Adoptive Parent Attitudes Towards Children With Disabilities

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Abstract

Adoption and child service agencies are overwhelmed with available children, and those with disabilities make up a disproportionate percentage. This non-random pilot study investigated attitudes about the adoption of children with disabilities by surveying 15 parents who had previously adopted a child without a disability. It was hypothesized that adoptive parents would feel the benefits of raising a child with a disability were not worth the emotional, physical, and financial costs. Survey data was statistically analyzed using frequencies, mean comparisons, and a reliability analysis. Results indicated that adoptive parents did feel those benefits were worth the increased costs. Though literature on the topic is sparse, special needs and disabilities were found to be strong factors in adoptive parents’ decisions to adopt. Implications for practitioners and future researchers are that education and research needs to be continued in order to serve this overrepresented and underserved group of children.
“Adoption is not about finding children for families; it's about finding families for children” (Sclafani, 2004, p. 191). This quote echoes the opinion of many professionals who work with children and adoption. According to the Administration for Children & Families (ACF) branch of the United States Department of Health & Human Services (2008), the number of children in foster care placement has declined in the past five years while adoption rates have remained constant, showing signs of hope that families for children are indeed being found. However, the ACF study also notes that adoption rates are not nearly adequate to provide for all children. In 2007, there were 51,000 adoptions in contrast to 496,000 children in foster care, a rate of 10.3%. Many studies also show that roughly one-third of all children in foster care have some form of a disability, be it mental or physical. What are the attitudes of society regarding the adoption of children with disabilities, specifically among adoptive parents of children without disabilities? The authors reviewed current literature to view issues regarding the adoption of children with disabilities and determine any stigma that exist. Adoptive parents of children without disabilities were then surveyed to determine their beliefs and attitudes toward children with disabilities that affected or may affect in the future their adoption of a child with a disability.

**Literature Review**

The main focus of the literature review was the general issue of the adoption of children with disabilities. An absence of contemporary research was noted, as an adequate amount of research from the past ten years was not available. As a result, research from the last fifteen to twenty years was necessary. Also, research emanating from the United States, although present, was not sufficient to provide an adequate background for this subject. Because of this, a study from Canada was included in the review. The breadth of the research focused on the rates of
special-needs adoption and problems that have been found in the adoption process when children with disabilities are the focus.

Egbert and LaMont (2004) examined different factors related to how prepared parents were for adopting a child with special needs. They state that nationally, one in five special needs adoption ends up not being permanent and the child faces yet another placement. Through their research, Egbert and LaMont found that certain factors such as a child’s behavioral history, potential parents’ experience with children and the level of support from the adoption agency all affect an adoptive parent’s preparedness for adopting a child with special needs.

Rosenthal et al. (1991) looked most notably at the outcomes for children with handicaps relating to impact on the family, parent/child relationship, and perceptions of services and supports system through 799 surveys. One hundred sixty three of the returned surveys were from parents who adopted children with handicaps (vision, hearing, or physical impairments, mental retardation, or serious medical conditions). The results showed that there was no difference between the two groups and the impact of the child’s handicap on the family. Likewise, there was no significant difference in parent/child relationships between those families with children with handicaps and those families without. Finally, the results showed that parents of children with handicaps rated services available to them less helpful than those parents of children without handicaps.

Westhues and Cohen (1990) found two characteristics relating to the disruption of special needs adoption. They found that families with disrupted adoptions had less positive family functioning and that the father plays an important role in maintaining that placement. Westhues and Cohen also found preliminary results of variables that help predict whether families will be able to sustain the adoption or if it will be disrupted. These variables are gender-related, noting
that men showed differences on affective involvement and expression and women showed
differences regarding values and norms. Three demographic variables pertaining to a couple’s
reason to adopt (number of years married, occupation of the husband, and history of
miscarriages) were found to play a role in predicting if a family would have a sustainable or
disrupted adoption. 

