

ADOPTION DISRUPTION: THE EXPERIENCE OF FIVE YOUNG WOMEN

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The candidate confirms that the work submitted is his/her own and that appropriate credit has been given where reference has been made to the work of others

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ABSTRACT

This thesis explored the experience of adoption and adoption disruption from the perspective of young women. Adoption disruption refers to the irretrievable break down of an adoption where the young person no longer resides with the adoptive family. Approximately 20% of UK adoptions disrupt, with precipitating factors including multiple placements prior to adoption, older age at placement and 'challenging behaviour'. Little is known about how young people experience adoption and adoption disruption, which, in practice means that services have a limited evidence-base to draw upon. Given the complex needs and increased risk of psychopathology that is present in adopted populations compared to non-adopted populations, establishing well-informed services is essential.

Five adolescent girls, whose adoptions had disrupted between six months and three years previously, were recruited. Two interviews were conducted with each using timelining and photo-production. Data were analysed using Interpretative Phenomenological Analysis (IPA), from which three clusters of themes emerged: regulated and restrained, turning points and determination to be better. Participants described adoptions filled with confusion where it was difficult to develop a sense of identity and adjust to perceived parental expectations. As this continued behaviours emerged that were initially considered essential for survival (i.e. verbal and physical aggression) but led to feeling trapped in unresolved cycles of conflict. In spite of this participants articulated no awareness that in the midst of this conflict their adoption could end in disruption. Post-disruption participants interpreted leaving the adoption positively; it prompted them to master independence and explore their role in relationships in order to thrive. Overall, participants described a journey towards insight, empowerment and independence. Findings are discussed in relation to existing research on i) disruption, ii) attachment theory, iii) identity literature. Clinical implications are then considered. Future research recommendations focus on methodology and exploring disruption from alternative perspectives.

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ABBREVIATIONS

AAI: Adult Attachment Interview
ABC: Attachment and Bio-behavioural Catch up Programme
BPS: British Psychological Society
CAMHS: Child and Adolescent Mental Health Services
DDP: Dyadic Developmental Psychotherapy
HoNOSCA: Health of the Nation Outcome Scales for Children and Adolescents
IPA: Interpretative Phenomenological Analysis
IWM: Internal Working Model
LAC: Looked After Children
RAD: Reactive Attachment Disorder
SoM: State of Mind

CHAPTER ONE: INTRODUCTION

This study explores young people's experience of adoption disruption in the UK. This chapter opens with a reflective statement on what prompted this research and is followed by literature review to justify the need for such research

Adoption breakdown

This thesis will focus on the breakdown of adoption - an area of research with multiple and often conflicting terminology (i.e. disruption, displacement and dissolution). This is partly as a result of cross-cultural variation (i.e. variance in the social construction of adoption and how it fits into services) but also recent efforts to better classify adoption outcomes (Rushton, 2003). Defining these terms helps to clarify how the breakdown of disruption is constructed in the UK and what this thesis means when it refers to 'adoption disruption'.

Adoption disruption refers to the irretrievable breakdown of a placement either preceding or following legal completion (where the child is legally adopted) whereupon a child re-enters the 'child welfare system' (Berry & Barth, 1990; Festinger & Maza, 2009; Rushton, 2007). This has been referred to as a somewhat crude way of measuring outcomes in adoption (i.e. either disrupted or successful) and research has subsequently focused on developing a broader range of outcome classifications that are based on factors including emotional and cognitive functioning of the child (Rushton, 2003). However, producing a wider classification system could increase variance that affects ability to compare findings. In spite of this, the Department of Health has expressed a desire to better track outcomes of adoption, for instance recording the number of disruptions and reasons why. Unfortunately, this process can be highly time-consuming resulting in vulnerability to incomplete or missing data; Rushton (2003) comments that detailed interviews would be required in order to reliably ascertain whether the breakdown of the adoption is actually irretrievable.

Difficulties determining that an adoption has irretrievably disrupted highlights the usefulness of a broader classification system and introduces terminology that has become increasingly common in American research; Festinger and Maza (2009) refer to 'adoption displacement' and 'post-adoption placement'. These terms have been suggested given the fact that although

adoptions can become distressing and the child may leave the adoptive home many children are reunified with their adoptive parents regardless of whether the adoption has been legally dissolved or not. Thus, determining that an adoption has irretrievably broken down is almost impossible as reunification could never be discounted. Additionally, this suggests that classification is transient, which affects efforts to reliably record and explore outcomes in clinical and research settings.

Adoption dissolution is a predominantly American term that refers to the legal termination of an adoption (Festinger & Maza, 2009). US efforts to accurately record the number of adoptions that end in dissolution have been challenging and to date no such effort has been published in the UK. Exploring data collected on this subject, Child Welfare Information Gateway (2012) describe that although children may leave the adoptive home it has been fairly rare that dissolution follows as it is anticipated by parents that the child will return to the adoptive home at some point (e.g. Groze, 1996).

Festinger and Maza (2009) debate the influence of negative connotations that could be associated with terms such as disruption, displacement and dissolution, arguing that the introduction of neutral terms such as 'post-adoption placement' to signify a child's re-entry into foster-care could significantly improve outcomes. For instance, they suggest that 'displacement' evokes images of failure and disappointment which could lead to poor expectations amongst professionals and families potentially reducing the likelihood of reconciliation. Festinger and Maza (2009) suggest that 'post-adoption placement' could still allow services and families to be hopeful regarding outcome.

Following consultation¹ it was established that adoption disruption is the most commonly referred to term in the UK and particularly in the service recruitment would be taking place from. Furthermore, this term was used in keeping with the definition stated previously. Displacement was a term that clinicians tended not to use though they were aware of it. Dissolution was infrequently referred to as it was reported² that lengthy legal processes mean

¹ The following consultation took place: 20/01/2012: Northern UK Children's Services with Head of Children's Services, 18/10/2011: Child and Adolescent Mental Health Services with CAMHS Practitioner and adoption team, 09/09/2011: Barnados UK with Manager, 02/09/2011: After Adoption Yorkshire with Team Leader.

² During a meeting with the adoption team in CAMHS terms were discussed and clarified.

children have often exited services at completion and furthermore this was seen as an American term. Therefore, the term 'adoption disruption' was used throughout this study.

Context of adoption in the UK

Adoption

Adoption is a legal process whereby parental responsibilities of a child under the age of 18 are transferred to a new carer(s) and often contact with the biological family ceases (BAAF, 2011). In the UK, 2004-2005 saw a 38% increase in adoption compared to 1999 to 2000 although subsequent records indicated a year on year reduction; 2008 to 2009 saw adoption rates dip by 13% (3300 adopted from 60900 looked after children), which continued into 2010 (3200 adoptions taking place). Latest figures available suggest that this trend has changed again and in the year ending 31 March 2012, 3450 looked after children were adopted - the highest figure since 2006 and an increase of 12% in comparison with 2011 figures (Barratt, 2011; Department for Children, Schools & Families, 2009; Department for Education, 2011; Department for Education, 2012; Rushton, 2007). To date, over 4000 children are 'available' for adoption in England (Department for Education, 2013).

Notably, adoption applications have also seen significant changes in the last thirty years. In 1997 about half of UK adoptions were a step-family adoption, which suggests that since the 1960's the composition of British families has changed from the traditional nuclear family (Neil, 2000). Alternatively, it may be that schemes established to maintain intactness in birth families considered 'at risk' are effective, therefore reducing the number of adoption applications and increasing the number of looked after children exiting care through reunification with birth family (e.g. Bernard, Dozier, Bick, Lewis-Morrarty, Linheim & Carlson, 2012).

The average age of adoption in the UK is three years and ten months with the majority of children adopted under the age of four years; estimates range from 62% to 73% (Department for Education, 2011, Department for Education, 2012; Rushton, 2007). 2011 saw only 60 children adopted under the age of one year, with two years seven months being the average time in care prior to placement.

Furthermore, the majority of children in care were aged between 5 and 15 years old (55%), all of which implies that older child adoption looks likely to increase (Department for Education, 2011). This is important given the implications of older child adoption (i.e. increased risk of disruption, Rushton & Dance, 2006).

Why is a child placed for adoption?

Neil (2000) suggests the primary circumstances in which a child is placed for adoption are: social services and the courts mandate the adoption in the child's best interests, birth parents request adoption as living circumstances are felt to be too complex, and children are relinquished (i.e. parents do not wish to care for the infant although there is no evidence to suggest they are unable to do so). In 2011, 72% of children were placed for adoption due to abuse or neglect, 12% due to family complexity or 'dysfunction' and 8% of children were relinquished (Adoption UK, 2011). Consequently, adoption has been described as an intervention intended to encourage attachment, cognition and physical growth (Luckock & Hart, 2005; van Ijzendoorn & Juffer, 2006). This reflects evidence that infants growing up in neglectful or abusive environments are likely to suffer developmentally (e.g. impaired neurodevelopment, Perry, Pollard, Blakley, Baker & Vigilante, 1995). Evidence demonstrating the success of adoption as an intervention is varied. van Ijzendoorn and Juffer (2006) report 'catch up' in some domains but not others (i.e. educational achievement remains low in comparison with non-adopted children suggesting lack of cognitive 'catch up') whereas Brodzinsky (1987) reports developmental attainment in keeping with non-adopted children if infants are adopted at an early age (i.e. less than 18 months). Thus, age at placement is crucial and based on life prior to placement adoption may be intended as a radical intervention to remediate the effects of trauma.

What may be just as important as the child's life prior to adoption, when considering what contributes to 'successful' adoption, is the prospective adopter's life prior to adopting. Potential adopters are likely to fall into one of three categories; relatives of the biological parents, foster parents who have opted to adopt or they are unrelated individuals with no prior contact with the child (Bernal, Hu, Moriguchi & Naypal, 2007). Parents in the last category are likely to be white, middle class, of good income and educational background and recently of increasingly varied marital status and sexuality (Adoption UK, 2011; Brown & Cocker, 2008; Scott-Bonham, 1977). The fact that such candidates may be

expected to parent children with traumatic early experiences implies the importance of carefully matching families and preparing parents for the reality of adoption.

How common is disruption?

Figures on adoption disruption are inconsistent, which is due in part to multiple and over-lapping terms, difficulties determining that an adoption has truly disrupted and the time consuming nature of assessing disruption therefore creating vulnerability to incomplete data sets. Based on the previously stated definition, one estimated prevalence of adoption disruption is about 20% in the UK (Dance & Rushton, 2005; Rushton, 2007). This is comparable with the USA which reports disruption rates between 10 and 25%; factors such as the nature of the population being examined, length of study and geography were cited as reasons for variance in estimates, however reasons for disruption mirrored those reported in UK samples (Child Welfare & Information Gateway, 2012).

A longitudinal study of 99 children adopted between the ages of five and eleven in the UK found that six years post-adoption, 49% were considered themselves 'successful', 23% had legally disrupted and 28% remained intact but stated that they were experiencing significant difficulties (Rushton & Dance, 2006). The core precipitators of disruption were:

- Age at placement – increasing age positively correlated with incidence of disruption.
- Being rejected by birth parents.
- Duration of time in care and the number of placements prior to adoption.
- Emotional and/or behavioural difficulties in the adopted child.

Similar findings have been reported elsewhere (e.g. Coakley & Berrick, 2008; Holloway, 1997; Peters, Atkins & McKay, 1999). In 'specialist' adoption, so called because disability is likely to be present, perceived difficulties in forming new attachments were magnified, which was reported to significantly contribute towards decisions to disrupt (Schmidt, Rosenthal & Bombeck, 1988). Interestingly, unlike research exploring foster placement breakdown - where parental variables such as commitment and parenting style are considered significant mediators of

success (Oke, Rostill-Brookes & Larkin, 2011) - parental variables tend not to have been reported as precipitators of disruption in adoption; only one study reported that the lack of apparent attachment with adoptive parent(s) one year following placement contributed towards disruption (Dance & Rushton, 2005). This prospective study reported that in instances where adoptive mothers held a negative perception of attachment quality, the odds ratio of disruption was significantly greater than predictors including time in care or age at placement (8:1). However, this does suggest that the attachment process appeared to be impeded by variables including age at placement and display of challenging behaviour.

Future directions for adoption

In December 2011, the UK Government announced plans to overhaul the current adoption system in England in order to expedite the adoption process and achieve increased adoption rates and more immediate stability for children (Department for Education, 2011, Department for Education, 2013). In order to realise this, the Department for Education recommended reducing the emphasis on ethnic matching in order to increase the number of potential matches, expediting the adopter assessment procedure so that assessment takes a maximum of four months, and recommending that placements occur in lieu of the court's placement order to reduce families waiting time (Department for Education, 2011). Although these plans were welcomed by BAAF, they also recommended caution to ensure that speed does not supersede quality, emphasising the practical support that can sometimes be required to maintain intactness. For instance, practical implications of expedited legal processes could include increased caseloads and bureaucracy with less time available to work with adoptive families at a time of significant transition (BBC, 2011). Consequently, adoption disruption has been placed on the Government's agenda and in late 2011 the University of Bristol was commissioned by the Department for Education (2011) to undertake research exploring rates of adoption breakdown (University of Bristol, 2011).

Families' experience of adoption

The UK government Green Paper *Every Child Matters* (2003) describes that health and safety, emotional well-being and economic well-being are the basic necessities for each child living in the UK. Consultation within Children's Services agreed that to achieve these goals active participation of professionals, parents, young people and children was required. Consequently, the first Commissioner for Children was appointed to give children, particularly the most vulnerable, a voice in government and policy (Hawkins, Beckett, Castle, Groothues, Sonuga-Burke, Colvert, Kreppner, Stevens & Rutter, 2007; HM Government, 2003). The impact of this can be observed by the implementation of the Adoption and Children Act (2002) which aimed to place children at the heart of policy and service decisions stating that "by listening to children's views it may be possible for services to be better designed and targeted to meet their needs" (pp. 5, Hawkins et al., 2007; HM Government, 2002). However, in practice, very little adoption research has elicited opinion from young people and children. Reasons for this include ethical concerns such as consent, confidentiality, power dynamics between the interviewer and child and the sensitivity of the subject (Hawkins et al., 2007). In spite of this, a small evidence base suggests that these obstacles can be overcome and research has been conducted that begins to reveal children and young people's adoption experiences.

Sherrill and Pinderhughes (1999) elicited opinion from 15 adopted children aged between 8 and 11 and 15 matched non-adopted counterparts in the USA, and reported that young adopted people described confusion around the stability of adoption. Many believed that services or the courts held the power to terminate adoption at any time, suggesting that adoptees hold insights about adoption processes that services could learn from in terms of clarity and preparation for placement. Furthermore, from the perspective of parents (n=58) and adopted adolescents (n=37), Wright and Flynn (2006) explored what contributes to successful adolescent adoption in American families. Parents felt it was imperative to hold realistic expectations of what adoption would bring and for both parents and adolescents having the shared goal of forming a family was seen as important for success. Parents were asked if they had ever considered disruption; 26% responded that they had as a result of the adolescents' disruptive behaviour and emotional difficulties: "I loved her but I couldn't stand her, and sometimes now I want to throw her out because she can be so difficult emotionally" (pp. 499, Wright & Flynn, 2006). Thus for parents, the emotional impact of challenging events

threatened the intactness of the adoption. However, when exploring what prevented the disruption, parents reiterated the commitment they had towards the adolescent. Interestingly, adolescents were not asked if they had ever considered disrupting their adoption, suggesting adoptive young people may be relatively powerless concerning the future of their adoption.

Adolescents revealed that life prior to adoption (i.e. time with the birth family or attachment with foster carers) has a continuing impact; one adolescent commented that the hardest thing about adoption was “letting go of the people from my past” (pp. 501, Wright & Flynn, 2006) whilst another commented the worst part is “knowing that I can’t move away. Sometimes life is hard and I was used to being able to move to a different place and live with different people” (pp. 501, Wright & Flynn, 2006). Speculatively, the latter quote alludes to difficulties in sustaining attachment when challenging situations arise. Hypothetically, support from external agencies at this point might be valuable and therefore understanding more about the interpretations that adolescents make when a ‘permanent’ placement ends could be beneficial for services.

Hanna, Tokarski, Matera and Fong (2011) interviewed 30 American adolescents adopted from foster care at an older age (at least 8 years old) to explore emotional and developmental adjustment. The emphasis in this instance was identity formation, which brought about the conclusion that identity in adopted adolescents can be considered as a continuum ranging from unexamined (the majority in this study) through to resolved and integrated. Many factors influenced this: age when entering foster care, number of placements, and contact with birth family. When reflecting upon personal gains made through adoption terms included ‘strength’, ‘maturation’ and ‘decision making’; many felt adoption and foster care had forced them to grow up and become independent at an earlier age although these characteristics were interpreted as strengths developed in spite of adversity. One young person had chosen to disrupt her adoption and return to her birth family quoting “that’s my family [birth family], that’s who I remember. That’s me...that’s my real family” (pp. 121, Hanna et al, 2011. F, 23, entered foster care age four, adopted age nine by foster parents). This was discussed in the context of belonging, however, with no reference to adjustment following the disruption (i.e. was placement with the birth family successful) there remains a gap in the literature regarding life post-disruption.

Although sparse, children and young people involved with adoption are beginning to gain representation in research, which suggests that targets identified in Every Child Matters (2003) and the Adoption and Children Act (2002) are achievable. However, such research has focused on 'successful' adoption, which means that there is a noticeable absence of accounts from young people experiencing disruption. Furthermore, such qualitative research has been exclusively American, which limits the extent to which the findings can be applied in a UK setting given cultural variance (for instance, variance in terminology has been spoken about – see 'Adoption breakdown'). Consequently, if well-rounded, evidence based services are to be offered in the UK, this gap needs to be addressed.

Summary: Adoption in the UK

Research relating to the number of adoptions taking place per annum and the relatively high rate of disruption (about 20% in the UK) coupled with limited literature that explores the experience of adoption disruption or adjustment to life post disruption (for young people or parents) indicates a gap in the evidence base. Qualitative research has demonstrated that although adolescents are capable of offering informed and articulate reflections about the processes of adoption (i.e. what makes it successful) their perspective about the 'failure' or challenges of their adoption has not been adequately sought out. In addition to this, government plans to overhaul adoption processes means that there is likely to be intensified pressure on services to expedite adoption processes. One consequence of this is likely to be limited support for families due to service constraints. Research exploring adoption disruption could therefore a) develop understanding about appropriate support and b) support services in justifying clinical provision for this population.

Reflection – Why this topic?

My interest in adoption disruption developed during my employment in an Adoption Psychology Service where I gained insight into some of the challenges facing adoptive families and professionals. For example, adapting to family life, parenting challenging behaviour and service constraints (i.e. the service could only

work with families up to three years post-adoption). I became involved with the facilitation of parenting groups, grounded in attachment and social learning theory, which had the remit of helping parents understand their children's behaviour, reduce 'challenging behaviour' and encourage attachment. Service evaluation suggested these groups were effective. However, I continued to encounter families who described being close to 'collapse' or where disruption had already occurred (i.e. the child had permanently left the adoptive placement). Consequently, I experienced meetings where professionals expressed despair that they did not know how best to support families in such circumstances. This led me to begin exploring research literature on adoption disruption – a search that was largely unfruitful as I found little that could inform how professionals might best intervene prior to or following disruption. Thus, I reflected that exploratory research in this area could have clinical resonance and support families facing disruption.

Attachment: Making sense of disruption

As mentioned, in some instances adoption is proposed as an intervention intended to mitigate the consequences of early adverse experiences such as abuse. Success is frequently rated in terms of intactness, parent-child relationship quality (attachment) and emotional, physical and cognitive 'catch up', however, outcomes are variable (e.g. van Ijzendoorn & Juffer, 2006; Wright & Flynn, 2006). It is likely that when an adoption disrupts, and is therefore classified as 'unsuccessful', it is the parent-child relationship itself that has broken down. Thus, exploring attachment theory helps to develop understanding about what contributes to the success or failure of adoption and how services might best intervene.

Attachment in childhood

Attachment theory emerged from observation of human and non-human primates exhibiting behaviour (e.g. crying) in order to elicit proximity with a caregiver, primarily the mother (Bowlby, 1969). Bowlby hypothesised that achieving proximity facilitated survival and consequently he suggested that each infant possesses an innate 'behavioural attachment system' so that when threats to survival are perceived (i.e. separation from the mother), the infant attempts to

gain proximity and therefore security and survival (Main, Hesse & Kaplan, 2005). In turn, the attachment figure has the potential to regulate the infant's distress and restore harmony.

Over the first year of life the child internalises this relationship forming a mental representation of the care they have received – this is known as the Internal Working Model (IWM). The infant learns to monitor external and internal stimuli and make predictions about their environment based on the IWM. In the event that distress is predicted (i.e. a threat to security is perceived) the infant adapts their behaviour to ensure their security and survival (Ainsworth, 1979; Bowlby, 1969; Bretherton, 1992; Bretherton & Munholland, 2008; Dubois-Comtois, Cyr & Moss, 2011; Walker, 2008; Zeanah, Mammen & Lieberman, 1993; Zimmerman, 1999). Illustrating this, if an infant has multiple experiences of their basic needs going unmet, they are likely to predict that their needs will not be met in future situations. Thus, when a threat to survival is predicted the infant will learn how to act in order to ensure survival, for instance avoiding an emotionally abusive caregiver and becoming self-reliant instead (Zimmerman, 1999).

This process has been emphasised by the laboratory based Strange Situation Procedure (SSP) from which a series of attachment classifications were developed based on the behaviour that children displayed when separated and reunited with their caregivers; secure, ambivalent, avoidant and disorganised (Ainsworth & Bell, 1970; Ainsworth, 1979; Main & Solomon, 1990). This research demonstrated the range of coping strategies that 'insecure' children may employ when they have learnt that their caregiver may not offer the security that they require, which is relevant when reflecting on experiences that adopted children may have encountered.

'Secure' infants are likely to have consistent caregivers who respond appropriately to distress, which encourages affect-regulation and development of autonomy. Inconsistent or insensitive care is associated with ambivalence (where the child is difficult to soothe due to scepticism that care will be received). Rejection from the caregiver, which might be seen in situations of neglect, results in avoidance (where the child strives for independence and self-reliance). In spite of their insecure label, these attachments are considered functional as they encourage sufficient proximity to be achieved and represent some organisation of attachment behaviour. Disorganised attachment, however, refers to children where there is absence of any apparent attachment strategy; they express

contradictory emotions that occur simultaneously and display apprehension around the parent – there is often behavioural conflict between approach and avoidance which can result in fearful or mistimed behaviours at reunion (Green & Goldwyn, 2002). The key factor distinguishing disorganised from secure and insecure attachment is the lack of goal direction (i.e. it appears behaviours are not used to attain proximity).

Attachment and adoption

Adopted children are at heightened risk of insecure or disorganised attachment in comparison with non-adopted counterparts due to increased likelihood of exposure to trauma (e.g. abuse or neglect) prior to placement. Furthermore adopted children are likely to have encountered multiple styles of parenting prior to placement (i.e. birth parents, foster carers), which creates confusion making it difficult for the child to develop a coherent behaviour attachment system. Consequently, mental representations of attachment developed prior to placement are likely to affect an adopted child's ability to anticipate and respond effectively to their environment. For example, it could be confusing for a neglected child when placed with an attentive adopter as this is an alien experience and they do not know how to respond; threat might be perceived when the adoptive parent offers love or affection. In this situation internal disharmony has occurred because circumstances do not reflect mental representations (e.g. that adequate care will not occur) and the child acts in a manner that will create security and familiarity (i.e. avoidance of care prompts hostility from the parent, which the child is accustomed to). Although it is likely that this behaviour will be distressing for both the child and adoptive parent, the child has regulated their affect by creating 'normality'. This resolution comes at a cost however as the experience reinforces perceptions that 'neutral' or 'positive' situations (i.e. adoptive parent care-giving) are threatening (Bretheron & Munholland, 2008). Therefore the child actively seeks to make the situation reflect their expectations which means that 'positive' or seemingly innocuous experiences (i.e. praise).

In terms of adoption disruption, the child's difficulties anticipating their new environment, in addition to the potential that adoptive parents might not understand their child's rejecting behaviour could contribute to disruption. This hypothesis is supported to some extent by the finding that risk of disruption

increases with the number of placements (and therefore carers) encountered prior to placement. Subsequently, understanding more about how adopted children and young people experience their adoptive parent-child relationship could offer insights about how attachment security is perceived and how professionals could better support adoptive families.

Challenging behaviour that threatens intactness

'Challenging behaviour' is described as a core precipitator of adoption disruption (Dance & Rushton, 2006). Understanding of challenging behaviour in adopted and LAC increased exponentially following the fall of Nicolae Ceausescu's regime in Romania and the discovery of severely mistreated Romanian orphans. This discovery prompted extensive attachment based research with the results prompting recognition of the relationship between trauma, attachment and the consequent expression of 'unusual' or 'challenging' behaviours. For instance, Chisholm (1998) reported that Romanian orphans were significantly more likely to be labelled 'insecure' and display indiscriminate friendliness (i.e. engaging with strangers) and 'challenging behaviour' than Romanian children adopted before the age of four months. Furthermore Zeanah, Smyke, Koga, Carlson and the Bucharest Early Intervention Project Core Group (2005) exploring a sample of Romanian LAC aged between 12 and 31 months, described displays of significant behavioural disturbance, and suggested that apparent disorganised attachment behaviour was directly associated with the quality of care received. This research enhanced understanding that significant attachment trauma results in disorganised behaviour attachment systems and subsequent behaviour, including indiscriminate friendliness or 'disruptive, aggressive behaviour'. This could threaten adoption by inhibiting the child's ability to engage in a sustained, stable attachment relationship.

Clinically, such behaviour has been categorised under the diagnosis 'Reactive Attachment Disorder' (RAD), which, although widely agreed to exist clinically, remains a diagnostic category with a limited evidence base and continuing debate regarding assessment and treatment (Hanson & Spratt, 2000; World Health Organisation, 1992). Typically, children with RAD display indiscriminate social interactions in a range of contexts, limited awareness of social boundaries and have difficulties comprehending and responding to social cues (Green & Goldwyn, 2002; Hanson & Spratt, 2000; O'Connor, Rutter & the

English and Romanian Adoptees Study Team, 2000). Children who have experienced abuse or neglect – a considerable proportion of children in the care system - are thought to be at the highest risk of receiving a RAD diagnosis (Green & Goldwyn, 2002; Hanson & Spratt, 2000). This does not mean that all children encountering traumatic experiences or insecure or disorganised attachment will have RAD - a misinterpretation that might have led to over-diagnosis (Hanson & Spratt, 2000; Reber, 1996).

However, it does mean that attachment may best be considered as a continuum ranging from highly adaptive behaviour strategies to less adaptive strategies that, at their most severe, may reflect a diagnosis of RAD (Boris & Zeanah, 1999). This means that children with attachment related trauma are significantly more likely to have incoherent attachment systems and thus a limited range of coping strategies in comparison to secure counterparts. Consequently a child with insecure or disorganised attachment, entering a new adoptive environment is unlikely to have the strategies required to cope resulting in challenging behaviour which could be negatively interpreted by parents, affecting adoption 'success' (Bowlby, 1988; Zeanah et al., 1993). However, this is predominantly based on empirical research which neglects consideration of how young people perceive their behaviour and its function, which could either differ or reinforce this evidence base.

Attachment security post-adoption

Exploring the relationship between early traumas and attachment indicates that in adoption children may have pre-existing ways of managing attachment relationships prior to placement. These strategies could influence consequent behaviours that become apparent in the adoption and attachment quality. Therefore it is helpful to consider whether attachment changes with time (i.e. is the child able to develop a secure attachment with an adoptive caregiver?). Evidence on this subject is variable; some changes in the attachment status of adopted children have been recorded and are thought to have resulted from environmental change (i.e. adoption itself). For instance, when assessing children adopted during infancy or older childhood using a story stem technique, Hodges, Steele, Hillman, Henderson and Kaniuk (2003) reported that although older placed children had more insecure or disorganised mental representations of attachment compared to children adopted during infancy where abuse or discontinuity in care had not been

encountered, changes were observable at one and two year follow up. Late placed children displayed slightly less anxiety and fewer avoidance techniques when discussing emotive topics (within the context of the story-stem technique) than they had previously; however, expression of 'extreme' aggression remained high. This suggests that some children had developed an increased repertoire of coping strategies when regulating affect (i.e. anxiety) though coping strategies such as challenging behaviour persisted.

On the other hand, when addressing continuity, a 23-year longitudinal study in which attachment status classified in non-adopted children was followed up, Roisman, Padron, Sroufe and Egeland (2002) demonstrated that some individuals originally classified insecure or disorganised had not only resolved early attachment traumas resulting in autonomy (i.e. engagement in successful adult relationships) but also expressed few indicators of internalised distress (i.e. psychopathology). However, this research did not take place with an adopted population, therefore these findings have limited generalizability; it is likely that in an adopted population, where experiences of attachment related trauma are more likely, the trajectory of attachment recovery is not entirely comparable. Therefore, research exploring the continuity of attachment status is sparse and variable, though exploratory research does suggest that some children are able to develop earned-secure status. In the context of adoption disruption, nothing is known about the perceived experience of stability from the perspective of those involved (e.g. the young person, parent or professional) which limits support that can be put in place.

Summary: attachment and childhood

Attachment theory proposes that infants are born with innate behaviour attachment systems that prompt them to seek proximity and security with a caregiver. This relationship is internalised over time and, according to the quality of parenting received children will learn to anticipate and respond to their environments. Children with experiences of trauma and multiple caregivers could find it challenging to adapt to situations such as adoption as they may find it difficult to predict the environment and have a limited range of coping strategies. Consequently, the presence of insecure or disorganised attachment may result in 'challenging behaviour' (i.e. aggression or disinhibition) and emotional lability that

make it hard to develop a secure adoptive attachment and heighten the risk of disruption (i.e. Dance & Rushton, 2005; Rushton & Dance, 2006).

