfilling families' needs. Little is known, however, about families' experiences with supportive agents across these multiple support domains. Kramer and Houston (1998, 1999) investigated the support needs and experiences of families who were preparing to adopt a child out of foster care who had been placed in their homes for approximately 6 months. Kramer and Houston found that, in addition to traditional adoption agencies, adoptive families turned to their indigenous support systems (for example, extended family and friends) and to a host of mental health and medical professionals when they needed help with adoption-related problems. Pre-adoptive families were more likely to receive comprehensive forms of emotional, informational, and concrete support when they drew on multiple social networks that spanned formal and informal domains. Each of these domains played a distinct role in fulfilling families' needs. Kramer and Houston categorized these domains as (1) *informal nonagency support* provided by the family's indigenous support network of family, friends, neighbors, and others; (2) *informal agency-linked support* provided by peers and laypersons associated with the adoption agency, such as other adoptive parents and foster parents; (3) *formal nonagency support* provided by trained professionals not affiliated with the adoption agency, such as teachers, medical providers, and therapists; and (4) *formal agency support* provided directly by the child welfare agency, such as adoption caseworkers. These exploratory studies also found that families sought help from each domain in accordance with the problems they needed to address.

The current study examines the extent to which these formal and informal support systems may promote the stability and well-being of adoptive children and families in the early years of adoptive life. Specifically, we investigated the types of pre- and post-adoption support that are most closely linked with better child and family well-being, and a sustained adoption, three years following adoption.

The study also sought to fill a gap in the current literature by assessing the ways in which families' contact and satisfaction

with supportive resources changes over time. For example, types of support that adoptive families need post-adoption may be quite different from what they needed during the pre-adoptive period. As the adoptive family coalesces and develops its own homeostatic pattern of functioning, family members may be less likely to seek contact with formal service providers whose interventions are typically problem-focused or crisis-oriented (Brooks et al., 2002; Smith & Howard, 1999). Over the course of the adoption, however, developmental changes experienced by adoptive children may launch the family into new crises (Brodzinsky & Schecter, 1990; Howard et al., 2004; Rosenthal & Groze, 1992), thus leading the family to reinitiate contact with support agents. Support needs are also likely to shift over the life course as the family faces new anticipated or nonanticipated transitions (for example, new siblings, divorce, death, or a move to a new community).

Method

Participants

We contacted by telephone 49 families who participated in the original study of family support needs during the pre-adoptive period and asked them to participate in this follow-up investigation (see Kramer & Houston, 1998, 1999). Of the original participants, 34 families (69.39%) agreed to participate in this follow-up assessment. We could not locate 4 families (8.16%), and 11 families (22.45%) were successfully contacted but elected to not participate in the follow-up study beyond the preliminary phone contact. No statistically significant differences were found in the demographic characteristics of families who participated in this follow-up study and those who declined participation.

Adoptions were arranged by the IDCFS ($n = 27$) or a private, community-based agency ($n = 7$). As outlined, no reliable differences were found between the two groups of families with regard to the key demographic and outcome variables under study.

Adoptive Parents

Thirty-four families participated in this follow-up assessment. Based on completed surveys from 33 mothers and 16 fathers representing 34 households, adoptive mothers were on average 45.79 years old ($SD = 10.10$) and fathers were 45.44 ($SD = 7.23$) years old. The ethnic makeup of the mothers was diverse in that 12 (36.36 %) were African American, 20 (60.60%) were Caucasian, and 1 (3.03%) was Native American. Of the participating fathers, 3 (18.75%) were African American and 13 (81.25 %) were Caucasian. Family structure was also diverse, as the study included 23 (67.65%) married couples, 3 (8.82%) divorced parents, 4 (11.76%) single parents, and 4 (11.76%) widowed parents. Median family income was $30,000 to $39,000. Parents were not biologically related to their adoptive children. Additional information about the full sample can be found in Kramer and Houston (1998, 1999).