Wimmer and Richardson (1990) focused on studying the need for specialized programs
for adoption of children with disabilities. The results of their research showed that through
specialized training and recruitment of both workers and potential families, all children
examined in this study were adopted to families. The families that adopted these children went
through a detailed process that included an intake interview, orientation session, and a home visit
to ensure that the placements would be to safe, caring homes. Wimmer and Richardson also
documented obstacles that the adoptions faced both from a program standpoint and from an
executive standpoint.

Overall, this topic is lacking in current research. Earlier research shows adoption
outcomes for children with disabilities to be positive and also shows certain factors that affect
the adoptions of these children. The authors hope to narrow the gap in the research and focus on
the attitudes of parents who have previously adopted children without disabilities. With this
research, the authors hope that professionals in the field of adoption will address these attitudes
toward adopting children with disabilities to open people’s minds regarding this topic.

**Theoretical Framework**

This research study was influenced and informed by Social Exchange theory (Strong,
DeVault, & Cohen, 2005), which posits that social relationships are formed with individuals
acting in their own best interest to gain benefits from the relationship. It also asserts that
individuals will only enter and maintain relationships as long as the costs to them are worth the benefits they are receiving.

The Social Exchange theory would predict that the costs of raising a child without disabilities differ from the costs of raising a child with a disability, which can affect potential adoptive parents’ attitudes. This theory also predicts that adoptive parents of children without disabilities will have attitudes regarding the adoption of children with disabilities that imply that the workload and costs of raising a child with a disability is far higher than raising a child without a disability.

**Purpose Statement**

The purpose of this study was to view the attitudes that adoptive parents of children without disabilities hold towards adopting a child with a disability. The sample population for this study was taken from a small Midwestern adoption agency. The authors’ primary target for the results of this study are adoption agencies and it is our hope that this information can be utilized to create programs to assist adoptive parents in understanding the reality of adopting children with disabilities in contrast to myths and perceptions. The authors also hoped that this research would benefit those working with adoptions to help them better understand some of the reasons why couples choose not to adopt children with disabilities. The central research question in this study was, “What are the attitudes regarding adoption of children with disabilities amongst adoptive parents without children with disabilities?” The authors hypothesized that the adoptive parent perspective would be that they do not have the various resources available to them to support a child with a disability. This prediction was based upon the Social Exchange theory, which suggests that the various costs of adopting a child with a disability are not worth the benefits.
Method

Participants

The site of this study was a Midwestern adoption agency. Participants were N = 15 parents who have previously adopted a child without a disability. Of the 15 respondents, seven were male, six were female, and two declined a gender label. One parent was between the ages of 26 and 34, five were between the ages of 35 and 43, three were between the ages of 44 and 52, and six were above the age of 53. Two of the survey participants reported personal incomes of less than $20,000, two reported incomes of $21,000-$30,000, one reported an income of $31,000-$40,000, four reported an income of $41,000-$50,000, two reported incomes of $51,000-$60,000; and four reported incomes of $80,000 or above.

Research Design

The purpose of this survey research was to be able to generalize to a similar, larger population so that some inferences could be made about characteristics, attitudes, or behaviors of that population (Babbie, 1990). From our sample population we wanted to identify current attitudes so that we could generalize the data around a larger population of similar adoptive parents in the Midwestern area. The survey design type is best described as a cross-sectional study design in that it was used to capture knowledge, or attitudes, from a cross section of the population at one point in time. The data collection was done through mailed surveys. The rationale for using this method was that it was the most efficient method to gather the data from adoptive parents in the Midwestern area due to the fact that we could not see any identifying information. Our population was adoptive parents of the adoption agency, our sample was mothers and fathers who have previously adopted children without a disability. For this study, a disability was defined as “a physical or mental impairment that substantially limits one or more
of the major life activities of such individuals, a record of such an impairment, or being regarded as having such an impairment” (Orlin, 1995). The study used a non-random sample utilizing purposive and snowball sampling as the purpose was to gather information directly from the adoptive parents in regards to their experiences and opinions. The ethical protection of human subjects was provided by completing the Human Subjects Institutional Review Board (IRB) training; our study has been approved by the IRB.