Attachment in adulthood

The progression of attachment

The transition from child to adolescent to young adult is a significant period in human development. It marks physical maturation and is characterised by a rapidly developing capacity for emotional, social and cognitive functioning (Allen, 2008; Dykas & Cassidy, 2011). For instance, operational thinking styles emerge during adolescence, which enable young people to think in increasingly abstract and complex ways. In terms of attachment, adolescents are able to apply positive and negative interpretations to attachment related experiences and moderate their stance within and towards an attachment accordingly (Keating, 1990; Steinberg, 2005). This exemplifies emergence of autonomy and importantly the shift in cognition that underlies attachment; the IWM has evolved to become a generalised model referred to as state of mind (SoM) with respect to attachment, which is rooted in previous attachment relationships (Allen, 2008; Main, Kaplan & Cassidy, 1985; Main et al., 2005; Shumaker, Deutsch & Brenninkmeyer, 2009).

The Adult Attachment Interview (AAI) is the primary vehicle through which attachment SoM has been explored and requires reflection on early attachment experiences. The assessment is based on discourse analysis and primarily the “level of coherence and collaboration...around their own attachment related experiences” (pp170, Goldwyn & Hugh-Jones, 2011; Hesse, 2008; Main & Goldwyn, 1984; Main et al., 1985). Consequent attachment SoM’s are: ‘secure-autonomous’ whereby the adult can evaluate attachment experiences with objectivity, ‘insecure-preoccupied’ where the adult strays from the topic or is preoccupied with early attachment experiences, and ‘insecure-dismissing’ where the adult is inconsistent (e.g. idealising a relationship without being able to provide evidence) (Goldwyn & Hugh-Jones, 2011; Main & Goldwyn, 1984; Main et al., 1985). Later added categories include ‘unresolved/disorganised’ where early attachment experiences appear not to have been assimilated resulting in interference during discussion and ‘cannot classify’ (Hesse, 1996; Hesse, 2008). Thus, with cognitive development, the conceptualisation of attachment changes and though still informed by early attachment experiences, young adults possess

increased insight into their attachment relationships and have greater influence over their position in such relationships.

Attachment SoM and the adoptive parent

Attachment SoM has contributed to understanding about the role that parents play in the transmission of attachment security (Main et al., 1985). Initial conclusions, subsequent replications and meta-analyses have confirmed that mothers' and fathers' own attachment representations significantly influence the attachment security of the child (van Ijzendoorn, 1995). Steele, Henderson, Hodges, Kaniuk, Hillman and Steele (2007) describe that when a child is placed in an adoption the parent develops a mental representation of the child, based on their own attachment experiences, which will inform their response to the child. For instance, the child's early experiences and self-perception (e.g. as being unworthy, unlovable) shapes the behaviours they express (i.e. arguing, refusing to be comforted). In turn, the parent's interpretation of this behaviour is based on their own experiences and sense of self; a somewhat insecure parent might question their own lovability and ability to parent (Lieberman, 2003). They might come to view the child as rejecting and consequently they avoid offering affection to limit their experience of rejection.

On the other hand, Walker (2008) suggests that the ideal substitute carer has an autonomous SoM whereby personal traumas are resolved, there is flexibility in managing feeling in oneself and others and there is reflexivity (i.e. situations can be seen from alternative perspectives). The autonomous adoptive parent is therefore anticipated to be flexible in their response to challenges that a child may present and able to remain present emotionally and cognitively should any of their own distressing memories surface (Hughes, 2003). Thus, certain attachment styles between parent and adopted child might be more complimentary than others in fostering secure attachment, which could potentially influence the success of the adoption.

The parents' role in recovering security

Research exploring the parents' role in recovering attachment security post adoption is surprisingly sparse. However, Kaniuk, Steele and Hodges (2004)

explored parental attachment SoM as a mediator of outcome finding that two years post placement even late placed children made progress cognitively and emotionally if placed with autonomous parents (although progress remained slower than children adopted when aged less than six months old). Additionally, Pace, Zavattini and D'Alessio (2012) reported that late placed children can adapt their attachment behaviours, particularly if placed with secure-autonomous parents. In the same study, adoptive parents considered to have an unresolved attachment status expressed difficulties in focusing on their child's needs and reported feeling hurt and rejected by the child's behaviour, echoing both Walker (2008) and Kaniuk et al., (2008). One tentative conclusion may be that parental SoM is a mediating factor in achieving attachment security in adoption and that this needs greater consideration during the matching process. However, limited service resources could limit application of this knowledge.

Summary: Parents' attachment

Parenting style (as mediated by attachment SoM) could contribute towards establishing a secure attachment with an adopted child. Equally, the parents' way of relating to a child (i.e. their perception of attachment behaviours) could also contribute to adoption strain and eventual disruption. As yet this topic is largely unexplored in research and in the event that research did take place clinical recommendations might be limited. For instance, it is unlikely that services possess the manpower or financial resources that would be required to assess attachment SoM in each prospective adopter and intervene where required. This is especially true given recent government driven changes to expedite the timeframe of adoption processes significantly (Department for Education, 2011). However, exploring young people's perceptions of parents could begin to illustrate the parents' role in disruption.

Service provision in adoption

Exploring the relationship between attachment and adoption revealed that adopted children and adolescents are at risk of psychosocial difficulties (i.e. disruptive behaviour, anxiety, depression), which are recognised precipitators of disruption (Rushton & Dance, 2006). This is reflected by the overrepresentation of

adopted children in child and adolescent mental health services (CAMHS) compared to their non-adopted counterparts. This prompted UK government initiatives to place pre and post adoption support on the “political and professional agenda” (pp. 124, Luckock & Hart, 2005; Howe, 2001; Verissimo & Salvaterra, 2006).

UK services place emphasis on evidence-based practice, which is intended to enable delivery of a high quality standardised service on a national scale. But the evidence base is variable. This is partially because attachment theory remains a framework for understanding and offers little in the form of intervention (e.g. Steele & Baradon, 2004) but also because little is known about how young people experience their adoption and adoption disruption. Consequently, services may lack service user based evidence on which to base their practice, which limits support available. The following section will review current interventions available to adopted families and will identify how further research could be beneficial.

Preparing prospective adopters

The Adoption Agencies Regulations (2005) stipulated that prospective adopters must be prepared for the reality of adoption. Agencies therefore have a responsibility to teach parents about the type of children who are likely to be placed for adoption, including reference to the trauma they might have encountered and how this could influence any subsequent adoption (Department for Education and Skills, 2006). This training may be offered through tutorials, workshops with other prospective adopters and individual work (i.e. research and reading). Role play is recommended in order for participants to develop experiential awareness of adoption and also to reflect on their own experiences.

The core curriculum includes education about the process of adoption, what is involved in assessment and the matching process. Information about the child is also discussed (i.e. basic development, attachment needs and contact needs) and there is opportunity for skill development (i.e. how to manage health care needs). In instances where there is a birth child in the prospective adoptive family it is also recommended that the child is prepared for adoption. It is suggested that parent should lead this process with support from a practitioner.

Research exploring experiences of preparation training is sparse and tends to focus on specific areas, for instance 'special needs' adoption, which includes children who are 'at risk' of emotional, and/or behavioral problems; Berry (1990) reported that American prospective adopters concluded that they required more 'child-specific' information and training on how to manage challenging behaviour, which has been mirrored by subsequent (although American) research (e.g. Sar, 2000; Schweiger & O'Brien, 2005).

On the other hand, Logan (2010) explored UK prospective adopter's experiences of preparation and specifically training regarding maintaining contact with birth family. Overall, it was felt by adopters that insufficient attention was paid to helping them anticipate their emotional responses to birth family in addition to a lack of exploration during training about how to manage the consequences that might arise post-adoption with ongoing contact. Furthermore, adoptive parents displayed variation in the extent to which they had been involved in the planning process for such contact, which was relevant in terms of subsequent contacts post-adoption. This suggests that in spite of good intentions, the training programme in this instance did not meet the needs of prospective adopters.

Psychoeducation

Psychoeducation is defined by the National Institute for Health and Clinical Excellence (2006) as a structured programme delivered on a group or individual basis that considers a presenting problem from multiple perspectives (i.e. social, family, and biological) in addition to providing information, support and management strategies. Such programmes have been used across the life span and for a range of presenting problems (i.e. mood disorder, anxiety) (Fristad, 2006; Getachew, Dimic & Priebe, 2009; Murphy, Rayman & Skinner, 2006).

Frequently the aim of intervention in adoption and fostering is to establish a stable relationship between the parent and child so that the child is able to proceed through developmental stages as may be anticipated (i.e. to internalise positive relationships and engage in self-directed affect-regulation). Therefore psycho-education is often based on the social learning theory principle that if "parents change their behaviour the child's behavioural and emotional adjustment will improve" (pp. 39, Golding, 2010). Such psycho-educative parenting programmes tend to explore how to parent challenging behaviour (i.e. boundary

setting) whilst being mindful of their child's early experiences and have proven effective in realigning the adoptive parents' expectations of adoption with reality. Hypothetically, increased understanding of the child's behaviour means that parents interpret behaviours more sympathetically, which alters interactions, reduces parental stress and improves the parent-child relationship (Golding, 2007; Gurney-Smith, Granger, Randle & Fletcher, 2010; Hodges et al., 2003).

However, psychoeducation has a limited evidence base in adoption specifically - the majority of such research has focused on LAC. For instance the Multidimensional Treatment Foster Care Model is an increasingly evidenced intervention aiming to reduce 'challenging behaviour' and limit foster placement disruption (Chamberlain, Moreland & Reid, 1992; Chamberlain, Leve & DeGarmo, 2007; Price, Chamberlain, Landverk, Reld, Leve & Laurent, 2008). Furthermore, research that has explored psychoeducation in adoption has concentrated on the early stages of adoption when the child transitions, as opposed to later during adoption when difficulties may become more apparent. This might be due to service delivery plans (i.e. some services have time limits; Manchester City Council, 2013), yet suggests that some families are unable to access psychoeducation when need arises. In addition, the efficacy of delivering psychoeducational intervention during the early stages of adoption is debatable; Barth, Crea, John, Thoburn and Quinton (2005) demonstrated few sustained improvements in disrupted behaviour whereas Roisman et al., (2002) reported that 'structured parenting' learnt from psychoeducation was pivotal in the development of secure attachment.

In summary, psychoeducation is an intervention with a limited evidence base in adoption. It furthermore tends to be delivered during the early stages of adoption as an early intervention or prevention strategy as opposed to later during adoption when the challenges of maintaining adoption are more likely to become apparent. Consequently, understanding more about the experience of disruption could offer some insight regarding when psychoeducation is offered what topics are discussed.

Psychotherapy

Adoption itself is regarded as the most radical of attachment interventions, however it is accepted that some families where children carry with them the

consequences of pre-adoption attachment experiences, may require additional support (van Ijzendoorn & Juffer, 2006). Thus a limited range of psychotherapeutic intervention has emerged that focuses on developing secure attachment and remediating 'disruptive' behaviour. This includes the Attachment and Bio-behavioural Catch-up programme (ABC) and Dialectical Developmental Psychotherapy (DDP) (Becker-Weidman & Hughes, 2008; Dozier, Dozier & Manni, 2002; Howe, 2006; Hughes, 2004). However, the robustness of these programmes is debatable; Becker-Weidman (2006a; 2006b) claimed that DDP is an evidence-based treatment that produces clinically significant change. However, Mercer, Pennington, Pignotti and Rosa (2010) refute this, instead suggesting that DDP is evidence-based practice that integrates the best available research evidence and clinical expertise. This is an important distinction as it indicates that conclusions of efficacy must be treated with caution. Furthermore, such intervention appears to be most suitable during the early years post-adoption, which means that little is known how to intervene when more established families reach 'crisis point'.

Overall, a limited range of psychotherapy is available for adopted families and effort continues to be placed on remediating challenging behaviour and facilitating attachment security in the early years post-adoption. Although this early intervention could limit subsequent emergence of difficulties known to precipitate disruption, this means that little is known about how to intervene when families do reach 'crisis point'. Furthermore, it is debatable whether such intervention is evidence-based practice or evidence-based treatment. This distinction is important as it influences the extent to which professionals are able to deliver robust, evidence based services. Consequently, it is crucial to understand more about young people's experiences of adoption and adoption disruption in order to inform services about the needs of young people post-adoption and at 'crisis point' and additionally to help channel existing interventions appropriately.

Multi-agency working

Multi-agency practice is an increasingly popular option when working with LAC and adopted children. Golding (2010) points out that the nature of the difficulties adopted young people face means that working in isolation is unlikely to yield success and therefore multi-agency working across education, health and social care is essential. Effective communication and collaboration is likely to result in "improved decision making and more timely interventions" (pp. 580).

Additionally, Tarren-Sweeney (2010) describes that consultation with other professionals involved with LAC and adopted children, increases the capacity for clinical psychologists to function as advocates, share their specialised knowledge and take ownership of a vulnerable client group. For example, consultation with parents and teachers to maximise and reward positive behaviour could mean that children become perceived as more 'manageable', in turn encouraging attachment to form (e.g. Cairns, 2002). When Callaghan, Young, Pace and Vostanis (2004) introduced face to face and telephone consultation into their mental health team for LAC they reported that, although parents would have appreciated more input with decisions, at five month follow-up challenging behaviour had generally achieved a sustained improvement based on measures such as the strength and difficulties questionnaire and the HoNOSCA. However, Barth et al., (2005) encouraged caution in employing an intervention that delivers the message that children must change, not the parent, which is echoed by research indicating the importance of intervening with the parents own attachment SoM (e.g. Hughes, 2003; Walker, 2008). Specifically in instances of adoption disruption it may be that consultation is an effective way of working when the child is in chaotic or distressing circumstances, but again in order for professionals to engage in effective systemic working it is essential to learn more about the needs of this vulnerable population.

Concluding comments

The preceding literature review has identified that about 20% of UK adoptions disrupt. Precipitators of disruption include placement with sibling, older age at placement, numerous placements prior to adoption, and in particular, expression of emotional difficulties or challenging behaviour. Adopted children may have histories characterised by trauma, which can impede attachment to a new caregiver, thus attachment theory was explored in order to elaborate on why establishing a functional attachment in adoption can be challenging and how this might contribute to disruption. In turn, the attachment SoM of adoptive parents was considered and specifically how this might influence their flexibility and ability to respond to and interpret the child.

Consequently, supporting families throughout the adoption process is a fitting aim for services. However, this review suggested that there are no evidence-based interventions that are developed with adoption in mind, though several

show promise (e.g. ABC and DDP). Further research is therefore required to verify the efficacy of attachment based treatments and to ensure interventions target the needs of adopted individuals and their families. A key part of designing appropriate services for adopted families, particularly those most at risk of disruption, is understanding the experience of adoption and adoption disruption and therefore what families need. Consequently, this research was designed in conjunction with a Northern UK Children's Services in order to ensure that clinically relevant outcomes were achieved that would be of real use to clinicians working in adoption. A summary of these meetings can be found in table 1.

Table 1. Summary of consultation with Children's Services³

Date	Contact
January 2012	<p>Face to face meeting</p> <ol style="list-style-type: none"> 1) Introductions. 2) Researcher outlined research proposal (a piece of research exploring disruption). 3) Discussion about: <ul style="list-style-type: none"> • The process of adoption and disruption • Who should be interviewed (parents, child or professionals involved). Agreed that children would be interviewed • Developing the research question. • What could be gained from such research (i.e. how to assess adopters, understanding about why some adoptions disrupt, how to assist families, insights about the matching of parents and children.
February 2012	<p>Face to face meeting</p> <ol style="list-style-type: none"> 1) Feedback on progress of planning of the research. 2) Discussion of methodology and how best to engage disrupted children - timelines discussed here. 3) Identifying the size of the disrupted population in this area of the UK in order to inform recruitment. 4) Agreeing inclusion/exclusion criteria 5) Conversation about interview questions. 6) Discussion of ethics involved in this research to inform ethics application
March - June	<p>E-mail contact</p> <p>Various e-mails with primary contact in Children's Services (post adoption support manager) to discuss:</p> <ol style="list-style-type: none"> 1) Ethics 2) Dissemination of interview schedules, consent forms and participant information sheets for feedback.

³ Attending these meetings at various points were: the Head of Children's Services, the Post-Adoption Support Manager, Acting Service Delivery Manager and Therapeutic Lead (adoption). Subsequent meetings occurred to manage recruitment and feedback the analysis; however these have not been reported here.

June 2012	Face to face meeting 1) Received feedback about information sheets and interview schedules. 2) Received update about potential participants who could be approached.
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The research question

This study aimed to explore the way in which young people made sense of their adoption and its subsequent disruption. This was achieved through two semi-structured interviews (one based on a timeline, the other photo-production) with five young women who had experienced adoption disruption within the last three years. At the outset it was not intended the sample would be all female, this is discussed in 'Participants' (pp.40).

The objectives were therefore to understand:

- Female adoptee accounts of why adoption disruption occurred.
- The perceived significance of adoption disruption in each female adoptees life.
- What relationship experiences are like for young women who experience adoption disruption?
- What young women, who have experienced adoption disruption, wish to achieve in their future (e.g. relationships, employment).

CHAPTER TWO: METHODOLOGY

This exploratory study aimed to investigate young people's interpretations of their own adoption disruption, examining how they perceived the process of the disruption and its impact on their life. The research question was therefore: how do young people make sense of their experience of adoption disruption? A multiple method, qualitative approach to data collection was used with the data subjected to a single method of analysis namely, interpretative phenomenological analysis (IPA).

Design

Paradigm

Qualitative research comprises a range of methodologies that can explore psychological and social phenomena (Cresswell, 2003; Fossey, Harvey, McDermott & Davidson, 2002). Broadly speaking, there are two principle approaches: interpretative and critical. Critical research is grounded in socio-political theory (e.g. feminism) and strives to increase awareness of social, cultural and historical limitations in order for society to develop. This is a process that can often be achieved through critical appraisal of discourse (Fossey et al., 2002) and has been successfully utilised in psychiatric research, for example, offering a voice to mental-health service consumers (Wandsworth & Epstein, 1998).

Interpretative research aims to develop understanding of human experiences. This can be achieved with various approaches (e.g. phenomenological or ethnographic). The approaches are broadly differentiated by their focus on drawing either idiographic or collectivist conclusions; ethnographic research considers the shared behaviour of communities in the context of social and cultural norms whereas phenomenological research is concerned by the experience of individuals (Fossey et al., 2002). In practice phenomenological approaches have most extensively been applied in health research (e.g. Reynolds & Prior, 2006; Osborn & Smith, 1998) although as their popularity continues to increase they have been applied in a range of domains including clinical, counselling, social and educational psychology producing outcomes relevant to both clinicians and researchers (Eisner, 1997; Fossey et al., 2002; Starks &

Trinidad, 2007). This study aimed to understand adoption disruption from the view point of five individuals. As Hanna et al., (2011) highlight, adoption experiences are highly varied. Consequently, an approach that captures individual differences, language and meaning-making has been chosen; IPA.

Interpretative Phenomenological Analysis

Theory

The phenomenological component of IPA locates its epistemological roots in the writing of philosophers including Husserl, Heidegger, Merleau-Ponty and Sartre. Husserl, a phenomenologist, stressed that consciousness is constantly focused on something - whether this something exists as a tangible object or as a memory of an event - and that furthermore consciousness is intentional: humans are compelled to make sense of their experiences (Moustakas, 1994; Smith, Flowers & Larkin, 2009). Extending this sentiment, Husserl asserted that knowledge exists according to how it is perceived and constructed and thus the construction of reality varies on an individual basis (Husserl, 1999; Larkin, Watts & Clifton, 2006). Consequently, Husserl believed that examination of human experience is crucial; one can only know their own experience even though an event may also have been experienced by others (e.g. the experience of undergoing psychometric testing, Cresswell, Hanson, Clark-Plano & Morales, 2007).

Husserl suggested that if individual accounts can be developed with rigour, 'essential qualities' of the experience can be identified, and when completed with several individuals these essential qualities may "transcend the particular circumstances...then illuminate a given experience for others too" (pp 12. Smith et al., 2009). However, it was Heidegger's expansion of this theory using hermeneutics and consideration of how exactly humans make sense of the world that took Husserl's abstract concept and highlighted the importance of meaning (Smith et al., 2009). Heidegger wrote that people exist in relation to something, therefore context and the meaning-making process is fundamental to understanding phenomenon (Cresswell et al., 2007; Heidegger, 1962; Smith et al., 2009).

Subsequent philosophers such as Merleau-Ponty expanded this theory by suggesting that interpretation is also dependent upon our 'embodiment' with the world. That is, the process of meaning-making is influenced by the body's communication with the world. In addition to highlighting a new mode through which to understand experience Merleau-Ponty also underlines an inherent limitation: the experience of being a 'body in the world' is exclusive to the individual and therefore can never be fully elucidated (Merleau-Ponty, 1996; Smith et al., 2009). Sartre furthermore advocated consideration of personal and social relationships in understanding how humans come to view the world referring to the absence of others as well as presence. He exemplified this through recall of a situation where a friend failed to meet him at a café, altering his perception of the café (Sartre, 1957; Smith et al., 2009).

IPA is thus an approach that combines these philosophies about experience and offers an idiographic approach to analysing accounts of a given phenomenon separately. It may be that 'essential qualities' converge across interviews; however, if this is not the case then difference is celebrated. This differs to alternative analytic methods such as grounded theory; although in grounded theory participants may report on the same experience (i.e. adoption disruption) the aim of the analysis is to examine shared processes, actions or interactions (Strauss & Corbin, 1990). Should an underlying theme be identified across a reasonable number of participants, a general theory can be devised which is grounded in data. By the very nature of aiming to develop an over-arching theory, this approach loses some of the idiography that IPA values. Additionally, in spite of recent advances in grounded theory to incorporate constructivist views, (e.g. Charmaz, 2005, 2006 describes the importance of acknowledging context, values and beliefs during analysis), the present study intended to explore how experiences are interpreted to have shaped the individual. Thus, the aim was to explore individual accounts in depth; IPA offers the researcher significantly greater freedom than alternative analyses (i.e. grounded theory) to do this (e.g. Smith, 2011).

The relevance of the researcher

The presence of a double hermeneutic in IPA is significant; the researcher is making sense of the participant who is making sense of their experience (i.e. adoption disruption). Thus, the themes produced are an interpretation of the

participant's insights; the researcher can only access the experience that the participant is able to articulate and aims to explore from an empathic and curious position (Brocki & Wearden, 2006). Smith et al., (2009) suggest that psychological researchers strive to maintain a middle ground whereby they explore the experience externally from the participants' point of view but also aim to be alongside the participant in the telling of their story. Therefore the researcher engages with the data at multiple levels, and explores it from various perspectives in order to produce a set of themes that best illuminate and make sense of an experience. In doing this, the researcher must be reflective about their own beliefs and experiences that influence the interpretations they make, (i.e. how their reality is constructed). Examples of the researcher's reflexivity are presented throughout the thesis (see Pilot three. pp. 51; Reflexivity, pp. 56; Reflections – Transference-countertransference, pp. 94). An advantage of utilising an approach with a double hermeneutic is acknowledgement of the researchers own impact on analysis and how this can shape the conclusions drawn from the outset. On the other hand, some might argue that this exposes conclusions to invalidation and bias.

Practicalities

The only requirement of data generated for analysis with IPA is that it must be 'rich'. This means that participants have had ample time to tell their stories, express their thoughts and feelings and have had the opportunity to develop their ideas and opinions about a given experience (Smith et al., 2009). Most commonly one-to-one semi-structured interviews have been used to achieve this goal (e.g. Reid, Flowers & Larkin, 2005). However, this is not the only method available and alternative data collection methods are proving successful. For instance, postal questionnaires, focus groups and computer mediated conversation (i.e. e-mail) have all been analysed using IPA (Turner & Coyle, 2000; Flowers, Knussen & Duncan, 2002; Jordan, Eccleson & Osborn, 2007), and furthermore these methods have successfully been integrated within the same study (e.g. Murray & Harrison, 2004) reinforcing Smith et al's assertion that "there is great room for imaginative work in collecting data for IPA. This is an approach that benefits from....more than one time-point, and from the creative and reflective efforts of participants. Any overall design or particular data collection strategy which capitalizes on these features is likely to be an effective one" (pp. 56, 2009). Thus, IPA has been selected due to:

- The emphasis placed on individual experience and meaning-making processes.
- The variety of data-collection methods available so that collection of 'rich' data is facilitated.
- Acknowledgement and incorporation of the researcher's interpretation of the data.

Ethical approval

Ethical considerations meet the standard required by the University Research Ethics Committee (2008) (see Appendix 1). Participants aged between 13 and 21 years old (and legal guardians) were identified via 'key workers' at Children's services (e.g. social workers). Consent was given by the young person's social worker and where appropriate, the young person's adoptive parent for the researcher to make contact. The researcher then met with participants, offering the relevant participant information sheet; (see Appendix 2). Participants were made aware of:

- Their right to withdraw during either interview with data destroyed.
- Confidentiality: The dataset was shared with the project supervisors (Dr. Siobhan Hugh-Jones and Dr. Ruth Goldwyn) and quotes used in publication, complete confidentiality could not be offered. Participants were also made aware of the boundaries of confidentiality and instances in which confidentiality might have to be breached. That is, should the researcher become concerned about risk to the participant's personal safety or the safety of others, confidentiality would be broken. However, anonymity was offered, for instance to ensure that participants could not be identified by their quotes.

Participants (and legal guardians) were then given seven days to consider involvement. The researcher made contact to discuss written consent and arrange interview one. If, after fourteen days the researcher was been unable to make contact it was be assumed that participation had been declined. In consideration of future research, participants were asked if they agreed to potential contact in the

future for the purpose of follow-up (maximum of five years post-completion of the study).

Data protection

Audio-recordings were made using an encrypted device. Once transcribed all documents were anonymised and held on a password protected computer. Recordings will be held for two years post-completion of this research in keeping with the University of Leeds recommendation that data is stored in the event of legal challenge (Leeds Teaching Hospitals NHS Trust, 2009; University of Leeds, 2010). A mobile phone was used throughout the project in order to communicate with participants (e.g. arranging meetings and text reminders). Phone numbers for participants were stored on this device however the phone was password protected and pseudonyms were used in place of real names.

Specific considerations

Adoption disruption was expected to be an emotive topic and although the researcher was trained in appropriate assessments (e.g. risk), and participants had the right to withdraw at any point, additional provision was also agreed with Children's Services to ensure continuing care of the young person post-interview. This acknowledged that some of the data collection techniques used in this study bear similarity to therapeutic interventions commonly utilised with adopted and looked after children (i.e. timelining is reminiscent of 'life story work') and furthermore, literature suggests that participating in research can have therapeutic effects, particularly when participants are required to reconstruct experiences (Hutchinson, Wilson & Wilson, 1994; Shamai, 2003). Consequently the following were agreed prior to commencing recruitment:

- 'Key workers' in Children's Services must have known the child for at least six months in order to provide an adequate judgement as to the suitability of the young person to participate.
- As this research aimed to be participant led, participants did not have to talk about events that they wished not to, however, the project was clear from the outset that it intended to explore adoption disruption. If the

participant felt that they no longer wanted to discuss this topic, they could withdraw.

- If any issues arose during the research process that suggested potential disruption of ongoing therapy these would be discussed with the participant and the participant's social worker and an appropriate decision would be made.
- Participants could have an 'adult companion' in the room as interviews were conducted. Therefore if the adult companion felt the research process was disruptive to potential or ongoing therapy they too could voice their concern and appropriate actions could be taken.

Participants

A pool of 12 eligible participants (10 female, 2 male) were identified by management in a Northern UK Children's Services⁴ according to the inclusion and exclusion criteria stated below.

Inclusion criteria

- Young people who had experienced adoption disruption aged between 13 and 21.
- Young people still engaged with Children's Services with a social worker. The social worker must have known the young person for at least six months.
- Adoption disruption to have occurred within the last three years (excluding the first six months post-disruption).
- Young people considered appropriate by key workers (e.g. social worker).
- The young person has had, or continues to receive, therapeutic input.
- The young person had access to post-interview support if desired or required (provided by Children's Services).

⁴ Management refers to: Head of Children's Services, Post-Adoption Support Manager, Acting Service Delivery Manager, Therapeutic Lead (adoption)

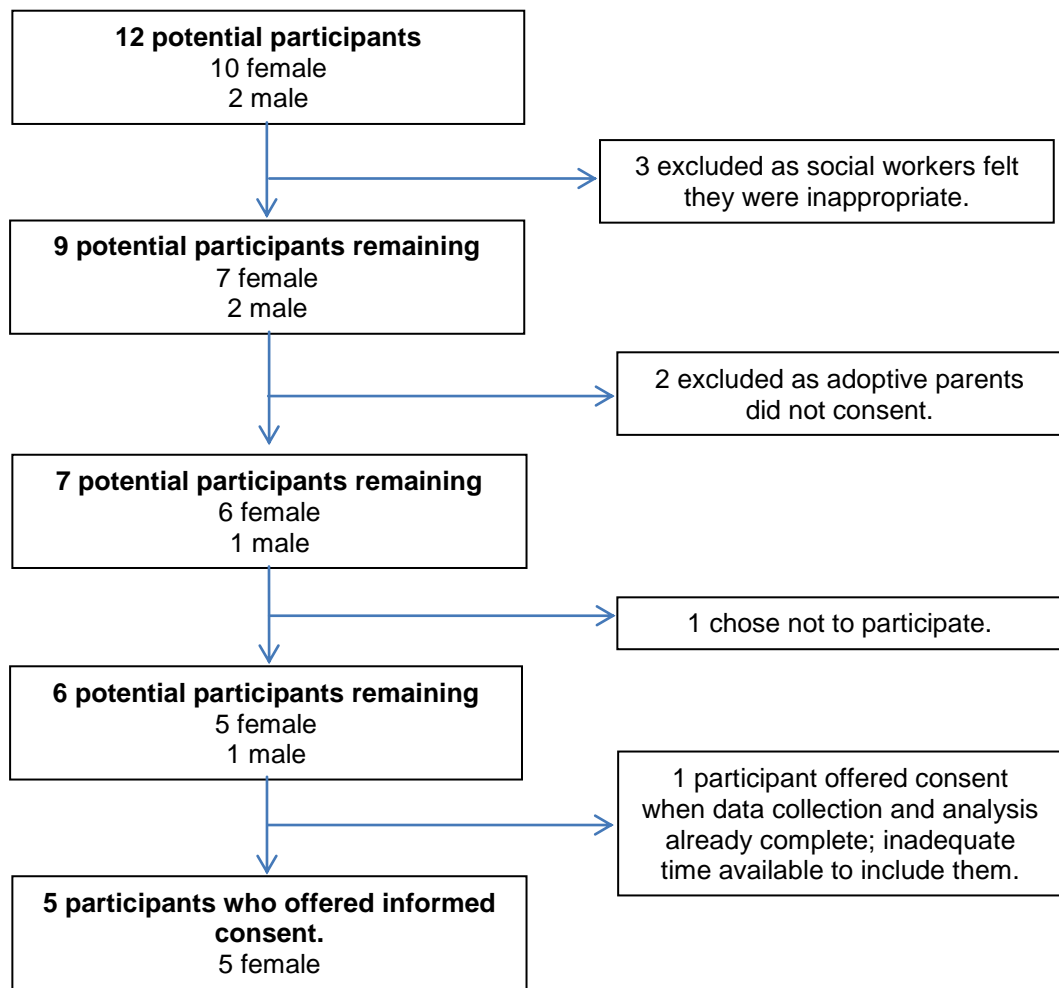
Exclusion criteria

- Participants who had experienced adoption disruption in the six months prior to interview.
- Participants not fluent in English due to translation funding limitations.
- Individuals with learning disability - participants must have been able to engage in reflective thinking processes and the study did not have the resources to facilitate inclusion of this population.
- Young people considered to be too vulnerable by the 'key-worker' (e.g. social worker).
- Young people, who had disrupted adoption due to allegations of abuse where investigations/proceedings were ongoing, or actual, abuse.