Target Children

Although general information was sought about the adoption status of all children in the family, detailed information was obtained for one preidentified "target adoptive child" in each family. The target child reporting system allowed for an in-depth assessment of the well-being of a single child as a means of relieving families with several adoptive children from having to complete multiple questionnaire packets. Target children were those who were closest to 8 years old at the pre-adoptive assessment, which was the median age of children in the original sample. The 34 target children included 10 girls and 24 boys who were 9.15 years of age on average ($SD = 2.91$) at this follow-up. Sixteen (47.06%) were of African American descent, 11 (32.35%) were Caucasian, 4 (11.76%) were biracial, 1 (2.94%) was Latino, and 1 (2.94%) was reported as "other." Ethnicity was not reported for one target child. Target children had lived with their adoptive parents for 5.5 years ($SD = 2.38$) at the time of this follow-up.

Procedures

All adoptive parents who participated in the earlier phases of this research were contacted by telephone approximately three years

after the pre-adoptive assessment. Parents were told that this follow-up study was intended to learn how their family is now adjusting and what types of supports they have found to be helpful. Families were told that this information would be used to help future programming for new families considering adoption. Parents were then asked if they had finalized the adoption of the child or children they had planned to adopt when we first met with them three years prior, and whether these children were still residing in the family home.

Parents who followed through with the planned adoption and who retained custody of their adoptive child were then asked to complete a questionnaire through the mail that assessed current child well-being, the quality of family life, and the family's use of supports. A financial incentive of $25 was provided to parents who completed the questionnaire.

Parents who indicated that they no longer maintained custody of the child they adopted, or had planned to adopt, were asked to participate in an interview to shed light on the factors that may have contributed to the disrupted adoption. The interviews were described as opportunities for parents to provide feedback about ways to improve services and supports for adoptive families. The information obtained through these interviews is presented in Houston (2003).

Measures

Adoption Finalization Versus Disruption

The legal finalization of the adoption or adoption disruption by the 3-year follow-up was determined by parental report (if available) and confirmed through IDCFS records. In this study, *adoption disruption* refers to displacements that occurred before the adoption was legally finalized. No families in this sample experienced post-adoption displacements or dissolutions. Adoption disruption data was available for the full initial sample of 49 families. Adoption status was coded as (1) disrupted or (2) finalized.

Family Support

Families' use and satisfaction with support was examined at the pre- and post-adoption assessments using portions of the Support Networks for Adoptive Parents (SNAPS) questionnaire (Kramer & Houston, 1998). Parents rated their levels of contact and satisfaction with a wide variety of helping resources that could potentially assist them with parenting and adoption concerns. SNAPS considers four domains of formal and informal support: (1) informal nonadoption agency related support (for example, spouse, extended family members, friends, church affiliates); (2) informal agency related support (for example, experienced "master" adoptive parents, the child's former foster parent); (3) formal nonagency related support (for example, medical specialists, therapists, and school representatives); and (4) formal agency related support (for example, caseworkers, other adoption staff, and licensing staff).

Contact with Supportive Resources

Parents rated the current degree of contact they had with each potential source of support using the following scale: 5 = daily, 4 = weekly, 3 = monthly, 2 = twice a year, or 1 = once a year or less. Internal consistency (alpha), based on the follow-up assessment, was .73 for informal nonagency helpers, .61 for informal agency helpers, .82 for formal nonagency helpers, and .87 for formal agency helpers.

Satisfaction with Supportive Resources

Parents also rated their levels of satisfaction with each of the potential helpers using a five-point Likert scale (5 = extremely helpful, 1 = harmful). Internal consistency was .87 for informal nonagency helpers, 1.0 for informal agency helpers, .94 for formal nonagency helpers, and .92 for formal agency helpers.

Child Well-Being

The child behavior checklist (Achenbach & Edelbrock, 1983) served as the index of child well-being. Adoptive parents indicated

on a three-point scale the degree to which each of 118 items were true for the target child (0 = not true, 1 = somewhat or sometimes true, 2 = very true or often true). Ratings were summarized to form internalizing behavior problem (for example, shy, anxious, or inhibited), externalizing behavior problem (for example, aggressive, antisocial, or impulsive), and total behavior problem scales. Test-retest reliability scores for this instrument range from .84 to .97 (Achenbach & Edelbrock, 1983).