Data Collection Instrument

A survey was designed in order to assess the attitudes of adoptive parents regarding the adoption of a child with a disability. The survey included a cover letter with an implied consent which included a description of the study, definition of any terms not commonly known, risks and benefits, time commitment, confidentiality, voluntary participation, and contact information of the research team and the supervisor as well as instructions for completing the survey. Along with two surveys in each mailed packet (one for each parent) there was a disclosure statement that included the time sensitivity of the research project and addressed that participation in the survey would not affect any services received through the Midwestern adoption agency or through the State. Participants were also encouraged to read and detach the implied consent statement for their own records.

The survey consisted of three demographic questions relating to gender, age, and yearly income. Survey participants were given six closed-ended statements based on a 5-point Likert scale. The Likert scale measured the range of the participants attitudes from one (strongly disagree) to five (strongly agree). Questions were informed by our literature and theory regarding what factors relate to the adoption of a child with a disability.
The survey instrument has both face validity and content validity. The instrument has face validity in that the questions posed are logical to the subject of the research and the question at hand. These questions were influenced by the absence of research literature on the topic of the adoption of children with disabilities, implying that such an instrument would be beneficial to furthering analysis of the subject. This instrument shows content validity by exploring all facets of the attitudes regarding this specialized adoption. These facets include financial, emotional, and knowledge-based investigation. To increase validity, the survey was piloted to two peers of one of the researchers. The feedback from the piloted surveys showed that the survey was understood and ready for distribution.

Procedure

The data collection for this study was done through mailed surveys to potential participants. Surveys were sent out on October 27th, 2008 with an anticipated return of November 8th, 2008. We first contacted the adoption agency because of our purposive sample and the need to contact adoptive parents. After contacting the adoption agency, we set up a meeting with the program supervisor of Special Needs adoptions and explained that we needed surveys to be sent out to parents who adopted a child without a disability. The supervisor agreed to collaborate with us on this project and came up with 50 families for potential participants. Since we had an inaccessible population, we did not attempt to randomize our sample. Due to confidentiality we were unable to self-administer the surveys and as a result, they were sent through the mail. In each mailing there were two surveys along with the implied consent and the disclosure statement. The envelopes were prepared with return envelopes stamped and addressed to be returned to the adoption agency. Thirty seven prepared envelopes were actually sent out by the agency supervisor. For confidentiality reasons the surveys were taken out of the envelopes,
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scanned for any identifying information, and kept in a locked office at the adoption agency. The surveys were picked up from the agency on November 11th, 2008 for data analysis.

Data Analysis Plan

The surveys were analyzed and checked for any missing data. Due to missing information, three surveys were excluded from further analysis, leaving fifteen complete surveys. The completed surveys were then coded using acronyms for each variable. The first three questions on the survey were demographic variables: gender, age, and yearly income. Each survey statement was a dependent variable and given an acronym name: if parents felt they had the health coverage available to raise a child with a disability (HCV), if they had sufficient support of a partner (PSP), if they had the financial resources necessary (FNR), if they were aware of the costs and benefits of raising a child with a disability (CBB), if they had the knowledge and ability to access support resources (SPR), and if they had adequate knowledge of disabilities (DKN). To analyze the data, the computer program Statistical Package for the Social Sciences (SPSS) was used. The individual was used as our level of analysis. As no comparisons were made between groups, our data analysis included frequencies, mean comparisons, and a reliability analysis based on Chronbach’s alpha. Significance testing was not performed due to the small and nonrandom pilot study sample.

Results

All of our variables were subjected to frequency distribution analysis. Results indicated that there was no missing data. For variables \(DKN\) and \(CBB\), the majority of respondents agreed and/or strongly agreed that they had adequate knowledge of disabilities and were aware of the costs and benefits of raising a child with a disability. For the variables \(PSP\) and \(SPR\), respondents agreed and/or strongly agreed that they had sufficient support of a partner and had
the knowledge and ability to access support resources. For the variables \(FNR\) and \(HCV\), the respondents agreed and/or strongly agreed that they had the financial resources and health coverage available to raise a child with a disability.

