Permanence Achieved Through Adoption or Foster Care: A Review of International Literature Regarding Disabled Children’s Experiences and Outcomes

Review of literature
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Looked after children
What do we mean by permanence?
Permanence?

Permanence can be described as the (planned) ending of this period of uncertainty through return to the family, adoption or other long-term or permanent arrangement.

Permanence is more than the achievement of a confirmed or settled legal status, it involves intention and the expectation of long term committed, settled, caring relationships.

Achieving permanence provides a sense of belonging, identity, security and stability in a ‘family’ that endures over time, across generations and locations.

Permanence (or lack of it) has a great effect on children’s daily experiences, their opportunities for development and their longer term wellbeing.
What do we understand by disability?
Disability?

Our view is that disability is a complex thing...

Disability includes impairments, but also effects from social, relational, cultural, economic and physical environments and circumstances.

Most of all, we feel that disability should be defined with participation from those who experience it.
But how were ‘permanence’ and ‘disability’ defined in the literature we studied?

Different authors took different stances to disability (social, relational, medical, etc.).

Different authors too different stances with permanence (narrow and broad definitions).

In our review we included all approaches since we wanted to maximise the material we could potentially use.
How did we perform the literature study?

We followed a process for scoping studies developed by Arksey and O’Malley (2005).
## Overview of literature

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FINDINGS 1
DISABLED CHILDREN’S OUTCOMES
Outcomes 1

Disabled children:

- Less likely to reunify with birth family
- Equally likely to be adopted (except ID)
- Wait longer to be adopted
- At older age, more likely to be adopted
- Stay in foster care longer (may be a form of permanence)
- More likely to be placed out of area
- More likely to be placed in inappropriate placement

Outcomes 2

Disabled children:

• Experience more disruption (except in kinship)

• With behavioural disabilities and mental health issues at particular risk

• May be over-represented among ‘runaways’ from foster care (with learning disabilities and some mental health diagnoses may be less likely to run away)

Outcomes and age

Outcomes and gender

Avery 2000; Schmidt 2013; Slayer & Springer 2011; Smith 2002;
Outcomes and ethnicity

Outcomes and impairment

FINDINGS 2
PROVIDING SERVICES AND SUPPORT TO PROMOTE PERMANENCE
Theme 1: Listening to disabled children

Who is Listening?
Theme 1: Listening to disabled children

A stark lack of literature exploring disabled children’s views of permanence and related issues.

Review found no reports of children’s direct accounts about permanence and related issues.

This gap is frequently highlighted in papers but not addressed.

Theme 2: Recruitment of carers and adopters for disabled children
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We found the motivations of carers and adopters of disabled children are varied.

Decision to care for a disabled child influenced by biography (personal history) and personal values: personal experience of fostering (e.g. in childhood), personal experience of disability or challenges in childhood, religious beliefs, sense of social responsibility.

Also we found that experience builds confidence but is not an essential prerequisite.

So a need to ‘Recruit ‘specialists’ (people who desire to foster or adopt a disabled child) through hospitals, special schools, specialist press.

Recruitment of ‘generalists’ (people who have not considered adopting a disabled child) is likely to require action to address barriers such as stereotypical views of disabled children, misconceptions and fears.

Enable experienced foster carers can be supported to extend the range of their parenting skills to meet needs of disabled child.

Barton 1998; Brown et al 2007; Brown 2008; Burge and Jamieson 2009; Clark et al. 2006; Lauver 2008; Marcellus 2008, Schofiled and Beek 2004; Shannon & Tappan 2011; Cousin 2005; Glidden 2000; Gould 2010;
Theme 3: Assessment, preparation and training of adopters/carers
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Caring for a disabled child requires particular skills: e.g. networking; harnessing resources; coping skills; advocacy; including families of origin.

These skills may not all be present during assessment but can develop over time – so assessments should not be seen as being once and for all.

There is a need for more bespoke training for carers of disabled children needed.

Foster carers of disabled children were reported to especially value training and support from peers (other carers of disabled children)

Theme 4: Supporting carers/adopters of disabled children

Theme 5: Meeting the needs of disabled children

Avery, 2000; Baker 2006; Barton 1998; Bilaver 2006; Brown 2005, 2007; Brown & Rodger 2009; Cousins 2005; Haugaard 2000; Lauver 2008; Mather 1999; Pasztor et al. 2006; Peake 2009; Robertson 2006; Shannon & Tappan 2011; Zivani 2013
Theme 6: Satisfactions expressed by carers of disabled children

Barton 1998; Brown et al 2007; Brown 2008; Lauver 2008; Marcellus 2008
SOME CONCLUSIONS
• A review of 90 sources with complex findings.
• Disabled children were shown to be disadvantaged in various ways (reunification, adoption, contact, timing)
• Importantly there are complex interactions between factors such as gender, age, ethnicity and impairment which influence children’s outcomes.
• More information is needed about how to recruit, prepare, match and support carers but adopting or caring for a disabled child can be successful and rewarding for carers.
Research gaps identified in the literature

• Overall very little on:
  • The UK context
  • Meeting individual needs
  • Children’s views
  • Longitudinal research
Citation

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