Of the original twelve, three were excluded as social workers felt they were inappropriate candidates for reasons including placement instability. Two were excluded as adoptive parents did not consent. Of the remaining seven, five agreed to participate, one declined and one was initially excluded by their social worker due to instability and later consented at a point when there was inadequate time to include them in the sample. The final sample was all female; this was not the intention at the outset of the research however, the pool of twelve participants had a disproportionate representation of females meaning that female over-representation in this research would always have been inevitable. Figure 1 exemplifies how this sample was achieved from a pool that included two males (see Figure 1).

The figure of five is slightly lower than might be anticipated when using IPA; Smith et al., (2009) tend to recommend between six and eight participants. However, in the context of the estimated size of the intended population in this area of the UK, five is both appropriate and achievable. Furthermore, the multiple stage approach to data collection meant that five participants provided a significant amount of data for analysis.

Figure 1. Flowchart depicting the sampling process



Procedure

Recruitment

Participants aged 17 and over were contacted via telephone when their social worker had given written consent and a meeting was arranged to discuss the research in more detail. Participants were invited to have an adult companion with them if they wished. At this meeting the research was explained, aided by the participant information sheet (see Appendix 2). There was ample opportunity for participants to ask questions and they were encouraged to speak with others before the researcher made contact one week later to follow up participation and informed consent.

Participants aged 16 or less required legal guardian(s) to consent to their participation in addition to their social worker. Legal guardianship varies according to the legal status of the child's adoption and the care order in place; in some instances guardianship could have been held jointly by Children's Services and adoptive parents and in others solely by Children's Services. Therefore, legal guardians were identified on a case-by-case basis. Adoptive parents were contacted with the support of key workers in Children's Services who were familiar with the parents. The research was explained using a specific parent information sheet (see Appendix 2) and there was opportunity to ask questions.

Participants and relevant legal guardians had seven days to consider participation. Following this, the researcher made telephone contact. If contact had not been established fourteen days following first contact where the research was introduced, it was assumed that consent had been declined. Only if informed consent was gained from all parties did the participant proceed with the research (see Appendix 3). A secure, password-protected database was established for the purpose of auditing recruitment responses.

Data collection process

Semi-structured interviews are the primary data source with which IPA has been applied (e.g. Michie, Smith, Senior & Marteau, 2003; Osborn & Smith, 1998). However, they are not the only source and recently techniques such as timelines, photography, observations and e-mail have been analysed using IPA (Bagnoli, 2009; Flowers et al., 2002; Jordan et al., 2007; Smith et al., 2009; Turner & Coyle, 2000). Furthermore, data collected from children has also been successfully analysed using IPA, indicating that adequate interpretations of events can be drawn from young participants (e.g. Freeman & Mathison, 2009; Griffiths & Page, 2008; Nkomo, 2006).

Commentating on creativity in psychological research, Deacon (2000) suggests that the drive to produce routine and standardised research via interviews has stunted the integration of lesser known but equally as valuable methods (i.e. photography); every day experiences are not one-dimensional, they include visual and other sensory elements that cannot always be elucidated through language, which makes interviews a limited mode of expression particularly for children and young people where, vocabulary or abstract cognition

might be limited for example (e.g. Bagnoli, 2009; Eisner, 2008). Creativity in data collection encourages participants to 'think outside the box', and offers researchers ways in which to explore and understand different elements of experience, transcending the limits of the standard interview (Bagnoli, 2009; Mason, 2006). In essence, such techniques support participants to explore their understanding of an experience resulting in more in-depth narrative than interview alone (Bangoli, 2009; Brookfield, Brown & Reavey, 2008). In addition to this, evidence suggests that children and young people with histories of disrupted attachment and trauma can be compromised in their recall of events and produce incoherent reflections. Therefore creativity with the population targeted in this research could be invaluable (Brookfield et al., 2008; Main et al., 1985; van Emmichoven, van Ijzendoorn, De Rutter & Brosschot, 2003).

The data collection process used here therefore incorporated multiple techniques in order to support participants in developing in-depth, coherent narratives. With regard to integrating multiple data collection techniques with a single sample, Johnson and Turner (2003) suggest that the benefits include (a) production of converging data which increases the validity of findings (b) elimination of alternative explanations for the subject under study and perhaps most importantly in the present study, (c) illumination of divergent aspects of the phenomenon so that a greater explanation can be conceived. Subsequently, the selection of techniques was carefully considered and timelining, photo-production and a semi-structured interview were proposed.

Before detailing procedure and the reasons behind timelining and photo production it is important to note that the decision regarding data collection technique was made with consideration of the prominence of attachment theory in the context of adoption. Consequently discussions were held about why and how attachment should be incorporated. This included consideration of standardised measures such as the AAI that have been used with adolescents and demonstrate good reliability and validity (e.g. Goldwyn & Hugh-Jones, 2011). However, such measures were not pursued as the primary purpose of this study was to develop an understanding of experience, not to classify attachment status. Therefore it was agreed that in order to explore experience, yet remain aware of substantial literature around attachment and adoption, the data collection process would incorporate reference to inter-personal relationships and attachment experiences but without the goal of attachment status classification; this was therefore reflected in interview schedules.

Timeline interviews

Timeline interviews developed as a method through which a specific unit could be measured over a specified period of time (e.g. alcohol consumption over a year, Sobell & Sobell, 1992). Their application has broadened and recently they have been used to support the construction of narrative. For example, Sherridan, Chamberlain and Dupuis (2011) studied body weight over the lifespan; this form of autobiographical timeline facilitates “participants’ reflection and articulation of meaning, and...the socio-cultural backdrop of their experience” (pp. 113, Leung, 2010). Variations of this technique have also been seen in clinical contexts; for instance, life-story books are common practice in social care work with children (e.g. McKeown, Clarke & Repper, 2006) and based on this, it was thought that timelining might be a familiar but distinct approach that would engage young people and make the research accessible.

Previous evidence suggests that coherence of narrative in the targeted population of this study may be compromised (e.g. Brookfield et al., 2008; Main et al., 1985), thus timelines were identified as a potentially effective way to scaffold construction of narratives about life experiences related to adoption. Furthermore, it was felt that adequate procedure could be used to ensure that the method did not disrupt the participant’s story-telling and acted as a supportive research tool. For instance, the term ‘timeline’ is suggestive of linearity; however, young people were encouraged to map events in any order they wished and the researcher followed their direction. Additionally, participants were able to generate ideas and map them prior to the formal interview beginning if they wished (Bagnoli, 2009; Brookfield et al., 2008; Leung, 2010).

Timeline procedure

Procedure was based on protocol described by Sherridan et al., (2011) and Bagnoli (2009) whereby participants were required to plot events related to their adoption and adoption ending that they considered significant:

1. The aim of the timeline was explained; young people then represented themselves on the timeline on the day of the interview. They were asked to look back over their life and generate events related to the research question.

2. Some opted to record events using post-it notes; others drew directly on the line using words and pictures. Very specific dates were not required.
3. The researcher used probe questions throughout to develop an understanding of the meaning of the experience to the young person and why it was significant (see Appendix 4).
4. Participants were asked to consider life post disruption and what they predict might happen in the future (in relation to or as a consequence of their adoption disruption) and map these on their timeline. This aspect of the exercise aimed to develop understanding of what the future means to each individual and their general expectations; generally research literature exploring disrupted attachment suggests adverse outcomes (i.e. psychopathology, difficulties in romantic relationships) (Main et al., 1985) and similar timeline research with children has offered insight into events that participants felt would structure their lives, for instance, university, marriage and parenthood (Bagnoli, 2009).

A pilot interview was conducted to assess the acceptability and feasibility of the intended method (see 'Pilot Studies', pp. 48). As outlined in the ethics section, the topic of disruption was potentially emotive for participants and appropriate steps were taken to ensure ongoing emotional stability (i.e. signposting to services). The timeline was retained by the researcher and taken to additional meetings with the participant as a tool to support participants as they continued to develop narrative about their experiences. Interviews lasted between 17 and 120 minutes.

Photo-production

The second stage of data collection was photo-production, a reflexive technique that aims to facilitate collaboration, ownership and enjoyment for the participant (Hodgetts, Chamberlain & Radley, 2007). Although fairly extensively applied in ethnographic sociological research, photography in psychological research remains a relatively new technique, although nonetheless successful (e.g. Reavey, 2011). In some instances, pre-existing photographs have been identified for analysis; for example, Gleeson (2010) conducted analysis on the photographs of learning disabled individuals in two calendars. Whilst other research asked participants to take their own photographs; Radley, Chamberlain,

Hodgetts, Stolte and Groot (2010) used photo-production to explore homelessness and Harcourt and Frith (2008) explored women's experiences of chemotherapy for breast cancer through photographic diaries. Photo-production aims to produce rich accounts "grounded in the participants' everyday experiences and interactions" (pp. 1342, Frith & Harcourt, 2007), which offer depth that word only interviews may not.

This study proposed photo-production as a method of understanding how participants make sense of the impact and consequences of adoption disruption. Participants were asked to photograph "things that help me (the researcher) to understand more about your adoption and your adoptive placement ending" with the aim being to engage with the mundane in addition to the significant, developing imagery of life post-disruption. Digital cameras were used for this exercise as it was hypothesised this could offer increased autonomy (i.e. participants could delete photographs as they wished).

Photo-production procedure

1. The exercise was explained at the end of stage one (see Appendix 4) and the participants were supported to generate ideas for the exercise. This conversation was based on the timeline but also emphasised that the photo-production exercise was intended to extend the researchers understanding of the experience of adoption disruption. Therefore, ideally, photographs would not replicate what had already been discussed.
2. Digital cameras were provided (a photo printer was purchased so that photographs could be printed out at the next meeting). The date of the subsequent meeting was arranged at the end of interview one – this ranged from two to five weeks after interview one.
3. One week into the exercise the researcher made contact with the participant via text. This aimed to ensure that participants were still willing to participate and that no risk issues had arisen. The ethical implications of contacting participants were considered; for instance, the potential change in dynamic between the researcher and participant through use of informal communication. However, the advantages, which included monitoring consent, risk and containing the participant, outweighed disadvantages.
4. The researcher met with the participant; photographs were printed and the photo-production interview took place.

Photo-production interview

The intention of exploring photographs was to continue the construction of the participants' narrative. This had the potential of enhancing data collected via the timeline, which was present throughout the interview. The photo-production interview protocol was based on the SHOWeD procedure that has been used in previous photography driven research and adapted to also include questions reflecting attachment theory (Johnson, Sharkey, Dean, McIntosh & Kubena, 2011; Keller, Fleury & Rivera, 2007).

1. The participant chose which photographs they wished to discuss, being reminded that the aim was to represent things that helped me (the researcher) to understand more about their adoption and their adoptive placement ending.
2. Participants were free to order photographs however they wished.
3. The researcher interviewed the participant about the meaning of the photographs and how this related to the experience of their adoption ending (see Appendix 5).

Hodgetts, Chamberlain and Radley (2007) encourage researchers using photo-production to contemplate with the participant what lies beyond the image; how were scenes chosen and what was not photographed and why? It may be that participants could not access things that hold significance and exploring this offers another opportunity to understand the participant's experience. The researcher therefore discussed the content and process of the photography with the participant. Furthermore, the timeline was re-introduced and participants were asked if any of their photographs related to points on the timeline or whether further events should be added to the timeline. This supported the participant in the construction of narrative about their experiences and furthermore offered continuity between the methods being implemented. The decision to re-introduce the timeline at a later point in the data collection process has also been observed in previous research exploring experience with positive effect (e.g. Bagnoli, 2009; Radley et al., 2010).

Pilot studies

A three pronged approach was used to pilot this research in order to adequately assess suitability of the identified techniques. Consequently, the pilots aimed to:

1. Explore the process of the research with a young person (e.g. the accessibility of the techniques) (Pilot One).
2. Test the suitability of the questions (i.e. the extent to which interview schedules will produce data that is relevant to the research objectives) (Pilot Two).

Additionally, the researcher wished to acknowledge the unique nature of this research, which incorporates multiple methods of data collection, and to understand more the expectations that might be placed on participants, and so decided to pursue a self-pilot (Pilot Three).

Pilot one

A pilot took place with “Leah” who fell within the age range of this research project (age 17). Leah had no history of mental health problems or personal experience of adoption or fostering. It was agreed within the research team that a neutral discussion topic would be chosen in order to concentrate on the actual processes involved in the research. Primarily these were: introducing unfamiliar concepts such as consent and confidentiality and completion of novel techniques such as timelining and photo-production. Therefore this pilot explored ‘the experience of horse-riding’.

Rehearsing the process was valuable, although the practicalities of completing a timeline were theoretically straightforward. In practice, the running order of (1) generating events or memories for discussion followed by (2) beginning the formal timeline and returning to generated ideas, produced a somewhat disjointed interview with ‘missed opportunities’ for discussion. Therefore in order to achieve depth and reflection allowing Leah to explore her thoughts and feelings about an event as the idea occurred, regardless of chronology, may have been more fruitful. This conclusion was carried into both pilots two and three and post-it notes were used so that chronology could be adapted as required.

There was a four week delay between interview one and two due to illness and the participant's work commitments. Leah reported that she found the exercise straightforward although from the point of view of the researcher eliciting reflections was challenging. This resulted in a strong temptation to help facilitate narrative, for instance asking questions about an aspect of the photograph not brought up by the participant. To ensure that this did not happen, thereby producing the researchers' story not the participants, careful reflections were made that focused on key points said by Leah that could be expanded by her.

Pilot two

To ensure the appropriateness of questions, an adult ("Marie"), who had experienced adoption, but not adoption disruption was recruited from After Adoption Yorkshire. Marie was not in receipt of services for reasons associated with adoption and reported that she considered her adoption a success. Only the timeline interview was conducted with Marie – she did not complete the photo-production exercise due to work commitments and the aim of this pilot was to develop confidence in talking about a complex and emotive subject. During this interview we explored 'the experience of adoption; how has this influenced who I have become?' Marie was open about her adoption although remained guarded and at times changed the subject, which I interpreted to mean that questions were probing further than she wished to discuss. For example:

Researcher: How was your mum?

Marie: (Pause 2 seconds) depressed. (Pause 5 seconds). I think one of the ones for me I suppose was always having a sister. That was important cos I always knew I had a blood relative. [Marie, Line 37]

Upon reflection, I experienced a power imbalance during this pilot. I wondered if this may have been due to my own uncertainty (i.e. did I have the right to explore such a personal experience?) and also my inexperience about the research topic by comparison and consequently feeling intimidated - Marie had been employed as a social worker for many years and subsequently I found it difficult to ask certain questions as I feared negative judgement (i.e. that I should already know the answer to certain questions). I worried that this may have inhibited exploration of relevant and potentially insightful topics. This required consideration prior to conducting research interviews to ensure the quality of data

collected. Proctor (2001) discussed in-depth the influence of power during her research with four women diagnosed with dementia and reported that in some instances the powerful influence of social values (i.e. norms) and engagement in a research context led to discontinuation of interviews. In this pilot, the imbalance might have arisen due to awareness of roles (i.e. 'researcher' and 'participant') and the hierarchy that this imposes; it may have been indicative of inadequate trust and rapport between the researcher and participant therefore impeding discussion about sensitive topics. This is a hypothesis echoed by Harrison, MacGibbon and Morton (2001) who refer to the importance of reciprocity in achieving rich qualitative research. Alternatively, the purpose of the interview may have been an influencing factor; Marie was aware that she was participating in a pilot and consequently may not have been as invested as it is hoped a formal participant would be.

In order to minimise any future power imbalances, particularly given the often disempowered status of adopted young people (e.g. Hawkins et al., 2007) the researcher decided to

1. Spend more time with participants explaining the research and ensuring their informed consent and willingness to participate.
2. Debrief with a supervisor following each interview to help prepare for interview two.
3. Explore reflexivity and keep memos in order to reflect on observations about things such as interpersonal interactions, transference and countertransference limiting their influence on the research.

Pilot three

The topic of the self-pilot was "your journey into clinical psychology". The researcher's supervisor, Dr Siobhan Hugh-Jones, conducted the interview in accordance with the protocol outlined previously. Reflections of note include the propensity for the timeline interview to provoke emotive reflections about sometimes sensitive topics and due thought was consequently given to ensuring the aftercare of young participants. It has already been outlined that young people would be signposted to appropriate agencies if required and this pilot reinforced the need to be aware of support available to young people in their locality. Additionally, the positive relationship between supervisor and supervisee, which had been built up over the preceding twelve months encouraged a candid and in-

depth discussion about very personal experiences, serving mainly to reinforce how essential rapport and trust are during the research process. Overall, the timeline did help facilitate narrative, which eventually enabled me to take a holistic look at the experience being discussed. However, from my perspective as an interviewee, my ability to be coherent was dependent on the interviewer's ability to guide me when I became lost in my thoughts.

Data Analysis

Descriptive analysis

In order to contextualise the data and subsequent findings, a limited number of demographic details were gathered. Although informative, the decision was made to limit descriptive details in order to maintain anonymity amongst such as small exploratory sample. This information can be found in 'Pen Portraits' (pp. 63).

Interpretative Phenomenological Analysis

Although timelines and photo production were employed to collect data, their primary role was to encourage engagement and production of reflective and coherent narrative. Thus, only the interviews generated from these methods were analysed as opposed to the timeline or photographs themselves. A growing evidence base indicates that interviews about experience generated through various methods can successfully be integrated and analysed using IPA (Smith et al., 2009). For instance, Murray and Harrison (2004) collected data using e-mail and face-to-face interviews and individually coded each transcript using IPA before integrating the data to produce overall themes. Focus groups followed by selective individual interviews have also been integrated (e.g. Dunne & Quayle, 2001). Consequently, IPA is considered to be a flexible, adaptive technique as long as the advantages and disadvantages of integrating multiple methods of data collection are acknowledged. For instance, Murray and Harrison (2004) commented that e-mail interviews could potentially lack depth compared to face-to-face counterparts; however, they reasoned that all data collection methods offer a limited insight of experience. Equally, in the present study, timelining and photo-production were intended as a method to overcome this limitation by producing a

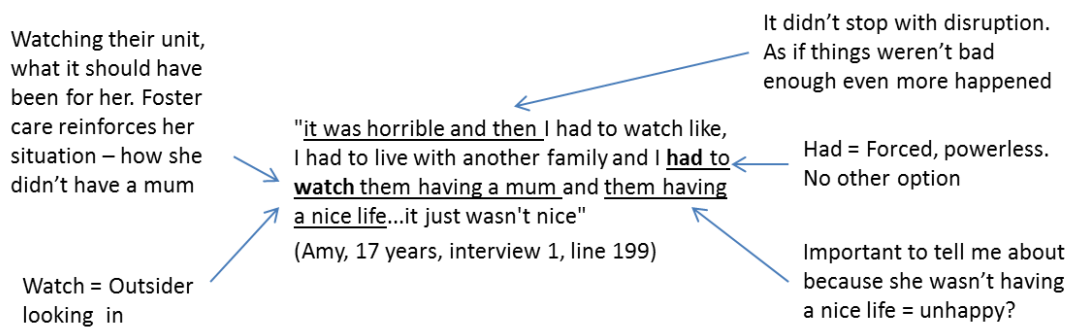
range of data that could converge and illuminate the experience of adoption and adoption disruption (Brocki & Wearden, 2006; Smith et al., 2009).

Analysis process

IPA involves line by line analysis of each transcript for “experiential claims, concerns and understandings” (pp 79, Smith et al., 2009). Each transcript was read multiple times and audio-recordings listened to. The first analytic process involved basic phenomenological exploration of semantic context and language with all comments noted on the transcript. At this stage, comments were descriptive and reflected the participant’s explicit meaning (e.g. what is important to the participant and why) (Fade, 2004; Smith, 1999; Smith et al., 2009).

Following this, interpretation took place as the researcher considered what each word, phrase and sentence meant to them and consequently how they perceived the participant’s account. For instance Figure 2 exemplifies consideration of single words initially (i.e. watch) followed by thoughts about what Amy meant when she used particular words in a sentence and what the overall meaning of her conversation was:

Figure 2. Example of analysis



Contradictions, repetitions, similarities and differences were also noted (Smith et al., 2009). For instance Caitlin’s train of thought was often populated with contradictions:

I knew I'd done something wrong but I didn't think I was doing bad. [Caitlin, interview 1, line 72]

Whereas throughout both interviews Amy repeatedly referred to being unsure and unable to make sense of her adoptive mother:

She was just, I can't explain her, she was proper weird like, I don't know. She just like controlled everybody. [Amy, Interview 1, line 46]

I think she was a bit mental, I think there was like something up with her in a way [Amy, Interview 1, line 509]

She didn't want me there basically and I just don't get why she adopted a child in the first place [Amy, Interview 1, line 64]

Similarities and differences were noted at a group level (see Table 8). For instance, all participants described realising that their adoption should not have been how it was. Whereas some individual differences were also apparent, for example, only Rose referred to the importance of time in her process of making sense of her adoption and subsequent disruption:

In the adoption it was just like something that was repeating and repeating and going on forever but at the moment...I'm by myself it just seems to be going fast 'cos it's what I'm wanting [Rose, interview 2, line 693]

Mind maps were made as key ideas began to emerge in the individual datasets (see Appendix 7) and once initial analysis was complete, transcripts were reviewed to identify emerging themes. These were captured on the mind maps by a brief sentence and were clearly associated with text from the interview to ensure internal reliability. Themes were then discussed within the research team, which offered opportunity for verification checks. The aims of the study were revisited throughout to ensure analysis met the objectives.

The following steps took place:

1. Each participant generated two interview transcripts. The first transcript (timeline interview) underwent preliminary analysis with input from supervisors prior to the next interview with that participant.
2. The second transcript (photo-production interview) for each participant was then coded and overall themes for each participant were identified.
3. When individual coding was complete, comparison at a group level took place to explore and illustrate common and divergent experiences of adoption (and adoption disruption). This reflected standard procedure of IPA (e.g. Smith et al., 2009) and previous research that has employed multiple approaches to data collection (e.g. de Visser, Smith & McDonnell 2009; de Visser & McDonnell, 2011).

4. Throughout the process the researcher engaged in reflexive practice in order to limit the influence of researcher preconceptions (see 'Reflexivity' pp. 56).

Analysis: timeline interview

The purpose of the timeline influences the way it is used in analysis. For instance, Lam, Fals-Stewart and Kelley (2000) implemented a timeline to objectively explore exposure to domestic violence and applied quantitative analysis. On the other hand, Sherridan, Chamberlain and Dupuis (2011) opted not to analyse the timeline itself (i.e. the photographs that participants used), instead focusing on accompanying interview data to develop insights about relationships with food. The current research opted not to analyse the timeline itself as the technique was employed solely to encourage narrative and facilitate the interview process. Furthermore, such analysis was unlikely to contribute to achieving the aims of the research.

Each timeline interview was transcribed verbatim; one was completed by the researcher and four by a professional transcriber. IPA was conducted in accordance with protocol outlined previously. Preliminary analysis of the timeline interview took place prior to interview two; a more in-depth analysis was completed when the participant had completed both stages of data collection.

Analysis: photo-production interview

The analysis of data collected involving photography is varied; in some research the focus has been photographs themselves (e.g. Gleeson, 2011). On the other hand, Frith and Harcourt (2007) analysed only the interviews that accompanied photographic diaries using thematic analysis. The purpose of photography in the present research was development of rich data about experiences of adoption disruption and everyday life post-disruption. Analysis of both process (the interview) and content (the photographs) was beyond the scope of the current project and analysis of the interview and participant interpretations of their photographs was sufficient to yield findings that contributed significantly to answer the research question. Consequently, photographs were reflected upon and analysed by participants themselves during the interview. The researcher then

analysed this interview in order to make sense of the participant's experience – photographs were not analysed by the researcher though an appropriate analysis method was identified had it been necessary (Gleeson, 2011).

Analysis: group level

The final stage of analysis was at a group level and aimed to develop super-ordinate themes. This process was completed through comparison of the themes that emerged from the five individual analyses. This stage is in keeping with previous protocol identified in IPA analysis (i.e. as insights and understandings about individual experiences begin to emerge similarities and differences may start to emerge at a group level; Brocki & Wearden, 2006; Smith et al., 2009) and reflects previous research that has integrated multiple methods of data collection into analysis with IPA (e.g. Murray & Harrison, 2004).

Reflexivity

Reflexivity is an aspect of qualitative research that refers to the attempt a researcher makes to become aware of their own influence on the research process and outcomes (Haynes 2012). The researcher aims to develop awareness about how their perspective 'came to be', for instance their preconceptions (beliefs, theoretical stance, values and interests) and how this influences their interpretations. Reflexivity should be developed throughout the research process in order to enable deeper engagement with the research and to develop awareness (i.e. the ability to 'step back' from the research in order to develop perspective and re-engage at a deeper level) (Ben-Ari & Enosh, 2010; Tufford & Newman, 2012).

There are several approaches to developing reflexive awareness including maintaining a research diary or fieldwork notes (i.e. memos); fieldwork notes often refer to methodological, theoretical or general observations of process and are thought to offer the researcher the most freedom to engage with the research (Glaser, 1998; Haynes, 2012). Alternative strategies include writing down theoretical assumptions about the subject of the research and repeatedly considering whether there have been shifts in this perspective or exploring the process (i.e. interview experiences) through discussion with other researchers

Finally, interviews with an outside source often take place prior to data collection and are an effective way of raising awareness of emotive issues that could otherwise influence the research. Such interviews might be helpful if a researcher exploring experiences of childhood cancer was themselves a survivor of childhood cancer for example.

In the present study, an interview with the researcher took place in order to increase reflexive awareness; the interviewer was not external (it was conducted by the thesis supervisor) and the primary purpose was to develop awareness of the process of the research techniques (see 'Pilot Three' pp. 51). For instance, I developed awareness about how emotive the data collection exercises can be and also the potential impact of asking participants to consider personal aspects of themselves. Exemplifying this, during pilot three I was aware of making conscious decisions about whether I wanted to withhold or share information with the interviewer.

On reflection this was for several reasons (1) trust – I felt scared about sharing personal information for fear of judgement; (2) uncertainty - how would I feel after the interview had finished (e.g. would I be angry with myself for sharing something deeply private) and was I willing to experience this feeling; and (3) anxiety - what might the follow up question be and would I be expected to talk about the subject more than I felt able to? As a result of this experience, I considered how this might influence my approach to interviews (e.g. should I push for answers, should I 'back off', could I sit with long silences?) and the consequent data. For instance, instead of analysing what is visible, would I also be looking for other things such as avoidance of questions, hesitation and interpreting them in relation to how I felt when I was interviewed? Overall, becoming aware of this preconception and discussing it in supervision meant that I was able to explore it prior to beginning interviews (i.e. I sat with silences and followed my participants lead recognising that I am interested in their story whether they reveal 'everything' or not – I can never know the 'whole' truth).

Memos (i.e. fieldwork notes) were also used during the research process and given my concurrent training in clinical psychology this method encouraged me to develop awareness of theoretical preconceptions, particularly in relation to attachment theory. For instance, whilst interviewing participants I was working in a learning disability setting where attachment theory was highly relevant. This not only increased my understanding of attachment theory but meant that I was often

approaching my work looking for where attachment theory may be relevant. As this thesis refers to attachment theory, this recognition prompted me to consider how to manage data collection and analysis given my theoretical backdrop. I therefore decided to keep memos of the interviewing and analysis process in order to increase my ability to recognise that I had been influenced by attachment theory.

For instance, I often made observations about participant engagement during interviews and at times during supervision I offered interview summaries that were steeped in attachment theory and reflective of psychological formulation – this told me that I was finding it harder than I anticipated separating the clinical and research aspects of my job. With this new awareness in mind, I progressed to analyse data and through trial and error found it necessary to persistently ask myself “what are they telling me?” in order to ensure that I conducted IPA as opposed to developing a formulation based on my own theoretical knowledge and preconceptions of what it means to be adopted.

Judging that analysis was complete

In terms of completing data analysis, saturation is a concept typically applied to Grounded Theory that implies once a range of themes have been identified in data and nothing ‘new’ emerges, it can be assumed that nothing new would be uncovered in subsequent interviews and therefore sampling can stop. Thus, the data has been saturated of all themes and as such data analysis is complete (Charmaz, 2006). However, IPA theorists suggest that there is little evidence base to support this assumption and consequently the idiography that IPA values dictates that each participant account will in fact produce new information (Smith et al., 2009).

IPA could thus be interpreted as a snowball technique; it aims to produce a transparent account of what has been found in the context of the homogenous population sampled but it does not assume that an end point can be found. Instead, a ‘higher level’ account of the experience is generated on a case by case basis and participant numbers are kept low in order to ensure the process is clear for the reader. Subsequent studies in the same or similar context contribute to the higher level account already developed, hence the snowball metaphor.