**Table 1**

*Frequency Distribution of Survey Items*

<table>
<thead>
<tr>
<th>Survey Item</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Undecided</th>
<th>Agree</th>
<th>Strongly Agree</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>DKN: I feel knowledgeable about the added factors in raising a child with a disability</em></td>
<td>0.0%</td>
<td>0.0%</td>
<td>26.7%</td>
<td>46.7%</td>
<td>26.7%</td>
<td>100.0%</td>
</tr>
<tr>
<td><em>PSP: I have the active support of a partner necessary</em></td>
<td>0.0%</td>
<td>6.7%</td>
<td>6.7%</td>
<td>20.7%</td>
<td>66.7%</td>
<td>100.0%</td>
</tr>
<tr>
<td><em>FNR: I have the financial resources necessary</em></td>
<td>0.0%</td>
<td>0.0%</td>
<td>26.70%</td>
<td>33.3%</td>
<td>40.0%</td>
<td>100.0%</td>
</tr>
<tr>
<td><em>HCV: I have the comprehensive health coverage necessary</em></td>
<td>0.0%</td>
<td>0.0%</td>
<td>20.0%</td>
<td>20.0%</td>
<td>60.0%</td>
<td>100.0%</td>
</tr>
<tr>
<td><em>SPR: I have the support resources necessary</em></td>
<td>0.0%</td>
<td>0.0%</td>
<td>13.3%</td>
<td>13.3%</td>
<td>73.3%</td>
<td>100.0%</td>
</tr>
<tr>
<td><em>CBB: The benefits of raising a child with a disability outweigh the costs and risks involved</em></td>
<td>0.0%</td>
<td>0.0%</td>
<td>30.0%</td>
<td>33.3%</td>
<td>46.7%</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

**Table 2**

*Descriptive Statistics of Survey Items*
<table>
<thead>
<tr>
<th>Survey Item</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>DKN: I feel knowledgeable about the added factors in raising a child with a disability</td>
<td>4.00</td>
<td>0.76</td>
<td>2.0</td>
</tr>
<tr>
<td>PSP: I have the active support of a partner necessary</td>
<td>4.47</td>
<td>0.92</td>
<td>3.0</td>
</tr>
<tr>
<td>FNR: I have the financial resources necessary</td>
<td>4.13</td>
<td>0.83</td>
<td>2.0</td>
</tr>
<tr>
<td>HCV: I have the comprehensive health coverage necessary</td>
<td>4.40</td>
<td>0.83</td>
<td>2.0</td>
</tr>
<tr>
<td>SPR: I have the support resources necessary</td>
<td>4.60</td>
<td>0.74</td>
<td>2.0</td>
</tr>
<tr>
<td>CBB: The benefits of raising a child with a disability outweigh the costs and risks involved</td>
<td>4.27</td>
<td>0.80</td>
<td>2.0</td>
</tr>
</tbody>
</table>

A reliability analysis was run to indicate if our six dependent variables (DKN, PSP, FNR, HCV, SPR, CBB) were a reliable index to measure our major concept, attitudes towards adopting a child with a disability. Cronbach’s Alpha is a measure of reliability and in our analysis the Alpha was 0.829. This value indicated that our survey questions were a reliable measure of our major concept. We received qualitative comments at the end of a number of our surveys. These comments will be analyzed and themes determined in our discussion section.
Discussion

Our results suggested that adoptive parents perceived that they do have the various resources to support a child with a disability, which was contrary to our hypothesis. One possible explanation for these results is that our sample was taken from parents who had previously adopted, so they may have been more accepting and ready because the adoption process was not new to them even though their previously adopted child did not have a disability. Another possible reason for this contrast is that these parents may have looked into adopting a child with a disability when they first adopted a child, a factor that was not considered when formulating the hypothesis. Each dependent variable will be discussed in relation to our literature and/or theoretical framework. Then we will address limitations to the study, implications for practitioners, implications for future research, and concluding comments.