Family Well-Being

Parental Competency, Attachment, and Commitment

Smith and Howard's (1994) current feelings about the relationship with child inventory was used to assess parents' perceptions of how well they are able to meet their child's needs, their attachment and commitment to their child, and whether they would end the adoption if they could. Parents rated each of the 12 items using a five-point Likert scale (1 = strongly agree, 5 = strongly disagree). Summary scores were derived by aggregating the 12 ratings. Internal consistency of the scale was .90 (alpha) with the current sample. Smith and Howard reported that responses on most items are highly correlated with parents' consideration of adoption dissolution.

Parents' Adjustment to Adoption

Following Groze (1996), parents rated how well they felt they and their spouse have each adjusted to the adoption, using a five-point Likert scale (1 = very poorly, 5 = very well).

Parents' Desire to Adopt Again

A single item from the parents' perceptions of adoption outcomes questionnaire (Groze, 1996) was used to measure parents' desire to adopt again. Parents rated their desire on a four-point scale (1 = strongly agree; 4 = strongly disagree).

Parents' Overall Life Satisfaction

Kramer and Washo's (1993) single-item measure of personal life satisfaction was used as a general indicator of the degree to which parents felt satisfied with life during the past month. Parents rated

their life satisfaction using a five-point Likert scale (1 = very dissatisfied, 5 = very satisfied).

Family Environment

The family relationships index of the family environment scale (Moos & Moos, 1986) was used to measure parents' perceptions of family cohesion (nine items), expressiveness (nine items), and conflict (nine items). Parents indicated whether each item is true or false for their family. Internal consistency was .76, .75, and .71 for the cohesion, expressiveness, and conflict subscales, respectively.

Results

Maternal responses were selected as the primary reporting source in 33 of the 34 cases. A father served as the primary caregiver in the remaining family and so he was considered as the primary reporting source for this family. Although we aimed to include the perspectives of both mothers and fathers, a low paternal response rate precluded the meaningful analyses of fathers' perceptions of well-being and support.

Preliminary Analyses

Preliminary analyses were first conducted to determine whether there were statistically significant differences in the demographic characteristics of families who participated in the follow-up study and those who did not participate beyond the preliminary assessment. No significant differences were found with regard to pre-adoption marital status, maternal and paternal ethnicity, age, education, number of adults and children in the household, number of years children had resided in the home, and household income. In addition, no differences were found with respect to the number of families who experienced adoption disruption. Thus, families who participated in the follow-up assessment were representative of the full sample.

A second set of preliminary analyses was performed to determine whether the data provided by families whose adoption was

arranged by the state ($n = 27$) and private ($n = 7$) agencies were different with respect to the demographic and outcome variables. No significant differences were found and hence data from the two groups were combined in subsequent analyses.

The next set of preliminary analyses investigated whether there were differences in the demographic characteristics of parents who reported experiencing a disrupted adoption ($n = 9$) and those who finalized the adoption ($n = 40$). No significant differences were found in the demographic features of these two groups. Families who experienced a disrupted adoption, however, reported relatively lower scores ($M = 14.81$, $SD = 3.70$) on the Smith and Howard (1994) measure of parental feelings of competency, attachment, and commitment toward the remaining adoptive children in their home than families in which no disruption occurred ($M = 20.81$, $SD = 6.29$; $F(1,30) = 4.23$, $p < .05$).

The final set of preliminary analyses examined the roles of child and parent age, gender, ethnicity, and length of residence in the adoptive home on child and family well-being. Only one effect was found for adoptive child age; families with older adoptive children reported less cohesiveness ($r = -.37$, $p < .05$).

Hypothesis Testing

Continuity and Change in Support

We investigated the extent to which families' contact and satisfaction with supportive resources remained consistent through the first three years of adoption. A series of paired t-tests were computed to compare parents' ratings of contact and the perceived helpfulness of support at pre- and post-adoption. As shown in Table 1, levels of contact with every domain of support decreased significantly from pre- to post-adoption, with formal agency supports contact demonstrating the most pronounced declines over time.