In the current study, data analysis stopped when it was judged by the researcher and supervisors that the interview data each participant provided had been extensively explored. That is, for each participant 1) audio tapes were listened to several times, 2) descriptive notes were made (i.e. commenting on semantics, general content), 3) data had been considered at a conceptual level by the researcher, 4) concepts discussed in supervision, 5) the researcher re-considered concepts and potential themes at an individual level. This process took approximately six weeks for each participant and took place with recognition that some aspects of the experience would remain uncovered. For instance, photographs captured by the participants were not analysed as their purpose in this study was the facilitation of interview narrative. Furthermore, practical restrictions such as time-limitations influenced the point at which data analysis was considered complete. As a result the sample size of five offered adequate time to conduct in-depth, attentive analysis in a way that addressed the research question.

Additionally, the decision was made that it was not necessary to share transcripts or the researcher's interpretation of transcripts with participants before analysis could be considered 'complete'. Reasons for this included ethical implications; Forbat and Henderson (2005) suggest that presenting interviewees with transcripts, although intended to empower (i.e. they can correct the researcher – I said X, not Y) can actually be perceived as confrontational and humiliating, particularly when the research focuses on a sensitive subject as is the case in this study. For example, participants presented with their idiosyncrasies (i.e. a tendency to overuse phrases such as y'know or to 'umm' and 'ahh' more than they realised) can experience embarrassment or concern that they have said too much or too little. Furthermore, researchers must be clear about what they would gain from participants seeing their transcripts; as participants in this study engaged with two interviews, which offered a degree of ownership (i.e. opportunity to reflect on and alter their story if desired) it was not felt that benefits of sharing transcripts, such as ownership, outweighed the disadvantages.

Rigour

In the context of research, rigour refers to the researcher's ability to demonstrate that a piece of research adheres to good practice guidelines. Consequently, qualitative research has established a respected list of criteria in

order to judge the standard of research (e.g. Elliott, Fisher & Rennie, 1999; Yardley, 2000). This thesis referred to the criteria devised by Elliott et al., (1999) as a way to evaluate the quality of the methodology. The criteria and examples of how each was met are detailed below:

1. Owning ones perspective

This criterion suggests that researchers should acknowledge their theoretical orientation and expectations of the research. Disclosing such assumptions helps the reader to interpret the research data and consider whether alternative interpretations exist. Throughout this project attempts were made to ensure transparency of perspective, in as far as this is possible. From the outset, I outlined my personal stance as a researcher and made use of techniques that encourage reflexive awareness (i.e. memoing) in order to monitor my relationship with the research process and subsequent data. In short, my perspective was that disruption is traumatic to young people and capturing the way in which they experience and make sense of this can be illuminating for services.

2. Situating the sample

Elliott et al., (1999) suggest that participants should be clearly situated in order to make findings relevant. Consequently, this research provides in-depth pen portraits (pp. 63) in addition to presenting brief demographic information that maintain anonymity. It also acknowledges that those who consented to be interviewed may have offered a particular account of disruption that may differ from those who did not come forward for interview. Furthermore, all interviewees and interviewers have a stake and interest in the process. The research acknowledges that the sample may have assumed that only particularly challenging 'stories' were of interest to the researcher.

3. Grounding in examples⁵

Guidelines indicate that examples are required in order to support interpretations (i.e. data extracts). In Chapter Three, this research provides

⁵ An extension to the page count was approved by the Chair of the Exams Group at the University of Leeds on 15/03/2013 in order to ensure an adequate number of extracts could be presented in the analysis section.

multiple examples across participants in order to illustrate interpretations and subsequent clusters. The raw data has been submitted with this thesis.

4. Providing credibility checks

In order to examine the validity and reliability of interpretations, themes or accounts, researchers should engage in methods including use of multiple analysts or triangulation. In the present study, each interview was presented to my academic supervisor in the form of a thematic mind map (see Appendix 7) with the accompanying interview and later in write-up form. It was essential to discuss whether my interpretation of data and subsequent themes were credible and evidenced based. It was particularly useful that my supervisor repeatedly asked “what is this participant telling us?” in order to prevent my completing a psychological formulation as opposed to IPA. Following initial discussion about the themes of each participant, further discussion took place as overarching themes that represented the participants at a group level were established. A particularly useful function of supervision at this point was considering themes at a conceptual level across the sample. Outcomes of this credibility process informed each level of the analysis (i.e. individual and group) .

5. Coherence

Elliott et al., (1999) suggest that data should be presented coherently. In this thesis a structured narrative and a pictorial representation are provided in order to describe clusters with clarity. The coherence of this structure has been ensured through discussion with the thesis supervisors. Coherence also refers to the coherence between the research question, method of data collection, analysis and application of the findings. In this thesis the research question was referred to throughout in order to ensure that the methodology and analysis could attend to the aims. Furthermore university processes such as the upgrade viva and presenting findings to Children’s Services challenged the researcher to ensure a high level of coherence was achieved.

6. Accomplishing general verses specific research tasks

‘General tasks’ refers to a piece of research where a general understanding is intended. In order to offer this, multiple examples must be given in addition to consideration of the limitations of the project and subsequent capacity for generalisability. Where a specific task is the focus, the researcher

should provide comprehensive description that indicates how conclusions have been drawn. This research recruited five participants and aimed to represent a specific experience (adoption and adoption disruption). In order to do this Chapter Three offers pen portraits that contain specific information in addition to an in-depth description of the results.

7. Resonating with researchers

Elliott et al., (1999) state that qualitative research should have resonance with readers and be judged as an accurate representation of the 'phenomena' studied. In response to this, the current study fills a gap in an area where very little research was conducted previously and considers results in terms of i) existing research on adoption disruption ii) attachment theory and iii) identity literature. Clinical implications were also considered. Thus, this project is appealing to researchers and clinicians working in the field of adoption. For instance, the findings were well-received when shared with colleagues in Children's Services.

CHAPTER THREE: ANALYSIS

In this chapter I will present the findings from the IPA at group level. Brief pen portraits are detailed below.

Pen portraits

Pen portraits are brief summaries that can be used to contextualise research (e.g. Taylor & Taylor, 2004). In the present study, pen portraits describe the participants and contextualise the circumstances from, and in which, data were collected. Information about age at placement and age at leaving the adoption is not presented; this study was keen to explore experience from the participant's perspective and therefore participants were not routinely prompted to specify age and it was only spoken about if participants introduced it. To preserve anonymity, some specific details such as current residential location have not been reported though selected details can be found in Table 2 including the pseudonyms that will be used for each participant. Portraits focus on engagement with the research process from the perspective of the interviewer. They also include a list of the photographs that each participant took. Pseudonyms have not been used in the portraits in order to ensure anonymity (i.e. limiting the potential for quotes to be linked to pen portraits which could make participants identifiable). Instead participants are referred to as Participant 1, 2, 3, 4 or 5.

Table 2. Selected demographic details of participants (n=5)

Name	Age	Sibling in placement*	Living circumstances	Currently in contact with birth family**	Currently in contact with adoptive family**
Lily	15	Yes	LAC***	Yes	Yes
Caitlin	18	Yes	Independent	No	Yes
Amy	17	Yes	Independent	Yes	No
Faye	15	Yes	LAC	No	No
Rose	18	Yes	Independent	Yes	No

**sibling refers to full or half sibling and birth child of the adoptive family*

***Based on self-report*

**** LAC refers to a child who is part of the looked after child system - to preserve anonymity specific accommodation such as residential or foster care have not been included.*

Participant 1

Participant 1 was very difficult to engage. She reported that she had never spoken about her disruption with professionals (e.g. her social worker), and I felt that she employed a range of techniques to avoid conversation (e.g. walking out the room, turning away from me, drawing pictures and playing on her phone). During the first interview, which took place at her home, she offered single word answers and was not keen to elaborate (e.g. she frequently responded “I dunno”) and as such refused to answer many of the questions (i.e. “Tell me about X”, “How did that feel?”). This interview lasted only 26 minutes. Participant 1 did recall events and placed them on the timeline and appeared to enjoy drawing pictures. Although she took eight pictures with the camera, she did not want to discuss any of them at our second meeting (also at her home) – following prompts she only went into brief detail about three images (see Table 5). This interview lasted 19 minutes, and she frequently asked how long was left of the interview and when she could get her gift voucher.

This was a very challenging interview to conduct and I was aware that the more Participant 1 blocked my open ended questions, the more I resorted to closed questions. For example:

Interviewer: how come that's important?

Participant 1: Cos, erm, because they're fine now

Interviewer: So it's important because it helped?

Participant 1: Yeah [Interview 1, lines 124-127]

On reflection, by asking the question “it's important because it helped?” I not only assumed that it helped (therefore making her story my story), but I also closed the conversation. I am unsure about how this might have influenced the narrative that she produced; for instance, is it more representative of my interpretations than hers? Preliminary analysis and discussion in supervision indicated that I was able to make meaning of Participant 1's brief conversations and although guided more heavily by me compared to other interviewees, it was agreed that the interviews would remain in the dataset. Participant 3 did not comment on the research process. However, given her relative lack of engagement, avoidance of answering questions and frequent wondering of when she would receive her gift voucher, I inferred that she did not enjoy her involvement in this project.

Table 3. List of the photographs that Participant 1 discussed

Photograph description	What the photograph represented (according to Participant 1)
1. A picture of her adopted family on holiday	Fun times
2. Herself as a little girl with her face painted like a tiger	The adoption started well
3. Her birth cousin	Still having links with birth family

Participant 2

At the point of introducing myself and the research Participant 2 was very distant, offering minimal eye contact and it was hard to engage her in either general conversation or discussion about her adoption. I subsequently decided to meet her twice at a cafe before starting the research to ensure that she a) actually wanted to participate and b) gave fully-informed consent (i.e. ensuring that she had retained information about the project). As I spent more time with Participant 2, she began to open up. Similar to Participant 3, Participant 2 requested that both of her interviews take place at the University.

Participant 2 did not like writing things down and thus the timeline was used to a very limited extent. I wondered if she found the exercise intimidating as she commented that she did not know what to put or how to put it and she was concerned about her spelling. In spite of this, she spoke about experiences that I found to be emotive, although I noticed that even with emotive topics her tone of voice remained flat. As interview one progressed, she appeared to develop new insights about herself. For instance, that talking about the disruption had been helpful as she had never been able to make sense of it previously. She furthermore commented that she had not spoken in-depth about the experience with anyone including her partner. In total, interview one lasted 51 minutes.

Participant 2 took seven photographs but made comments such as “I don’t know why I took this one” and she appeared embarrassed about sharing some images (e.g. those of her dog). In total we discussed four images (see Table 4), which took 47 minutes. She was more open in conversation about her photographs when the topic was concrete (e.g. what was in the picture). As our discussion became more abstract (e.g. meaning making) she became more hesitant. in spite of this Participant 2 endeavoured to answer most questions; even with questions such as “what do you think contributed to your adoption

disruption?” where she responded that she did not know, she was able to elaborate suggesting that she has never been able to make sense of it. She commented that the research process had been ‘ok’, and she had taken part in research on the topic of adoption previously. I observed that although she engaged with each of the exercises she would be very critical of herself (e.g. when we met to discuss the photographs).

Table 4. A list of the photographs that Participant 2 discussed

Photograph description	What the photograph represented (according to Participant 2)
1. A photograph of her birth mum	Not being able to make sense of why her mum gave her up
2. Her with her current partner	Trust & ability to have a good relationship
3. Herself as a child in fancy dress	It wasn't 'all bad'
4. Her dog	Having possessions

Participant 3

During the introductory meeting with Participant 3, I was struck by her apparent lack of inhibition as she began, unprompted, to tell me about very personal experiences. She expressed keenness to participate and requested that her interviews take place at the University as she had never been there before. During interview one, she spoke at length (120 minutes) and made substantial use of the timeline to structure her narrative, choosing to start at her birth and working her way forwards. At times, it was hard to keep her on topic, and she would often talk about things not associated with her adoption (e.g. her new pet dog). This prompted me to reflect on my power and the extent to which I influenced the interview. For instance, by drawing Participant 3’s attention back to adoption and the research question, was I preventing her from describing an experience that she considered important? On reflection, I wonder if her tendency to talk tangentially could be a reflection of her still ongoing process of assimilation. That is, she continues to look for as much information about an experience as possible in order to make sense of it. Therefore, during the interviews she drew upon many examples in order to articulate her experience.

Participant 3 engaged well with the photography task and required little support in generating ideas of what to photograph. She took 20 photographs

although only spoke about five (several were repetitions and she took some of her new dog) (see Table 3). The chosen photographs were abstract with metaphorical meanings; for example, a single footstep in the sand to represent a journey that she was taking on her own. This interview lasted 53 minutes. She asked if she could have copies of her pictures because their meaning was important to her. It was, however, difficult to elicit contact with Participant 3 throughout the research and there was a space of five weeks between our first and second interview.

Table 5. List of the photographs that Participant 3 discussed

Photograph description	What the photograph represented (according to Participant 3)
1. Participant 3 with partner and her baby on holiday	Her new family unit that she controls
2. Photograph of the sea with a boat in the distance	Freedom
3. A footstep in the sand	New beginnings - her journey
4. Her first flat	independence
5. A man in charge of a fun fair ride on holiday	What she could have had (i.e. a dad who cared)

At the end of the interviews, Participant 3 commented that she had never spoken about her experience of adoption in a therapeutic setting and engaging in this research project was her first real opportunity to think about the experience in depth (although not therapeutically). Generally, she was able to articulate her thoughts and answered every question that she was asked. Sometimes it seemed that she might not have understood questions, for instance, when I asked questions such as “How did that feel?” she would often respond with behavioural examples as opposed to telling me about emotions. In these situations I reflected back what she has been talking about and repeated the original question giving examples of emotions (i.e. happy, sad). She reported enjoying the research process – she had engaged in research previously but commented that she particularly enjoyed the photo-production exercise and indicated that she would like to do more photography in the future.

Participant 4

Participant 4 described being nervous but keen about participating as she had not had an opportunity to talk about her disruption previously and she thought

it might help her. At this point I became aware that I felt myself being pulled into the position of 'rescuer'; Participant 4 suggested that she needed to make sense of her experience and I wanted to help her and make the situation 'better'. I reflected on where this feeling had emerged from (i.e. frequently seeing young people such as Participant 4 in a clinical setting benefit from intervention) and whether I would be able to maintain my role as researcher not clinician. I decided that making a note of this reflection (i.e. a memo) (see 'Reflexivity', pp. 56) would be the best way of monitoring potential transference-counter-transference throughout the interview process and concluded that remaining aware of this pull would support me in remaining in a researcher position. For example following interview one I made the following comment:

When I was listening to Participant 4 I couldn't help but think that she strikes me as vulnerable. Partly because of her appearance (very young) and her tone of voice – when her voice broke I wanted to jump in and comfort her and I could feel this tug on my heart strings. Where did this come from? Maybe because I spend a lot of time supporting people in similar situations but maybe because I'm human and she was in pain. How did I respond? I held myself back and kept quiet. I am glad as I did this because if I had jumped in I wonder if this would have influenced the direction that she took her story/the interview.

Participant 4 requested that both interviews took place where she was living. She engaged well with the timeline using words and pictures that she referred back to frequently in order to generate her narrative – this interview lasted 36 minutes. She started her story at the point where she was removed from her foster carer prior to adoption as she considered this as highly significant in her life. Following the first interview, Participant 4 required support in order to generate photography ideas. She took six photographs and spoke in detail about four of them (see Table 6) which took 34 minutes. Similar to Participant 3, Participant 4 asked if she could keep copies of the pictures as they were important to her. The reason for not discussing the remaining pictures was that they had not photographed well. Overall, Participant 4 was able to answer all questions that were asked, although similar to Participant 3, she sometimes required support to distinguish between feelings, thoughts and behaviour when she was asked questions such as "How did that make you feel?" Following the second interview she commented that she had enjoyed the research process as a way of making sense of the experience. I felt that memoing supported me in maintaining my role

as researcher and allowing Faye to make use of the research exercises as she wished to.

Table 6. List of the photographs that Participant 4 discussed

Photograph description	What the photograph represented (according to Participant 4)
1. Her blackberry	Freedom
2. Her Jack Will's gilet	Needs being met
3. Some graffiti that she completed on a summer course	Having fun
4. The TV she has in her bedroom	Needs being met
5. A picture of her most recent school photograph	Positive change in her life

Participant 5

Participant 5 was keen to engage with the project and asked that I visit her at home for both interviews. She found it hard to sit still and would often play with her phone or her cats and would frequently lose track of what she was saying. At times, this level of distraction meant that I had to draw her attention back to the exercise. Despite this, Participant 5 was immediately very open about her experiences, good and bad, and spoke in depth about her adoption. She answered every question that was asked. Participant 5 was limited in her use of the timeline; she would sometimes write things down but appeared to prefer me guiding her back to the question verbally. The first interview lasted 45 minutes.

Participant 5 reported enjoying the photography and felt that she had lots of ideas. She took ten pictures and we spoke about four of them at length (see Table 7). This interview took 49 minutes. Pictures that she did not discuss were repetitions or general pictures which were not relevant to the project. At the end of the interviews, she reported that the process had been good though she had preferred the photo-production exercise. At times, I had felt frustrated interviewing Participant 5, for instance she was hyperactive and had a tendency to go off track. I found it challenging to truly engage with the conversation and the emotion associated with her story as I felt split between listening to her narrative and trying to keep the interview 'on track'. My awareness of this led me to offer Participant 5 regular breaks in order to help both of us engage with the research process.

Table 7. List of the photographs that Participant 5 discussed

Photograph description	What the photograph represented (according to Participant 5)
1. College	Rebuilding relationships
2. Her best friends	Support
3. Her learning mentor at college	Support/advice
4. Her class at college	Trust

Overview of clusters

The young women in this study recounted their adoption and adoption disruption in terms of three key processes: i) regulated and restrained; ii) turning points and; iii) determination to be better. The table below (see Table 8) illustrates how each participant contributed to the clusters. The cluster 'regulated and restrained' consisted of three themes, 'struggling to understand themselves', 'escalating anger and conflict' and 'being unseen and unheard'. 'Turning points' consisted of 'recognising stuckness' and 'making change'. The final cluster, 'determination to be better', consisted of two themes, 'freedom and independence' and 'creating conditions for stability'.

Table 8. Clusters and themes following IPA analysis of the 10 interviews.

Cluster		Rose	Faye	Caitlin	Amy	Lily
Theme	Sub- theme					
Regulated and restrained	1. Struggling to understand themselves		+	+	+	+
	2. Escalating anger and conflict	+	+	+		+
	3. Being unseen and unheard	+	+	+	+	+
Turning points	4. Recognising 'stuckness'	+	+	+	+	
	5. Making change	+	+	+	+	+
Determination to be better	6. Freedom and independence	+	+	+	+	+
	7. Creating conditions for stability	+	+	+	+	+

Cluster 1: Regulated and restrained

The experience of being regulated and restrained was characterised by anger, stemming from the perception that their expression of identity was restricted in the adoptive family. Anger was also apparent early on in the adoption due to confusion about the placement (i.e. why was I placed for adoption, why are there fights here, why am I not allowed to see previous carers?); participants were unable to access information from their adoptive parents that could answer such questions and this was perceived as restrictive. With hindsight, this was the first signal to participants that something was wrong in their adoption - they were unable to be 'themselves' as they felt controlled by their parents. This prompted escalation of the situation (i.e. increasing challenging behaviour and aggression). In turn communication deteriorated and conflict could not be resolved - participants commented that they came to feel unheard and unseen in the adoption as their needs were unmet due to their parents increasing regulation and restriction in light of conflict.

Theme 1: Struggling to understand themselves

For most participants, being adopted was an overwhelmingly confusing experience that raised questions of identity and 'right and wrong'. For instance, what they were and were not allowed to talk about. Amy commented: "*they almost expected me to be something I wasn't like I always talked about my birth family and they didn't like that*" (Amy, interview 1, line 67). Frequently this confusion began immediately post-adoption due to an apparently fast transition from foster care to adoption with the absence of time to adjust. Participants speculated that an ideal adjustment period would have involved time to assimilate the loss of an attachment figure (i.e. birth parent or foster carer) and to learn about the concept of 'adoption'. Without this opportunity, participants described challenges (see extracts 1 and 2) in comprehending their identity as an adopted child; for example, they could not make sense of why they had strangers as parents:

Extract 1

Interviewer: Which thing on here [timeline] is most important that you would want me to understand about your adoption and why it came to an end? [She points] getting adopted is most important. How come?

Lily: Because I had to leave my real family to come and live with strangers [Lily, interview 1, line number 296]

Extract 2

They [adoptive parents] were just there in the living room saying “hey, we’re going to be your new mum and dad”. It’s like “ok then - but no”...I didn’t really get it because until the age of five, erm [foster carers] were quite constant in my life [Rose, interview 1, line number 164]

Feeling lost during the early stages of adoption was common. For instance, Faye in Extract 3 below offered a vivid illustration of not having adequate time to grieve the end of her foster placement. She suggests that not only was she unprepared but her carer, ‘nana’, was not ready to let go of Faye either, which complicated the transition and appeared to breed anger and resentment towards adoptive parents.

Extract 3

Interviewer: And how important is it to you to have lived with your nana for a few years

Faye: Good, obviously if my nana, my nana said to me “if it was my choice” she wouldn’t have let me go but she had to

I: What does that feel like for you?

F: It upsets me but I don’t know, I know I can go back now and I can see her

I: How come it upsets you?

F: It’s just cos, I don’t know it’s just cos for two and a half years I didn’t see her so that was hard

I: What was that like?

F: Awful (pause 5 seconds, voice breaks) It just wasn’t nice

I: How did you make sense of that happening, that you didn’t see your nana for two and a half years?

F: It just made me worse, I wasn’t myself and, just....not a happy girl I wasn’t.

I: And when you say it made your worse, what do you mean by that?

F: Cos I was already like – well when I first moved I was like not very happy and I didn’t want to be there...and as soon as they [adoptive parents] stopped me, they stopped me from seeing my nana I got worse, just angry. [Faye, interview 1, line 31]

As adoption progressed, some participants felt unable to see where they could fit in the family, and in most cases roles were created by the family or services around the child. Exemplifying this, Caitlin spoke about being labelled as dangerous from an early age (see extracts 4, 5). Although this opposed how she

perceived herself, it significantly influenced her position in the family as 'a challenging child' and meant that she was never free to be herself:

Extract 4

Caitlin: this has been told by social services and by my mum that they said when they adopted me, I was a troubled kid

I: Right

C: From being a very young age and they could see that from me being a very young age so I would have a lot of problems.... I don't think, I don't think I'm troubled, I just think, I just think I'm a normal kid. [Caitlin, Interview 1, line 47]

Extract 5

Caitlin: Cos I was like a dan-, as she [adoptive mum] said a dangerous child, she used to like get real anxious like about social services and stuff like seeing bruises and stuff. [Caitlin, interview 1, line 516]

In another example (see extract 6), Faye commented that being prevented from seeing her foster carer, 'nana', inhibited her freedom and restricted her self-expression and even her identity in the family home. Faye linked 'not being me' to not being able to talk to the people that mattered to her showing how her self-concept was grounded in past relationships. Regulation and rejection from the adoptive family (in the form of not being listened to) constituted a key reason for Faye 'not getting along with them' an ultimately bred resentment towards her adoptive family.

Extract 6

Interviewer: Is there anything that you want me to understand about what it was like when you weren't allowed to talk to your nana?

Faye: It just it wasn't like me, I used to be a happy little girl and then when I moved there I was never happy, NEVER, for 8 years I wasn't happy

I: Right, can you tell me a little bit more about that?

F: It just – what I think made me worse I think was knowing for the first two years I didn't speak to my nana. If I'd have been able to speak to my nana it'd have been different

I: In what way?

F: It just I don't know, just knowing there's someone there to talk to (pause 7 seconds)...I was only allowed to go to my nanas at Christmas, for the whole year I didn't see her til Christmas.

I: How did you feel towards your adoptive parents?

F: I just didn't get along with them, didn't like them. [Faye, interview 1, line 95]

Participants also spoke about the difficulties they had understanding the expectations that were placed on them by their adoptive parents and social workers. Commonly, parental expectations were interpreted as another form of regulation. Illustrating this, Amy described attempting to access information about her birth family to develop her sense of identity. However, she came to realise that this did not meet her adoptive mother's expectations though the reason was never clarified. As Amy suggested that she "always" asked about her birth mother, this suggests that it was difficult to 'have no-one to talk to' (see extract 7).

Extract 7

Amy: I think like, they almost expected me to be something I wasn't like I always talked about my birth family and they didn't like that and she always used to say well she left you for drugs your mum so why would you want to talk about her and things like that and that it should be written all over her grave that she left her kids for drugs and things like that, she was just nasty.

Interviewer: How did that make you feel?

A: Like annoyed and upset, 'cos there was no one I could talk to either. [Amy, interview 1, line number 67]

In another example (see extract 8), Caitlin refers to her perception that she didn't act or play in the manner that her adoptive parents and social worker expected of her. To Caitlin, conforming to this expectation 'wasn't her' and she had no interest in the things they wanted her to do. It seems that by not conforming to expectations tension began to rise as her adoptive mother was held responsible.

Extract 8

Caitlin: In fact the social worker used to come in there and I used to show her and tell her everything I'd done with it and like look at this scar, I got this scar because I'd fallen off my bike I got this scar 'cos I jumped down the stairs but then I think it was the matter of fact that my, they was looking at my mum going well why is she doing all these things...like I don't think they found it normal for a girl to do either

Interviewer: Yeah

C: Like I think they just expect me to sit there with a till and play Barbie...the only thing I did with the Barbie's is mop the floors and clean the toilets [Caitlin, interview 1, line 520]

Thus, pervasive confusion in addition to regulation and restriction by parents made it challenging for the young people to feel they could be themselves,

establish a positive role in the adoptive family and understand parental expectations. As participants reflected on this in the interview, they felt this mix of factors was, in hindsight, indicative that the adoption was always going to fail (see extracts 9, 10, 11), suggesting that these factors were felt acutely, were thought to be irreversible and were seen as credible reasons for relationship breakdown.

Extract 9

It always would have broken down I think 'cos it's- there was just something up with her. [Amy, Interview 1, line 509]

Extract 10

Rose: I think if we had had that longer time period maybe it would have stopped us being adopted and maybe all of this wouldn't have happened.

Interviewer: How has this experience influenced you?

R: I don't know afterwards I kind of fell flat afterwards really. [Rose, interview 1, line 373]

Extract 11

I think that if they took the time to see how the boys worked with the parents - because it had been raised that they had problems with their anger and that – I think that if they had been monitored to see how they reacted to each other in situations like that I think it could have stopped a lot of stuff, and even possibly stopped the adoption. [Rose, Interview 1, line 761]

Theme 2: Escalating anger and conflict

As participants continued to feel that their parents restricted their access to information that could help them to understand their circumstances they turned to events occurring around them in order to make sense of the confusion. Frequently, these events were conflict oriented which signalled to many participants that the placement was unsafe, abnormal and doomed to failure. Although violence was present for most participants, it varied, which influenced interpretations. For instance, Rose (see extract 12), was not directly involved in the violence, she was an observer. This meant that she was able to stand back and reflect on what this told her about the functioning of her family (i.e. that violence shouldn't happen). Although she was not directly involved, she still felt the

consequences of violence. She demonstrates this by referring to her position of watcher being 'hard' suggesting the powerlessness of her experience.

Extract 12

Rose: It's consistent throughout is the fighting and the arguing. Especially between [brother] and [adoptive dad].

Interviewer: Right

R: So. It's the hardest thing to do really is to sit and watch your brother fight with a grown man.

I: And why was it the hardest thing to do?

R: Because you kind of just know that it's not supposed to happen. And you know you're not supposed to be fighting in your own home, but it always happened. [Rose, Interview 1, line number 245]

On the other hand, some were central in the conflict taking place. In these instances, aggression and violence were about making themselves heard but also self-defence (Extracts 13 and 14).

Extract 13

I refused to, swift blank refused to go to school and stuff. My mum would start shouting at me so I'd throw a cup at her...like, never hit her, like I didn't throw it at her, I threw it like so it looked like it was going at her but it never touched her. 'Cos I smashed a cup she phoned the police even the police turned round and said that's really her property as well as yours, you know you all live in the house. Erm she got me arrested a few times for physical abuse when erm she, she like threw the vacuum at me downstairs so I put the table on her. And stuff like that so... [Caitlin, interview 1, line 329]

Caitlin describes that violence emerged when her verbal protests were not heard by her mother. For instance, she refused to go to school but her mother resisted this and consequently she directed aggressive behaviour at her mother to make her point. As she recalls involvement of the police, it seems that she interprets the police as supporting her actions as appropriate. For example "even the police turned round and said..." Use of the word 'even' implies that she was so right in her actions that even authoritative figures such as the police agreed with her.

Extract 14

[Pressured speech] I'd like gone out and then come in and obviously they'd [adoptive parents] gone "oh here SHE is" like that, as I walked through the door, and then, erm [pause 2 seconds], I've gone into the kitchen to get

something to eat and they're like "what do you think you're doing?" and like "I'm getting something to eat"...and then he [adoptive dad] came in the kitchen and like pushed me, and then like I went "what do you think you're doing?" like that and he went to swing to hit me and like I self-defenced myself and then they called the police on me. [Faye, interview 1, line 158]

Whilst recounting this experience, Faye's speech was highly pressured, which suggested how important it was to her that she was able to impart all the information and make me understand the chaos of the situation. Furthermore, language such as 'self-defenced' suggests that she perceived herself as somewhat passive during this episode of conflict – she was a victim reacting when pushed by her adoptive family, using the only method available to her. Furthermore, as Faye later commented "so the only like, thing I could do, was kick her to get out of it." [Faye, interview 1, line 186], she illustrated the lack of options that were available to her. Therefore becoming violent offered her protection.