Our respondents reported that they felt knowledgeable about the added factors that are included in raising a child with a disability. This is supported through our literature that shows through specialized training of workers and potential families, children are adopted to competent families (Wimmer & Richardson, 1990). This is also supported through our literature from Egbert and LaMont (2004) which found specific factors that related to how prepared parents are for adopting a child with special needs. The majority of responses from our participants agreed they would have the active support of a partner. This is supported in our literature by Westheus and Cohen (1990) who found that an adoption of a special needs child will have a lower chance of being disrupted when the father is there to play an active role in the family. Our results showed that respondents felt they would have the financial resources and support resources necessary to properly care for a child with a disability, which is contrary to our literature that adoptive parents of children with a handicap rated services less helpful to them and also showed that support from
the adoption agency played a factor in how prepared parents were to adopt a child with special needs (Rosenthal et al., 1991; Egbert & LaMont, 2004). Our respondents felt they had adequate healthcare coverage to support a child with a disability. Various studies have found that over 90% of families caring for a child with special needs experience an added financial burden, and that many of them find it necessary to access resources such as Medicaid and the State Children’s Health Insurance Program (SCHIP) (Shattuck, 2008).

The Social Exchange theory suggests that individuals will only enter into and maintain a relationship when the benefits of that relationship outweigh the costs to them (Strong et al., 2005). According to this theory, we predicted that adoptive parents would view the adoption of a child with a disability to have costs that outweigh the benefits, but our last survey statement (which addressed the benefits of raising a child with a disability outweighing the costs and risks) showed the majority of our respondents disagreed with our prediction. We can then see through the Social Exchange theory that the adoptive parents viewed the adoption of a child with a disability to have benefits that would outweigh the costs.

Limitations

One limitation of our research is that we had a small sample size to compare to the larger population of adoptive parents. A second limitation is that there was no significance testing due to a small, nonrandom pilot sample size. We were unable to randomize our sample due to our inaccessible population and the time constraints of the study.

Implications for Practitioners

Our results suggest adoptive parents do perceive that they would have the resources to adopt a child with a disability, so we then must ask ourselves why the numbers are lower for adoptions of children with a disability. We feel this information will be useful for practitioners
working with adoptions by giving them the knowledge that people feel ready to adopt a child with a disability but maybe need that extra confidence to do so. These results also implied that practitioners may be able to better serve their clientele by gaining their own education and experience on the subject of children with disabilities. This information would be beneficial to use in informational meetings dealing with adoption and as information for parents who are looking to adopt. Using this information to help potential parents to understand the reality of adopting a child with a disability in contrast to the perceptions that some may hold would be helpful in efforts to limit disruptions and keep placements permanent.

**Implications for Future Research**

For future research we recommend use of a larger, random sample to generalize the results to adoptive parents regarding the adoption of a child with a disability. From our research we can see the data supports that adoptive parents perceive they do have enough resources to adopt a child with a disability. Therefore, future research focusing on reasons why adults in our society choose not to adopt a child with disabilities would be appropriate. It should be noted that the sample population for this study was parents who have already adopted a child, and future research that includes potential parents in the sample would be beneficial.

Additionally, future research would be improved by conducting a qualitative study with open-ended questions in order to accurately obtain specific information on adoptive parents’ attitudes and their reasoning behind said attitudes. Two respondents provided additional comments regarding ways that the questions could be clarified for future research. One response noted that delineation should be made regarding whether potential parents had these opinions prior to the adoption of their child or after getting information during the adoption phase, while
the other noted that the type of disability that is referred to in the survey may affect the responses.

Conclusion

We, as researchers acknowledge that this study may provide little impact in the field in the view of other professionals. However, our hope is that the gap in research on adoption of children with disabilities will be recognized and more research on all aspects of this topic can be addressed. We also hope that practitioners can use these results to help give adoptive parents the extra knowledge they may need to turn their minds from feeling that they have the knowledge and resources to adopt a child with a disability to actually taking the step in doing so. As more practitioners and researchers recognize and learn about this underserved population, rates of the adoption of children with disabilities may slowly become more comparable to the adoption rates of children without a disability.
References