Parents' perceptions of the helpfulness of their formal support systems also declined significantly from pre- to post-adoption. In contrast, the perceived helpfulness of informal supports did not

TABLE 1

Contact and Satisfaction with Supportive Resources at the Pre- and Post-Adoption Assessments ($N = 34$)

CONTACT	PRE-ADOPTION		POST-ADOPTION		PAIRED *T*-TEST
Domain of Support	*M*	*SD*	*M*	*SD*	*t(33)*
Informal Nonagency	3.12	.78	2.85	.74	2.33*
Informal Agency	1.87	.64	1.61	.50	2.15*
Formal Nonagency	1.77	.45	1.55	.47	2.80**
Formal Agency	1.93	.52	1.16	.44	7.23***
PERCEIVED HELPFULNESS	PRE-ADOPTION		POST-ADOPTION		PAIRED *T*-TEST
Domain of Support	*M*	*SD*	*M*	*SD*	*t(33)*
Informal Nonagency	4.04	.71	3.87	.67	1.18
Informal Agency	2.96	.82	3.34	.80	−1.89+
Formal Nonagency	2.83	.84	1.55	.44	8.67***
Formal Agency	3.51	.74	3.00	.96	2.20*

$+p < .10$ $* p < .05$ $** p < .01$ $*** p < .001$.

decrease; in fact, a marginally significant increase in the helpfulness of informal agency-based supports emerged despite the fact that parents reported having less contact with these helpers at post-adoption.

Predicting Adoption Finalization Versus Disruption

Nine (18.37%) of the 49 families from the original sample (Kramer & Houston, 1998, 1999) experienced an adoption disruption by the 3-year follow-up assessment. To examine the role of pre-adoption support in predicting adoption disruption, a series of point biserial correlations were conducted between adoption status at the 3-year follow-up and (1) the level of contact parents reported having with potential helpers at pre-adoption and (2) parents' pre-adoption perceptions of the helpfulness of these supports. The results of these analyses are presented in Table 2.

TABLE 2

Point Biserial Correlations Between Pre-Adoptive Contact and the Perceived Helpfulness of Support and Adoption Finalization/Rupture ($N = 49$)

PRE-ADOPTION CONTACT WITH SUPPORTS

Domain of Support	M	SD	R
Informal Nonagency	3.12	.79	−.21
Informal Agency	1.87	.65	−.26
Formal Nonagency	1.77	.45	−.17
Formal Agency	1.93	.52	−.32*

PRE-ADOPTION PERCEPTIONS OF THE HELPFULNESS OF SUPPORTS

Domain of Support	M	SD	R
Informal Nonagency	4.04	.71	−.21
Informal Agency	2.83	.89	.06
Formal Nonagency	2.83	.84	−.18
Formal Agency	3.27	.92	−.24

* $p < .05.$

Families were more likely to maintain an adoptive child in their home and finalize the adoption when they reported having had relatively higher levels of contact with formal agency supports (for example, adoption agency staff) during the pre-adoptive period ($r = −.32, p < .05$). Levels of contact with other sources of support, such as formal nonagency, informal nonagency, and informal agency resource were not associated with adoption finalization or disruption. Parents' perceptions of the helpfulness of pre-adoption support (in any domain) were not significantly associated with adoption finalization or disruption.

Predicting Post-Adoption Family and Child Outcomes

Given the importance of pre-adoptive formal agency supports for promoting finalized adoptions, we next sought to identify which types of support, provided during the pre-adoption period, were

most strongly correlated with post-adoption child and family outcomes.

Family Well-Being

Parents who rated the helpfulness of their formal agency supports more highly during the pre-adoptive period were more likely to report lower levels of post-adoption family conflict ($r = -.54$, $p < .01$). Similarly, parents who reported higher levels of pre-adoption contact with formal nonagency helpers ($r = -.37$, $p < .05$) such as medical providers, mental health professionals, and educators and who were relatively more satisfied with help from these providers ($r = -.34$, $p < .05$), were also more likely to report lower levels of family conflict at post-adoption.

Parents were more likely to report a desire to adopt again if they were satisfied with help they received from informal non-agency helpers (for example, extended family, friends, and church members) during the pre-adoptive period ($r = -.34$, $p < .05$). Additionally, parents' desire to adopt again was marginally predicted by higher pre-adoptive ratings of the helpfulness of formal agency ($r = -.32$, $p < .10$) and nonagency ($r = -.33$, $p < .10$) helpers.