As she recalled the conversation during the interaction she also exemplified the breakdown in communication and family relations. For instance, the heavily loaded 'she' in "there SHE is" indicated that Faye felt unwelcome in the family. She perceived that people were not pleased to see her and treated her with contempt. In the next instance she articulated the regulation and restriction that she felt: "what do you think you're doing?" The subsequent involvement of police was common to several participants and suggested that resolving the situation was beyond the families' capabilities; for most, this represented movement towards the peak of the placement conflict.

For each participant, these events coincided with emerging interpretations that the adoption was not working out, though it was only post-disruption that participants viewed this as a movement towards disruption. During the process of escalation clarity about the direction of the adoption tended to be absent. In a couple of instances, participants articulated awareness that the adoption was beginning to change and deteriorate (extract 15 and 16) though disruption was not predicted. In Amy's case, the change came when she reached adolescence as she intimates that she began to argue back when she disagreed with her mother's behaviour towards her.

Extract 15

Amy: I can't remember how it started really but...she was just horrible. One time when her mates were all there...my [birth] grandma's quite big – she made me get on the

scales in front of them to weigh myself because she was saying that I was fat and I'd end up like my grandma if I wasn't careful. She used to do things to try and embarrass me all the time. I don't know

Interviewer: Mmm, so how did you respond in that situation when she told you to go on the scales?

A: I did it. Until I was about 13 I didn't argue back with her.
[Amy, interview 1, line 167]

On the other hand, for Lily, it was not only the fact that arguments were occurring but that they went unresolved that was most troubling:

Extract 16

When the arguments started I knew that it was changing...there was always arguments and they hardly ever used to make up [Lily, interview 1, line 47]

For the majority of participants, deterioration of the adoption was an exemplification of a simultaneous breakdown in parent-child communication and increasing expressions of physical and verbal aggression from both the parent and child along with a sense that this was not normal in healthy relationships. This is depicted for the group as a whole by Caitlin (extract 17) who described a prevailing cycle of being treated like a child which prompted childlike tantrums: *"if she was going to treat me like a child I'd act like a child"*. This provoked her adoptive mother to further restrict and control, which resulted in Caitlin once again feeling like a child and becoming increasingly aggressive:

Extract 17

Interviewer: So how does this fit in with your adoption coming to an end?

Caitlin: 'Cos this is like where all the arguments started and like if, if I wanted to do something and she said no I'd kick off and she didn't like the fact that I kicked off but then again if she was going to treat me like a child I'd act like a child

I: Right. Tell me a bit more about that

C: Like I come to the fact like I took it, I took it on the chin for like 6 months and then like it I realised that if she wants to treat me like a child I might as well act like one. So I started kicking off and that's what she didn't like, she didn't like it that I was sticking up for myself and stuff and

I: Yes I was going to say actually when you say kicking off, what does that look like? How would I know that you were kicking off?

C: I'd start screaming at her, throwing stuff and like just being like a proper child. [Caitlin, interview 2, line 132]

As each adoption descended further into conflict, participants collectively described the experience as relentless (see extract 18). For instance, Rose uses the phrase “stuck” to exemplify the circularity of the conflict:

Extract 18

When I was in my adoption it was always slow because every week or every couple of days, everyone was like arguing and just repeating and repeating and just stuck [Rose interview 2, line 712]

Furthermore, the adoptions grew increasingly dangerous for the family as a whole when resolution was not achieved and conflict perpetuated. Thus, it was common to all participants that escalating violence signalled non-normal relationship, and left them feeling powerless and ‘disallowed’. Frequently, they perceived that their own use of aggression and /or violence was reactive and a method of self-defence.

Theme 3: Being unseen and unheard

Throughout the experiences of entering adoption and trying to make sense of a complex situation and escalating conflict, participants came to perceive themselves as unseen and unheard. Ultimately, this was felt to have dictated the participants’ ‘place’ within the family (i.e. their role) and as such was interpreted as another form of regulation and control exerted by their parents. Thus, being unseen and unheard refers to experiences of emotional and physical needs not being met. In some instances, participants also encountered multiple rejections by the adoptive family, which reinforced invisibility.

For a minority of participants, the perception of being unseen began to form prior to the adoption, which could have influenced subsequent experiences of care being negatively interpreted (see extract 19)

Extract 19

It’s like my mum had us and everybody in the family forgot about us and didn’t like care [Amy, interview 1, line 254]

However, more common was the perception that deterioration in the adoption (e.g. escalating conflict) prompted realisation of ‘invisibility’ in the family or recognition of micro-rejections. They felt that their emotional and physical needs were persistently unmet. The following extracts (extract 20, 21) depict both of

these experiences (invisibility and rejection) and suggest movement towards disruption.

Extract 20

Caitlin: They haven't really took interest and like took proper notice of what was actually happening, 'cos if they had of actually listened and like they should have sorted something out

Interviewer: Mmm. What would they have been listening to?

C: They should have listened to me but no one was and I think that's why I ended up in care, back in care

I: Right

C: Because it always seemed to be like everyone would listen to my mum but no one would listen to me and then when it was too late they'd listen to me

I: Right Ok

C: It's like when I went in care then they started realising that I wasn't actually a bad kid 'cos I was actually doing really well [Caitlin, interview 1, line 101]

Here, Caitlin notes that people listened to her mum, not her, highlighting her feeling of powerlessness and invisibility. She also commented that people did not take 'proper' notice. As Caitlin exemplifies for herself and the other participants, it was deeply important that nobody was interested in them or heard them. Essentially, during the adoption participants expressed that there was nobody to care for them.

In another example (extract 21), Faye articulates that increasing violence led her to feel singled out and rejected by the adoptive family. Thus, for Faye it was the blatancy with which she was treated differently to her siblings that enabled her to 'learn' that her needs would not be met by the family. Additionally, phrases such as "*I used to like always be getting into trouble*" and "*for eight years I was getting told off*" indicates that from Faye's point of view the experience of being unfairly singled out and rejected by family was consistent throughout the adoption.

Extract 21

Interviewer: Can you talk me through a little bit about what you think led up to the end of the adoption?

Faye: It was just like for half a year before I left like it was just getting like violent and I used to like always be getting into trouble. For eight years I was getting told off for everyone. Everyone. There was four of us and whenever they did something wrong it was always me that got into trouble. Not no one else, not the person that

did it. And it was me that got treated differently to the others.

[Faye, interview 1, line 136]

Perceptions of being unseen and unwanted during adoption appeared to have been reinforced following disruption when new and often more nurturing environments were encountered. For instance, in extract 22 Faye indicates that her perception of the adoption has been influenced by contact with psychology services and settling into her new placement where she now feels heard.

Extract 22

Faye: I was going to them [psychology] when I lived here but like every two weeks I think it was but then I finished before Christmas I think it was.

Interviewer: In what way was it helpful?

F: Just being able to talk about things.

I: And you didn't need it when you went back into care, how come?

F: I just felt like there was a load of people to talk to, people that would listen to me

I: How was that different to your adoption?

F: No one would listen to me, no one would sit down and talk to me. [Faye, interview 1, line 274]

Furthermore, Caitlin exemplifies how her interpretation of rejection has changed pre- and post-disruption (see extract 23).

Extract 23

Caitlin: the more I kicked off about it, social services just turned round and told my mum to leave me in bed

Interviewer: Right

C: Which then I was winning

I: OK

C: So I won that situation and then it - like a lot of things like that, social services didn't help, didn't help like, like then they could have said, they could have said to my mum like bribe her out of bed or something or like you know leave her an hour and then ask her to go to school when she calmed down

I: Right

C: But they were just basically saying just turning round and saying just leave her in bed

I: So what does that mean to you that they turned round and said leave her in bed

C: Like I think that shows that they don't, they haven't really took interest and like took proper notice of what was

actually happening, 'cos if they had of actually listened and like they should have sorted something out [Caitlin, interview 1, Line 85]

Through use of language such as 'winning', she suggests that in the midst of the conflict as a child, arguing was positive and allowed her to experience achievement. On the other hand, post disruption she suggests that in fact her behaviour might have been a signal of need to those around her. Consequently, she suggests that during the adoption her needs were not met by either her parents or services. This is exemplified through the sentence "*they haven't really took interest and like took proper notice*". Her use of the word proper suggests that although people were around her (e.g. services and her adoptive family). Nobody truly listened or responded as she required – as suggested earlier, this notion of not being adequately cared for was persistent throughout interviews.

The presence of a sibling (full, half or adoptive family birth child) also appeared a significant factor in participants' experience of how 'seen' they were in the adoption; Amy came to interpret herself as unloved following the arrival of her adoptive mother's birth child and in spite of attempting to make herself noticed she recalled being violently rejected (extract 24).

Extract 24

Amy: She [adoptive mother] had a daughter, her own daughter. She'd never had a kid before and about well two, after she'd had her it was about three month and she wouldn't speak to me after she'd had her daughter.

Interviewer: So were you already living there when she got pregnant?

A: Yeah and I put a note under the door, I was only about 9 or something and I put 'why don't you love me anymore?' on this note and she came out and she kicked me down the stairs. And I went and sat - 'cos she had this big house that had loads of stairs leading up to it - and I went and sat in the garage bit and she came down like half an hour later acting like everything was normal and she was going 'oh, are you coming in for your tea?' and all this like it was normal what she'd done. [Amy, interview 1, line 47]

In other instances, participants performed their own comparisons with siblings, forming negative opinions which led them to judge that they were being treated unfavourably by parents. In extract 25, Caitlin describes how being different to her disabled sister contributed to her interpretation that she was rejected by the family. Through what she perceived to be repeated rejections (i.e.

being repeatedly placed in respite care and having stability removed from her) she came to feel unheard by the family and unimportant:

Extract 25

Caitlin: I'd been in respite since I was like 8

Interviewer: Since 8

C: Yeah and I'd been in and out, in and out, in and out like nobody's business

I: Ok. How do you make sense of that, of being in and out in and out?

C: I don't know, I think that's why I ended up fully in care because it was like I think it got to the point with me it was like why am I getting taken to all these different places? Why am I just getting shoved to the side? Like and it was like that, I think I think well some of it was jealousy and most of it was just for the matter of fact that it was upsetting me not having like a stable family so then...[Pause]

I: Yeah. So you said that jealousy?

C: Jealousy

I: So can you tell me a bit about the jealousy that was there?

C: Like my sister, she never got sent away and stuff

I: Right. Yeah. Mmmm and so you were jealous of your sister?

C: Yeah 'cos she'd like she'd kick off and stuff but she wouldn't get sent away but then I'd do it and I'd get sent away...like it was awful...and it's like then but every kid does it though. Like they just think like why am I getting treat different to her when I shouldn't

I: Mmm, how did, well kind of what was your answer for that why you were being treated differently?

C: Because she was special needs and I wasn't [Caitlin, interview 1, line 583]

Equally, even in instances where participants judged their sibling's behaviour as 'worse' than theirs, it seemed that this only reinforced that they were unseen as attention and resources were focused on the more vocal sibling. Rose represents this as she describes being an onlooker before moving on to discuss that, although she was separate to the conflict it also meant that she became isolated and unseen (extracts 26, 27, 28). For instance, she comments that her 'eating problem' was not taken seriously, which reinforced that the needs of others were more important than her own.

Extract 26

I'm seen as an onlooker if you know what I mean?...i got it explained to me at one point, erm, I'm always in the background and always watching what's going on but never

really wanting to do anything to intervene. I just like to watch and see what goes on and what the outcome is [Rose, interview 1, line 386]

Extract 27

Rose: [eldest brother] was the first to go...when [eldest brother] had his visits...every money and everything went on [him]. We would go to the cinemas for [him] go out for meals for [him]...We saw it like even though he didn't live with us constantly anymore it was only a few nights over like twice a week. And them times that he was over it was [him], [him, [him]....

Interviewer:...How did it make you feel, that?

R: I hated it.

I: Right.

R: Because I had an eating problem, I had it for quite a while from when I was young but they didn't really know about it. Erm I used to throw my food back up they used to make me sit there until I had eaten everything on my plate. Because I didn't like baked beans I didn't like baked beans but [eldest brother] and [middle brother] loved them. So with every meal more or less we were having baked beans. And until I eat every single last thing on my plate I wasn't allowed to move from the table. And if I didn't eat anything they would send me to my room. And then I would get a cheese sandwich with no butter and be sent with that to bed. And have to stay in bed [Rose, interview 1, line 43]

Extract 28

Interviewer: Is there anything else that's important about having an eating problem because you....[pause]

Rose: Erm it contributes to me losing a lot of weight when I had meningitis, and I kind of stuck to it. It ended up in the end where when I ate anything I couldn't keep it down I had to throw it back up. And it was it was worse and [adoptive mum] didn't believe that I had a problem with eating or anything. [Rose, interview 1, line 195]

Reflection – Theoretical orientation

IPA is an approach where the researcher's role in interpreting the data is made explicit. Consequently IPA is clear that the researcher should strive to develop awareness of their own perspectives in order to consider how these might influence engagement with the data and conclusions that are drawn (e.g. Smith et al., 2009). Reflexivity is one method that can be used to develop self-awareness and can be utilised at any point during the research process (Pillow, 2003).

Thus, whilst considering the cluster 'regulated and restrained' I noticed that throughout this analysis I was drawn to attachment theory. This meant that at times I was formulating participants as opposed to listening to what they wanted to tell me about their experience and I was concerned about how a pre-occupation with a particular theory might influence my interpretation of the data. Consequently I aimed to develop increased awareness of myself. Initially this involved reflection on where this potential bias might have developed and I identified the following:

- 1) It offered me a way to protect myself when analysing emotive text.
- 2) I am familiar with using attachment theory in adoption in a clinical context – perhaps I feel more comfortable in a clinical than research context and unconsciously I tried to create circumstances that suited my pre-existing style.
- 3) Anxiety to 'get it right' and lack of experience using IPA meant I left the model at times in favour of familiarity.

All of these are likely to have some truth and with this increased awareness I planned various techniques that could help me improve my commitment to IPA and reduce the influence of attachment theory. This included taking breaks in order to collect my thoughts and reflect on what I had been reading so that I could return to the data with 'fresh eyes'. This type of technique has been reported elsewhere (e.g. Smith et al., 2009). Self-care was also important and I developed strategies that helped me to disengage with data at the end of the day. I also kept a log of the emotional impact that data had on me so that I could consider if analysis was influenced by my affect (e.g. Ben-Ari & Enosh, 2010; Tufford & Newman, 2012). For instance, if I was experiencing anger I wanted to ensure that I did not state the participant was experiencing anger when actually there was no evidence to support this. Finally, I used supervision as a method of ensuring attachment theory and formulation had not infiltrated my analysis.

Cluster 2: Turning points

'Turning points' refers to the process of empowerment that became a driving factor in participants making changes to their lives. This occurred as participants came to conceptualise their declining adoptions as 'stuck'. Stories that

contributed to this narrative included restriction in being 'themselves' and cycles of conflict that lacked resolution. It is important also, that although participants started to explore their behaviour, push boundaries and 'find their voice' in the adoption, very few did this with awareness at the time that the adoption would end in disruption. Instead, there was a noticeable lack of direction but a sense that anything to provoke change was better than the current 'stuck' situation.

Theme 4: Recognising 'stuckness'

'Stuckness' became apparent as participants began to talk about how it felt to be part of an adoption filled with conflict; in a sense, some participants experienced a shift from embracing conflict due to the predictability offered to it becoming unbearable. In the following (extract 29), Faye articulates that the repetition of conflict naturally led her to look for an exit.

Extract 29

Just - it was just, like the same every day, knowing what's going to happen next and then it came, when I said that I wanted to get out of there. [Faye, interview 1, line 169]

For other participants, time was used as a method of articulating 'stuckness'. For instance, Rose (extract 30) describes that during the adoption time passed slowly due to the unhappiness that conflict induced, knowing that further conflict was always around the corner:

Extract 30

When I was in my adoption it was always slow because every week or every couple of days, everyone was like arguing and just repeating and repeating and just stuck. [Rose interview 2, line 712]

She further emphasised 'stuckness' by describing this juxtaposing her current circumstances. In doing this, she emphasised the importance of autonomy and freedom (extract 31).

Extract 31

The more time you have something you don't like, the slower it seems to be. Like something that you don't like, you seem to be there for and stuck in the slow, slow pace but at moment life's just picking up and it's, it's great, it's

there's nothing, nothing to slow me down. So. Whereas in the adoption it was just like something that was repeating and repeating and going in forever but at the moment, my I'm by myself it just seems to be going fast 'cos it's what I'm wanting. [Rose, interview 2, line 689]

For others, 'stuckness' was realised due to disempowerment experienced through being unheard. In extract 32, Amy refers to being returned to her adoption even though she did not want to. Not only does she exemplify her disempowerment but also the extent to which her needs were unheard in situations that involved her adoption.

Extract 32

At the end of my respite, social services decided that they were going to put me back with my adopted mum and dad and I didn't want to and I told them I didn't want to and they still put me back there anyway. [Amy, interview 1, line 80]

Thus, throughout the adoption and escalation of conflict, participants came to interpret that they were stuck in a context where they felt they could not be themselves, yet were exposed to aggression, with no knowledge of how to manage the situation.

Theme 5: Making change

In retrospect, participants commented that reaching 'stuckness' in their adoption was essential in order to prompt a turning point and drive them to challenge the situation. The following considers 1) the experience of instigating change prior to disruption and 2) interpretations of the disruption process.

1) Instigating change prior to disruption

Although being driven to make changes was a shared experience, it occurred on different levels of consciousness for participants – for some, the turning point coincided with adolescence and a newfound ability to stand up for themselves and attain autonomy (extract 33):

Extract 33

As you start to get older then you do get your voice...your mum goes 'who do you think you are?' and then I go 'I'm Caitlin!' [Caitlin, interview 1, line 462]

For others, change was far less conscious; participants described their behaviour as being reactive to the situation - any benefits were short-lived and generally the behaviour made the situation worse (see extracts 34, 35):

Extract 34

Lily: My mum shouted a lot so I ran away again.
Interviewer: How helpful was it the second time?
L: Still not helpful
I: How come?
L: Cos it didn't solve anything [Lily, interview 1, line 316]

Extract 35

I kept running away and made things harder...made things worse for my mum and dad. [Lily, interview 2, line 311]

A range of behaviours were used by all participants at some point in reaction to being constrained and as an attempt to assert autonomy and create change. Faye demonstrates these techniques in extract 36: aggression (which was interpreted as self-defence) and running away (which was seen as escape).

Extract 36

[Pressured speech] The same thing happened again, but they've got me on the stairs this time, near the banister of the stairs and they were like pushing me and stuff so obviously I've tried to get in the living room, opened the door and there and, and [Mums] brothers wife's been stood there and like I've swung open the door and she's swung it back in my face. And then I've tried to go upstairs and they've pulled me back down. So then the next day I've walked down to my Nan's again - no, and then they called the police on me, AGAIN. [Faye, interview 1, line 178]

Faye's pressured recall of the event indicates how frenzied, emotive and unbearable the experience was. Throughout this extract, her repeated reference to the effort she felt she had to exert in order to escape ("*I've tried*", "*I've swung*") indicates her perception that she felt pulled back into the conflict by the family. It also implies the exertion that was required in order to survive such conflict. Whilst describing conflict, each participant's experience appeared to be laced with powerlessness (i.e. "*No one would listen to me, no one would sit down and talk to me*" [Faye, interview 1, line 272]).

It was striking that no participant recalled awareness at the time that disruption was on the horizon, even with several participants reporting brief time

away from the adoptive family as they sought to challenge the 'stuckness' they experienced (i.e. running away, respite, and foster care). It was only with retrospect that participants observed that their aggressive and challenging behaviour could have potentially empowered them but also contributed to the demise of the adoption (see extract 37).

Extract 37

I'd get a million and one messages off [adopted mum] the next day asking me when I was coming home and that...at this point I was staying out...I was slowly but gradually getting out. If I did go back it was for like a night and then I'd get back out and go, I wouldn't stay in. [Rose, interview 1, line 701]

This suggests that in the midst of conflict, insight was limited. Instead, 'treading water' and survival were the priorities. Furthermore, hopelessness and helplessness became more apparent whereby solutions were not perceived as viable and the situation intensified further (see extracts 38, 39, 40):

Extract 38

I went there [CAMHS] one day and she said the only option for me was to go into a care-home if I wanted to get out of there and that and I said I didn't want to go into a care home. So that night I've gone out again. [Faye, interview 1, line 172]

Here, Faye describes that re-entering the care system was not a longer-term outcome that she desired. As she returned to her adoptive home she describes engaging in tried and tested methods of attaining short-term respite from the situation: running away. This implies that in spite of no ideal solution she remained determined to survive and find a way of coping and resolving her distress.

Extract 39

In the same year I went to another one [foster home] and I got neglected...but no one would believe me....then I ran away for 10 days and then they made me go back so I topped myself so I didn't have to be there cos no one was listening to me and then they started listening to me after that and I got moved out of there...it was frustrating more than anything. It got me angry cos it was like all these things was happening like I was getting drunk, I was done for being drunk but there was nothing else to do.[Caitlin, interview 1, line 156]

Similar to Faye, Caitlin describes that her options for survival were also limited, however she interprets that this is because no one was listening when she attempted to communicate her needs. This suggests that during the adoption Caitlin had some level of insight about how to meet her emotional needs. As an example of this, when her survival strategy of returning to care was ineffective, Caitlin described taking an overdose and engaging in substance misuse in order to make herself heard. This also implies that as she ran out of options (i.e. leaving the adoption had not resolved the experience of being unheard) her behaviour escalated and became increasingly risky.

Extract 40

I wanted like, to run away and that, I even tried...but then there wasn't anywhere for me to go...no one would come and help me or owt. [Amy, interview 1, line 301]

Finally, Amy describes helplessness as she realised that even when she tried to run away and escape the distress of her adoption this only reinforced that she was alone as there was nowhere for her to go.

2) Interpretations of the disruption process

As adoptions progressed towards disruption, similar experiences were encountered. Firstly, the majority of participants made a rapid transition from lack of awareness that disruption was on the horizon to developing insight and, from their point of view, making the final decision that they were leaving. This, they judged to be the ultimate step in empowerment (extract 41).

Extract 41

Faye: And then I went there [foster placement] and then they asked if I'd go home, ever go home and I said no so this is why I'm here today...

Interviewer: ...So...you left adoptive placement, you went to live with nana for three weeks then after three weeks you went to live with [foster carer]. They asked if you wanted to go back to the adoptive placement, who said no?

F: I did

I: Did your adoptive family want you back at that point?

F: It wasn't up to them at that point, it was up to me

I: What was that like?

F: Better because I knew I could put what I wanted across [Faye, interview 1, line 220]

Furthermore, generally the disruption itself was interpreted positively by participants, and in some instances as being long overdue. This is demonstrated

by language that alludes to relief. For instance, although Lily struggled to expand on the circumstances that brought about the disruption she was able to reflect that post disruption she felt happy and relieved to be away from arguments and conflict (extract 42). This was present for most participants and represented a process of 'unshackling' from parents.

Extract 42

Interviewer: So what happened that made the adoption end?

Lily: Getting locked up and running away

I: Getting locked up and running away, so those are the two things that you think made your adoption end?

L: Silence (4 seconds)

I: How come you think they're what ended it?

L: Cos my mum couldn't erm handle me running away and stuff.

I: How do you know that?

L: Because she told me (Pause, three seconds)

I: And what do you think of that

L: I don't think much of it.

I: No? How did you feel when it ended?

L: Um, happy

I: How come?

L: Cos then I could have my own space away from her.

I: How come it was important to have your own space?

L: So I could be somewhere with no arguing (pause, 5 seconds) [Lily, interview 1, line 205]

In other instances, participants expressed hope about a new start and excitement about what the future might bring – older participants in particular, who appeared to have thought about independence in greater depth than the younger participants, indicated the positivity that orchestrating a move into the next stage of their lives brought about (see extracts 43, 44).

Extract 43

When I moved into my own place and moved out of those systems of being in care and that, it was like I had the world open to myself. I could go do what I wanted when I wanted [Rose, interview 2, line 409]

Extract 44

Feels weird and it feels like another life. Sometimes I don't feel like I was actually there in the bad bits. It doesn't feel like that actually happened. It feels like I've just been doing this for so long now...every day is something new...it just

seems to be for the better...it's easier to cope [Rose, interview 2, line 726]

However, despite emerging hope, the process of disruption was also emotionally challenging, requiring participants to assimilate the experience of separating from a family unit. For most, it seemed that living circumstances immediately post-disruption contributed significantly to this process. For instance, Amy described that re-entering foster care was an angering experience as she was made to observe a well-functioning family. This reinforced the failings of her adoption and led her to sometimes ruminate on earlier experiences such as not being adequately cared for and being placed for adoption in the first place. Ultimately this left her feeling angry, sad and alone (extract 45):

Extract 45

Amy: Then I had like 2 mums at one point and I went from having 2 mums to none.

Interviewer: Right

A: Like in a year

I: What was that like?

A: It's like hard and difficult

I Mmm

A: Like I never had anyone there when I was like a teenager 'cos like well bring me up like someone should do

I: Right, mmm, tell me a little bit more about that, about being a teenager and not having someone there to bring you up like they should do?

A: It was horrible and then I had to watch like I had to live with another family [foster care] and I had to watch them having a mum and them having a nice life and all that, it just isn't nice

I: What did it feel like?

A: Like trying to rub it in your face or something, 'cos I know there isn't really another way to look after kids if their parents can't but it is just like rubbing it in someone's face if you put them with a family that have got a family and a mum and dad and then you've just got to watch that. It's not nice; you don't ever feel like part of the family or anything... 'Cos you're not

...and that's why sometimes I'm angry. 'Cos I'm angry that she [birth mum] left and like she didn't answer like all my questions and she was selfish and chose drugs. [Amy, interview 2, line 174]

For others, the disruption was a protracted process of entering and exiting respite and foster care over a number of years and this was reflected in chaotic and confusing recall of events (extract 46).

Extract 46

Caitlin: I went to [NAME]'s home in 2007 and 2009 I got kicked out of there and then went to a respite home, got kicked out of there, I'll put that on there [the timeline] 2009 another home...

Interviewer: Yeah

C: Got kicked out of there for stealing then in the same year went to another ones and I got neglected like properly neglected but no one would believe me like I had to be out the house for 7 and I wasn't allowed back in til 5, then I had to have my tea and then I had to go out at 6 'til 11 so she could go to bingo. And like no one believed me and then like i ran away for 10 days and then they made me go back so I topped myself so I didn't have to be there 'cos no one was listening to me and then they started listening to me after that and I got moved out of there within a week [Caitlin, interview 1, line 151]

Yet, in spite of multiple moves, Caitlin demonstrates that her experience of disruption is that it was a learning opportunity. For instance, she has learnt about boundaries and respect (extract 47).

Extract 47

Interviewer: there's been a change from say 2009 when you maybe first started to get involved in those [drugs and alcohol]-

Caitlin: In the end of 2009 I moved to [PLACE NAME]

I: Right

C: Which, I was there 'til I moved here

I: Mmmhmmm

C: And basically erm they made me go, they didn't make me go to college but they said I have to go to college or I get kicked out of there. Basically it wasn't a care home it wasn't a foster home it was a residential home which they didn't pretend to be a family, they didn't you know, there was nothing like, like when I used to come in and they used to go now then dear like stuff like that like I was in the family, it wasn't like that it was like they treat me with respect. I treat them with respect, the more things I did good, the more I got [Caitlin, interview 1, Line 207]

This cluster has focused on the turning point that occurs when participants have made sense of their position within the adoption. At this stage in their narrative participants were pre-occupied with trying to 'tread water' and survive in the adoption. Strategies for this included running away and violence. However, their behaviour generated a level of empowerment as participants recognised their increasing agency and they progressed towards disruption. Although in some instances disruption was highly protracted, for most participants the experience

was positively interpreted (during the interview) as a learning opportunity or release from unhappy and challenging circumstances.

Reflection – Transference-countertransference

The notion of transference-countertransference emerged from psychoanalytic psychotherapy and refers to the unconscious passing of emotion from one individual to another. In therapeutic settings the client may redirect emotion towards the therapist, who, based on their own personal experiences may respond by unconsciously directing their own feelings towards a client (Racker, 1982). Loewald (1986) suggests that a therapist must have awareness of themselves in order to limit interference with the neutrality and emotional impartiality that should be offered to clients. This process is also apparent in research and therefore researchers also have a responsibility to offer neutrality in order to ensure that data collected represents that participant's opinion as opposed to the researcher's.

Thus, throughout the interview and analysis process I reflected on how I was affected by each participant on an emotional level - hearing about experiences of survival was poignant for me and I felt empathy for each participant. At times I noticed that this influenced my responses. For instance, when hearing about Amy's experiences with drugs, initially I could feel myself becoming upset. I was aware that this could have been the result of transference and that ideally I wanted to remain neutral, not expressing such emotion in case it influenced the direction of the interview. I consequently worked to manage this emotion by detaching myself. However, I later noticed that this reflected a strategy that Amy had adopted throughout the interview - her tone of voice never altered and she appeared highly detached from the topic displaying no overt signs of emotion. Post-interview this led me to reflect on how successful I had actually been in navigating transference-countertransference.

On the one hand I attempted to adapt my style when I recognised my own emotion but on the other hand it appears my adapted style directly mirrored the participants' suggesting that the transference-countertransference remained unresolved. I was aware also that detaching might have led to me disengage in order to protect myself; this might have influenced the questions I asked and the depth of the interview conducted. In spite of this, looking back over Amy's interviews she offered a good level of depth and reflection. Following Amy's

interview I wrote a reflective memo in order to deepen my insight about transference-countertransference. I also made a point of continuing reflection on transference-countertransference with each subsequent interview.

Cluster 3: Determination to be better

Determination to be better refers to changes that participants attempted to instigate post disruption. The intention of change was two-fold: a) proving others wrong through getting to grips with independence and freedom and b) negotiating relationships in order to achieve stability. The latter demonstrates insight that participants developed throughout the adoption, for example, their ability to recognise their own vulnerabilities and put plans into action to ensure their ongoing well-being and safety.