No link was found between parents' personal adjustment to adoption at follow-up and pre-adoption support. However, spousal adjustment was marginally associated with pre-adoptive ratings of the helpfulness of informal nonagency helpers ($r = .33$, $p < .10$). Parental reports of overall life satisfaction, perceived parental competency, and family cohesion and expressiveness were unrelated to the measures of pre-adoption support.

Child Well-Being

Children whose parents reported more frequent pre-adoption contact with informal, agency-linked helpers (for example, other adoptive and foster parents) were more likely to be perceived as having more post-adoption internalizing ($r = .46$, $p < .01$), externalizing ($r = .46$, $p < .01$), and total ($r = .49$, $p < .01$) behavior problems. In addition, more frequent pre-adoptive contact with formal nonagency helpers (for example, physicians, therapists, and

educators) was linked with more post-adoptive total behavior problems ($r = .35, p < .01$) and, to a marginal degree, externalizing behavior problems ($r = .31, p < .10$). These findings could reflect the fact that children whose parents sought assistance from agency-based informal supports and community-based professionals at pre-adoption continued to require assistance at post-adoption due to persistent maladaptive behaviors. Interestingly, ratings of the helpfulness of these supportive resources were not correlated with child behavior problems at follow-up.

Concurrent Post-Adoption Predictors of Family and Child Well-Being

Finally, we addressed the types of post-adoptive support that were most closely linked with post-adoption family and child well-being. This question was addressed by conducting a series of correlations between the post-adoption measures of well-being and concurrent levels of contact and satisfaction with potential supports.

Family Well-Being

Parents reported lower levels of family conflict when they were more satisfied with the post-adoption help they received from formal, adoption agency staff members ($r = .45, p < .05$). Additionally, lower levels of conflict were marginally related to parents' perceptions that informal nonagency resources were helpful ($r = .30, p < .10$). No significant associations were found between parents' ratings of family cohesion and expressiveness and their current level of contact with and perceptions of helpfulness of their support network.

Parents indicated a greater desire to adopt again when their post-adoption levels of contact with informal ($r = -.38, p < .05$) and formal ($r = -.34, p < .05$) nonagency helpers were relatively high and when they perceived informal agency personnel to be helpful ($r = -.36, p < .05$). In contrast, more frequent contact with formal adoption agency staff at the post-adoption period was marginally related to a lower desire to adopt again ($r = .30, p < .10$).

This finding probably reflects the fact that higher levels of contact with formal agency staff are likely to occur if families are experiencing some form of difficulty parenting their adoptive child.

Parents were marginally more likely to report greater personal adjustment to adoption when they viewed informal nonagency helpers ($r = .32$, $p < .10$), informal agency helpers ($r = .31$, $p < .10$), and formal agency helpers ($r = .37$, $p < .10$) to be more helpful at post-adoption. Furthermore, parents were more likely to rate their spouses' adjustment as positive when they perceived informal nonagency supports ($r = .58$, $p < .001$) and, to a marginal degree, informal agency helpers ($r = .36$, $p < .10$) as more helpful.

Parents reported feeling more satisfied with life when they experienced lower levels of post-adoption contact with agency staff ($r = -.39$, $p < .05$). Parents also reported greater life satisfaction when they rated their informal nonagency network (for example, spouses, extended family, and friends) as more helpful ($r = .35$, $p < .05$).

Parents' perceptions of competency, attachment and commitment were unrelated to their ratings of post-adoptive contact and satisfaction with supports in any domain.

Child Well-Being

Correlations between levels of contact with potential helpers at the post-adoption assessment and post-adoption measures of child well-being revealed no significant associations. However, there was a marginally significant link between greater internalizing child behavior problems and lower levels of parents' satisfaction with formal ($r = -.31$, $p < .10$) and informal ($r = -.31$, $p < .10$) nonagency linked resources.

Discussion

Intensive efforts on the part of adoption practitioners and policymakers over the past decade have led to thousands more children securing adoptive homes. To ensure the stability and well-being of these newly formed families, much more information is needed

about the key factors that enable families and children to adjust and thrive. Whereas the results of previous research highlighted the child and family factors that predict adoptive family functioning (for example, Barth & Berry, 1988; Brodzinsky, 1993; Smith et al., 2000; Zosky et al., 2005), the results of the current study further illuminate the importance of sustained external supports in promoting adoption stability and child and family well-being over a 3-year period.

Reductions in Support Over Time

The results of this study indicate that contact with all domains of support significantly decreases over the initial 3-year period of adoptive family life. The most precipitous declines were observed for formal, professional support resources including adoption agency and community-based professional services such as those related to health care, education, and mental health. Although one could argue that reduced contact with supportive resources signifies a movement toward normalcy in that involvement from outsiders is no longer deemed necessary, less support could prove detrimental for families who are parenting children who continue to demonstrate emotional, educational, and developmental difficulties.

In addition to reductions in contact, parents' perceived satisfaction with the help provided by formal agency and nonagency supports also declined between the pre- and post-adoption assessments. Interestingly, the perceived helpfulness of informal supports did not decrease. In fact, informal agency-related supports (for example, other adoptive families) were viewed as slightly more helpful at post-adoption than they were at pre-adoption, even though contact with these supportive individuals was less frequent. Satisfaction with informal nonagency related supports prior to adoption was linked with post-adoption desire to adopt again and with spousal adjustment.

Although the reasons for reduced contact with potential supports cannot be distilled in the current study, several questions

emerge that warrant future investigation: (1) Are families access-
ing fewer supports over time because there is a paucity of re-
sources to adequately meet their needs once the adoption agency
is no longer actively involved? (2) Are families accessing fewer
supports from pre- to post-adoption because they wish to become
less dependent on help from extra-familial sources? (3) How can
adoption agencies be encouraged to take a stronger leadership role
in identifying, promoting, and developing appropriate community
level resources to meet families' needs once an adoption is final-
ized? (4) How can informal sources of support be nurtured and de-
veloped to better meet adoptive families' needs? These questions
may be best addressed through prospective studies of larger sam-
ples of adoptive families, in which both quantitative and qualita-
tive methods are used.

The Unique Role of Adoption Professionals

The results of this study highlight the importance of the adoption
agency as a source of support to families who are caring for chil-
dren with histories of abuse, neglect, and often, multiple substitute
care placements (McDonald, Propp, & Murphy, 2001; Reilly &
Platz, 2004; Zosky et al., 2005). Families were more likely to follow
through with a planned adoption and avoid adoption disruption
when they had greater pre-adoptive contact with formal adoption
agency helpers. Levels of pre-adoptive contact with other types of
helpers did not significantly predict adoption stability over this
3-year period. In addition, pre-adoption support was linked with
lower levels of family conflict and a greater desire among parents
to adopt again. Although the current study does not enable us to
identify the specific forms of assistance provided by formal adop-
tion personnel that are most beneficial for preventing adoption
disruptions (this should be performed in future research), we
know that adoption professionals bring a variety of resources and
services to pre-adoptive families, including the early identification
of child needs, sharing information about the child's history, and
linking families with appropriate resources and services (Barth &

Berry, 1988; McKenzie, 1993; Ward, 1997; Wind et al., 2005; Zosky et al., 2005).

The results of this study highlight the long-term importance of adoption caseworkers and other agency staff in the lives of families who are often going to great lengths to meet the medical, emotional and educational needs of their children. It was stunning to find that support from adoption agency personnel predicted family outcomes three years later. These findings suggest that pre-adoptive assistance from formal agency support systems can play an instrumental role in setting the adoptive family on a positive trajectory during the early stages of adoption.

Unexpectedly, levels of pre- and post-adoptive support were not associated with fewer child behavior problems. In fact, we found that the more frequent pre-adoption contact families had with informal agency-linked helpers and formal nonagency helpers, the more likely they were to report child behavior problems at post-adoption. This may reflect the fact that longstanding behavior problems can be resistant to many forms of help (Leung & Erich, 2002; Smith et al., 2000). However, significant linkages were found between support and post-adoption family well-being outcomes. It can be argued that although pre- and post-adoptive supportive resources did not improve child behavioral outcomes, these supports could nevertheless be beneficial in helping adoptive parents to understand, manage, and cope with their children's difficult behaviors.