For the young people in this study, growing up came early in comparison with their peers; participants described finding their voice; learning how to look after themselves and maturing emotionally. This emerged in the midst of disempowerment and helplessness, which highlighted a capacity to adapt to situations even with a limited range of coping strategies. In the following passage (extract 48), Rose represents all participants when describing her experience of growing up:

Extract 48

I made three people cry by telling them what had happened to me. And then three people are now... I only told them because they were threatening to do things to themselves. One because his Mum and Dad were telling him he had to grow up he was eighteen he needed to grow up. He was threatening to chuck himself off of this building. And I was like look you wana hear something bad compared to your Mum and Dad telling you to grow up. I just lost my rag with him and I just ended up blurting it all out. And the boy just ended up crying I didn't know what to do with him then. And he was like I'm sorry I'm sorry for whatever happened to you. I was like what you sorry for you didn't do any of it. Look where I am now on my own two feet getting my education sorting myself out its time you did the same. [Rose, interview 1, line 236]

Here, Rose recognises the bleakness of her adoption and how this expedited her maturation. There is also a strength and resilience in her language as she articulated being a survivor by learning how to stand on her own two feet – an experience that has made her proud of herself. This pride was echoed by most participants. Thus, maturation was the backbone of the themes in this cluster - with maturation participants were able to explore freedom and establish circumstances in which they could thrive. The following considers these in turn.

Theme 6: Freedom

When discussing freedom there were two pertinent experiences: (1) the experience of learning what independence means (2) the explicit process of separating from the adoptive family and what this involved (e.g. space).

(1) What is independence?

All participants began talking about life post-disruption in the context of freedom and independence. A strong theme of self-sufficiency became apparent as participants expressed a desire to control their own lives, to be self-reliant and alter their identity instead of being seen as ‘an adopted person’ (see extracts 49, 50):

Extract 49

[Independence means] like coping by myself and not having to rely on anyone. [Amy, interview 2, line 482]

Extract 50

Rose: freedom

Interviewer tell me what you mean by freedom

R: free. Away from all the rules and the, I don't know, stigma with being adoption or a person in care and that
[Rose, interview 2, line 354]

Furthermore, although each participant described that the adoption had been deteriorating for some time and they reported ‘treading water’, each recalled that the actual disruption was sudden and unplanned. Thus there was very fast change in identity from ‘stuck’ to ‘free’ (extract 51):

Extract 51

I was just sick of being passed pillar to post...within the foster bit and I wanted somewhere where I could just stay and be my own, instead of having to follow rules and what times to be in and all that. Cos I'd been pretty independent for ages anyway just that I was seen under the social as living with someone...this [the flat] changed it all, this was my first home, me doing what I want to...being wherever I want to me...it was just somewhere I loved to be. (Rose, interview 2, line 73)

This meant that participants learnt quickly that their existing coping strategies (i.e. fighting for survival) were unlikely to be adequate for life outside the adoptive family. This marked a steep learning curve. For instance, extract 52 illustrates Caitlin's process of learning about boundaries post-disruption:

Extract 52

They (residential) said I have to go to college or I get kicked out of there. Basically it wasn't a care home, it wasn't a foster home, it was a residential home, which, they didn't pretend to be a family. They didn't you know...I used to come in and they used to go now then dear like stuff like that, like I was in the family. It wasn't like that it was like they treat me with respect. I treat them with respect. The more things I did good, the more things I got...the more I did bad the more I got rejected for good things...it just seemed to work as a good system.[Caitlin, interview 1, line 215]

Caitlin refers to boundaries being a new experience that, upon reflection, offered her an effective way of relating to people (i.e. developing respect). This suggests that she became resilient and able to learn and adapt to new situations. This is powerful in conjunction with her suggestion that boundaries were missing in her adoption meaning that until this point she has not been able to experience mutual respect.

(2) Separating from the adoptive family

Running parallel to the learning curve of independence was the process of becoming unshackled (i.e. extricating themselves from their parents physically). Generally, this was discussed in the context of the emotional consequences of physically leaving the adoption and wanting to be a 'better' person. Commonly, participants referred to relief, with most participants commenting that they felt happy to leave the adoption as it meant exiting systems and gaining space from

difficult situations. In extract 53, Amy alludes to happiness she experienced having exited care systems:

Extract 53

I built like my own life and I didn't like need the care system anymore...and that's important cos I hate being in care. [Amy, Interview 2, line 525]

At times, the extent of unshackling was measured through discussion about gains made since leaving the adoption and comparison with things left behind. Ultimately, participants experienced that through independence they were able to assure their security as opposed to being unheard during the adoption as Faye (extract 54) explains:

Extract 54

I have more contact with my mates and if anything happens I know I've always got my nana on the phone. [Faye, Interview 2, line 40]

Theme 7: Creating conditions for stability

Creating stability was a clear theme amongst all participants but was particularly present in the older participants, which may be associated with their living circumstance (see Table 2). They had a drive to plan for the future and to achieve things that they perceived as not being possible had they remained in the adoption. The identification and achievement of goals was frequently influenced by a desire to prove others wrong, which offered a method of exploring identity and self-expression, maintaining motivation and preventing further negative judgement in their new lives post-disruption. The following extracts (55-58) demonstrate this:

Extract 55

I'd proved her wrong...she told me that I wouldn't go through a whole course...and I did and she came to both my shows...she said that she'd never been so proud of me in her life...it was brilliant 'cos it's like no one's ever said that to me before. Like it's, I've either been told off or been told that I'm doing something wrong. [Caitlin, Interview 2, line 9]

Extract 56

It just made me do, made me want to do it even more like, like with college when me dad said I won't last three weeks, now I've lasted a year and a month, so it's like...it made me want to do it more just to prove them wrong. [Caitlin, Interview 1, line 881]

Extract 57

Rose: I beat them to it before they could judge me totally, I've stopped them thinking I was going to be the worst things under the sun

Interviewer: stop who thinking that?

R: the adoption family, especially the adoption dad. So, who apparently is proud of me but I don't really care, it's up to him what he thinks as long as I know that we're alright I couldn't care less. [Rose, Interview 2, line 954]

Extract 58

I'm not my mum and I'm not my dad and I'm not my adoption parents, I'm me. [Rose, Interview 2, Line 906]

Each participant in the preceding extracts suggested that disproving their parent's expectations encouraged a drive to make progress in their life. For instance, Caitlin commented that proving her adoptive mother wrong "*made me want to do it [college] even more*". Equally, proving others wrong was also interpreted as regaining control following a childhood of powerlessness. In extract 58, Rose asserts her new identity, making it clear she is nobody but herself and in extract 57, she highlights taking control in order to prove her parents wrong before they could complete their negative judgement of her (i.e. "I've stopped them"). Thus, achievement also played a role in participants increasing ownership and belonging post-disruption. As extracts 59 and 60 illustrate, achievement allowed them to begin thinking about their role in society as a young adult or parent:

Extract 59

It was going to be aha! To my, my mum – "I can look after my kid" I can do what you – I can't give my baby away and then it's like I'm going to prove [adopted parents] that I am not going to do any of the mistakes that they did...it's me on my own...he's like something I can shove in their face. But then again he's something that I have always wanted to look after. [Rose, Interview 1, 507]

Extract 60

Once I moved into my own place and moved out of those systems of being in care and that, it was like I had the world open to myself, I could go do what I wanted, when I wanted [Rose, Interview 2 , line 409]

Central to creating stability was figuring out relationships. Each participant spoke about this in the context of cultivating new relationships post disruption, with a minority also referring to recovering relationships with their parents. Participants demonstrated considerable capacity to reflect on their experiences of relationships post-disruption. For instance, Amy commented “*I want to be loved but not the sort of love that people have given me*” and born out of this was a desire to understand their position in relation to trust. Some classified themselves as avoidant of trust, preferring to keep their distance in order to self-protect. This was often spoken about eloquently (see extracts 61, 62) and tended to be a decision made based on previous experiences.

Extract 61

I don't get too attached to people, that's why it's just...people are selfish at the end of the day and they'll only choose themselves...I don't trust anyone me, not at all, 'cos everyone lies...everyone I know has lied to me. [Amy, Interview 2, line 429]

Extract 62

Interviewer: What makes it so difficult to understand your feelings towards people?

Amy: 'cos of all the horrible things that people have done...like not cared and that, so it's hard to trust people and believe what they say (Pause 2 seconds)...it's hard to get past something when you don't understand it. [Amy, Interview 2, line 737]

On the other hand, some participants recognised their vulnerability in relation to trust. That is, they give their trust too willingly which places them at risk of being hurt emotionally. Rose demonstrates below that trust is a concept she is yet to grasp as she describes long periods of struggling to judge people's genuineness. Equally, her understanding of trust appears to be limited, for instance she judges trust based on whether people 'stick around' and their physical reliability as opposed to them holding her confidence (extract 63):

Extract 63

I trust anyone and everyone so it takes ages for me to figure out who are really going to stick around and them who aren't so it's a bit like, it's took me since I were 11 with some of them...to actually realise that they are just using and not really that bothered. [Rose, Interview 2, line 161]

However, in recognising their position in relation to trust, most participants demonstrated an ability to adapt and subsequently had been able to create an environment appropriate for their needs. As extract 64 exemplifies, in some instances, support had been put into place that limited experiences such as rejection that had played out during the adoption.

Extract 64

[About a support worker at college] she is like a family figure like I haven't had a permanent support because like people have been in and out of my life like she's never once told me to go away or she'd never like said a bad word about me...it means a lot cos it's like, it's like the only person that I can actually properly trust. [Caitlin, Interview 2, line 360]

Caitlin demonstrates that she has found a non-threatening authority figure that is able to offer the level of nurture that she is able to accept. She also possesses reasonable insight about what makes this relationship successful: acceptance "*she's never once told me to go away*". This relationship is based on mutual respect which is an experience Caitlin never had with her adoptive parents due to repeated rejections. Not all participants however had achieved a similar level of insight. At the other end of the spectrum, Lily had very limited awareness about her role in relationships, though some recognition that she did require emotional support "*I get on with it I just talk to other people about my problems*" (Lily, Interview 2, line 265).

In terms of what mediated the development of insight into relationships so that they could be used to achieve stability, it appeared that external validation was important. This reflects a pattern developed throughout adoption whereby external forces (i.e. parents) had been a source of regulation. However, post disruption this regulation was favourable as it meant that participants were being seen and heard unlike before (see extracts 65, 66). Thus feedback received post-disruption was more palatable making it significantly less threatening.

Extract 65

F: Well, this picture means a lot to me cos this one was taken when- just it would have been a few months after I came to live here and when this picture was taken all, like, well you go in with like your form tutor and you get your form photo and you get like your own photo. And with like getting the photo done my form tutor was there and like he turned round to me and said you seem like a lot happier now. And this just means a lot to me cos it shows how much happier I am now than I was.

I: Hmm. What did it mean to you when your form tutor said that to you?

F: I felt like different.

I: Right

F: In like a different way cos he saw me go through what I went through and always being sad and upset and stuff to being someone that I can now have a laugh with.

I: So when you said you felt different what was that like?

F: I just felt like someone else had noticed that I've changed...cos at home I never felt like anyone noticed me. [Faye, Interview 2, line 333]

Extract 66

Getting the photo done, my form tutor was there and like he turned round to me and said you seem like a lot happier now. And this just meant a lot to me cos it shows how much happier I am now than I was. [Faye, Interview 2, line 337]

Recovering relationships with adoptive parents post disruption was important to a couple of participants. This relationship was the most challenging for participants to make sense of, and for many, it was easier to attempt to leave this relationship in the past and explore current relationships instead. Where attempts had been made to negotiate new parent-child relationships progress was slow and it continued to feel like there were 'right and wrong' ways of relating. Relationships were described as uncomfortable and thus participants' demonstrated courage and determination in persevering with a challenging situation (extract 67):

Extract 67

Interviewer: how would you describe your relationship with you mum at the moment?

Caitlin: erm, it's uneasy, like you've got to like, you feel like you're treading on egg shells all the time, like you know, you're trying not to do the wrong things. [Caitlin, Interview 2, line 40]

Ultimately, for Caitlin, what encouraged her to continue through this unease was the fact that the benefits outweighed the disadvantages and she was able to alter her mother's perception of her (extract 68):

Extract 68

It was the first time I'd seen my mum in like six months and it was the first time she'd actually shown affection in public...and she'd give me a hug and tell me she loved me in public, which had been like the first time in years. [Caitlin, Interview 2, line 207]

The final cluster considered life post-disruption which was generally an experience filled with hope, positive learning opportunities and pride. Participants' first job post-disruption was to learn how to embrace freedom and independence and create a sense of self that felt appropriate. Consequently, they matured quickly and found that it was essential to create stability in order to survive. Subsequently, each participant found that getting to grips with relationships, understanding trust and their individual needs enabled them to cultivate a range of support systems that offered security and survival.

CHAPTER FOUR: DISCUSSION

About 20% of UK adoptions disrupt with precipitators including placement with a sibling, older age at placement, numerous placements prior to adoption, and in particular, expression of emotional difficulties or challenging behaviour. Although factors such as these are fairly well evidenced (e.g. Coakley & Berrick, 2008; Holloway, 1997; Peters et al., 1999; Rushton & Dance, 2006), very little is known about the experience of disruption for those involved. As young people have not yet contributed their perspective on adoption disruption this means that currently services are limited in the extent to which they reflect their clients' needs leading up to and post disruption. Consequently, this research aimed to develop greater understanding of adoption and adoption disruption from the perspective of five young women. It was intended that in addition to raising awareness about the process of disruption, such research might illuminate the nature of relationships during and post-disruption, and depict what life is like post-disruption - an area in which there is little but anecdotal evidence. This research also aimed to support professionals in identifying the needs of families at risk of disruption and in particular, young women who have experienced adoption disruption.

This chapter begins by summarising the findings of this study followed by consideration of the outcomes in to the context of existing research literature. Specifically, the findings are considered in relation to adoption disruption research, attachment theory and identity formation. Clinical implications, which are informed by a systemic model, are then discussed followed by reflections on methodological issues.

Summary of findings

The major experience of the young women in this study was a journey towards insight and independence. Being adopted triggered a process of trying to make sense of the situation, which resulted in a journey through conflict where experiences including rejection and invisibility prompted insights about identity. Following this, participants strove to assert themselves – a process they felt occurred at a faster pace for them than their peers - and learn through experience how to be independent and thrive. A brief overview of the three clusters can be found below:

Regulated and restrained

The first cluster reflects the experience of feeling regulated and restrained by adoptive parents (i.e. being prevented from making sense of the situation and being inhibited in self-expression). For instance, when pervasive confusion emerged about adoption itself (i.e. why am I here? why is there violence here?), parents restricted access to information that the young person felt would enable understanding – questions were left unanswered and access to previous carers was prevented. Some went on to reflect that encountering this level of regulation, and therefore unresolved confusion, made it hard to understand their adoptive parent's expectations, which made it impossible to determine appropriate and inappropriate behaviour.

Furthermore, participants recalled that the adoption began to deteriorate at this point; conflict, aggression and arguing became a prevalent response to encounters of regulation and restraint and notably such distress was rarely resolved. For example, participants recognised that they struggled to express their own self-concept due to perceived pressures to understand and act on parental expectations of them. Consequently participants felt that they took on prescribed roles such as 'dangerous child' or 'onlooker', which led to disempowerment and an experience of being stuck. Participants went on to suggest that during this process they felt their needs were unmet due to their parents' preoccupation with regulation and restriction that meant communications were not seen or heard.

Turning points

The prevalence of confusion and being unheard led all participants to feel disempowered and stuck in the adoption. However, for each participant this eventually brought a turning point whereby they began to achieve control over themselves (i.e. expressing their true identities). In doing so, they acknowledged that their behaviour escalated (i.e. running away and violence was common) though this was considered essential at the time in order to 'unshackle' themselves from their parents' regulation. Despite this, participants did not comment that this behaviour was done with the intention of disrupting the adoption or even with awareness that disruption might occur. Instead, they suggested that it offered a method of survival. When it became apparent that each adoption was going to disrupt, participants described this as a fast transition from being in the

family home to no longer being there. Although there was little time to adjust, most participants described a positive experience filled with relief and hope for the future.

Determination to be better

Leaving the adoption marked a period of 'growing up' for the young women in this study; a time in which lessons were learnt about independence and how to be 'free' from the adoptive family. Self-sufficiency was perceived as the backbone of their freedom and involved creating a secure environment post-disruption that required little involvement with family or agencies. Achieving this and proving others wrong (i.e. parents) was an empowering process that increased perceptions of worth (i.e. I am successful, I can achieve things). This contributed to identity formation post-adoption. Creating stability and bettering themselves post disruption also involved exploration of relationships; older participants displayed slightly more capacity for reflection in this area which may be a reflection of life stage. Nevertheless each participant referred to trust when considering relationships (i.e. some felt they trusted too easily and this made them vulnerable) and all were able to establish support systems that felt appropriate for their needs post-disruption. Often this involved college mentors, partners, friends and residential workers. Furthermore, most participants described plans for the future including college and forming their own families.

Findings in relation to adoption disruption research

Existing research identified three prominent precipitators of adoption disruption: 1) challenging behaviour, 2) older age at placement and 3) numerous placements prior to adoption (Rushton & Dance, 2006). Placement with siblings is also thought to precipitate disruption although there is contradictory evidence with some research suggesting placement with a sibling increases disruption whilst others suggest placement with a sibling improves outcome (Berry & Barth, 1990; Coakley & Berrick, 2008; Kadushin & Seidel, 1971). However, they are derived from data that offers little understanding about the experience itself and consequently it was previously unknown whether young people themselves

perceive these factors to be the precipitators of disruption. The current research addresses this problem:

1) *'Challenging behaviour'*

Little is known about 'challenging behaviour' from the perspective of young people, which is a gap this study sought to fill. In this study, participants reported that the escalation in their own challenging behaviour contributed to disruption – most noted that at its peak, conflict involved violence on a regular basis. However, the behaviour was not intended to cause disruption; it was interpreted as a method of survival and a communication of need at a time of great confusion and distress. This is not uncommon as previous research demonstrates that expression of behaviours including physical and verbal aggression, running away and emotional distress is common within LAC and adopted populations (e.g. Green & Goldwyn, 2002; Hanson & Spratt, 2000; O'Connor et al., 2000; Zeanah et al., 2005).

Furthermore, literature suggests that children employ certain behaviours as a means of protection and 'survival' (e.g. Bowlby, 1969; Boris & Zeanah, 1999). Thus, a child who encounters neglect, abuse or multiple caregivers is likely to have few coping strategies in order to navigate subsequent situations that are perceived as challenging (Ainsworth, 1979; Bowlby, 1969; Main & Solomon, 1990). In situations that they consider to be threatening (i.e. being placed in an adoption) behaviour strategies including verbal and physical aggression, avoidance and indiscriminate friendliness can result in order to promote safety (e.g. Bowlby, 1988; Zeanah et al., 1993). In the context of the present study, participants shared perceptions that feeling misunderstood, regulated and unheard by their adoptive parents was associated with displays of 'challenging behaviour' as a way of coping with distress. Unfortunately, often this escalated the situation and perhaps parents were not able to understand the communication. Consequently, participants recalled that the situation spiralled and the parent-child relationship deteriorated further. This demonstrates support of the pre-existing evidence base regarding attachment security and subsequent coping strategies in order to survive (i.e. Ainsworth, 1979; Bowlby, 1988) and offers helpful explanatory accounts about how young people perceive their behaviour.

2) *Placement with siblings*

Participants placed with either birth siblings or the adoptive families birth child commented that the presence of a sibling created an opportunity for

comparison through which they were likely to judge themselves unfavourably. Consequently, presence of a sibling reinforced experiences of rejection and unmet needs, which participants felt provoked deterioration. All participants expressed that this deterioration in relationships and increase in conflict resulted in disruption. Research regarding placement with a sibling has not yet reached a consensus; some suggests higher risk of disruption when an adoptive family have a birth child present, which the present study would support (e.g. Quinton, Rushton, Dance & Mayes, 1998). On the other hand, a cross-country review of sibling placements (i.e. placements of full or half siblings, not placement of children with adoptive families who have birth children) concluded that they were as stable as or more stable than placements of single children or separated siblings Hegar (2005). This is reflected by literature that indicates the presence of a full or half sibling is considered a source of support that facilitates adaptation to placement (e.g. Caya & Liem, 1998; Dolgin & Lindsay, 1999). As this study explored adoption disruption it is not surprising that assertions of stability through sibling placement are not supported. Instead, participants described feeling rejected in the adoptive home, which mirrors risk factors of adoption disruption identified previously (e.g. Rushton, 2007).

3) Age at placement and number of placement prior to adoption

Few participants discussed their age at placement or number of foster placements, however, most commented on the transition to adoption itself and the challenges that were faced in trying to adjust. Reasons for this included having to live with strangers, not wanting to leave a foster placement and no longer being able to access foster carers. One participant in particular struggled to adapt and 'let go' of her foster carer. For her, this blighted the entire adoption and suggests that the lack of preparation and support post adoption could have contributed to her disrupted adoption. Although children and young people are prepared for adoption through techniques such as life-story books, the quality and effectiveness of these methods is questionable (Baynes, 2008).

4) Additional factors

Importantly, in research relating to adoption disruption, parental factors such as commitment have never been considered unlike foster disruption where such issues are more understood (e.g. Oke et al., 2011). Although the current research did not interview parents, participants suggested that they were unable to understand their parent's expectations and that largely perceived non-nurturing

behaviour (i.e. rejection) was unfathomable thus creating instability in the adoptive home. Furthermore, the young women in this study perceived that their emotional needs were not met by the adoption (i.e. they were restricted and rejected). Following comments that suggested confusion as to why their parents had adopted in the first place, participants experienced an unsettled and problematic adoption that they felt lacked commitment on their parents' behalf. Exploring the concept of commitment further could be insightful, particularly as previous research has demonstrated the importance of commitment in creating a 'successful' adoption (e.g. Wright & Flynn, 2006).

Findings in relation to research literature on relationships

The five participants interviewed in this study reported struggling to engage in reciprocal loving relationships with their adoptive parents. Some described that although initially the adoption was filled with hope, the parent-child relationship soon deteriorated. It was perceived that there were two primary reasons for this 1) restriction: adoptive parents prevented participants making sense of adoption by limiting links with pre-adoption experiences and not offering information and 2) difficulties learning how to make sense of and anticipate their parents' behaviour.

1) Openness and restriction

Young people in this study described that when they transitioned into adoption, contact with their previous carers, whether birth family or foster, was severed. This is increasingly unusual following the Children Act (1989) where the assumption of contact with birth families (i.e. structural openness) was made apparent. Subsequently, there was a move towards transparency about adoption and maintenance of links with birth families and even foster carers, although confidence amongst professionals at being able to facilitate this varies (Department of Health, 1995; Ryan, Harris, Brown, Houston, Smith & Howard, 2011; Sykes, 2001).

Exploring this further, Brodzinsky (2005) commented that the key issue in 'openness' is not necessarily structural openness (i.e. having access to the birth family) but in fact communicative openness, that is the "attitude and behaviour of adoptive parents with regards to talking and thinking about adoption" (pp. 6, Neil, 2009). Brodzinsky suggests that creating an open, non-defensive atmosphere

whereby parents are emotionally attuned to the child facilitates emotional adjustment and therefore better outcomes. Thus, communicative openness is judged by the adoptive parent's attitudes and beliefs about adoption, their comfort with their child having connections to another family and adoptive parent's empathy for the child and birth family (Hawkins, Beckett, Rutter, Castle, Groothues, Kreppner, Stevens & Sonuga-Carke, 2008).

It seems that issues associated with communicative openness were apparent in this study; participants reflected that not knowing about their origins and losing significant attachment figures resulted in distress, including feeling unsupported and lost within the adoption. Consequently participants described resentment towards adoptive parents and a struggle to make sense of their circumstances. This description supports the suggestion that in the absence of communicative openness, psychological adjustment can be hampered (Brodzinsky, 2005). In contrast with this, Wright and Flynn (2006) explored intact adoptions finding that factors crucial for success include feeling that the 'right' family has been found (i.e. experiencing belonging and feeling listened to). Furthermore, it seemed important that quality of life was judged as better post-adoption than pre-disruption and that success in the future was viewed as entirely possible (i.e. academic attainment). Based on this research, participants in the present study may not have felt that they had the 'right' family; their narratives indicated experiences of being restricted, unheard and unsupported, which bred resentment towards their parents. Consequently, participants identified that post-disruption when challenging relationships had been exited, their lives improved immeasurably, as opposed to perceiving that life improved during the adoption as Wright and Flynn suggest.

Previous research has also suggested that perceptions of openness between children and adoptive parents varies, with adoptive parents feeling that it is relatively easy to talk about adoption, whereas young people feel that although they are curious it is difficult to ask questions (Beckett, Castle, Groothues, Hawkins, Sonuga-Barke, Colvert, Kreppner, Stevens & Rutter, 2008; Hawkins et al., 2008). Additionally, openness is described as offering children opportunity to resolve past experiences from which comfort and stability can be derived with recognition that "knowing feels more comfortable than not knowing" (pp. 311, Sykes, 2001). This is powerful as young people in the current study clearly reported that not knowing and not being able to get answers to questions created intense distress and contributed, they felt, towards disruption.

Subsequently, some participants reflected that perhaps it was challenging for their adoptive parents to reduce their tendency towards restriction and encourage openness. This also suggests a struggle for their parents to accept that their child has links with families other than the adoptive family; some participants commented that they felt their adoptive mothers expected that they should only have an attachment with them, not previous carers and that this created conflict. For instance, Faye described that she struggled to accept her adoptive parents, partly due to her perception that her adoptive parents played a significant role in preventing a relationship that she valued with her previous carer. Literature relating to openness expands on this suggesting that for adoptive parents, forming an emotional bond with the child when the birth mother is still in contact became competitive and an issue of entitlement (Sykes, 2001). However, over time the same adoptive parents came to the conclusion that openness promoted them as parents 'in the present', contributing to open and effective communication within the adoption. Additionally, qualitative research exploring an adolescent perspective about openness suggested that contrary to adoptive parents' hesitation, contact with previous carers did not replace adoptive relationships and instead they became a source of additional support limiting experiences of isolation (Berge, Mendenhall, Wrobel, Grotevant & McRoy, 2006).

Thus, literature relating to structural and communicative openness supports young people in their assertion that being unable to access or discuss pre-adoption relationships limited their ability to make sense of their experiences within adoption and specifically, why contact with previous carers was a problem. Furthermore, such restriction induced powerlessness and prompted feelings of resentment towards adoptive parents, particularly whilst unresolved confusion remained present. Participants commented that this limited their adoptive parent-child relationships and often prompted escalation in conflict.

2) Anticipating the adoptive parents

Participants in this study frequently commented that their parents' behaviour was unfathomable and could not be understood. Thus, participants could not understand why they were prevented from accessing foster carers, why they were rejected in favour of birth children, how they were supposed to act and why there was constant arguing and violence. As they grappled with their confusion, participants described using behaviours such as avoidance, aggression and passivity as coping strategies.

Attachment theory offers a way of understanding this behaviour; briefly, children are born with a drive to survive and in the early years of life they are dependent upon a caregiver in order to achieve this goal (Bowlby, 1969). Consequently, the quality of this care dictates attachment security as each child creates a mental representation of care they receive (also known as the IWM) that is used to predict and anticipate future care. Thus, if a caregiver responds to a child appropriately and meets their needs (i.e. comforts when the child cries) then a secure attachment is likely to develop. However, in situations where neglect, abuse or multiple caregivers are encountered the child is likely to develop an incoherent attachment system due to lack of consistency (i.e. dysregulation). This means that it can be difficult for the child to anticipate situations (i.e. will care be received or will it not?) and in order to cope with such confusion the child develops a range of behaviour strategies such as avoidance or ambivalence (Ainsworth, 1979; Bowlby, 1969; Bretherton, 1992; Bretherton & Munholland, 2008; Dubois-Comtois et al 2011; Walker, 2008; Zeanah et al., 1993; Zimmerman, 1999).

In adoption, where previous care may have been encountered (i.e. foster carers), there may be competing representations that make it difficult to learn how to respond to adoptive parents (e.g. Steele, Hodges, Kaniuk & Steele, 2009). For instance, neglect within the birth family creates the representation that care will not be received – a child may come to anticipate abandonment. However a period of nurture within foster care suggests that care will be received. When the child enters the adoption they must not only create a mental representation of the new carers but learn that there are different ways of being in nurturing relationships and that abandonment does not always occur. Therefore, nurture available from the adoptive parents may vary to that of a foster placement, which will almost definitely vary to that of the birth family. Overall, these competing representations make it challenging for the child to create a coherent attachment system and learn how to anticipate situations and select appropriate responses. As a consequence of this distress coping strategies such as avoidance or 'challenging behaviour' may then become apparent. The lack of predictability that participants described experiencing in conjunction with behavioural strategies such as aggression suggests a somewhat incoherent IWM. Therefore, as the previously stated theory suggests, behavioural strategies could have employed in order to ensure safety and survival.

This is further substantiated by empirical research - Pace et al., (2012) reported that of twenty-four late placed children assessed as having insecure or

disorganised attachment prior to placement, twelve did not display attachment security at 12-month follow up; they continued to engage in insecure relational strategies (i.e. aggression, avoidance) and did not display pleasure in parent-child interactions. In the context of the current research, it is suggested that participants used aggression and violence as a coping strategy in light of dysregulation (i.e. anticipating abandonment due to the unpredictability of their parents and the adoptive environment) (Bretherton, 1992; Bretherton & Munholland, 2008).

Exploring this in the context of development through childhood, Morley and Moran (2011) describe that as the child gets older, mounting cognitive bias makes it increasingly difficult to adapt the IWM (later known as attachment SoM when the child progresses to adolescence and adulthood), which could help explain why participants experienced continued difficulties in interpreting and predicting their parents. Morley and Moran suggest that early attachment experiences (which could be within or prior to adoption) influence self-concept and how the child comes to view themselves, the world and the future. For example, if a child encounters multiple experiences of neglect (i.e. an absence of or irregular caregiving), their emerging self-concept will reflect this (i.e. I am worthless, I am unlovable). Such experience can pre-dispose to psychopathology in the future and prompt the development of cognitive bias whereby all situations are interpreted in accordance with the perception of being worthless for example. Over time, it becomes harder to recognise exceptions (Beck, 1987; Morley & Moran, 2011). Although it is beyond the remit of this research to state pre-adoption histories of each participant, there is some evidence to support this hypothesis; participants in the present study provided largely negative narrative of the parent-child relationship with very few exceptions, indicating that it may have been difficult for these young people to adapt their SoM with respect to attachment. Thus in a sense participants may have been describing a hypersensitivity to experiences of rejection and isolation (being unseen and unheard) and were perhaps vulnerable to misinterpretation.

On the other hand, the participants in this study described that post-disruption they had developed the ability to recognise helpful and unhelpful ways of relating and to adapt accordingly. For example, Caitlin offered reflections about her relationship with her adoptive mother and how her role in this relationship and subsequent behaviour had altered post disruption. This is at odds with the previous suggestion that participants might have developed cognitive bias and possessed limited capacity to adapt their IWM/SoM. The present research cannot

objectively offer attachment classifications; however, the fact that participants were able to produce fairly articulate accounts of attachment related experience alludes to the emergence of some kind of security post adoption. This reflects previous research by Goldwyn and Hugh-Jones (2011) who found that from a group of ten adolescents presenting with extremely disrupted attachment histories, the three who left their adoptive placements were able to develop organised SoM. Goldwyn and Hugh-Jones suggested that this may have been a result of living outside the family home and therefore encountering fewer 'distorted interactions' with their parents. This was termed 'epistemic space' and created an opportunity for young people to organise and integrate dismissing or pre-occupied SoM. Thus, it appears that participants in this study demonstrated some capacity to adapt their coping strategies to develop nurturing and secure relationships post disruption.

Also important in this discussion is consideration of the parent's role in transmitting attachment security. Particularly in the present study where participants' perceived that unpredictable and unfathomable parenting led to their pervasive confusion. Previous research that assessed parental SoM found that in children classed as 'earned-secure' post adoption, these mothers possessed autonomous SoM with respect to attachment (Pace et al., 2012). This indicated that these mothers were able to regulate the child's affect and work through defensive attachment behaviours that became apparent (i.e. reducing displays of avoidance in favour of greater engagement with affect). Such findings have also been found elsewhere; for example, Kaniuk et al., (2004) found that two years post placement even late placed children made progress cognitively and emotionally if placed with autonomous parents. However, young people in the present study came to perceive that their needs were not met (i.e. all came to feel unheard and unseen) suggesting that this level of affect regulation did not occur and their needs were not adequately tended to. Thus, unpredictability that young people perceived and subsequent 'challenging behaviour' could be a product of cognitive bias but also parenting that was not attuned to the child's needs, limiting development of parent-child attachment.

Establishing security post-disruption

Post-disruption, participants appeared to display one of two outcomes in terms of relationships: 1) insight and creation of stability. 2) Maintenance of pre-disruption styles of relating.

1) *Insight and creation of stability*

In the interview, participants were able to consider parent-child attachment experiences and appeared to display a good degree of capacity to reflect on these experiences. Reflection is associated with progression into adolescence, where it is anticipated that cognitive development enables an individual to develop new awareness of their position in relationships (e.g. their role and contributions in a relationship) (Dykas & Cassidy, 2011; Goldwyn & Hugh-Jones, 2011; Hodges et al., 2003; Roisman et al., 2002; Roisman, Collins, Sroufe & Egeland, 2005; van Ijzendoorn & Juffer, 2006). Exemplifying this, Amy commented that she knew she wanted to be loved in her relationships but not the type of love she had encountered previously. This prompted her to reflect on what love meant to her and whether she could ever understand it. Based on this she decided on the people that she wanted to keep in her life (e.g. her grandad) and the people she wanted to cut contact with (i.e. ex-boyfriends). Other participants also sought out relationships that varied to their previous ones; Caitlin identified a mentor at school who offered consistency. In another example, Rose was increasingly aware that trust could be problematic for her (i.e. she was 'too trusting' which made her vulnerable to being taken advantage of). Thus, participants displayed insight and an ability to reflect on experience, adapt their position in relationships and create living circumstances that met their emotional needs post-disruption.

2) *Maintenance of pre-disruption styles of relating*

On the other hand, with attachment styles becoming increasingly apparent post-disruption, for some participants their ways of relating became even more enduring. For example, all participants spoke about the joys of independence and freedom although for some the primary advantage of this was self-sufficiency. In such instances participants spoke at length about not having to rely on others and the comfort this brought them, which is somewhat reminiscent of avoidant attachment strategies (i.e. Ainsworth, 1979). For these participants it seemed that adoption was most challenging because they were expected to engage in a reciprocal relationship even though they desired self-sufficiency, not intimacy. Therefore, although life post-adoption was an opportunity to create circumstances that met their emotional needs, in some instances this could be interpreted as somewhat maladaptive (i.e. extreme self-sufficiency could result in isolation, loneliness and low mood) (Boris & Zeanah, 1999).

As one purpose of aiming to understand more about adoption disruption was to develop insights about life post-disruption, this has been achieved.

However, there is a significant lack of research regarding outcomes in adoption disruption with which the findings here can be compared; Holloway (1997) commented on living status post-disruption (i.e. residing in residential home or independently) and during the course of their research Hanna et al., (2011) interviewed one participant whose adoption had disrupted. This participant commented that returning to her birth family felt 'right' as this was her true family and she experienced belonging. In relation to this study, participants expressed the opinion that it was right for their adoptions to end, which offers some support for Hanna et al., (2011). However, this is based on the narrative of one participant, thus, further research exploring outcomes post disruption is required in order to validate the conclusions drawn by this study.

Findings in relation to identity research literature

Identity formation - the construction of a cohesive definition of the self (i.e. values and beliefs), whilst simultaneously individuating from the family - is thought to be the primary developmental purpose of adolescence. In adopted populations, this task is thought to be even more complex as young people must also understand how being adopted influences their identity (Grotevant, 1997; Grotevant, Dunbar, Kohler & Esau, 2000; Kohler, Grotevant & McRoy, 2002). The participants in this study demonstrated that for them, forming a sense of self was important from a far earlier age. In fact, each participant made reference to identity as they reflected on their transition into the adoption. Equally, identity became important again as they transitioned out of the adoption following disruption.

Entering the adoption with identity issues

Whilst remaining aware that participants were recalling events from their position as young adults post disruption, there remained a clear sense that participants entered the adoption with identity issues, most notably a desire to understand "who I am". This is not unexpected; previous research indicates that it is common for adopted children to thirst for knowledge about their origins from an early age (e.g. Grotevant et al., 2000). Indeed this is thought essential for identity formation at a later date (Grotevant, 1987, 1997). Yet, it could be considered out of sync developmentally; for instance, Eriksonian psychosocial stages of

development suggest that identity formation is the primary purpose of adolescence, not early childhood (Kohler et al., 2002; Schultheiss & Blustein, 1994).

However, psychosocial stages of development are based on a normative population and adopted children are known to vary considerably in areas such as cognitive, emotional and social development (e.g. van Ijzendoorn & Juffer, 2006). Thus, given their unique circumstances it may not be so unusual that identity becomes prominent at an early age; some theorists suggest that parent-child attachment is key to identity formation due to a large proportion of identity being dedicated to individuation (Schultheiss & Blustein, 1994). In adopted populations, at least one disrupted attachment is likely to have been incurred and as participants in this study demonstrate they encountered forced separation from two primary caregiver(s) (i.e. birth family or foster carers) prior to adoption. Consequently, it might be fair to suggest that in the event that a significant attachment disrupts thoughts turn to identity in order to make sense of a new situation. This might be particularly true when a child is expected to attach to a new caregiver.

On the other hand, theory around loss and uncertainty helps shed light on how making sense of experiences and forming adoptive identity became a priority for the participants in this study. Powell and Afifi (2005) suggest that ambiguous loss (i.e. not comprehending the end of a foster placement) increases uncertainty during the process of transition. Consequently, young people will strive to attain certainty, which can result in relational conflict. Furthermore, Powell and Afifi found that the presence of an adoptive family means that generally loss goes unnamed as it is presumed not to exist. In the present study, participants referred to pervasive confusion that arose as they struggled to make sense of why they had been adopted. In turn they perceived that their parents restricted access to information as they could not understand its importance - the loss went unnamed. This limited formation of adoptive identity and subsequent conflict and relational challenges would support the hypothesis that uncertainty prompted increased need for certainty. Essentially, unresolved loss and intolerable uncertainty meant that understanding and forming identity, regardless of age, became paramount - identity issues were brought into the adoption and continued throughout.

Fighting to express identity

Many experiences that are encountered during adoption are not chosen by the child (i.e. being placed for adoption in the first place) and therefore a large part of identity involves coming to terms with these things. Grotevant et al., (2000) write that the importance of adoption to identity can be conceptualised as a continuum ranging from little to no interest in exploring adoptive identity to pre-occupation whereby adoption organises and strongly influences identity. In the middle of this continuum is the idea that although adoption is meaningful this is balanced with other aspects of identity (i.e. mother, student). Based on this, it might be appropriate to suggest that during the adoption participants in this study were pre-occupied with the adoption – for many their primary aim was to understand what was going on around them and how they fitted with this. However, if this is true there was also a process of recognising that identity was being suppressed. Literature relating to agency indicates that identity is a product of internal (agency) and external (social) forces (Cote & Levine, 2008; Schwartz, 2001; Schwartz, Cote & Arnett, 2005). As such, for participants in this study external structural forces that were being imposed (i.e. you are a bad child) clashed with internal agency (i.e. I am normal). As people are capable of agency and implementing intentional actions, participants asserted their perception of identity through behaviour which appeared to expedite the process of individuation. For instance, Caitlin recalled emergence of aggressive behaviour that coincided with her desire for her mum to listen and accept her 'true' sense of self.

Identity post-disruption

Participants described adoption disruption as an experience that prompted hope and relief. It was also a period where they could explore independence, freedom and relationships. As such this offered an opportunity to explore identity free of previously imposed restrictions, which is reflected in identity literature that suggests ability to access information and experiment is essential (e.g. Grotevant, 1987). Thus, post-disruption, the participants in this study described experiencing a more secure sense of self, which suggests that despite pervasive confusion each came to successfully form an identity. However, the following discussion regarding identity should be treated with some caution; the present study did not employ an objective measure of identity, which means that aspects of identity formation considered important in the field of identity, such as level of coherence

and integration (i.e. sophistication of meaning-making, pre-occupation, emotional tone) are unknown (McLean & Pratt, 2006). Therefore, it appears that participants in this study developed a sense of 'who they are' post-disruption, though the level of coherence and integration cannot be judged as no assessment was conducted in order to measure this.

There are several competing explanations as to what enabled participants to adapt their sense of self post disruption and move towards a place on the identity continuum whereby adoption was important but so too were other aspects of self (i.e. motherhood). One suggestion is that the perception of being the same or different to others could be important. Previous research suggests that social interaction can make adopted people feel disconnected to others as they are perceived as different due to their adopted status (e.g. Yngveson, 1999). In this study young people tended to perceive that they matured at a far faster rate than non-adopted counterparts and this was noticeable in the content of their conversation. For instance, aged about 16, Rose recalled telling a peer they had to 'grow up' and take responsibility. She commented that she had already been through this process of 'growing up' at an earlier age. On the other hand, post-disruption, participants were free to present themselves as they wished, not necessarily as an adopted person. Thereby the freedom they experienced to experiment may enable formation of a stable and enduring identity (March, 1994; Grotevant et al., 2000).

Equally, referring to Marcia's theory of identity formation, participants pre-disruption referred to taking on identities that were ascribed by the adoptive family, hence the battle to assert oneself (Grotevant, 1987; Hoopes, 1990). This reflects 'identity foreclosure' whereby alternative identities had not yet been developed. The freedom of restriction encountered post disruption raises an opportunity to explore. Demonstrating this, participants spoke about education, which reflects progression towards 'identity moratorium' or even 'identity achievement' whereby participants were embracing identity 'crisis' (i.e. not knowing who they are) but working towards resolution. Therefore, when free to explore, young people progressed through formative stages of identity development much like those described by Marcia.

Findings in relation to research literature on insight

As participants in this study recalled their experiences of adoption and adoption disruption it became apparent that although each individual had limited capacity to reflect on the adoption and disruption as it happened - for example, no participant was aware at the time that disruption was going to happen - all progressed to develop awareness and reflect on their experience in order to produce narratives. This is important as it disputes previous research that suggests children with experiences of attachment related trauma can encounter difficulties in producing coherent recall (e.g. van Emmichoven et al., 2003). Thus, theoretical consideration of insight allows reflection on what the development of reflective capacity could mean for young people experiencing adoption and adoption disruption. Prior to this discussion however, it is essential to highlight that the term 'reflective capacity' is used with care as objective measures of such capacity, for instance the Reflective-Functioning scale (Fonagy, Target, Steele & Steele, 1998) were not employed in the present research.

Evidence of insight was particularly present at times when participants compared perceptions of a situation that they held as a child with perceptions they held as young adults. For example, participants could recognise how unhelpful certain behaviour had been and why they had persisted with it. Research literature suggests that development of insight (i.e. capacity to reflect on one's experiences) occurs around early adolescence (Kuhn, 2000). However, van Ijzendoorn and Juffer (2006) suggest that traumatic experiences such as neglect and malnutrition prior to adoption can limit neural development which impacts on cognitive development. Consequently, though adoption is intended as an intervention that facilitates catch up (i.e. it is intended that nurture and security will encourage a child to thrive) the participants in this study described ongoing distress throughout the adoption. Thus 'catch up' could potentially have been limited. Therefore, it is significant in the present study that each participant appears to have developed some form of reflective capacity despite traumatic experiences. For instance, Faye was able to reflect on the role that she played in arguments within the family home and why she engaged in aggression.

For the participants in this study, insight also influenced relationships post-disruption; after leaving the family home Caitlin reflected on her role in the conflict between her and her mother and considered how she could act in the future in order to improve that relationship, describing changes in behaviour that she had

subsequently made. She was also able to establish supportive relationships around her that allowed her to thrive (e.g. learning mentor at college). In another example, Amy considered the love that she had received from her family previously, the type of love she wanted to receive in the future and what this might look like. This development reflects literature on SoM, which suggests that as children move towards adolescence and adulthood they become increasingly autonomous and are more able to consider and adapt their role in relationships to suit their needs (Keating, 1990; Steinberg, 2005). The AAI would assess this as being secure, autonomous SoM, whereby an individual is able to produce coherent, reflective narrative that is not pre-occupied with a particular attachment experience (e.g. Goldwyn & Hugh-Jones, 2011; Hesse, 2008; Main & Goldwyn, 1984; Main et al., 1985). As noted previously, this research does not have the capacity to classify attachment status, however based on participants' narrative there is evidence to suggest young people adapted their relational styles post-disruption.

Clinical implications

Currently there is little in the form of evidence-based intervention specific to an adopted population. Instead, interventions that are predominantly explored in LAC populations have tended to target challenging behaviour (i.e. aggression) and emotional difficulties with the aim of facilitating attachment and teaching young children how to make sense of the behaviour they use and ensure their safety (Golding, 2007; Golding, 2010; Gurney-Smith et al., 2010; Hodges et al., 2003). The following reflects on the findings of this research in a clinical context and, where appropriate, systemically informed suggestions are made about how this research could be applied clinically. A key caveat, however, is that the young people in this project were placed for adoption over ten years ago and therefore support that is available currently is unlikely to have been present at their placement a decade ago. Therefore, whilst clinical implications discussed here will reflect the narrative of the young people in this study it also acknowledges the interventions that exist currently may be able to address the issues raised by participants.

Overall, the analysis produced three clusters: regulated and restrained, turning points and determination to be better. The master theme was development of insight and independence. Participants described experiencing pervasive

confusion from the outset of their adoption that limited expression of identity. In addition, young people reported parent-child relationships that failed to offer security and in turn prompted unmet emotional and physical needs. Due to escalating conflict in the adopted home, participants reached a turning point whereby their behaviour became a mechanism for change and disruption followed. Post-disruption all participants described grappling to understand and make use of independence. An essential part of this was exploring relationships in order to establish stability (i.e. support systems).

Early intervention

Early intervention is a strategy that aims to counteract the negative consequences of encountering adverse situations (e.g. neglect, abuse, poverty) in order to facilitate normative development (Bronfenbrenner 1974; van Ijzendoorn & Juffer, 2006). This model suggests that following early intervention individuals are more able to cope when challenging situations arise. Participants in this study indicated that within the adoption they experienced a struggle to understand their parents and make sense of the adoption from the outset. Therefore, it is reasonable to suggest that extensive support is required pre and post adoption in order to help children make sense of significant life experience such as separating from caregivers. This might be particularly true in instances where risk factors that are known to precipitate disruption are apparent (i.e. challenging behaviour, older age at placement and multiple placements; Rushton & Dance, 2006). Two key early interventions might be around 1) the transition to adoption itself and 2) facilitating attunement between parent and child.

1) The transition to adoption

Not having resolved why they were being placed for adoption and transitioning from what were perceived as secure placements, participants struggled to adapt. Furthermore, several participants suggested that their carers prior to adoption had not been ready to 'let go' of them either. Consequently, preparation work with both children and foster-carers that addresses the ending of the placement and what this means could be important. Such work might facilitate a positive ending and prepare the child for what to expect when they enter the adoption. Equally, it might be beneficial for such work to continue into the adoption so that the child is supported in making sense of the transition in the first year post

adoption and so that the family has space to make sense of what the child brings to the adoption (i.e. previous experiences).

This intervention could take the form of life story work, which has historically been used in adopted and LAC populations. Life story work aims to support children assimilate life experiences in an effort to support identity formation (Be My Parent, 2013). It should take place in a timely manner and involve developmentally appropriate information – often the first task is to ascertain what the child is already aware of (Bedfordshire City Council, 2006). However, in practice the implementation of life story work can be highly varied; Baynes (2008) discusses the lack of standardisation in terms of how life stories are created and the information that children are given access to. Furthermore, the evidence base around the effectiveness of life story intervention is limited – studies tend to be small scale; for instance, in a sample of seven American foster children, Haight, Ostler, Black and Kingery (2008) found that life-story intervention was an accessible method through which complex life-events could be explored and assimilated. However, findings from a sample of this size cannot be generalised. In spite of this, life story work is held in high regard by professionals (e.g. social workers) and, in the area where this research was conducted, life-story intervention is promoted by Children's Services.

2) *Attunement*

Participants articulated a struggle to anticipate their parents and subsequently experienced resentment at being regulated and restricted in what they were and were not allowed to do. Crucially, this was interpreted as limiting their self-expression. Research exploring the behavioural attunement of parents to their child (i.e. their sensitivity to the child's needs) demonstrates that when a parent is 'well-attuned' they are able to interpret behaviour accurately and are more able to regulate the child's distress and uncertainty (e.g. Sethre-Hofstad, Stansbury & Rice, 2002; van Bakel & Risksen-Walraven, 2008). In terms of attachment and bio-behavioural development, if a parent is attuned to their child they are more able to regulate the infant's distress. This means that cortisol levels are likely to be low and subsequently sensitivity to stress is low (the infant is contained). In turn a secure and stable parent-child attachment is more likely. Thus, potential early intervention in adoption could aim to facilitate attunement between parents and their children in order to promote stability and security and to minimise the child's sensitivity to stress. However, evidence based interventions in this area are limited. Beckerman (2006a, 2006b) and Hughes (2004) suggest that

Dyadic Developmental Psychotherapy can be effective in attuning parents to children's needs and improving attachment security and furthermore psychoeducational programme show some promise (e.g. van Bakel & Riksen-Walraven, 2008).

Systemic intervention

The participants in this study indicated a simultaneous breakdown in communication with their parents and emergence of challenging behaviour. Consequently, systemically informed interventions may be useful to facilitate understanding between the parent(s) and child through consideration of each other's perspectives. Systemic techniques such as circular questioning are proving to have increasing effectiveness when working with complex family systems as they offer an opportunity to consider a problem from the perspective of each family member (Cecchin, 1987; Cottrell & Boston, 2002; Tomm, 1987; Tomm 1988). Furthermore, such intervention has the capacity to be used flexibly and would not necessarily involve long term engagement in family therapy.

For example, offering regular opportunities to 'check-in' (i.e. three times a year) could be a chance to discuss specific experiences of the adoption and think with families about how they can move forwards in addition to offering children space to assimilate experiences and explore problem-solving. This approach has been used elsewhere in the form of solution focused family therapy, which has facilitated attainment of a range of client-led goals (e.g. Kim, 2008; Lee, 1997). On the other hand, research suggests that therapeutic alliance and perceiving the intervention as relevant mediates engagement and drop out with this model (e.g. Kazdin, Holland & Crowley, 1997; Robbins, Liddle, Turner, Dakof, Alexander & Kogan, 2006). Therefore in order for this approach to be effective, parents and children must be able to commit to the intervention and engage in a therapeutic relationship. This could be challenging for adoptive families in crisis given the common perception held by participants that services were unable to provide viable solutions.

An alternative form of systemic intervention that could also be used with good effect is narrative therapy; in the present study many participants came to view themselves as rejected, unseen and unloved and it is likely that such experiences contributed towards a negative self-regard. Narrative therapies

provide an opportunity to challenge this discourse and can be helpful when families possess problem-saturated narratives (e.g. Carr, 1998; Carr, 2009). For instance, some research suggests that adoptive parents can come to view the child negatively, which affects attachment relationships (e.g. Pace et al., 2012). Therefore actively challenging unhelpful narratives could be positive for the child and the family unit as a whole. Furthermore, there is a small but growing evidence base that supports the use of narrative techniques with children. Besa (1994) used techniques including externalisation, identifying unique outcomes and re-description with six families containing children aged between 8 and 17 years old. Following intervention, it was found that defiant behaviour, conduct problems and abuse of drugs reduced in five of six the families participating. In another example, Etchison and Kleist (2000) describe how making use of children's narratives about the development of the family conflict can form the basis of a beneficial therapeutic intervention for the entire family. However, although narrative approaches display promise, further research is required before such techniques can be recommended on a national scale by bodies such as the National Institute for Health and Clinical Excellence.

Pre-disruption support

Each participant described feeling stuck during the adoption with several commenting that solutions they identified did not feel viable (i.e. running away offered only short term respite). Overwhelmingly there was a sense that the young women did not know what their options were and that even as the difficulties escalated they remained unaware that they were heading for disruption. Therefore, it is reasonable to suggest that services could do more to inform young people about their options when adoption hits 'crisis point'. Based on the participants in this study, crisis point might best be defined as arising when behaviour such as physical violence, running away, sexual promiscuity and risk taking behaviour become increasingly frequent and cannot be resolved within the family. In these circumstance participants described two eventualities 1) they remained unaware of their options, which perpetuated 'stuckness' and hopelessness and 2) they felt that options they were presented with were unviable (i.e. returning to care). Consequently, participants felt that the support they received was limited and often poorly suited to their needs. Thus, informing young people about a range of possible options could be helpful. This might involve

offering information about respite services, foster care, residential care and independent living (dependent upon the child's age) and furthermore informing young people about the ongoing support they could access should they choose one of the preceding options is important to ensure decisions are fully informed (e.g. emotional support, financial support, regular input from a social worker).

Alternatively, providing more information to families about the support that is available should they wish the adoption to remain intact could also limit the experience of 'stuckness'; certainly it seems that transparency would be beneficial so that young people and parents are given the same information so as not to perpetuate experiences of disempowerment. Furthermore, several participants in this study commented that they have recovered relationships with their parents post-disruption, and additionally, all felt that life post-disruption was largely positive. Therefore, supporting families in understanding that disruption does not mean the end of parent-child relationships and can sometimes have a positive impact could support families during a difficult time.

Post-disruption support

Early intervention is unlikely to resolve every difficulty that a family experiences. Furthermore as Baynes (2008) indicated, the timing of early intervention is often inappropriate, for instance children can be waiting months post adoption to begin life-story work. This means that some disruption is inevitable and services must be better positioned to offer support. Young people in this study indicated that although the decline of the adoption was a long process the disruption itself was a rapid transition. Subsequently, there is potential to support young people in processing the loss they experience when their adoption ends regardless of whether it is expected or unexpected; professionals must be aware of the competing emotional demands on young people at this time.

Participants in this study described relief, anger, sadness, happiness and excitement all arising during the process of disruption. Thus intervention could offer space to explore emotional responses to disruption and assimilate the experience. This might involve working with young people to help them recognise their sensitivities (i.e. hyperarousal triggers) and learn how to contain their emotion (e.g. developing coping strategies such as self-soothing). Such intervention could be particularly important in light of previous research that suggests foster children

who 'age-out' of services as they leave adolescence and enter adulthood can face challenges in adapting to independent living and outcomes are thought to include high levels of failure to attain academically, poverty and unemployment (Courtney & Hughes-Heuring, 2005).

Service level

At a service level, keeping track of children who disrupt would be useful for the purpose of auditing outcomes. This is in keeping with recent government policy (Department for Education, 2011) and also reflects the current drive towards understanding more about the circumstances around adoption disruption (e.g. University of Bristol, 2011). However, as of yet there is no formal method of recording and following up disruption, which means that children are at risk of being 'lost to the system'. If more awareness is developed about this population through good record keeping then there is opportunity to learn more about the clinical needs of this population and to offer consistency for families who disrupt in the future. Developing consistency could involve remaining with the same social worker post disruption so that there is stability and familiarity whilst experiencing loss of the family unit, even, if, as was the case in this study, disruption is interpreted as a positive outcome by clients.

Participants in this study made it apparent that they felt unheard by parents and services. Therefore adoptive parents and professionals could benefit from information about how young women experience adoption and adoption disruption. For instance, training packages that target professionals could focus on understanding the behaviour that young people display and how to acknowledge and work with their own emotional responses as professionals. This could support professionals to manage personal emotions that emerge when an adoption encounters 'crisis' (i.e. anger, frustration and hopelessness). This could be particularly pertinent given research that suggests professionals actively dismiss and suppress strong emotion such as this, which results in resentment towards the family and their circumstances. Thus, potential attempts to resolve the crisis are thwarted by angry recrimination and the situation risks further deterioration (Rostill-Brookes, Larkin, Toms & Churchman, 2011).

Teaching parents about 'parenting the disrupted child' could be an important development for two reasons: (1) parents hold parental responsibility

post-disruption thus they remain involved in terms of decision making. Supporting parents in making sense of how their parental role changes post disruption could help facilitate engagement with services creating a smoother transition for the child. (2) post disruption, some young people in this study spoke about recovering relationships with their parents, thus training packages could support parents in thinking about how to recover relationships with their child (i.e. how to respond to their independent child's needs). Furthermore, as participants in this study described that their 'challenging behaviour' was a method of survival and communication – not as a conscious means of provoking disruption, supporting parents to understand this point of view could support recovery of parent-child relationships.

Multi-agency and multi-disciplined working

In terms of existing clinical intervention, consultation is an increasingly popular choice (Golding, 2010). Based on findings of this study, whereby young people felt unheard and rejected within their adoptions, it may be advisable that wherever possible young people are invited to attend consultation. This may prevent reinforcement of rejection and promote the narrative that they are heard and their needs will be attended to. Examples of this working well elsewhere include Child Protection Proceedings where the child, family and professionals meet together at conference and each party contributes whilst an impartial chair draws information together (Department for Education, 2010).

Methodological limitations

Use of timelining and photo production

This research used timelines and photo production in order to achieve in-depth, coherent data in a population where previous evidence suggests that recall of events could be challenging (e.g. van Emmichoven et al., 2003). However, how effective was this approach to data collection? From the outset of this project the intention of timeline and photo-production was to help participants generate a coherent narrative about a complex and potentially emotive experience. It has been outlined previously how participants engaged with each of the tasks in this study (see Pen Portraits pp. 63) and although three participants did make use of

the timeline others wrote very little and instead relied on the researcher to draw them back to the project. Demonstrating this, Caitlin's recall was often tangential and she was easily distracted. However, all participants engaged with the photo-production element of the research; some were more metaphorical than others in terms of what they photographed and how they interpreted the image, however, each participant took at least seven photographs. Therefore, subjectively, it may be that photo-production was a more accessible method for participants than timelining.

On the other hand, Johnson and Turner (2003) point out that other advantages of using multiple methods data collection include the potential of producing converging data that eliminates alternative explanations, increases validity and emphasises differences so that greater understanding can be conceived. Generally it appears that each of these goals was achieved, which would suggest the methodology was effective; participants produced rich narratives about a complex subject and analysis demonstrates that converging data were produced from the two styles of data collection. Furthermore, this study generated understanding about an experience where very little was known previously. Thus, although alternative explanations of the experience of disruption could not be eliminated (due to sparse research literature) this research has formed an evidence base against which future research can be compared therefore justifying the data collection method utilised. Thus, perhaps the main critique of the data collection technique used here is the decision to analyse only the interviews, not the timelines or photographs themselves.

There are three reasons data was held back from analysis, the first and perhaps most important reason is that this study was interview driven - the purpose of the data-collection method was to facilitate construction of narrative, Secondly, the size of the project was not sufficient enough for two adequately in-depth analyses to have been conducted - two analyses would have resulted in diluted quality, affecting the results produced. Finally, this study was interested in experience and available techniques for analysing images were unlikely to have contributed to the aims of this project; photo-production remains a technique in the early stages of development in the field of psychology and consequently there are few established methods of analysing photographs. Previous methodology proposes content analysis; as such counting up similarities amongst images (e.g. Rose, 2012). However, this is not in-keeping with the individuality of this project.

Furthermore, this approach is highly reliant on the researcher's interpretation of the image, which can be influenced by the very factors that IPA advocates being cautious of (i.e. influence of personal experience). Certainly in an account of photo-production analysis described by Reavey and Johnson (2008), no reference was made to the researchers accounting for their personal stance in relation to the data. This challenges the usefulness of combining IPA and photo-production analysis and supports the decision not to do this in the present study; it is unlikely that analysing photography would have contributed to answering research questions relating to experience in a highly unique area of research.