Community Capacity Building to Address Adoptive Families' Needs

In addition to laying the groundwork for adoption success and longevity, adoption professionals may serve critical functions in encouraging adoptive families to strengthen their linkages with their indigenous support network as well as with new sources of support such as community-based professionals and other adoptive families. Although adoptive families regularly seek support from sources outside the adoption agency (Kramer & Houston,

1998, 1999), our findings suggest that their use of these resources lessens over time, possibly depriving them of useful assistance.

These findings suggest that a shift may be needed in the way adoption programmers and policymakers conceptualize long-term support for adoptive families. Traditional adoptive support programs use an agency-based, professionally directed approach to help children integrate into adoptive families (McDonald, Lieberman, Partridge, & Hornby, 1991). However, this model offers little in the way of strategies to assist adoptive children and their families to integrate into a larger community network of neighbors, extended family members, schools, and churches. Without such social integration, the adoptive family may be subject to isolation. Moreover, most of the available adoption support programs are time limited and do not take into the account the changing developmental and life course needs of adoptive children and their families. An expanded model of post-adoption support that follows ecological and developmental frameworks is needed to systematically link adoptive parents with community-based support systems such as educational organizations, neighborhood groups, and social networks that will be receptive to them and their adopted children (Schweiger & O'Brien, 2005).

Addressing the Support Needs of Families Who Experience Adoption Disruption

In the current study, 18% of the families who participated in the pre-adoption assessment experienced an adoption disruption; this percentage is in line with national estimates of children adopted out of substitute care (Barth & Berry, 1988). The effects of adoption disruption can be devastating for adoptive children, adoptive parents, and the people who love them. Parents who make the decision to remove a child from their home can experience feelings of helplessness, guilt, regret, and inadequacy (Berry & Barth, 1990; Eheart & Power, 1995; McGlone et al., 2002). Children who must leave a home they thought would be "permanent" experience feelings of rejection, anger, despair, and resignation (Smith & Howard,

1999). Yet, despite the emotional turmoil and family upheaval that accompanies an adoption disruption, each of the families in this study who experienced a disruption subsequently adopted other children.

In situations where a family experiences an adoption crisis but continues to parent other children, the need for additional support can be paramount (Festinger, 2002; Smith & Howard, 1999; Zosky et al., 2005). For example, adopted children who experience the removal of another child in the home may feel less secure with regard to their own standing in the family. Furthermore, once a family decides to have a child removed from the home, this decision is very likely to impact feelings of self-efficacy with regard to parenting their other children. In fact, the current results indicate that parents who experienced an adoption disruption are more likely to report lower levels of competency, commitment, and attachment to their other adoptive children who remain in the home. These results suggest that services for families who experience disruption should include a careful assessment of the well-being of other children in the home and consider whether additional supports should be garnered to help sustain the adoptive family.

Limitations

Some limitations need to be considered regarding this study. First, the small and nonrepresentative sample limits our ability to generalize the results to the general adoption population. The challenge of recruiting and retaining research participants who are juggling complex family responsibilities for the purposes of a longitudinal study is not easily overcome. Thus, these results should be replicated in future studies. It is also important to note that this study focused on nonkinship adoptions. We did not assess the support needs and well-being of adoptive parents and children who are biologically related, such as those in kinship care and adoption, which is quite common. Because the availability of formal and informal supports likely differs for kinship and nonkinship adoptive families, a specific assessment of the supports available and used

by each type of family is needed. An additional limitation of this study is that the assessments of child and family well-being were based on parental perceptions. Future studies should also examine adoptive children's perceptions of social support and well-being. A triangulation of outcome assessments based upon parental, child, and clinical feedback may yield interesting findings.

Over the next decade, thousands of children adopted out of foster care will experience the joys and challenges of family life through adoption. It is essential that mothers and fathers who have made a lifelong commitment to these children are able to keep their promises of being a "forever family." However, the promise of true family permanency for adoptive children is more likely to be realized with the provision of a host of formal and informal supportive resources that can be sustained and adjusted over time to meet families' changing needs.

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