The sample

Often sample size is misconceptualised as less important in qualitative research compared to quantitative research where large participant numbers are required for ecological validity and generalisation purposes (e.g. Sandelowski, 1995). In fact, it is essential in order to ensure that analysis claims can be supported and that analysis is conducted with adequate depth. In the present study, five females, varying in age were recruited. This number is representative given the number of potential participants identified at the outset of the research – twelve potential participants were highlighted by Children's Services, seven were approached after five were ruled out following conversation with social workers and adoptive parents regarding consent. Yet, a clear methodological issue is one that is inherent to most qualitative inquiry: generalisation and whether the results achieved here have resonance beyond the group sampled (Lewis & Ritchie, 2003). Generalisation is often considered as empirical (are the results transferable) and theoretical (do the results theory build). Central to empirical generalisation is validity and reliability. Verification checks are essential to ensuring reliable and valid qualitative research (Morse, Barrett, Mayan, Olsen & Spiers, 2002).

In this study, the researcher's perspective and how this might influence interpretations of the data were accounted for through reflexive practice (i.e. memoing) in order to encourage reflection at each stage of the research process. Checks of data took place in the form of supervision and discussion of findings with the project supervisor. Potentially, verification checks could have been further developed, for instance presenting themes to the participants for validation, triangulation and even asking impartial individuals to analyse extracts in order to

compare themes (Elliott et al., 1999; Jick, 1979). However, there is no certainty that these individuals would have used IPA and furthermore they would not have engaged in reflexivity as the main researcher of this project did.

Finally, theoretical generalisation considers whether the findings of this project build on previous theory (Lewis & Ritchie, 2003). The experience of adoption disruption has been unexplored previously and the results of this study have been used to begin developing an understanding of identity formation and attachment style in adopted young women. Thus, it is likely that this project does offer some degree of theoretical generalisation. On the other hand, it could be argued that this research possesses a significant limitation due to the all female sample. Recruiting an all female sample was not the intention at the outset of this research, indeed the original pool of 12 potential participants included two males (see Figure 1). However, the resulting sample means that an in-depth insight into the female experience of adoption and adoption disruption has been attained. Given the small sample sizes involved in qualitative research, to have recruited a mixed male and female sample could have reduced the robustness of conclusions due to gender differences that could not be accounted for. Therefore this research suggests that an all female sample has in fact strengthened the relevance of the conclusions drawn and that future exploration of the same subject from a male perspective is required.

Retrospective accounts

The final limitation is the use of retrospective accounts. This is a normal process in qualitative research however the validity of such data has been questioned. For instance, Smith (1994) commented that “individuals constantly monitor, update and amend their biographies in order to present a particular conception of self to themselves and others” (pp. 371). Therefore retrospective data could bear little resemblance to objective reality as, in the time elapsed between the event occurring and recall, participants could have interpreted and re-interpreted experiences multiple times. However, this limitation was largely accounted for in this study by IPA; this method focuses on the participants’ representation of experience with awareness that reality itself is impossible to capture. Additionally, IPA is concerned by meaning-making over time, which was the focus of this study (i.e. how participants made sense of adoption and disruption over time), therefore making retrospective accounts appropriate.

Furthermore, the vagaries of memory mean that forgetting is inevitable, thus the very nature of memory could affect the quality of retrospective data (Hardt & Rutter, 2004). Exemplifying this, auto-biographical memory is hierarchical, structured primarily by time (i.e. the years I was adopted) and then global themes (i.e. primary school, secondary school). Research interviews are rarely conducted in a manner that encourages accurate recall as they seldom follow this hierarchical format thus participants in qualitative research are limited in their ability to provide accurate historical information (Schwarz, 2007). In this study use of the timeline might have remediated this problem as participants had opportunity to retrieve information according to the structure of auto-biographical memory. That is, they could consider the experience in the context of time and then identify increasingly specific themes (i.e. life prior to adoption – foster carers – playing games).

Future research

It has been noted that the voices of adopted and LAC populations are under-represented in research and service delivery for reasons including ethical concerns. However, the completion of this research indicates that methodological issues such as ethics can be addressed and, in keeping with the intentions of the Adoption and Children Act (2002) and Every Child Matters (2003) research is possible in this marginalised group. Thus, the following section offers reflections about potential future research that could continue to represent the voices of adopted and looked after young people

Understanding alternative perspectives

In light of the results produced in this research, further research that explores adoption and adoption disruption from the perspective of adolescent males would not only develop new insights into the topic but enable exploration of gender differences. This could benefit adoptive parents and professionals as they have more understanding of how to meet the needs of male and female adoptees based on similarities and differences that emerge.

Secondly, exploring the parents' perspective of disruption could be insightful; participants here suggested that they felt unheard and rejected by their parents and ultimately that their needs were not met. Existing research that has

elicited opinion from adoptive parents suggests that commitment is essential in order to maintain intactness (Wright & Flynn, 2006). Therefore, research exploring how able adoptive parents feel in interpreting and responding to their adoptive child's needs would be insightful. Furthermore, exploring with parents the relevance of commitment could be enlightening. During the process of recruiting to the present study, one parent commented that although their child no longer lived with them, they did not consider the adoption 'disrupted', thus they exemplified their commitment to the child but suggested that the family functioned more effectively when their child was not accommodated with them. This highlights the complexity involved in understanding what families in modern society look like.

Research that considers the emotional response of professionals when working with such emotive and complex cases is also sparse; Rostill-Brookes et al., 2011) demonstrated that in foster care, social workers feelings of anger and frustration affected their engagement with families. However, the field may benefit from further research that considers how professionals manage this emotion in order to deliver a high quality service to families who experience prolonged conflict. Finally, the evidence base around interventions in adopted populations is limited. It would undoubtedly be useful to further explore potential interventions such as those suggested previously in clinical implications in order to provide robust, evidence based services for adoptive families known to be 'high risk' (i.e. late placed adoptions). Consequently, systemically informed research that explores how the family system work together to resolve problems could be a welcome addition to the evidence base.

Quantitative research

When discussing methodological limitations above it was identified that qualitative methodology can be limited in terms of generalisation. Quantitative methods are consequently thought to offer robust methodology that makes reliability and validity more accessible (e.g. Sandelowski, 1986). Therefore, if services are to pay more attention to adoption disruption as recent government policy suggests, it may be advantageous to develop an evidence base built on larger samples using alternative methodology (Department for Education, 2011). One way for future research to do this, without losing richness of data, would be through mixed methodology incorporating standardised measures such as the AAI. Drawbacks of this approach include cost and time expenditure, however, this

tool offers attachment categorisation that can be used empirically in a research context (Goldwyn & Hugh-Jones, 2011; Hesse, 2008; Main & Goldwyn, 1984; Main et al., 1985). By combining qualitative and quantitative methods there is increased opportunity for falsification and increasingly robust research can be produced.

Developing new research methods

The primary purpose of this research was the exploration of adoption and adoption disruption in an all female sample. In order to do this the methodology acknowledged that experiences take place on multiple sensory levels. Therefore interview itself cannot fully explore experience. This research made use of data collection methods that explored experience through multiple senses. However, the main purpose for their use was to support participants in developing narrative about a complex topic. Therefore only the interviews were analysed meaning that much like previous research, this study only considered experience from one viewpoint.

In light of the in-depth accounts that participants in this study provided using timelining and photo-production it might be useful for future research to consider 'phenomena' across multiple levels of experience. It could be useful to use videography and 'walk along' techniques in order to gain greater depth (e.g. Radley et al., 2010). Furthermore given the increase in social media it could be useful to collect data using 'blogs' to get parent and child perspectives about daily experiences of adoption. Ethnographic research such as this would encourage naturalistic accounts to emerge and could develop understanding about parent-child interactions as they occur. Such methodology has been used with good effect in various disciplines (e.g. Jones & Alony, 2008) and could also increase engagement in increasingly technology oriented populations.

Conclusion

This study highlights the experience of adoption and adoption disruption for five adolescent girls, challenging parents and professionals alike to listen again to their needs. There is a risk that adopted young women are underestimated by those around them and become labelled as 'challenging'. In doing this, services

and parents limit the adopted child's opportunity to express themselves and explore identity, which detracts from their very real capacity to reflect and learn from life experience in order to achieve stability.

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APPENDICES

Appendix 1. Ethics certificate

Appendix 2. Information sheets (participant, parent and social worker)

Appendix 3. Consent forms

Appendix 4. Timeline protocol (Interview one)

Appendix 5. Photo-production schedule

Appendix 6. Examples of mind maps (analysis)

Appendix 1. Ethics certificate

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Participant Information Sheet



Hi, my name is Sarah. I'm training to be a clinical psychologist, which involves working with people who have difficulties in their lives that they would like help and support with. I believe that everybody is unique, partly because we all have different life experiences and so I wanted to work in clinical psychology because I enjoy and value learning about people's lives and their views and opinions about the world.

What is it like when your adoption ends?

You are being invited to take part in a research project. To help you decide whether to participate it is important for you to understand the research. Please read the information below and discuss it with others if you wish. Please ask any questions you want to.

What is the aim of the research?

Not all adoptions are successful and for various reasons the decision may be made to end an adoption. This research project is interested in talking with young people aged between 13 and 21 years old about their experiences of adoption and their own adoption ending.

Why have I been asked to take part?

You have been asked to participate because your social worker has identified that you are no longer living with your adopted parent(s) and you are not planning to return to them. You are being invited to take part as this research is interested in your thoughts and feelings about your adoption ending. Altogether, five people will be interviewed about their experiences.

Do I have to take part?

No you do not have to take part. It is up to you to decide whether you want to participate. If you decide to take part you will be given this information sheet to keep and you will be asked to sign a consent form. Signing a consent form means that you have read and understood this information sheet, have had time to think about whether you want to take part and have asked any questions that you may have. Even after signing the consent form you can stop taking part in the research at any point. Any information you have provided up until that point will also be destroyed if you want. If you decide not to participate, you do not have to give a reason for stopping and this will not affect any care that you are entitled to.

What will happen to me if I take part?

You will be asked to take part in two interviews with me. The first one will take about 60 minutes and the second about 90 minutes. There will be a gap of about two or three weeks between interviews. During this gap, you will be asked to take photographs on a camera that I will give you. The point of this is explained below.

If you wish you may have an adult companion of your choice (e.g. your social worker) with you throughout the interviews.

Interview One

In interview one, you will be asked to think about times related to your adoption that you feel are important, now or in the past. You will be asked to describe these times, and to note them on a piece of long paper that we call a timeline. I will be interested in hearing your thoughts about those times. You will also be asked to imagine and talk about what you think you will do or what might happen, or what you would like to happen in your future. I will meet you at a place that suits you, as long as it has a quiet space where our conversations can remain private.

At the end of this interview, I will give you a camera and ask you to take photographs to help me understand more about your adoption and your adoptive placement ending. These photographs can be of anything that you think is important and would help me to understand your experiences. We can talk more about this part of the research when the time comes so that you feel okay about what to do. To thank you for your time, you will be offered a range of vouchers to choose from (e.g. iTunes, HMV, Topshop) to the value of ten pounds.

Interview Two

In interview two we will talk about the photographs that you have taken (e.g. why you wanted to take a particular photo? What you would like me to understand from that photo?) I will then ask you about how you get on with other people, such as your friends (e.g. what you like about spending time with them and if you ever fall out).

Just like interview one, I will meet you at a place that suits you, as long as it is quiet. When interview two is finished your participation in the research project is complete. You will be offered another voucher to the value of ten pounds to thank you for your time.

What are the possible downsides of taking part?

The researchers know that talking about your adoption might be difficult. There may be times during the interviews where you feel uncomfortable or upset. If you begin to feel like this tell me. The interview can be stopped or put on hold. If, after the interviews you want more support, this can be arranged. Also, you do not have to answer a question if you do not want to.

What are the possible benefits of taking part?

I am very interested in hearing about your life experiences as there is a lot that I can learn from you that will make me a better clinical psychologist; I would hope to share some of this learning with other clinical psychologists or people working in adoption so that everyone can benefit from your ideas and opinions. Furthermore, it is hoped that the outcomes of this research will help improve the support that services (e.g. social care) can offer children and young people who are adopted. Therefore your participation will help shape services and you may be able to help other young people in a similar situation to you.

Is taking part confidential?

Confidentiality means that things you talk about with me are kept private and nobody except you and me would know what you have said. This research **does**

not offer confidentiality because I would like to share some quotes from your interviews in order to help tell your story.

However, all the information you provide during this research is **anonymous**. This means that no one apart from me will be able to identify you; you will get a false name that you can choose yourself and people will not know where you live or the names of people that you may talk about. The names of people or places that you talk about will also be changed to false names. This also means that your social worker and adoptive parents will **not** be able to identify you. If you choose to have an adult companion with you during the interviews they will have to sign a confidentiality agreement which means they will keep everything you and I talk about private.

There are certain times when the researchers cannot keep what you say private or your identity anonymous:

- If you report something that leads me to believe that you or somebody else is at significant risk of harm
- If you report criminal activity or criminal intentions.

In these situations I have to act in order to ensure your safety and the safety of others. For example, this might involve talking with your social worker. Before doing this, I will tell you about my concerns and we will discuss it together and try and agree on a plan of action.

Will I be recorded?

I will audio-record (on a small digital recorder) the interviews that take place in this project and they will be typed up by either me or professional agency into a document. This document will be anonymous, so your false name will be used throughout. No other use of the recordings will be made without your written permission and no one outside of the project will be allowed to access the original recordings. Audio recordings will be stored on an encrypted USB pen drive and password protected computer. They will be destroyed when the research project is complete.

What will happen to the results of the research project?

This research will be assessed by the University of Leeds to check how well I have done it (they are not assessing what you have said in your interviews). I then hope to share the anonymous results with people who could use them to make a difference, for instance other clinical psychologists or social workers.

Contact for further information

If you have any questions or concerns regarding this research project please do not hesitate to get in touch:

Sarah Collinge

Doctorate in Clinical Psychology Programme
Room G.04, Charles Thackrah Building
University of Leeds, 101 Clarendon Road
Leeds, LS2 9LJ
Umsec@leeds.ac.uk

Thank you for taking the time to read this information sheet

Parent Information Sheet



What is it like when adoption ends?

[NAME] is being invited to take part in a research project. To help you decide whether you agree to her participation it is important for you to understand the research. Please read the information below and discuss it with others if you wish. Please ask any questions you need to.

What is the aim of the research?

Not all adoptions are successful and for various reasons the decision may be made to end an adoption. This research project is interested in talking with young people aged between 13 and 21 years old about their experiences of adoption and their own adoption ending.

Why has my child been asked to take part?

[NAME] has been asked to participate because her Social Worker has identified that she is no longer residing with you and there is no plan for them to return at this time. The research is interested in your [NAME]'s thoughts and feelings about the adoption ending, in other words how she has come to understand what has happened. Altogether five young people will be interviewed about their experiences.

Do I have to give my consent?

As you have legal responsibility for [NAME], you are being asked whether you agree to her participation in this research project. If you do not consent, [NAME] will not be approached about the research. If you agree, consent will also be sought from [NAME] but even with your consent, if she wishes not to participate she is free to decline.

If you decide to give consent for [NAME] to participate you will be asked to sign a consent form. This means that you have read and understood this information sheet, have had time to consider your decision and have asked any questions that you may have.

What will happen to [NAME] if she takes part?

[NAME] will be asked to participate in two interviews. The first one will take about 60 minutes and the second about 90 minutes. There will be a gap of about two or three weeks between interviews where [NAME] will be asked to take photographs on a camera provided by the researcher.

Interview One

Interview one aims to explore events related to adoption that [NAME] feels have been important in her life. She will be asked to describe these experiences, placing them in order of when they happened on a piece of paper. She will then be asked to imagine and talk about what might happen in her future.

At the end of this interview the researcher will provide a camera and [NAME] will be asked to take photographs to help me (the researcher) understand more about her interpretation of the adoption and the adoptive placement ending. To thank [NAME] for her time, a range of vouchers will be offered at this point (e.g. iTunes, HMV, Topshop).

Interview Two

In interview two, [NAME] will be asked to discuss with the researcher the photographs that she has taken (e.g. the researcher might ask why a particular photograph was taken). Throughout the interviews the researcher will also ask questions about how [NAME] gets/got on with other people, including friends and people from the adoptive placement.

The researcher will always meet [NAME] at a location that suits her, as long as it has a confidential space so that conversations remain private. When interview two is complete participation in the research project is complete and another voucher will be offered (e.g. iTunes or Boots).

What are the possible disadvantages and risks of taking part?

The researchers know that talking about adoption is sensitive and might be emotive. Therefore there may be times during the interviews where [NAME] feels uncomfortable or upset. She will be encouraged to tell the researcher and the interview can be stopped and put on hold. There will also be regular breaks and the research will proceed at [NAME]'s pace. An adult companion (i.e. an individual [NAME] and her social worker feel is suitable) can also accompany her during the interviews if she wishes. If, after the interviews, [NAME] would like additional support, this can be arranged.

What are the possible benefits of taking part?

It is intended that the results from this research will be disseminated amongst professionals (e.g. social workers and clinical psychologists) in order to generate a greater understanding of the needs of adopted children, young people and their families therefore the research aims to improve the support that services (e.g. social care) can offer to families at the point of and post disruption.

Is taking part confidential?

Confidentiality means that things [NAME] discusses with the researcher are kept private and nobody except [NAME] and the researcher would know what has been said. This research **does not** offer confidentiality because we would like to share some quotes from interviews in order to help us tell [NAME]'s story. However, all the information collected during this research will be **anonymous**. This means that no one apart from the researcher will be able to identify [NAME]. For example, all names will be changed.

There are certain times when the researchers cannot offer confidentiality or anonymity:

- [NAME] reports something that leads the researcher to believe that she or somebody else is at significant risk
- [NAME] reports criminal activity or criminal intentions.

In these situations the researcher has to act in order to make sure of [NAME]'s safety and the safety of others. Before acting the researcher will inform her of their concerns and there will be opportunity to talk about it.

How will data be recorded and stored?

The researcher will audio-record the interviews that take place in this project which will then be typed up by either the researcher or a professional agency. No other use of the recordings will be made without written permission, and no one outside of the project will be allowed to access the original recordings. Audio recordings will be stored on an encrypted USB pen drive and password protected computer. Transcripts will be held in a secure location at the University of Leeds for two years after completion of this study, which is in accordance with University of Leeds protocol.

What will happen to the results of the research project?

The researchers aim to publish the results in academic ways in 2013. Quotes from interviews will be used in publications so that we can tell [NAME]'s story and justify results. All quotes will be anonymous.

Contact for further information

If you have any questions or concerns regarding this research project please do not hesitate to get in touch:

Sarah Collinge
Psychologist in Clinical Training

Doctorate in Clinical Psychology Programme
Room G.04, Charles Thackrah Building
University of Leeds
101 Clarendon Road
Leeds
LS2 9LJ
Umsec@leeds.ac.uk
Work Mobile: 07981 928 788

**Thank you for taking the time to read this information
sheet**

Social Worker Information Sheet



What is it like when adoption ends?

Your client is being invited to take part in a research project. To help you decide whether you agree to their participation it is important for you to understand the research. Please read the information below. Please ask any questions you need to.

What is the aim of the research?

Not all adoptions are successful and for various reasons the decision may be made to end an adoption. This research project is interested in talking with young people aged between 13 and 21 years old about their experiences of adoption and their own adoption ending.

Why has my client been asked to take part?

[enter name of young person] has been asked to participate because it has been identified that they are no longer residing in their adoptive placement and there is no plan for them to return at this time. The research is interested in your client's thoughts and feelings about the adoption ending. Altogether five young people will be interviewed about their experiences.

Do I have to give my consent?

As you have legal responsibility for [enter name of participant] you are being asked whether you agree to their participation in this research project. If you do not agree, because [enter name] is aged 16 or under she/he will not be able to participate, even if they wish to do so. Consent will also be sought from [enter name of participant] so even with your consent, if they wish not to participate they are free to decline.

If you decide to give consent for [enter name of participant] to participate you will be asked to sign a consent form. This means that you have read and understood this information sheet, have had time to consider your decision and have asked any questions that you may have.

What will happen to [enter name of participant] if they take part?

[enter name of participant] will be asked to participate in two interviews. The first one will take about 60 minutes and the second about 90 minutes. There will be a gap of about two or three weeks between interviews where participants will be asked to take photographs on a camera provided by the researcher.

Interview One

Interview one aims to explore events related to adoption that [enter name of participant] feels have been important in her/his life. He/she will be asked to describe these experiences, placing them in order of when they happened on a

piece of paper. He/she will then be asked to imagine and talk about what might happen in their future.

At the end of this interview the researcher will provide a camera and [enter name of participant] will be asked to take photographs to help me (the researcher) understand more about the adoption and adoptive placement ending from their perspective. To thank participants for their time, a range of vouchers will be offered at this point (e.g. iTunes, HMV, Topshop).

Interview Two

In interview two [enter name of participant] will discuss with the researcher the photographs that have been taken (e.g. the researcher might ask why a particular photograph was taken). The researcher will then ask questions about how [enter name of participant] gets/got on with other people, including friends and people from the adoptive placement.

The researcher will always meet [enter name of participant] at a location that suits them, as long as it has a confidential space so that conversations remain private. When interview two is complete participation in the research project is complete and another voucher will be offered (e.g. iTunes or Boots).

What are the possible disadvantages and risks of taking part?

The researchers know that talking about adoption is sensitive and might be emotive. Therefore there may be times during the interviews where [enter name of participant] feels uncomfortable or upset. Participants will be encouraged to tell the researcher and the interview can be stopped and put on hold. There will also be regular breaks and the research will proceed at the pace of each participant. An adult companion (i.e. that [enter name of participant] and you feel is suitable) will also be accompanying him/her during the interviews to offer ongoing support if you wish. If, after the interviews [enter name of participant] wants more support, this can be arranged.

What are the possible benefits of taking part?

It is intended that the results from this work will be disseminated amongst professionals (e.g. social workers and clinical psychologists) in order to generate a greater understanding of the needs of adopted children, young people and their families in order to improve the support that services (e.g. social care) can offer.

Is taking part confidential?

Confidentiality means that things [enter name of participant] discusses with the researcher are kept private and nobody except [enter name of participant] and the researchers would know what has been said. This research **does not** offer confidentiality because we would like to share some quotes from interviews in order to help us tell [enter name of participant] story. However, all the information collected during this research will be **anonymous**. This means that no one apart from the researcher will be able to identify [enter name of participant]. For example, all names will be changed.

There are certain times when the researchers cannot offer confidentiality or anonymity:

- [enter name of participant] reports something that leads the researcher to believe that your client or somebody else is at significant risk
- [enter name of participant] reports criminal activity or criminal intentions.

In these situations the researcher has to act in order to make sure of [enter name of participant] safety and the safety of others. Before acting the researcher will inform him/her of their concerns and there will be opportunity to talk about it.

How will data be recorded and stored?

The researchers will audio-record the interviews that take place in this project which will then be typed up by either the researcher or a professional agency. No other use of the recordings will be made without your written permission, and no one outside of the project will be allowed to access the original recordings. Audio recordings will be stored on an encrypted USB pen drive and password protected computer. Transcripts will be held in a secure location at the University of Leeds for two years after completion of this study, which is in accordance with University of Leeds protocol.

What will happen to the results of the research project?

The researchers aim to publish the results in academic ways in 2013. Quotes from interviews will be used in publications so that we can tell your client's story and justify results. All quotes will be anonymous.

Contact for further information

If you have any questions or concerns regarding this research project please do not hesitate to get in touch:

Sarah Collinge
Psychologist in Clinical Training

Doctorate in Clinical Psychology Programme
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University of Leeds
101 Clarendon Road
Leeds
LS2 9LJ

Umsec@leeds.ac.uk

Thank you for taking the time to read this information sheet

Consent Form



Title of Research Project: **The Experience of Adoption Disruption**

Name of Researcher: Sarah Collinge, Dr. Siobhan Hugh-Jones, Dr. Ruth Goldwyn

1. I have read and understand the information sheet which explains the research project "The experience of Adoption of Disruption".
2. I have had opportunity to ask questions about the project.
3. I understand that my participation is voluntary and that I can withdraw at any time without giving any reason and without any negative consequences.
4. I understand that my answers will be anonymous and I will not be identifiable in the report(s) that result from the research.
5. I understand that my responses are not confidential as anonymous quotes will be used in the final report.
6. I give permission for members of the research team to have access to my anonymous responses.
7. I agree for the data collected from me to be used in future research.
8. I agree to take part in the above research project and will inform the principal investigator should my contact details change.

_____	_____	_____
Participant name (or legal representative)	Date	Signature

_____	_____	_____
Name of person taking consent (if different from lead researcher)	Date	Signature

_____	_____	_____
Lead researcher	Date	Signature

To be signed and dated in presence of the participant

Parent Consent Form



Title of Research Project: The Experience of Adoption Disruption

Name of Researcher: Sarah Collinge, Dr. Siobhan Hugh-Jones, Dr. Ruth Goldwyn

1. I have read and understand the information sheet which explains the research project "The experience of Adoption of Disruption".
2. I have had opportunity to ask questions about the project.
3. I understand that my child's participation is voluntary and that they can withdraw at any time without giving any reason and without any negative consequences.
4. I understand that my child's answers will be anonymous and that they will not be identifiable in the report(s) that result from the research
5. I understand that my child's responses are not confidential as anonymous quotes will be used in the final report.
6. I give permission for members of the research team to have access to my child's anonymous responses.
7. I agree for the data collected from my child to be used in future research.
8. I agree for my child to take part in the above research project and will inform the principal investigator should my contact details change.

Name of parent/guardian Date Signature

Name of person taking consent
(if different from lead researcher) Date Signature

Lead researcher Date Signature

Social Worker Consent Form



Title of Research Project: The Experience of Adoption Disruption

Name of Researcher: Sarah Collinge, Dr. Siobhan Hugh-Jones, Dr. Ruth Goldwyn

- | | |
|---|--------------------------|
| 1. I have read and understand the information sheet which explains the research project "The experience of Adoption of Disruption". | <input type="checkbox"/> |
| 2. I have had opportunity to ask questions about the project. | <input type="checkbox"/> |
| 3. I understand that my client's participation is voluntary and that they can withdraw at any time without giving any reason and without any negative consequences. | <input type="checkbox"/> |
| 4. I understand that my client's answers will be anonymous and they will not be identifiable in the report(s) that result from the research. | <input type="checkbox"/> |
| 5. I understand that my client's responses are not confidential as anonymous quotes will be used in the final report. | <input type="checkbox"/> |
| 6. I give permission for members of the research team to have access to my client's anonymous responses. | <input type="checkbox"/> |
| 7. I agree for the data collected from my client to be used in future research. | <input type="checkbox"/> |
| 8. I agree for my client to take part in the above research project and will inform the principal investigator should my contact details change. | <input type="checkbox"/> |

_____	_____	_____
Name of social worker	Date	Signature

_____	_____	_____
Lead researcher	Date	Signature

Timeline Protocol: Participant led interview outline

Confirming consent

When we first spoke about whether you would like to participate in this research I asked you to sign a consent form to show that you understood the aim of the research and what you would be asked to do. It also meant that you understood your rights as a participant, so for example you have the right to stop being part of this research if you wish to do so. You were invited to take part in this research because you are no longer living with your adoptive family and the first activity is interested in finding out about events in your life related to adoption that you think are influential and important. Do you have any questions before we start today?"

Introduction

"The aim today is to create a timeline (*on this piece of paper using words and drawings – point out paper and various drawing/writing tools*) that shows events related to your adoption that have shaped your life and influenced the person that you are. These events can be anything; I'd really like to find out and listen to you talk about what is important to you and why. I would then like us to spend some time thinking about what you think will happen next in your life and what you would like to do.

"The experiences that you choose to write down, draw or talk about are really important as they reflect you and your thoughts, feelings and experiences. I will ask you some questions to help me understand what you're talking about and why it is important to you.

Looking Back

"I'd like us to start in the middle of this line. This represents you now, today. I would like you to think about your adoption. I would like you think of specific events and experiences related to your adoption that you think are important or which have influenced your life and where you are now. You can put them down on this spare paper if that helps. Then I would like you to plot them in order on this graph. Then we will talk in more detail about them so I understand your experiences. You do not have to show me your list, if you do not want to.

Probe questions These are intended to be generic probe questions that will be used where appropriate with each event recalled and discussed. If participants are eloquent and do not require prompts the researcher will remain silent.

To try to establish details of the event

When was that? How old were you? Who was there? Tell me more about that...

What do you remember about that day?

Does that matter to you? Why?

Why is that important to you?
How did that feel?
How does it feel talking about this now?

Importance of the experience (meaning-making):

Why is that experience important to you?
What makes that event so memorable for you?
How did that feel?
What did you learn from this experience?
• (About yourself/other people *enter name*)
What does that mean to you? (I.e. is it important/meaningless/
straightforward/comforting)

Does that matter to you? Why?

Inter-personal aspects of the experience:

How did X (enter relevant person) respond?
What did you think about that?

How did that feel?

What was your relationship like after that?

Looking Forwards

“Now we will return to the centre of the timeline and look forwards into the future. What sort of things would you like to achieve/do you think will happen in your future? You can write down as many things as you like and that can be as near or far away as you want. We will then discuss the things you have written about much like we did just now.

Describe X (e.g. having children/going to school/getting a job)

How come you have put this down?

What does that mean to you?

Why is that important to you?

How does it feel talking about this now?

Photo-production Script

“At our last meeting I gave you a camera to take photographs that would help somebody else to understand your adoption and your adoptive placement ending. You took (*enter number*) photographs. I have also brought along the timeline that you completed the last time we met, you may find it useful to have this here and you can add to it if you wish.

“First of all I would like you to put the photographs in order. The order can be anything you want.

Tell me about the [first/second...last] photograph

- What do you want me to understand from this photograph?
- What does this tell me about your adoption/adoption ending?
- How come you took this picture?
- What does it mean to you that...[enter as relevant]
- Does that matter? Why?

Which photograph is most important to you?

- Why?

Which photograph is least important to you?

- Why?
- How come you still chose to photograph it?

How does it feel looking at these photographs?

- What was it like taking the photographs?

Was there anything that you couldn't photograph?

- Tell me more about that
- How come you couldn't photograph that?
- What would the photograph have represented about your adoption?

In the event that people are in the photographs

- Who is in this photograph?
- How do you get on with them?
- Give me an example of [enter as relevant]?
- How would they describe you? What do you think about that?

Appendix 6. Example of analysis

The following is an example of the mapping that took place for Caitlin when each transcript had been read several times and themes were beginning to emerge. This process took place for each participant.

